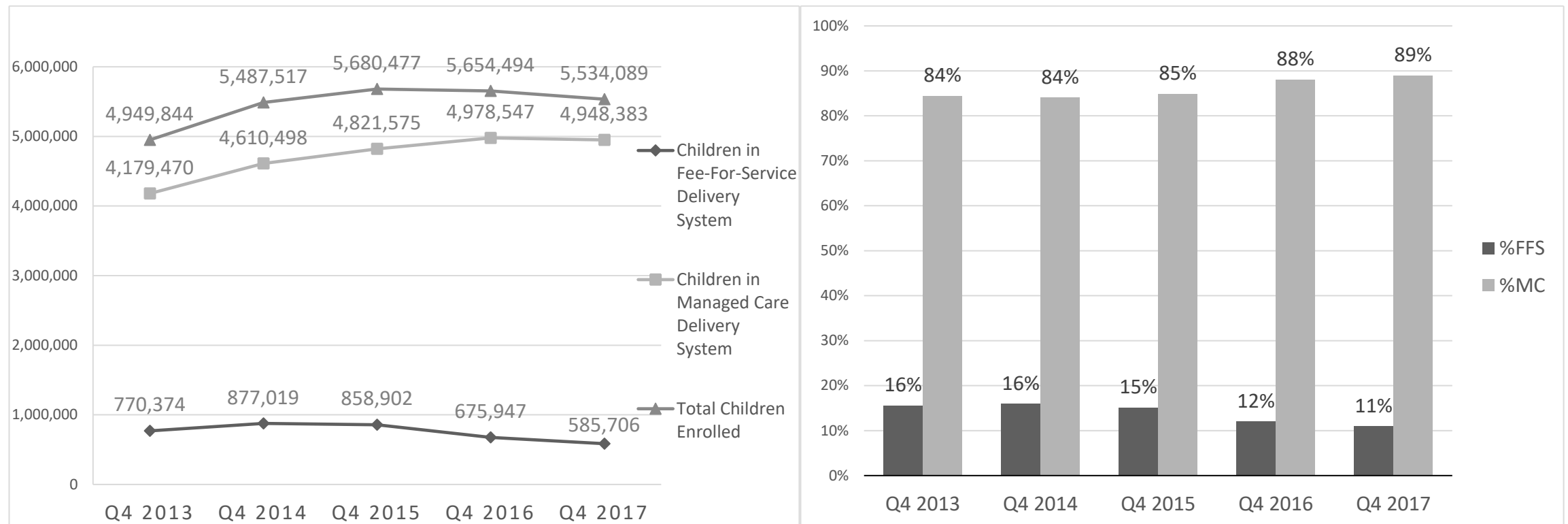


## California Department of Health Care Services - Medi-Cal Children's Health Dashboard (June 2018)

**Goal:** This dashboard provides an overview of children's health and demographic measures for children enrolled in Medi-Cal, California's Medicaid program. Key features of this document include a broad range of measures across physical health, mental health, managed care, and key demographics, as well as updated overall enrollment data. This document was developed in partnership with the Medi-Cal Children's Health Advisory Panel (MCHAP) and other stakeholders.

**Figure 1 and 2: Enrollment and Delivery System Trends for Children in Medi-Cal (updated quarterly).** Figure 1 shows total enrollment and enrollment by delivery system for children age 0-20 in Medi-Cal. Figure 2 is a breakdown of the percentage of children enrolled in fee-for-service (FFS) and the percentage of children enrolled in a Medi-Cal Managed Care Plan (MC).

Figure 1 & 2 Notes: Data compiled based on eligibility and enrollment data in Medi-Cal Eligibility Data System (MEDS), reflecting reported totals through December 2017. Data compiled as of June 2018. Figures represent information from last month of each quarter (i.e. Q4 2016 is December 2016 data).



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**Figure 3: Written Language of Family for Children Enrolled in Medi-Cal, age 0-20, as of December 2017 (updated quarterly):**

Date	Totals	English	Spanish	Other Non-English or Spanish	English	Spanish	Other Non-English or Spanish
Dec 2015	5,487,517	3,269,717	1,970,102	247,698	59.48%	35.97%	4.55%
Dec 2016	5,654,494	3,415,124	1,985,256	254,114	60.40%	35.11%	4.49%
Dec 2017	5,534,089	3,380,279	1,910,245	243,565	6.10%	34.51%	4.40%

**Figure 4: Race/Ethnicity of Children Enrolled in Medi-Cal, Age 0-20 from December 2015 – December 2017 (updated quarterly):**

Ethnicity	Dec 2015		Dec 2016		Dec 2017	
	Count	Percentage	Count	Percentage	Count	Percentage
American Indian/ Alaska Native	19,450	0.34%	19,094	0.34%	18,521	0.34%
Asian	486,825	8.57%	398,812	7.04%	373,874	6.76%
Black or African American	403,454	7.10%	396,852	7.00%	385,848	6.97%
Hispanic	3,295,416	58.01%	3,382,724	59.69%	3,311,104	59.83%
White	859,595	15.13%	814,728	14.38%	773,528	13.98%
Not Reported	615,737	10.84%	654,978	11.56%	671,214	12.13%
<b>Total</b>	<b>5,680,477</b>	<b>100.00%</b>	<b>5,667,188</b>	<b>100.00%</b>	<b>5,534,089</b>	<b>100.00%</b>

Figures 3 and 4 Notes: Data compiled based on eligibility and enrollment data in MEDS, as of November, 2017, with updated counts through November 2017.

Additional Data on Medi-Cal Populations is available [on the DHCS website](#)

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**Figure 5: Multi-Year Statewide Medi-Cal Managed Care Weighted Average Performance Measure Results for Full-Scope Managed Care Health Plans.**

Measure	2014 Rate	2015 Rate	2016 Rate	2017 Rate	2016-17 Rate Difference
Childhood Immunization Status—Combination 3	75.07%	73.84%	70.59%	70.70%	0.11
Children and Adolescents' Access to Primary Care Practitioners—12–24 Months	95.25%	93.54%	92.40%	93.14%	0.74
Children and Adolescents' Access to Primary Care Practitioners—25 Months–6 Years	86.27%	85.39%	84.20%	83.92%	-0.28
Children and Adolescents' Access to Primary Care Practitioners—7–11 Years	86.08%	87.24%	87.21%	86.29%	-0.92
Children and Adolescents' Access to Primary Care Practitioners—12–19 Years	82.90%	84.19%	84.56%	83.50%	-1.06
Immunizations for Adolescents—Combination 2	--	--	--	26.89%**	Not Comparable
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents— BMI Percentile—Total***	71.17%	77.47%	78.39%	--	--
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents— Counseling for Nutrition—Total	71.37%	73.42%	73.43%	76.48%	3.05
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents— Counseling for Physical Activity—Total	59.53%	63.64%	64.57%	68.79%	4.22
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	73.29%	72.78%	71.30%	73.90%	2.60

-Data Source: [Medi-Cal Managed Care External Quality Review Technical Report: July 1, 2016-June 30, 2017.](#)

-Rates reflect Measure Year (MY) data from January 1 through December 31 of each reported year.

-Performance comparisons are based on the Chi-square test of statistical significance with a *p* value of <0.05.

-Additional Data on Medi-Cal Managed Care – Quality Improvement & Performance Measurement Reports is available [on the DHCS website.](#)

- \*\* Note that in RY 2017 DHCS replaced Immunizations for Adolescents—Combination 1 with the *Immunizations for Adolescents—Combination 2* measure; therefore, no data is available prior to 2017.

\*\*\* This measure is no longer being reported in the Medi-Cal Managed Care External Quality Review Technical Report; therefore no data is available from 2017

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**Figure 6: Dental Care in the Dental Managed Care (DMC) Delivery System – Calendar Years (CY) 2013 through 2016.** Data Source: DHCS [Dental Data Reports](#).

<b>Annual Dental Visits</b>	<b>DMC**</b>	<b>CY 2014</b>		<b>CY 2015</b>		<b>CY 2016</b>		<b>SFY 16-17***</b>	
<b>Percentage of beneficiaries who had at least one (1) dental visit during the measurement year.</b> <b>Numerator:</b> Number of beneficiaries with at least 90 days continuous enrollment in the same plan within the measurement year who received any dental procedure (D0100-D9999) or dental encounter at a Safety Net Clinic (SNC) (e.g., Federally Qualified Health Centers (FQHCs); Rural Health Clinics (RHCs); and Indian Health Services/Memorandum of Agreement Clinics (community health centers)) during the period. <b>Denominator:</b> Number of beneficiaries with at least 90 days continuous enrollment in the same plan within the measurement year.	<b>Age Group</b>	<b>0-20</b>		<b>0-20</b>		<b>0-20</b>		<b>0-20</b>	
	<b>Numerator</b>	205,730		202,685		191,180		189,760	
	<b>Denominator</b>	555,019		515,619		491,909		473,676	
	<b>Percentage</b>	37.07%		39.31%		38.9%		40.1%	
<b>Use of Preventive Services</b>	<b>DMC**</b>	<b>CY 2014</b>		<b>CY 2015</b>		<b>CY 2016</b>		<b>SFY 16-17***</b>	
<b>Percentage of beneficiaries who received any preventive dental service during the measurement year.</b> <b>Numerator:</b> Number of beneficiaries with at least 90 days continuous enrollment in the same plan within the measurement year who received any preventive dental service (D1000-D1999) or ICD 10: K023 K0251 K0261 K036 K0500 K0501 K051 K0510 K0511 Z012 Z0120 Z0121 Z293 Z299 Z98810 in the measurement period. <b>Denominator:</b> Number of beneficiaries with at least 90 days continuous enrollment in the same plan within the measurement year.	<b>Age Group</b>	<b>0-20</b>		<b>0-20</b>		<b>0-20</b>		<b>0-20</b>	
	<b>Numerator</b>	168,318		170,186		161,866		161,960	
	<b>Denominator</b>	555,019		515,619		491,909		473,676	
	<b>Percentage</b>	30.33%		33.01%		32.9%		34.2%	
<b>Use of Sealants</b>	<b>DMC**</b>	<b>CY 2014</b>		<b>CY 2015</b>		<b>CY 2016</b>		<b>SFY 16-17***</b>	
<b>Percentage of beneficiaries ages 6-9 and 10-14 who received a dental sealant on at least one permanent molar during the measurement year.</b> <b>Numerator:</b> 1.) Number of beneficiaries ages 6-9 with at least 90 days continuous enrollment in the same plan within the measurement year who received a dental sealant (D1351) on a permanent first molar (tooth number = 3, 14, 19, 30) or a SNC dental encounter with ICD 10: Z98810. 2) Number of beneficiaries ages 10-14 with at least 90 days continuous enrollment in the same plan within the measurement year who received a dental sealant(D1351) on a permanent second molar(tooth number=2,15,18,31) or a SNC dental encounter with ICD 10: Z98810. <b>Denominator:</b> Number of beneficiaries ages 6-9 and 10-14, respectively, with at least 90 days continuous enrollment in the same plan within the measurement year.	<b>Age Group</b>	<b>6-9</b>	<b>10-14</b>	<b>6-9</b>	<b>6-9</b>	<b>6-9</b>	<b>10-14</b>	<b>6-9</b>	<b>10-14</b>
	<b>Numerator</b>	15,289	7,538	15,439	14,453	14,453	7,330	13,749	7,833
	<b>Denominator</b>	118,757	133,138	109,064	97,019	97,019	120,372	91,059	112,655
	<b>Percentage</b>	12.87%	5.66%	14.16%	14.9%	14.9%	6.1%	15.1%	7.0%

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\* CY, 2014, 2015, and 2016 encounter data as of April 17, 2018. CY 2016 data is based on Geographic Managed Care (GMC) CY 2016 Report and Prepaid Health Plans (PHP) CY 2016 Report. SFY 16-17 data is based on GMC SFY 2016-17 Report and PHP SFY 2016-17 Report and does not include complete run-out of claims data

\*\*DMC Plans include GMC and PHP for Access Dental Plan, Health Net Dental Plan and LIBERTY Dental Plan.

\*\*\* The Department of Health Care Services (DHCS) publishes DMC performance measures quarterly on a rolling 12-month basis. This methodology enables the reports to capture data by State Fiscal Year (SFY), Federal Fiscal Year (FFY), and CY. Previously, GMC reports were published annually by CY since 2013 and PHP reports were published by SFY since FY 2013-2014

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**Figure 7: Dental Care in the Fee-For-Service (FFS) Delivery System –2014 through 2017.** Data Source: DHCS [Dental Data Reports](#).

Annual Dental Visits	FFS	CY 2014		CY 2015		CY 2016		SFY 2016-17**	
<b>Percentage of beneficiaries who had at least one (1) dental visit during the measurement year.</b> <b>Numerator:</b> Number of beneficiaries with at least 90 days continuous enrollment in the same plan within the measurement year who received any dental procedure (D0100-D9999) or dental encounter at a Safety Net Clinic (SNC) (e.g., Federally Qualified Health Centers (FQHCs); Rural Health Clinics (RHCs); and Indian Health Services/Memorandum of Agreement Clinics (community health centers)) during the period. <b>Denominator:</b> Number of beneficiaries with at least 90 days continuous enrollment within the measurement year.	<b>Age Group</b>	<b>0-20</b>		<b>0-20</b>		<b>0-20</b>		<b>0-20</b>	
	<b>Numerator</b>	2,283,982		2,387,823		2,504,844		2,544,317	
	<b>Denominator</b>	4,963,815		5,259,228		5,565,312		5,543,939	
	<b>Percentage</b>	46%		45.4%		45%		45.9%	
Use of Preventive Services	FFS	CY 2014		CY 2015		CY 2016		SFY 2016-17**	
<b>Percentage of beneficiaries who received any preventive dental service during the measurement year.</b> <b>Numerator:</b> Number of beneficiaries with at least 90 days continuous enrollment in the same plan within the measurement year who received any preventive dental service (D1000-D1999) or ICD 10: K023 K0251 K0261 K036 K0500 K0501 K051 K0510 K0511 Z012 Z0120 Z0121 Z293 Z299 Z98810 in the measurement period. <b>Denominator:</b> Number of beneficiaries with at least 90 days continuous enrollment within the measurement year.	<b>Age Group</b>	<b>0-20</b>		<b>0-20</b>		<b>0-20</b>		<b>0-20</b>	
	<b>Numerator</b>	1,847,825		1,910,426		2,306,865		2,347,278	
	<b>Denominator</b>	4,963,815		5,259,228		5,565,312		5,543,939	
	<b>Percentage</b>	37.2%		36.3%		41.5%		42.3%	
Use of Sealants	FFS	CY 2014		CY 2015		CY 2016*		SFY 2016-17**	
<b>Percentage of beneficiaries ages 6-9 and 10-14 who received a dental sealant on at least one permanent molar during the measurement period.</b> <b>Numerator:</b> 1.) Number of beneficiaries ages 6-9 with at least 90 days continuous enrollment in the same plan within the measurement year who received a dental sealant (D1351) on a permanent first molar (tooth number = 3, 14, 19, 30) or a SNC dental encounter with ICD 10: Z98810. 2) Number of beneficiaries ages 10-14 with at least 90 days continuous enrollment in the same plan within the measurement year who received a dental sealant(D1351) on a permanent second molar(tooth number=2,15,18,31) or a SNC dental encounter with ICD 10: Z98810. <b>Denominator:</b> Number of beneficiaries ages 6-9 and 10-14, respectively, with at least 90 days continuous enrollment in the same plan within the measurement year.	<b>Age Group</b>	<b>6-9</b>	<b>10-14</b>	<b>6-9</b>	<b>6-9</b>	<b>6-9</b>	<b>10-14</b>	<b>6-9</b>	<b>10-14</b>
	<b>Numerator</b>	187,760	108,595	188,946	200,118	200,118	126,998	198,263	137,999
	<b>Denominator</b>	1,064,939	1,149,666	1,115,783	1,131,928	1,131,928	1,335,876	1,101,072	1,346,381
	<b>Percentage</b>	17.6%	9.4%	16.9%	8.9%	17.4%	9.5%	18.0%	10.2%

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\* CY 2014, 2015, and 2016 data as of April 17, 2018, and SFY 2016-17 data does not include complete run-out of claims data.

\*\* Beginning with 2016 data, the DHCS publishes FFS performance measures quarterly on a rolling 12 month basis. This methodology enables the reports to capture data by SFY, FFY, and CY

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**Figures 8 and 9: Mental Health Utilization Data Rates for Children and Youth (updated annually):** The table describes the number of children and youth under 21 who are receiving Specialty Mental Health Services (SMHS) through county mental health programs, based on approved claims for Medi-Cal eligible beneficiaries. Note that the Unique Count of Medi-Cal Eligibles is the total number of individuals under the age of 21 that were eligible for Medi-Cal in any month of a given state fiscal year, and exceeds the total number of children in Medi-Cal in a given month for that fiscal year.

### Statewide as of March 13, 2018

State Fiscal Year (FY)	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Med-Cal Eligibles	Year-Over-Year Percentage Change
FY 10-11	213,929		4,679,101	
FY 11-12	228,782	6.9%	4,794,740	2.5%
FY 12-13	245,965	7.5%	5,464,324	14.0%
FY 13-14	257,643		6,032,290	
FY 14-15	259,301	0.6%	6,352,757	4.0%
FY 15-16	258,759	-0.2%	6,265,977	3.3%
FY 16-17	259,870	0.4%	6,313,485	0.8%
<b>Compound Annual Growth rate State FY**</b>		<b>0.3%</b>		<b>2.7%</b>

### Regional as of March 22, 2018

Region	Unique Count Receiving SMHS (FY 14-15)	Unique Count Receiving SMHS (FY 15-16)	Unique Count Receiving SMHS (FY 16-17)
Rural (15 counties)	2,824	2,824	5,337
Small (15 counties)	14,071	14,071	19,168
Medium (15 counties)	34,108	34,108	43,550
Large (12 counties)	117,219	117,219	165,475
Very Large (1 county)****	90,272	90,418	92,918

\*\*\*SFY = State Fiscal Year which is July 1 through June 30; Additional Data in the [Mental Health Reports and Measures Catalog](#)

\*\*\*\* Los Angeles County is the 1 "Very Large County" and the data is of March 13, 2018

NOTE: Visits for Non-Specialty Mental Health Services for all ages for all Medi-Cal Beneficiaries are available on the [Medi-Cal Managed Care Dashboard](#).