



CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

## MANAGED CARE PERFORMANCE MONITORING DASHBOARD REPORT

Released September 26, 2018

### *Quarterly Release Notes*

- For metrics displaying one month of data, the phrase "Member Months" has been updated to "Members" to more accurately reflect the analysis at the month level. The Grievance page is the only metric being measured by member months because grievance demographics includes three months of aggregated data.
- Dashboard data is updated quarterly except for Network Adequacy and HEDIS metrics. Latest refresh date: 08/01/2018.
- Network Adequacy data is refreshed monthly. Latest refresh date: 09/01/2018.
- HEDIS data is refreshed annually. Latest refresh date: 09/01/2018.

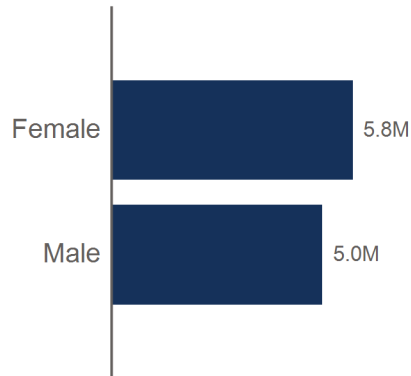
# Managed Care Performance Monitoring Dashboard Report

## Released September 26, 2018

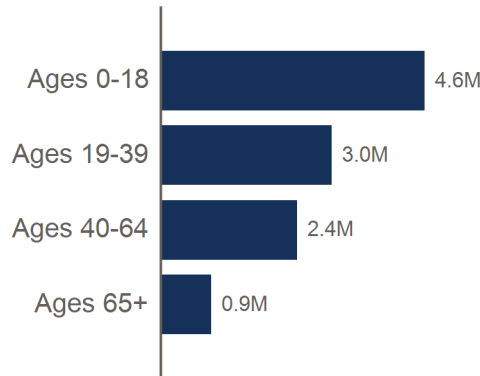


### Managed Care Member Demographics (Mar-18)

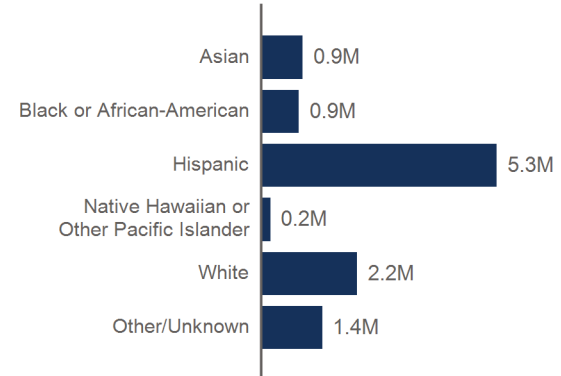
#### By Sex



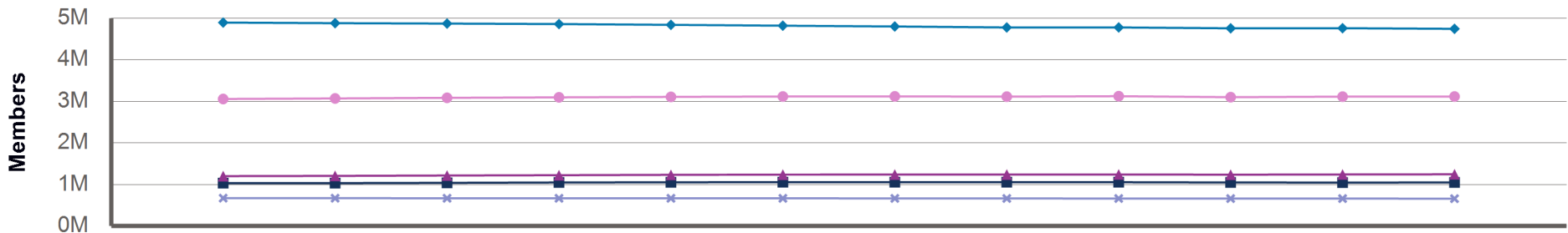
#### By Age



#### By Ethnicity



#### By Population



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Dual	1,032,304	1,033,740	1,039,837	1,048,667	1,053,508	1,055,688	1,056,330	1,054,924	1,055,549	1,048,535	1,047,489	1,048,664
MO-ACA	3,056,265	3,069,268	3,084,576	3,096,181	3,107,009	3,116,056	3,119,115	3,112,696	3,123,640	3,099,814	3,112,693	3,116,049
MO-OTLIC	1,201,687	1,207,539	1,216,873	1,223,888	1,232,665	1,237,922	1,240,035	1,239,600	1,241,498	1,236,598	1,241,770	1,245,342
MO-SPD	672,587	671,053	669,601	668,677	668,160	667,710	666,218	664,824	663,590	661,857	661,738	659,715
MO-Other	4,893,764	4,879,139	4,869,340	4,858,579	4,838,976	4,819,000	4,799,520	4,776,018	4,776,871	4,756,173	4,758,383	4,743,820
MC Total	10,856,607	10,860,739	10,880,227	10,895,992	10,900,318	10,896,376	10,881,218	10,848,062	10,861,148	10,802,977	10,822,073	10,813,590

Source: Enterprise Performance Monitoring System

Note: Data in this dashboard is preliminary and subject to change

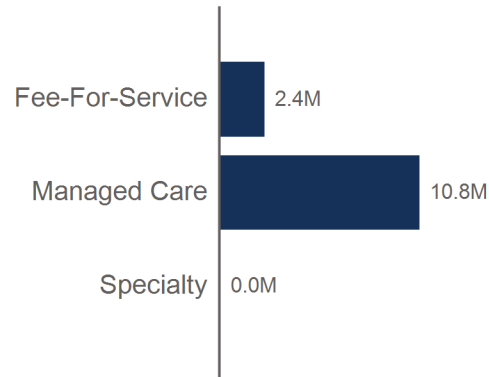
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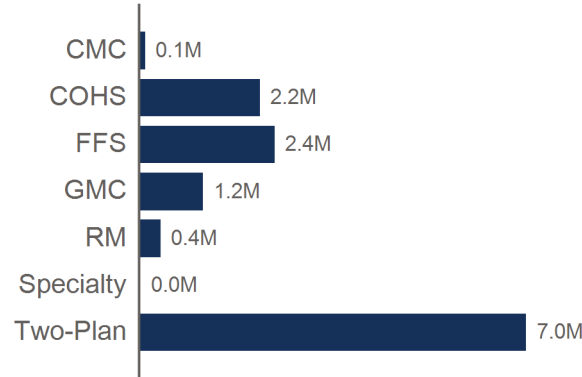


### Medi-Cal Member Demographics (Mar-18)

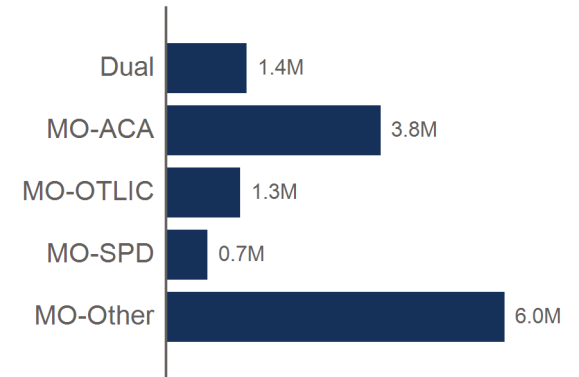
**By Medi-Cal Type**



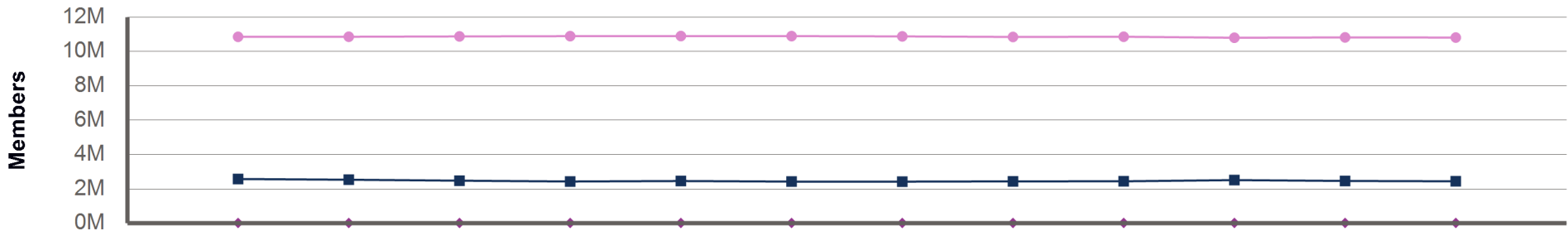
**By Plan Model**



**By Population**



**By Medi-Cal Type**



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Fee-For-Service	2,579,901	2,537,555	2,482,418	2,436,626	2,463,125	2,429,097	2,427,706	2,443,089	2,448,322	2,514,727	2,467,013	2,447,032
Managed Care	10,856,607	10,860,739	10,880,227	10,895,992	10,900,318	10,896,376	10,881,218	10,848,062	10,861,148	10,802,977	10,822,073	10,813,590
Specialty	21,846	21,875	21,996	22,240	22,389	22,476	22,580	22,603	22,946	22,988	22,935	23,004
<b>Total</b>	<b>13,458,354</b>	<b>13,420,169</b>	<b>13,384,641</b>	<b>13,354,858</b>	<b>13,385,832</b>	<b>13,347,949</b>	<b>13,331,504</b>	<b>13,313,754</b>	<b>13,332,416</b>	<b>13,340,692</b>	<b>13,312,021</b>	<b>13,283,626</b>

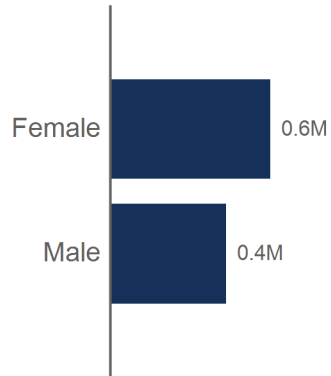
Source: Enterprise Performance Monitoring System  
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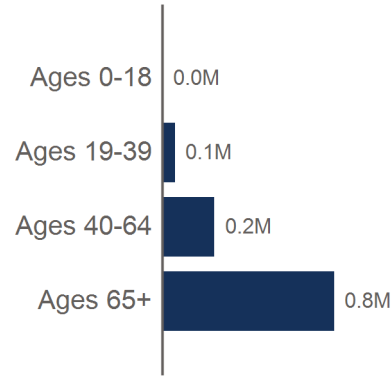


Dual Member Demographics (Mar-18)

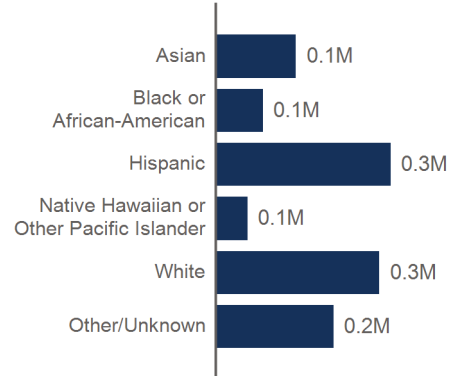
By Sex



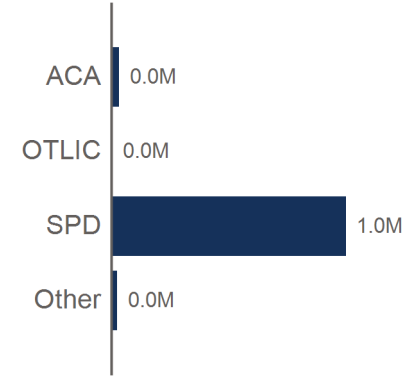
By Age



By Ethnicity

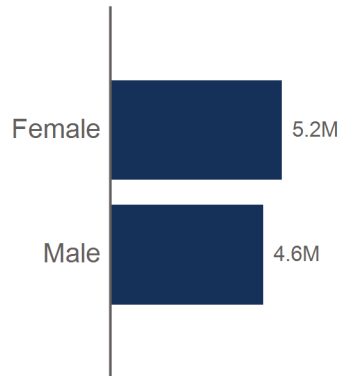


By Population

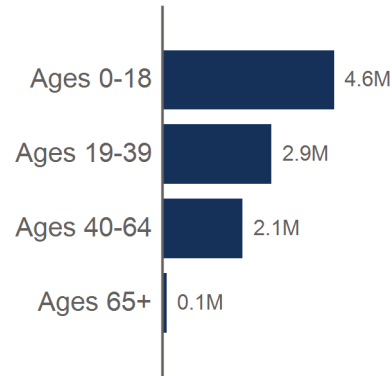


Non-Dual Member Demographics (Mar-18)

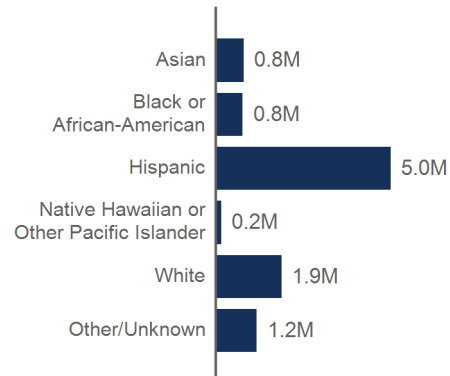
By Sex



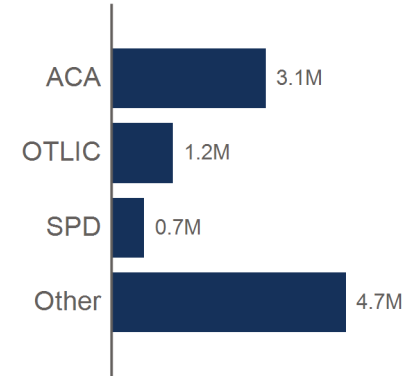
By Age



By Ethnicity



By Population



Source: Enterprise Performance Monitoring System  
Note: Data in this dashboard is preliminary and subject to change

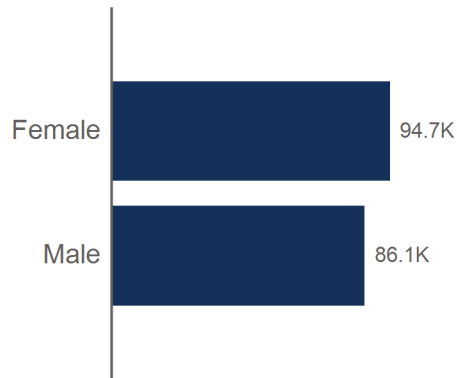
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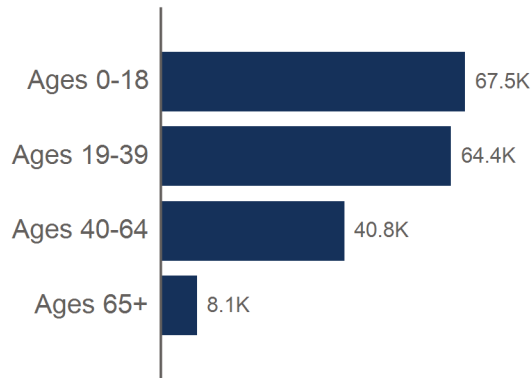


### Count of New Enrollments (Mar-18)

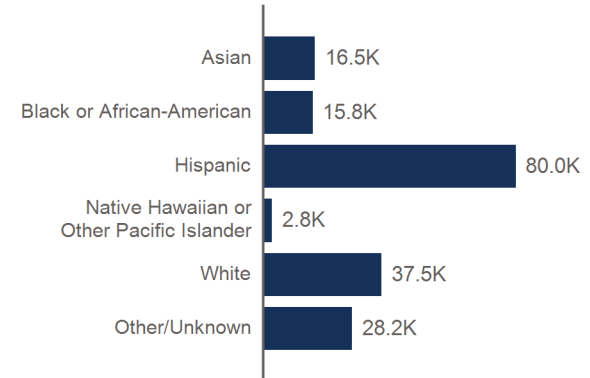
#### By Sex



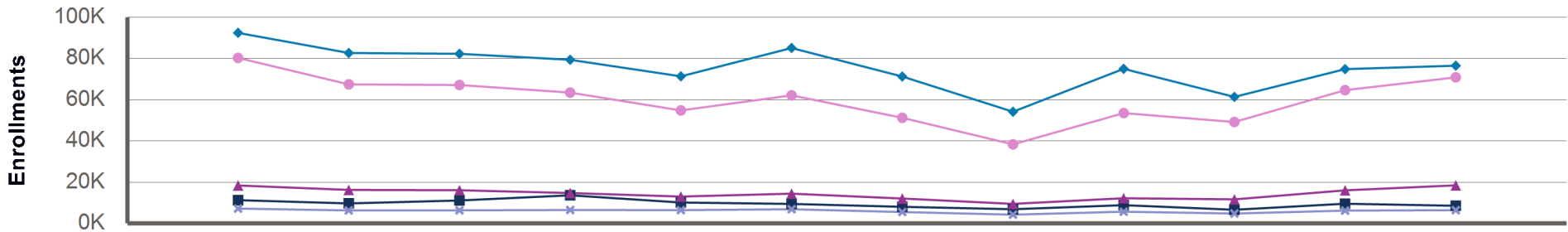
#### By Age



#### By Ethnicity



#### By Population



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Dual	11,319	9,732	11,147	13,673	10,170	9,495	8,090	6,913	8,892	6,656	9,582	8,581
MO-ACA	80,262	67,437	67,133	63,448	54,800	62,117	51,236	38,353	53,507	49,194	64,623	70,821
MO-OTLIC	18,431	16,285	16,115	14,766	13,048	14,463	12,108	9,506	12,247	11,693	16,066	18,489
MO-SPD	7,228	6,334	6,382	6,537	6,477	6,909	5,561	4,278	5,711	4,830	6,240	6,450
MO-Other	92,405	82,654	82,248	79,350	71,328	85,072	71,244	54,172	74,964	61,359	74,827	76,490
<b>Total</b>	<b>209,645</b>	<b>182,442</b>	<b>183,025</b>	<b>177,774</b>	<b>155,823</b>	<b>178,056</b>	<b>148,239</b>	<b>113,222</b>	<b>155,321</b>	<b>133,732</b>	<b>171,338</b>	<b>180,831</b>

Source: Enterprise Performance Monitoring System  
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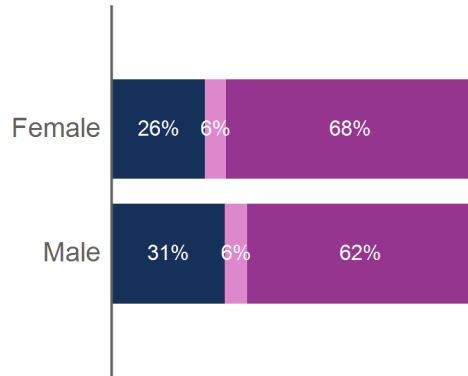
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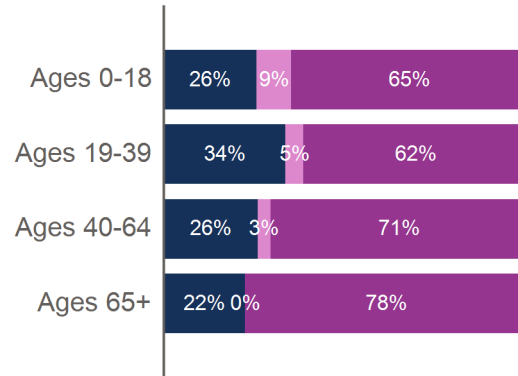
## Count of New Enrollments: Enrollment Type (Mar-18)



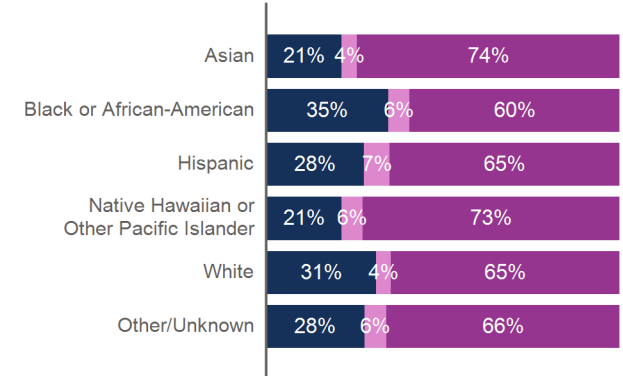
### By Sex



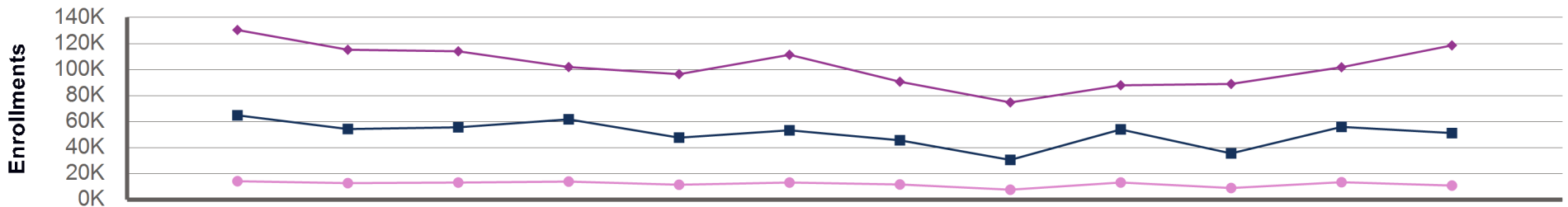
### By Age



### By Ethnicity



### By Enrollment Type



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Auto Assigned	64,911	54,356	55,692	61,791	47,731	53,403	45,729	30,636	54,054	35,651	56,006	51,277
Passive/Prior	14,308	12,827	13,281	14,029	11,597	13,272	11,815	7,776	13,312	9,088	13,537	10,958
Regular	130,426	115,259	114,052	101,954	96,495	111,381	90,695	74,810	87,955	88,993	101,795	118,596
Total	209,645	182,442	183,025	177,774	155,823	178,056	148,239	113,222	155,321	133,732	171,338	180,831

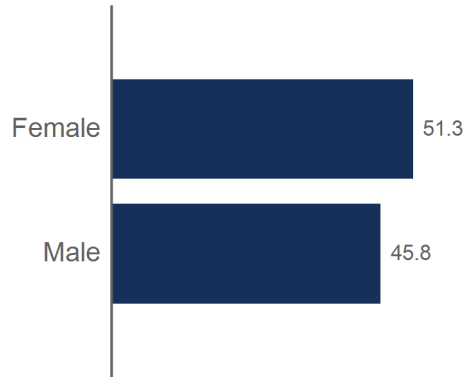
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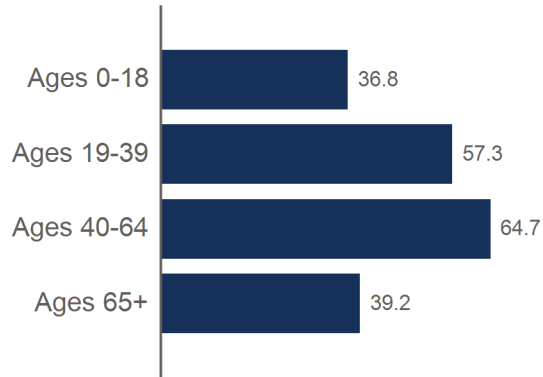


## Emergency Room Visits per 1,000 Members (Sep-17)

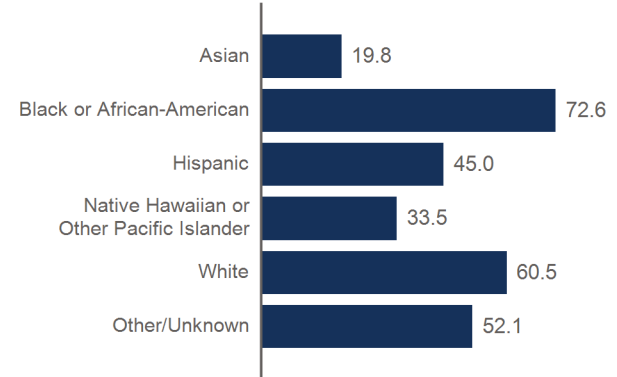
### By Sex



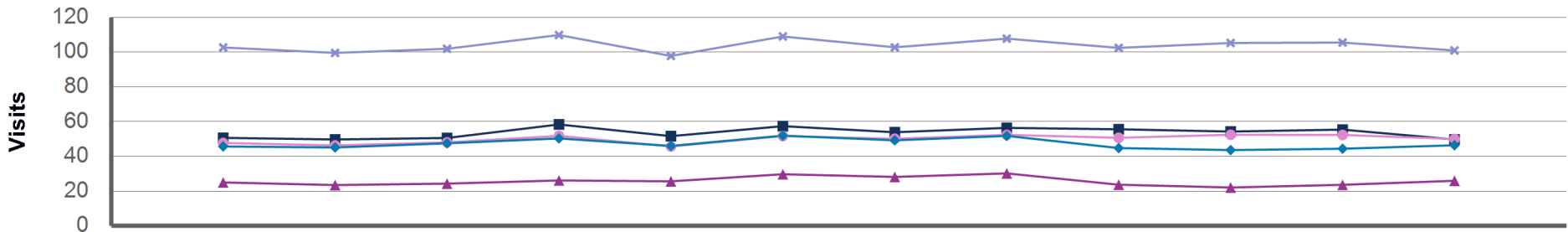
### By Age



### By Ethnicity



### By Population



	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17
Dual	50.7	49.7	50.6	58.4	51.6	57.4	53.9	56.4	55.6	54.3	55.4	49.7
MO-ACA	47.7	46.3	48.1	51.8	45.7	51.7	50.1	52.4	50.7	52.5	52.4	50.0
MO-OTLIC	25.0	23.5	24.3	26.2	25.7	29.7	28.2	30.2	23.7	22.1	23.7	26.0
MO-SPD	102.7	99.5	101.9	109.8	97.8	109.0	102.8	107.8	102.4	105.3	105.5	101.0
MO-Other	45.7	45.1	47.5	50.3	46.0	51.9	49.2	51.8	44.8	43.6	44.4	46.4
Total	48.0	46.8	48.7	52.5	47.4	53.5	50.9	53.5	48.7	48.5	49.1	48.8

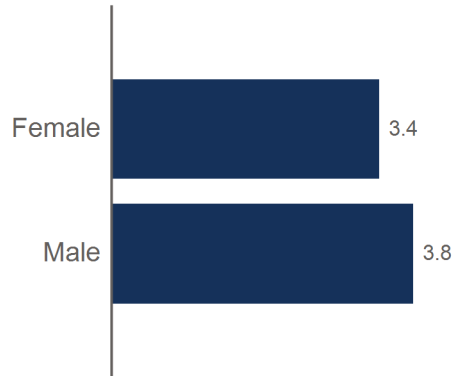
Source: Enterprise Performance Monitoring System  
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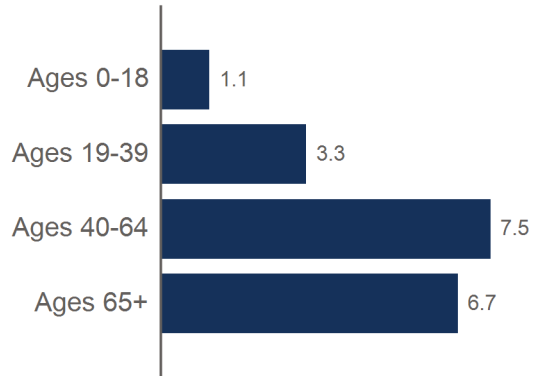


## Emergency Room Visits with an Inpatient Admission per 1,000 Members (Sep-17)

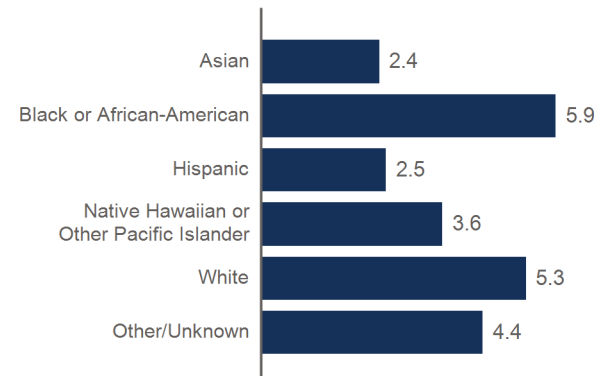
### By Sex



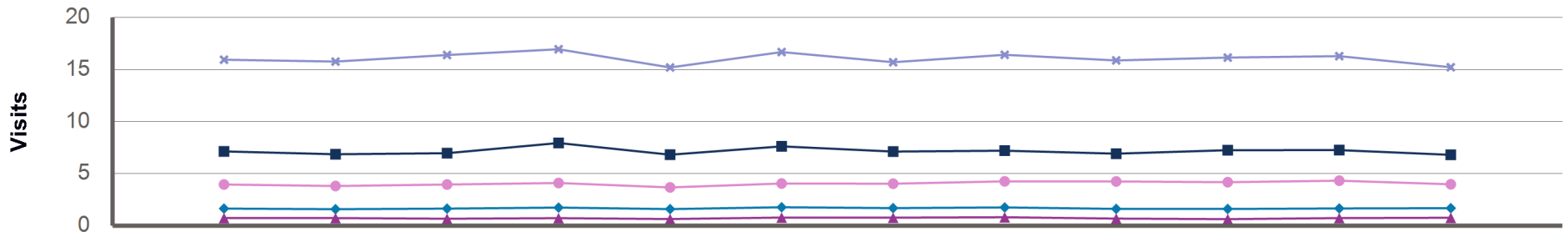
### By Age



### By Ethnicity



### By Population



	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17
Dual	7.1	6.9	7.0	7.9	6.8	7.6	7.1	7.2	6.9	7.3	7.3	6.8
MO-ACA	4.0	3.8	4.0	4.1	3.7	4.1	4.0	4.3	4.3	4.2	4.3	4.0
MO-OTLIC	0.7	0.7	0.7	0.7	0.7	0.8	0.8	0.8	0.7	0.6	0.7	0.8
MO-SPD	15.9	15.8	16.4	16.9	15.2	16.7	15.7	16.4	15.9	16.1	16.3	15.2
MO-Other	1.7	1.6	1.7	1.8	1.6	1.8	1.7	1.8	1.6	1.6	1.7	1.7
Total	3.6	3.5	3.6	3.8	3.4	3.8	3.6	3.8	3.7	3.7	3.8	3.6

Source: Enterprise Performance Monitoring System  
Note: Data in this dashboard is preliminary and subject to change



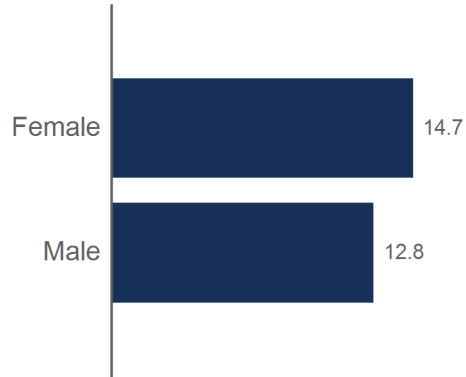
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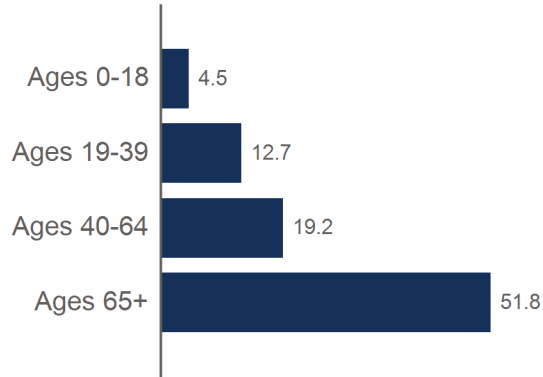


### Inpatient Admissions per 1,000 Members (Sep-17)

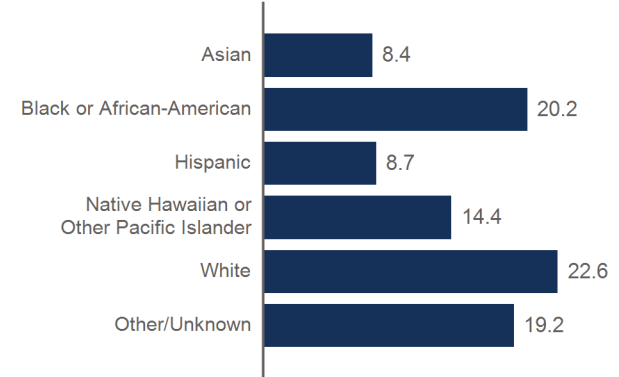
#### By Sex



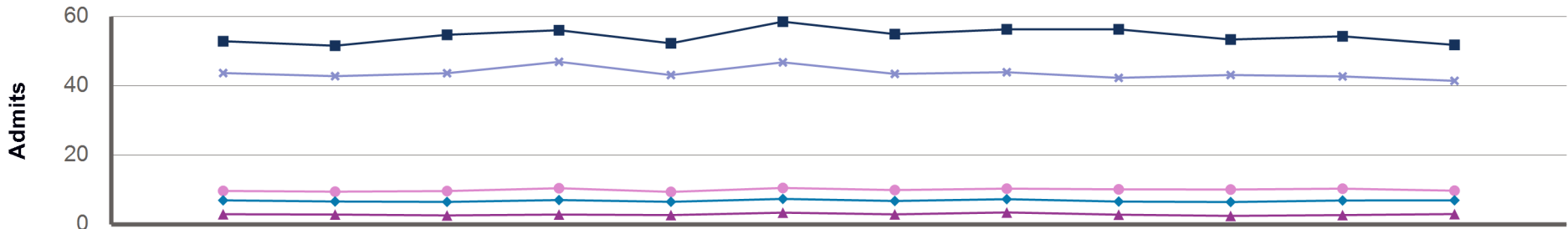
#### By Age



#### By Ethnicity



#### By Population



	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17
Dual	52.9	51.6	54.7	56.0	52.3	58.5	54.9	56.3	56.3	53.4	54.3	51.8
MO-ACA	9.7	9.5	9.7	10.5	9.4	10.6	10.0	10.4	10.2	10.1	10.4	9.8
MO-OTLIC	3.0	2.9	2.6	2.9	2.7	3.4	3.0	3.5	2.9	2.5	2.7	3.0
MO-SPD	43.7	42.8	43.6	46.9	43.1	46.8	43.5	43.9	42.3	43.1	42.7	41.4
MO-Other	7.0	6.7	6.5	7.1	6.6	7.4	6.8	7.3	6.6	6.5	6.9	7.0
Total	13.7	13.3	13.6	14.6	13.5	15.1	14.1	14.7	14.2	13.8	14.2	13.8

Source: Enterprise Performance Monitoring System

Note: Data in this dashboard is preliminary and subject to change

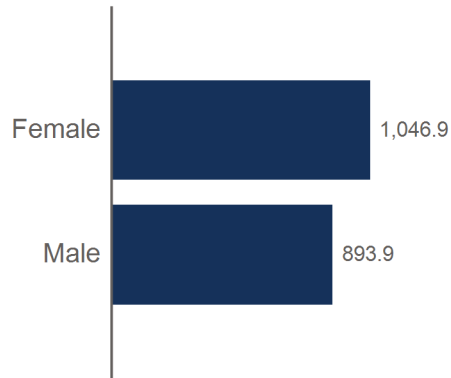
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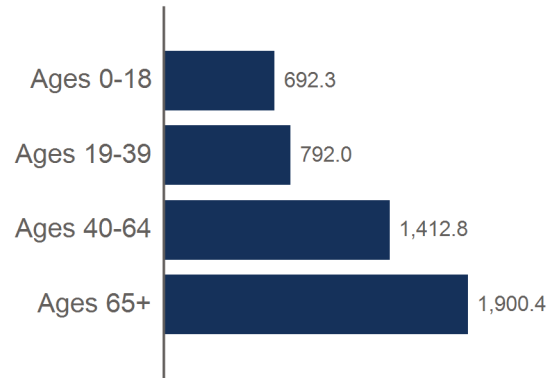


## Outpatient Visits per 1,000 Members (Sep-17)

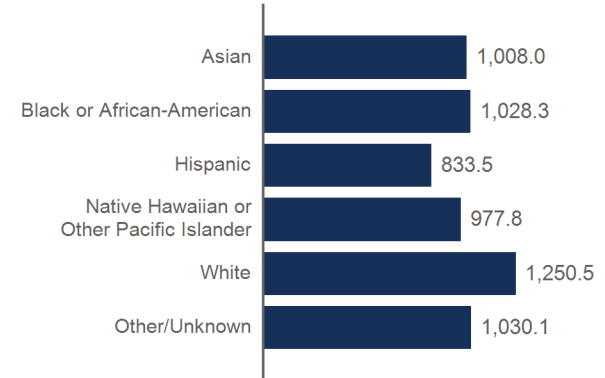
### By Sex



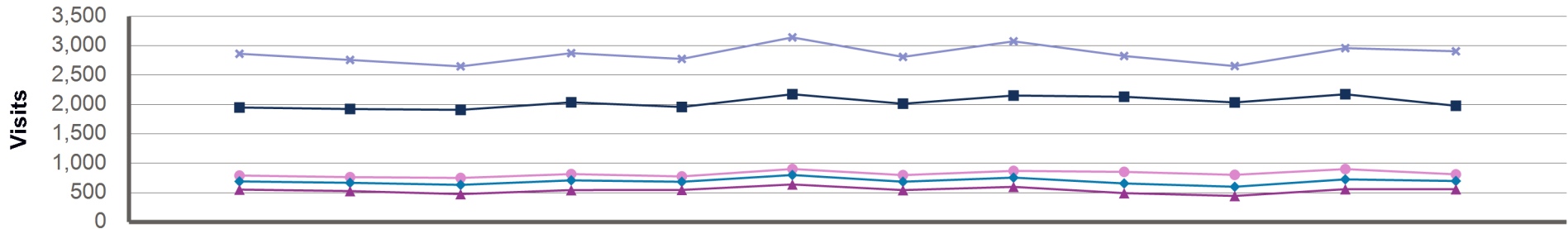
### By Age



### By Ethnicity



### By Population



	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17
Dual	1,949.7	1,923.5	1,909.8	2,037.3	1,958.5	2,175.0	2,013.8	2,152.7	2,131.7	2,035.6	2,174.5	1,978.9
MO-ACA	792.7	765.6	752.0	817.9	777.7	904.0	800.4	871.9	855.2	804.8	902.6	813.0
MO-OTLIC	554.3	528.5	477.4	545.6	548.2	641.2	545.7	600.1	493.9	446.1	561.1	561.6
MO-SPD	2,862.7	2,758.1	2,649.0	2,873.7	2,775.2	3,141.6	2,809.9	3,074.8	2,825.0	2,653.9	2,959.1	2,905.6
MO-Other	692.7	669.2	634.3	711.0	686.6	802.0	687.9	757.6	658.3	602.1	727.7	699.6
Total	953.8	923.2	890.5	981.2	947.1	1,088.5	961.4	1,048.3	969.9	906.0	1,035.3	975.5

Source: Enterprise Performance Monitoring System  
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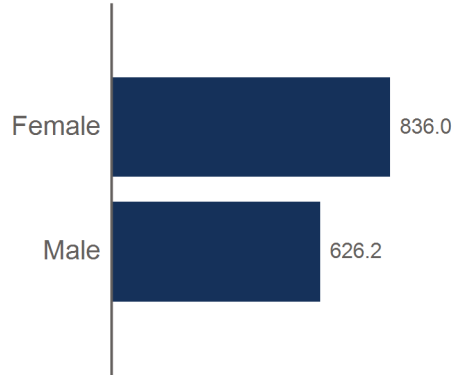
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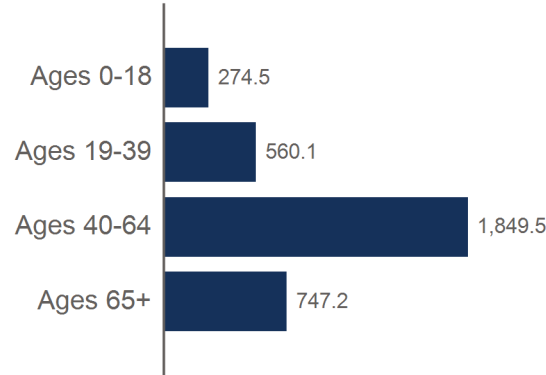


### Prescriptions per 1,000 Members (Sep-17)

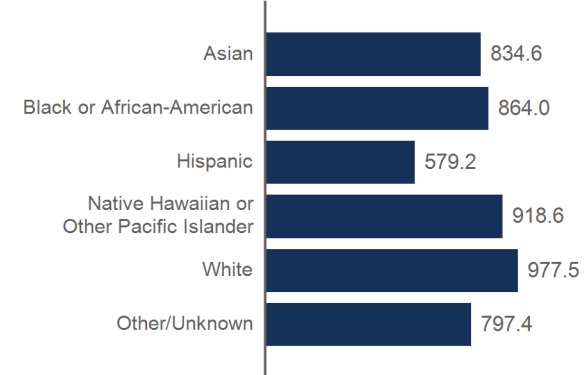
#### By Sex



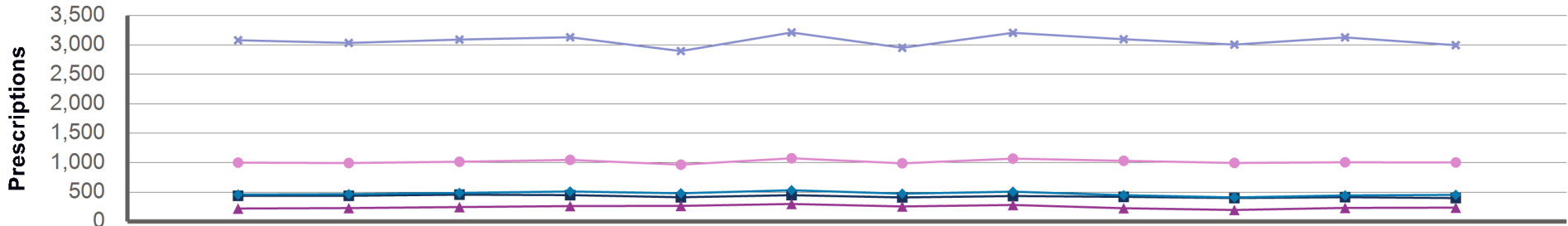
#### By Age



#### By Ethnicity



#### By Population



	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17
Dual	438.0	438.6	458.2	449.9	414.9	449.1	411.0	434.8	421.1	401.0	415.3	400.6
MO-ACA	1,002.0	995.7	1,016.8	1,047.9	967.5	1,075.6	990.7	1,070.2	1,032.6	996.9	1,007.8	1,004.8
MO-OTLIC	222.6	230.8	247.4	264.4	267.6	299.7	258.1	283.0	227.8	198.3	233.5	237.8
MO-SPD	3,080.2	3,034.4	3,091.3	3,130.9	2,896.0	3,211.6	2,951.9	3,205.9	3,097.1	3,006.0	3,128.2	2,996.1
MO-Other	460.6	466.3	487.8	511.6	481.5	533.3	474.9	508.9	449.7	411.4	445.1	455.0
Total	746.8	746.1	769.0	791.9	737.6	817.8	743.5	802.0	750.4	712.0	743.1	738.0

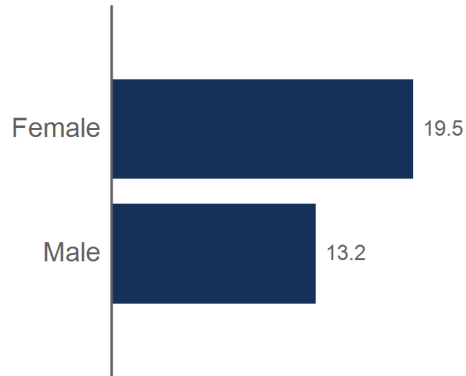
Source: Enterprise Performance Monitoring System  
 Note: Data in this dashboard is preliminary and subject to change

# Managed Care Performance Monitoring Dashboard Report Released September 26, 2018

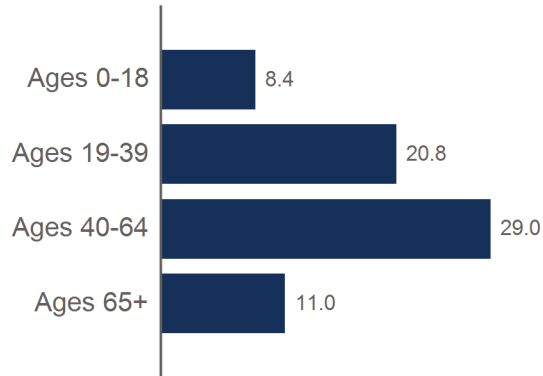


## Mild-to-Moderate Mental Health Visits per 1,000 Members (Sep-17)

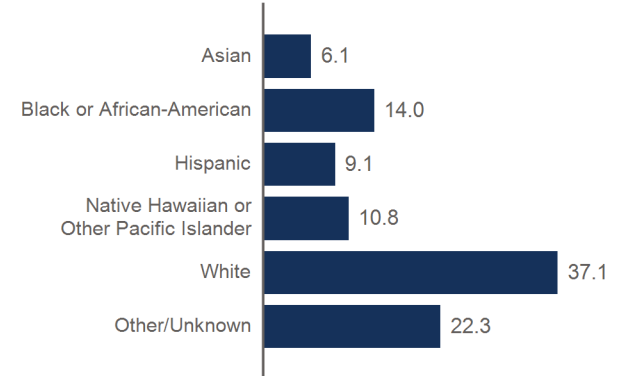
### By Sex



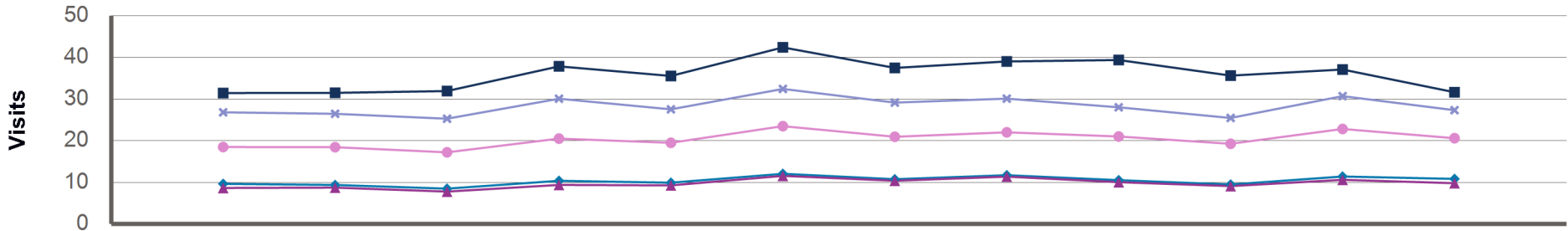
### By Age



### By Ethnicity



### By Population



	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17
Dual	31.4	31.5	31.9	37.8	35.5	42.4	37.5	39.0	39.4	35.6	37.1	31.6
MO-ACA	18.5	18.4	17.2	20.5	19.5	23.5	20.9	22.0	21.0	19.3	22.8	20.6
MO-OTLIC	8.7	8.7	7.8	9.4	9.3	11.6	10.4	11.4	10.1	9.1	10.6	9.8
MO-SPD	26.8	26.5	25.3	30.1	27.5	32.4	29.2	30.1	28.0	25.5	30.7	27.3
MO-Other	9.7	9.4	8.5	10.4	9.9	12.1	10.8	11.7	10.5	9.5	11.4	10.8
Total	15.0	14.9	14.0	16.9	16.0	19.4	17.3	18.3	17.3	15.7	18.2	16.5

Source: Enterprise Performance Monitoring System  
Note: Data in this dashboard is preliminary and subject to change

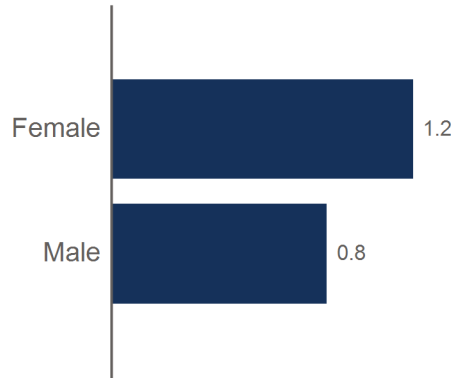
# Managed Care Performance Monitoring Dashboard Report

## Released September 26, 2018

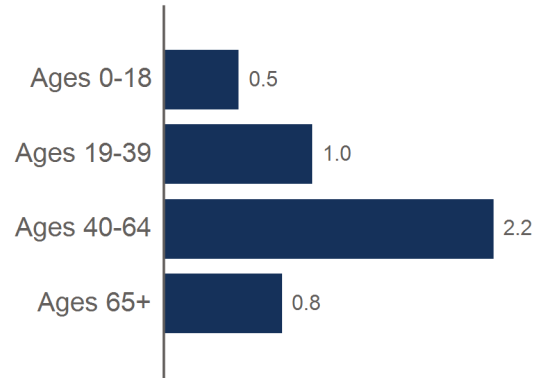


### Grievances per 1,000 Member Months (2018Q1)

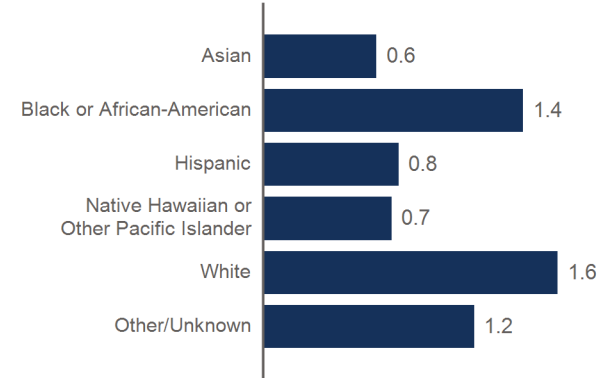
#### By Sex



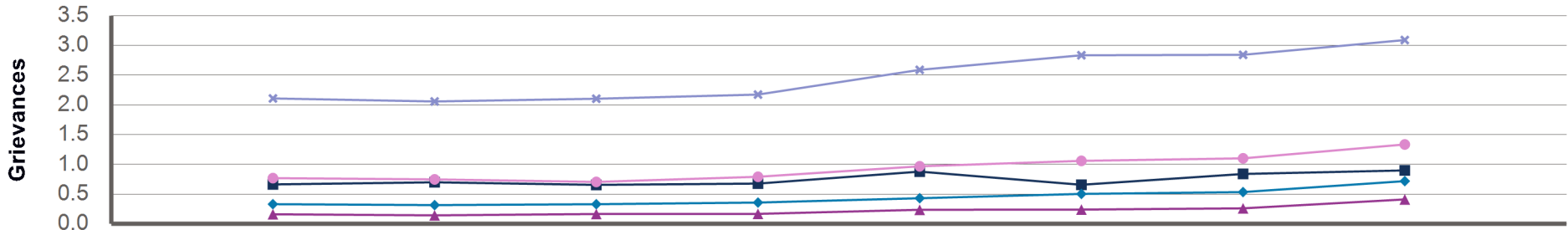
#### By Age



#### By Ethnicity



#### By Population



	2016Q2	2016Q3	2016Q4	2017Q1	2017Q2	2017Q3	2017Q4	2018Q1
Dual	0.7	0.7	0.7	0.7	0.9	0.7	0.8	0.9
MO-ACA	0.8	0.7	0.7	0.8	1.0	1.1	1.1	1.3
MO-OTLIC	0.2	0.1	0.2	0.2	0.2	0.2	0.3	0.4
MO-SPD	2.1	2.1	2.1	2.2	2.6	2.8	2.8	3.1
MO-Other	0.3	0.3	0.3	0.4	0.4	0.5	0.5	0.7
Total	0.6	0.6	0.6	0.6	0.7	0.8	0.8	1.0

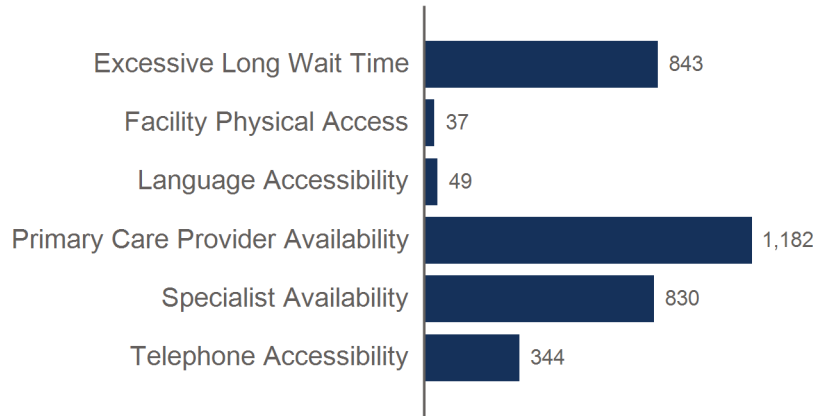
Source: Enterprise Performance Monitoring System  
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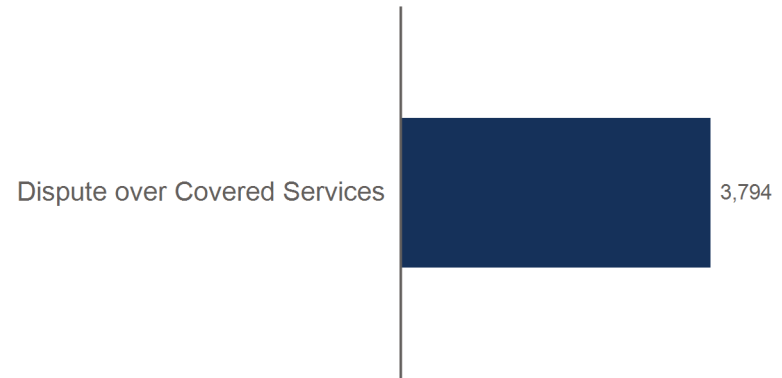


*Count of Grievances: Grievance Type\* (2018Q1)*

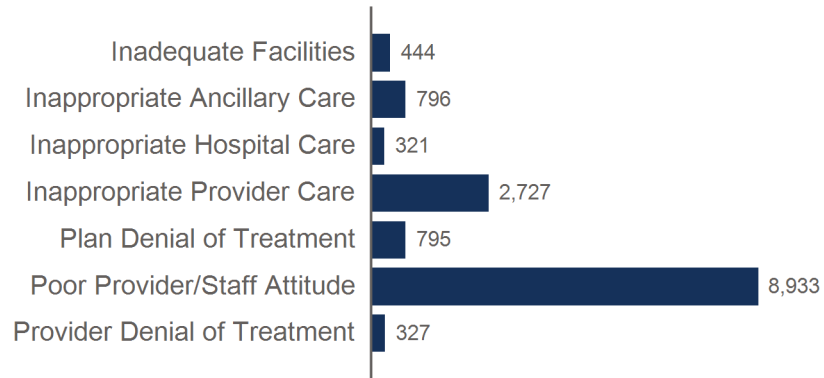
**Accessibility**



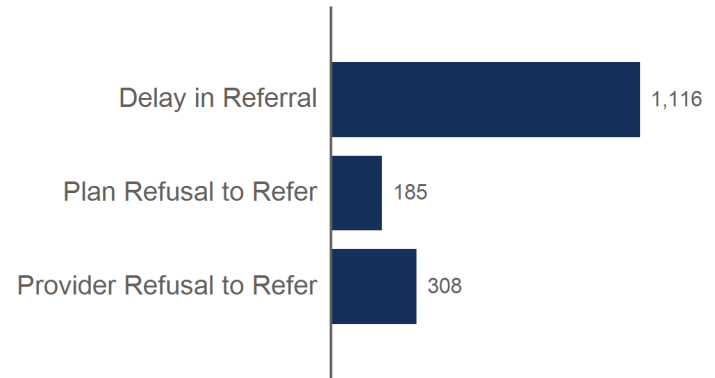
**Benefits**



**Quality of Care**



**Referral**



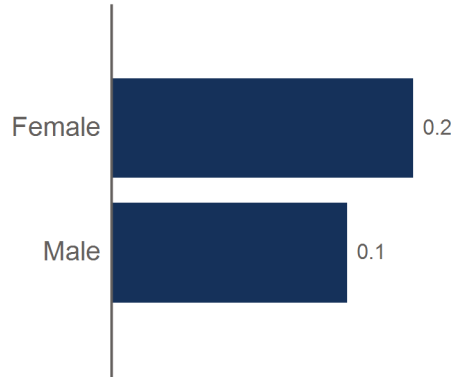
\*There were 9,791 Other Grievances during the quarter that did not fall under one of the above four categories.

# Managed Care Performance Monitoring Dashboard Report Released September 26, 2018

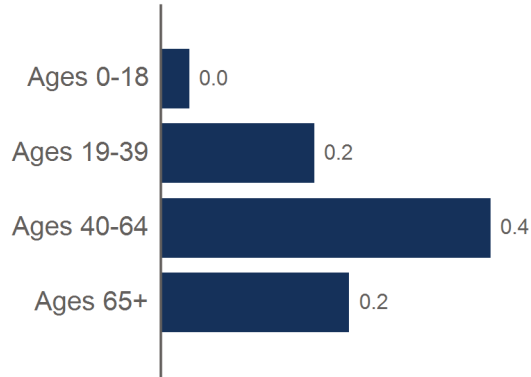


## State Fair Hearings per 10,000 Members (Mar-18)

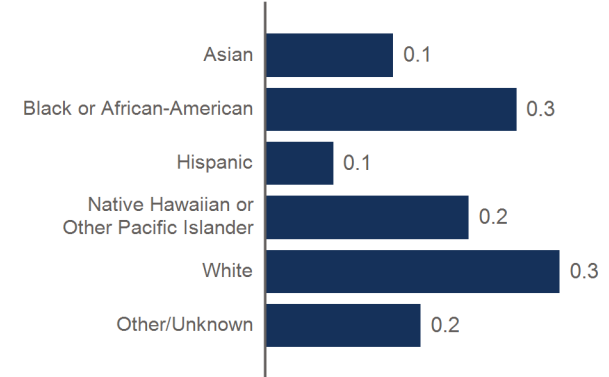
### By Sex



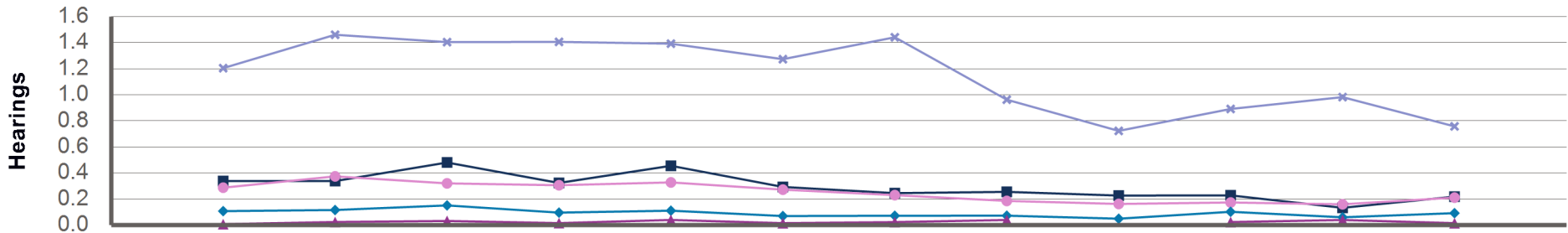
### By Age



### By Ethnicity



### By Population



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Dual	0.3	0.3	0.5	0.3	0.5	0.3	0.2	0.3	0.2	0.2	0.1	0.2
MO-ACA	0.3	0.4	0.3	0.3	0.3	0.3	0.2	0.2	0.2	0.2	0.2	0.2
MO-OTLIC	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0		0.0	0.0	0.0
MO-SPD	1.2	1.5	1.4	1.4	1.4	1.3	1.4	1.0	0.7	0.9	1.0	0.8
MO-Other	0.1	0.1	0.2	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Total	0.2	0.3	0.3	0.2	0.3	0.2	0.2	0.2	0.1	0.2	0.2	0.2

Source: Enterprise Performance Monitoring System

Note: Data in this dashboard is preliminary and subject to change

# Managed Care Performance Monitoring Dashboard Report

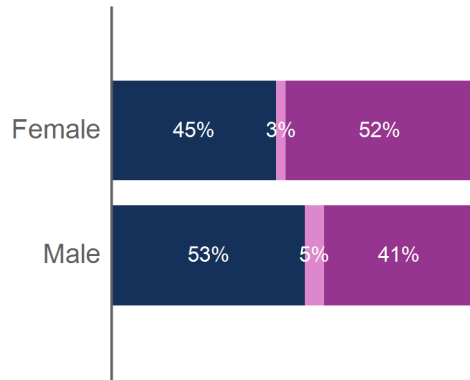
## Released September 26, 2018



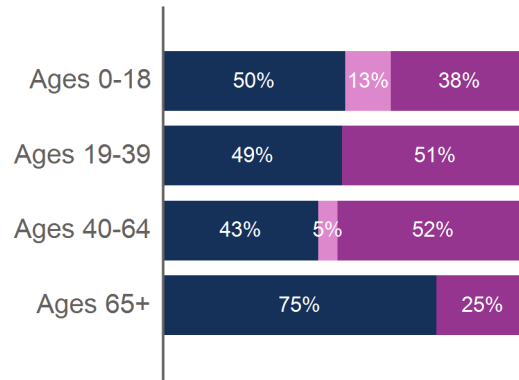
### Count of State Fair Hearings: Outcomes (Mar-18)

■ Denied or Dismissed     
 ■ Granted     
 ■ Withdrawal or Non-Appearance

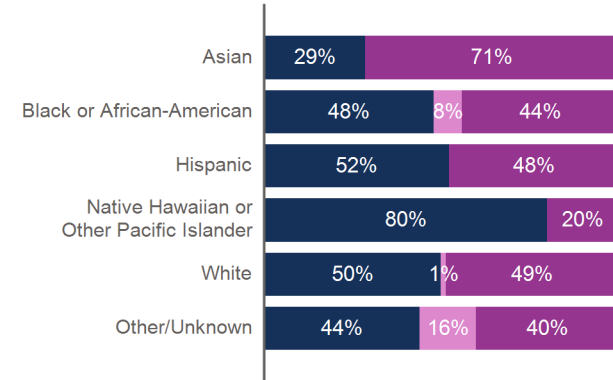
#### By Sex



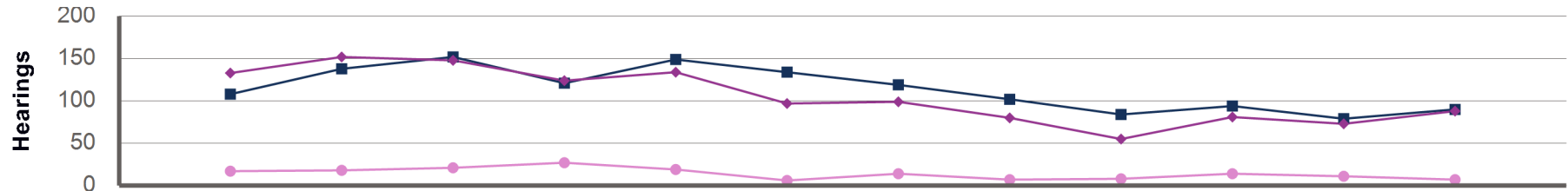
#### By Age



#### By Ethnicity



#### By Outcome



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Denied or Dismissed	108	138	152	121	149	134	119	102	84	94	79	90
Granted	17	18	21	27	19	6	14	7	8	14	11	7
Withdrawal or Non-Appearance	133	152	148	124	134	97	99	80	55	81	73	88
<b>Total</b>	<b>258</b>	<b>308</b>	<b>321</b>	<b>272</b>	<b>302</b>	<b>237</b>	<b>232</b>	<b>189</b>	<b>147</b>	<b>189</b>	<b>163</b>	<b>185</b>

Source: Enterprise Performance Monitoring System  
 Note: Data in this dashboard is preliminary and subject to change

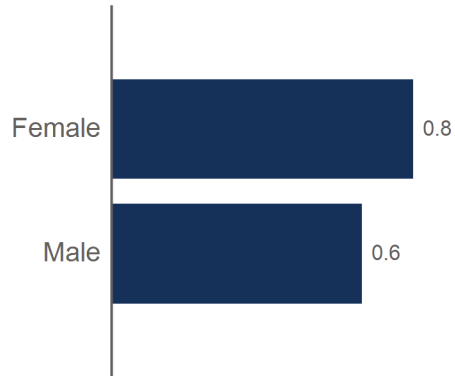


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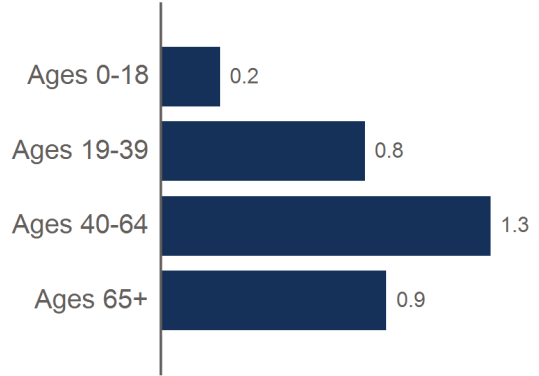


## Medical Exemption Requests per 10,000 Members (Mar-18)

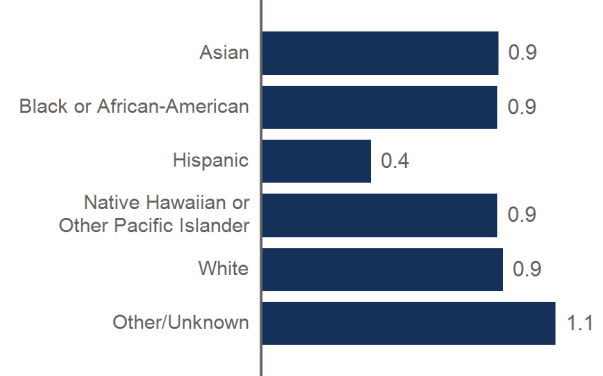
### By Sex



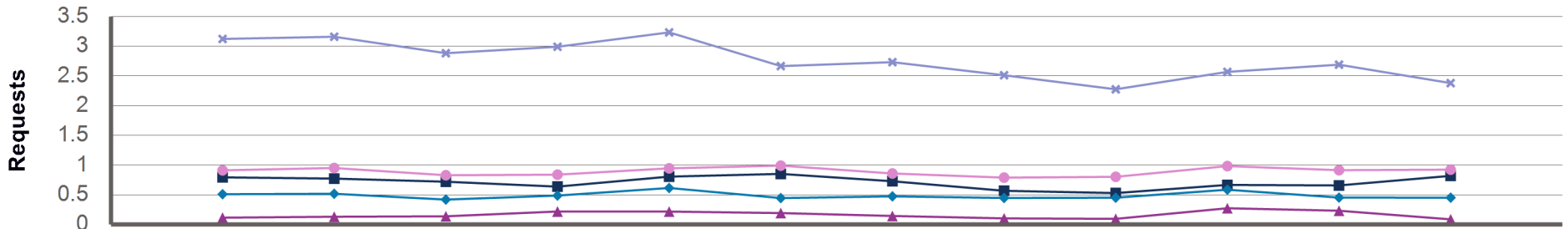
### By Age



### By Ethnicity



### By Population



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Dual	0.8	0.8	0.7	0.6	0.8	0.9	0.7	0.6	0.5	0.7	0.7	0.8
MO-ACA	0.9	1.0	0.8	0.8	0.9	1.0	0.9	0.8	0.8	1.0	0.9	0.9
MO-OTLIC	0.1	0.1	0.1	0.2	0.2	0.2	0.1	0.1	0.1	0.3	0.2	0.1
MO-SPD	3.1	3.2	2.9	3.0	3.2	2.7	2.7	2.5	2.3	2.6	2.7	2.4
MO-Other	0.5	0.5	0.4	0.5	0.6	0.4	0.5	0.4	0.5	0.6	0.5	0.5
Total	0.8	0.8	0.7	0.7	0.8	0.7	0.7	0.6	0.6	0.8	0.7	0.7

Source: Enterprise Performance Monitoring System  
Note: Data in this dashboard is preliminary and subject to change

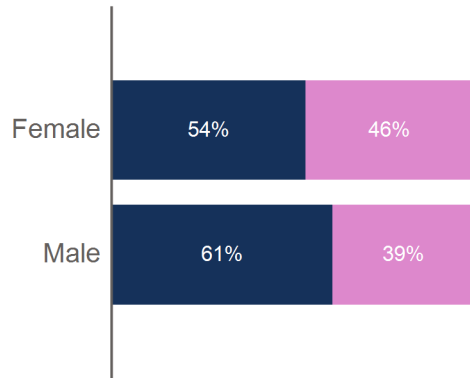
# Managed Care Performance Monitoring Dashboard Report Released September 26, 2018



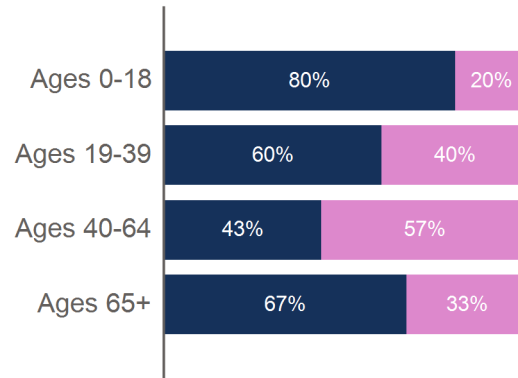
## Count of Medical Exemption Requests: Exempt Status (Mar-18)

■ Approved
 ■ Denied

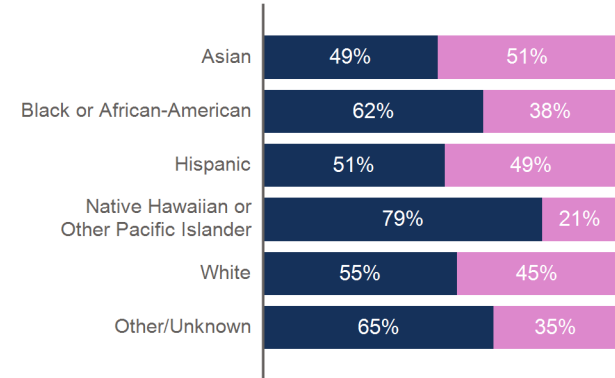
### By Sex



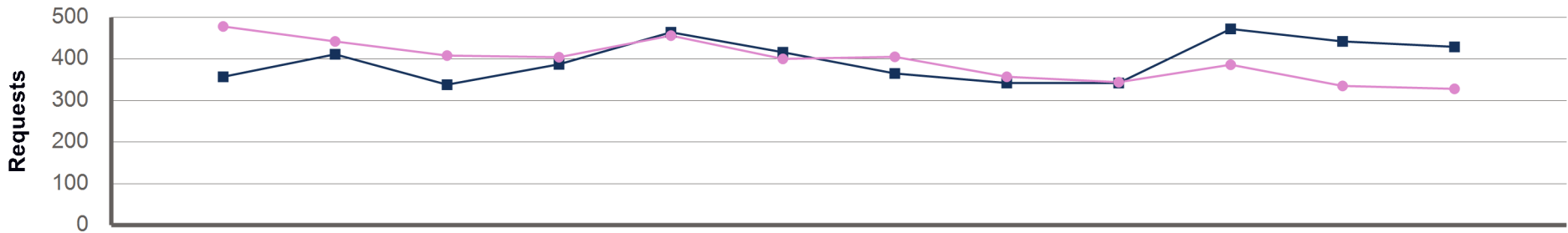
### By Age



### By Ethnicity



### By Exempt Status



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Approved	357	411	338	387	464	416	365	342	342	472	442	429
Denied	478	442	408	404	456	400	405	357	344	386	335	328
Total	835	853	746	791	920	816	770	699	686	858	777	757

Source: Enterprise Performance Monitoring System  
Note: Data in this dashboard is preliminary and subject to change

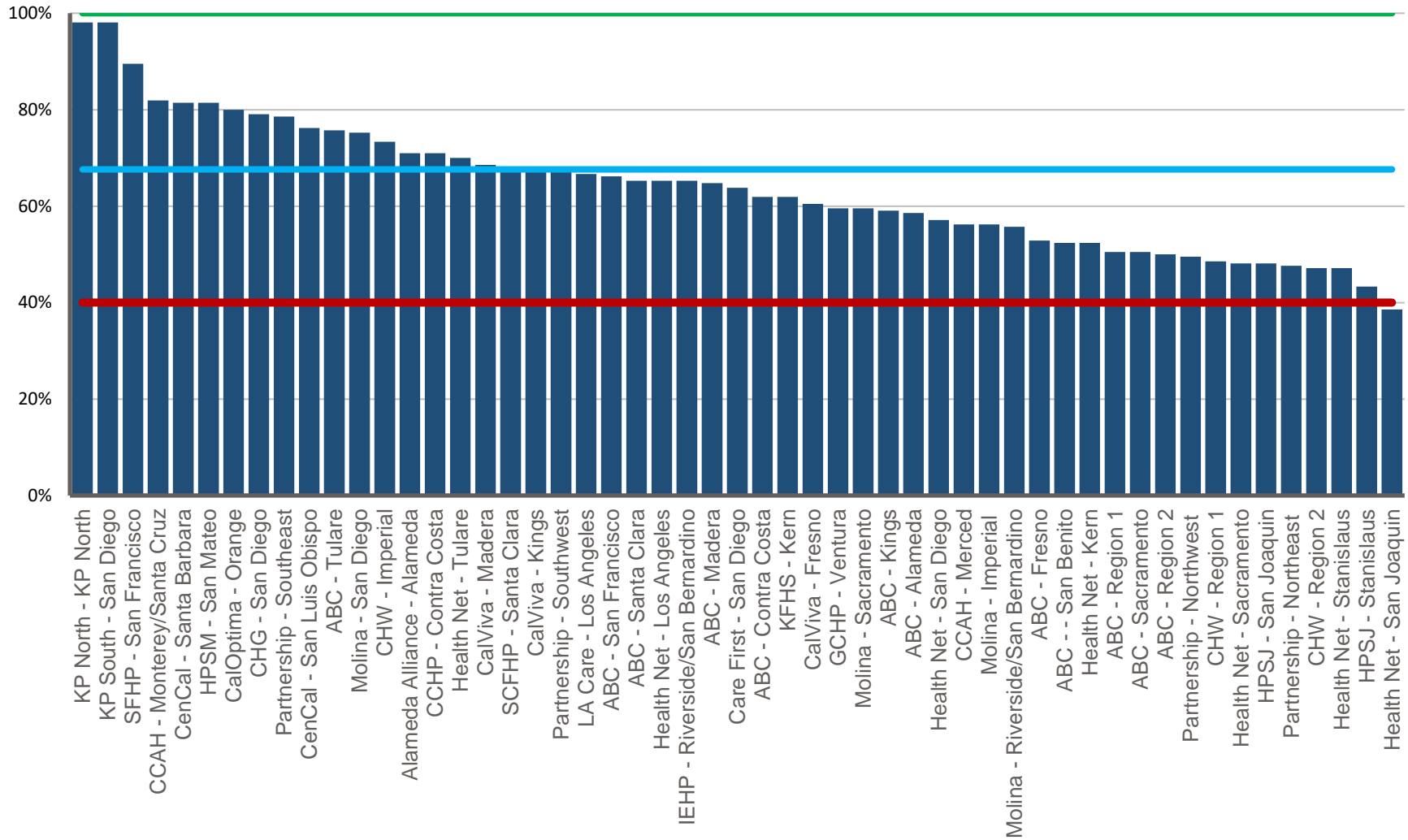
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2018 Aggregated Quality Factor Score (AQFS)

HPL - 100%    Weighted Average - 68%    MPL - 40%

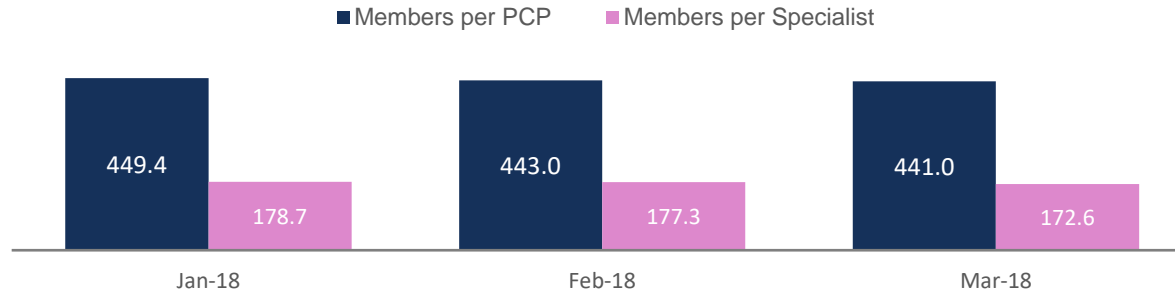
By HEDIS® Reporting Unit



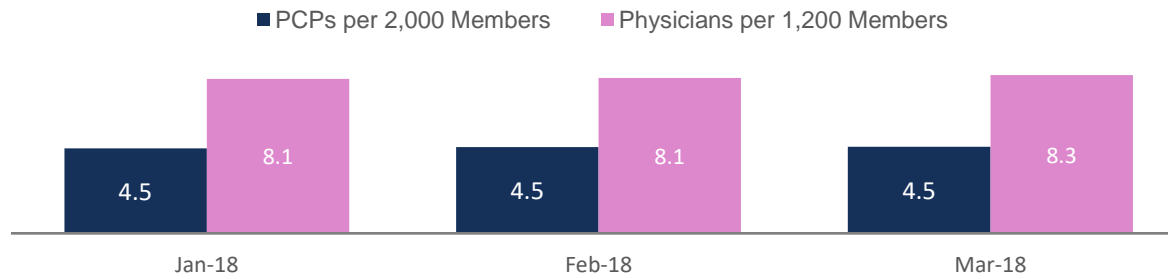
Source: Enterprise Performance Monitoring System  
Note: Data in this dashboard is preliminary and subject to change

*Network Adequacy (2018Q1)*

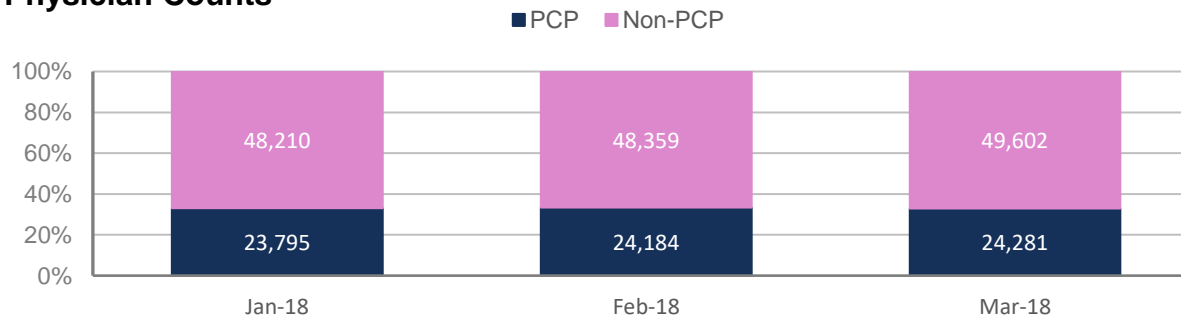
**Member Ratios**



**Provider Ratios**



**Physician Counts**



Source: Enterprise Performance Monitoring System  
Note: Data in this dashboard is preliminary and subject to change

## GLOSSARY

### Metrics

**Certified Eligible:** A certified eligible is a beneficiary deemed qualified for Medi-Cal services by a valid eligibility determination, and who have enrolled into the program. This classification excludes beneficiaries who have a monthly share-of-cost obligation that has not been met. Enrollment counts exclude information related to applications received or any other eligible members that may be in the process of becoming certified eligible.

**Member Month:** A member month represent one certified eligible for one month of enrollment. Counts of Member months represent the number of certified eligible individuals enrolled in a health plan or Fee-For-Service each month.

**Per 1,000 Members:** Rates per 1,000 members were calculated by dividing overall utilization of a given service (e.g., Emergency Room Visits) by the total number of members for the same time period and multiplying the result by 1,000.

**Abbreviated Numbers:** Numbers in millions (M) that are less than 50,000 are displayed as 0.0M. Numbers in thousands (K) that are less than 50 are displayed as 0.0K.

**Percentages:** Percentage metrics are displayed as whole numbers. Charts may add up to 99%, 100%, or 101%.

**MO-:** Indicates Medi-Cal Only. See Non-Dual definition for more information.

### Population Aid Code Groups

**Affordable Care Act (ACA):** This population consists of the following Adult Expansion aid codes: M1, M2, L1, and 7U.

**Optional Targeted Low Income Children (OTLIC):** This population consists of the following OTLIC aid codes: 2P, 2R, 2S, 2T, 2U, 5C, 5D, E2, E5, E6, E7, H1, H2, H3, H4, H5, M5, T0, T1, T2, T3, T4, T5, T6, T7, T8, and T9.

**Seniors and Persons with Disabilities (SPD):** This population consists of the following SPD aid codes: 10, 13, 14, 16, 17, 1E, 1H, 20, 23, 24, 26, 27, 2E, 2H, 36, 60, 63, 64, 66, 67, 6A, 6C, 6E, 6G, 6H, 6J, 6N, 6P, 6R, 6V, 6W, 6X, 6Y, C1, C2, C3, C4, C7, C8, D2, D3, D4, D5, D6, and D7.

**Other Populations (OTHER):** This population consists of all aid codes not categorized under ACA, OTLIC, or SPD.

### Medicare Status

**Dual:** This population consists of any Medi-Cal eligible member who has active Medicare coverage. Active Medicare coverage means one or more of the following Medicare portions are active: Part A, B, or D. Dual members are not identified by an aid code.

**Non-Dual:** This population consists of any Medi-Cal eligible member who is Medi-Cal Only (MO) and has no active Medicare coverage.

### New Enrollments

This population consists of members who were newly eligible for Medi-Cal Managed Care enrollment. The enrollment types are defined below:

**Auto Assigned:** Members who made no choice that were assigned by default algorithm.

**Passive/Prior:** Members who were passively enrolled and members defaulted because they were previously a member or because other family members were already assigned to the plan.

**Regular:** Members who made a choice or selected a health plan by submitting an enrollment form.

### Utilization Measures for Certified Eligible Managed Care Members

Utilization is tracked by aid code population and Medicare status.

**Emergency Room (ER) Visits:** This measure captures the number of ER visits per month. The results from this measure are used to calculate ER visits with an inpatient admission. A visit consists of a unique combination between provider, member, and date of service. This measure is displayed per 1,000 members.

**Emergency Room (ER) Visits with an Inpatient (IP) Admission:** This measure captures the number of ER visits that resulted in an inpatient admission per month. The results of this measure are a subset of ER visits and IP admissions. The service date and member identification are linked to create this measure. An admission consists of a unique combination between member and date of admission to a facility. This measure is displayed per 1,000 members.

**Inpatient (IP) Admissions:** This measure captures the number of inpatient admissions per month. The results from this measure are used to calculate ER visits with an inpatient admission. An admission consists of a unique combination between member and

date of admission to a facility. This measure is displayed per 1,000 members.

**Outpatient (OP) Visits:** This measure captures the number of outpatient visits per month. A visit consists of a unique combination between provider, member, and date of service. This measure is displayed per 1,000 members.

**Prescriptions:** This measure captures the number of prescriptions per month. A prescription consists of a unique combination between National Drug Code, member, and date of service. This measure is displayed per 1,000 members.

**Mild to Moderate Mental Health Visits:** This measure captures the number of visits per month related to selected Psychotherapy Services and Diagnostic Evaluations. The selected procedure codes aim to capture mild to moderate mental health visits. A visit consists of a unique combination between provider, member, and date of service. This measure is displayed per 1,000 members.

#### Grievances, State Fair Hearings, and Medical Exemption Requests

**Grievances:** Grievance data is collected quarterly and is plan reported. A single member can have multiple grievances, and a single grievance can have multiple reasons. Grievance reasons include Accessibility, Benefits, Quality of Care, and Referral. The count of grievances that do not fall into one of the above mentioned categories will be noted as “Other”.

**State Fair Hearings:** Hearing data is reported from the Department of Social Services. Hearing outcomes have been grouped into three outcomes types: Denied or Dismissed, Granted, and Withdrawal or Non-Appearance.

**Medical Exemption Requests (MERs):** A MER is a request to be exempt from mandatory enrollment into a Managed Care health plan. If a MER is approved a beneficiary can stay in Medi-Cal fee-for-service for a period of 12 months. If a MER is denied a member is required to enroll into a Managed Care health plan.

#### Health Effectiveness Data and Information Set (HEDIS®) Aggregated Quality Factor Score (AQFS)

The HEDIS® measures and specifications were developed by and are owned and copyrighted by the National Committee for Quality Assurance (“NCQA”). The HEDIS® AQFS is a single score that accounts for plan performance on all DHCS selected HEDIS® indicators. It is a composite rate calculated as percent of the National High Performance Level (HPL). The High Performance Level is 100%. The Minimum Performance Level is 40%. The State Population Weighted Average is calculated annually. A HEDIS® reporting unit is a combination of one health plan in a county or region.

#### Network Adequacy

**Member Ratios:** This metric is designed to showcase the number of plan enrollees per physician type. Physician types include

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Primary Care Physician (PCP) and Specialist. A PCP can also be categorized as a Specialist; therefore, a single physician may be counted towards a PCP ratio and a Specialist ratio.

**Provider Ratios:** This metric is designed to showcase the number of Primary Care Physicians (PCPs) per 2,000 plan enrollees and all Physicians per 1,200 plan enrollees.

**Physician Counts:** This metric is designed to showcase the unique statewide count and percentage of physicians identified as a PCP. Non-PCP physicians include any physician not designated as a PCP by a health plan organization.