



CALIFORNIA ELIGIBILITY AND ENROLLMENT REPORT:

INSURANCE AFFORDABILITY PROGRAMS

ASSEMBLY BILL X1 1 (J. PEREZ) CHAPTER 3, STATUTES OF 2013

For the Reporting Period
April 2016 through June 2016

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INTRODUCTION

This report summarizes application, eligibility, and enrollment data covering the period from April 1, 2016, through June 30, 2016. This report responds to California Assembly Bill (AB) x1 1 (J. Perez) Chapter 3, Statutes of 2013, Welfare and Institutions (W&I) Code Section 14102.5. The W&I Code requires a quarterly reporting on eligibility and enrollment processes for California Insurance Affordability Programs (IAPs), including Medi-Cal, the Medi-Cal Access Program (MCAP), and Qualified Health Plans (QHPs) available through Covered California.

The information provided in this report is organized to represent the application and enrollment process. The data is gathered from a variety of sources in collaboration with Covered California, the Department of Health Care Services (DHCS), and the Statewide Automated Welfare System (SAWS). Applications, individuals on applications, applicant demographics, health plan enrollments, Medi-Cal coverage renewal, appeals, and enrollment in Medi-Cal and QHP are covered in this report.

BACKGROUND

The Patient Protection and Affordable Care Act (PPACA) of 2010, as amended by the Health Care and Education Reconciliation Act of 2010 (collectively referred to as the Affordable Care Act (ACA)) made numerous changes to Medi-Cal effective January 1, 2014. Final federal regulations were issued to effectuate many of these changes. One major change consolidated some of the Medi-Cal mandatory and optional groups into three new mandatory coverage groups. These new coverage groups are Parents and Other Caretaker Relatives, Pregnant Women, and Infants and Children Under Age 19.

ACA also expanded Medi-Cal in 2014 to include a new mandatory covered group referred to as the New Adult Group. The New Adult Group is composed of individuals between the ages of 19 to 64 who are not otherwise eligible for Medi-Cal in any other mandatory coverage group with income at or below 138 percent of the Federal Poverty Level (FPL).

HIGHLIGHTS APRIL –JUNE 2016

- 13.5 Million Enrolled in Medi Cal
- 230,000 fewer applications
- 258,000 newly Medi Cal eligible
- 65,154 decrease in Medi Cal enrollment
- 54,900 newly eligible for QHP
- 2% decrease in QHP enrollment
- 32% of applicants were children and youth
- 37% new Medi Cal enrollees identified as Hispanic
- 22% new QHP enrollees identified as Hispanic
- 76% QHP enrollees receiving APTC/cost sharing reductions
- Over half of the subsidized QHP enrollees have household incomes at or below 200% of the FPL

ACA regulations define the coverage group income eligibility standards and provide that many, but not all, Medi-Cal coverage groups are to have income determined under the Modified Adjusted Gross Income (MAGI) methodology rules used by the Internal Revenue Service (IRS). MAGI applies to the four consolidated groups generally composed of adults, pregnant women, parents and other caretaker relatives, and children. Non-MAGI, pre ACA income rules continue for some groups, particularly the aged, blind, disabled, and the medically needy.

With the launch of Covered California in 2013 and the expansion of Medi-Cal in 2014, Californians have access to a range of affordable health insurance choices. Covered California is California's Health Benefit Exchange and serves as its marketplace for IAPs. Tax credits and subsidies are available to Californians, with incomes between 100 percent and 400 percent of the FPL who enroll in QHPs offered by Covered California.

The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) supports applications for enrollment submitted through CoveredCA.com and is jointly sponsored by Covered California and DHCS. CalHEERS is an enrollment portal and the "rules engine" for determining Medi-Cal and tax subsidy eligibility using MAGI eligibility rules. Consumers can apply online through the Covered CA portal to purchase affordable QHPs or determine if they qualify for MAGI Medi-Cal coverage.

Once eligibility for MAGI Medi-Cal is established by CalHEERS, the eligibility determination information is imported from CalHEERS into the SAWS through an electronic transfer, known as the Electronic Health Information Transfer (eHIT). CalHEERS is not used for the eligibility determination process for non-MAGI Medi-Cal. Final processing and/or confirmation of Medi-Cal eligibility determinations is made by county eligibility workers. The information on the final determination is sent electronically from SAWS to CalHEERS and MEDS.

For this report, CalHEERS (and in part SAWS) provides data on the number of applications, individuals on applications, and the number of individuals eligible for subsidized or unsubsidized QHPs. CalHEERS also reports the total number of individuals transitioned from Advanced Premium Tax Credit (APTC) to Medi-Cal. Data on individuals eligible for Medi-Cal, Medi-Cal Fee-for-Service (FFS), County Organized Health System (COHS), Medi-Cal Managed Care Plan (MCP), Express Lane, and Hospital Presumptive Eligibility (HPE) are from MEDS. MAXIMUS Inc., a DHCS vendor, reports MCAP applications and individuals eligible, Health Care Options enrollment, and the number of individuals who selected or were defaulted into a MCP.

SUMMARY

California application, eligibility, and enrollment data is compiled from CalHEERS, MEDS, MAXIMUS Inc., and SAWS, depending on the data element. A detailed description of each of these systems can be located in the Appendix at the end of this report. The table below provides a summary of totals derived from the different systems and represent different portions of the application, eligibility, and enrollment process. The data elements and content are referenced below the table.

- From April – June 2016, approximately 550,700 California residents applied for IAPs; a decrease of 39 percent from January – March 2016.
- From April – June 2016, more than 258,000 individuals were eligible for Medi-Cal; a decrease of 36 percent from January – March 2016.
- More than 54,900 California residents applied, were determined eligible, and selected QHPs offered through Covered California (Lines D+E below); a decrease of 72 percent from the prior reporting period.

	Reporting Period: April June 2016		Reporting Period: January March 2016		Net Change	Percent Change
(A) Applications Received	550,714		896,698		(345,984)	(39)
(B) Individuals Included on Applications	973,946		1,403,412		(430,094)	(31)
(C) Individuals Eligible for Enrollment in a QHP through Covered CA	87,813		263,911		(176,098)	(67)
(D) Individuals, Who Selected a QHP, Subsidy Eligible	41,899		165,792		(123,893)	(75)
(E) Individuals, Who Selected a QHP, Not Subsidy Eligible	13,056		29,079		(16,023)	(55)
(F) Individuals Eligible for Coverage through Med-Cal	258,075		403,386		(145,311)	(36)
(G) Individuals Eligible for Coverage through MCAP	1,700		1,751		(51)	(3)
(H) Individuals Enrolled into Medi-Cal FFS	194,062		254,444		(60,382)	(24)
(I) Individuals, Who Selected Medi-Cal MCP	46,450		68,793		(22,343)	(32)
(J) Individuals Defaulted into Medi-Cal MCP	14,098		25,995		(11,897)	(46)
(K) Individuals Enrolled into COHS	1,647		32,184		(30,537)	(95)

[Applications](#) → [Applicants](#) → [Eligibility Determination](#) → [Enrollment](#) → [Renewal](#)

SUMMARY (CONT'D)

- (A) The total number of applications represents applications that were submitted through the following venues:
- CalHEERS + applications filed by Counties (Section 2): 487,876
 - Hospital Presumptive Eligibility (HPE): 51,778
 - Medi-Cal Access Program (MCAP) (CalHEERS): 2,328
 - Express Lane: 3,489
 - Transition from APTC to Medi-Cal¹ : 5,243
- (B) The number of individuals included on applications reported on (A).² Note that SAWS does not currently provide data on individuals on applications. HPE, Express Lane, APTC to Medi-Cal applications, and MCAP include one individual per application and total 62,838. The total number of individuals on applications as reported by CalHEERS is 911,108.
- (C) The count of individuals eligible for enrollment in a QHP through Covered California includes all individuals who applied and were determined eligible for QHPs.
- (D) Those who are eligible for subsidized QHP coverage. Individuals, who select a plan, are not fully enrolled until they effectuate their enrollment by paying their first month's premium.
- (E) Those who are eligible for non-subsidized QHP coverage. Individuals who select a plan are not fully enrolled until they effectuate their enrollment by paying their first month's premium.
- (F) Individuals newly Medi-Cal eligible.
- (G) Individuals eligible for MCAP.
- (H) The count of individuals enrolled into Medi-Cal FFS may include enrollees who have yet to choose a Medi-Cal MCP or individuals who are not eligible for the full scope of Medi-Cal benefits (see Section 4).
- (I) Individuals who selected into a Medi-Cal MCP.
- (J) Individuals who defaulted into a Medi-Cal MCP.
- (K) Individuals who enrolled in County Organized Health Systems (COHS).

¹ DHCS and Covered CA facilitate the transition of individuals from APTC to Medi-Cal to avoid gaps in coverage.

² Individuals may be included in this count more than once if they submitted multiple applications.

SECTION 1 APPLICATIONS RECEIVED

Applications Received Summary

The number of applications received through CalHEERS, County Human Services Agencies, and applications received through other venues (transition APTC to Medi-Cal, Express Lane, and HPE) declined overall during this reporting period as compared to the January – March 2016 report. In particular, the number of applications received by CalHEERS declined by 62 percent because the prior reporting period (January – March 2016) included the Covered California open enrollment period ending January 31, 2016.

Data Sources and Methods

CalHEERS reports the number of applications and whether they were submitted online, by phone, mail, e-mail or fax (Section 1.1). Figure 1.1 and Table 1.2 do not include CalHEERS applications that were county initiated applications. Section 2 combines applications submitted to CalHEERS and applications initiated by County Human Service Agencies.

The SAWS provides data on the total number of applications initiated online, phone, mail/fax, in-person, or outreach effort (Section 1.2). Outreach efforts may include eligibility workers stationed outside of County Human Services Agency offices, outreach e-mail, Community Based Organizations, In-Home Supportive Services, and call centers maintained by the SAWS. This report does not capture individuals eligible for Medi-Cal as a result of their receipt of California Work Opportunity and Responsibility to Kids (CalWORKs) or Supplemental Security Income (SSI).

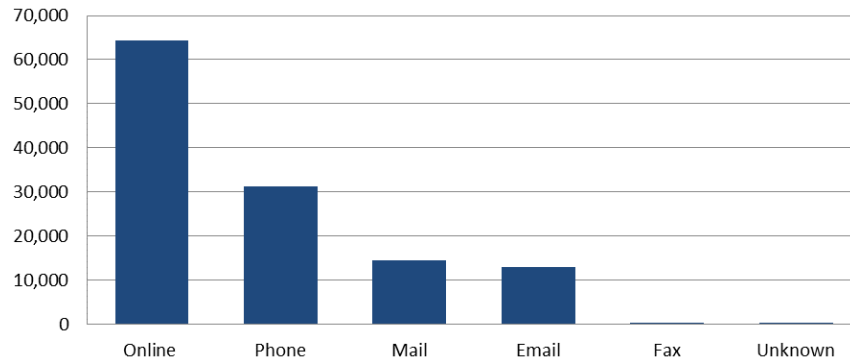
This report includes the number of applications received for the MCAP program, a total that was not included in prior reports. Section 1.3 includes applications processed through other eligibility pathways. Transitions from APTC to Medi-Cal data is reported by CalHEERS and MEDS and consists of individuals who are no longer eligible for APTC but are eligible for Medi-Cal. Another eligibility pathway is Express Lane Eligibility (ELE), which is a program that waives the need for a Medi-Cal eligibility determination for 12 months if the individual is enrolled in CalFresh. Hospital Presumptive Eligibility (HPE) applications are submitted online by qualified HPE Providers. ELE and HPE data are reported by DHCS and commencing with this report, MCAP applications are reported by MAXIMUS Inc.

Applications Received with the Help of Assister or Navigator Summary

The volume of applications filed with the help of an assister or navigator, as reported by CalHEERS, decreased by 71 percent as compared to the January – March 2016 reporting period. Applications may be filed with the assistance of licensed insurance agents, brokers, or web brokers who are trained and certified. Certified Enrollment Counselors (CECs) are in-person assisters employed by Certified Enrollment Entities, including community-based organizations, faith-based organizations, school districts, and tax preparers. Covered California trains and certifies CECs. Service Center Representatives are staff members at the Covered California call center. Plan-Based Enrollers are health plan employees authorized to assist with individual marketplace enrollments. County Eligibility Workers are also available to provide assistance with filing applications.

SECTION 1.1 APPLICATIONS RECEIVED THROUGH CALHEERS BY SUBMISSION CHANNEL

**Figure 1.1. Applications Received Through CalHEERS by Submission Channel
April 1, 2016 – June 30, 2016**



Source: CalHEERS

- Approximately 52 percent of all applications received through CalHEERS April – June 2016 were initiated online, including those filed with and without assistance.
- The number of applications initiated online decreased by 61 percent from the prior reporting period.

Table 1.1. Applications Received Through CalHEERS by Submission Channel

Submission Channel	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications ³	Net Change of Applications	Percent Change of Applications
Online	64,269	52	165,679	51	(101,410)	(61)
Phone	31,186	25	84,959	26	(53,773)	(63)
Mail	14,477	12	28,385	9	(13,908)	(49)
Email	12,933	10	46,537	14	(33,604)	(72)
Fax	381	<1	1,150	<1	(769)	(67)
Unknown ⁴	11	<1	169	<1	(158)	(93)
Total	123,257	N/A	326,879	N/A	(203,622)	(62)

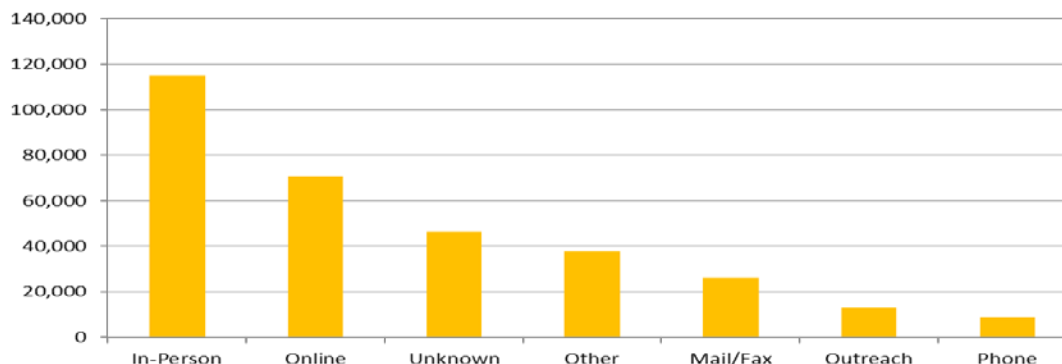
Source: CalHEERS

³ The Percent of Applications are rounded to nearest whole number.

⁴ CalHEERS is working to resolve the data defect "Unknown" submission channel.

SECTION 1.2 APPLICATIONS RECEIVED THROUGH COUNTY HUMAN SERVICES AGENCY OFFICES BY SUBMISSION CHANNEL

**Figure 1.2. Applications Received Through County Human Services Agency Offices by Submission Channel
April 1, 2016 – June 30, 2016**



Source: SAWS

- The largest share of applications were initiated in-person (36 percent), followed by online applications (22 percent).
- The cumulative percentage of applications initiated online and in-person increased slightly as compared to the prior reporting period.

Table 1.2. Applications Received Through County Human Services Agency Offices by Submission Channel

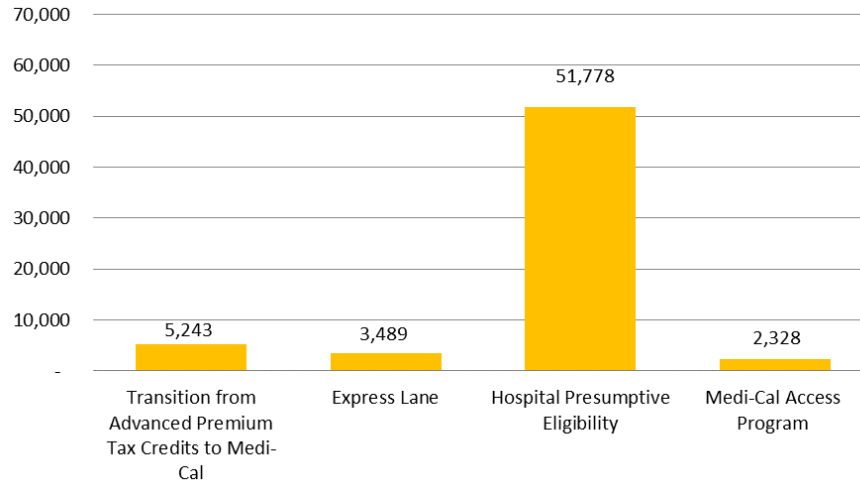
Submission Channel	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications	Net Change of Applications	Percent Change of Applications
In-Person	114,891	36	123,644	27	(8,753)	(7)
Online ⁶	70,882	22	130,905	28	(60,023)	(46)
Unknown	46,306	15	68,802	15	(22,496)	(33)
Other	37,852	12	26,407	6	11,445	43
Mail/Fax	25,966	8	74,816	16	(48,850)	(65)
Outreach	13,064	4	13,940	3	(876)	(6)
Phone	8,883	3	25,495	5	(16,612)	(65)
Total	317,844	N/A	464,009	N/A	(146,165)	(31)

Source: SAWS

⁶ The three online application systems are: Benefits CalWIN: www.mybenefitscalwin.org, C-4 Yourself: www.c4yourself.com, and Your Benefits Now: <https://www.dpssbenefits.lacounty.gov/ybn/Index.html>

SECTION 1.3 APPLICATIONS RECEIVED PROCESSED THROUGH OTHER ELIGIBILITY PATHWAYS

**Figure 1.3. Applications Processed Through Other Eligibility Pathways
April 1, 2016 – June 30, 2016**



Source: CalHEERS, MAXIMUS Inc., and MEDS

- 60,510 individuals became newly eligible to Medi-Cal through alternative channels.
- 2,328 applications for MCAP were received.
- The share of applications submitted through HPE for this reporting period was 86 percent.

Table 1.3. Applications Processed Through Other Eligibility Pathways

Pathway	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications	Net Change of Applications	Percent Change of Applications
Transition from APTC to Medi-Cal	5,243	8	54,530	46	(49,287)	(90)
Express Lane	3,489	6	4,539	4	(4,539)	(23)
HPE	51,778	82	57,123	48	(5,345)	(9)
MCAP	2,328	4	2,379	2	(51)	(2)
Total	62,838	N/A	118,571	N/A	(55,733)	(47)

Source: CALHEERS, MAXIMUS Inc., and MEDS

SECTION 1.4 APPLICATIONS FILED WITH THE HELP OF AN ASSISTER OR NAVIGATOR

Table 1.4. Applications Filed with the Help of an Assister or Navigator

Submission Channel	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications	Net Change of Applications	Percent Change of Applications
Agent	26,011	63	99,170	69	(73,159)	(74)
Service Center Representative	10,918	26	25,245	18	(14,327)	(57)
Certified Enrollment Counselor	2,943	7	13,925	10	(10,982)	(79)
Plan Based Enroller	1,000	3	3,023	2	(2,023)	(67)
County Eligibility Worker	556	1	1,410	1	(854)	(61)
Total	41,428	N/A	142,773	N/A	(101,345)	(71)

Source: CALHEERS

- The volume of applications filed with an assister or navigator decreased by approximately 71 percent.
- Approximately 4 percent of applications determined eligible for Medi-Cal were filed with the help of an Agent or Certified Enrollment Counselor.

SECTION 2 INDIVIDUALS INCLUDED ON APPLICATIONS AND APPLICANT DEMOGRAPHICS

Individuals Included On Applications and Applicant Demographics Summary

This section reports the total number of individuals on applications compared to the number of applications received by reporting period and demographic data. There was an average of 1.9 individuals per application during this reporting period, as compared to 1.7 during the prior reporting period. The previous reporting period included the Covered California open enrollment period that ended on January 31, 2016. For applicant demographic data, the proportion of CalHEERS applicants whose preferred written language is Spanish, as compared to English, increased from the prior reporting period.

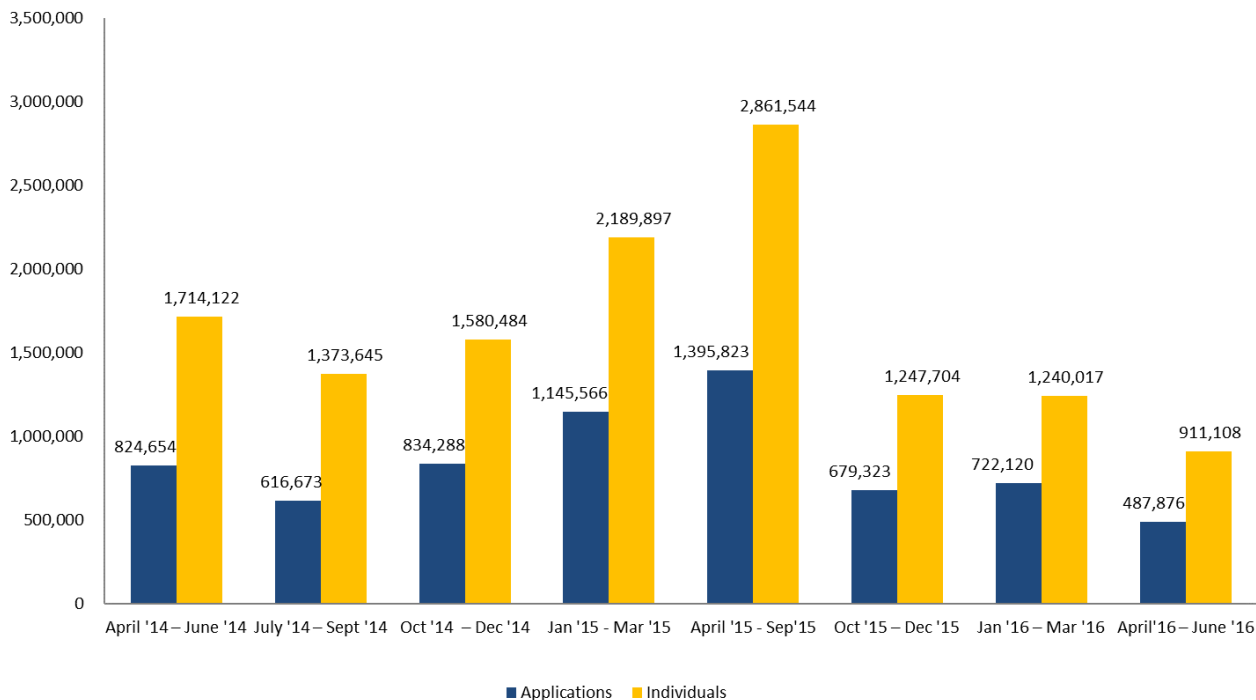
Data Sources and Methods

CalHEERS reports the number of individuals on applications and demographic data (age, gender, race, ethnicity, and written and spoken language preferences). The CalHEERS data includes applications submitted directly and those that are initiated by County Human Services Agencies through the SAWS eHIT interface. This is in contrast to the number of applications reported by CalHEERS in Section 1, where SAWS data is reported separately. Efforts are underway to develop a methodology to report SAWS applicant information. None of the CalHEERS demographic data is omitted or combined for this report. Individuals may be counted more than once if they submitted multiple applications.

There were 60,510 applications for Transition from APTC to Medi-Cal, Express Lane, and HPE reported in Section 1. Applications for these programs include one individual per application. Application demographic data for these programs and MCAP is not available for this report.

SECTION 2.1 INDIVIDUALS INCLUDED ON CALHEERS APPLICATIONS

**Figure 2.1. Number of Applications and Individuals Included on Applications
April 1, 2016 – June 30, 2016**



Source: CalHEERS

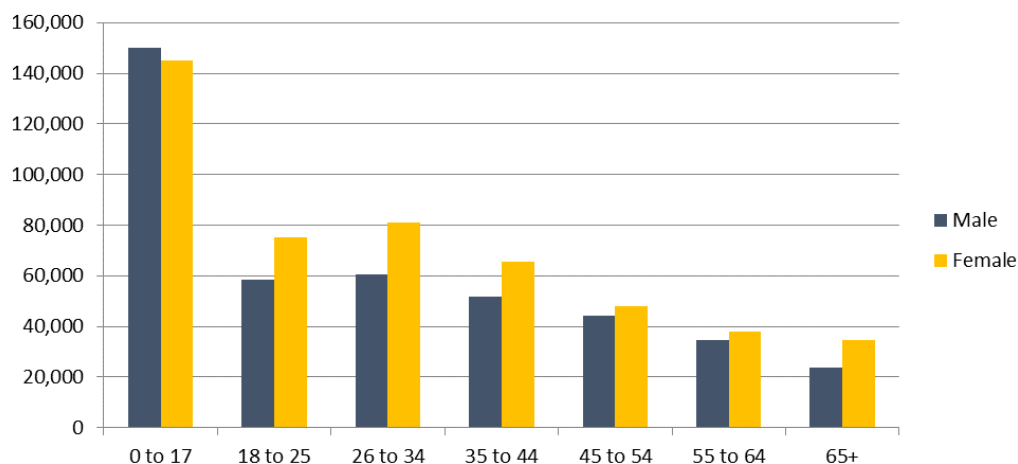
Note: April – September 2015 represent 6-month reporting period.

- CalHEERS reports 487,876 total applications received either directly to CalHEERS or through County Human Services Agency offices from April – June 2016. The total represents a portion of the total number (A) Applications Received reported in the Summary on page 6 and does not include HPE, Express Lane, and Transition from APTC to Medi-Cal applications.
- Approximately 230,000 fewer applications were submitted April – June 2016, as compared to January – March 2016, which included the Covered California open enrollment period ending January 31, 2016.
- Applications during this reporting period reflect special enrollments due to qualifying life events (such as the loss of job-based coverage or the birth of a child). Applications for Medi-Cal coverage are accepted throughout the year.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

SECTION 2.2 APPLICANT DEMOGRAPHICS (GENDER, AGE)

Figure 2.2. Age and Gender of Applicants
April 1, 2016 – June 30, 2016



Source: CalHEERS

- 295,234 children (ages 0 to 17) and 133,567 young adults (ages 18 to 25) applied for health insurance through CalHEERS.
- Children (ages 0 to 17) and adults (ages 26 to 34) continue to represent the largest share of applicants received through CalHEERS during this and the prior reporting periods.

Table 2.2. Age and Gender of Applicants

Age, Gender ⁷	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Prior Reporting Period and Current Reporting Period	
	Number of Individuals	Percent of Individuals ⁸	Number of Individuals	Percent of Individuals	Net Change of Individuals	Percent Change of Individuals
0 to 17	295,234	32	344,363	28	(49,129)	(14)
18 to 25	133,567	15	195,901	16	(62,334)	(32)
26 to 34	141,537	16	221,466	18	(79,929)	(36)
35-44	117,538	13	159,829	13	(42,291)	(26)
45 to 54	92,101	10	145,565	12	(53,464)	(37)
55 to 64	72,279	8	114,090	9	(41,811)	(37)
65+	57,938	6	58,800	5	(862)	(1)
Male	423,156	46	599,233	48	(176,077)	(29)
Female	487,038	54	640,781	52	(153,743)	(24)

Source: CalHEERS

⁷ The number of “unknown” within the age and gender data results in a discrepancy between these totals and the number of individuals reported in Figure 2.2. CalHEERS is resolving this defect.

⁸ The Percent of Individuals are rounded to nearest whole number.

SECTION 2.3 APPLICANT DEMOGRAPHICS (RACE)

**Table 2.3. Race of Applicants Included on Applications
(of Those Who Reported Race)**

Race	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Prior Reporting Period and Current Reporting Period	
	Number of Individual Applicants by Race	Percent of Individual Applicants by Race ⁹	Number of Individual Applicants by Race	Percent of Individual Applicants by Race	Net Change of Individuals Applicants by Race	Percent Change of Individuals Applicants by Race
White	281,501	57	335,674	53	(54,173)	(16)
Black or African American	68,276	14	82,262	13	(13,986)	(17)
Other	44,952	9	77,826	12	(32,874)	(42)
Filipino	18,041	4	26,738	4	(8,697)	(33)
Chinese	17,231	3	25,630	4	(8,399)	(33)
Mixed Race	16,570	3	22,866	4	(6,296)	(28)
Vietnamese	13,240	3	17,444	3	(4,204)	(24)
Other Asian	8,412	2	13,164	2	(4,752)	(36)
Asian Indian	7,994	2	10,701	2	(2,707)	(25)
American Indian and/or Alaska Native	5,694	1	6,698	1	(1,004)	(15)
Korean	5,566	1	11,214	2	(5,648)	(50)
Other Pacific Islander	2,797	1	2,648	<1	149	6
Samoan	1,275	<1	1,748	<1	(473)	(27)
Japanese	1,264	<1	2,240	<1	(976)	(44)
Native Hawaiian	820	<1	1,009	<1	(189)	(19)
Guamanian or Chamorro	432	<1	536	<1	(104)	(19)
Not Reported	417,043	N/A	601,619	N/A	(184,576)	(31)
Total	911,108	N/A	1,240,017	N/A	(328,909)	(27)

Source: CalHEERS

- More than half of applicants applying through CalHEERS or the counties indicated their race, and the distribution of racial groups was similar to prior reporting period.

⁹ The percent of Individuals are rounded to nearest whole number. Percentages are calculated as a proportion of the total enrollees, who reported their language.

SECTION 2.4 APPLICANT DEMOGRAPHICS (ETHNICITY)

**Table 2.4. Ethnicity of Applicants Included on Applications
(of Those Who Reported Race)**

Ethnicity	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Individual Applicants by Ethnicity	Percent of Individual Applicants by Ethnicity ¹⁰	Number of Individual Applicants by Ethnicity	Percent of Individual Applicants by Ethnicity	Net Change of Individual Applicants by Ethnicity	Percent Change of Individual Applicants by Ethnicity
Hispanic – ethnic origin not reported	307,891	34	373,663	30	(65,772)	(18)
Hispanic – ethnic origin reported	173,937	19	224,432	18	(50,495)	(22)
Mexican/Mexican American/Chicano	107,420	62	169,971	76	(62,551)	(37)
Other	63,557	37	43,440	19	20,117	46
Puerto Rican	1,396	1	7,511	3	(6,115)	(81)
Mixed Ethnicity	918	1	2,504	1	(1,586)	(63)
Cuban	646	<1	1,006	<1	(360)	(36)
Not Hispanic	388,707	43	534,829	43	(146,122)	(27)
Ethnicity not reported	40,573	4	107,093	N/A	(66,520)	(62)
Total	911,108	N/A	1,240,017	N/A	(328,909)	(27)

Source: CalHEERS

- Approximately 96 percent of applicants reported their ethnicity. Among those who reported being Hispanic, 36 percent reported their specific ethnic origin.
- 55 percent of those reporting their ethnicity in the second quarter of 2016 identified as Hispanic, similar to 53 percent in the prior reporting period.¹¹

¹⁰ The percent of Individuals are rounded to nearest whole number.

¹¹ Total count of individuals, who reported being Hispanic is divided by the number of individuals, who reported ethnicity.

SECTION 2.5 APPLICANT DEMOGRAPHICS (WRITTEN LANGUAGE)

**Table 2.5. Primary Written Language of Applicants Included on Applications
(of Those Who Reported a Primary Written Language)**

Primary Language	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applicants by Language	Percent of Applicants by Language ¹²	Number of Applicants by Language	Percent of Applicants by Language	Net Change of Applicants by Language	Percent Change of Applicants by Language
English	520,893	67	784,384	73	(263,491)	(34)
Spanish	240,394	31	266,783	25	(26,389)	(10)
Vietnamese	4,775	1	5,586	1	(811)	(15)
Traditional Chinese Character	4,616	1	7,653	1	(3,037)	(40)
Korean	2,250	<1	4,717	<1	(2,467)	(52)
Russian	951	<1	1,214	<1	(263)	(22)
Armenian	941	<1	1,901	<1	(960)	(50)
Arabic	857	<1	947	<1	(90)	(10)
Tagalog	827	<1	1,077	<1	(250)	(23)
Farsi	793	<1	998	<1	(205)	(21)
Mandarin	294	<1	986	<1	(692)	(70)
Cambodian	202	<1	279	<1	(77)	(28)
Hmong	173	<1	235	<1	(62)	(26)
Cantonese	84	<1	238	<1	(154)	(65)
Not Reported	133,058	N/A	163,019	N/A	(29,961)	(18)
Total	911,108	N/A	1,240,017	N/A	(328,909)	(27)

Source: CalHEERS

- The share of CalHEERS applicants whose primary written language is Spanish (31 percent) as compared to English (67 percent) increased from prior reporting period.

¹² The percent of Applicants are rounded to nearest whole number. Percentages are calculated as proportion of the total enrollees, who reported their language.

SECTION 2.6 APPLICANT DEMOGRAPHICS (SPOKEN LANGUAGE)

**Table 2.6. Primary Spoken Language of Applicants Included on Applications
(of Those Who Reported a Spoken Language)**

Primary Language	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Applicants by Language	Percent of Applicants by Language ¹³	Number of Applicants by Language	Percent of Applicants by Language	Net Change of Applicants by Language	Percent Change of Applicants by Language
English	571,409	64	840,981	70	(269,572)	(32)
Spanish	288,387	32	319,235	27	(30,848)	(10)
Vietnamese	7,921	1	9,221	1	(1,300)	(14)
Cantonese	4,298	<1	5,408	1	(1,110)	(21)
Mandarin	3,275	<1	6,724	1	(3,449)	(51)
Armenian	3,244	<1	2,785	<1	459	16
Korean	2,658	<1	5,275	<1	(2,617)	(50)
Arabic	2,444	<1	2,708	<1	(264)	(10)
Tagalog	2,240	<1	2,564	<1	(324)	(13)
Russian	2,164	<1	2,393	<1	(229)	(10)
Farsi	1,904	<1	2,195	<1	(291)	(13)
Hmong	889	<1	1,115	<1	(226)	(20)
Cambodian	733	<1	607	<1	126	21
Not Reported	19,542	N/A	38,806	N/A	(19,264)	(50)
Total	911,108	N/A	1,240,017	N/A	(328,909)	(27)

Source: CalHEERS

- The share of CalHEERS applicants whose primary spoken language is Spanish (32 percent) is similar to previous reporting periods. The share of applicants whose primary spoken language is English (64 percent) decreased from the prior reporting period (70 percent).

¹³ The percent of Applicants are rounded to nearest whole number.

SECTION 3 ELIGIBLE INDIVIDUALS

Eligible Individuals and Demographics Summary

The number of individuals newly eligible for Medi-Cal and QHPs decreased from the prior reporting period. The prior reporting period included the Covered California open enrollment period ending January 31, 2016. The number of individuals eligible for MCAP decreased by three percent, while the volume of Medi-Cal eligible decreased by 36 percent and QHP by 75 percent.

The demographic data indicates that individuals ages 26 to 34 represent 25 percent of those who selected a QHP, while this same age group is 14 percent of the Medi-Cal eligible.

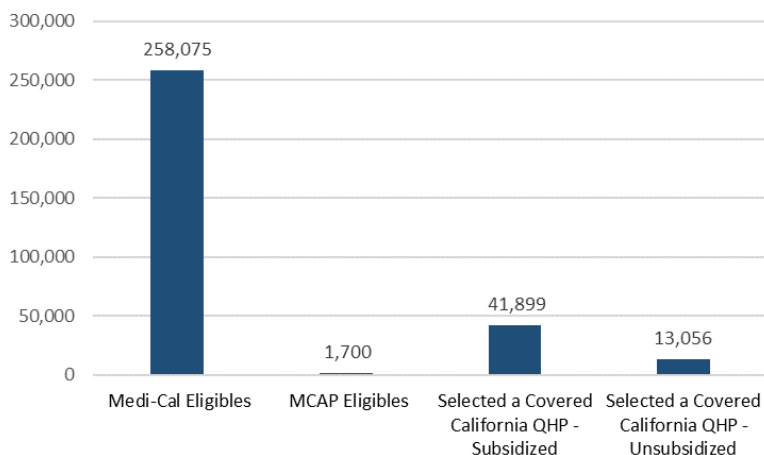
Data Sources and Methods

CalHEERS reports demographic data for individuals who are enrolled and selected a QHP. The demographic data includes age, gender, race, ethnicity, and primary language. Demographic data does not include individuals found eligible for a QHP who have not paid their first premium. Subsidized QHP coverage includes enrollees with APTC and/or cost-sharing reductions. The Medi-Cal eligible data, except MCAP, is derived from MEDS and includes age, gender, race/ethnicity, and primary written and spoken language of enrollees.

Medi-Cal eligible data may include individuals who are eligible for Medi-Cal as a result of their receipt of CalWORKs or eligibility determination for SSI. The total number of Medi-Cal eligible represents individuals who were not enrolled in the previous quarter. MCAP eligibility totals are reported by MAXIMUS Inc., a DHCS vendor.

SECTION 3.1 DISTRIBUTION OF ELIGIBLE INDIVIDUALS ACROSS INSURANCE AFFORDABILITY PROGRAMS

**Figure 3.1. Distribution of Eligible Individuals Across Insurance Affordability Programs
April 1, 2016 – June 30, 2016**



Source: CalHEERS, MEDS and MAXIMUS Inc.

- Overall, 96 percent of eligible individuals were eligible for Medi-Cal, MCAP, or subsidized QHPs as compared to 95 percent in the previous reporting period. The remaining four percent qualified for unsubsidized QHPs; and
- The 76 percent of individuals determined eligible for QHPs who selected a plan and qualified for subsidies is a smaller share than the 85 percent eligible for subsidies in the previous reporting period.

Table 3.1. Distribution of Eligible Individuals Across Insurance Affordability Programs

Program Eligibility	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals	Percent of Eligible Individuals ¹⁴	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
Medi-Cal Eligibles	258,075	82	403,386	67	(145,311)	(36)
MCAP Eligibles	1,700	1	1,751	<1	(51)	(3)
Selected a Covered California QHP - Subsidized ¹⁵	41,899	13	165,792	28	(123,893)	(75)
Selected a Covered California QHP - Unsubsidized	13,056	4	29,079	5	(16,023)	(55)
Total	314,730	N/A	600,008	N/A	(285,278)	(48)

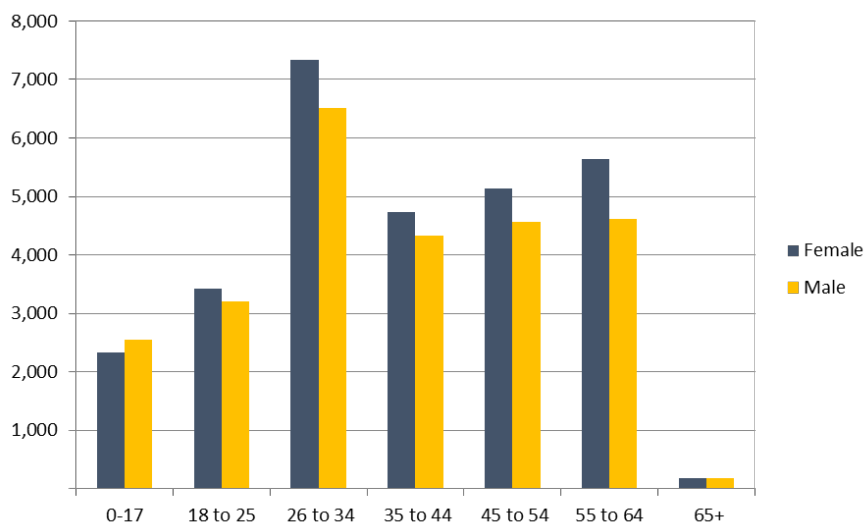
Source: CalHEERS, MEDS and MAXIMUS Inc.

¹⁴ The percent of Individuals are rounded to nearest whole number.

¹⁵ For subsidized and unsubsidized QHPs, "eligible individuals," refers to eligible individuals, who selected a QHP.

SECTION 3.2 QHP DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (GENDER, AGE)

**Figure 3.2. Age and Gender of Eligible Individuals Selecting a QHP
April 1, 2016 – June 30, 2016**



Source: CalHEERS

- About 4,800 children and youth (ages 0 to 17) and over 6,000 young adults (ages 18 to 25) were determined eligible for QHP and selected a plan in the reporting period.
- Individuals ages 26 to 34 represent the age group with the largest share of individuals who selected a QHP.

Table 3.2. Age and Gender of Eligible Individuals Selecting a QHP

Age, Gender ¹⁶	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals	Percent of Eligible Individuals ¹⁷	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
0 to 17	4,889	9	11,090	6	(6,201)	(56)
18 to 25	6,626	12	27,177	14	(20,551)	(76)
26 to 34	13,847	25	48,945	25	(35,098)	(72)
35 to 44	9,052	17	32,671	17	(23,619)	(72)
45 to 54	9,701	18	39,579	20	(29,878)	(75)
55 to 64	10,243	19	33,899	17	(23,656)	(70)
65+	363	1	1,395	1	(1,032)	(74)
Male	25,957	47	101,987	48	(76,030)	(75)
Female	28,764	53	92,769	52	(64,005)	(69)

Source: CalHEERS

¹⁶ The discrepancy between these totals and the number of individuals selecting a QHP is due to a CalHEERS defect.

¹⁷ The percent of Individuals are rounded to nearest whole number.

SECTION 3.3 QHP DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (RACE)

**Table 3.3. Race of Eligible Individuals Selecting a QHP
(of Those Who Reported Race)**

Race	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race ¹⁸	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race	Net Change of Eligible Individuals by Race	Percent Change of Eligible Individuals by Race
White	15,586	57	51,990	53	(36,404)	(70)
Other	2,330	9	12,680	13	(10,350)	(82)
Chinese	2,091	8	6,476	7	(4,385)	(68)
Mixed Race	1,266	5	4,612	5	(3,346)	(73)
Filipino	1,180	4	4,478	5	(3,298)	(74)
Vietnamese	1,114	4	2,444	3	(1,330)	(54)
Black or African American	1,062	4	5,337	5	(4,275)	(80)
Asian Indian	925	3	2,369	2	(1,444)	(61)
Korean	683	3	3,637	4	(2,954)	(81)
Other Asian	467	2	1,905	2	(1,438)	(75)
American Indian and/or Alaska Native	205	1	718	1	(513)	(71)
Japanese	205	1	595	1	(390)	(66)
Other Pacific Islander	58	<1	280	<1	(222)	(79)
Guamanian or Chamorro	<20	<1	83	<1	N/A	N/A
Samoan	<20	<1	86	<1	N/A	N/A
Native Hawaiian	<20	<1	59	<1	N/A	N/A
Not Reported	27,878	N/A	97,122	N/A	(69,244)	(71)
Total	55,088	N/A	194,871	N/A	(139,783)	(72)

Source: CalHEERS

- Approximately 49 percent of QHP eligible individuals indicated their race. Applicants are not required to indicate their race.
- The racial distribution of QHP eligible individuals is comparable to the racial distribution of individuals who applied through CalHEERS (Section 2.3), including those found eligible for Medi-Cal.

¹⁸ Percentages are calculated as a proportion of the total enrollees who reported their language and rounded to nearest whole number.

SECTION 3.4 QHP DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (ETHNICITY)

**Table 3.4. Ethnicity of Eligible Individuals Selecting a QHP
(of Those Who Reported an Ethnicity)**

Ethnicity ¹⁹	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Ethnicity	Percent of Eligible Individuals by Ethnicity ²⁰	Number of Eligible Individuals by Ethnicity	Percent of Eligible Individuals by Ethnicity	Net Change of Eligible Individuals by Ethnicity	Percent Change of Eligible Individuals by Ethnicity
Hispanic – ethnic origin reported	6,417	12	39,928	20	(33,511)	(84)
Mexican/Mexican American/Chicano	4,828	75	28,826	72	(23,998)	(83)
Other	1,270	20	6,905	17	(5,635)	(82)
Puerto Rican	139	2	3,312	1	(3,173)	(96)
Mixed Ethnicity	123	2	657	2	(534)	(81)
Cuban	57	1	228	1	(171)	(75)
Hispanic – ethnic origin not reported	1,009	2	5,381	3	(4,372)	(81)
Not Hispanic	25,913	47	83,633	43	(57,720)	(69)
Ethnicity not reported	21,749	39	65,929	34	(44,180)	(67)
Total	55,088	N/A	194,871	N/A	(139,783)	(72)

Source: CalHEERS

- A total of 33,339 QHP eligible individuals (61 percent) reported their ethnicity. Of those individuals, 22 percent identified as Hispanic. Among all CalHEERS applicants during the reporting period, including those found eligible for Medi-Cal, 55 percent identified as Hispanic (Section 2.4).
- Among eligible individuals who selected a QHP and reported being Hispanic, 86 percent reported their specific ethnic origin. Eligible individuals are not required to indicate their ethnicity or ethnic origin.

¹⁹ Applicants through CalHEERS have the opportunity to report their ethnicity as Hispanic or not Hispanic. Those, who report being Hispanic, are asked a follow-up question regarding their ethnic origin. “Eligible individuals,” refers to eligible individuals, who also selected a QHP.

²⁰ Percentages of sub-categories of Hispanic-ethnic origin reported are derived from Hispanic-ethnic origin reported. Percentages are calculated as a proportion of the total enrollees, who reported their ethnicity and rounded to nearest whole number.

SECTION 3.5 QHP DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (WRITTEN LANGUAGE)

**Table 3.5. Primary Written Language of Eligible Individuals Selecting a QHP
(of Those Who Reported a Primary Written Language)**

Primary Written Language	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language ²¹	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language	Net Change of Eligible Individuals by Language	Percent Change of Eligible Individuals by Language
English	43,708	91	151,292	85	(107,584)	(71)
Spanish	2,663	6	20,112	11	(17,449)	(87)
Traditional Chinese character	778	2	2,931	2	(2,153)	(73)
Vietnamese	339	1	647	<1	(308)	(48)
Korean	296	<1	1,845	1	(1,549)	(84)
Mandarin	116	<1	509	<1	(393)	(77)
Russian	34	<1	101	<1	(67)	(66)
Arabic	20	<1	43	<1	(23)	(53)
Tagalog	20	<1	118	<1	(98)	(83)
Farsi	<20	<1	53	<1	(35)	(66)
Armenian	<20	<1	<20	<1	N/A	N/A
Cantonese	<20	<1	81	<1	N/A	N/A
Cambodian	<20	<1	<20	<1	N/A	N/A
Hmong	<20	<1	<20	<1	N/A	N/A
Not Reported	7,073	N/A	17,094	N/A	(10,021)	(59)
Total ²²	55,079	N/A	194,871	N/A	(139,792)	(72)

Source: CalHEERS

- A majority of eligible individuals, who selected QHPs, indicated English as their primary written language (91 percent), with notable groups preferring written communication in Spanish (six percent) or traditional Chinese characters (two percent).
- English language preference is more prevalent among eligible individuals who selected a QHP, as compared to the overall pool of CalHEERS applicants. Among all CalHEERS applicants in the reporting period, including those found eligible for Medi-Cal, 67 percent preferred English and 31 percent preferred Spanish for written communication (Section 2.5).

²¹ Percentages are calculated as a proportion of the total enrollees, who reported their language and rounded to nearest whole number.

²² This is the actual total without the de-identified data (HIPAA Privacy Rule, 45 CFR 164.514(a)).

SECTION 3.6 QHP DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (SPOKEN LANGUAGE)

**Table 3.6. Primary Spoken Language of Eligible Individuals Selecting a QHP
(of Those Who Reported a Primary Spoken Language)**

Primary Spoken Language	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language ²³	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language	Net Change of Eligible Individuals by Language	Percent Change of Eligible Individuals by Language
English	43,444	90	150,307	84	(106,863)	(71)
Spanish	2,771	6	20,684	12	(17,913)	(87)
Mandarin	767	2	3,013	2	(2,246)	(75)
Cantonese	481	1	1,110	1	(629)	(57)
Vietnamese	426	1	784	<1	(358)	(46)
Korean	305	1	1,948	1	(1,643)	(84)
Russian	49	<1	169	<1	(120)	(71)
Tagalog	48	<1	206	<1	(158)	(77)
Arabic	32	<1	71	<1	(39)	(55)
Farsi	32	<1	74	<1	(42)	(57)
Cambodian	<20	<1	33	<1	N/A	N/A
Armenian	<20	<1	54	<1	N/A	N/A
Hmong	<20	<1	<20	N/A	N/A	N/A
Not Reported	6,714	N/A	16,405	N/A	(9,691)	(59)
Total ²⁴	55,081	N/A	194,871	N/A	(139,790)	(72)

Source: CalHEERS

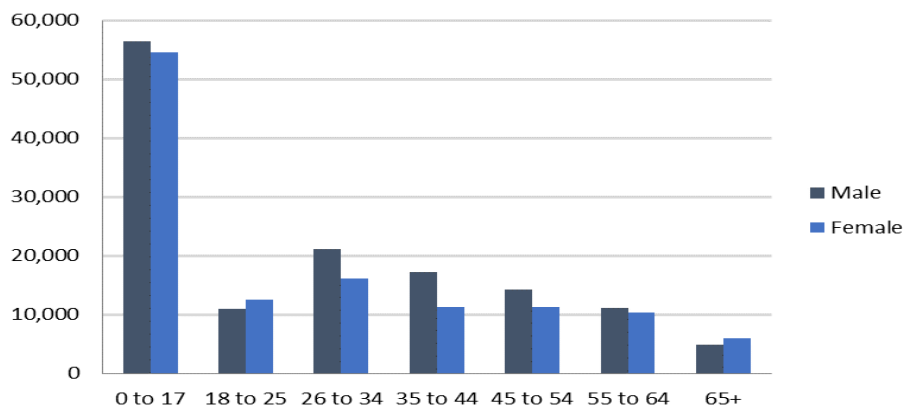
- A majority of eligible individuals who selected QHPs indicated English as their primary spoken language (90 percent), followed by Spanish at six percent and Mandarin at 2 percent.
- English language preference was more dominant among eligible individuals who selected a QHP, as compared to the overall pool of applicants received through CalHEERS. Of the CalHEERS applicants, including those found eligible for Medi-Cal, 64 percent preferred English and 32 percent preferred Spanish for spoken communication (Section 3.5).

²³ Percentages are calculated as a proportion of the total enrollees who reported their language and rounded to nearest whole number.

²⁴ This is the actual total without the de-identified data (HIPAA Privacy Rule, 45 CFR 164.514(a)).

SECTION 3.7 MEDICAL DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (GENDER, AGE)

**Figure 3.7. Age and Gender of Individuals Eligible for Medi-Cal
April 1, 2016 – June 30, 2016**



Source: MEDS

- Approximately 111,000 children and youth (ages 0 to 17) and about 23,000 young adults (ages 18 to 25) were determined eligible for Medi-Cal coverage.
- The largest share of individuals eligible for Medi-Cal were ages of 0 to 17, comparable to previous reporting periods.

Table 3.7. Age and Gender of Individuals Eligible for Medi-Cal

Age, Gender ²⁵	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals	Percent of Eligible Individuals ²⁶	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
0 to 17	111,105	43	144,606	36	(33,501)	(23)
18 to 25	23,520	9	41,363	10	(17,843)	(43)
26 to 34	37,303	14	69,802	17	(32,499)	(47)
35 to 44	28,430	11	46,477	12	(18,047)	(39)
45 to 54	25,518	10	45,653	11	(20,135)	(44)
55 to 64	21,363	8	40,803	10	(19,440)	(48)
65+	10,836	4	14,682	4	(3,846)	(26)
Male	135,962	53	191,205	47	(55,243)	(29)
Female	122,113	47	212,181	53	(90,068)	(42)

Source: MEDS

²⁵ The difference in gender totals for the current reporting period is due to individuals who were newly eligible for Medi-Cal in the reporting period without a record of gender choice.

²⁶ The Percentage of Eligible Individuals is rounded to nearest whole number.

SECTION 3.8 MEDI-CAL DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (RACE/ETHNICITY)

**Table 3.8. Race/Ethnicity of Individuals
(of Those Who Reported Race/Ethnicity) Eligible for Medi-Cal**

Race	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race ²⁷	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race	Net Change of Eligible Individuals by Race	Percent Change of Eligible Individuals by Race
Hispanic	62,750	37	100,315	33	(37,565)	(37)
White	44,794	26	86,285	29	(41,491)	(48)
Other	17,525	10	34,991	12	(17,466)	(50)
Asian or Pacific Islander	12,245	7	20,856	7	(8,611)	(41)
Black	11,562	7	17,204	6	(5,642)	(33)
Chinese	6,258	4	11,584	4	(5,326)	(46)
Filipino	5,017	3	9,375	3	(4,358)	(46)
Vietnamese	4,679	3	6,567	2	(1,888)	(29)
Asian Indian	2,705	2	4,597	2	(1,892)	(41)
Korean	1,629	1	4,143	1	(2,514)	(61)
Alaskan Native or American Indian	663	<1	1,080	<1	(417)	(39)
Japanese	394	<1	925	<1	(531)	(57)
Cambodian	315	<1	415	<1	(100)	(24)
Laotian	305	<1	389	<1	(84)	(22)
Samoan	299	<1	387	<1	(88)	(23)
Hawaiian	165	<1	257	<1	(92)	(36)
Guamanian	107	<1	153	<1	(46)	(30)
Armenian	23	<1	37	<1	(14)	(38)
Unknown	1,732	N/A	2,242	N/A	(510)	(23)
Not Reported	84,908	N/A	101,584	N/A	(16,676)	(16)
Total	258,075	N/A	403,386	N/A	(145,311)	(36)

Source: MEDS

- Approximately 171,435 individuals determined eligible for Medi-Cal during April – June 2016 indicated their race/ethnicity.
- 37 percent of the individuals who reported race/ethnicity identified as Hispanic, followed by White at 26 percent, and 7 percent reported Black. Among all CalHEERS applicants, 55 percent identified as Hispanic.

²⁷ Percentages are calculated as a proportion of the total enrollees who reported their language and rounded to nearest whole number.

SECTION 3.9 MEDICAL DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (LANGUAGE)

**Table 3.9. Primary Language of Individuals
(Of Those Who Reported a Primary Language) Eligible for Medi-Cal**

Primary Language	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language ²⁸	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language	Net Change of Eligible Individuals by Language	Percent Change of Eligible Individuals by Language
English	160,980	64	270,772	69	(109,792)	(41)
Spanish	72,505	29	99,027	25	(26,522)	(27)
Vietnamese	3,456	1	4,119	1	(663)	(16)
Mandarin	2,498	1	4,713	1	(2,215)	(47)
Cantonese	2,487	1	3,320	1	(833)	(25)
Other Non- English	1,444	1	1,979	1	(535)	(27)
Arabic	1,443	1	1,580	<1	(137)	(9)
Armenian	1,108	<1	1,263	<1	(155)	(12)
Farsi	893	<1	1,334	<1	(441)	(33)
Tagalog	893	<1	1,216	<1	(323)	(27)
Russian	882	<1	1,135	<1	(253)	(22)
Korean	876	1	2,140	1	(1,264)	(59)
Other Chinese Languages	420	<1	602	<1	(182)	(30)
Hmong	172	<1	241	<1	(69)	(29)
Cambodian	162	<1	170	<1	(8)	(5)
Portuguese	133	<1	142	<1	(14)	(6)
Lao	73	<1	94	<1	(21)	(22)
French	54	<1	68	<1	(14)	(21)
Thai	51	<1	58	<1	(7)	(12)
American Sign Language (ASL)	44	<1	25	<1	(19)	(76)
Japanese	44	<1	52	<1	(8)	(15)
Samoan	40	<1	46	<1	(6)	(13)
Other Sign Language	24	<1	26	<1	(2)	(8)
Turkish	24	<1	<20	<1	N/A	N/A
Hebrew	<20	<1	21	<1	N/A	N/A
Mien	<20	<1	<20	<1	N/A	N/A
Italian	<20	<1	<20	<1	N/A	N/A
Ilocano	<20	<1	<20	<1	N/A	N/A
Polish	<20	<1	<20	<1	N/A	N/A
Unknown	2,860	<1	5,670	<1	(2,810)	(50)
Not Reported	4,466	N/A	3,515	N/A	951	27
Total	258,075	N/A	403,386	N/A	(145,311)	(36)

Source: MEDS

²⁸ Percentages are calculated as a proportion of the total enrollees, who reported their language and rounded to nearest whole number.

SECTION 4 HEALTH PLAN ENROLLMENT

QHP Plan Selection Summary

Plan selection data are presented for individuals eligible for QHPs through Covered California. QHP applicants are not fully enrolled until they submit their first premium payment.

Section 4.3 reports the minimum coverage under the unsubsidized coverage subheading and refers to subsidy-eligible individuals who select minimum coverage plans, forgoing their subsidized coverage. In prior reports, this group was combined with individuals not eligible for subsidies and chose minimum coverage plans.

The data reported for the Enhanced Silver Plan in Section 4.4 identifies the number of individuals with limited income who qualify for lower out-of-pocket costs. There are four levels of Silver Plans: Silver 70, Silver 73, Silver 84, and Silver 94.

Medi-Cal Health Plan Enrollment Summary

Medi-Cal beneficiaries are enrolled in either a contracted Medi-Cal MCP or FFS. Beneficiaries in 35 counties have a choice between two or more MCPs and beneficiaries in one county have the choice of a MCP or FFS.²⁹ For beneficiaries in these counties who do not select their MCP within 30–45 days, and after repeated efforts (a letter, followed by two phone calls) to encourage choice, the State will identify individuals' claims and data to make a default selection into a plan based on known sources of care, including previous providers and utilization history. There were 194,062 Medi-Cal beneficiaries in FFS for this reporting period.

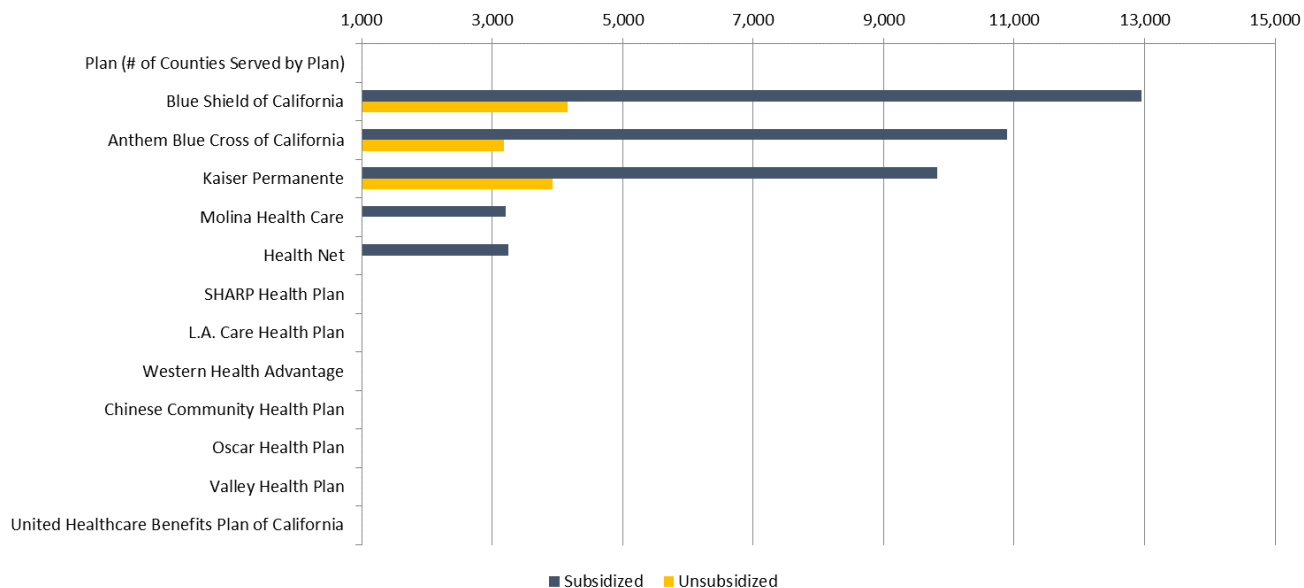
Enrollment data for new enrollees in COHS plans are also presented. Each COHS is a non-profit, independent public agency which contracts with Medi-Cal to administer benefits through local care providers. Beneficiaries in 22 COHS do not have other health plans from which to choose. Federal regulation limits the collective maximum beneficiary enrollment in COHS plans to 10 percent of the Medi-Cal population.

There are several factors that contribute to the difference in the count of individuals eligible for Medi-Cal and the count enrolled in Medi-Cal health plans and fee-for-service: 1) individuals who were newly eligible in the reporting quarter and enrolled into a Medi-Cal health plan without record of whether the enrollment was a selection or a default, 2) enrollees who could be enrolled into a Medi-Cal health plan, but who had not made a choice or been defaulted as of the end of the reporting period, and 3) individuals who lost eligibility before enrollment into a health plan.

²⁹ See a description of Medi-Cal's managed care models here - <http://www.dhcs.ca.gov/provgovpart/Documents/MMCDModelFactSheet.pdf>

SECTION 4.1 HEALTH PLAN ENROLLMENT (QHP SELECTED BY COVERED CA ENROLLEES)

**Figure 4.1. QHPs Selected by Covered California Enrollees
April 1, 2016 – June 30, 2016**



Source: CalHEERS

Note: This figure represents health plans selected by individuals eligible for QHPs; individuals are not fully enrolled until they submit their first premium payment.

- The number of eligible individuals who selected a QHP decreased during this reporting period, relative to the prior reporting period.
- Blue Shield of California and Anthem Blue Cross of California were the most frequently selected QHPs.
- Generally, individuals with and without subsidy eligibility made similar health plan selections.

SECTION 4.1 HEALTH PLAN ENROLLMENT (QHPS SELECTED BY COVERED CA ENROLLEES (CONT'D))

Table 4.1. QHPs Selected by Covered California Enrollees

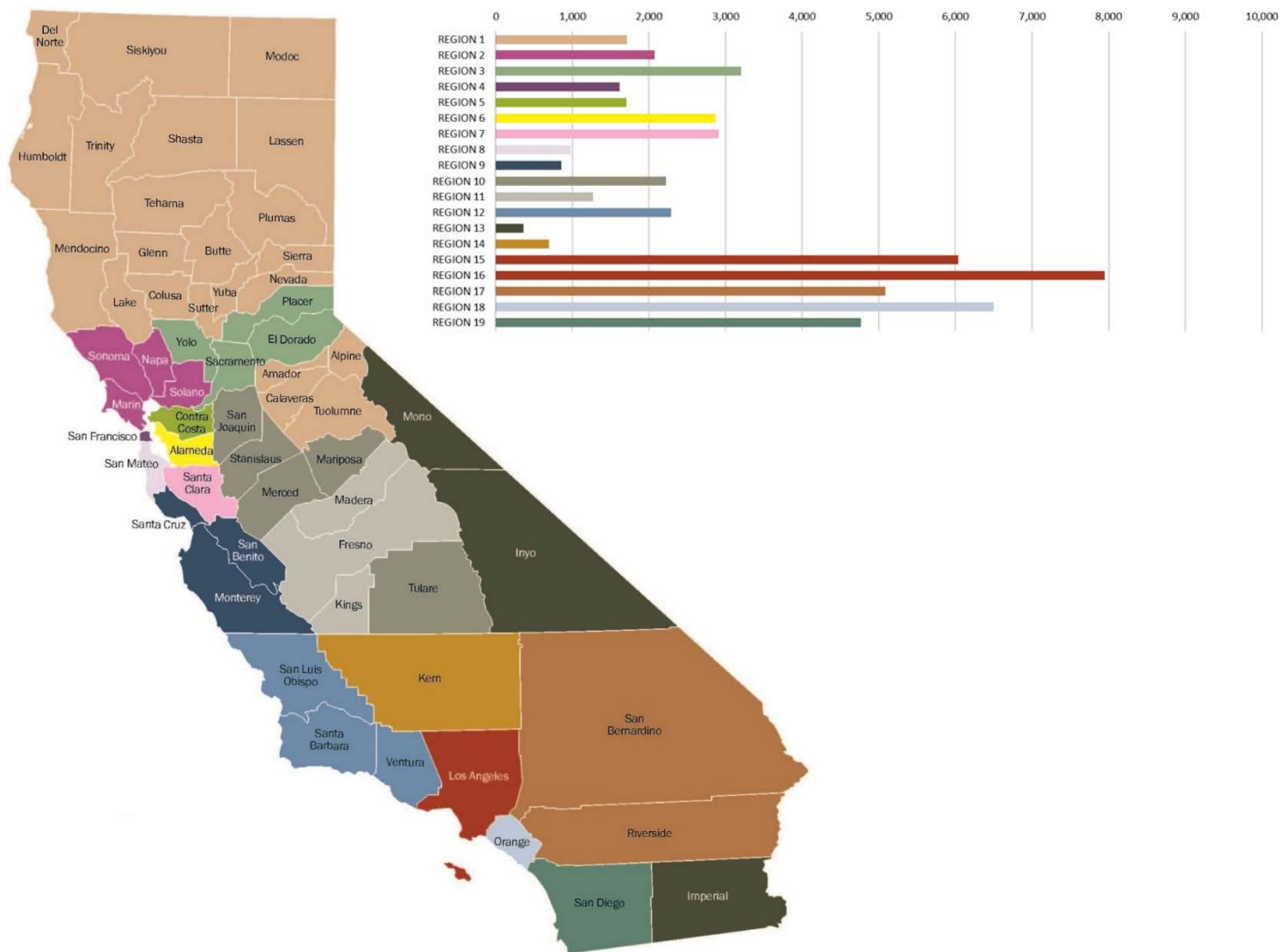
Health Plan (Number of Counties)	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
Blue Shield of California (58)	17,113	31	49,441	25	(32,328)	(65)
Anthem Blue Cross of California (58)	14,079	26	49,136	25	(35,057)	(71)
Kaiser Permanente (55)	13,746	25	43,372	22	(29,626)	(68)
Molina Healthcare (4)	3,901	7	27,874	14	(23,973)	(86)
Health Net (27)	3,698	7	15,732	8	(12,034)	(76)
Sharp Health Plan (1)	1,107	2	4,023	2	(2,916)	(72)
L.A. Care Health Plan (1)	337	1	1,505	1	(1,168)	(978)
Western Health Advantage (8)	314	1	1,270	1	(956)	(75)
Chinese Community Health Plan (2)	273	<1	1,072	1	(799)	(75)
Oscar Healthcare (2)	153	<1	799	<1	(646)	(81)
Valley Health Plan (1)	148	<1	614	<1	(466)	(76)
United Healthcare Benefits Plan of California (3)	86	<1	399	<1	(313)	(78)
Total	54,955	N/A	195,237	N/A	(140,282)	(72)

Source: CalHEERS

Note: "Eligible individuals" refers to eligible individuals, who selected a QHP.

SECTION 4.2 HEALTH PLAN ENROLLMENT (COVERED CA QHP ENROLLMENT BY RATING REGION)

**Figure 4.2. Covered California QHP Enrollment by Rating Region
April 1, 2016 – June 30, 2016**



Source: CalHEERS

Note: Los Angeles County includes both regions 15 and 16. A list of the counties and plans included in each rating region is available online at <http://hbex.coveredca.com/data-research/2014-Open-Enrollment-Data-Book/regions-counties-plans.pdf>.

SECTION 4.3 HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA QHP ENROLLMENT BY METAL TIER)

**Figure 4.3. Covered California QHP Enrollment by Metal Tier
April 1, 2016 – June 30, 2016**



Source: CalHEERS

- Silver plans remained the most frequently selected among subsidized enrollees. 23 percent selected bronze plans, a decrease of 11 percent from prior reporting period.
- Among unsubsidized enrollees, silver and bronze plans continued to be the most frequently selected (67 percent). More eligible individuals selected gold or platinum plans (26 percent) and fewer individuals selected minimum coverage (seven percent) as compared to the prior reporting periods.

Table 4.3. Covered California QHP Enrollment by Metal Tier

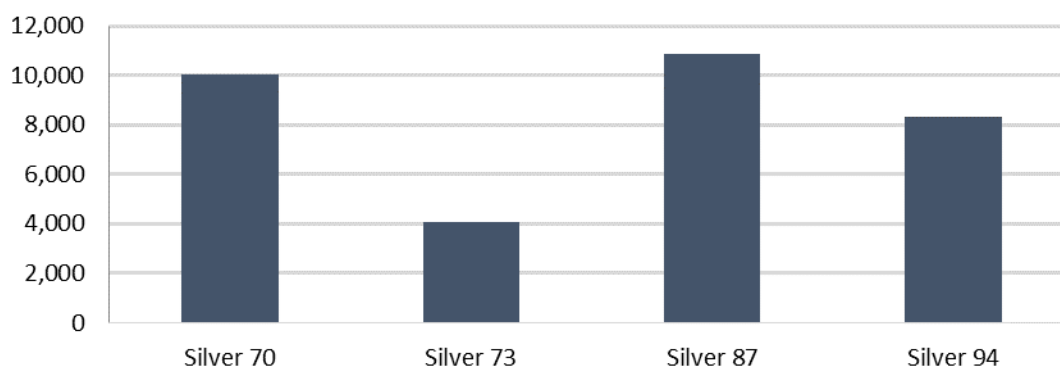
Program Eligibility	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals ³⁰	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
Subsidized Coverage						
Platinum	1,538	4	3,788	2	(2,250)	(59)
Gold	1,991	5	5,587	3	(3,596)	(64)
Silver	28,533	68	97,476	59	(68,943)	(71)
Bronze	9,508	23	57,058	34	(47,550)	(83)
Minimum Coverage	329	1	1,883	1	(1,554)	(83)
Total	41,899	N/A	165,792	N/A	(123,893)	(75)
Unsubsidized Coverage						
Platinum	1,603	12	2,410	8	(807)	(33)
Gold	1,779	14	2,922	10	(1,143)	(39)
Silver	4,724	36	8,914	31	(4,190)	(47)
Bronze	4,061	31	12,025	41	(7,964)	(66)
Minimum Coverage	889	7	2,808	10	(1,919)	(68)
Total	13,056	N/A	29,079	N/A	(16,023)	(55)

Source: CalHEERS

³⁰ CalHEERS is resolving the data defect "Unknown" in Health Plan Enrollment variables.

SECTION 4.4 HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA ENHANCED SILVER PLAN ENROLLMENT)

**Figure 4.4 Covered California Enhanced Silver Plan Enrollment
April 1, 2016 – June 30, 2016**



Source: CalHEERS

- The Enhanced Silver plans are for individuals with limited income who qualify for lower out-of-pocket costs.
- Silver 87 was the most frequently selected among enrollees. 25 percent selected Silver 94 plans same as to the prior reporting period.

Table 4.4 Covered California Enhanced Silver Plan Enrollment

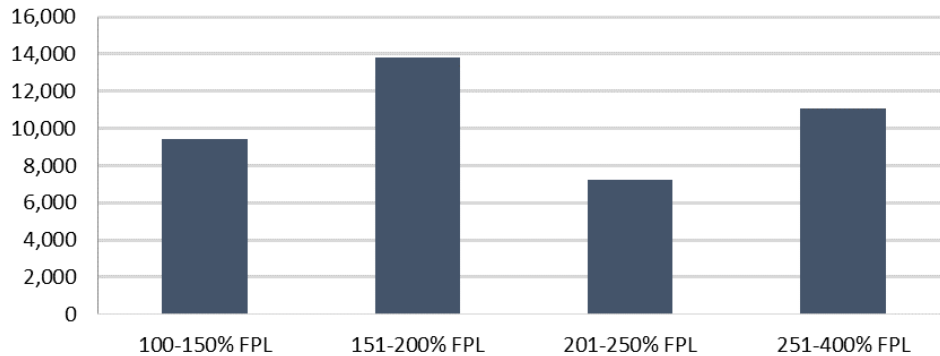
Program Eligibility	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
Silver 70	10,027	30	24,106	23	(14,079)	(58)
Silver 73	4,084	12	14,118	13	(10,034)	(71)
Silver 87	10,881	33	41,439	39	(30,558)	(74)
Silver 94	8,328	25	26,727	25	(18,399)	(69)
Total	33,320	N/A	106,390	N/A	(73,070)	(69)

Source: CalHEERS

Note: The percent of Eligible Individuals are rounded to nearest whole number.

SECTION 4.5 HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA QHP ENROLLEES BY FPL)

**Figure 4.5. Covered California Subsidized QHP Enrollees by FPL
April 1, 2016 – June 30, 2016**



Source: CalHEERS

- 33 percent of subsidized QHP enrollees have household income between 151 to 200 percent FPL, a decrease from the prior reporting period.

Table 4.5. Covered California Subsidized QHP Enrollees by FPL

Percentage FPL ³¹	Reporting Period: April June 2016		Prior Reporting Period: January March 2016		Comparison of Current Reporting Period and Prior Reporting Period	
	Number of Eligible Individuals	Percentage of Eligible Individuals	Number of Eligible Individuals	Percentage of Eligible Individuals	Net Change of Eligible Individuals	Percent Change of Eligible Individuals
100 to 150 % FPL	9,437	23	32,182	19	(22,745)	(71)
151 to 200 % FPL	13,782	33	61,918	37	(48,136)	(78)
201 to 250 % FPL	7,261	17	31,850	19	(24,589)	(77)
251 to 400 % FPL	11,090	26	39,137	24	(28,047)	(72)
Other ³²	329	1	705	<1	(376)	(53)
Total	41,899	N/A	165,792	N/A	(123,893)	(75)

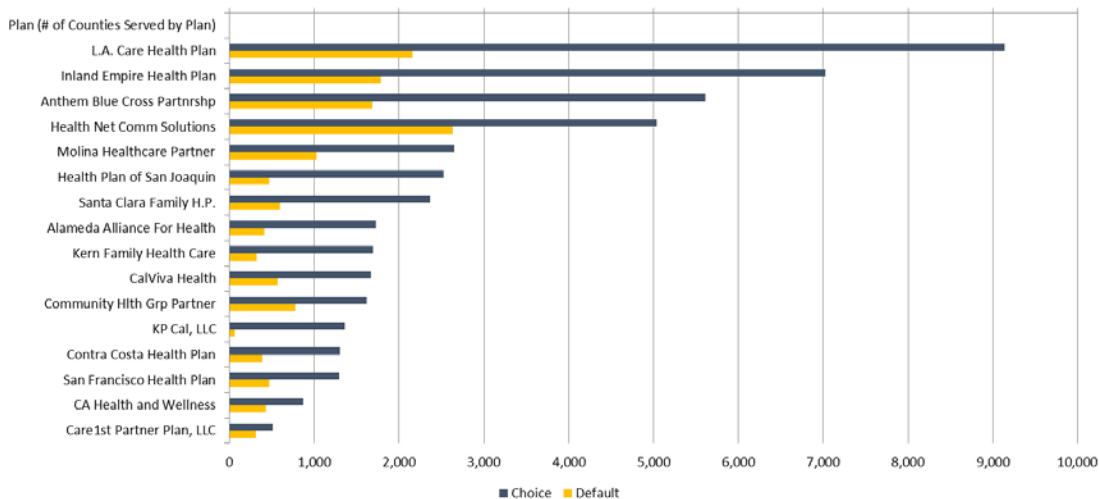
Source: CalHEERS

³¹ "Eligible individuals," refers to eligible individuals, who selected a QHP.

³² Other includes American Indian/Alaska Native individuals, who qualify for subsidies regardless of FPL and individuals with incomes below 100 percent FPL, who are not eligible for Medi-Cal.

SECTION 4.6 HEALTH PLAN ENROLLMENT (NEW ENROLLMENT IN MEDICAL MANAGED CARE HEALTH PLANS)

**Figure 4.6. New Enrollment in Medi-Cal Managed Care Health Plans
April 1, 2016 – June 30, 2016**



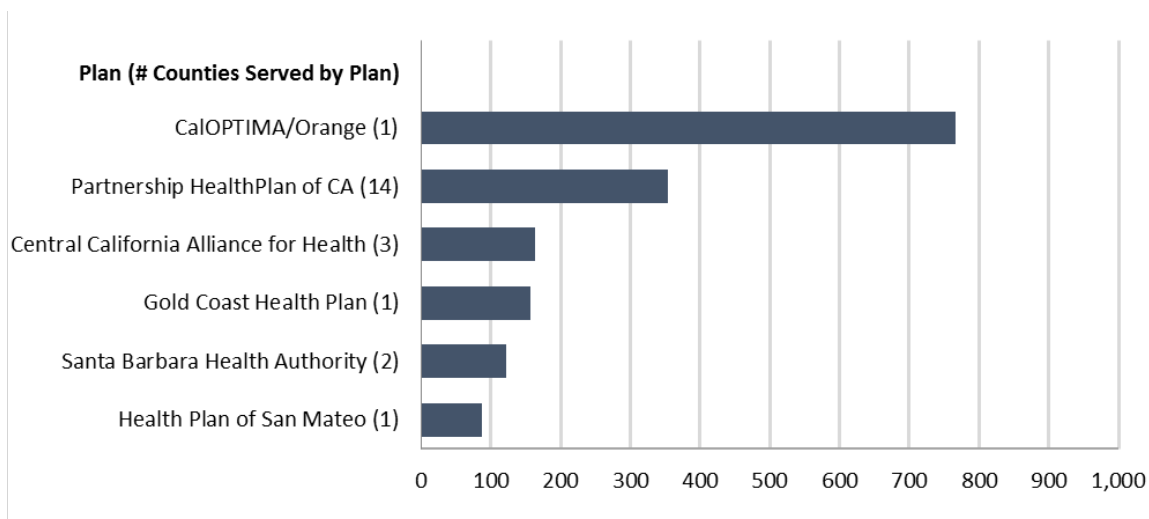
Source: Health Care Options

Note: Individuals who were enrolled in COHS or FFS are not reflected in the chart above.

- Medi-Cal beneficiaries are enrolled in either a contracted MCP or in FFS Medi-Cal.
- Beneficiaries in 35 counties have a choice between two or more MCPs, provided they select a plan within a specified time period. Beneficiaries in one county have the choice of a MCP or FFS:
 - Of the newly eligible Medi-Cal beneficiaries in these counties, approximately 46,450 chose and were enrolled in a MCP during the reporting period; while approximately another 14,000 did not select a MCP and were therefore enrolled by default into a MCP in their county; the chart above presents both Choice and Default MCP counts.
 - Approximately 1,800 eligible beneficiaries enrolled during the reporting period without record of whether the enrollment was a selection or a default; and
 - Individuals enrolled in a COHS plan. COHS plan enrollment data is reported in Section 4.7.

SECTION 4.7 HEALTH PLAN ENROLLMENT (7 NEW ENROLLMENT IN COHS HEALTH PLANS)

**Figure 4.7. New Enrollment in COHS Health Plans
April 1, 2016 – June 30, 2016**



Source: MEDS

- From April – June 2016, just over 1,600 new Medi-Cal enrollees were enrolled in COHS health plans.

SECTION 5 RENEWALS

Annual Renewals Summary

Medi-Cal beneficiaries must renew their eligibility each year to keep their health care benefits. If Medi-Cal is not renewed by the required deadline and eligibility is discontinued, beneficiaries have 90 days to request reinstatement of benefits and provide information needed to continue coverage. This section reports the number of renewals due for the reporting period, how many renewals were processed, and the outcome of the determination (continued Medi-Cal or discontinued). Data on Covered California QHP renewals is not included in this report.

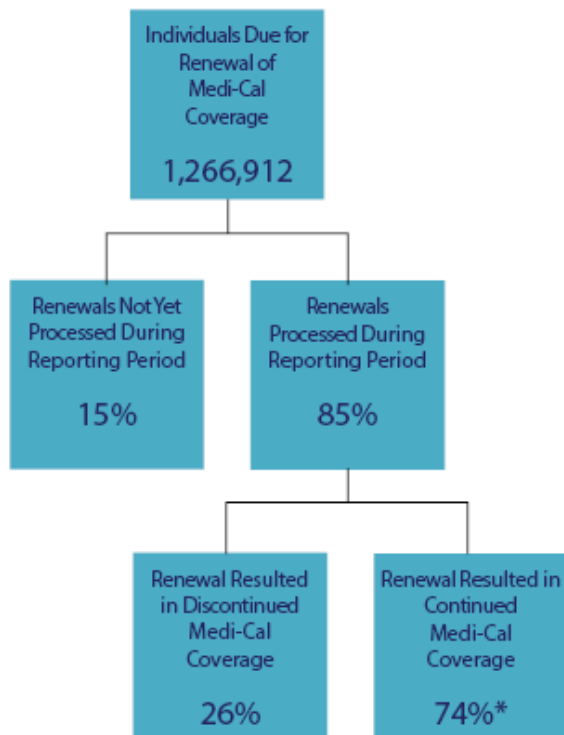
Data Sources and Methods

Medi-Cal renewals data is reported by the SAWS (CalWIN, LRS, and C-IV) for individuals, whereas prior reports included case renewals (which may consist of more than one individual). Renewal metrics are not reported for individuals who receive Medi-Cal as a result of their eligibility for cash aid programs, such as CalWORKS, Social Security Income, or Title IV-E assistance.

The number of renewals processed indicates that all of the necessary data entries were made and the eligibility determination is complete. Renewals not processed includes individual renewals not yet complete in the system.

SECTION 5.1 MEDI-CAL COVERAGE RENEWALS

Figure 5.1. Medi-Cal Coverage Renewals (Individual Level)
April 1, 2016 – June 30, 2016



*Less than 1% of renewals were due to individuals reinstated during the 90-day period following discontinuance of coverage.

Source: SAWS

- For Medi-Cal individuals renewals³³ due³⁴ April – June 2016, 85 percent were processed³⁵ and 74 percent³⁶ of those resulted in continued Medi-Cal coverage.

³³ At this time, Medi-Cal Renewals data do not include renewals for applications received prior to the ACA first open enrollment period in 2013. Updates are currently being implemented in SAWS to include data for all renewals, including those with applications prior to the ACA first open enrollment period.

³⁴ SAWS reports processing activities performed up to and including the month in which the Medi-Cal renewal is due.

³⁵ "Processed" reflects cases for which all necessary data entries were made and the case was coded correctly in the system to reflect a fully processed renewal, including cases that transition to Covered CA.

³⁶ The percent are rounded to nearest whole number.

SECTION 6 APPEALS

Appeals Summary

The total number of appeals filed during this reporting period increased from 2,538 to 6,728. Covered California and Medi-Cal eligibility appeals are processed and adjudicated by Administrative Law Judges and the California Department of Social Services (CDSS) contract staff. CDSS administers and tracks hearings and appeals. A hearing is a method whereby a household member may obtain an impartial review of an eligibility action or inaction.

Data Sources and Methods

CDSS provides data regarding the reasons for the appeal and whether the grievance is with Covered California, Medi-Cal, or both. CDSS gathers and tracks denial of coverage, eligibility determination, and discontinuance appeal reasons. The appeals that involve both programs are for applications that have individuals who received eligibility determinations for the two programs (e.g., parents were eligible for Covered California and the children were eligible for Medi-Cal). The number of MCAP eligibility appeals filed is not included in this report. DHCS is in the process of compiling this appeal information for future reports.

SECTION 6.1 APPEALS (ELIGIBILITY ACTIONS APPEALED)

Table 6.1. Eligibility Actions Appealed

Program	Denial of Coverage	Eligibility Determination	Discontinuance
Covered California QHPs	2,230	280	555
Covered California & Medi-Cal	872	515	221
Medi-Cal	932	549	574
Total During April – June 2016	4,034	1,344	1,350
Prior Reporting Period January – March 2016	1,798	439	301
Net Change	2,236	905	1,049
Percent Change	124%	206%	349%

Source: CDSS

- Between April and June 2016, a total of 6,728 appeals were filed by Covered California and Medi-Cal applicants.
- Of these, 60 percent were appeals regarding denials of eligibility, 20 percent were regarding eligibility determinations, and 20 percent were regarding discontinuances from existing coverage.

Table 6.2. Hearing Results

Program	Granted	Granted in Part	Denial of Appeal	Withdrawals/Dismissals
Covered California QHPs	392	76	137	1,206
Covered California and Medi-Cal	379	231	77	439
Medi-Cal	203	34	29	392
Total During April – June 2016	974	341	243	1,206
Prior Reporting Period January – March 2016	1,004	365	251	1,113
Net Change	(30)	(24)	(8)	93
Percent Change	(3)	(7)	(3)	8

Source: CDSS

- Between April and June 2016, 47 percent of appeals were granted or granted in part and nine percent were denied. The remaining 44 percent were withdrawn or dismissed.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

SECTION 7 TOTAL ENROLLMENT IN MEDI-CAL AND QHP

Total Enrollment Summary

The total Medi-Cal enrollment for this reporting period decreased as compared to the prior reporting period. As of May 2016, there were 13,570,195 Medi-Cal enrollees, and the total enrollment as of March 2016 was 13,625,307, a decrease of 65,154. Changes in Medi-Cal enrollment represent the addition of newly eligible beneficiaries, the renewal of coverage for existing beneficiaries, and the departure of beneficiaries who lose eligibility or exit the program.

Enrollment totals for MAGI and non-MAGI indicate an increase in the number of MAGI determinations, and a decrease in non-MAGI eligibility determinations. Non-MAGI, pre ACA Medi-Cal programs will continue for some groups, particularly the aged, blind, disabled, and the medically needy groups

Total Enrollment Data Sources and Methods

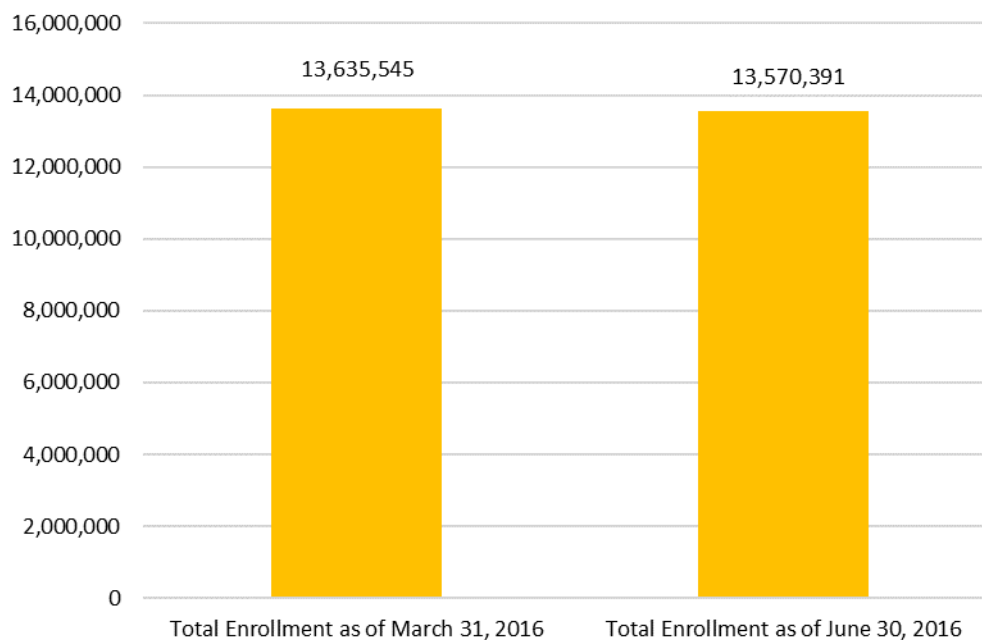
Data presented in this section draw from data analytics conducted by DHCS' Research and Analytic Studies Division (RASD), which compiles official statistics and performs analytic studies. Enrollment data in this reporting period is compared to the prior reporting period in order to derive the net change in total enrollment. The net change in total enrollment methodology is the difference between the total enrollment of the last month in the prior reporting period and the last month of the current reporting period.

Total enrollment does not include Medi-Cal enrollees in state and county inmate programs. The Pregnant Women category does not include pregnant women who were enrolled through MCAP. Enrollment data includes individuals eligible for Medi-Cal as a result of their receipt of CalWORKs, Supplemental Security Income (SSI), and Foster Care payment programs.

Changes in total QHP enrollment during this reporting period are reported based on effectuated enrollment reported by CalHEERS. Enrollment is considered effectuated when an individual pays the first month's premium for coverage. The count includes individuals who effectuated their enrollment and had an active policy at the time the enrollment report was compiled.

SECTION 7.1 TOTAL ENROLLMENT (MEDI-CAL)

**Figure 7.1. Total Medi-Cal Enrollment
March 31, 2016 – June 30, 2016**



Source: Analysis by DHCS –RASD

- The total enrollment as of June 2016 decreased by 65,154 from the prior reporting period. This change in enrollment reflects both new enrollments and dis-enrollments as individuals lose eligibility or exit the program.

SECTION 7.2 TOTAL ENROLLMENT (MEDI-CAL)

**Figure 7.2. Total Medi-Cal Enrollment
by MAGI and Non-MAGI
March 2016 - June 2016**



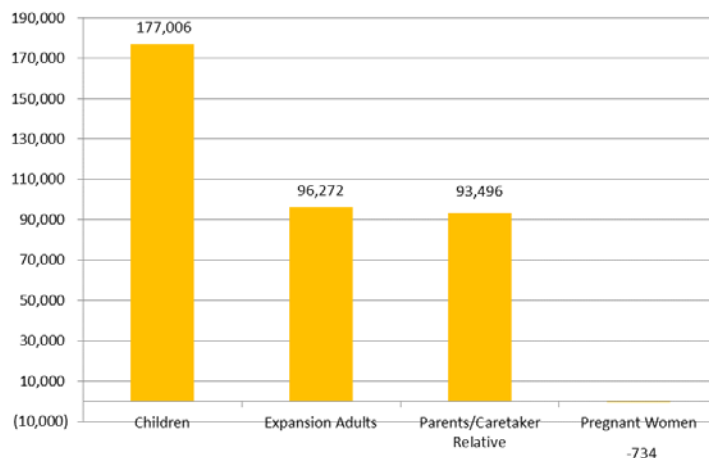
Source: Analysis by DHCS -RASD

- The number of individuals enrolled in MAGI Medi-Cal increased by 365,613 between March 31, 2016 and June 30, 2016.³⁷
- Conversely, enrollment under non-MAGI aid codes dropped by 430,767 during this same period. A summary of non-MAGI enrollment by category is shown on Section 7.4.

³⁷ March MAGI enrollment has been updated by DHCS - RASD and differs from the total reported in the prior report.

SECTION 7.3 NET CHANGE IN MAGI ENROLLMENT (MEDI-CAL)

**Figure 7.3. MAGI Medi-Cal Enrollment
March 31, 2016 – June 30, 2016**



Source: Analysis by DHCS-RASD

- During this reporting period, the number of individuals eligible under MAGI aid codes increased by about 366,040³⁸. This number includes individuals transitioning from non-MAGI or pre-ACA aid codes to MAGI aid codes at annual redetermination, as well as individuals new to Medi-Cal, who enrolled during the reporting period.
- Children represent 48 percent of the increase. The next largest group is expansion adults at 26 percent.

**Table 7.3. MAGI Medi-Cal Enrollment
March 31, 2016 – June 30, 2016**

Program Eligibility	Reporting Period: March June 2016		Prior Reporting Period: January March 2016	
	Change in Number of Eligible Individuals	Percent of Eligible Individuals	Change in Number of Eligible Individuals	Percent of Eligible Individuals
Children	177,006	48	77,800	27
Expansion Adults	96,272	26	76,859	27
Parents/Caretaker Relatives	93,496	26	128,131	45
Pregnant Women	(734)	<1	984	<1
Total	366,040	N/A	283,774	N/A

³⁸ This total does not include State and County inmate MAGI programs. Those Medi-Cal populations decreased by 427, which if included would bring the total to 365,613.

Source: Analysis by DHCS-RASD

SECTION 7.4 NET CHANGE IN NON-MAGI ENROLLMENT (MEDI-CAL)

**Figure 7.4. Non-MAGI Medi-Cal Enrollment
March 31, 2016 – June 30, 2016**



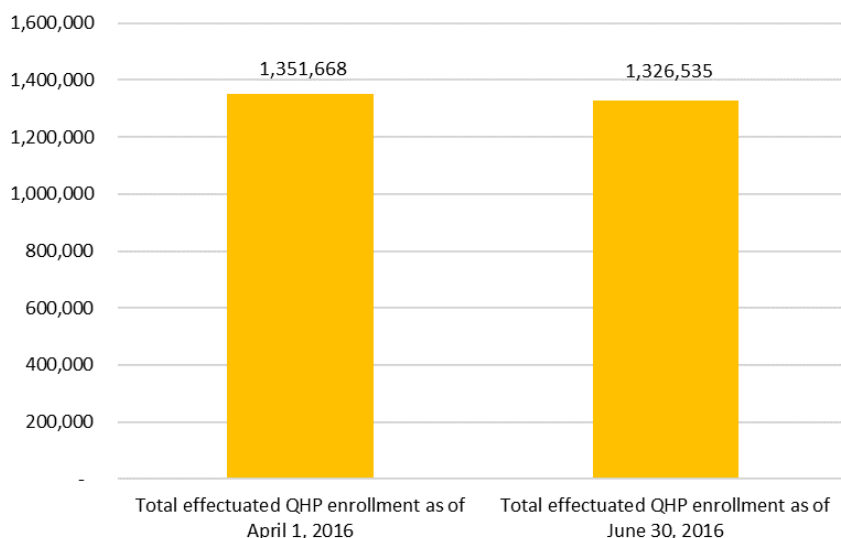
Source: Analysis by DHCS-RASD

Note: "Other Non-MAGI groups" includes Child Health and Disability Prevention Program, Continuing Eligibility, Hospital PE, Adoption/Foster Care/ Former Foster Care, Transitional Medi-Cal and Percent Programs. LIHP refers to the Low Income Health Program.

- Between March 31, 2016 and June 30, 2016, the number of individuals eligible in non-MAGI programs decreased by 430,767.
- A decrease in non-MAGI, pre-ACA populations in programs now subject to MAGI rules (such as pregnant women, parents and other caretaker relatives, and children), indicates a trend away from non-MAGI eligibility determinations. For a comparison of these populations, refer to the Net Change in Enrollment of Individuals Eligible Under MAGI Medi-Cal Aid Codes on the previous page.

SECTION 7.5 TOTAL EFFECTUATED ENROLLMENT (COVERED CA QHPs)

**Figure 7.5. Total Effectuated QHP Enrollment
April 1, 2016 – June 30, 2016**



Source: CalHEERS

- Comparing data for April 1, 2016 and June 30, 2016, total effectuated QHP enrollment decreased by two percent, or 25,133 individuals. This net change in effectuated QHP enrollment reflects both new enrollments and dis-enrollments as individuals exit QHP coverage.
- Individuals effectuate their Covered CA QHP enrollment by paying their first month's premium. The counts include individuals, who effectuated their QHP enrollment and had an active policy at the time the report was compiled.

ERRATA

- The reported percentage of QHP applications that were filed with assistance on page 6 of the previous report (January – March 2016) was incorrectly reported as 87 percent. The correct percentage is 73 percent.

APPENDIX: DATA SOURCES

The following data sources were used to produce this report. Additional details on the data sources and methods used to produce specific figures are presented at the beginning of each section in this report.

- **CalHEERS** is the online platform, which runs the single-streamlined application for Medi-Cal, as well as Covered California's QHP enrollments. Medi-Cal eligibility on the basis of Modified Adjusted Gross Income (MAGI) is initially determined through the CalHEERS rules engine.
- The **Medi-Cal Eligibility Data System (MEDS)** stores vital and confidential beneficiary information such as Medi-Cal eligibility and demographics. Each month MEDS is updated with information, which indicates whether a beneficiary is eligible for Medi-Cal, the scope of Medi-Cal benefits (full-scope or restricted/limited scope), if the person is enrolled in a Medi-Cal Managed Care Plan (MCP), or the status of a person's share-of-cost and whether or not it has been met.
- The **Statewide Automated Welfare System (SAWS)** are the county-based systems used to determine non-MAGI Medi-Cal eligibility and conduct ongoing case management for MAGI and non-MAGI Medi-Cal, California Work Opportunity and Responsibility to Kids [(CalWORKs) (cash assistance for needy families)], CalFresh (California's Supplemental Nutrition Assistance Program), and other programs. SAWS are comprised of the following three eligibility determination systems developed by three separate county consortia:
 - ❖ CalWORKs Information Network (CalWIN), which supports 18 counties;
 - ❖ Consortium IV (C-IV), which supports 39 counties; and
 - ❖ Los Angeles Eligibility, Automated Determination, Evaluation and Reporting (LEADER) and LEADER Replacement System (LRS), which supports Los Angeles County.
- **MAXIMUS Inc.**, in partnership with DHCS, provides application and enrollment data for Medi-Cal health plans, Health Care Options, and the MCAP.
- The **California Department of Social Services (CDSS)** reports appeals data for Covered California and Medi-Cal that are processed and adjudicated by Administrative Law Judges and staff at CDSS.