

**CALIFORNIA'S MEDICAL ASSISTANCE PROGRAM**

# **ANNUAL STATISTICAL REPORT**

**CALENDAR YEAR 1998**



**MEDICAL CARE STATISTICS SECTION**

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### **SUGGESTED CITATION**

Bontá, R.N., Dr. P. H., Diana M.; J. Klun; G. Hiehle; M. Cline. California's Medical Assistance Program, Annual Statistical Report, Calendar Year 1998. California Department of Health Services, Sacramento, 1998.

December 1999

MEDI-CAL PROGRAM  
CALENDAR YEAR 1998

This report presents statistical data on Medi-Cal program services, expenditures, and eligibles for Calendar Year 1998.

County Welfare Departments determine eligibility for all Medi-Cal eligibles with the exception of Supplemental Security Income/State Supplementary Payment (SSI/SSP) eligibles, who have their eligibility determined by the Social Security Administration.

Persons eligible for Medi-Cal are reported to the Medi-Cal Eligibility Data System (MEDS) by the County Welfare Departments, the State, and the Social Security Administration.

Payment data used in this report are based on the concept of month of payment rather than month of service. The difference can be best explained by pointing out that payments made in a given month can be for services rendered in one or more previous months.

It should be noted that expenditures in this report are based on paid claims computer tapes prepared by various entities that process Medi-Cal claims and do not represent official budget figures or accounting records. Audit recovery monies, Medicare premiums, refunds, and administrative expenses are not included in this report except when specifically noted.

This report does not account for drug rebates from contracts with manufacturers nor Disproportionate Share Hospital Payments.

**CALIFORNIA'S MEDICAL ASSISTANCE PROGRAM  
ANNUAL STATISTICAL REPORT  
CALENDAR YEAR 1998  
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## NOTE ON DATA PRESENTATION

Generally, the data in this report include the Medi-Cal Fee-For-Service Program, Medi-Cal beneficiaries in State Hospitals, and Medi-Cal beneficiaries covered under a capitation contract with Delta Dental Service.

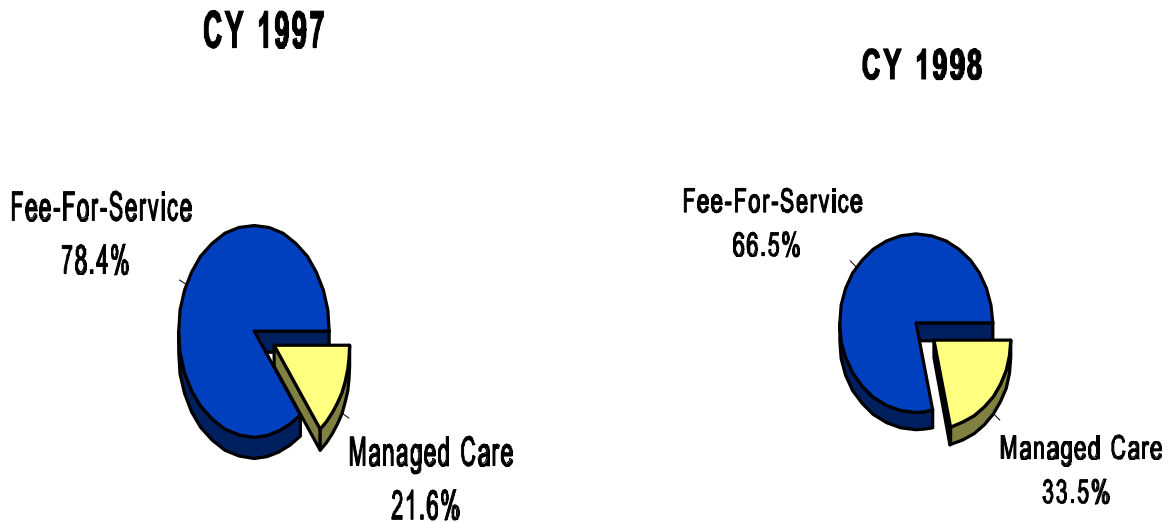
Data on Capitated Health Systems are excluded from a number of tables in this report. Capitated Health Systems receive a monthly capitation payment to provide services to enrollees, so cost figures for specific services are not available.

Capitated Health Systems data are included in Tables 1, 2, 14, 15, 28, and 29.

The Fee-For-Service data for Primary Care Case Management Plan beneficiaries are included in this report.

During Calendar Year 1998, those enrolled in comprehensive managed care plans comprised 42.9 percent of the total Medi-Cal population (compared to 33.5 percent during Calendar Year 1997). As used here, "comprehensive plans" means those plans that are capitated to provide more than a limited range of services, including Two Plan Models and GMC. Plans that provide only dental or mental health, for example, are not comprehensive plans. PCCMs are not comprehensive plans.

Use of any expenditure data series for comparison of trends over time is infeasible since the advent of the managed care because of a sharp decline in service reporting among new managed care plans.



The Combined fee-for-service and managed care populations are included in Tables 1 and 28, which reports on the eligible population. The majority of the remaining tables include only fee-for-service data. Tables 14 and 15 include only those enrolled in comprehensive managed care plans.



**MEDI-CAL PROGRAM STATISTICAL SUMMARY**  
**CALENDAR YEAR 1998**

In 1998, a total of 4.96 million persons per month were eligible for Medi-Cal. This includes Fee-For-Service, County Organized Health Systems, and Health Care Plans. This represents a decrease of 3.7 percent from 1997.

A total of \$775.6 million in prepaid capitations were received by County Organized Health Systems (an increase of 0.7 percent from 1997) to provide non-dental medical services for an average of 358,831 eligibles per month during 1998 (a decrease of 5.1 percent from 1997).

The 1,768,096 persons enrolled in Health Care Plans (HCPs) each month reflected a 31.1 percent increase from 1997. HCP capitation payments totaled \$1.69 billion, which is a 23.2 percent increase from 1997.

The large increase in Capitated Health System eligibles is mainly due to Managed Care expansion. This increase to some extent contributed to the decrease in Public Assistance, Medically Needy, and Medically Indigent Fee-For-Service eligibles.

There were 1.87 million persons who used Medi-Cal benefits each month in 1998. This includes Fee-For-Service Only benefits. Provider payments for those users totaled \$10.0 billion which was 0.3 percent or \$30.1 million more than in 1997.

Compared to 1997, Fee-For-Service Medi-Cal users decreased 8.8 percent and the respective eligible population (2.83 million persons per month) reflected a 17.2 percent decrease.

There were 10.2 percent more users per 1,000 Fee-For-Service eligibles in 1998. The utilization rate was 65.8 percent compared to 59.8 percent for 1997.

The average cost per user was \$447.89 per month (up 10.0 percent from 1997) and the average cost per Fee-For-Service eligible was \$295.24 per month (up 21.2 percent from 1997).

Public Assistance eligibles, excluding Capitated Health System eligibles, averaged 1.82 million persons per month, a decrease of 20.0 percent from 1997. This aid group accounted for 64.3 percent of the Fee-For-Service eligible population, 67.0 percent of the users, and 55.4 percent of total provider payments (\$5.56 billion).

Medically Needy Fee-For-Service eligibles averaged 400,977 persons per month in 1998, a decrease of 9.4 percent from 1997. Medically Needy accounted for 14 percent of Fee-For-Service eligibles, 15.1 percent of users, and 31.0 percent of total provider payments (\$3.11 billion).

Medically Indigent Fee-For-Service eligibles averaged 131,686 persons per month, a 27.5 percent decrease from 1997. Medically Indigent accounted for 4.7 percent of Fee-For-Service eligibles, 4.1 percent of users, and 2.9 percent of total provider payments (\$293.9 million).

County and community hospital services accounted for 26.8 percent of 1998 provider payments. County hospitals received \$613.7 million. Community hospitals received \$2.07 billion.

Medi-Cal purchased Medicare Part A and Part B Supplemental Medical Insurance for an average of 759,848 Aged and Disabled eligibles each month in 1998. Monthly premiums averaged \$34.9 million.

## Section 1

### HIGHLIGHTS OF 1998 PROGRAM CHANGES

The following discusses the major changes in Medi-Cal and related programs during Calendar Year 1998.

#### Statewide Outreach and Education Campaign, February 1998

The Department of Health Services launched a statewide outreach and education campaign to help families learn about and apply for new health programs for children.

#### Expansion of Children's Programs, March 1998

Pursuant to state law (SB 903 and AB 217), effective March 1, 1998, Medi-Cal made two changes to the Percent Programs. First, Medi-Cal began disregarding resources of children in the Percent Programs. Second, Medi-cal adopted the new federal option to allow children up to 19 to be covered immediately under the 100 Percent Program without having to wait for the mandatory phase in period to expire. (That provision required that children had to be born after September 30, 1983 to be covered).

#### Napa County, March 1998

Napa county became a county organized health system (COHS) in March 1998, and the Solano COHS processes their claims.

#### New Drug Added to the contract List of Drugs, June 1998

Coreg was added effective June 1, 1998. Coreg is a new drug for the treatment of heart failure.

#### Health Families Program, July 1, 1998

The Healthy Families Program was implemented with the passage of Assembly Bills 217, 1126, 1572 and Senate Bill 903. A joint main-in application for pregnant women and children was made available through select community-based programs, county welfare departments and the Healthy Families program enrollment contractor.

#### EPSDT In-Home Nursing Rates, July 1998

Legislative action required the Department, beginning July 1, 1998 to increase the EPSDT In-Home Nursing Services reimbursement rates. These services are provided by in-home nursing providers.

#### Rezulin (Troglitazone) Added to List of contract Drugs, July 1998

Rezulin was a new drug added for the treatment of diabetes.

## **HIGHLIGHTS OF 1999 PROGRAM CHANGES, (Continued)**

### Geographic Managed Care San Diego, August 1998

Geographic managed Care (GMC) in San Diego, was implemented August 1, 1998.

### LTC Rate Adjustments, August 1998

The provider rates for nursing facilities, intermediate care facilities, and managed care systems were increased August 1, 1998.

### Provider Rate Increases, August 1998

The Budget Act of 1998-99 implemented five provider rate increases beginning August 1, 1998. The rate increases were for physician visit rate equalization; primary care/preventive medicine to children; primary care/preventive medicine to adults; ambulance services; and hospital outpatient.

### EPSDT Screening/Immunizations Increase, August 1998

The Budget act of 1998-99 implemented a provider rate increase for EPSDT services which are provided in a physician's office to children under the age of 21 years. These services include screens for disease or abnormalities and immunizations. This increase was implemented on August 1, 1998.

### Second Year Transitional, October 1998

The 1998 Budget Act and AB 2780, a trailer bill to the Budget Act, establish and fund a state only program to provide a 2<sup>nd</sup> year of Transitional Program benefits to adults discontinued from CalWORKS or 1931 (b) due to increase earnings for increased hours of employment.

### Antihistamine Therapeutic Category Review, November 1998

Pursuant to W&I code Section 14105.33, the Department conducted a drug Therapeutic Category Review (TCR) to ensure adequate representation of single-source drugs on the Medical List of Contract Drugs. Based on the Therapeutic Category Review (TCR), additional drugs were added.

### **NOTE**

The Immigration Reform and Control Act (IRCA) alien Program (Aid Codes 51, 52, 56, and 57) expired December 31, 1994.

The term "Health Care Plan" (HCP) is now used in place of Prepaid Health Plan (PHP), and includes the managed care models GMC, PHP, and Two-Plan Model

## **HIGHLIGHTS OF 1999 PROGRAM CHANGES, (Continued)**

For additional information on Managed Care, please refer to our new report entitled "1998 Managed Care Annual Statistical Report" available on the Internet.

Internet Home page for Medical Care Statistics: <http://www.dhs.ca.gov/mcss>

SECTION 2  
MEDI-CAL ELIGIBLES AND USERS

## **MEDI-CAL ELIGIBLES, ALL PROGRAMS - TABLE 1**

Total Medi-Cal eligibles (including Fee-For-Service, County Organized Health Systems, and Health Care Plans) averaged 4.96 million persons per month in 1998, a decrease of 3.7 percent from 1997.

Enrollment of Medi-Cal eligibles in County Organized Health Systems (COHS) and Health Care Plans (HCPs) increased 23.2 percent in 1998, to a monthly average of 2,126,927 persons. For additional information, See Section 5, Medi-Cal Capitated Health Systems, page 34.

Fee-For-Service (FFS) Medi-Cal eligibles averaged 2.83 million persons per month, an increase of 17.2 percent from 1997.

Public Assistance (PA) eligibles averaging 1.82 million persons per month in 1998, decreased 22.0 percent from 1997. PA eligibles accounted for 64.3 percent of all FFS eligibles.

Total Medically Needy (MN) eligibles averaged 400,977 persons monthly and decreased 9.4 percent from 1997. MN eligibles accounted for 14.2 percent of all FFS eligibles.

Total Medically Indigent (MI) eligibles averaged 131,686 persons monthly and decreased 27.5 percent from 1997. MI eligibles accounted for 7.2 percent of all FFS eligibles.

The Immigration Reform and Control Act (IRCA) Aliens program expired December 31, 1994. IRCA is shown for 1997 and 1998 because claims continue to be paid due to the lag from time of service to time of payment.

The Omnibus Budget Reconciliation Act (OBRA) Aliens program averaged 215,853 eligibles per month in 1998, a decrease of 9.5 percent from 1997. OBRA Aliens program eligibles accounted for 7.6 percent of all FFS eligibles.

The Refugee/Entrant programs averaged 1,459 persons monthly, a decrease of 19.4 percent from 1997. Refugee/Entrant program eligibles accounted for 0.1 percent of all FFS eligibles.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and the 200 Percent Poverty programs averaged 241,788 persons monthly, or 8.5 percent of all FFS eligibles.

Data for the Presumptive Eligibility for Pregnant Women program are not available.

The remaining programs (60-Day Postpartum, Dialysis, Total Parenteral Nutrition, Qualified Medicare Beneficiary, Medi-Cal Tuberculosis, and Minor Consent) averaged 10,936 persons per month, an increase of 107.3 percent from 1996. These programs accounted for 0.7 percent of all FFS eligibles.

TABLE 1

MEDI-CAL PROGRAM  
AVERAGE MONTHLY ELIGIBLES BY PROGRAM AND AID CATEGORY  
CALENDAR YEARS 1997 AND 1998

(COHS, HCPs, AND FFS)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1997	CALENDAR YEAR 1998	CHANGE	
			Number	Percent
TOTAL	5,146,850	4,957,866	(188,984)	(3.7)
County Organized Health Systems (COHS)	378,236	358,831	(19,405)	(5.1)
Health Care Plans (HCPs)	1,348,361	1,768,096	419,735	31.1
Fee-For-Service (FFS)/1/	3,420,253	2,830,939	(589,314)	(17.2)
Public Assistance	2,334,308	1,819,782	(514,526)	(22.0)
Aged	319,680	319,629	(51)	(0.0)
Blind	22,094	22,116	22	0.1
Disabled	607,723	614,610	6,887	1.1
Families	1,384,811	863,426	(521,385)	(37.7)
Medically Needy	442,442	400,977	(41,465)	(9.4)
Aged	100,773	100,074	(699)	(0.7)
Blind	687	663	(24)	(3.5)
Disabled	59,276	50,858	(8,418)	(14.2)
Families	281,706	249,382	(32,324)	(11.5)
Medically Indigent	181,671	131,686	(49,985)	(27.5)
Adults	9,512	8,700	(812)	(8.5)
Children	172,159	122,986	(49,173)	(28.6)
IRCA Aliens	7	2	(5)	(71.4)
OBRA Aliens	238,591	215,853	(22,738)	(9.5)
Refugee/Entrant	1,810	1,459	(351)	(19.4)
100 Percent Poverty	31,705	52,082	20,377	64.3
133 Percent Poverty	88,070	94,681	6,611	7.5
185 Percent Poverty (renamed Income Disregard)	89,765	94,157	4,392	4.9
Infant	38,949	40,106	1,157	3.0
Pregnant Woman	50,816	54,051	3,235	6.4
200 Percent Poverty	941	868	(73)	(7.8)
Infant	109	65	(44)	(40.4)
Pregnant Woman	832	803	(29)	(3.5)
60-Day Postpartum	1,730	1,572	(158)	(9.1)
Dialysis	35	34	(1)	(2.9)
Total Parenteral Nutrition	9	8	(1)	(11.1)
Qualified Medicare Beneficiary	3,838	4,737	899	23.4
Presumptive Eligibility for Pregnant Women	INA	INA	INA	INA
Medi-Cal Tuberculosis Program	550	564	14	2.5
Minor Consent	4,774	12,460	7,686	NA

INA Information Not Available.

NA Not Applicable.

/1/ Excludes County Organized Health Systems and Health Care Plans.

Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.

The IRCA program expired December 31, 1994. IRCA is shown for 1997 and 1998 because claims continue to be paid due to the lag from time of service to time of payment.

Figures are rounded independently and may not add to totals.

Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Years 1997 and 1998; Prepaid Health Plan Status Code 1 Reports; Rate Sheet for Managed Care Plans; and MEDSSUM File dated April 1999. (Tables 14, 15, and 18.)

## TOTAL ANNUAL PAYMENTS - TABLE 2

This is a companion to Table 1, showing payments by type of program. In this table, you will see Total Annual Medi-Cal payments, then a separate count of payments for County Organized Health Systems (COHS) and Health Care Plans (HCPs), followed by Fee-For-Service (FFS) by Program and Aid Category for 1997 and 1998.

Total Annual Medi-Cal payments (including Fee-For-Service, County Organized Health Systems, and Health Care Plans) averaged \$12.49 billion in 1998, an increase of 3.7 percent from 1997.

The County Organized Health System estimated capitation payments were \$776 million in 1998, a 15.4 percent increase from 1997.

Health Care Plan capitation payments were \$1.69 billion in 1998, compared to \$1.37 billion in 1997, an increase of 23.2 percent.

Capitated Health System payments (COHS and HCPs) are not included in the FFS breakdown.

Total Annual Medi-Cal FFS payments were \$10.03 billion in 1998, an increase of 0.3 percent from 1997.

Payments for persons in the Public Assistance (PA) group were \$5.56 billion, a decrease of 0.8 percent from the \$5.61 billion in 1997. PA payments accounted for 5.56 percent of all FFS payments.

Over \$3 billion was paid for services provided to the Medically Needy (MN), up 0.9 percent from 1997. MN payments accounted for 31.0 percent of all FFS payments.

Total Medically Indigent (MI) payments were \$294 million, down 9.3 percent from the \$324 million in 1997. MI payments accounted for 2.9 percent of all FFS payments.

The Immigration Reform and Control Act (IRCA) Aliens program expired December 31, 1994. IRCA is shown for 1997 and 1998 because claims continue to be paid due to the lag from time of service to time of payment.

The Omnibus Budget Reconciliation Act (OBRA) Aliens program payments were \$496 million, down 9.6 percent from the \$548 million the previous year. The OBRA Aliens program payments accounted for 4.9 percent of all FFS payments.

Payments for the Refugee/Entrant programs were \$7 million, down 27.7 percent from the \$9 million in 1997. Refugee/Entrant program payments accounted for 0.6 percent of all FFS payments.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and the 200 Percent Poverty programs accounted for \$359 million, a 12.5 percent increase from the \$319 million in 1997. These programs accounted for 3.6 percent of all FFS payments.

Total payments for the remaining groups (excluding Not Reported) were \$160.9 million in 1998, up 44.7 percent from the \$71.9 million in 1997. These payments accounted for 1.6 percent of all FFS payments.



**TABLE 2**  
**MEDI-CAL PROGRAM**  
**TOTAL ANNUAL PAYMENTS BY PROGRAM AND AID CATEGORY**  
**CALENDAR YEARS 1997 AND 1998**  
**(COHS, HCPs, AND FFS)**

PROGRAM AND AID CATEGORY	CALENDAR	CALENDAR	CHANGE	
	YEAR 1997	YEAR 1998	Number	Percent
TOTAL	\$12,043,071,962	\$12,494,530,859	\$451,458,897	3.7
County Organized Health Systems (COHS)	\$672,072,874	\$775,616,140	\$103,543,266	15.4
Health Care Plans (HCPs)	\$1,371,379,571	\$1,689,188,776	\$317,809,205	23.2
Fee-For-Service (FFS)/1/	\$9,999,619,517	\$10,029,725,943	\$30,106,426	0.3
Public Assistance	5,606,520,427	5,560,078,818	(46,441,609)	(0.8)
Aged	895,464,447	924,605,176	29,140,729	3.3
Blind	116,724,375	124,242,906	7,518,531	6.4
Disabled	2,904,015,244	3,201,715,332	297,700,088	10.3
Families	1,690,316,360	1,309,515,405	(380,800,955)	(22.5)
Medically Needy	3,079,234,183	3,105,472,230	26,238,047	0.9
Aged	1,482,610,086	1,486,735,919	4,125,833	0.3
Blind	11,883,946	11,903,905	19,959	0.2
Disabled	1,039,748,697	1,076,706,820	36,958,123	3.6
Families	544,991,454	530,125,586	(14,865,868)	(2.7)
Medically Indigent	324,040,168	293,894,482	(30,145,686)	(9.3)
Adults	79,737,609	76,721,241	(3,016,368)	(3.8)
Children	244,302,558	217,173,240	(27,129,318)	(11.1)
IRCA Aliens	294,104	147,519	(146,585)	(49.8)
OBRA Aliens	548,281,344	495,788,389	(52,492,955)	(9.6)
Refugee/Entrant	9,001,989	6,511,075	(2,490,914)	(27.7)
100 Percent Poverty	12,904,232	24,317,366	11,413,134	88.4
133 Percent Poverty	47,244,741	51,817,456	4,572,715	9.7
185 Percent Poverty (renamed Income Disregard)	257,724,143	282,042,964	24,318,821	9.4
Infant	54,523,113	59,852,542	5,329,429	9.8
Pregnant Woman	203,201,030	222,190,422	18,989,392	9.3
200 Percent Poverty	1,188,207	776,510	(411,697)	(34.6)
Infant	230,626	130,233	(100,393)	(43.5)
Pregnant Woman	957,581	646,278	(311,303)	(32.5)
60-Day Postpartum	1,835,836	2,773,633	937,797	51.1
Dialysis	296,079	168,458	(127,621)	(43.1)
Total Parenteral Nutrition	127,639	24,833	(102,806)	(80.5)
Qualified Medicare Beneficiary	3,056,424	41,944,581	38,888,157	1,272.3
Presumptive Eligibility for Pregnant Women	59,186,133	73,344,878	14,158,745	23.9
Medi-Cal Tuberculosis Program	243,055	387,329	144,274	59.4
Minor Consent	7,139,240	42,232,285	35,093,045	491.6
Not Reported	41,301,576	48,003,135	6,701,559	16.2

/1/ Excludes County Organized Health Systems and Health Care Plans.

Note: The IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.

The IRCA program expired December 31, 1994. IRCA is shown for 1997 and 1998 because claims continue to be paid due to the lag from time of service to time of payment.

Payments are rounded independently and may not add to totals.

Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Report; Prepaid Health Plan Capitation Summaries; Rate Sheet for Managed Care Plans; and MEDSSUM File dated April 1999. (Tables 14, 15, and 20.)

### MONTHLY MEDI-CAL ELIGIBLES - TABLE 3

An average of 2,830,939 persons were eligible each month for Medi-Cal fee-for-service benefits during 1998. Average monthly eligibles in the first half of the year ran about 373,930 or 13.2 percent higher than in the last half.

The Public Assistance (PA) program accounted for 64.3 percent of the total annual average eligibles. The PA eligibles averaged 310,522 more persons in the first half of the year than in the last half.

The Medically Needy (MN) program accounted for 14.2 percent of the total annual average eligibles. The average MN eligibles ran 51,565 persons higher in the first half of the year than in the last half.

The Medically Indigent (MI) program accounted for 5 percent of the total annual average eligibles. Eligible counts in the MI program peaked in March. The average MI eligible count was higher in the first half of the year than in the last half.

The Aliens and Refugee/Entrant programs combined accounted for 8 percent of the eligible population.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and 200 Percent Poverty programs combined accounted for 9 percent of the eligible population.

The 60-Day Postpartum program accounted for less than 0.1 percent of the eligible population.

The Qualified Medicare Beneficiary program accounted for 0.2 percent of the eligible population.

Data for the Presumptive Eligibility for Pregnant Women program are not available.

The Medi-Cal Tuberculosis program, Minor Consent, and All Other groups combined accounted for 0.5 percent of the eligible population.

Table 3

MEDI-CAL PROGRAM  
MONTHLY ELIGIBLES BY PROGRAM  
CALENDAR YEAR 1998  
(FFS ONLY)

MONTH	TOTAL	PUBLIC ASSISTANCE	MEDICALLY NEEDY	MEDICALLY INDIGENT	IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY
Annual Average 1998	2,830,939	1,819,782	400,977	131,686	2	215,853	1,459	52,082	94,681
Six-Month Average	3,017,904	1,975,043	426,759	147,511	3	220,807	1,484	43,421	90,893
January	3,186,355	2,125,660	437,124	164,906	3	218,466	1,667	36,734	90,077
February	3,140,878	2,084,285	439,256	158,486	3	219,700	1,593	37,508	89,254
March	3,083,494	2,021,754	440,313	153,550	3	223,545	1,519	41,870	89,769
April	3,019,027	1,965,873	434,448	146,437	3	223,771	1,468	45,180	90,475
May	2,905,979	1,879,973	415,802	135,808	3	220,631	1,335	47,976	91,809
June	2,771,688	1,772,713	393,613	125,878	2	218,730	1,319	51,255	93,976
Six-Month Average	2,643,974	1,664,521	375,194	115,861	1	210,898	1,435	60,743	98,469
July	2,701,602	1,709,177	386,144	121,683	2	215,873	1,364	54,583	96,702
August	2,668,185	1,683,952	378,852	118,810	2	212,791	1,343	57,337	98,504
September	2,648,537	1,667,469	374,612	116,675	1	209,666	1,455	60,605	99,929
October	2,648,825	1,662,963	373,879	115,775	1	209,600	1,491	63,637	101,813
November	2,616,131	1,639,991	368,178	112,257	0	208,699	1,471	65,573	101,993
December	2,580,563	1,623,575	369,499	109,968	0	208,760	1,488	62,724	91,874
MONTH		INCOME DISREGARD	200 PERCENT POVERTY	60-DAY POST-PARTUM	QMB	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TB PROGRAM	MINOR CONSENT	ALL OTHER/1/
Annual Average 1998		94,157	868	1,572	4,737	INA	564	12,460	42
Six-Month Average		90,494	886	1,568	4,515	INA	580	13,881	41
January		90,792	911	1,508	4,205	INA	574	13,616	41
February		89,431	906	1,579	4,448	INA	574	13,783	40
March		89,359	898	1,525	4,459	INA	580	14,310	39
April		89,553	874	1,583	4,572	INA	600	14,150	40
May		90,919	871	1,656	4,668	INA	584	13,902	41
June		92,909	858	1,558	4,739	INA	568	13,527	42
Six-Month Average		97,819	850	1,577	4,959	INA	548	11,039	43
July		95,532	859	1,618	4,776	INA	574	12,670	44
August		97,358	852	1,553	4,836	INA	570	11,378	45
September		98,900	844	1,607	4,869	INA	571	11,285	44
October		100,549	852	1,625	4,985	INA	538	11,069	44
November		99,968	847	1,613	5,015	INA	524	9,952	41
December		94,609	844	1,443	5,272	INA	512	9,879	42

INA Information Not Available.

/1/ Other includes Dialysis and Total Parenteral Nutrition.

Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.

The IRCA program expired December 31, 1994. IRCA is shown for 1998 because claims continue to be paid due to the lag from time of service to time of payment.

FFS = Fee-For-Service; QMB = Qualified Medicare Beneficiary; TB = Tuberculosis.

Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Year 1998.

## MONTHLY MEDI-CAL USERS - TABLE 4

An average of 1,866,088 persons received Medi-Cal program benefits each month in 1998. Monthly users averaged 121,195 more persons in the first half of the year than in the last half.

A monthly utilization rate can be computed from Tables 3 and 4. The utilization rate for the Total Fee-For-Service Program is 66 percent of eligibles receiving service each month.

The Public Assistance (PA) group, which accounted for 67.0 percent of the total annual average Medi-Cal users, had a utilization rate of 62 percent. There were an average of 31,988 fewer PA users in the first half of the year.

The Medically Needy (MN) group, which accounted for 15 percent of the total annual average users, had a utilization rate of 70 percent. There were an average of 51,565 more MN users in the first half of the year.

The Medically Indigent (MI) group, which accounted for 5 percent of the total annual average users, had a utilization rate of 58 percent. These users averaged 3,820 less MI users in the first half of the year.

The Aliens and Refugee/Entrant groups accounted for 3 percent of the total annual average users.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and the 200 Percent Poverty groups combined accounted for 6 percent of the total annual average users.

The 60-Day Postpartum, Qualified Medicare Beneficiary, Presumptive Eligibility for Pregnant Women, Medi-Cal Tuberculosis Program, Minor Consent, and All Other groups combined accounted for 2.2 percent of the total annual users.

Table 4

MEDI-CAL PROGRAM  
MONTHLY USERS BY PROGRAM  
CALENDAR YEAR 1998  
(FFS ONLY)

MONTH	TOTAL	PUBLIC ASSISTANCE	MEDICALLY NEEDY	MEDICALLY INDIGENT	IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY
Annual Average 1998	1,866,088	1,249,720	281,489	76,728	3	62,578	1,689	14,106	39,686
Six-Month Average	1,958,127	1,322,345	292,179	84,612	4	62,911	1,811	11,633	38,840
January	2,055,744	1,395,684	296,438	95,861	6	63,021	2,005	10,773	43,171
February	1,910,949	1,299,057	281,190	80,069	5	61,366	1,866	9,666	36,732
March	1,949,659	1,322,008	289,175	84,819	4	62,332	1,837	10,502	36,760
April	1,928,941	1,300,848	290,911	82,024	4	60,885	1,791	11,573	36,796
May	1,892,147	1,272,994	289,710	79,553	1	62,488	1,680	12,466	37,210
June	2,011,323	1,343,479	305,647	85,346	2	67,375	1,689	14,816	42,370
Six-Month Average	2,079,322	1,354,333	289,045	88,432	8	67,847	1,957	9,977	37,905
July	1,928,184	1,286,950	294,221	78,598	1	65,985	1,608	15,412	41,150
August	1,700,763	1,131,298	261,075	65,359	2	61,119	1,482	13,957	36,194
September	1,658,259	1,104,512	254,487	61,553	1	58,953	1,405	14,410	35,930
October	1,869,194	1,229,518	283,559	73,353	1	66,402	1,688	18,780	45,018
November	1,678,114	1,108,569	258,255	61,711	2	60,437	1,524	17,113	40,535
December	1,809,781	1,201,724	273,205	68,489	1	60,577	1,693	19,800	44,363
MONTH		INCOME DISREGARD	200 PERCENT POVERTY	60-DAY POST-PARTUM	QMB	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TB PROGRAM	MINOR CONSENT	ALL OTHER/1/
Annual Average 1998		53,328	142	1,155	19,805	42,435	176	7,259	15,767
Six-Month Average		51,714	161	1,134	25,010	40,857	155	6,925	17,187
January		55,505	176	1,226	28,144	38,867	161	6,175	18,531
February		49,937	159	1,049	24,314	38,230	131	6,241	16,937
March		51,020	154	1,084	25,888	40,522	148	6,816	16,590
April		49,230	163	1,077	25,605	41,154	139	6,951	19,790
May		49,423	149	1,091	23,656	40,565	155	7,301	13,705
June		55,168	162	1,274	22,454	45,710	195	8,067	17,569
Six-Month Average		54,942	123	1,177	14,600	44,028	197	7,592	14,394
July		55,212	149	1,305	18,123	46,079	199	8,132	15,060
August		50,298	120	1,112	16,320	42,452	164	7,153	12,658
September		49,914	120	1,024	17,123	38,851	144	7,079	12,753
October		59,684	131	1,281	17,267	47,307	186	8,250	16,769
November		55,730	111	1,149	10,267	43,738	256	7,385	11,332
December		58,812	109	1,190	8,497	45,743	232	7,554	17,792

/1/ Other includes Dialysis, Total Parenteral Nutrition, and Not Reported.

Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.

The IRCA program expired December 31, 1994. IRCA is shown for 1998 because claims continue to be paid due to the lag from time of service to time of payment.

FFS = Fee-For-Service; QMB = Qualified Medicare Beneficiary; TB = Tuberculosis.

Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Report (Monthly - Control Totals) and Calendar Year Report.

## MEDI-CAL UTILIZATION - TABLE 5

Comparing persons eligible during a period with claims paid (rather than services provided) in that period gives rather crude comparisons, but the more correct comparison would not generally result in significantly different utilization rates.

An average of 1,866,088 persons received Medi-Cal program benefits each month in 1998. This was 180,118 fewer monthly users than in 1997.

The total number of users per 1,000 eligibles increased 10.2 percent, from 598 in 1997 to 659 in 1998. The total number of users include the Presumptive Eligibility for Pregnant Women program, however, eligibles are not available. If these users are excluded, the overall utilization rate calculates to be 644 in 1998.

In 1998, the Public Assistance group, which accounted for 70.5 percent of total users, had a utilization rate of 69 percent. The Medically Needy group had the highest utilization rate of 70 percent.

The 1998 rates compared to the 1997 rates ran higher for each group except for the OBRA Aliens, 133 Percent Poverty, 200 Percent Poverty group.

Calendar Year 1998 data do not include users of health care services provided by County Organized Health Systems (COHS) or Health Care Plans (HCPs).

TABLE 5

MEDI-CAL PROGRAM  
AVERAGE MONTHLY USERS AND USERS PER 1,000 ELIGIBLES  
BY PROGRAM AND AID CATEGORY  
CALENDAR YEARS 1997 AND 1998  
(FFS ONLY)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1997	CALENDAR YEAR 1998	USERS PER 1,000 ELIGIBLES		PERCENT CHANGE IN RATE
			1997	1998	
TOTAL	2,046,206	1,866,088	598	659	10.2
Public Assistance	1,443,097	1,249,720	618	687	11.2
Aged	223,606	214,671	699	672	(3.9)
Blind	16,075	15,830	728	716	(1.6)
Disabled	445,586	450,445	733	733	0.0
Families	757,830	568,775	547	659	20.5
Medically Needy	293,389	281,489	663	702	5.9
Aged	86,887	85,576	862	855	(0.8)
Blind	652	608	949	917	(3.4)
Disabled	50,168	47,866	846	941	11.2
Families	155,682	147,439	553	591	6.9
Medically Indigent	95,386	76,728	525	583	11.0
Adults	9,434	8,844	992	1,017	2.5
Children	85,951	67,884	499	552	10.6
IRCA Aliens	20	3	NA	1,500	NA
OBRA Aliens	72,992	62,578	306	290	(5.2)
Refugee/Entrant	2,056	1,689	NA	1,158	NA
100 Percent Poverty	8,248	14,106	260	271	4.2
133 Percent Poverty	36,881	39,686	436	419	(3.9)
185 Percent Poverty (renamed Income Disregard)	49,612	53,328	566	566	0.0
Infant	20,673	21,554	545	537	(1.5)
Pregnant Woman	28,939	31,774	581	588	1.2
200 Percent Poverty	201	142	214	164	(23.4)
Infant	56	36	514	554	7.8
Pregnant	145	106	174	132	(24.1)
60-Day Postpartum	897	1,155	518	735	41.9
Dialysis	22	20	NA	588	NA
Total Parenteral Nutrition	6	3	NA	375	NA
Qualified Medicare Beneficiary	1,847	19,805	481	4,181	769.2
Presumptive Eligibility for Pregnant Women	35,505	42,435	INA	INA	INA
Medi-Cal Tuberculosis Program	140	176	255	312	22.4
Minor Consent	1,469	7,259	308	583	89.3
Not Reported	4,439	15,767	NA	NA	NA

INA Information Not Available.

NA Not Applicable.

Claims processing time lags can distort utilization rates, especially for smaller groups of eligibles or groups whose numbers change considerably.

Note: FFS = Fee-For-Service; IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.

The IRCA program expired December 31, 1994. IRCA is shown for 1997 and 1998 because claims continue to be paid due to the lag from service to time of payment.

Figures are rounded independently and may not add to totals.

Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports and Medi-Cal Certified CID Eligibles Calendar Year Reports.

SECTION 3  
MEDI-CAL EXPENDITURES



**PAYMENT PER ELIGIBLE**  
**BY PROGRAM AND AID CATEGORY - TABLE 6**

The average monthly payment per eligible was \$295.24 in 1998. This represents an increase of \$51.60 per eligible or 21.2 percent over the prior year. Payments include the Presumptive Eligibility for Pregnant Women program, however, eligibles are not available. If these payments are excluded, the overall cost per eligible calculates to be \$293.08.

Relative cost increases exceeding the overall 21.2 percent were experienced by the Immigration Reform and Control Act (IRCA) program (up 75.6 percent) and 60-Day Postpartum (up 66.3 percent); Dialysis (up 34.4 percent) and Qualified Medicare Beneficiary (up 1,011.9 percent); and the Minor Consent Program (up 126.6 percent) and the Medi-Cal Tuberculosis Program (up 55.4 percent).

Public Assistance Families, which is a major expenditure group, had a relatively small increase in cost per eligible, up 24.3 percent to \$126.39 per month in 1998.

Calendar Year 1998 data do not include payments for health care services handled by County Organized Health Systems (COHS) or Health Care Plans (HCPs).

TABLE 6

MEDI-CAL PROGRAM  
AVERAGE MONTHLY PAYMENT PER ELIGIBLE BY PROGRAM AND AID CATEGORY  
CALENDAR YEARS 1997 AND 1998  
(FFS ONLY)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1997	CALENDAR YEAR 1998	CHANGE	
			Number	Percent
TOTAL	243.64	295.24	51.60	21.2
Public Assistance	200.15	254.61	54.46	27.2
Aged	233.43	241.06	7.63	3.3
Blind	440.26	468.15	27.89	6.3
Disabled	398.21	434.11	35.90	9.0
Families	101.72	126.39	24.67	24.3
Medically Needy	579.97	645.40	65.43	11.3
Aged	1,226.03	1,238.03	12.00	1.0
Blind	1,441.53	1,496.22	54.69	3.8
Disabled	1,461.73	1,764.24	302.51	20.7
Families	161.22	177.15	15.93	9.9
Medically Indigent	148.64	185.98	37.34	25.1
Adults	698.57	734.88	36.31	5.2
Children	118.25	147.15	28.90	24.4
IRCA Aliens	3,501.29	6,147.00	2,645.71	75.6
OBRA Aliens	191.50	191.41	(0.09)	(0.0)
Refugee/Entrant	414.46	371.89	(42.57)	(10.3)
100 Percent Poverty	33.92	38.91	4.99	14.7
133 Percent Poverty	46.56	45.61	(0.95)	(2.0)
185 Percent Poverty (renamed Income Disregard)	244.88	249.62	4.74	1.9
Infant	119.88	124.36	4.48	3.7
Pregnant Woman	340.01	342.56	2.55	0.7
200 Percent Poverty	105.23	74.55	(30.68)	(29.2)
Infant	176.32	166.97	(9.35)	(5.3)
Pregnant Woman	95.91	67.07	(28.84)	(30.1)
60-Day Postpartum	88.43	147.03	58.60	66.3
Dialysis	704.94	412.88	(292.06)	(41.4)
Total Parenteral Nutrition	1,181.89	258.63	(923.26)	(78.1)
Qualified Medicare Beneficiary	66.36	737.89	671.53	1,011.9
Presumptive Eligibility for Pregnant Women	INA	INA	INA	INA
Minor Consent	124.62	282.45	157.83	126.6
Medi-Cal Tuberculosis Program	36.83	57.23	20.40	55.4

INA Information Not Available.

NA Not Applicable.

Note: FFS = Fee-For-Service; IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.

The IRCA program expired December 31, 1994. IRCA is shown for 1997 and 1998 because claims continue to be paid due to the lag from time of service to time of payment.

Figures are rounded independently and may not add to totals.

Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.

## **PAYMENT PER USER**

### **BY PROGRAM AND AID CATEGORY - TABLE 7**

During 1998, the Medi-Cal program spent \$447.89 per month per user of service. This was \$40.65 or 10.0 percent more than in 1997.

The lowest monthly cost group was the 133 Percent Poverty beneficiary at \$108.81 per user, followed by the 100 Percent Poverty beneficiary at \$143.66 per user.

Public Assistance, Aged, Blind, and Disabled Medi-Cal payments showed increases from the previous year.

The cost for Public Assistance (PA) Families was \$191.86 per user per month, while for Medically Needy (MN) Families it was \$299.63. A larger proportion of MN Families utilize hospital inpatient services resulting in higher cost rates.

Costs per user in the MN Aged, Blind, and Disabled groups tend to be rather large. This is because a large number of persons in these groups are in a long-term care facility. The cost per Medically Needy user runs almost three times that of Public Assistance users.

Cost per user for Medically Indigent Adults and Children showed an increase of 2.6 and 12.6 percent from the previous year.

The IRCA Aliens, OBRA Aliens, 100 Percent Poverty, 133 Percent, 185 Percent Poverty (Infant), 60-Day Postpartum, Qualified Medicare Beneficiary, Presumptive Eligibility for Pregnant Women and Medi-Cal Tuberculosis Program, and Minor Consent all showed increases.

Refugee/Entrant 185 Percent Poverty (Pregnant Woman), 200 Percent Poverty, Dialysis, Total Parenteral Nutrition and Not Reported all showed decreases in the cost per user.

TABLE 7

MEDI-CAL PROGRAM  
AVERAGE MONTHLY PAYMENT PER USER BY PROGRAM AND AID CATEGORY  
CALENDAR YEARS 1997 AND 1998

(FFS ONLY)

PROGRAM AND AID CATEGORY	CALENDAR YEAR 1997	CALENDAR YEAR 1998	CHANGE	
			Number	Percent
TOTAL	\$407.24	\$447.89	40.65	10.0
Public Assistance	323.76	370.75	46.99	14.5
Aged	333.72	358.92	25.20	7.6
Blind	605.10	654.05	48.95	8.1
Disabled	543.11	592.32	49.21	9.1
Families	185.87	191.86	5.99	3.2
Medically Needy	874.62	919.36	44.74	5.1
Aged	1,421.97	1,447.78	25.81	1.8
Blind	1,518.91	1,631.57	112.66	7.4
Disabled	1,727.11	1,874.52	147.41	8.5
Families	291.72	299.63	7.91	2.7
Medically Indigent	283.10	319.20	36.10	12.8
Adults	704.35	722.91	18.56	2.6
Children	236.86	266.60	29.74	12.6
IRCA Aliens	1,225.45	4,097.75	2872.30	234.4
OBRA Aliens	625.96	660.23	34.27	5.5
Refugee/Entrant	364.87	321.25	(43.62)	(12.0)
100 Percent Poverty	130.38	143.66	13.28	10.2
133 Percent Poverty	106.75	108.81	2.06	1.9
185 Percent Poverty (renamed Income Disregard)	432.90	440.74	7.84	1.8
Infant	219.78	231.41	11.63	5.3
Pregnant Woman	585.14	582.74	(2.40)	(0.4)
200 Percent Poverty	492.62	455.70	(36.92)	(7.5)
Infant	343.20	301.47	(41.73)	(12.2)
Pregnant	550.33	508.08	(42.25)	(7.7)
60-Day Postpartum	170.55	200.12	29.57	17.3
Dialysis	1,121.50	701.91	(419.59)	(37.4)
Total Parenteral Nutrition	1,772.83	689.81	(1083.02)	(61.1)
Qualified Medicare Beneficiary	137.90	176.49	38.59	28.0
Presumptive Eligibility for Pregnant Women	138.92	144.03	5.11	3.7
Medi-Cal Tuberculosis Program	144.68	183.39	38.71	26.8
Minor Consent	404.99	484.83	79.84	19.7
Not Reported	775.35	253.71	(521.64)	(67.3)

NA: Not Applicable.

Note: IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.  
The IRCA program expired December 31, 1994. IRCA is shown for 1997 and 1998 because claims continue to be paid due to the lag from time of service to time of payment. Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.

## **COST PER SERVICE - TABLE 8**

The most frequently used physician service is, of course, the outpatient visit. In 1998, the Medi-Cal average cost per physician outpatient visit was \$23.20. Outpatient visits include office, emergency room, home, and other outpatient situations.

Physicians' hospital inpatient visits averaged \$33.07 per visit. Visits for long-term care inpatients averaged \$25.31 per visit.

After outpatient visits, the second largest expenditure category of physician services is for inpatient hospital surgery. This service has the highest cost rate, \$518.87 per service in 1998.

The average cost per drug prescription was \$41.25 in 1998, an increase of 25.0 percent from the prior year.

The highest cost per service in the Medi-Cal program is, of course, for hospital inpatient care. The average cost per hospital inpatient day in 1998 was \$1,040.66 for Public Assistance Families and Medically Needy Families. Those groups accounted for 25.5 percent of total hospital inpatient expenditures in 1998 and were used in Table 8 so that most Medicare/Medi-Cal crossover data could be excluded. Costs include ancillaries as well as accommodations.

In 1998, the average cost per day of care was \$86.97 for nursing facilities and \$116.07 for intermediate care facilities-developmentally disabled.

**TABLE 8**  
**MEDI-CAL PROGRAM**  
**AVERAGE COST PER SERVICE FOR SELECTED SERVICES**  
**CALENDAR YEARS 1997 AND 1998**

(FFS ONLY)

TYPE OF SERVICE	CALENDAR YEAR 1997	CALENDAR YEAR 1998	PERCENT CHANGE
Physicians Services/1/			
Outpatient Visits	23.09	23.20	0.5
Hospital Inpatient Visits	32.18	33.07	2.8
Critical Care Visits	87.60	92.65	5.8
Long-Term Care Visits	25.08	25.31	0.9
Ophthalmological Examinations	34.26	34.06	(0.6)
Inpatient Hospital Surgery	562.55	518.87	(7.8)
Outpatient Surgery	86.06	85.90	(0.2)
Psychiatry	26.45	27.89	5.4
Immunization and Injection	12.58	13.67	8.7
Drug Prescriptions	32.99	41.25	25.0
Hospital Inpatient Day/2/	1,028.15	1,040.66	1.2
Nursing Facility Day	82.03	86.97	6.0
Intermediate Care Facility-DD Day	112.56	116.07	3.1

/1/ Excludes Medicare/Medi-Cal crossover claims.

/2/ Reflects data for Public Assistance Families and Medically Needy Families only in order to exclude most Medicare/Medi-Cal crossover claims.

Note: FFS = Fee-For-Service.  
Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.

## PAYMENTS BY PROVIDER TYPE - TABLE 9

In 1998, provider payments averaged \$835.8 million per month, up \$2,508,869 million from the prior year's average.

Nursing Facilities received the largest share of the Medi-Cal provider payments. Monthly expenditures for these services increased 3.7 percent from the prior year to \$174.2 million per month.

Community Hospitals was the second highest paid provider group. Their payments decreased 1.1 percent from 1998 to \$172.8 million per month.

Physicians received 70.9 million per month in 1998, down 18.6 percent from the prior year.

Payments to County Hospitals averaged \$51.1 million per month during 1998, down 11.3 percent from the prior year.

All of the provider types showed an increase in 1998, except Dentist, Optometrist, Chiropractor, Podiatrist, County Hospital, Community Hospital, State Hospital, Laboratory Facility, Medical Transportation, and Organized Outpatient Clinic, which showed decreases of 9.7, 22.2, 32.0, 17.9, 11.3, 1.1, 2.1, 9.7, 6.9 and 0.4 percent respectively.

**TABLE 9**  
**MEDI-CAL PROGRAM**  
**AVERAGE MONTHLY PAYMENT BY TYPE OF PROVIDER**  
**CALENDAR YEARS 1997 AND 1998**  
**(FFS ONLY)**

TYPE OF PROVIDER	CALENDAR YEAR 1997	CALENDAR YEAR 1998	CHANGE	
			Number	Percent
TOTAL	\$833,301,626	\$835,810,495	\$2,508,869	0.3
Physician	87,118,435	70,945,695	(16,172,740)	(18.6)
Pharmacy	128,785,990	150,780,412	21,994,422	17.1
Dentist	52,367,228	47,281,330	(5,085,898)	(9.7)
Optometrist	3,350,933	2,607,535	(743,398)	(22.2)
Chiropractor	50,689	34,482	(16,207)	(32.0)
Podiatrist	2,306,234	1,892,335	(413,899)	(17.9)
County Hospital	57,632,536	51,140,974	(6,491,562)	(11.3)
Inpatient	48,523,126	44,582,774	(3,940,352)	(8.1)
Outpatient	9,109,410	6,558,200	(2,551,210)	(28.0)
Community Hospital	174,731,831	172,812,927	(1,918,904)	(1.1)
Inpatient	154,435,106	153,856,239	(578,867)	(0.4)
Outpatient	20,296,725	18,956,688	(1,340,037)	(6.6)
State Hospital	39,188,420	38,359,959	(828,461)	(2.1)
Nursing Facility	167,972,886	174,244,249	6,271,363	3.7
Intermediate Care Facility-DD	21,203,867	21,945,323	741,456	3.5
Home Health Agency	5,160,197	7,705,361	2,545,164	49.3
Laboratory Facility	15,441,151	13,938,612	(1,502,539)	(9.7)
Medical Transportation	7,494,560	6,979,577	(514,983)	(6.9)
Rehabilitation Facility	497,598	542,875	45,277	9.1
Organized Outpatient Clinic	24,073,688	23,983,854	(89,834)	(0.4)
All Other Providers	45,925,386	50,614,994	4,689,608	10.2

Note: FFS = Fee-For-Service.  
Averages are rounded independently and may not add to totals.  
Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.



## **COST PER ELIGIBLE BY PROVIDER TYPE - TABLE 10**

The average monthly cost per eligible was \$295.24 in 1998.

Nursing Facilities was the largest expenditure category and had the highest cost per eligible per month at \$61.55 up 25.3 percent from 1997.

Community Hospitals was the second largest expenditure category at \$61.04 per month, an increase of 19.5 percent from 1997.

Pharmacies was the third largest expenditure category and its monthly cost per eligible of \$53.26 reflected an increase of 41.5 percent from 1997.

Payments to Physicians cost \$25.06 per eligible per month, a 1.6 percent decrease from 1997.

County Hospitals was the fourth largest expenditure category and its monthly cost per eligible of \$18.07 reflected an increase of 7.2 percent from 1997.

TABLE 10

MEDI-CAL PROGRAM  
AVERAGE MONTHLY COST PER ELIGIBLE BY TYPE OF PROVIDER  
CALENDAR YEARS 1997 AND 1998

(FFS ONLY)

TYPE OF PROVIDER	CALENDAR YEAR 1997	CALENDAR YEAR 1998	PERCENT CHANGE
TOTAL	\$243.64	\$295.24	21.2
Physician	25.47	25.06	-1.6
Pharmacy	37.65	53.26	41.5
Dentist	15.31	16.70	9.1
Optometrist	0.98	0.92	-6.1
Chiropractor	0.01	0.01	0.0
Podiatrist	0.67	0.67	0.0
County Hospital	16.85	18.07	7.2
Inpatient	14.19	15.75	11.0
Outpatient	2.66	2.32	-12.8
Community Hospital	51.09	61.04	19.5
Inpatient	45.15	54.35	20.4
Outpatient	5.93	6.70	13.0
State Hospital	11.46	13.55	18.2
Nursing Facility	49.11	61.55	25.3
Intermediate Care Facility-DD	6.20	7.75	25.0
Home Health Agency	1.51	2.72	80.1
Laboratory Facility	4.51	4.92	9.1
Medical Transportation	2.19	2.47	12.8
Rehabilitation Facility	0.15	0.19	26.7
Organized Outpatient Clinic	7.04	8.47	20.3
All Other Providers	13.43	17.88	33.1

Note: FFS = Fee-For-Service.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports and Medi-Cal Certified CID Eligibles Calendar Year Reports. (Tables 3 and 9.)

## **COST PER USER BY PROVIDER TYPE - TABLE 11**

In 1998, the average monthly cost per recipient was \$447.89.

Users of State Hospital services and County and Community Hospital Inpatient services were the most costly - of those three provider types, State Hospital services showed the highest cost per user at \$9,624.28 per month, up 2.5 percent from 1997; County Hospital Inpatient services showed the cost per user at \$5,272.01, down 2.0 percent from 1997; and Community Hospital Inpatient services showed the lowest cost per user at \$3,537.16, down 1.8 percent from 1997.

Home Health Agency showed the largest cost increase from a year ago, up 38.6 percent per recipient.

**TABLE 11**  
**MEDI-CAL PROGRAM**  
**AVERAGE MONTHLY COST PER USER BY TYPE OF PROVIDER**  
**CALENDAR YEARS 1997 AND 1998**  
**(FFS ONLY)**

TYPE OF PROVIDER	CALENDAR YEAR 1997	CALENDAR YEAR 1998	PERCENT CHANGE
TOTAL	\$407.24	\$447.89	10.0
Physician	94.07	104.05	10.6
Pharmacy	119.15	154.00	29.2
Dentist	186.82	178.43	-4.5
Optometrist	62.93	59.37	-5.7
Chiropractor	15.44	14.36	-7.0
Podiatrist	64.80	63.14	-2.6
County Hospital	701.23	785.18	12.0
Inpatient	5,378.91	5,272.01	-2.0
Outpatient	119.62	111.12	-7.1
Community Hospital	650.43	717.51	10.3
Inpatient	3,474.36	3,537.16	1.8
Outpatient	85.69	90.71	5.9
State Hospital	9,388.70	9,624.28	2.5
Nursing Facility	2,439.27	2,557.67	4.9
Intermediate Care Facility-DD	3,543.43	3,700.16	4.4
Home Health Agency	551.13	764.11	38.6
Laboratory Facility	77.67	84.20	8.4
Medical Transportation	193.89	232.90	20.1
Rehabilitation Facility	116.67	116.90	0.2
Organized Outpatient Clinic	131.42	136.22	3.7

Note: FFS = Fee-For-Service.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Reports.

## TOTAL MEDI-CAL PROGRAM EXPENDITURES - TABLE 12

Table 12 is the only table showing all types of Medi-Cal program expenditures. The following figures reflect actual budget item expenditures and, as such, are reported here by fiscal (budget) year rather than by calendar year.

Total Medi-Cal expenditures were \$18.34 billion for Fiscal Year (FY) 1997-98, an increase of 5.0 percent from FY 1996-97.

The \$10.1 billion in direct fee-for-service provider payments was an increase of 1.2 percent. These expenditures accounted for 55 percent of the total expenditures in FY 1997-98 and 58 percent in the FY 1996-97.

Delta Dental (DD) is an at-risk fiscal intermediary providing authorization and payment for virtually all types of Medi-Cal dental services rendered. DD covers all Medi-Cal eligibles except those enrolled in HCPs providing dental care. In FY 1997-98, the approximate number of Medi-Cal eligibles covered by DD was 4.57 million persons per month. Capitation payments totaled \$682.3 million, an increase of 22.4 percent from FY 1996-97.

Health Care Plan (HCP) capitations decreased 54.4 percent to \$489.0 billion in FY 1997-98.

There were six County Organized Health Systems (COHS) in effect during FY 1997-98. Santa Barbara Health Initiative was effective September 1, 1983, Health Plan of San Mateo was effective December 1, 1987, Partnership HealthPlan of California (PHC) was effective May 1, 1994, Orange County Organized Health System (CalOPTIMA) was effective October 1, 1995, Santa Cruz County Health Options was effective January 1, 1996, and Partnership Healthplan of California (PHC) was effective May 1, 1994 and the plan expanded on March 1, 1998. Payments to COHS totaled \$706.8 million.

Expenditures for Early Periodic Screening Services increased 16.2 percent to \$64.7 million in FY 1997-98. The program provides screening, diagnostic, and treatment services for all Medi-Cal eligibles under age 21.

The Short-Doyle/Medi-Cal program provides community mental health services to Medi-Cal program eligibles. The \$506.5 million expenditure in FY 1997-98 reflects an increase of 17.9 percent from the prior fiscal year.

Buy-In is the purchase of Medicare Part A and Part B medical insurance coverage by the Medi-Cal program for those eligibles who are entitled to the coverage. Expenditures for Medicare Part A and Part B Buy-In ran \$775.9 million in FY 1997-98.

Administration costs include various State departmental expenditures, payments for claims processing operations, and county administrative expenses. In FY 1997-98, these expenditures increased 8.1 percent from the prior fiscal year. Administration costs accounted for 4.7 percent of total expenditures in FY 1997-98 and 4.5 percent of total expenditures in 1996-97.

TABLE 12

TOTAL MEDI-CAL PROGRAM EXPENDITURES  
BY TYPE OF EXPENDITURE AND SOURCE OF FUNDS  
FISCAL YEARS 1997-98 AND 1998-99

TYPE OF EXPENDITURE	FISCAL YEAR		PERCENT CHANGE
	1997-98	1998-99	
TOTAL	\$17,461,136,700	\$18,335,763,200	5.0
Provider Payments, Fee-For-Service	10,043,698,100	10,162,771,100	1.2
Dental	557,264,000	682,311,400	22.4
Health Care Plans	1,071,435,600	489,010,700	(54.4)
County Organized Health Systems	686,173,900	706,775,500	3.0
Primary Care Case Management/ Other Managed Care	186,681,300	1,004,909,700	438.3
Early Periodic Screening Services	55,656,200	64,689,300	16.2
Miscellaneous Non-Fee-For-Service	964,085,400	1,151,686,700	19.5
Short-Doyle/Medi-Cal	429,666,200	506,515,900	17.9
Medicare Buy-In	706,281,800	775,938,700	9.9
Audits and Lawsuits	1,888,300	11,296,000	498.2
Disproportionate Share Hospital (SB 855)	2,144,622,800	2,087,381,000	(2.7)
Recoveries	(180,584,500)	(166,305,300)	(7.9)
Administration	794,267,600	858,782,500	8.1

Note: Excludes Interim Payments charged to the General Fund Loan.  
Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Accounting Records.

SECTION 4  
MEDI-CAL PROVIDER PARTICIPATION

## **MEDI-CAL PROVIDER PARTICIPATION – TABLE 13**

Table 13 shows the total number of selected types of providers and their distribution by amount paid. The figures include out-of-state providers. Physicians include group practices which are counted as one provider. This understates the physician count, but it is not known how many physicians are practicing in a group.

A county distribution of selected types of providers is given in Table 23 and Table 24. The physician and hospital counts of Table 23 differ from Table 13 due to a different billing period used in Table 23.

The majority of providers are in the \$1-\$599, \$600-\$9,999, and \$10,000-\$49,999 payment intervals. However, for Pharmacies, there were more providers in the \$100,000-\$999,999 payment interval.

The large number of total general hospitals and the large number who received less than \$10,000 each reflects the fact that out-of-state hospital billings are included in the data. Table 23 shows 669 hospitals received payment from Medi-Cal for either inpatient services, outpatient services, or both.

For intermediate care facilities for the developmentally disabled (DD), the largest paid amount interval was \$100,000-\$999,999.

For nursing facilities, the largest paid amount interval was \$1,000,000 and Over.



TABLE 13

MEDI-CAL PROGRAM  
NUMBER OF PROVIDERS RECEIVING MEDI-CAL PROGRAM PAYMENTS  
BY SELECTED TYPE OF PROVIDER AND AMOUNT PAID  
CALENDAR YEAR 1998

SELECTED TYPE OF PROVIDER	TOTAL PROVIDERS	NUMBER OF PROVIDERS BY AMOUNT PAID					
		\$1- \$599	\$600- \$9,999	\$10,000- \$49,999	\$50,000- \$99,999	\$100,000- \$999,999	\$1,000,000 and Over
Acupuncturists	748	134	407	173	25	9	0
Adult Day Health Care Centers	99	1	0	4	4	87	3
Audiologists	309	58	113	84	41	13	0
Birthing Centers	5	0	1	2	0	2	0
Blood Banks	5	1	2	1	1	0	0
Certified Hospice Service	49	0	7	17	6	19	0
Chiropractors	450	300	144	6	0	0	0
Community Hemodialysis Center	328	9	14	41	33	208	23
Dentists	9,303	1,659	3,026	2,306	940	1,319	53
Family Nurse Practitioner	20	10	3	5	0	2	0
General Hospitals	2,155	728	702	196	53	164	312
Hearing Aid Dispensers	288	33	133	89	18	15	0
Heroin Detoxification	67	7	40	16	3	1	0
Home Health Agencies	701	99	189	176	63	153	21
In-Home Medical Care	46	2	9	13	8	13	1
Independent Rehabilitation Facility	99	3	20	39	25	12	0
Intermediate Care Facilities-DD/1/	951	0	4	24	24	876	23
Laboratory Facilities	920	187	304	163	75	145	46
Local Education Agencies	477	96	89	121	87	79	5
Medical Transportation	770	150	188	153	77	190	12
Mental Hospitals	4	0	1	0	0	2	1
Nurse Anesthetists	98	34	46	17	0	1	0
Nurse Midwives	290	44	58	61	26	87	14
Nursing Facilities	1,507	22	69	94	41	414	867
Occupational Therapists	42	14	23	4	1	0	0
Opticians	409	87	205	94	11	8	4
Optometrists	2,153	389	996	613	117	38	0
Organized Outpatient Clinics	697	102	208	156	51	176	4
Orthotists	50	7	15	13	3	10	2
Pharmacies	8,157	1,717	1,301	1,116	721	2,896	406
Physical Therapists	178	91	75	11	0	1	0
Physicians	29,950	8,726	11,329	6,219	1,750	1,857	69
Podiatrists	1,196	366	549	194	38	47	2
Portable X-Ray Laboratory	33	6	15	8	1	3	0
Prosthetists	202	20	57	61	35	28	1
Psychologists	1,834	603	905	259	56	11	0
Rural Health Clinics	666	153	27	47	55	317	67
Speech Therapists	173	27	90	36	9	11	0
Surgicenter	210	52	65	73	11	9	0

/1/ Includes DD-Habilitative and DD-Nursing.

Note: Includes out-of-state providers. Physician group practices are counted as one provider. Optometric group practices are counted as one provider.

Source: State of California, Department of Health Services, Report on Provider Participation in the Medicaid Program, Calendar Year 1998.

SECTION 5  
MEDI-CAL CAPITATED HEALTH SYSTEMS

## HEALTH CARE PLAN ENROLLMENT - TABLE 14

A Health Care Plan is an organized system, which provides comprehensive health care services to an enrolled population.

Under Section 14200 et seq., of the Welfare and Institutions (W&I) Code, the Medi-Cal Program provides beneficiaries an opportunity to enroll in a managed care alternative to the Medi-Cal Fee-For-Service (FFS) system. Under this authority, the Department of Health Services contracts with Health Care Plans (HCPs) and pilot projects to provide comprehensive managed care in specified areas of the State on a prepaid, at-risk basis. Under Federal Law, California's HCPs are the equivalent of Health Maintenance Organizations (HMOs).

HCPs are reimbursed at a per-person per-month FFS equivalent Medi-Cal cost.

Health Care Plan enrollees and payments shown in this report are obtained from the Worksheet for Capitation Payment (Initial Capitation Only, excluding supplemental adjustments, such as, any eligible on hold until certain issues have been resolved; AIDS Capitations; and new eligibles with enrollment beginning after the initial capitation).

An average of 1,348,361 Medi-Cal eligibles were enrolled in Health Care Plans (HCPs) each month of 1997. The enrollment increased 76.3 percent from the 764,694 persons enrolled in the prior year.

During 1997, \$1.37 billion in capitation payments were made to Health Care Plans by the Medi-Cal program. This was \$505.4 million (or 58.4 percent) more than was paid in the prior year.

Los Angeles County was the major county accounting for 445,015 of the 1,348,361 enrollees in 1997. Capitation payments were up \$38.5 million from the \$446.5 million paid by the Medi-Cal program during Calendar Year 1996. Los Angeles County enrollees accounted for 33.0 percent of the total enrollment and 35.4 percent of the total capitation payments.

Sacramento County, with a monthly average of 139,212 enrollees in 1997, was the only other county with at least 10 percent of the total enrollment. Sacramento County capitation payments for enrollees accounted for \$126.6 million (down \$21.9 million from the prior year) or 9.2 percent of the total capitation payments.

In 1997, seventy-three percent of all monthly HCP enrollees and seventy-three percent of the total capitation payments were distributed to Los Angeles County and the combined Counties of Sacramento, Alameda, San Bernardino, San Diego, and Fresno.

During 1997, Medi-Cal had contracts with HCPs in 16 counties.

TABLE 14

MEDI-CAL PROGRAM  
AVERAGE MONTHLY PREPAID HEALTH PLAN ENROLLEES  
AND TOTAL CAPITATION PAYMENTS BY COUNTY  
CALENDAR YEAR 1998

(HCPs ONLY)

COUNTY	AVERAGE MONTHLY ENROLLEES	TOTAL CAPITATION PAYMENTS/1/
TOTAL	1,768,096	\$1,689,188,776
Alameda	96,014	104,151,224
Contra Costa	44,054	49,178,895
Fresno	113,784	100,408,036
Kern	75,400	70,202,998
Los Angeles	795,456	728,905,233
Marin	268	328,517
Riverside	65,006	67,060,275
Sacramento	149,128	138,051,303
San Bernardino	102,982	97,327,023
San Diego	111,378	107,499,608
San Francisco	35,324	53,503,273
San Joaquin	66,008	55,670,318
Santa Clara	67,358	76,649,594
Sonoma	465	507,350
Stanislaus	45,326	39,603,721
Yolo	147	141,409

/1/ Does not show Medicare recovery, excess risk liability payments, adjustments for enrollees with AIDS, or retroactive capitation rate adjustments. For Fiscal Year 1998-99, excess risk liability payments are not complete at this time.

Note: HCPs = Health Care Plans.

Figures are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Prepaid Health Plan Status Code 1 Reports and Prepaid Health Plan Capitation Summaries.

## COUNTY ORGANIZED HEALTH SYSTEMS - TABLE 15

County Organized Health Systems (COHS) are prepaid by the Medi-Cal program on a capitated at-risk basis. COHSs are responsible for providing authorization and payment for most non-dental Medi-Cal services rendered to Medi-Cal eligibles residing in their respective counties.

The County Organized Health System estimated eligibles and estimated payments shown in this report are obtained from the Rate Sheet for Managed Care Plans and the Medi-Cal Eligibility Data System Summary File.

County Organized Health Systems currently exist in five counties (Orange, San Mateo, Santa Barbara, Santa Cruz and Solano Counties).

An average of 378,236 Medi-Cal eligibles were enrolled in County Organized Health Systems (COHS) each month of 1997. The enrollment decreased 5.1 percent from the average of 398,493 persons eligible each month in 1996.

During 1997, \$672.1 million in capitation payments were made to County Organized Health Systems by the Medi-Cal program. This was 4.6 million or 0.7 percent more than the \$667.5 million paid in 1996. This increase is due to the expansion of County Organized Health Systems.

The Santa Barbara Health Initiative (SBHI) was effective September 1, 1983. A total of \$84.9 million in capitation payments were made for an average of 39,552 monthly eligibles during 1997.

The Health Plan of San Mateo (HPSM) was effective December 1, 1987. A total of \$81.0 million in capitation payments were made for an average of 45,665 monthly eligibles during 1997.

The Partnership HealthPlan of California (PHC), which provides health care to Solano and Napa Counties was effective May 1, 1994. A total of \$96.5 million in capitation payments were made for an average of 44,902 monthly eligibles during 1997.

The Orange County Organized Health System (CalOPTIMA) was effective October 1, 1995. A total of \$360.7 million in capitation payments were made for an average of 224,871 monthly eligibles.

The Santa Cruz County Health Options (SCCHO) was effective January 1, 1996. A total of \$49.0 million in capitation payments were made for an average of 23,246 monthly eligibles during 1997.

TABLE 15

MEDI-CAL PROGRAM  
 ESTIMATED AVERAGE MONTHLY COUNTY ORGANIZED HEALTH SYSTEMS  
 ELIGIBLES AND TOTAL CAPITATION PAYMENTS BY COUNTY  
 CALENDAR YEAR 1999

(COHS ONLY)

COUNTY	ESTIMATED AVERAGE MONTHLY ELIGIBLES	ESTIMATED TOTAL CAPITATION PAYMENTS
TOTAL	358,831	\$775,616,140
Napa	7,226	23,735,183
Orange	210,600	438,643,680
San Mateo	40,647	78,403,554
Santa Barbara	36,733	87,242,250
Santa Cruz	20,801	54,079,917
Solano	42,824	93,511,556

Note: COHS = County Organized Health Systems.

Figures may differ from previously published reports.

Capitation payments do not include excess risk liability payments, adjustments for enrollees with AIDS, or retroactive capitation rate adjustments made after April 2000. For Fiscal Year 1998-99, excess risk liability payments are not complete at this time.

Source: State of California, Department of Health Services, Rate Sheet for Managed Care Plans and MEDSSUM File dated April 2000.

## ORANGE COUNTY ORGANIZED HEALTH SYSTEM (CalOPTIMA)

The Orange County Organized Health System (CalOPTIMA) is a Medi-Cal County Organized Health System, under contract to the State, which is designed to provide a more economical organization of health care resources on a case management basis.

All services authorized for Medi-Cal reimbursement will be provided through CalOPTIMA with the following exceptions: services authorized by the California Children's Services program for the diagnosis and treatment of the CCS eligible condition of a specific member; dental services, as defined in Table 22, CCR, Section 51059; Short-Doyle/Medi-Cal (SD/MD) and Medi-Cal fee-for-service mental health services, including psychiatric inpatient services and outpatient mental health services provided by mental health professionals; alcohol and drug treatment services available under the (SD/MD) program as defined in Title 22, CCR, Section 51341(a) and (c) and outpatient heroine detoxification as defined in Title 22, CCR, Section 51328; services rendered under the Adult Day Health Programs pursuant to Title 22, CCR, Section 54001; services rendered under the Multipurpose Senior Services Program pursuant to Chapter 5 (commencing with Section 9400) of Part I of Division 8.5 of the Welfare and Institutions code; or Home and Community Based Care waived services as defined in Title 22, CCR, Section 51176; Local Education Authority (LEA) services as described in Title 22, CCR, Section 51360 when provided pursuant to an Individual Education Plan (IEP) or Individual Family Services Plan (IFSP); LEA assessment services as described in Title 22, CCR, Section 51360(b)(1) for eligible students; services rendered in a state or federal hospital; laboratory services provided under the state Serum Alpha-fetoprotein Testing Program administered by the Genetic Disease Branch of the Department of Health Services; fabrication of Optical Lenses; and Targeted Case Management Services as specified in Title 22, CCR, Section 51351.

### CalOPTIMA

<u>Aid Group</u>	<u>Aid Code</u>
Adult	81, 86, 87
Aged	10, 14, 16, 17, 18
Child	4C, 4K, 5K, 3, 4, 45, 82, 83
Disabled	6A, 6C, 20, 24, 26, 27, 28, 36, 60, 64, 65, 66, 67, 68
Family 59	3A, 3C, 3P, 3R, 1, 2, 8, 30, 32, 33, 34, 35, 37, 38, 39, 40, 42, 54,
Long Term Care	13, 23, 63

Estimated capitation payments do not include payments made to County Organized Health Systems for excess risk liability claims.

## HEALTH PLAN OF SAN MATEO (HPSM)

The Health Plan of San Mateo (HPSM) is a Medi-Cal County Organized Health System, under contract to the State, which is designed to provide a more economical organization of health care resources on a case management basis.

All services authorized for Medi-Cal reimbursement will be provided through the Health Plan of San Mateo with the following exceptions: Services in any federal or state governmental hospital ("State hospital" does not mean county hospital); Services rendered under the California Children's Services (CCS) case management are not reimbursable under the State's Title XIX program; Child Health and Disabilities Prevention (CHDP) services which are those health care services for eligibles under 21 years of age, and provided in accordance with Title 17, California Code of Regulations (CCR), Section 6800, et seq.; Dental services, as defined in Title 22, CCR, Section 51059; Short-Doyle/Medi-Cal drug services; all Medi-Cal mental health services except Long term care services rendered by nursing and intermediate care facilities; services rendered under the Adult Day Health Programs pursuant to Title 22, CCR, Section 54001, et seq.; services rendered under the Multipurpose Senior Services Program pursuant to Chapter 5 (commencing with Section 9400) of Part 1 of Division 8.5 of the Welfare and Institutions Code; and Home or community-based care waived services.

OBRA/IRCA recipients in San Mateo County began receiving services through the Health Plan of San Mateo (HPSM), effective September 1, 1993.

Currently, all recipients with an identification number beginning with County Code 41 (San Mateo County) with the exceptions of aid codes 07, 7C, 44, 48, 49, 50, 69, 70, 74, 75, 79 and 80, who are eligible to receive medical benefits under Medi-Cal or as Medicare/Medi-Cal crossovers are served through the Health Plan of San Mateo

Aged: 10, 14, 16, 17, 18

Disabled: 20, 24, 26, 27, 28, 36, 60, 64, 65, 66, 67, 68, 6A, 6C

Family: 01, 02, 08, 30, 32, 33, 34, 35, 37, 38, 39, 3P, 3R, 40, 42, 54, 59, OA, 3A,  
3C, 3G, 3H, 3L, 3M, 3N, 3U, 5X, 7X

Child: 03, 04, 45, 82, 83, 4C, 4K, 5K

Adult: 81, 86, 87

Long Term Care: 13, 23, 53, 63

IRCA/OBRA: 55, 58, 5F, 5G, 5N

Percent of Poverty: 47, 72, 7A, 8P, 8R (Effective December 1, 1998)

Estimated capitation payments do not include payments made to County Organized Health Systems for AIDs and excess risk liability claims.



## SANTA BARBARA HEALTH INITIATIVE (SBHI)

The Santa Barbara Health Initiative (SBHI) is a Medi-Cal County Organized Health System administered by Santa Barbara Regional Health Authority under contract to the State. This program provides health care services on a case management basis.

All services authorized for Medi-Cal reimbursement are provided through the Santa Barbara Health Initiative with the following exceptions: Services in any federal or state governmental hospital; Services rendered under California Children's Services (CCS) case management and not reimbursable under the State's Title XIX program; Child Health and Disability Prevention (CHDP) services to eligibles under 21 years of age provided in accordance with the provisions of Title 17, California Code of Regulations (CCR), Section 6800, et seq.; Dental services, as defined in Title 22, CCR, Section 51059; Specialty Mental Health and Short-Doyle/Medi-Cal mental health services; Adult Day Health Care; Laboratory analysis and reporting under the State serum alpha-fetoprotein testing program administered by the Genetic Disease Branch of the State Department of Health Services; The facility or per diem charge component of services rendered to covered beneficiaries 21 to 64 years of age institutionalized in a Joint Commission on Accreditation of Healthcare Organizations (JCAHO) accredited facility designated by the United States Department of Health and Human Services (DHHS) as an Institution for the Mentally Disordered (IMD), except for covered beneficiaries who were receiving such services before turning 21 years of age and who may continue to require such services in which case coverage may be extended until the beneficiary's 22nd birthday; and the facility or per diem charge component of services rendered to covered beneficiaries 64 years of age and under, institutionalized in a non-JCAHO accredited facility designated by DHHS as an IMD.

- Specialty Mental Health Services including psychiatric inpatient services and outpatient mental health services provided by psychologists or psychiatrists, or by Specialty Mental Health Providers under the EPSDT program. However, as specified in Article V, Section F 2(g), or the Contract, the Authority is responsible for all mental health drugs.
- Short-Doyle Drug Medi-Cal Substance Abuse Services as defined in Title 22, CCR, Section 51341.1. However, outpatient heroin detoxification is a Covered Service under this Contract.

Currently, all recipients with an identification number beginning with County Code 42 (Santa Barbara County) with the exception of Aid Codes 07, 7C, 44, 48, 49, 51, 52, 55, 56, 57, 58, 69, 70, 74, 75, and 79 who are eligible to receive medical benefits under Medi-Cal or as Medicare/Medi-Cal crossovers are served through the Santa Barbara Health Initiative. (Medi-Cal Aid Codes are listed at the end of this report.)

Estimated capitation payments do not include payments made to County Organized Health Systems for excess risk liability claims.

## PARTNERSHIP HEALTHPLAN OF CALIFORNIA (PHC)

The Partnership HealthPlan of California (PHC) is a Medi-Cal County Organized Health System, under contract to the State, which is designed to provide a more economical organization of health care resources on a case management basis for most Medi-Cal recipients residing in both Solano and Napa Counties.

Nearly all services authorized for Medi-Cal reimbursement will be provided through the Partnership HealthPlan of California with the following exceptions: Services rendered under the California Children's Services case management and not reimbursable under the State's Title XIX program; Dental services, as defined in Title 22, California Code of Regulations (CCR), Section 51059 and 51307 and 51340.1; Short-Doyle/Medi-Cal mental health services as defined in Title 22, CCR, Section 51341. Short-Doyle Drug Medi-Cal Substance Abuse Services as defined by Title 22, CCR, Section 51341.1. However heroin detoxification is a covered service under this contract. Laboratory analysis and reporting under the State serum alpha-fetoprotein testing program administered by the Genetic Disease Branch of the State Department of Health Services; Services rendered under the Adult Day Health Programs pursuant to Title 22, CCR, Section 54001, et seq.; Services rendered under the Multipurpose Senior Services Program pursuant to Chapter 5 (commencing with Section 9400) of Part 1 of Division 8.5 of the Welfare and Institutions Code; or Home and community-based care waived services as described in Title 22, CCR, Section 51346; Local Education Authority (LEA) services described in Title 22, CCR, Section 51360 when provided pursuant to an Independent Education Plan (IEP) or Individual Family Services Plan (IFSP); LEA assessment services as described in Title 22, CCR, Section 51360 (b) (1) for eligible students; Services rendered in a State or federal hospital; fabrication of optical lenses; for Napa County Medi-Cal beneficiaries only, Specialty Mental Health Services. However, contractor is responsible for all mental health drugs. The plan expanded into Napa County on March 1, 1998, and also changed its name. What this all means is that mental health (Specialty Mental Health Services including psychiatric inpatient and outpatient services provided by psychologists, psychiatrists, or by Specialty Mental Health providers under the EPSDT program) is carved-out of the contract for NAPA beneficiaries only. But mental health services (Specialty Mental Health) is carved-in for Solano County beneficiaries.

Currently, all recipients with a Medi-Cal identification number beginning with County Code 48 (Solano County) and County Code 28 (Napa County) with the following Aid Codes receive medical services through the Partnership HealthPlan of California:

Aged: 10, 14, 16, 17, and 18

Disabled: 20, 24, 26, 27, 28, 36, 60, 64, 65, 66, 67, 68, 6A, and 6C

Family: 01, 02, 08, 30, 32, 33, 34, 35, 37, 38, 39, 3P, 3R, 40, 42, 54, 59,  
OA, 3A, 3C, 3G, 3H, 3E, 3L, 3M, 3N, 3P, 3R, 3U, 5X, 7X effective

December 1, 1998

Child: 03, 04, 45, 82, 83, 4C, 4K, and 5K

Adult: 81, 86, 87

Long Term Care: 13, 23, 53, 63

IRCA/OBRA: 55, 58, 5F

Percent of Poverty: 47, 72, 7A, 8P, 8R (Effective December 1, 1998)

Estimated capitation payments do not include payments made to County Organized Health Systems for excess risk liability claims.

## SANTA CRUZ COUNTY HEALTH OPTIONS (SCCHO)

The Santa Cruz County Health Options (SCCHO) is a Medi-Cal County Organized Health System administered by the Santa Cruz Managed Medical Care Commission doing business as Santa Cruz County Health Options under direct contract with the State. The program provides health care on a managed care basis.

All services within the scope of the Medi-Cal program are provided through SCCHO with the following exceptions: Services authorized by the California Children Services (CCS) program, for diagnosis and treatment of the CCS eligible condition of the specific member; dental services; mental health services, including psychiatric inpatient services and outpatient mental health services provided by mental health professionals; alcohol and drug treatment services available under the Short-Doyle/Medi-Cal program, and outpatient heroin detoxification; services rendered under the Adult Day Health Programs; services rendered under the Multipurpose Senior Services Program; home and community-based care waived services; Local Education Authority (LEA) services when provided pursuant to an Individual Education Plan or Individual Family Services Plan; LEA assessment services for eligible students; services rendered in a State or federal hospital; laboratory services provided under the State serum alpha-fetoprotein testing program administered by the Genetic Disease Branch of the Department of Health Services; optical lenses and services provided by the Prison Industries Authority State contract; and Targeted Case Management services.

SCCHO serves all Medi-Cal recipients and Medicare/Medi-Cal eligible recipients who have Medi-Cal Identification numbers with County Code 44 (Santa Cruz County) and eligibility under one of the following aid codes:

<u>Category</u>	<u>Aid Codes</u>
Adult	81, 86, 87
Aged	10, 14, 16, 17, 18
Child	03, 04, 45, 82, 83, 4C, 4K, 5K
Disabled	20, 24, 26, 27, 28, 36, 60, 64, 65, 66, 67, 68, 6A, 6C
Family	01, 02, 08, 30, 32, 33, 34, 35, 37, 38, 39, 40, 42, 54, 59, 3A, 3C, 3P, 3R, 3E, 3L, 3M, 3N, 3U, 5X, and 7X
Long Term Care	13, 23, 53, 63
Percent of Poverty	7A, 47, 72

Capitation payments do not include payments made to County Organized Health Systems for excess risk liability claims.

## SECTION 6

### MEDICARE PAT A AND PART B BUY-IN ACTIVITY

## MEDICARE PART A AND PART B BUY-IN ACTIVITY – TABLE 16

Medicare, a medical insurance program, and Medi-Cal, a medical assistance program, together work to pay the medical bills of certain needy and low-income persons. The Medi-Cal program purchases Medicare Part A and Part B Supplementary Medical Insurance (SMI) for program eligibles who are entitled to the coverage.

Table 16 is included to show the number of Medi-Cal eligibles who were also eligible for Medicare Part A and Part B SMI coverage and for whom Medi-Cal paid the enrollment premium (bought in for).

Part A SMI benefits include hospital inpatient services.

Medi-Cal paid the monthly Medicare Part A enrollment premium for an average of 93,945 persons (74,754 aged and 19,191 disabled). The monthly premium averaged \$31.3 million.

Part B SMI benefits include physicians' medical and surgical services, outpatient hospital services, outpatient physical therapy and speech pathology services, durable medical equipment, services from independent laboratories, ambulance services, home health care, and a number of other health services and supplies. In addition to paying the monthly enrollment premium for eligible persons, Medi-Cal can pay the annual deductible and the portion of covered medical costs that Medicare does not pay.

In 1998, Medi-Cal paid the Medicare Part B enrollment premium for an average of 449,284 aged persons each month. The monthly premium averaged \$21.0 million.

Medi-Cal paid the monthly Medicare Part B enrollment premium for 310,564 disabled persons with premiums averaging \$13.10 million per month. The Disabled category includes persons in the Disabled or Blind aid categories.

TABLE 16  
MEDI-CAL PROGRAM  
MEDICARE PART A AND PART B BUY-IN ACTIVITY:  
AVERAGE MONTHLY NUMBER OF MEDI-CAL ELIGIBLES AND  
AVERAGE MONTHLY PREMIUM PAYMENT  
CALENDAR YEAR 1998

ELIGIBILITY CATEGORY	PART A		PART B/1/	
	ELIGIBLES	PREMIUM	ELIGIBLES	PREMIUM
TOTAL	93,945	\$31,271,602	759,848	\$34,928,047
Aged	74,754	INA	449,284	20,956,828
Disabled	19,191	INA	310,564	13,971,219

INA: Information Not Available.

/1/: Includes Part A.

Note: All Qualified Medicare Beneficiaries are included in Aged.

Figures are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Buy-In Reports.

SECTION 7  
COUNTY DATA

## SECTION 7

### COUNTY DATA

[Table 17](#) shows the number of Medi-Cal eligibles, including Fee-For-Service (FFS), County Organized Health Systems (COHS), and Health Care Plans (HCPs), by age group and sex, in October 1997.

Males comprise 41 percent of the Medi-Cal eligibles. Most males (67 percent) are under age 21, 23 percent are of ages 21 to 64, and 10 percent are 65 and older.

Fifty-nine percent of eligibles are females. Most females are under age 21 (48 percent), 38 percent are of ages 21 to 64, and 14 percent are 65 and older.

[Table 18](#) shows the average monthly number of persons eligible for Medi-Cal in each county by program and aid category, excluding COHS and HCPs.

Los Angeles County accounted for 38 percent of the FFS eligibles.

[Table 19](#) reports average monthly number of users by program and aid category, excluding COHS and HCPs. Division of Table 19 by Table 18 will give proportion of eligibles using Medi-Cal services, or the utilization rate.

Los Angeles County accounted for 38 percent of the users. Its utilization rate of 59.0 percent was 0.8 percentage points lower than the statewide average of 59.8 percent.

[Table 20](#) is a companion to the two preceding tables. Cost per user can be obtained by dividing Table 20 by Table 19, while division by Table 18 gives cost per eligible.

Los Angeles County accounted for 38 percent of the statewide total expenditures. The County's annual cost per user was \$4,889. Los Angeles County's annual cost per eligible was \$2,886.

[Table 21](#) shows average monthly number of users by type of provider. Utilization rates for the various services can be obtained by dividing the number of users by the county total eligibles of Table 18.

For example, the statewide utilization rate for physician services was 27 percent, or 27 out of every 100 eligibles used this service each month. The Los Angeles County utilization rate for physician services was 32 percent.

[Table 22](#) is a companion to Table 21. Cost per user by type of provider can be derived from the two tables.

For example, Los Angeles County's annual cost per user of physician services was \$1,192.81, which was 5.4 percent higher than the statewide average of \$1,128.85.

It can be noted from Table 22 that physician services accounted for 10.5 percent of total expenditures statewide and 13.4 percent of expenditures in Los Angeles County. Such comparisons can be made for each type of provider.



[Table 23](#) shows the number of physicians and hospitals receiving payments from the Medi-Cal program during the April-June 1997 quarter. The hospitals are the general acute care facilities and exclude state hospitals. Primary care physicians are reported separately by type of primary care specialty. Any other specialty (e.g., psychiatry, pathology, etc.) is included in the "All Other" column.

The number of physicians is understated. Due to the billing procedures used in the Medi-Cal program, the number of physicians practicing in groups is not known. Therefore, a group is counted as only one physician throughout this table.

Forty-three percent of the physicians billing the program were primary care physicians. 17.7 percent of the physicians were general practice/family practice physicians, 12.3 percent specialized in internal medicine, 7.3 percent specialized in obstetrics/gynecology, and 5.5 percent were pediatric specialists.

[Table 24](#) shows the county distribution of selected providers receiving Medi-Cal program payments. These are provider types whose total numbers are high enough to provide a functional county distribution for this table.

As would be expected, Los Angeles County, which is the most populous California county, has the largest proportion of providers. Alpine County had only 238 Medi-Cal eligibles and an estimated 1,200 county population in 1997. Other types of services may be obtained through providers in surrounding counties.

The most striking year-to-year change in provider growth was in outpatient clinics which totaled 670 in 1997 up from 404 in 1996.

[Table 25](#) shows the population and Medi-Cal eligibles (including FFS, COHS, and HCPs) for each county.

Los Angeles County (the most populous California county) accounted for 28.9 percent of the population and 34.2 percent of the eligibles; followed by San Diego County accounting for 8.4 percent of the population and 6.4 percent of the eligibles; and Orange County accounting for 8.2 percent of the population and 5.1 percent of the eligibles.

[Table 26](#) shows the number of persons certified eligible for Medi-Cal (including FFS, COHS, and HCPs) by county and race/ethnicity in October 1997.

Of the 5,040,610 persons certified eligible for Medi-Cal in October 1997, 1,884,926 were Hispanic; 1,508,552 were White; 705,919 were Black; and 941,213 were of Other and Not Reported race/ethnicity's.

In terms of percentages, 37.4 percent of the Medi-Cal eligibles were Hispanic, 30.0 percent White, 14.0 percent Black, 8.0 percent Asian/Pacific Islander, 0.4 percent American Indian/Alaskan Native, and 10.2 percent Not Reported/race ethnicity's.

[Table 27](#) shows the number of providers by provider type and status. As of December 31, 1997, there were 79,546 providers with Active Status, 234,393 providers with Inactive Status, 185 providers with Pending Status, 3,683 providers with Deceased Status, 2 providers with Rejected Status, 1,986 providers with Suspended Status, 54,728 providers with Indirect Status, and 276 providers with Contract Status.

**Please Note:** The paid claims data on Tables 19-25 (Users and Payments) are understated for Orange, Sacramento, San Mateo, Santa Barbara, Santa Cruz and Solano Counties due to the fact that not all covered services are reimbursed on a per claim basis.

**TABLE 17**  
**MEDI-CAL PROGRAM**  
**PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE**  
**TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)**  
**TOTAL BOTH SEXES**  
**OCTOBER 1998**

(COHS, HCPs, AND FFS)

COUNTY	TOTAL ALL AGES	TOTAL UNDER 21 YEARS	SINGLE YEARS OF AGE									
			Under 1	1	2	3	4	5	6	7	8	9
STATEWIDE	4,978,026	2,764,994	186,417	173,197	173,446	176,338	176,359	174,137	163,523	158,882	152,823	140,997
Alameda	188,470	94,599	5,279	5,600	5,535	5,635	5,802	5,789	5,637	5,541	5,299	5,035
Alpine	207	122	12	4	3	9	6	2	7	4	5	12
Amador	2,692	1,367	77	82	91	76	79	79	75	66	82	61
Butte	41,773	22,127	1,087	1,142	1,237	1,240	1,261	1,261	1,240	1,217	1,274	1,226
Calaveras	5,016	2,558	93	129	133	126	127	131	112	146	156	163
Colusa	3,095	1,789	164	141	108	106	135	114	94	82	68	78
Contra Costa	88,856	46,083	2,974	2,720	2,737	2,784	2,721	2,743	2,645	2,668	2,636	2,502
Del Norte	6,429	3,342	187	168	175	181	168	196	179	181	184	175
El Dorado	11,275	5,835	427	360	337	317	331	341	276	321	321	290
Fresno	196,627	118,846	7,666	7,113	6,988	7,100	7,220	7,278	6,884	6,849	6,544	6,146
Glenn	5,088	2,959	199	178	158	171	178	179	158	153	138	165
Humboldt	22,777	11,075	623	573	584	578	628	597	582	622	632	612
Imperial	39,661	20,902	1,113	1,091	1,099	1,156	1,069	1,176	1,204	1,111	1,171	1,079
Inyo	2,582	1,302	98	76	83	89	75	72	79	55	70	66
Kern	138,570	81,284	5,275	5,020	5,055	5,026	5,311	5,061	4,786	4,655	4,391	4,173
Kings	22,194	13,282	1,028	863	819	777	785	811	742	733	680	651
Lake	13,228	6,292	322	301	344	336	342	336	349	350	378	390
Lassen	4,688	2,521	141	147	141	135	142	143	135	146	134	130
Los Angeles	1,752,010	1,005,137	65,232	65,921	67,069	68,139	67,143	66,112	62,706	60,278	56,628	50,423
Madera	26,597	15,634	1,297	1,067	1,024	1,001	979	1,002	827	816	810	729
Marin	11,773	4,888	409	343	300	297	278	285	259	236	233	238
Mariposa	2,110	1,139	67	50	52	55	50	81	50	57	67	44
Mendocino	16,553	8,553	518	471	499	514	494	476	437	465	475	459
Merced	52,141	31,516	1,555	1,783	1,812	1,931	1,877	2,012	1,785	1,739	1,825	1,682
Modoc	2,204	1,190	54	58	55	69	62	77	56	70	70	58
Mono	757	453	49	32	31	19	24	25	26	29	26	25
Monterey	50,298	28,847	2,583	2,119	1,865	1,871	1,787	1,951	1,621	1,440	1,448	1,283
Napa	9,557	4,814	411	280	312	330	291	288	245	248	228	232
Nevada	6,720	3,224	239	179	186	183	186	158	145	144	174	167
Orange	248,140	136,622	12,790	9,937	9,561	9,270	9,281	8,723	8,014	7,429	6,931	6,219

TABLE 17 (Continued)

## MEDI-CAL PROGRAM

## PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE

TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)

TOTAL BOTH SEXES

OCTOBER 1998

(COHS, HCPs, AND FFS)

COUNTY	TOTAL ALL AGES	TOTAL UNDER 21 YEARS	SINGLE YEARS OF AGE									
			Under 1	1	2	3	4	5	6	7	8	9
Placer	16,539	7,994	558	434	447	500	506	472	481	471	455	406
Plumas	2,632	1,250	51	54	63	60	83	66	59	69	66	73
Riverside	202,957	120,763	8,806	7,884	7,681	7,748	7,943	7,619	6,925	6,713	6,814	6,275
Sacramento	238,054	133,262	7,279	7,282	7,553	8,022	7,946	8,306	7,876	7,653	7,427	7,070
San Benito	5,435	3,125	307	230	196	207	197	171	170	130	143	131
San Bernardino	277,310	167,206	11,302	10,318	10,285	10,750	10,975	10,498	9,975	9,814	9,674	9,072
San Diego	311,667	167,055	10,883	9,566	9,925	10,475	10,908	10,654	9,902	9,962	9,616	9,124
San Francisco	107,149	35,732	2,319	2,072	1,946	2,021	2,106	2,066	1,932	1,819	1,831	1,826
San Joaquin	113,527	64,551	3,717	3,534	3,645	3,820	3,745	3,743	3,549	3,598	3,435	3,471
San Luis Obispo	21,537	11,005	884	630	636	668	646	634	573	632	569	586
San Mateo	44,352	20,082	2,128	1,563	1,382	1,263	1,304	1,258	1,175	1,041	920	882
Santa Barbara	42,948	24,188	2,490	1,646	1,627	1,548	1,589	1,536	1,363	1,293	1,323	1,085
Santa Clara	156,291	74,647	5,301	4,441	4,347	4,322	4,447	4,502	3,997	3,888	3,742	3,409
Santa Cruz	22,455	11,213	1,201	800	697	688	678	667	582	576	555	509
Shasta	33,603	17,093	946	917	934	984	931	937	890	924	954	935
Sierra	350	151	3	4	8	12	7	9	9	6	8	13
Siskiyou	8,363	4,070	199	190	228	207	193	208	195	194	222	214
Solano	43,668	23,645	1,512	1,411	1,473	1,459	1,433	1,492	1,392	1,372	1,286	1,306
Sonoma	36,268	17,366	1,469	1,042	1,053	1,042	1,009	1,013	949	858	920	868
Stanislaus	83,045	46,334	2,922	2,737	2,756	2,790	2,735	2,632	2,555	2,520	2,526	2,411
Sutter	13,386	7,169	496	488	393	409	436	449	410	398	413	379
Tehama	11,108	5,942	330	320	339	338	372	356	324	333	332	311
Trinity	2,327	1,127	52	50	56	47	54	46	62	56	68	57
Tulare	97,923	58,745	4,074	3,707	3,541	3,583	3,460	3,539	3,333	3,330	3,167	2,901
Tuolumne	6,454	3,215	169	172	152	165	193	164	151	171	187	185
Ventura	67,842	38,329	3,771	2,612	2,480	2,435	2,360	2,370	2,096	2,022	1,949	1,790
Yolo	21,793	11,691	751	643	663	694	699	713	678	642	603	648
Yuba	16,955	9,742	528	502	547	560	572	518	565	546	540	547

TABLE 17 (Continued)

MEDI-CAL PROGRAM  
 PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE  
 TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)  
 TOTAL BOTH SEXES  
 OCTOBER 1998  
 (COHS, PHPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
STATEWIDE	131,549	122,102	115,473	110,600	104,539	100,565	98,970	95,173	84,714	64,950	60,240
Alameda	4,853	4,479	4,014	3,885	3,793	3,658	3,541	3,533	3,231	2,392	2,068
Alpine	8	5	8	11	3	5	3	3	4	3	5
Amador	62	76	65	60	65	47	47	43	57	39	38
Butte	1,153	1,066	1,033	1,060	950	992	918	828	720	626	596
Calaveras	127	150	133	119	134	121	107	100	115	72	64
Colusa	77	76	64	74	75	51	72	63	66	33	48
Contra Costa	2,299	2,124	2,014	2,010	1,876	1,730	1,716	1,586	1,404	1,133	1,061
Del Norte	171	169	158	148	179	157	152	120	114	101	79
El Dorado	276	266	271	287	249	261	239	230	158	143	134
Fresno	5,766	5,592	5,320	5,077	4,783	4,687	4,552	4,365	3,652	2,688	2,576
Glenn	165	146	153	136	120	146	97	101	82	69	67
Humboldt	554	515	506	519	472	476	465	459	416	348	314
Imperial	1,003	991	883	950	935	916	924	923	829	684	595
Inyo	46	70	49	52	53	55	53	53	34	43	31
Kern	3,925	3,604	3,562	3,245	3,253	2,937	2,745	2,658	2,370	2,201	2,031
Kings	616	573	543	532	487	503	504	465	444	373	353
Lake	333	339	308	320	271	266	248	247	216	143	153
Lassen	121	130	104	109	109	111	103	97	97	79	67
Los Angeles	46,609	42,966	40,454	38,270	35,064	33,739	33,505	32,828	30,845	21,698	19,508
Madera	711	641	589	581	557	564	562	488	490	473	426
Marin	217	183	173	191	195	189	200	205	156	162	139
Mariposa	59	66	52	54	49	65	53	67	40	26	35
Mendocino	425	350	390	386	380	349	331	333	321	250	230
Merced	1,633	1,495	1,471	1,403	1,390	1,278	1,188	1,132	920	807	798
Modoc	53	78	67	60	58	48	51	44	33	33	36
Mono	27	16	18	12	18	12	15	17	7	16	9
Monterey	1,237	1,106	1,065	1,083	1,015	961	962	955	880	847	768
Napa	234	213	199	194	192	196	180	143	140	130	128
Nevada	153	159	161	142	134	129	152	131	112	93	97
Orange	5,726	5,185	4,927	4,789	4,691	4,512	4,430	4,153	3,967	3,082	3,005

TABLE 17 (Continued)

## MEDI-CAL PROGRAM

## PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE

TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)

TOTAL BOTH SEXES

OCTOBER 1998

(COHS, PHPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
Placer	377	384	335	338	309	301	324	285	233	197	181
Plumas	65	69	57	76	63	56	57	53	51	37	22
Riverside	5,801	5,325	5,094	4,772	4,424	4,350	4,015	3,843	3,499	2,612	2,620
Sacramento	6,878	6,401	6,113	5,921	5,565	5,342	5,255	4,967	4,072	3,332	3,002
San Benito	119	120	123	108	97	120	116	121	106	100	113
San Bernardino	8,403	7,789	7,209	6,760	6,367	5,915	5,829	5,439	4,149	3,335	3,348
San Diego	8,445	7,685	7,181	6,825	6,464	6,200	6,102	5,756	4,954	3,377	3,051
San Francisco	1,649	1,550	1,499	1,438	1,507	1,490	1,502	1,562	1,465	1,131	1,001
San Joaquin	3,214	3,157	2,965	2,899	2,883	2,651	2,624	2,489	2,121	1,710	1,581
San Luis Obispo	528	484	462	449	449	408	457	405	359	284	262
San Mateo	827	722	704	645	650	613	636	654	585	573	557
Santa Barbara	1,087	939	856	812	784	823	779	750	707	558	593
Santa Clara	3,375	3,085	3,004	3,084	3,191	3,170	3,205	2,974	2,625	2,316	2,222
Santa Cruz	510	470	429	395	412	371	410	370	339	283	271
Shasta	890	814	821	801	779	752	696	642	572	504	470
Sierra	8	9	5	5	6	7	8	12	5	3	4
Siskiyou	207	217	208	212	227	203	200	182	149	122	93
Solano	1,141	1,078	1,005	948	902	884	864	824	643	617	603
Sonoma	736	766	718	739	669	647	685	702	571	467	443
Stanislaus	2,307	2,159	2,111	2,000	1,909	1,839	1,825	1,728	1,416	1,265	1,191
Sutter	328	305	319	311	283	267	271	233	222	194	165
Tehama	308	293	289	256	268	233	252	218	185	146	139
Trinity	55	63	56	62	59	64	62	62	38	25	33
Tulare	2,784	2,597	2,504	2,413	2,339	2,320	2,226	2,250	1,882	1,409	1,386
Tuolumne	171	160	154	176	152	145	139	126	93	99	91
Ventura	1,610	1,554	1,463	1,437	1,283	1,324	1,439	1,342	1,139	977	876
Yolo	605	578	532	513	498	498	486	440	325	254	228
Yuba	482	500	503	446	450	411	391	374	289	236	235

TABLE 17 (Continued)

MEDI-CAL PROGRAM  
 PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE  
 TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)  
 TOTAL BOTH SEXES  
 OCTOBER 1998  
 (COHS, HCPs, AND FFS)

COUNTY	21 YEARS AND OVER	AGE GROUP IN YEARS									
		21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65 and Over
STATEWIDE	2,213,032	190,052	242,523	244,398	247,366	204,951	152,254	111,778	95,847	92,755	631,108
Alameda	93,871	7,064	9,693	9,625	10,029	8,811	7,210	5,249	4,148	3,786	28,256
Alpine	85	10	8	15	8	7	3	10	4	3	17
Amador	1,325	94	140	159	196	142	83	64	54	39	354
Butte	19,646	1,868	2,331	2,372	2,611	2,139	1,542	1,158	939	750	3,936
Calaveras	2,458	198	276	273	346	278	211	127	108	91	550
Colusa	1,306	154	144	156	124	106	68	79	51	59	365
Contra Costa	42,773	3,542	4,652	4,900	5,178	4,160	2,990	2,200	1,846	1,685	11,620
Del Norte	3,087	282	328	375	461	368	218	178	192	150	535
El Dorado	5,440	482	581	580	740	583	448	282	250	179	1,315
Fresno	77,781	7,874	9,411	9,817	9,248	7,404	5,462	4,007	3,456	3,213	17,889
Glenn	2,129	185	252	272	273	215	152	103	111	93	473
Humboldt	11,702	1,051	1,389	1,323	1,616	1,367	1,150	774	576	458	1,998
Imperial	18,759	1,616	1,744	1,959	2,044	1,748	1,299	880	691	812	5,966
Inyo	1,280	96	130	139	159	125	96	51	55	53	376
Kern	57,286	6,684	8,004	7,679	7,374	5,321	3,566	2,682	2,403	2,204	11,369
Kings	8,912	1,133	1,132	1,179	1,032	727	498	397	388	323	2,103
Lake	6,936	449	690	774	898	734	550	459	402	324	1,656
Lassen	2,167	220	277	277	292	212	148	123	98	86	434
Los Angeles	746,873	62,150	79,687	79,648	78,781	66,500	48,402	35,449	31,109	32,536	232,611
Madera	10,963	1,364	1,533	1,373	1,252	927	657	495	396	408	2,558
Marin	6,885	410	698	675	749	751	649	481	348	230	1,894
Mariposa	971	66	110	120	140	118	83	45	32	24	233
Mendocino	8,000	749	928	926	978	879	666	554	388	315	1,617
Merced	20,625	2,189	2,728	2,649	2,593	2,006	1,392	965	864	829	4,410
Modoc	1,014	85	118	128	130	90	83	52	45	40	243
Mono	304	36	54	30	43	31	24	16	11	13	46
Monterey	21,451	2,586	2,882	2,541	2,337	1,825	1,239	945	807	796	5,493
Napa	4,743	445	519	569	525	463	290	218	180	159	1,375
Nevada	3,496	269	308	333	446	383	298	211	166	111	971
Orange	111,518	8,439	11,430	11,336	10,780	9,625	7,754	5,839	4,754	4,625	36,936

TABLE 17 (Continued)

MEDI-CAL PROGRAM  
 PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE  
 TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)  
 TOTAL BOTH SEXES  
 OCTOBER 1998  
 (COHS, HCPs, AND FFS)

COUNTY	21 YEARS AND OVER	AGE GROUP IN YEARS									
		21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65 and Over
Placer	8,545	715	921	941	1,098	845	636	456	359	298	2,276
Plumas	1,382	99	133	123	149	171	123	98	79	59	348
Riverside	82,194	8,355	10,307	10,309	9,817	7,558	5,151	3,889	3,437	3,278	20,093
Sacramento	104,792	9,640	12,855	13,203	14,021	11,343	8,217	5,840	4,911	4,446	20,316
San Benito	2,310	291	331	275	256	155	114	90	76	62	660
San Bernardino	110,104	11,549	14,106	14,192	14,383	10,839	7,465	5,343	4,735	4,307	23,185
San Diego	144,612	11,138	15,378	16,008	16,902	14,228	10,253	7,177	6,146	5,735	41,647
San Francisco	71,417	2,362	3,513	4,227	5,439	5,933	5,404	4,126	3,535	3,882	32,996
San Joaquin	48,976	4,835	5,826	5,902	5,836	4,795	3,621	2,885	2,380	2,049	10,847
San Luis Obispo	10,532	890	1,209	1,202	1,382	1,129	857	575	448	398	2,442
San Mateo	24,270	1,630	2,018	1,921	1,892	1,559	1,219	1,048	930	1,007	11,046
Santa Barbara	18,760	1,807	2,230	2,231	2,198	1,737	1,362	929	847	700	4,719
Santa Clara	81,644	5,540	7,201	7,120	6,965	6,278	5,471	4,055	3,577	3,629	31,808
Santa Cruz	11,242	966	1,160	1,170	1,246	1,084	968	694	455	448	3,051
Shasta	16,510	1,470	1,954	2,066	2,240	1,869	1,291	964	846	666	3,144
Sierra	199	10	17	10	17	7	20	12	13	15	78
Siskiyou	4,293	292	400	433	553	503	376	286	266	202	982
Solano	20,023	2,111	2,530	2,421	2,500	1,873	1,208	824	691	642	5,223
Sonoma	18,902	1,371	1,995	2,077	2,424	2,043	1,686	1,235	901	702	4,468
Stanislaus	36,711	3,445	4,262	4,121	4,265	3,461	2,570	2,107	1,813	1,769	8,898
Sutter	6,217	558	771	735	709	528	398	276	268	251	1,723
Tehama	5,166	435	571	636	733	499	356	259	267	219	1,191
Trinity	1,200	67	96	109	176	152	116	88	76	61	259
Tulare	39,178	4,268	5,049	5,039	4,777	3,646	2,573	1,870	1,663	1,489	8,804
Tuolumne	3,239	266	329	366	472	367	276	192	159	120	692
Ventura	29,513	2,602	3,283	3,265	3,318	2,540	1,974	1,384	1,204	1,133	8,810
Yolo	10,102	849	1,106	1,180	1,242	1,022	773	573	470	467	2,420
Yuba	7,213	701	795	914	973	742	545	410	423	327	1,383

Note: COHS = County Organized Health Systems; HCPs = Health Care Plans; FFS = Fee-For-Service.

Source: State of California, Department of Health Services, MEDS Monthly Extract File (MEF), Run Date 04/24/99.

TABLE 17 (Continued)

MEDI-CAL PROGRAM  
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE  
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)

FEMALES

OCTOBER 1998

(COHS, HCPs, AND FFS)

COUNTY	TOTAL ALL AGES	TOTAL UNDER 21 YEARS	SINGLE YEARS OF AGE									
			Under 1	1	2	3	4	5	6	7	8	9
STATEWIDE	2,918,313	1,396,688	91,559	84,642	85,284	86,366	86,169	84,764	80,142	78,378	74,850	69,242
Alameda	112,366	47,889	2,537	2,726	2,756	2,782	2,892	2,820	2,796	2,784	2,594	2,434
Alpine	122	66	6	2	2	7	2	1	6	2	3	4
Amador	1,642	699	45	37	47	40	40	35	34	35	41	34
Butte	23,600	10,984	530	588	611	618	622	600	601	579	603	611
Calaveras	2,834	1,208	41	61	64	59	52	63	47	73	79	74
Colusa	1,821	901	84	65	52	45	72	60	44	32	39	40
Contra Costa	53,426	23,360	1,454	1,329	1,314	1,363	1,331	1,402	1,285	1,297	1,301	1,226
Del Norte	3,638	1,698	106	83	80	82	89	103	85	90	110	84
El Dorado	6,554	2,900	208	173	154	129	161	176	139	174	165	153
Fresno	112,134	60,052	3,762	3,440	3,462	3,492	3,554	3,518	3,363	3,402	3,230	2,998
Glenn	2,973	1,522	84	96	87	81	83	86	80	74	70	78
Humboldt	12,937	5,505	316	282	268	282	305	290	277	304	294	294
Imperial	22,473	10,548	566	540	544	547	503	581	601	550	585	559
Inyo	1,523	641	53	36	32	46	37	35	35	22	31	33
Kern	79,665	41,121	2,598	2,471	2,481	2,491	2,614	2,455	2,295	2,266	2,108	2,091
Kings	12,713	6,678	497	428	398	383	398	394	354	342	342	301
Lake	7,509	3,062	146	157	160	164	153	163	150	166	183	203
Lassen	2,708	1,259	68	71	62	69	77	72	64	59	60	66
Los Angeles	1,039,698	507,823	32,194	32,214	33,087	33,383	32,794	32,193	30,900	29,921	27,830	24,791
Madera	15,158	7,951	633	515	483	467	482	480	430	391	411	381
Marin	7,008	2,476	202	166	160	143	143	135	124	123	108	115
Mariposa	1,197	542	35	20	30	26	24	37	24	26	31	21
Mendocino	9,518	4,284	259	222	254	272	235	224	210	250	224	223
Merced	29,869	15,975	732	874	897	994	908	964	904	876	905	812
Modoc	1,241	595	27	30	25	28	40	40	25	34	38	29
Mono	447	230	25	17	15	7	16	11	14	15	12	9
Monterey	29,869	14,737	1,184	1,037	912	915	870	976	799	704	708	599
Napa	5,653	2,404	191	131	153	159	146	136	118	121	110	91
Nevada	3,981	1,587	110	74	78	81	96	74	67	68	89	83
Orange	145,533	69,440	6,264	4,910	4,745	4,548	4,553	4,308	3,955	3,668	3,372	3,070



TABLE 17 (Continued)

## MEDI-CAL PROGRAM

## PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE

TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)

## FEMALES

OCTOBER 1998

(COHS, HCPs, AND FFS)

COUNTY	TOTAL ALL AGES	TOTAL UNDER 21 YEARS	SINGLE YEARS OF AGE									
			Under 1	1	2	3	4	5	6	7	8	9
Placer	9,996	4,082	272	227	225	242	270	214	245	230	226	214
Plumas	1,500	607	26	21	24	30	45	31	32	36	32	37
Riverside	119,730	61,176	4,227	3,849	3,698	3,823	3,846	3,688	3,396	3,378	3,316	3,090
Sacramento	136,424	67,016	3,568	3,567	3,733	3,930	3,838	4,040	3,796	3,745	3,684	3,435
San Benito	3,248	1,591	146	126	98	95	104	82	78	60	57	63
San Bernardino	162,559	84,542	5,699	5,003	5,078	5,244	5,374	5,131	4,819	4,829	4,679	4,440
San Diego	182,857	83,748	5,328	4,641	4,956	5,055	5,296	5,089	4,864	4,775	4,711	4,509
San Francisco	59,953	18,189	1,130	1,031	944	999	1,025	1,009	920	880	876	926
San Joaquin	64,547	32,442	1,809	1,718	1,763	1,878	1,764	1,801	1,792	1,777	1,708	1,755
San Luis Obispo	12,686	5,478	446	290	306	300	293	312	270	327	277	282
San Mateo	26,999	10,169	1,064	738	690	600	607	609	581	482	429	430
Santa Barbara	25,076	12,259	1,227	780	761	755	783	724	678	656	638	514
Santa Clara	92,384	37,880	2,625	2,178	2,094	2,126	2,207	2,227	1,993	1,921	1,829	1,650
Santa Cruz	13,326	5,802	599	391	346	331	332	329	269	280	250	264
Shasta	19,095	8,463	456	432	444	472	461	443	412	462	448	449
Sierra	212	78	2	2	5	7	5	4	3	3	5	2
Siskiyou	4,774	2,050	102	90	102	100	101	96	91	97	109	107
Solano	26,394	11,960	745	717	680	727	692	724	663	681	604	591
Sonoma	21,441	8,822	732	534	517	492	498	484	466	403	464	429
Stanislaus	48,659	23,527	1,429	1,329	1,390	1,400	1,366	1,286	1,224	1,221	1,261	1,172
Sutter	7,815	3,608	249	249	189	214	222	218	186	195	202	180
Tehama	6,424	3,047	166	156	187	163	191	173	171	160	161	167
Trinity	1,312	574	26	25	31	24	29	25	32	28	34	29
Tulare	55,431	29,639	1,997	1,812	1,701	1,754	1,680	1,757	1,634	1,653	1,569	1,438
Tuolumne	3,799	1,596	80	89	67	77	92	72	76	76	81	98
Ventura	39,955	19,451	1,829	1,265	1,244	1,210	1,133	1,185	1,045	993	971	864
Yolo	12,504	5,849	368	316	320	340	341	332	315	307	311	325
Yuba	9,466	4,906	255	271	278	275	282	247	265	275	242	275

TABLE 17 (Continued)  
MEDI-CAL PROGRAM  
PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE  
TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)  
FEMALES  
OCTOBER 1998  
(COHS, HCPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
STATEWIDE	64,565	59,878	56,492	54,386	51,629	50,089	50,583	50,227	48,805	44,362	44,276
Alameda	2,390	2224	1960	1892	1880	1820	1774	1837	1837	1565	1589
Alpine	5	2	3	6	2	2	0	3	3	1	4
Amador	24	36	32	29	30	22	24	18	38	27	31
Butte	550	501	505	493	456	470	460	444	398	368	376
Calaveras	54	70	63	59	61	52	42	53	59	38	44
Colusa	39	41	28	40	35	29	28	37	36	25	30
Contra Costa	1,162	1,021	966	992	911	875	878	854	806	794	799
Del Norte	76	80	75	71	83	78	89	61	60	65	48
El Dorado	139	125	123	140	119	124	107	109	100	91	91
Fresno	2,818	2,703	2,603	2,517	2,330	2,355	2,354	2,290	2,134	1,855	1,872
Glenn	88	80	80	59	63	88	56	58	45	43	43
Humboldt	255	249	246	266	220	238	223	231	223	219	223
Imperial	495	477	440	451	449	439	490	488	456	423	364
Inyo	18	39	28	22	26	27	18	30	22	25	26
Kern	1,961	1,806	1,720	1,604	1,596	1,469	1,460	1,384	1,372	1,487	1,392
Kings	296	267	257	266	223	257	276	226	277	252	244
Lake	182	171	136	150	126	128	97	113	123	90	101
Lassen	58	71	44	54	53	54	48	60	58	49	42
Los Angeles	22,875	21,116	19,929	18,948	17,389	16,855	17,216	17,466	17,490	14,723	14,509
Madera	363	335	282	293	261	283	281	263	295	322	300
Marin	98	91	90	104	113	109	94	89	91	81	97
Mariposa	32	29	23	27	23	29	18	33	18	14	22
Mendocino	205	165	180	179	196	163	176	170	179	146	152
Merced	823	750	724	702	660	619	619	582	544	535	551
Modoc	24	37	29	24	27	27	24	25	19	18	25
Mono	17	7	7	7	9	7	6	10	3	8	8
Monterey	606	543	502	529	499	494	513	552	566	625	604
Napa	115	113	100	97	90	95	80	82	92	93	91
Nevada	75	79	79	63	66	70	80	58	70	61	66
Orange	2,823	2,548	2,410	2,345	2,271	2,277	2,322	2,292	2,340	2,163	2,256

TABLE 17 (Continued)

## MEDI-CAL PROGRAM

## PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE

TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)

FEMALES

OCTOBER 1998

(COHS, HCPs, AND FFS)

COUNTY	SINGLE YEARS OF AGE										
	10	11	12	13	14	15	16	17	18	19	20
Placer	181	181	162	168	150	152	165	158	132	132	136
Plumas	36	30	21	30	32	23	21	27	35	25	13
Riverside	2,856	2,592	2,469	2,347	2,208	2,153	2,078	2,020	2,091	1,961	2,090
Sacramento	3,318	3,091	2,994	2,924	2,764	2,702	2,684	2,584	2,309	2,200	2,110
San Benito	56	62	60	46	44	59	65	62	71	77	80
San Bernardino	4,106	3,877	3,494	3,328	3,115	2,958	2,918	2,845	2,568	2,487	2,550
San Diego	4,185	3,746	3,550	3,296	3,160	3,036	3,081	3,034	2,743	2,362	2,331
San Francisco	823	777	742	720	797	779	802	819	802	718	670
San Joaquin	1,581	1,533	1,460	1,425	1,483	1,269	1,293	1,236	1,202	1,099	1,096
San Luis Obispo	259	222	198	237	226	195	219	212	214	198	195
San Mateo	404	339	355	301	317	313	337	384	364	420	405
Santa Barbara	543	462	426	380	386	416	414	413	426	420	457
Santa Clara	1,605	1,505	1,488	1,489	1,580	1,569	1,649	1,575	1,492	1,523	1,555
Santa Cruz	246	241	209	192	224	187	225	227	230	212	218
Shasta	438	376	406	379	382	354	347	340	316	326	320
Sierra	3	4	2	5	2	5	5	8	1	2	3
Siskiyou	106	110	101	110	114	103	103	86	80	80	62
Solano	571	562	507	487	463	448	396	419	393	447	443
Sonoma	370	382	357	355	311	301	346	356	337	342	346
Stanislaus	1,137	1,062	1,008	992	973	923	910	905	837	857	845
Sutter	148	154	149	149	132	139	145	120	122	126	120
Tehama	162	138	134	136	135	112	142	110	105	86	92
Trinity	32	30	33	26	21	29	34	31	16	15	24
Tulare	1,337	1,231	1,222	1,189	1,173	1,141	1,114	1,156	1,085	948	1,048
Tuolumne	87	83	72	83	77	78	60	62	47	70	69
Ventura	782	774	713	679	627	652	730	699	679	702	675
Yolo	296	268	253	261	248	242	236	229	195	179	167
Yuba	231	270	243	223	218	196	211	192	159	142	156

TABLE 17 (Continued)

## MEDI-CAL PROGRAM

## PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE

TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)

FEMALES

OCTOBER 1998

(COHS, HCPs, AND FFS)

COUNTY	21 YEARS AND OVER	AGE GROUP IN YEARS									
		21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65 and Over
STATEWIDE	1,521,625	157,628	194,292	182,665	172,785	132,204	90,466	64,435	54,951	55,609	416,590
Alameda	64,477	6,057	7,967	7,281	6,990	5,593	4,196	2,903	2,340	2,264	18,886
Alpine	56	5	7	8	5	5	2	7	2	3	12
Amador	943	76	104	112	142	95	52	39	31	21	271
Butte	12,616	1,348	1,615	1,586	1,650	1,281	877	651	512	430	2,666
Calaveras	1,626	145	196	177	252	170	114	69	54	54	395
Colusa	920	130	120	126	90	70	36	52	34	34	228
Contra Costa	30,066	2,923	3,702	3,595	3,600	2,680	1,761	1,322	1,130	1,087	8,266
Del Norte	1,940	207	225	250	274	226	107	102	116	88	345
El Dorado	3,654	373	426	412	488	348	241	152	144	105	965
Fresno	52,082	6,254	7,068	6,985	6,209	4,604	3,248	2,337	1,982	1,854	11,541
Glenn	1,451	154	191	185	197	133	96	58	61	52	324
Humboldt	7,432	776	956	921	1,003	798	608	422	305	267	1,376
Imperial	11,925	1,178	1,292	1,433	1,409	1,159	804	501	379	409	3,361
Inyo	882	83	98	96	116	79	48	27	36	32	267
Kern	38,544	5,014	5,881	5,375	5,008	3,375	2,163	1,643	1,417	1,323	7,345
Kings	6,035	874	823	822	699	484	309	251	226	190	1,357
Lake	4,447	329	494	527	587	436	312	238	228	201	1,095
Lassen	1,449	168	196	187	198	132	100	68	56	53	291
Los Angeles	531,875	54,336	68,584	63,894	58,327	45,149	30,065	20,909	18,027	19,651	152,933
Madera	7,207	1,038	1,084	920	838	591	392	283	221	234	1,606
Marin	4,532	329	529	466	465	448	352	284	191	137	1,331
Mariposa	655	57	81	93	99	71	45	27	14	13	155
Mendocino	5,234	554	651	641	648	528	378	321	222	173	1,118
Merced	13,894	1,691	2,051	1,838	1,805	1,272	835	552	508	500	2,842
Modoc	646	62	86	89	82	54	50	22	21	17	163
Mono	217	30	41	24	34	24	18	6	5	6	29
Monterey	15,069	2,145	2,344	1,941	1,627	1,196	766	553	491	478	3,528
Napa	3,249	350	407	405	358	285	159	113	110	100	962
Nevada	2,394	212	229	251	297	237	168	110	94	66	730
Orange	76,093	7,203	9,243	8,500	7,418	6,264	4,588	3,174	2,595	2,722	24,386

TABLE 17 (Continued)

## MEDI-CAL PROGRAM

## PERSONS CERTIFIED ELIGIBLE BY COUNTY, SEX, AND AGE

TOTAL ALL AGES, TOTAL UNDER 21 YEARS (SINGLE YEARS OF AGE), AND TOTAL 21 YEARS AND OVER (AGE GROUP IN YEARS)

FEMALES

OCTOBER 1998

(COHS, HCPs, AND FFS)

COUNTY	21 YEARS AND OVER	AGE GROUP IN YEARS									
		21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65 and Over
Placer	5,914	583	688	689	744	505	358	271	221	187	1,668
Plumas	893	73	91	92	107	111	68	53	41	34	223
Riverside	58,554	7,002	8,310	7,882	7,080	5,091	3,215	2,375	2,060	1,987	13,552
Sacramento	69,408	7,693	9,712	9,133	9,226	6,922	4,593	3,306	2,801	2,699	13,323
San Benito	1,657	237	262	219	196	103	65	49	49	35	442
San Bernardino	78,017	9,464	11,165	10,672	10,223	7,213	4,610	3,266	2,829	2,638	15,937
San Diego	99,109	9,284	12,126	11,719	11,705	9,170	6,109	4,202	3,591	3,572	27,631
San Francisco	41,764	1,881	2,592	2,624	2,988	2,937	2,485	1,864	1,653	2,120	20,620
San Joaquin	32,105	3,685	4,329	4,111	3,867	2,977	2,055	1,668	1,340	1,166	6,907
San Luis Obispo	7,208	707	907	848	931	720	492	335	257	245	1,766
San Mateo	16,830	1,387	1,665	1,435	1,311	968	700	624	543	641	7,556
Santa Barbara	12,817	1,517	1,739	1,622	1,479	1,046	790	529	475	416	3,204
Santa Clara	54,504	4,622	5,743	5,237	4,863	4,008	3,214	2,198	2,002	2,225	20,392
Santa Cruz	7,524	802	905	827	826	666	516	366	246	251	2,119
Shasta	10,632	1,025	1,331	1,353	1,445	1,063	729	552	486	409	2,239
Sierra	134	8	14	8	12	4	11	6	6	9	56
Siskiyou	2,724	220	267	302	354	300	220	149	135	113	664
Solano	14,434	1,752	2,040	1,783	1,798	1,233	763	505	455	429	3,676
Sonoma	12,619	1,096	1,504	1,487	1,590	1,173	939	673	497	426	3,234
Stanislaus	25,132	2,784	3,237	2,979	2,913	2,254	1,541	1,265	1,092	1,067	6,000
Sutter	4,207	436	568	517	495	320	246	168	166	144	1,147
Tehama	3,377	320	416	417	469	306	192	140	148	137	832
Trinity	738	49	73	72	114	85	61	50	34	25	175
Tulare	25,792	3,327	3,712	3,433	3,105	2,270	1,503	1,087	953	847	5,555
Tuolumne	2,203	198	240	258	307	255	158	118	94	70	505
Ventura	20,504	2,179	2,584	2,370	2,269	1,654	1,200	853	733	704	5,958
Yolo	6,655	675	834	851	823	619	436	343	257	282	1,535
Yuba	4,560	521	547	585	630	444	307	224	235	167	900

Note: COHS = County Organized Health Systems; HCPs = Health Care Plans; FFS = Fee-For-Service.

Source: State of California, Department of Health Services, MEDS Monthly Extract File (MEF), Run Date 04/24/99.

TABLE 18

MEDI-CAL PROGRAM  
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
STATEWIDE	2,830,939	1,819,782	319,629	22,116	614,610	863,426	400,977	100,074	663	50,858	249,382
Alameda	89,178	60,988	14,727	1,071	31,444	13,746	13,650	6,287	31	2,777	4,554
Alpine	216	134	14	1	21	99	67	2	0	3	62
Amador	2,653	1,728	151	8	420	1,150	727	142	0	43	542
Butte	42,025	31,169	1,804	259	7,563	21,544	7,352	1,097	12	562	5,681
Calaveras	5,110	3,607	302	29	805	2,471	1,156	130	2	74	950
Colusa	3,573	1,514	199	14	341	961	1,101	81	1	43	976
Contra Costa	43,233	28,624	5,761	496	14,356	8,010	7,002	2,723	17	1,261	3,002
Del Norte	6,565	5,134	260	32	1,405	3,437	1,003	135	0	82	786
El Dorado	11,665	7,421	658	74	2,038	4,651	2,632	400	2	190	2,041
Fresno	83,335	48,845	9,673	803	23,595	14,774	12,795	2,679	27	1,494	8,596
Glenn	5,317	3,409	286	26	697	2,400	963	85	1	50	827
Humboldt	23,100	16,778	975	126	5,142	10,535	4,553	468	4	345	3,736
Imperial	39,135	27,692	3,947	150	4,529	19,065	7,407	724	6	333	6,344
Inyo	2,713	1,719	187	13	377	1,142	637	128	1	46	462
Kern	64,732	37,342	5,839	594	17,366	13,544	11,516	1,990	15	1,227	8,284
Kings	23,021	14,170	1,224	99	2,814	10,033	4,743	377	3	197	4,166
Lake	13,187	10,429	865	85	2,807	6,672	2,105	339	6	195	1,565
Lassen	4,724	3,540	185	34	792	2,530	809	131	0	35	643
Los Angeles	926,918	573,599	136,084	7,770	197,692	232,053	105,028	34,875	164	16,542	53,447
Madera	27,481	16,405	1,367	101	3,151	11,787	5,361	452	6	233	4,669
Marin	11,795	6,976	860	98	2,855	3,163	2,544	646	12	334	1,553
Mariposa	2,195	1,398	124	11	225	1,039	632	76	1	27	528
Mendocino	16,755	11,252	839	83	3,136	7,195	3,216	365	5	201	2,645
Merced	55,565	38,310	2,513	240	6,270	29,287	8,321	778	19	433	7,091
Modoc	2,242	1,509	94	5	286	1,123	448	100	1	33	313
Mono	786	386	29	3	84	270	214	5	0	8	201
Monterey	52,872	29,993	3,173	218	5,942	20,659	11,638	1,067	6	540	10,025
Napa	2,567	976	96	11	318	551	414	94	0	37	282
Nevada	6,854	4,414	419	64	1,375	2,556	1,759	366	2	131	1,260
Orange	36,118	30	1	0	16	13	50	5	0	28	16

TABLE 18  
MEDI-CAL PROGRAM  
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
Placer	16,385	12,513	946	118	3,413	8,037	2,226	750	4	293	1,180
Plumas	2,729	1,881	146	19	567	1,148	672	123	1	37	512
Riverside	134,162	89,545	11,186	972	26,493	50,895	19,600	3,533	25	1,917	14,126
Sacramento	86,116	62,320	9,536	1,008	31,970	19,806	10,690	3,590	12	2,464	4,623
San Benito	5,644	3,183	365	20	525	2,274	1,454	170	2	54	1,228
San Bernardino	176,917	125,139	12,485	1,160	35,677	75,818	25,393	4,114	42	2,250	18,987
San Diego	196,728	143,413	24,062	1,761	47,460	70,130	22,886	7,059	44	3,307	12,477
San Francisco	71,535	51,883	20,514	999	24,589	5,782	10,842	4,988	37	2,831	2,986
San Joaquin	48,670	31,618	5,460	558	17,259	8,341	7,979	2,277	19	1,114	4,569
San Luis Obispo	21,827	14,268	1,195	118	4,342	8,613	4,168	699	4	485	2,979
San Mateo	4,661	7	2	0	3	1	3	0	0	0	2
Santa Barbara	6,869	6	0	0	2	4	16	1	0	0	15
Santa Clara	88,102	50,178	18,482	877	20,988	9,832	15,205	6,925	42	2,407	5,831
Santa Cruz	3,131	2	0	0	1	1	3	1	0	0	2
Shasta	34,170	25,917	1,518	155	7,155	17,089	6,032	784	6	447	4,795
Sierra	366	253	30	3	86	135	97	32	0	8	58
Siskiyou	8,616	6,479	528	47	1,872	4,033	1,502	204	0	103	1,194
Solano	1,641	89	1	1	82	5	30	5	0	14	11
Sonoma	36,047	25,681	2,103	270	8,087	15,220	5,277	1,200	18	1,259	2,800
Stanislaus	39,995	23,717	4,479	434	12,943	5,860	7,398	1,782	11	992	4,613
Sutter	13,900	8,614	925	88	2,119	5,482	3,278	381	2	119	2,777
Tehama	11,230	7,499	600	61	1,939	4,899	2,349	276	4	139	1,930
Trinity	2,393	1,782	135	14	520	1,113	484	60	0	50	374
Tulare	98,588	69,833	4,943	385	11,439	53,067	12,960	1,462	19	1,312	10,167
Tuolumne	6,604	4,689	344	33	1,232	3,080	1,513	207	2	119	1,186
Ventura	68,409	39,934	5,016	304	9,555	25,059	13,364	1,936	16	1,150	10,263
Yolo	22,505	16,532	1,232	120	3,497	11,682	3,162	553	10	339	2,260
Yuba	17,373	13,319	741	76	2,938	9,565	2,558	217	1	145	2,195

TABLE 18  
MEDI-CAL PROGRAM  
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY	MEDICALLY INDIGENT			IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY	INCOME DISREGARD		
	Total	Adults	Children						Total	Infant	Pregnant Woman
STATEWIDE	131,686	8,700	122,986	2	215,853	1,459	52,082	94,681	94,157	40,106	54,051
Alameda	2,616	394	2,221	0	4,401	80	1,212	2,629	2,761	1,242	1,519
Alpine	7	1	7	0	2	0	0	2	3	2	1
Amador	74	3	71	0	9	0	29	35	41	17	24
Butte	1,516	38	1,479	0	650	29	289	355	555	170	385
Calaveras	147	5	142	0	33	0	53	39	54	24	29
Colusa	268	6	262	0	292	0	85	98	199	70	129
Contra Costa	1,751	138	1,613	0	2,251	12	769	1,265	1,304	656	649
Del Norte	159	2	158	0	78	0	47	60	70	31	39
El Dorado	604	24	580	0	350	1	129	181	254	126	128
Fresno	3,791	338	3,452	0	8,899	14	2,110	3,145	3,134	1,401	1,733
Glenn	330	6	324	0	242	6	75	111	165	59	107
Humboldt	790	39	751	0	117	3	163	230	324	121	204
Imperial	1,610	61	1,549	0	671	2	345	459	724	290	434
Inyo	81	2	79	0	94	0	44	64	64	30	34
Kern	2,216	130	2,086	0	7,587	1	1,432	1,928	2,272	862	1,410
Kings	1,488	32	1,455	0	1,423	1	291	394	405	210	195
Lake	247	12	235	0	114	0	68	84	77	33	45
Lassen	127	4	123	0	71	0	44	41	70	21	48
Los Angeles	51,268	3,346	47,923	2	102,017	347	17,611	36,453	35,539	12,276	23,263
Madera	1,544	29	1,516	0	2,947	0	263	396	414	175	239
Marin	584	13	571	0	935	29	114	217	343	148	195
Mariposa	92	4	88	0	2	0	21	19	24	11	13
Mendocino	758	23	735	0	643	1	184	276	354	144	211
Merced	2,733	133	2,600	0	3,261	2	897	1,162	769	311	458
Modoc	99	4	95	0	93	0	10	38	34	12	22
Mono	51	3	48	0	50	0	13	23	49	20	30
Monterey	2,529	76	2,452	0	4,217	6	743	1,279	2,114	784	1,330
Napa	85	3	81	0	86	0	172	258	477	143	334
Nevada	255	11	244	0	56	0	73	99	171	94	78
Orange	118	105	13	0	15,858	0	3,678	7,887	7,059	3,448	3,611



TABLE 18  
MEDI-CAL PROGRAM  
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998

(FFS ONLY)

COUNTY	MEDICALLY INDIGENT			IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY	INCOME DISREGARD		
	Total	Adults	Children						Total	Infant	Pregnant Woman
Placer	585	53	532	0	255	5	131	241	331	167	165
Plumas	69	2	67	0	16	0	23	31	33	14	19
Riverside	7,474	544	6,930	0	5,609	31	2,608	4,386	4,027	2,161	1,866
Sacramento	2,819	342	2,477	0	3,582	339	1,333	2,457	2,314	1,183	1,131
San Benito	319	15	305	0	250	1	81	135	209	81	128
San Bernardino	8,013	633	7,380	0	6,745	70	2,715	4,352	3,701	1,970	1,732
San Diego	9,966	732	9,235	0	6,391	132	2,639	4,872	5,037	2,309	2,728
San Francisco	1,957	157	1,800	0	2,345	72	806	1,647	1,415	705	710
San Joaquin	1,659	96	1,563	0	3,843	20	845	1,163	1,248	575	673
San Luis Obispo	1,084	75	1,009	0	582	0	375	588	617	342	275
San Mateo	1	0	1	0	1	0	636	1,616	1,924	971	952
Santa Barbara	2	0	2	0	2,329	0	862	1,662	1,655	868	787
Santa Clara	3,047	242	2,806	0	10,548	161	1,607	2,970	2,660	1,277	1,383
Santa Cruz	1	0	1	0	902	0	344	567	864	452	412
Shasta	962	24	938	0	128	20	257	330	436	181	254
Sierra	4	0	4	0	2	0	2	5	3	1	2
Siskiyou	258	10	249	0	116	1	62	78	97	45	53
Solano	6	4	2	0	1	0	324	516	526	244	282
Sonoma	1,338	80	1,258	0	1,119	3	433	791	984	484	500
Stanislaus	1,661	155	1,506	0	2,858	7	1,311	1,582	1,242	586	656
Sutter	695	29	666	0	573	2	184	252	265	127	139
Tehama	532	12	520	0	410	0	123	147	139	58	81
Trinity	52	1	51	0	2	0	20	22	25	11	14
Tulare	4,845	262	4,582	0	5,495	1	1,420	1,983	1,648	879	769
Tuolumne	176	8	168	0	6	0	58	61	81	31	49
Ventura	4,750	184	4,567	0	3,215	2	1,527	2,430	2,219	1,170	1,049
Yolo	896	54	842	0	737	38	266	389	439	217	222
Yuba	579	7	573	0	345	22	127	186	197	69	128

TABLE 18  
MEDI-CAL PROGRAM  
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998

(FFS ONLY)

COUNTY	200 PERCENT			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM	MINOR CONSENT
	Total	Infant	Pregnant Woman							
STATEWIDE	868	65	803	1,572	34	8	4,737	0	564	12,460
Alameda	22	0	22	21	3	0	113	0	24	659
Alpine	0	0	0	0	0	0	1	0	0	0
Amador	0	0	0	1	0	0	4	0	0	5
Butte	4	0	4	2	0	0	38	0	1	64
Calaveras	0	0	0	0	0	0	16	0	0	5
Colusa	0	0	0	1	0	0	9	0	0	5
Contra Costa	2	0	2	40	4	0	75	0	0	133
Del Norte	0	0	0	0	0	0	6	0	0	7
El Dorado	0	0	0	3	0	0	15	0	1	74
Fresno	56	14	42	186	1	0	48	0	1	309
Glenn	0	0	0	1	0	0	6	0	0	10
Humboldt	0	0	0	3	0	0	65	0	3	71
Imperial	3	1	2	2	0	0	29	0	3	189
Inyo	0	0	0	0	0	0	5	0	0	6
Kern	6	0	6	19	0	1	110	0	0	300
Kings	0	0	0	3	0	0	16	0	0	87
Lake	0	0	0	0	0	0	53	0	0	9
Lassen	0	0	0	0	0	0	17	0	0	5
Los Angeles	496	0	496	143	2	1	1,882	0	15	2,506
Madera	0	0	0	3	1	0	34	0	0	113
Marin	0	0	0	8	0	0	18	0	1	26
Mariposa	0	0	0	0	0	0	7	0	0	1
Mendocino	4	0	4	2	0	0	30	0	0	36
Merced	36	6	30	0	0	0	26	0	1	47
Modoc	6	2	4	0	0	0	3	0	0	1
Mono	0	0	0	0	0	0	1	0	0	0
Monterey	2	0	2	15	0	0	55	0	6	277
Napa	0	0	0	4	0	0	33	0	0	63
Nevada	0	0	0	2	0	0	9	0	1	16
Orange	27	0	27	338	0	2	382	0	30	659

TABLE 18

MEDI-CAL PROGRAM  
AVERAGE MONTHLY ELIGIBLES BY COUNTY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998

(FFS ONLY)

COUNTY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM	MINOR CONSENT
	Total	Infant	Pregnant Woman							
Placer	1	1	0	6	0	0	29	0	0	61
Plumas	0	0	0	0	0	0	3	0	0	2
Riverside	2	1	1	108	2	1	105	0	6	658
Sacramento	11	2	9	6	0	0	59	0	8	180
San Benito	0	0	0	1	0	0	4	0	0	6
San Bernardino	30	2	28	86	4	1	166	0	1	501
San Diego	42	4	38	190	2	0	287	0	13	858
San Francisco	8	1	7	51	0	0	149	0	11	350
San Joaquin	1	0	1	15	0	0	78	0	27	174
San Luis Obispo	2	0	2	12	1	0	20	0	1	109
San Mateo	5	2	4	18	9	0	157	0	26	258
Santa Barbara	4	0	4	51	0	0	45	0	4	232
Santa Clara	1	0	1	23	2	0	209	0	328	1,163
Santa Cruz	2	0	2	48	2	0	26	0	2	370
Shasta	1	0	1	3	0	0	44	0	3	37
Sierra	0	0	0	0	0	0	0	0	0	1
Siskiyou	0	0	0	1	0	0	10	0	0	13
Solano	6	1	5	3	0	1	26	0	24	88
Sonoma	0	0	0	39	0	0	27	0	0	356
Stanislaus	74	25	50	4	0	0	25	0	1	116
Sutter	8	3	5	1	0	0	14	0	0	14
Tehama	0	0	0	1	0	0	13	0	2	17
Trinity	0	0	0	0	0	0	5	0	0	2
Tulare	0	0	0	5	1	0	19	0	2	376
Tuolumne	0	0	0	0	0	0	8	0	0	13
Ventura	2	0	2	97	0	1	62	0	15	792
Yolo	3	0	3	5	0	0	16	0	3	21
Yuba	0	0	0	2	0	0	27	0	1	11

INA Information Not Available.

Note: FFS = Fee-For-Service; IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.

The IRCA program expired December 31, 1994. IRCA is shown for 1998 because claims continue to be paid due to the lag from time of service to time of payment.

Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Year 1998.

TABLE 19

MEDI-CAL PROGRAM  
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
STATEWIDE	1,866,088	1,249,720	214,671	15,830	450,445	568,775	281,489	85,576	608	47,866	147,439
Alameda	60,845	44,185	9,561	718	21,773	12,133	10,002	4,679	26	2,373	2,924
Alpine	75	52	7	1	11	33	17	0	0	1	16
Amador	1,557	993	114	7	312	559	449	128	0	38	283
Butte	23,143	17,276	1,352	182	5,530	10,211	4,228	990	11	524	2,703
Calaveras	2,765	1,958	221	18	584	1,135	635	126	1	69	439
Colusa	1,877	871	129	11	259	473	611	73	2	47	490
Contra Costa	27,553	19,234	3,699	315	9,321	5,899	4,996	2,132	18	1,042	1,804
Del Norte	3,718	2,914	203	24	1,024	1,663	594	122	0	78	393
El Dorado	5,776	3,685	411	48	1,281	1,946	1,424	326	3	166	929
Fresno	63,322	42,234	6,666	587	17,604	17,378	9,699	2,404	26	1,352	5,917
Glenn	2,777	1,838	220	20	510	1,088	536	80	1	50	405
Humboldt	13,318	9,762	792	89	3,733	5,148	2,571	438	4	329	1,801
Imperial	20,614	15,081	2,724	118	3,281	8,959	3,861	641	7	334	2,879
Inyo	1,400	890	135	11	265	479	364	116	2	44	202
Kern	41,701	28,153	3,612	419	12,034	12,087	8,045	1,715	12	1,077	5,241
Kings	12,752	8,124	915	70	2,115	5,025	2,602	349	3	187	2,062
Lake	7,801	6,191	695	67	2,086	3,343	1,276	323	6	188	759
Lassen	2,509	1,907	136	14	558	1,199	440	115	1	31	293
Los Angeles	648,480	439,390	91,608	5,655	146,864	195,263	79,678	28,048	139	14,830	36,661
Madera	14,075	8,838	980	76	2,327	5,455	2,938	432	5	216	2,285
Marin	6,549	3,930	543	64	1,963	1,360	1,549	534	11	309	695
Mariposa	1,253	816	101	7	177	531	355	70	1	26	257
Mendocino	9,446	6,558	656	63	2,299	3,540	1,845	338	5	192	1,311
Merced	27,152	19,290	1,797	176	4,594	12,722	4,491	725	19	399	3,349
Modoc	1,287	895	75	6	219	595	290	106	2	32	150
Mono	341	182	21	2	52	107	90	4	0	5	81
Monterey	25,282	14,775	1,988	141	4,024	8,622	5,654	946	6	481	4,221
Napa	2,609	1,356	145	19	562	631	641	217	1	111	312
Nevada	4,156	2,579	308	43	928	1,300	1,125	364	2	140	618
Orange/1/	55,743	18,654	2,104	173	5,295	11,082	6,132	2,225	17	1,348	2,542

TABLE 19 (Continued)  
MEDI-CAL PROGRAM  
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
Placer	8,796	6,361	636	81	2,300	3,344	1,562	678	4	266	615
Plumas	1,653	1,148	110	16	435	587	418	115	1	35	266
Riverside	78,024	51,549	5,959	655	18,142	26,794	12,576	2,920	21	1,798	7,838
Sacramento/1/	55,400	41,617	5,981	663	21,774	13,199	7,720	2,831	10	2,107	2,773
San Benito	2,794	1,546	231	9	351	954	747	147	1	48	551
San Bernardino	106,433	75,301	7,049	772	24,662	42,817	15,981	3,355	33	2,085	10,508
San Diego	127,935	92,901	15,780	1,228	34,545	41,348	17,250	6,096	40	3,229	7,884
San Francisco	51,691	38,184	14,616	725	17,796	5,047	8,489	3,822	31	2,429	2,208
San Joaquin	36,491	26,601	3,566	387	12,562	10,086	6,016	1,948	18	977	3,073
San Luis Obispo	12,381	8,151	805	82	3,101	4,162	2,465	598	4	449	1,415
San Mateo/1/	5,805	1,919	421	25	703	771	1,447	870	7	201	370
Santa Barbara/1/	5,797	2,171	129	13	578	1,452	567	51	1	58	457
Santa Clara	56,803	36,822	11,788	588	14,688	9,758	11,170	5,273	38	2,070	3,788
Santa Cruz/1/	3,946	1,815	130	18	808	860	448	78	0	78	293
Shasta	19,609	14,889	1,171	114	5,191	8,413	3,582	729	5	441	2,408
Sierra	237	158	27	2	63	67	69	39	0	9	21
Siskiyou	4,744	3,655	387	31	1,360	1,877	800	177	0	94	528
Solano/1/	4,341	2,780	159	18	672	1,930	525	73	1	61	391
Sonoma	20,025	13,545	1,372	182	5,685	6,307	3,806	1,006	10	1,292	1,498
Stanislaus	29,108	19,737	3,124	309	9,695	6,609	5,520	1,560	10	902	3,047
Sutter	8,039	5,202	694	60	1,581	2,867	1,842	355	2	129	1,357
Tehama	6,205	4,301	459	45	1,410	2,388	1,322	260	4	129	930
Trinity	1,422	1,047	98	10	383	556	304	54	0	53	197
Tulare	52,305	36,981	3,610	293	8,487	24,591	7,804	1,376	16	1,334	5,078
Tuolumne	4,089	2,862	270	26	922	1,644	968	197	2	112	657
Ventura	36,191	20,888	2,882	203	6,564	11,239	7,621	1,517	12	1,054	5,038
Yolo	11,306	8,114	776	79	2,320	4,940	1,918	492	7	279	1,140
Yuba	8,881	6,866	521	55	2,086	4,204	1,415	195	1	131	1,088
Not Reported	15,767	0	0	0	0	0	0	0	0	0	0

TABLE 19 (Continued)

MEDI-CAL PROGRAM  
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998

(FFS ONLY)

COUNTY OF BENEFICIARY	MEDICALLY INDIGENT			IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY	INCOME DISREGARD		
	Total	Adults	Children						Total	Infant	Pregnant Woman
STATEWIDE	76,728	8,844	67,884	3	62,578	1,689	14,106	39,686	53,328	21,554	31,774
Alameda	1,424	332	1,092	0	1,130	90	230	847	1,547	550	997
Alpine	3	1	2	0	0	0	0	0	2	1	1
Amador	37	3	35	0	2	0	12	11	26	10	16
Butte	713	37	676	0	142	11	75	118	263	92	171
Calaveras	65	7	59	0	6	0	12	14	36	11	25
Colusa	119	7	112	0	69	0	18	38	105	36	69
Contra Costa	777	146	631	0	618	12	175	444	857	338	519
Del Norte	77	3	74	0	17	0	15	22	48	16	32
El Dorado	249	29	221	0	86	1	34	54	154	53	101
Fresno	2,590	356	2,234	0	2,734	13	617	1,399	2,022	863	1,159
Glenn	156	7	149	0	47	1	16	44	84	32	51
Humboldt	378	40	338	0	25	1	48	74	177	48	129
Imperial	767	67	700	0	126	1	82	145	310	116	194
Inyo	35	3	32	0	20	0	8	16	36	12	24
Kern	1,324	120	1,204	0	1,380	2	276	570	1,126	406	720
Kings	744	38	706	0	292	0	82	170	310	126	184
Lake	132	14	119	0	28	0	24	28	53	15	38
Lassen	61	5	57	0	10	0	10	10	31	9	21
Los Angeles	31,658	3,105	28,553	1	29,786	444	4,824	16,241	15,938	6,565	9,372
Madera	770	32	738	0	657	0	81	185	301	112	189
Marin	241	19	223	0	265	22	28	76	219	77	142
Mariposa	43	6	37	0	1	0	6	8	13	4	9
Mendocino	380	28	352	0	184	0	52	102	217	68	149
Merced	1,235	109	1,126	0	759	2	241	450	424	190	233
Modoc	47	3	44	0	19	0	2	14	14	6	8
Mono	18	3	15	0	14	0	2	4	30	6	23
Monterey	1,093	79	1,013	0	1,080	3	159	426	1,107	375	732
Napa/1/	93	8	85	0	48	0	31	85	242	71	171
Nevada	133	14	119	0	17	0	29	37	97	42	55
Orange/1/	2,012	230	1,782	0	5,917	112	1,059	3,830	5,117	2,237	2,880

TABLE 19 (Continued)  
MEDI-CAL PROGRAM  
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY OF BENEFICIARY	MEDICALLY INDIGENT			IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY	INCOME DISREGARD		
	Total	Adults	Children						Total	Infant	Pregnant Woman
Placer	296	50	246	0	76	6	38	87	212	75	137
Plumas	34	3	31	0	2	0	6	7	21	7	14
Riverside	4,056	562	3,494	0	1,849	16	802	1,842	2,629	1,182	1,447
Sacramento/1/	1,450	325	1,125	0	818	313	331	849	1,394	564	831
San Benito	148	13	135	0	80	1	16	58	137	48	89
San Bernardino	4,557	654	3,903	0	2,277	53	916	1,946	2,439	1,110	1,330
San Diego	5,560	843	4,717	0	2,621	138	846	2,076	3,263	1,184	2,080
San Francisco	1,052	181	872	0	892	123	231	753	967	410	557
San Joaquin	877	99	778	0	769	17	177	404	751	305	446
San Luis Obispo	541	79	462	0	145	0	103	226	393	153	240
San Mateo/1/	209	21	188	0	57	2	134	579	1,072	465	608
Santa Barbara/1/	190	10	180	0	659	1	212	615	1,066	409	657
Santa Clara	1,557	229	1,329	0	2,382	229	334	1,037	1,690	618	1,072
Santa Cruz/1/	143	10	133	0	353	0	76	223	603	242	362
Shasta	498	33	465	0	24	10	67	101	265	88	177
Sierra	2	0	2	0	0	0	1	1	3	1	2
Siskiyou	127	12	115	0	21	0	18	26	61	18	43
Solano/1/	110	18	92	0	16	0	61	155	317	102	215
Sonoma	660	92	568	0	444	2	111	290	664	233	431
Stanislaus	993	156	837	0	802	7	286	590	840	342	497
Sutter	350	32	318	0	129	1	61	119	197	71	126
Tehama	233	18	215	0	68	0	29	47	95	29	66
Trinity	26	2	24	0	0	0	6	8	16	5	11
Tulare	2,530	254	2,276	1	1,318	1	398	871	1,244	573	671
Tuolumne	103	10	93	0	2	0	24	22	57	18	40
Ventura	2,387	225	2,162	0	1,093	3	460	1,073	1,629	666	962
Yolo	409	58	351	0	147	44	87	153	289	109	180
Yuba	256	9	248	0	59	9	29	68	111	40	71
Not Reported	0	0	0	0	0	0	0	0	0	0	0

TABLE 19 (Continued)  
MEDI-CAL PROGRAM  
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY OF BENEFICIARY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM	MINOR CONSENT	NOT REPORTED
	Total	Infant	Pregnant Woman								
STATEWIDE	142	36	106	1,155	20	3	19,805	42,435	176	7,259	15,767
Alameda	1	0	1	12	2	0	441	684	7	244	0
Alpine	0	0	0	0	0	0	0	0	0	0	0
Amador	0	0	0	1	0	0	19	3	0	4	0
Butte	0	0	0	8	0	0	184	83	1	42	0
Calaveras	0	0	0	1	0	0	26	7	0	6	0
Colusa	0	0	0	5	0	0	14	22	0	5	0
Contra Costa	0	0	0	14	2	0	197	125	0	104	0
Del Norte	0	0	0	1	0	0	22	0	0	8	0
El Dorado	1	0	1	6	0	0	44	11	0	27	0
Fresno	30	11	18	99	0	0	401	1,151	0	334	0
Glenn	0	0	0	3	0	0	12	31	0	9	0
Humboldt	0	0	0	7	0	0	115	121	1	38	0
Imperial	0	0	0	3	0	0	90	80	3	66	0
Inyo	0	0	0	2	0	0	21	5	0	5	0
Kern	1	0	1	48	0	0	348	234	0	194	0
Kings	0	0	0	20	0	0	68	282	1	55	0
Lake	0	0	0	1	0	0	52	9	0	8	0
Lassen	0	0	0	1	0	0	17	18	0	4	0
Los Angeles	14	0	14	40	3	1	4,628	24,256	1	1,578	0
Madera	0	0	0	52	1	0	102	113	0	38	0
Marin	0	0	0	27	0	0	80	83	0	28	0
Mariposa	0	0	0	0	0	0	9	1	0	1	0
Mendocino	0	0	0	10	0	0	64	2	0	33	0
Merced	14	3	11	0	0	0	51	155	1	41	0
Modoc	2	1	2	0	0	0	3	1	0	1	0
Mono	0	0	0	0	0	0	1	0	0	0	0
Monterey	0	0	0	27	0	0	146	635	2	176	0
Napa	0	0	0	10	0	0	81	3	0	19	0
Nevada	0	0	0	3	0	0	31	91	0	14	0
Orange/1/	1	0	1	210	1	1	7,473	4,644	1	579	0



TABLE 19 (Continued)

MEDI-CAL PROGRAM  
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998

(FFS ONLY)

COUNTY OF BENEFICIARY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM	MINOR CONSENT	NOT REPORTED
	Total	Infant	Pregnant Woman								
Placer	1	0	0	5	0	0	109	14	0	31	0
Plumas	0	0	0	0	0	0	13	2	0	2	0
Riverside	1	1	0	71	3	0	433	1,742	2	456	0
Sacramento/1/	3	1	3	4	0	0	324	387	0	186	0
San Benito	0	0	0	2	0	0	7	48	0	4	0
San Bernardino	3	1	2	61	2	0	707	1,749	0	442	0
San Diego	6	3	4	125	0	0	912	1,723	7	512	0
San Francisco	2	1	1	21	0	0	370	391	2	214	0
San Joaquin	0	0	0	33	0	0	361	355	1	123	0
San Luis Obispo	0	0	0	9	0	0	110	170	0	66	0
San Mateo/1/	2	0	2	3	4	0	78	154	1	141	0
Santa Barbara/1/	0	0	0	31	0	0	28	134	2	120	0
Santa Clara	0	0	0	13	0	0	451	720	89	279	0
Santa Cruz/1/	0	0	0	19	0	0	22	41	0	202	0
Shasta	0	0	0	6	0	0	128	0	1	37	0
Sierra	0	0	0	0	0	0	3	0	0	1	0
Siskiyou	0	0	0	2	0	0	18	7	0	10	0
Solano/1/	3	1	2	2	0	0	13	306	1	48	0
Sonoma	0	0	0	31	0	0	201	204	0	68	0
Stanislaus	46	10	36	3	0	0	49	121	1	113	0
Sutter	7	2	6	4	0	0	58	55	0	15	0
Tehama	0	0	0	5	0	0	41	45	1	17	0
Trinity	0	0	0	0	0	0	8	3	1	3	0
Tulare	1	0	1	4	1	0	179	786	2	186	0
Tuolumne	0	0	0	2	0	0	27	8	0	14	0
Ventura	1	1	0	85	0	0	318	349	8	280	0
Yolo	0	0	0	2	0	0	52	70	2	18	0
Yuba	0	0	0	4	0	0	48	3	1	11	0
Not Reported	0	0	0	0	0	0	0	0	0	0	15,767

/1/ Availability of data is limited for Napa, Orange, Sacramento, San Mateo, Santa Barbara, Santa Cruz, and Solano Counties.

Note: FFS = Fee-For-Service; IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.

The IRCA program expired December 31, 1994. IRCA is shown for 1998 because claims continue to be paid due to the lag from time of service to time of payment.

Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Report.

TABLE 20

MEDI-CAL PROGRAM  
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
STATEWIDE	\$10,029,725,943	\$5,560,078,818	\$924,605,176	\$124,242,906	\$3,201,715,332	\$1,309,515,405	\$3,105,472,230	\$1,486,735,919	\$11,903,905	\$1,076,706,820	\$530,125,586
Alameda	391,625,323	223,338,423	37,941,918	4,871,797	148,683,737	31,840,971	135,129,765	77,858,020	408,294	43,373,219	13,490,232
Alpine	253,025	199,643	12,343	1,375	78,930	106,995	27,422	193	0	292	26,937
Amador	7,595,865	3,330,897	426,340	29,289	1,648,886	1,226,382	3,889,380	2,791,485	0	373,423	724,472
Butte	95,571,821	59,900,407	4,503,630	1,730,898	32,804,080	20,861,799	31,324,415	18,621,418	171,066	5,346,077	7,185,855
Calaveras	10,233,926	5,999,859	656,756	106,941	2,742,545	2,493,617	3,766,454	2,136,111	4,743	489,645	1,135,956
Colusa	6,945,891	2,882,106	337,551	65,960	1,544,188	934,407	2,713,860	1,092,786	4,664	379,880	1,236,530
Contra Costa	161,772,594	87,682,929	14,813,761	2,280,655	56,523,898	14,064,615	59,270,435	38,231,101	343,397	13,775,638	6,920,299
Del Norte	14,437,768	10,096,277	579,364	189,538	5,320,618	4,006,757	3,436,934	1,699,784	208	489,337	1,247,605
El Dorado	25,890,705	11,804,765	1,410,974	214,762	6,385,038	3,793,991	11,365,312	6,683,520	109,075	1,716,359	2,856,359
Fresno	272,737,441	152,351,085	19,686,210	3,932,517	95,361,518	33,370,841	83,001,222	45,953,848	415,629	19,942,893	16,688,851
Glenn	11,437,857	7,199,521	703,967	72,392	3,969,918	2,453,244	2,958,228	1,138,050	899	625,613	1,193,666
Humboldt	60,357,674	39,641,375	3,325,424	1,003,070	23,163,794	12,149,087	17,614,627	8,646,940	77,738	3,846,636	5,043,314
Imperial	73,411,790	50,372,160	9,754,769	891,816	20,439,895	19,285,680	16,846,948	5,582,293	66,383	2,676,973	8,521,299
Inyo	7,643,037	3,552,289	497,906	44,348	1,570,073	1,439,962	3,414,256	2,309,871	32,523	276,590	795,272
Kern	198,158,242	109,584,693	11,251,375	2,983,333	67,302,603	28,047,382	67,691,822	36,575,883	192,785	15,019,593	15,903,559
Kings	46,802,414	26,753,966	2,634,045	488,409	11,558,315	12,073,197	13,618,457	5,241,966	88,416	2,647,864	5,640,211
Lake	32,407,208	22,994,194	2,092,213	359,487	12,374,887	8,167,607	8,359,788	4,932,146	23,383	1,358,475	2,045,784
Lassen	10,644,491	6,466,030	430,513	45,399	3,324,779	2,665,340	3,651,406	2,535,797	9,768	248,599	857,243
Los Angeles	3,688,232,272	2,177,807,087	456,828,362	47,325,696	1,184,545,977	489,107,052	941,649,846	422,600,540	3,300,900	353,976,633	161,771,773
Madera	49,172,830	26,534,524	2,859,672	374,802	12,100,141	11,199,909	16,240,106	7,571,785	82,447	2,778,131	5,807,743
Marin	39,933,322	18,414,548	2,563,856	445,542	13,229,264	2,175,886	17,156,603	10,563,985	211,944	4,348,102	2,032,571
Mariposa	5,806,945	2,557,833	306,842	66,272	895,064	1,289,654	2,881,205	2,077,292	21,380	108,963	673,569
Mendocino	40,979,200	25,270,303	2,339,167	338,316	13,446,246	9,146,574	11,986,806	5,122,456	87,142	2,269,032	4,508,176
Merced	85,933,726	53,672,071	5,542,106	1,138,732	23,853,978	23,137,255	23,511,978	10,477,540	255,189	4,587,600	8,191,649
Modoc	6,572,124	2,811,833	339,449	25,782	998,526	1,448,076	3,387,248	2,770,837	59,337	165,766	391,308
Mono	1,386,288	531,544	57,822	1,899	191,487	280,336	398,220	11,350	0	126,191	260,679
Monterey	119,182,009	52,805,820	6,788,202	930,662	24,252,087	20,834,869	38,495,639	16,408,172	63,988	6,217,230	15,806,249
Napa	23,006,243	9,728,915	652,292	78,387	7,647,976	1,350,260	10,621,770	4,536,195	18,910	5,083,933	982,731
Nevada	22,199,735	9,185,729	1,148,237	236,353	5,366,091	2,435,048	11,617,603	7,501,071	50,341	2,138,976	1,927,216
Orange/1/	351,097,507	109,533,799	12,420,960	2,271,976	72,650,854	22,190,008	126,598,412	40,221,066	313,867	77,027,238	9,036,242

TABLE 20 (Continued)

MEDI-CAL PROGRAM  
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998

(FEES ONLY)

COUNTY OF BENEFICIARY	TOTAL	PUBLIC ASSISTANCE					MEDICALLY NEEDY				
		Total	Aged	Blind	Disabled	Families	Total	Aged	Blind	Disabled	Families
Placer	\$46,669,205	\$23,208,642	\$2,376,156	\$673,464	\$13,543,607	\$6,615,415	\$20,014,364	\$13,986,719	\$84,001	\$4,365,613	\$1,578,030
Plumas	10,244,640	4,973,793	430,738	274,229	2,592,207	1,676,618	4,978,703	3,987,425	3,674	281,541	706,062
Riverside	388,653,179	213,174,462	21,484,945	5,505,433	122,429,271	63,754,813	117,822,989	59,254,577	328,823	29,597,649	28,641,940
Sacramento/1/	281,795,305	171,254,138	22,349,757	4,447,176	117,457,767	26,999,438	89,207,542	50,663,735	125,727	27,875,084	10,542,996
San Benito	12,184,223	5,036,156	609,433	29,239	1,941,449	2,456,035	4,881,526	2,421,379	53,681	431,749	1,974,717
San Bernardino	539,971,327	325,692,784	28,619,708	7,238,050	185,750,965	104,084,061	149,743,050	65,869,011	467,848	40,671,051	42,735,140
San Diego	676,051,300	402,289,912	62,543,670	9,172,021	245,336,612	85,237,610	200,958,128	111,809,175	540,787	59,177,759	29,430,407
San Francisco	358,243,852	207,624,302	62,366,992	5,347,313	126,890,510	13,019,488	129,015,277	78,264,378	817,567	40,778,538	9,154,795
San Joaquin	176,733,831	100,062,817	13,098,415	2,838,048	64,726,916	19,399,438	62,226,998	36,786,786	137,365	15,434,071	9,868,775
San Luis Obispo	56,107,986	28,367,355	2,421,907	630,403	17,191,428	8,123,617	21,887,992	12,207,108	19,897	6,200,132	3,460,855
San Mateo/1/	64,078,928	18,238,706	5,963,847	287,978	10,842,334	1,144,547	36,353,259	27,859,840	338,878	7,529,584	624,957
Santa Barbara/1/	18,734,455	3,919,286	272,990	24,075	1,592,452	2,029,769	963,949	101,594	1,566	118,979	741,810
Santa Clara	411,989,205	190,955,873	46,652,158	5,022,828	118,049,241	21,231,646	173,798,734	77,955,414	1,337,771	78,250,452	16,255,098
Santa Cruz/1/	17,431,513	6,988,630	476,269	219,515	4,461,530	1,831,315	1,593,140	231,989	225	500,482	860,444
Shasta	89,988,533	58,070,152	3,931,698	775,524	31,975,361	21,387,570	27,791,364	14,011,127	19,579	5,710,880	8,049,779
Sierra	2,325,963	906,336	84,165	14,515	650,880	156,775	1,396,154	1,209,632	0	129,571	56,950
Siskiyou	17,986,859	12,035,023	945,712	115,795	7,310,908	3,662,609	5,143,688	3,215,395	117	579,479	1,348,696
Solano/1/	8,991,278	5,043,984	286,773	42,777	1,855,549	2,858,885	1,130,477	141,764	2,245	313,889	672,579
Sonoma	205,736,277	82,510,761	4,972,447	1,290,920	62,628,522	13,618,872	110,340,366	19,526,577	117,210	84,529,814	6,166,765
Stanislaus	140,854,305	76,867,564	11,175,859	2,041,615	50,371,907	13,278,182	51,018,567	32,148,910	240,550	8,927,588	9,701,518
Sutter	31,798,897	17,420,920	2,256,548	373,423	9,364,010	5,426,939	11,050,647	5,549,017	29,970	1,778,818	3,692,842
Tehama	25,862,048	15,797,670	1,507,324	235,314	8,120,898	5,934,133	7,994,630	4,221,609	97,563	1,012,131	2,663,328
Trinity	6,217,614	3,608,869	409,095	75,169	1,939,258	1,185,348	2,425,562	1,300,378	0	447,045	678,140
Tulare	266,863,445	134,747,895	11,357,751	2,265,672	65,554,665	55,569,807	106,743,250	25,958,470	433,294	65,650,061	14,701,425
Tuolumne	19,915,679	9,837,715	1,117,675	252,268	4,528,218	3,939,554	8,950,367	5,871,922	7,446	1,265,991	1,805,009
Ventura	172,119,508	83,022,174	9,727,603	1,572,132	47,396,203	24,326,236	63,479,673	28,505,861	172,628	19,301,532	15,499,652
Yolo	41,368,085	22,830,702	2,633,829	397,781	11,900,438	7,898,654	15,057,415	8,950,039	104,002	3,481,562	2,521,811
Yuba	31,376,097	22,587,571	1,625,688	533,826	11,336,831	9,091,225	6,878,252	2,832,586	7,076	950,874	3,087,716
Not Reported	48,003,135	0	0	0	0	0	0	0	0	0	0

TABLE 20 (Continued)

MEDI-CAL PROGRAM  
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998

(FFS ONLY)

COUNTY OF BENEFICIARY	MEDICALLY INDIGENT			IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY	INCOME DISREGARD		
	Total	Adults	Children						Total	Infant	Pregnant Woman
STATEWIDE	\$293,894,482	\$76,721,241	\$217,173,240	\$147,519	\$495,788,389	\$6,511,075	\$24,317,366	\$51,817,456	\$282,042,964	\$59,852,542	\$222,190,422
Alameda	8,415,510	2,694,439	5,721,072	11	9,261,046	272,001	443,248	1,506,956	9,673,493	2,000,850	7,672,643
Alpine	13,439	7,927	5,512	0	0	0	197	53	9,876	209	9,667
Amador	125,910	31,981	93,929	0	21,398	0	14,352	11,914	149,955	10,051	139,904
Butte	1,709,932	348,437	1,361,495	0	532,214	23,736	225,271	135,565	1,093,856	177,038	916,819
Calaveras	140,166	40,881	99,284	0	10,888	0	26,221	9,770	190,684	24,852	165,832
Colusa	246,539	59,625	186,914	0	397,130	97	27,020	58,996	541,667	46,677	494,990
Contra Costa	3,979,265	1,294,024	2,685,241	0	4,291,040	37,977	274,774	635,181	4,468,518	1,067,691	3,400,827
Del Norte	205,177	16,325	188,852	0	149,449	0	21,786	34,334	405,840	197,366	208,475
El Dorado	960,753	248,899	711,854	0	616,026	1,476	58,115	53,425	747,938	119,708	628,231
Fresno	9,873,062	2,651,785	7,221,278	0	12,023,202	55,622	763,210	1,686,221	8,603,001	1,815,489	6,787,513
Glenn	368,785	65,179	303,606	0	295,852	4,229	39,925	54,514	344,044	37,653	306,391
Humboldt	1,384,741	358,942	1,025,799	0	186,979	3,064	70,640	78,009	840,591	77,704	762,887
Imperial	2,373,528	606,985	1,766,543	4	838,206	2,457	105,580	267,195	1,693,259	543,425	1,149,834
Inyo	128,532	31,312	97,219	0	199,519	0	18,629	13,166	244,574	19,171	225,403
Kern	4,719,831	1,346,615	3,373,216	0	7,255,996	4,646	373,588	685,660	5,319,123	1,073,122	4,246,000
Kings	1,887,035	382,086	1,504,949	(253)	1,547,446	198	121,726	241,120	1,654,793	433,253	1,221,540
Lake	426,192	126,275	299,917	0	174,718	0	29,375	39,462	255,877	14,358	241,519
Lassen	213,241	57,204	156,036	0	54,398	162	18,176	15,708	140,618	21,201	119,417
Los Angeles	117,338,241	28,204,828	89,133,413	10,877	264,934,006	2,379,949	9,713,071	21,480,349	86,797,126	17,965,762	68,831,363
Madera	1,410,810	164,341	1,246,469	0	2,882,691	0	98,598	179,166	1,127,833	187,141	940,692
Marin	607,215	187,195	420,020	0	1,819,896	66,289	41,141	125,655	1,181,534	210,805	970,730
Mariposa	294,721	115,242	179,479	0	1,830	0	5,932	11,688	37,811	3,404	34,406
Mendocino	1,085,747	212,236	873,511	0	1,046,679	117	74,172	155,762	1,053,351	111,569	941,782
Merced	2,787,169	619,019	2,168,150	0	3,223,260	2,884	281,474	444,049	1,516,629	437,482	1,079,147
Modoc	148,803	12,248	136,555	0	95,487	0	1,926	18,157	88,549	23,493	65,056
Mono	47,536	20,870	26,666	0	162,335	0	7,885	6,188	231,877	5,393	226,484
Monterey	4,501,791	1,181,974	3,319,817	0	11,649,403	5,073	279,480	617,381	7,966,264	1,235,586	6,730,678
Napa	617,322	253,964	363,358	3	312,118	137	55,044	72,433	1,353,389	104,656	1,248,733
Nevada	404,012	97,502	306,510	0	122,682	0	23,763	62,583	548,721	77,989	470,732
Orange/1/	13,511,592	2,528,049	10,983,543	(44)	45,099,511	401,659	1,898,088	4,031,556	24,729,226	5,820,470	18,908,756

TABLE 20 (Continued)

MEDI-CAL PROGRAM  
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998

(FFS ONLY)

COUNTY OF BENEFICIARY	MEDICALLY INDIGENT			IRCA ALIENS	OBRA ALIENS	REFUGEE/ ENTRANT	100 PERCENT POVERTY	133 PERCENT POVERTY	INCOME DISREGARD		
	Total	Adults	Children						Total	Infant	Pregnant Woman
Placer	\$1,137,644	\$414,489	\$723,154	\$0	\$555,330	\$26,428	\$39,733	\$106,573	\$1,253,860	\$216,679	\$1,037,181
Plumas	135,857	41,017	94,840	0	5,549	0	11,553	8,953	100,184	9,636	90,548
Riverside	18,006,951	4,633,378	13,373,573	(2,500)	14,735,296	53,979	1,307,307	2,400,501	14,481,416	3,935,135	10,546,281
Sacramento/1/	5,578,591	2,429,713	3,148,877	0	4,975,982	1,117,135	478,096	731,449	6,405,951	1,362,523	5,043,428
San Benito	492,698	94,919	397,779	0	620,260	3,260	22,552	145,061	779,246	112,771	666,475
San Bernardino	19,791,180	5,138,108	14,653,073	1	19,498,140	160,418	1,413,260	2,588,555	13,069,367	3,386,031	9,683,336
San Diego	22,405,648	7,067,076	15,338,571	21,829	20,313,103	470,096	1,307,816	2,887,309	17,272,555	3,619,710	13,652,845
San Francisco	5,209,508	1,853,805	3,355,703	0	6,479,134	537,905	329,759	1,333,571	5,524,293	1,386,112	4,138,181
San Joaquin	3,466,535	1,000,925	2,465,610	0	4,634,323	31,279	238,681	458,042	3,512,672	851,429	2,661,244
San Luis Obispo	1,635,468	431,629	1,203,839	0	1,024,856	0	144,142	318,889	1,883,970	462,711	1,421,260
San Mateo/1/	933,968	640,001	293,967	127	252,095	5,724	215,333	763,307	6,308,007	1,415,884	4,892,124
Santa Barbara/1/	273,963	15,294	258,669	0	5,406,056	3,147	229,954	770,885	6,049,953	1,288,027	4,761,927
Santa Clara	7,524,676	1,984,761	5,539,916	3	19,756,795	589,950	534,076	1,908,097	12,056,612	2,375,314	9,681,298
Santa Cruz/1/	995,566	74,029	921,537	0	2,942,296	1,031	101,505	250,325	3,148,597	476,462	2,672,135
Shasta	1,657,406	267,636	1,389,770	0	93,481	17,938	83,605	147,131	1,648,962	263,441	1,385,521
Sierra	2,500	0	2,500	0	0	0	1,065	1,963	7,753	3,064	4,689
Siskiyou	311,175	60,409	250,766	0	88,275	0	20,202	30,721	301,568	25,045	276,523
Solano/1/	200,977	52,450	148,526	0	36,630	179	90,404	194,824	1,531,652	100,854	1,430,799
Sonoma	3,191,032	875,165	2,315,867	24	4,260,772	3,970	267,303	311,810	3,723,095	531,486	3,191,609
Stanislaus	3,351,271	1,226,412	2,124,859	0	3,960,186	20,662	380,380	660,853	3,397,002	541,452	2,855,550
Sutter	1,068,516	238,858	829,657	0	625,598	954	66,623	163,948	1,130,353	227,974	902,380
Tehama	540,143	107,225	432,918	0	484,126	296	33,563	153,634	548,254	62,693	485,562
Trinity	60,849	2,791	58,058	0	404	0	5,571	4,605	77,631	5,782	71,849
Tulare	7,395,877	1,888,924	5,506,953	117,414	7,591,636	1,172	528,950	1,185,783	5,883,641	1,338,803	4,544,838
Tuolumne	497,040	197,175	299,865	0	13,141	0	30,747	104,042	317,630	42,541	275,089
Ventura	6,605,520	1,573,781	5,031,739	22	7,293,720	5,111	1,030,816	1,219,246	6,855,408	1,469,656	5,385,752
Yolo	923,863	359,034	564,829	0	650,254	166,619	258,952	138,997	1,040,181	170,831	869,350
Yuba	573,465	85,850	487,615	0	285,547	32,052	33,013	96,167	723,133	306,933	416,200
Not Reported	0	0	0	0	0	0	0	0	0	0	0

TABLE 20 (Continued)

MEDI-CAL PROGRAM  
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998

(FFS ONLY)

COUNTY OF BENEFICIARY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM	MINOR CONSENT	NOT REPORTED
	Total	Infant	Pregnant Woman								
STATEWIDE	\$776,510	\$130,233	\$646,278	\$2,773,633	\$168,458	\$24,833	\$41,944,581	\$73,344,878	\$387,329	\$42,232,285	\$48,003,135
Alameda	3,598	0	3,598	15,000	25,888	0	899,202	1,318,762	20,122	1,302,297	0
Alpine	0	0	0	622	0	0	1,608	167	0	0	0
Amador	0	0	0	715	0	0	26,951	3,223	0	21,172	0
Butte	0	0	0	11,971	0	0	301,714	107,744	3,962	201,034	0
Calaveras	0	0	0	827	0	0	53,982	11,461	0	23,614	0
Colusa	0	0	0	3,187	0	0	32,460	13,406	196	29,226	0
Contra Costa	875	0	875	20,403	9,413	0	404,505	252,071	0	445,210	0
Del Norte	0	0	0	1,378	0	0	48,086	0	0	38,507	0
El Dorado	7,684	132	7,552	8,641	0	0	60,128	12,642	0	193,801	0
Fresno	152,685	19,912	132,773	226,023	0	0	736,287	1,773,333	37	1,492,450	0
Glenn	0	0	0	6,252	0	0	17,772	45,295	0	103,442	0
Humboldt	0	0	0	7,682	0	0	176,076	176,636	927	176,327	0
Imperial	628	628	0	19,421	0	0	172,894	150,254	14,464	554,792	0
Inyo	0	0	0	7,358	3,080	0	33,386	7,389	0	20,859	0
Kern	4,220	979	3,241	130,573	0	(7,971)	1,015,088	300,609	462	1,079,903	0
Kings	0	0	0	33,784	0	0	183,571	434,071	1,311	325,190	0
Lake	0	0	0	1,462	0	0	74,372	6,083	0	45,685	0
Lassen	0	0	0	418	0	0	26,349	29,386	0	28,600	0
Los Angeles	98,434	4	98,430	425,201	34,570	20,689	12,301,946	42,720,870	895	10,519,115	0
Madera	0	0	0	152,417	6,840	0	191,775	190,230	0	157,841	0
Marin	0	0	0	91,826	0	0	165,371	169,158	82	94,004	0
Mariposa	0	0	0	309	0	0	14,456	461	0	699	0
Mendocino	0	0	0	13,003	0	0	121,556	2,895	0	168,808	0
Merced	39,079	3,280	35,798	0	0	0	97,640	185,588	1,328	170,576	0
Modoc	11,325	416	10,910	205	0	0	1,073	1,024	0	6,493	0
Mono	0	0	0	106	0	0	554	43	0	0	0
Monterey	301	15	286	66,461	0	0	283,168	1,210,425	15,873	1,284,931	0
Napa/1/	0	0	0	19,178	0	0	119,682	5,632	0	100,619	0
Nevada	21	0	21	25,560	0	0	35,818	51,648	115	121,480	0
Orange/1/	5,855	0	5,855	347,878	3,360	5,394	14,390,542	6,891,405	2,259	3,647,014	0

TABLE 20 (Continued)

MEDI-CAL PROGRAM  
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY, PROGRAM, AND AID CATEGORY  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY OF BENEFICIARY	200 PERCENT POVERTY			60-DAY POSTPARTUM	DIALYSIS	TOTAL PARENTERAL NUTRITION	QUALIFIED MEDICARE BENEFICIARY	PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	MEDI-CAL TUBERCULOSIS PROGRAM	MINOR CONSENT	NOT REPORTED
	Total	Infant	Pregnant Woman								
Placer	\$211	\$118	\$93	\$9,494	\$0	\$0	\$180,340	\$16,053	\$0	\$120,534	\$0
Plumas	0	0	0	305	0	0	20,322	2,694	0	6,726	0
Riverside	4,066	4,066	0	167,167	37,252	731	852,995	2,893,234	3,445	2,713,887	0
Sacramento/1/	13,496	319	13,177	3,267	0	0	601,561	649,280	10,595	768,223	0
San Benito	0	0	0	3,845	0	0	9,469	178,628	0	11,522	0
San Bernardino	6,906	497	6,409	166,330	14,143	5,919	1,719,121	3,459,922	0	2,642,231	0
San Diego	24,992	9,279	15,713	175,253	2,171	0	1,923,958	3,014,501	5,751	2,978,278	0
San Francisco	1,814	402	1,412	44,261	0	0	462,453	724,840	1,706	955,027	0
San Joaquin	0	0	0	52,344	0	0	827,436	499,673	4,508	718,522	0
San Luis Obispo	0	0	0	16,087	1,738	0	186,424	362,414	921	277,730	0
San Mateo/1/	9,719	37	9,682	3,343	18,673	0	181,069	145,087	5,333	645,176	0
Santa Barbara/1/	2,831	0	2,831	56,018	1,223	0	60,624	319,332	3,770	673,464	0
Santa Clara	0	0	0	122,011	5,790	0	810,421	1,985,747	212,000	1,728,419	0
Santa Cruz/1/	211	0	211	43,511	1,274	0	44,889	56,982	1,737	1,261,819	0
Shasta	0	0	0	9,427	0	0	253,955	702	15,949	198,461	0
Sierra	0	0	0	0	0	0	9,407	154	0	630	0
Siskiyou	1,744	0	1,744	1,598	0	0	20,247	10,035	0	22,584	0
Solano/1/	14,376	141	14,236	1,469	0	71	24,247	450,735	3,278	267,976	0
Sonoma	242	0	242	71,477	0	0	317,456	356,399	79	381,491	0
Stanislaus	206,896	10,105	196,791	35,276	0	0	82,390	207,354	4,138	661,767	0
Sutter	23,651	1,023	22,628	6,271	0	0	117,301	48,593	39	75,482	0
Tehama	0	0	0	30,569	0	0	57,944	65,121	7,491	148,605	0
Trinity	0	0	0	3,470	0	0	19,960	1,971	3	8,717	0
Tulare	61,323	0	61,323	4,108	3,001	0	350,960	1,195,512	29,158	1,023,765	0
Tuolumne	0	0	0	2,673	0	0	54,669	18,117	0	89,537	0
Ventura	79,317	78,880	436	96,797	43	0	597,489	470,826	9,673	1,353,675	0
Yolo	11	0	11	1,359	0	0	66,380	136,053	5,224	92,075	0
Yuba	0	0	0	8,044	0	0	103,079	3,008	498	52,271	0
Not Reported	0	0	0	0	0	0	0	0	0	0	48,003,135

/1/ Availability of data is limited for Napa, Orange, Sacramento, San Mateo, Santa Barbara, Santa Cruz, and Solano Counties.

Note: FFS = Fee-For-Service; IRCA = Immigration Reform and Control Act; OBRA = Omnibus Budget Reconciliation Act.

The IRCA program expired December 31, 1994. IRCA is shown for 1998 because claims continue to be paid due to the lag from time of service to time of payment.

Payments are rounded independently and may not add to totals.

Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Report.

TABLE 21  
MEDI-CAL PROGRAM  
AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PHYSICIANS	PHARMACIES	DENTISTS	OPTOMETRISTS	COUNTY HOSPITAL		COMMUNITY HOSPITAL		STATE HOSPITALS	LONG-TERM CARE/1/
						Inpatient	Outpatient	Inpatient	Outpatient		
STATEWIDE	1,866,088	681,856	979,068	264,987	43,918	8,457	59,017	43,497	208,992	3,986	74,057
Alameda	60,845	17,191	34,579	9,631	1,529	370	2,425	1,522	6,679	4	3,452
Alpine	75	29	14	8	4	0	0	3	21	0	0
Amador	1,557	433	925	152	53	0	6	30	367	0	99
Butte	23,143	5,210	13,910	2,220	726	2	20	417	7,118	1	816
Calaveras	2,765	797	1,648	324	108	4	53	41	694	1	87
Colusa	1,877	427	1,042	117	50	0	2	43	411	0	40
Contra Costa	27,553	6,944	14,334	4,234	505	203	675	570	2,636	1	1,648
Del Norte	3,718	694	2,321	115	150	0	3	65	748	0	71
El Dorado	5,776	1,841	3,188	706	193	1	6	132	1,214	1	244
Fresno	63,322	18,937	32,266	10,888	1,255	344	3,059	1,205	6,401	2	2,410
Glenn	2,777	545	1,582	130	90	0	1	52	592	0	56
Humboldt	13,318	3,424	7,858	813	356	1	11	278	3,270	0	315
Imperial	20,614	7,182	11,361	1,798	643	3	20	472	2,409	0	243
Inyo	1,400	437	768	58	35	1	3	34	282	0	68
Kern	41,701	11,043	20,606	8,330	915	395	2,755	731	3,027	3	1,567
Kings	12,752	2,903	7,337	957	435	6	44	278	2,391	1	280
Lake	7,801	2,158	4,974	569	257	1	12	146	1,809	1	220
Lassen	2,509	436	1,474	135	83	0	1	41	447	1	91
Los Angeles	648,480	281,735	346,673	89,719	14,136	3,733	17,712	17,277	56,252	769	24,979
Madera	14,075	5,534	8,491	1,659	283	30	139	268	1,870	1	366
Marin	6,549	1,912	3,812	733	84	1	11	151	878	1	512
Mariposa	1,253	253	681	116	29	7	39	15	261	0	44
Mendocino	9,446	1,924	4,881	454	208	1	11	186	2,102	0	267
Merced	27,152	9,472	15,935	2,895	644	182	1,744	315	2,434	2	500
Modoc	1,287	203	696	24	64	0	1	20	261	0	69
Mono	341	92	129	19	7	0	1	11	67	0	1
Monterey	25,282	8,479	12,688	2,554	630	277	3,108	486	2,777	2	638
Napa	2,609	961	749	467	40	0	2	57	349	94	150
Nevada	4,156	1,470	2,355	428	95	1	1	94	902	0	274
Orange/2/	55,743	21,381	7,524	15,553	80	4	16	1,610	4,407	800	3,024



TABLE 21 (Continued)

MEDI-CAL PROGRAM  
 AVERAGE MONTHLY USERS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS  
 CALENDAR YEAR 1998  
 (FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PHYSICIANS	PHARMACIES	DENTISTS	OPTOMETRISTS	COUNTY HOSPITAL		COMMUNITY HOSPITAL		STATE HOSPITALS	LONG-TERM CARE/1/
						Inpatient	Outpatient	Inpatient	Outpatient		
Placer	8,796	3,272	5,254	1,018	285	1	7	176	1,103	1	664
Plumas	1,653	253	970	146	89	0	4	37	470	0	103
Riverside	78,024	34,049	41,313	11,503	2,025	294	2,729	2,132	9,282	5	2,856
Sacramento/2/	55,400	20,239	31,763	4,781	1,399	13	78	1,436	7,388	6	2,463
San Benito	2,794	806	1,548	221	67	3	35	68	564	0	81
San Bernardino	106,433	46,028	55,634	17,346	3,116	414	4,097	2,675	12,451	7	3,567
San Diego	127,935	50,184	70,935	18,920	3,018	6	50	3,325	15,771	7	5,569
San Francisco	51,691	13,020	32,438	6,599	1,255	487	2,848	843	7,241	4	2,549
San Joaquin	36,491	10,591	18,947	6,692	831	307	2,184	576	3,750	5	1,770
San Luis Obispo	12,381	3,862	7,017	1,129	406	65	1,686	205	2,041	2	608
San Mateo/2/	5,805	827	646	2,181	3	2	115	101	421	2	1,201
Santa Barbara/2/	5,797	1,296	818	2,300	11	1	5	181	283	4	5
Santa Clara	56,803	13,939	30,540	8,803	1,162	725	3,646	888	4,165	520	3,131
Santa Cruz/2/	3,946	885	498	1,283	3	2	9	123	505	0	8
Shasta	19,609	6,082	12,183	1,849	679	3	19	354	3,575	1	614
Sierra	237	34	131	14	7	1	3	5	39	1	33
Siskiyou	4,744	1,153	2,926	431	140	0	3	78	912	0	120
Solano/2/	4,341	361	254	2,288	4	0	2	34	218	2	5
Sonoma	20,025	5,766	10,915	1,831	485	4	15	453	3,939	900	956
Stanislaus	29,108	7,928	16,240	4,591	951	15	927	703	2,512	0	1,283
Sutter	8,039	2,449	4,724	908	224	0	6	176	1,190	0	237
Tehama	6,205	1,679	3,647	415	210	1	6	120	1,124	0	179
Trinity	1,422	544	874	119	47	20	175	14	88	0	37
Tulare	52,305	15,870	29,505	5,017	1,896	26	119	1,048	8,097	705	1,211
Tuolumne	4,089	819	2,458	432	116	24	543	53	674	1	145
Ventura	36,191	10,734	20,267	3,644	1,173	364	7,671	573	3,777	114	1,258
Yolo	11,306	4,128	6,182	1,536	345	1	7	207	2,866	1	443
Yuba	8,881	2,486	5,378	871	262	1	5	184	1,388	0	122
Not Reported	15,767	8,530	263	2,315	24	112	143	184	87	12	311

/1/ Nursing Facilities and Intermediate Care Facilities - Developmentally Disabled combined.

/2/ Availability of data is limited for Orange, Sacramento, San Mateo, Santa Barbara, Santa Cruz, and Solano Counties.

Note: FFS = Fee-For-Service.

Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Report.

TABLE 22

MEDI-CAL PROGRAM  
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PHYSICIANS	PHARMACIES	DENTISTS	OPTOMETRISTS	COUNTY HOSPITAL		COMMUNITY HOSPITAL		STATE HOSPITALS	LONG-TERM CARE/1/
						Inpatient	Outpatient	Inpatient	Outpatient		
STATEWIDE	\$10,029,725,943	\$851,348,344	\$1,809,364,948	\$567,375,958	\$31,290,424	\$534,993,292	\$78,698,399	\$1,846,274,866	\$227,480,255	\$460,319,503	\$2,354,274,868
Alameda	391,625,323	20,530,262	71,407,879	17,795,388	1,064,875	29,444,147	2,111,833	77,662,499	6,535,166	576,229	116,473,457
Alpine	253,025	31,453	40,619	15,332	3,058	0	57	94,157	16,544	0	28
Amador	7,595,865	457,193	1,253,062	319,224	30,486	18,500	5,097	1,194,782	303,147	0	3,016,292
Butte	95,571,821	4,744,452	21,958,184	4,237,863	465,627	110,681	29,590	19,322,794	6,828,409	184,454	22,152,277
Calaveras	10,233,926	763,934	2,262,362	606,200	66,217	105,657	59,023	1,794,734	599,142	104,487	2,374,339
Colusa	6,945,891	550,291	1,344,592	250,863	29,838	3,578	1,230	1,638,103	357,148	0	1,278,433
Contra Costa	161,772,594	8,215,984	27,424,650	7,980,109	322,086	8,060,172	715,017	29,780,292	2,745,207	142,228	51,652,395
Del Norte	14,437,768	649,978	4,085,258	248,473	100,172	10,129	3,028	3,238,917	943,364	0	1,785,397
El Dorado	25,890,705	2,097,810	4,798,732	1,251,420	129,957	18,311	6,877	6,769,241	1,163,075	92,018	7,597,454
Fresno	272,737,441	21,182,222	55,217,071	22,829,166	787,141	12,945,137	2,478,554	46,980,854	6,514,939	133,877	75,162,700
Glenn	11,437,857	647,304	2,291,299	296,245	59,606	856	623	2,952,113	534,205	0	1,732,100
Humboldt	60,357,674	3,812,291	14,976,581	1,317,586	247,438	98,452	7,822	13,568,630	3,135,228	7,926	11,449,109
Imperial	73,411,790	7,360,458	19,142,183	3,119,591	428,739	365,220	19,422	19,680,308	2,359,299	4,545	8,007,099
Inyo	7,643,037	415,303	1,138,271	120,514	20,623	48,957	2,983	2,079,605	251,161	0	2,463,473
Kern	198,158,242	13,249,392	37,272,898	17,251,889	604,789	19,894,619	3,543,057	27,564,692	2,934,841	359,648	53,491,244
Kings	46,802,414	3,648,399	8,865,639	2,064,613	321,607	492,692	41,437	11,446,704	2,308,819	94,918	7,650,936
Lake	32,407,208	2,077,834	7,381,228	1,142,653	170,569	36,767	13,027	9,060,912	1,697,733	61,781	5,631,828
Lassen	10,644,491	416,849	2,020,931	283,350	50,030	925	1,739	2,059,904	470,714	18,373	3,051,911
Los Angeles	3,688,232,272	393,941,919	703,250,486	210,412,882	10,694,828	259,105,691	36,429,486	681,160,528	69,608,663	85,716,136	727,109,233
Madera	49,172,830	5,271,021	10,198,653	3,375,236	157,410	1,085,754	98,169	9,271,474	1,472,458	99,960	10,842,695
Marin	39,933,322	2,002,219	9,365,274	1,056,772	56,588	55,394	12,117	5,889,701	820,901	123,953	15,605,414
Mariposa	5,806,945	325,416	917,015	226,126	16,992	166,288	46,803	713,126	207,922	0	2,046,334
Mendocino	40,979,200	2,389,472	7,432,810	752,781	151,403	242,677	11,314	9,785,690	2,177,455	19,536	7,397,953
Merced	85,933,726	8,074,014	19,334,434	5,569,562	448,177	4,975,043	1,284,104	12,063,981	2,237,336	279,797	14,747,908
Modoc	6,572,124	219,391	817,431	81,036	31,943	0	529	840,520	231,400	0	3,108,803
Mono	1,386,288	139,313	250,352	28,526	4,996	2,950	544	623,760	55,419	0	28,000
Monterey	119,182,009	9,499,493	17,769,207	5,202,354	408,490	17,155,468	2,285,028	32,424,083	2,435,677	283,534	19,527,540
Napa/1/	23,006,243	1,057,359	1,031,380	804,353	24,199	2,506	2,516	3,817,397	315,679	9,561,221	5,252,147
Nevada	22,199,735	1,200,875	4,258,998	689,112	62,326	255,123	1,471	4,461,314	848,166	28,609	8,503,918
Orange/2/	351,097,507	32,345,405	8,084,882	32,450,823	43,297	258,121	23,764	69,783,943	7,892,673	89,567,193	81,693,984

TABLE 22 (Continued)

MEDI-CAL PROGRAM  
TOTAL ANNUAL PAYMENTS BY COUNTY OF BENEFICIARY AND SELECTED TYPES OF PROVIDERS  
CALENDAR YEAR 1998  
(FFS ONLY)

COUNTY OF BENEFICIARY	TOTAL	PHYSICIANS	PHARMACIES	DENTISTS	OPTOMETRISTS	COUNTY HOSPITAL		COMMUNITY HOSPITAL		STATE HOSPITALS	LONG- TERM CARE/1/
						Inpatient	Outpatient	Inpatient	Outpatient		
Placer	46,669,205	3,289,437	8,902,242	1,957,659	183,502	53,627	8,971	7,674,604	1,135,963	114,804	18,030,333
Plumas	10,244,640	285,752	1,477,026	170,028	60,304	16,530	3,745	1,891,401	495,696	0	4,307,168
Riverside	388,653,179	40,923,518	70,400,982	26,701,315	1,406,837	15,254,873	2,922,473	86,954,450	8,924,596	518,292	93,940,644
Sacramento/2/	281,795,305	24,187,722	61,725,548	10,657,745	994,154	835,593	76,585	62,152,015	8,459,425	637,074	74,934,334
San Benito	12,184,223	1,010,370	1,700,628	465,855	51,075	89,530	39,004	3,399,431	429,880	0	2,763,075
San Bernardino	539,971,327	55,874,578	85,373,519	41,039,073	2,216,658	34,009,462	4,166,378	126,367,028	12,988,732	545,951	120,522,210
San Diego	676,051,300	59,110,563	155,624,341	38,455,615	2,269,822	268,290	61,051	133,676,959	18,768,415	643,463	185,105,747
San Francisco	358,243,852	14,440,903	79,777,980	12,459,007	915,749	23,490,663	2,927,549	34,507,655	8,035,505	408,273	138,092,943
San Joaquin	176,733,831	11,444,441	30,536,164	13,705,472	604,124	17,010,298	2,210,741	23,353,911	3,992,036	478,611	54,595,668
San Luis Obispo	56,107,986	4,053,846	11,969,170	1,867,118	252,432	1,926,185	1,424,849	7,670,161	1,765,757	220,624	18,168,026
San Mateo/2/	64,078,928	1,295,204	229,477	3,925,386	1,852	94,629	122,960	4,542,931	363,386	291,770	50,413,154
Santa Barbara/2/	18,734,455	2,353,394	283,304	4,340,727	8,211	31,215	6,632	7,562,377	212,320	459,018	118,880
Santa Clara	411,989,205	13,167,802	56,514,884	17,352,974	814,168	54,707,398	5,413,413	37,379,359	3,965,523	76,485,285	106,908,218
Santa Cruz/2/	17,431,513	1,778,481	814,391	1,972,898	2,041	233,433	8,649	6,832,235	447,747	0	233,326
Shasta	89,988,533	6,214,965	20,782,229	4,154,217	447,020	263,765	15,426	21,133,479	3,755,086	66,426	19,198,197
Sierra	2,325,963	49,348	226,905	14,007	4,903	120,893	2,880	257,112	28,893	94,693	1,321,579
Siskiyou	17,986,859	1,110,577	4,238,939	792,796	94,799	30,563	2,661	4,094,458	963,682	0	3,965,369
Solano/2/	8,991,278	513,743	109,684	4,821,309	2,311	10,089	2,533	1,535,664	316,038	230,931	54,205
Sonoma	205,736,277	5,901,782	20,614,127	3,256,050	339,915	530,600	15,443	26,519,693	3,460,135	103,134,480	28,793,396
Stanislaus	140,854,305	8,942,676	30,537,618	9,415,655	628,781	880,605	691,257	30,675,973	3,246,386	0	40,795,922
Sutter	31,798,897	2,580,202	7,569,891	1,886,294	124,418	6,398	5,033	6,977,665	1,203,708	34,370	6,981,228
Tehama	25,862,048	1,838,652	6,047,495	942,716	149,974	15,826	4,143	6,227,981	1,147,919	0	4,452,661
Trinity	6,217,614	465,089	1,452,184	225,170	32,428	675,036	152,855	821,924	113,546	0	1,535,999
Tulare	266,863,445	16,234,018	35,727,600	11,530,651	1,267,256	1,948,376	129,958	43,944,153	6,781,640	74,318,207	38,306,401
Tuolumne	19,915,679	1,022,836	3,460,745	700,646	74,054	587,170	698,613	2,192,736	636,299	87,661	7,072,609
Ventura	172,119,508	11,832,010	30,917,888	7,690,529	900,211	16,611,065	7,609,431	21,057,953	3,918,643	12,513,266	41,932,948
Yolo	41,368,085	3,686,109	7,912,691	3,272,390	258,890	11,667	5,557	6,545,130	2,257,291	176,937	13,121,081
Yuba	31,376,097	2,734,491	8,043,035	1,794,968	165,966	63,906	5,189	8,042,506	1,366,450	0	3,470,085
Not Reported	48,003,135	7,688,531	801,900	27,646	15,065	10,255,791	728,161	14,559,164	297,674	1,398,946	4,305,060

/1/ Nursing Facilities and Intermediate Care Facilities - Developmentally Disabled combined.

/2/ Availability of data is limited for Napa, Orange, Sacramento, San Mateo, Santa Barbara, Santa Cruz, and Solano Counties.

Note: FFS = Fee-For-Service.

Payments are rounded independently and may not add to totals.

Figures in parentheses ( ) indicate negative numbers.

Source: State of California, Department of Health Services, Medi-Cal Services and Expenditures Month of Payment Calendar Year Report.

**TABLE 23**  
**MEDI-CAL PROGRAM**  
**NUMBER OF PHYSICIANS AND HOSPITALS RECEIVING PAYMENTS BY COUNTY OF PROVIDER**  
**APRIL-JUNE 1998**

COUNTY OF PROVIDER	PHYSICIANS AND PHYSICIAN GROUPS/1/ BY SPECIALTY						HOSPITALS
	TOTAL	GENERAL PRACTICE/ FAMILY PRACTICE	OB-GYN	INTERNAL MEDICINE	PEDIATRIC	ALL OTHER	
STATEWIDE	22,130	3,914	1,595	2,773	1,353	12,495	677
Alameda	768	117	46	129	46	430	17
Alpine	1	1	0	0	0	0	0
Amador	25	11	2	4	1	7	1
Butte	155	31	10	20	4	90	6
Calaveras	19	8	1	2	0	8	1
Colusa	4	0	0	0	0	4	1
Contra Costa	364	63	22	44	26	209	9
Del Norte	30	7	5	6	1	11	1
El Dorado	69	22	7	6	1	33	2
Fresno	470	86	47	60	37	240	15
Glenn	3	3	0	0	0	0	1
Humboldt	135	38	8	9	9	71	6
Imperial	66	10	7	9	6	34	2
Inyo	21	3	2	4	1	11	2
Kern	372	71	38	40	20	203	13
Kings	49	14	2	4	3	26	3
Lake	24	5	1	1	0	17	2
Lassen	13	5	1	1	2	4	2
Los Angeles	6,603	1,363	479	905	383	3,473	131
Madera	43	9	4	6	2	22	2
Marin	183	29	12	21	8	113	6
Mariposa	5	4	0	1	0	0	1
Mendocino	69	10	6	7	1	45	4
Merced	124	31	8	13	6	66	11
Modoc	5	3	1	0	0	1	2
Mono	7	2	0	0	0	5	1
Monterey	216	40	19	23	10	124	4
Napa/2/	199	25	9	18	9	138	3
Nevada	65	12	10	7	1	35	2
Orange/2/	3,056	428	229	327	268	1,804	37
Placer	95	16	6	6	3	64	2
Plumas	15	9	0	0	0	6	4
Riverside	680	139	61	96	42	342	23
Sacramento/2/	497	91	44	49	38	275	16
San Benito	27	7	3	2	2	13	2
San Bernardino	637	140	51	90	52	304	26
San Diego	1,496	263	114	173	61	885	34
San Francisco	820	94	45	162	49	470	17
San Joaquin	496	65	15	28	20	368	9
San Luis Obispo	166	23	8	22	7	106	6
San Mateo	405	32	28	67	17	261	7
Santa Barbara	267	37	22	38	19	151	8
Santa Clara	766	110	59	117	62	418	17
Santa Cruz/2/	210	41	20	17	19	113	5
Shasta	182	47	11	19	10	95	5
Sierra	0	0	0	0	0	0	0
Siskiyou	37	8	2	4	2	21	2
Solano/2/	198	26	7	12	7	146	6
Sonoma	319	82	18	31	13	175	8
Stanislaus	284	66	22	31	19	146	14
Sutter	72	13	8	7	10	34	1
Tehama	34	11	3	4	0	16	2
Trinity	6	5	0	0	0	1	1
Tulare	210	44	15	31	14	106	6
Tuolumne	29	4	3	3	0	19	2
Ventura	437	68	33	56	28	252	14
Yolo	25	4	1	1	5	14	3
Yuba	15	4	0	3	1	7	1
Out of State/ Not Reported	542	14	20	37	8	463	151

/1/ The number of physicians practicing in a group is not known. Each group practice is counted as one physician.

/2/ Availability of data is limited for Napa, Orange, Sacramento, Santa Cruz, and Solano Counties. Paid claims and/or encounter data are not yet available; this table reflects only the claims processed by Electronic Data Systems (EDS) for providers in these counties.

Source: State of California, Department of Health Services, Medi-Cal Provider Month of Service Files, April-June 1998 and Medi-Cal Program Hospital Expenditures, April-June 1998.

**TABLE 24**  
**MEDI-CAL PROGRAM**  
**NUMBER OF SELECTED PROVIDERS RECEIVING MEDI-CAL PROGRAM PAYMENTS BY COUNTY OF PROVIDER**  
**CALENDAR YEAR 1998**

COUNTY OF PROVIDER	ACUPUNCTURISTS	CHIROPRACTORS	DENTISTS	NURSING FACILITIES	OPTOMETRISTS	ORGANIZED OUTPATIENT CLINICS	PHARMACIES	PODIATRISTS	PSYCHOLOGISTS
STATEWIDE	748	450	9,303	1,507	2,153	697	8,157	1,196	1,834
Alameda	61	8	392	77	100	31	282	61	65
Alpine	0	0	0	0	0	0	0	0	0
Amador	0	2	9	2	6	1	13	1	0
Butte	2	5	78	15	25	7	46	10	9
Calaveras	0	1	3	2	4	1	10	2	1
Colusa	0	0	4	1	1	2	5	0	0
Contra Costa	8	12	198	28	47	11	161	24	39
Del Norte	0	4	5	1	3	2	9	2	0
El Dorado	0	3	26	4	13	2	29	5	6
Fresno	3	27	226	44	61	20	209	24	31
Glenn	0	3	2	2	4	2	6	0	0
Humboldt	2	7	53	10	13	12	44	7	6
Imperial	0	1	15	3	11	7	29	3	0
Inyo	0	1	4	2	5	1	6	1	2
Kern	0	16	98	21	34	22	163	11	12
Kings	0	1	26	4	14	2	17	3	0
Lake	1	6	12	4	5	0	18	2	2
Lassen	0	1	7	2	3	2	9	2	0
Los Angeles	353	83	2,989	442	540	159	2,434	391	586
Madera	0	5	28	5	8	4	28	2	1
Marin	8	1	65	12	10	13	44	10	21
Mariposa	0	1	3	2	2	0	2	0	0
Mendocino	3	2	26	6	9	7	29	5	5
Merced	1	8	50	8	19	10	43	2	2
Modoc	0	0	2	2	1	2	6	0	0
Mono	0	0	2	0	1	1	4	0	0
Monterey	1	4	110	15	21	14	78	13	4
Napa/1/	1	2	28	34	20	6	40	8	27
Nevada	1	2	24	7	8	1	20	4	2
Orange/1/	31	17	851	72	115	28	1,059	120	152
Placer	3	5	70	9	32	2	55	6	7
Plumas	1	1	3	4	4	3	8	0	0
Riverside	6	19	311	50	79	19	358	23	77
Sacramento/1/	19	12	273	42	90	17	226	36	33
San Benito	0	0	15	2	2	1	10	0	0
San Bernardino	10	20	408	55	94	8	346	37	80
San Diego	35	39	639	90	156	54	609	68	338
San Francisco	99	7	324	25	70	33	170	61	62
San Joaquin	7	19	160	30	50	9	126	23	15
San Luis Obispo	4	7	69	10	27	4	85	11	18
San Mateo	7	3	196	22	32	11	134	38	12
Santa Barbara	8	9	101	28	31	15	97	10	31
Santa Clara	48	6	536	64	88	31	303	49	32
Santa Cruz/1/	4	0	73	12	10	7	45	10	25
Shasta	3	6	60	9	25	8	51	5	17
Sierra	0	0	0	1	0	0	1	0	0
Siskiyou	0	2	16	3	4	5	16	1	0
Solano/1/	3	4	81	94	45	29	101	27	6
Sonoma	9	12	123	26	41	17	87	21	47
Stanislaus	1	20	119	25	42	20	112	10	9
Sutter	0	5	40	4	8	4	9	0	2
Tehama	0	1	11	3	6	2	12	1	0
Trinity	0	0	3	2	0	0	8	0	0
Tulare	0	11	90	21	32	13	83	10	8
Tuolumne	0	1	16	2	7	1	15	2	1
Ventura	5	14	174	28	49	6	162	26	31
Yolo	0	3	39	7	17	3	27	5	7
Yuba	0	1	5	2	5	3	12	2	0
Out of State/ Not Reported	0	0	12	10	4	2	46	1	3

/1/ Availability of data is limited for Napa, Orange, Sacramento, Santa Cruz, and Solano Counties. Paid claims and/or encounter data are not yet available; this table reflects only the claims processed by Electronic Data Systems (EDS) for providers in these counties.

Source: State of California, Department of Health Services, Report on Provider Participation in the Medicaid Program, Calendar Year 1998.

**TABLE 25**  
**MEDI-CAL PROGRAM**  
**COUNTY POPULATION, MEDI-CAL ELIGIBLES, AND**  
**MEDI-CAL ELIGIBLES AS A PERCENT OF POPULATION**  
**CALENDAR YEAR 1998**  
**(COHS, HCPs, AND FFS)**

COUNTY	POPULATION/1/	ELIGIBLES/2/	ELIGIBLES AS A PERCENT OF POPULATION	COUNTY	POPULATION/1/	ELIGIBLES/2/	ELIGIBLES AS A PERCENT OF POPULATION
STATEWIDE	33,494,000	4,957,866	14.8				
Alameda	1,428,300	185,192	13.0	Placer	223,100	16,385	7.3
Alpine	1,180	216	18.3	Plumas	20,400	2,729	13.4
Amador	33,100	2,653	8.0	Riverside	1,458,500	199,168	13.7
Butte	199,700	42,025	21.0	Sacramento	1,166,100	235,244	20.2
Calaveras	38,250	5,110	13.4	San Benito	47,800	5,644	11.8
Colusa	18,650	3,573	19.2	San Bernardino	1,645,800	279,899	17.0
Contra Costa	916,900	87,287	9.5	San Diego	2,828,300	308,106	10.9
Del Norte	27,800	6,565	23.6	San Francisco	789,500	106,859	13.5
El Dorado	150,200	11,665	7.8	San Joaquin	551,500	114,678	20.8
Fresno	785,100	197,119	25.1	San Luis Obispo	238,100	21,827	9.2
Glenn	26,850	5,317	19.8	San Mateo	721,400	45,308	6.3
Humboldt	125,800	23,100	18.4	Santa Barbara	405,000	43,602	10.8
Imperial	143,400	39,135	27.3	Santa Clara	1,701,400	155,460	9.1
Inyo	18,300	2,713	14.8	Santa Cruz	250,800	23,932	9.5
Kern	640,100	140,132	21.9	Shasta	164,800	34,170	20.7
Kings	124,200	23,021	18.5	Sierra	3,310	366	11.1
Lake	55,100	13,187	23.9	Siskiyou	44,100	8,616	19.5
Lassen	33,450	4,724	14.1	Solano	385,500	44,465	11.5
Los Angeles	9,649,800	1,722,374	17.8	Sonoma	440,500	36,512	8.3
Madera	114,700	27,481	24.0	Stanislaus	431,100	85,321	19.8
Marin	245,000	12,063	4.9	Sutter	76,700	13,900	18.1
Mariposa	16,050	2,195	13.7	Tehama	55,200	11,230	20.3
Mendocino	86,200	16,755	19.4	Trinity	13,200	2,393	18.1
Merced	204,400	55,565	27.2	Tulare	361,400	98,588	27.3
Modoc	9,825	2,242	22.8	Tuolumne	52,700	6,604	12.5
Mono	10,600	786	7.4	Ventura	738,200	68,409	9.3
Monterey	384,100	52,872	13.8	Yolo	156,000	22,652	14.5
Napa	122,600	9,793	8.0	Yuba	60,300	17,373	28.8
Nevada	90,100	6,854	7.6				
Orange	2,763,900	246,718	8.9				

/1/ State of California, Department of Finance, Population Estimate as of July 1, 1998.

/2/ Average Monthly Eligibles.

COHS = County Organized Health Systems; HCPs = Health Care Plans; FFS = Fee-For-Service.

Note: These figures do not include capitation adjustments.

Figures are rounded independently and may not add to totals.

These figures may disagree with previously published figures.

Source: State of California, Department of Finance, County Population Estimates.

State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Year 1998; MEDSSUM File dated April 1998; and Prepaid Health Plan Status Code 1 Reports. (Tables 14, 15 and 18)

**TABLE 26**  
**MEDI-CAL PROGRAM**  
**PERSONS CERTIFIED ELIGIBLE BY COUNTY AND RACE/ETHNICITY**  
**OCTOBER 1998**  
**(COHS, HCPs, AND FFS)**

COUNTY	TOTAL	RACE/ETHNICITY					
		AMERICAN INDIAN/ALASKAN NATIVE	ASIAN/PACIFIC ISLANDER	BLACK	HISPANIC	WHITE	NOT REPORTED
STATEWIDE	4,978,026	21,384	383,198	706,104	1,875,247	1,454,784	537,309
Alameda	188,470	527	26,070	72,984	28,829	36,976	23,084
Alpine	207	114	0	4	5	67	17
Amador	2,692	33	12	8	99	2,422	118
Butte	41,773	625	3,919	1,271	4,336	28,943	2,679
Calaveras	5,016	44	8	34	188	4,495	247
Colusa	3,095	59	38	22	1,635	1,106	235
Contra Costa	88,856	149	6,863	26,226	15,630	31,149	8,839
Del Norte	6,429	460	396	24	394	4,723	432
El Dorado	11,275	73	129	75	1,515	8,816	667
Fresno	196,627	605	28,198	18,860	89,937	39,170	19,857
Glenn	5,088	136	661	23	1,391	2,470	407
Humboldt	22,777	1,779	799	368	825	17,534	1,472
Imperial	39,661	328	127	815	27,397	6,017	4,977
Inyo	2,582	393	13	12	435	1,519	210
Kern	138,570	392	2,613	15,380	61,011	48,366	10,808
Kings	22,194	115	432	1,963	11,509	6,262	1,913
Lake	13,228	312	152	499	934	10,542	789
Lassen	4,688	228	22	77	357	3,779	225
Los Angeles	1,752,010	2,191	92,616	305,921	830,221	339,589	181,472
Madera	26,597	155	193	1,231	15,250	7,699	2,069
Marin	11,773	37	728	1,140	2,908	5,921	1,039
Mariposa	2,110	61	8	7	48	1,913	73
Mendocino	16,553	1,241	138	229	2,770	11,106	1,069
Merced	52,141	112	4,058	3,524	22,368	13,862	8,217
Modoc	2,204	117	4	8	340	1,632	103
Mono	757	65	2	3	180	460	47
Monterey	50,298	96	1,753	2,165	30,207	10,790	5,287
Napa	9,557	38	145	228	3,120	5,305	721
Nevada	6,720	54	42	34	282	5,904	404
Orange	248,140	208	37,782	6,964	103,164	65,665	34,357
Placer	16,539	191	175	251	1,932	12,792	1,198
Plumas	2,632	60	6	65	108	2,223	170
Riverside	202,957	1,136	4,868	25,345	80,266	74,220	17,122
Sacramento	238,054	1,289	36,564	48,663	32,656	98,107	20,775
San Benito	5,435	5	43	48	3,505	1,360	474
San Bernardino	277,310	1,490	9,199	46,501	102,016	96,829	21,275
San Diego	311,667	1,556	22,076	46,352	101,135	102,373	38,175
San Francisco	107,149	138	19,922	22,911	12,658	23,939	27,581
San Joaquin	113,527	504	20,546	13,739	31,351	34,173	13,214
San Luis Obispo	21,537	89	295	584	5,173	13,784	1,612
San Mateo	44,352	72	4,294	4,832	15,806	11,279	8,069
Santa Barbara	42,948	167	1,051	1,905	22,114	13,477	4,234
Santa Clara	156,291	471	31,783	7,269	55,007	32,262	29,499
Santa Cruz	22,455	54	346	463	9,397	9,798	2,397
Shasta	33,603	842	1,441	552	1,034	27,546	2,188
Sierra	350	4	0	7	15	282	42
Siskiyou	8,363	265	275	173	531	6,544	575
Solano	43,668	146	3,585	14,345	6,451	14,613	4,528
Sonoma	36,268	675	1,384	1,641	7,341	22,009	3,218
Stanislaus	83,045	280	5,606	3,746	26,063	39,664	7,686
Sutter	13,386	91	991	346	3,584	7,088	1,286
Tehama	11,108	152	79	122	1,936	8,206	613
Trinity	2,327	46	12	6	21	2,117	125
Tulare	97,923	293	4,607	2,575	53,624	28,799	8,025
Tuolumne	6,454	67	41	41	175	5,792	338
Ventura	67,842	179	1,530	2,118	35,561	20,751	7,703
Yolo	21,793	237	1,601	889	6,406	10,587	2,073
Yuba	16,955	138	2,957	516	2,096	9,968	1,280

Note: COHS = County Organized Health Systems; HCPs = Health Care Plans; FFS = Fee-For-Service.  
Source: State of California, Department of Health Services, MEDS Monthly Extract File (MEF), Run Date 04/23/99.

**TABLE 27**  
**MEDI-CAL PROGRAM**  
**NUMBER OF PROVIDERS BY PROVIDER TYPE AND STATUS**  
**CALIFORNIA, AS OF DECEMBER 31, 1998**

PROVIDER TYPE	TOTAL	ACTIVE STATUS	INACTIVE STATUS	PENDING STATUS	DECEASED STATUS	REJECTED STATUS	SUSPENDED STATUS	INDIRECT STATUS	CONTRACT STATUS
TOTAL <sup>1/</sup>	377,346	82,619	232,199	267	3,733	2	1,995	56,266	265
Adult Day Care Centers	143	101	42	0	0	0	0	0	0
Assistive Device and Sick Room Supplier	5,223	1,551	3,616	4	5	0	45	2	0
Audiologists	1,333	421	688	0	0	0	4	220	0
Blood Banks	20	8	12	0	0	0	0	0	0
Certified Nurse Midwife	344	139	118	0	0	0	2	85	0
Chiropractors	9,296	1,046	7,746	6	288	0	78	132	0
Certified Pediatric Nurse Practitioner and Certified Family Nurse Practitioner	262	77	115	1	0	0	0	69	0
Christian Science Practitioners	2	0	2	0	0	0	0	0	0
Clinical Laboratories	3,954	859	3,073	2	2	0	17	1	0
Fabricating Optical Laboratory	15	5	3	0	0	0	7	0	0
Dispensing Opticians	2,234	492	1,731	1	5	0	3	2	0
Hearing Aid Dispensers	1,688	382	1,171	0	4	0	27	104	0
Home Health Agencies	2,199	730	1,465	2	0	0	2	0	0
Community Hospital Outpatient Departments	9,779	2,043	7,717	3	0	0	16	0	0
Community Hospital Inpatient	11,660	2,678	8,721	3	0	0	15	0	243
Long Term Care	11,518	2,383	9,065	1	0	0	69	0	0
Nurse Anesthetists	792	187	404	3	2	0	4	192	0
Occupational Therapists	1,372	146	907	0	2	0	0	317	0
Optometrists	7,558	2,561	4,127	2	131	0	20	717	0
Orthotists	226	61	59	0	0	0	0	106	0
Physicians Group	22,709	7,969	14,648	17	15	0	58	2	0
Optometric Group	256	203	50	1	0	0	0	2	0
Pharmacies/Pharmacist	24,208	7,379	16,756	3	3	0	67	0	0
Physical Therapists	1,670	368	607	1	109	0	7	578	0
Physicians	177,474	31,498	89,540	149	3,032	2	1,279	51,974	0
Podiatrists	4,696	1,616	2,752	3	69	0	68	188	0
Portable X-Ray Laboratory	231	38	183	0	2	0	8	0	0
Prosthetists	524	238	122	2	0	0	3	159	0
Ground Medical Transportation	3,450	750	2,681	0	2	0	17	0	0
Psychologists	13,720	3,367	9,425	7	46	0	87	788	0
Certified Acupuncturist	2,596	1,131	1,378	3	6	0	13	65	0
Genetic Disease Testing	2	1	1	0	0	0	0	0	0
Rural Health Clinics	126	0	126	0	0	0	0	0	0
P.L. 95-210 Rural Health Clinics and Federally Qualified Health Centers (FQHCs)	732	528	194	8	0	0	2	0	0
HCBS-Certified Home Health Agency	1	0	1	0	0	0	0	0	0
Speech Therapists	2,537	367	1,617	1	5	0	2	545	0
Air Ambulance Transportation Services	103	65	38	0	0	0	0	0	0
Certified Hospice Service Per AB 4249	298	186	112	0	0	0	11	0	0
Free Clinics	27	8	19	0	0	0	0	0	0
Community Clinics	1,386	404	977	1	0	0	4	0	0
Chronic Dialysis Clinics	706	331	375	0	0	0	0	0	0
Multispecialty Clinics	3	1	2	0	0	0	0	0	0
Surgical Clinics	341	211	130	0	0	0	0	0	0
Exempt from Licensure Clinics	100	40	59	0	0	0	0	1	0
Rehabilitation Clinics	158	111	47	0	0	0	0	0	0
County Clinics Not Associated with Hospital	135	46	89	0	0	0	0	0	0
Birthing Centers - Primary Care Clinics	1	0	1	0	0	0	0	0	0
Clinic - Otherwise Undesignated	390	0	389	0	0	0	0	1	0
Outpatient Heroin Detoxification Center	65	44	21	0	0	0	0	0	0
Alternative Birth Centers - Specialty Clinics	11	9	2	0	0	0	0	0	0
Breast Cancer Early Detection Program	375	233	140	1	0	0	1	0	0
Expanded Access to Primary Care Clinics	359	340	19	0	0	0	0	0	0
Local Education Agency	399	383	16	0	0	0	0	0	0
EPSDT Supplemental Provider	425	348	35	26	0	0	0	16	0
Health Access Program	341	337	4	0	0	0	0	0	0
County Hospital Inpatient	672	79	571	0	0	0	0	0	22
County Hospital Outpatient	207	76	131	0	0	0	0	0	0
Pediatric Subacute Care-LTC	11	11	0	0	0	0	0	0	0
Mental Health Inpatient	280	182	98	0	0	0	0	0	0
AIDS Waiver Provider	60	36	24	0	0	0	0	0	0
California Children's Service/Genetically Handicapped Person Program - Non-Institutional	38,547	7,400	31,056	16	5	0	70	0	0
California Children's Service/Genetically Handicapped Person Program - Institutional	749	415	334	0	0	0	0	0	0
Out of State	6,647	0	6,647	0	0	0	0	0	0

<sup>1/</sup> Includes California, Out of State, and Out of Country.

Source: State of California, Department of Health Services, Payment Systems Division, Provider Master File Unit, Medi-Cal Management Information System (MMIS), Run Date 12/31/98.



SECTION 8  
HISTORICAL MEDICAL PROGRAM TRENDS

## MEDI-CAL PROGRAM OVERVIEW

In July 1965, two major amendments to the Social Security Act greatly expanded the scope of medical coverage available to various segments of the population. Title XVIII established the Medicare program, and Title XIX established the state-option medical assistance program known as Medicaid that provided Federal matching funds to states implementing a single comprehensive medical care program.

State legislation implementing the Title XIX program was signed in November 1965. Medi-Cal, California's medical assistance Medicaid program, became effective in March 1966. Under the provisions of Title 22 of the California Code of Regulations, the State Department of Health Services administers the Medi-Cal program and has statutory responsibility to formulate policy that conforms with Federal and State requirements.

The objective of the Medi-Cal program is to provide essential medical care and services to preserve health, alleviate sickness, and mitigate handicapping conditions for individuals or families on public assistance, or whose income is not sufficient to meet their individual needs. The covered services are generally recognized, as standard medical services required in the treatment or prevention of diseases, disability, infirmity or impairment. These services are comprehensive and provide care in the major disciplines of health care.

From the inception of the Medi-Cal Program, the State has contracted with a vendor to receive and process Medi-Cal claims.

In 1992, the State released a Request for Proposal (RFP) to all interested vendors. The RFP was developed to fulfill the State's requirements for fiscal responsibilities and good administrative practices, and to meet the Federal requirements under the Medicaid Management Information System (MMIS).

Electronic Data Systems responded to this RFP and was selected in September 1992 to process Medi-Cal claims for the next 5 years.

## MEDI-CAL ELIGIBLES - TABLE 28

Data included in this table are Fee-For-Service (FFS), County Organized Health Systems (COHS), and Health Care Plans (HCPs).

The Medi-Cal eligible population averaged 4.96 million persons per month in 1998. This reflects a decrease of 188,984 or 3.7 percent from 1997 and an increase of 1.6 million or 49.2 percent from 1989.

Public Assistance FFS eligibles averaged 1.82 million persons per month in 1998, a decrease of 20.0 percent from 1997.

Medically Needy eligibles averaged 400,977 persons per month in 1998, a decrease of 9.4 percent from 1997.

Medically Indigent (MI) eligibles averaged 131,686 persons per month in 1998, a 27.5 percent decrease from 1997.

The Immigration Reform and Control Act (IRCA) Alien program (Aid Codes 51, 52, 56, and 57) expired December 31, 1994. IRCA is shown for 1997 and 1998, because claims continue to be paid due to the lag from time of service to time of payment.

The Omnibus Budget Reconciliation Act (OBRA) Alien program averaged 215,853 persons per month in 1998, a decrease of 9.5 percent from the previous year.

The Refugee/Entrant program averaged 1,459 persons per month in 1998, a decrease of 19.4 percent from 1997.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and 200 Percent Poverty programs averaged 241,788 persons per month in 1998, compared to 210,481 in 1997.

The 60-Day Postpartum program averaged 1,572 persons per month in 1998, a difference of 158 eligibles from the previous year.

The Dialysis and Total Parenteral Nutrition programs are small, with an average of 42 eligibles per month in 1998, compared to 44 in 1997.

The Qualified Medicare Beneficiary program averaged 4,737 eligibles per month in 1998, an increase of 23.4 percent from 1997.

Data for the Presumptive Eligibility for Pregnant Women program are not available.

The Medi-Cal Tuberculosis program averaged 564 eligibles per month in 1998, a decrease of 2.5 percent from 1997.

The Minor Consent program averaged 12,460 eligibles in 1998.

**TABLE 28**  
**MEDI-CAL PROGRAM**  
**ESTIMATED AVERAGE MONTHLY ELIGIBLES BY PROGRAM**  
**CALENDAR YEARS 1990 -1999**  
**(COHS, HCPs, AND FFS)**

PROGRAM	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998
TOTAL	3,323,154	3,755,839	4,377,669	4,853,284	5,204,359	5,390,717	5,421,262	5,378,706	5,146,850	4,957,866
County Organized Health Systems (COHS)	53,337	58,361	65,149	71,988	80,671	118,078	183,884	398,493	378,236	358,831
Health Care Plans (HCPs)	217,161	238,077	290,593	328,796	376,551	507,957	604,213	764,694	1,348,361	1,768,096
Fee-For-Service (FFS)	3,323,154/a/	3,755,839 /a/	4,377,669 /a/	4,853,284 /a/	5,204,359 /a/	5,390,717 /a/	4,633,165 /b/	4,215,519 /b/	3,420,253 /b/	2,830,939 /b/
Public Assistance	2,774,774	3,028,904	3,442,846	3,701,405	3,911,384	4,079,538	3,374,020	3,003,037	2,334,308	1,819,782
Medically Needy	329,534	354,674	403,378	480,429	560,808	576,531	543,081	499,471	442,442	400,977
Medically Indigent	128,164	154,133	178,157	209,366	236,765	253,875	249,073	228,084	181,671	131,686
IRCA Aliens	13,336	29,522	49,547	62,441	40,944	13,459	181	60	7	2
OBRA Aliens	55,791	129,997	214,075	281,325	309,076	300,469	282,743	279,284	238,591	215,853
Refugee/Entrant	10,067	10,287	10,794	8,333	8,515	7,311	5,647	2,913	1,810	1,459
100 Percent Poverty	NA	NA	69	1,635	4,770	9,085	15,610	24,033	31,705	52,082
133 Percent Poverty	NA	5,970	22,119	38,394	53,734	64,137	75,087	84,560	88,070	94,681
185 Percent Poverty (renamed Income Disregard)	8,650	35,586	49,317	62,290	70,140	74,054	82,058	87,705	89,765	94,157
200 Percent Poverty	38	2,122	3,128	3,512	3,441	1,997	1,260	1,097	941	868
60-Day Postpartum	2,732	3,428	2,224	1,986	2,036	1,790	1,760	1,870	1,730	1,572
Dialysis	56	57	58	51	35	29	25	25	35	34
Total Parenteral Nutrition	7	9	9	9	10	9	9	10	9	8
Qualified Medicare Beneficiary	NA	1,151	1,948	2,107	2,602	1,587	2,233	2,769	3,838	4,737
Presumptive Eligibility for Pregnant Women	NA	NA	NA	NA	99	6,842	INA	INA	INA	INA
Medi-Cal Tuberculosis Program	NA	NA	NA	NA	NA	5	377	602	550	564
Minor Consent	NA	NA	NA	NA	NA	NA	NA	NA	4,774	12,460

INA Information Not Available.

NA Not Applicable.

/a/ Includes COHS, HCPs, and FFS.

/b/ Includes FFS Only.

Note: IRCA = Immigration Reform and Control Act; OBRA Omnibus Budget Reconciliation Act.

Averages are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Year Reports; Prepaid Health Plan Status Code 1 Reports; and MEDSSUM File dated April 2000.

## MEDI-CAL PAYMENTS - TABLE 29

Data included in this table are Fee-For-Service (FFS), County Organized Health Systems (COHS), and Health Care Plans (HCPs).

During 1998, Medi-Cal program payments ran \$12.49 billion. This reflects an increase of \$451.5 million or 3.7 percent from 1997 and an increase of \$6.6 million or 111.5 percent from 1989.

Public Assistance, the largest group in terms of total FFS expenditures, received \$5.6 billion in services during 1998, a 0.8 percent decrease from 1997.

The Medically Needy group received \$3.1 billion in services during 1998, an increase of 0.9 percent from 1997.

Medically Indigents received a total of \$293.9 million in services during 1998, compared to \$324.0 million or a 9.3 percent increase in 1997.

The Aliens and Refugee/Entrants received a total of \$502.4 million in services during 1998, a decrease of 9.9 percent from 1997. The Immigration Reform and Control Act (IRCA) Alien program (Aid Codes 51, 52, 56, and 57) expired December 31, 1994. IRCA is shown for 1997 and 1998, because claims continue to be paid due to the lag from time of service to time of payment.

The 100 Percent Poverty, 133 Percent Poverty, 185 Percent Poverty (renamed Income Disregard), and 200 Percent Poverty programs ran \$359.0 million during 1998, a 12.5 percent increase from the previous year.

The 60-Day Postpartum program ran \$2.8 million during 1998, a 51.0 percent increase from 1997.

The Dialysis and Total Parenteral Nutrition programs ran \$192 thousand during 1998, a 33.4 percent decrease from 1997.

The Qualified Medicare Beneficiary program ran \$41.9 million in 1998, compared to \$3.1 million in 1997, or a 1.3 percent increase.

The Presumptive Eligibility for Pregnant Women program ran \$73.3 million during 1998 and \$59.2 million in 1997, or a 23.9 percent increase.

The Medi-Cal Tuberculosis program ran \$387 thousand during 1998, compared to \$243 thousand in 1997, or a 59.3 percent increase.

The Minor Consent program ran \$42,232 million in 1998, compared to \$7,139 in prior year, or a 491.6 percent increase.

The increase in expenditures in 1998 from previous years is attributable to a higher rate of use by beneficiaries, reimbursement rate increases to providers, inflation, and changes in services.

**TABLE 29**  
**MEDI-CAL PROGRAM**  
**ESTIMATED TOTAL ANNUAL PAYMENTS BY PROGRAM**  
**CALENDAR YEARS 1989-1998**  
(In thousands)  
(COHS, HCPs, AND FFS)

PROGRAM	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998
TOTAL	\$5,907,340	\$6,821,766	\$8,041,267	\$9,465,554	\$10,368,797	\$10,825,560	\$11,133,016	\$11,897,872	\$12,043,071	\$12,494,530
County Organized Health Systems (COHS)	\$75,545	\$91,531	\$104,819	\$118,393	\$135,052	\$218,148	\$303,616	\$667,482	\$672,072	\$775,616
Health Care Plans (HCPs)	\$206,856	\$249,669	\$316,880	\$367,576	\$444,010	\$599,794	\$705,719	\$865,952	\$1,371,379	\$1,689,188
Fee-For-Service (FFS)	5,907,340/a/	6,821,766/a/	8,041,267/a/	9,465,554/a/	10,368,797/a/	10,825,560/a/	10,123,681/b/	10,364,438/b/	9,999,620/b/	10,029,725 /b/
Public Assistance	3,582,966	3,991,904	4,603,347	5,370,713	5,946,198	6,327,335	5,626,657	5,836,519	5,606,520	5,560,078
Medically Needy	1,799,231	1,977,077	2,317,443	2,708,682	2,990,903	3,144,336	3,075,507	3,113,555	3,079,234	3,105,472
Medically Indigent	267,442	245,784	258,141	298,723	330,357	364,537	371,857	362,780	324,040	293,894
IRCA Aliens	37,352	83,024	120,620	152,720	105,299	30,138	6,130	816	294	147
OBRA Aliens	187,517	391,422	546,228	699,691	720,469	647,513	629,846	629,894	548,281	495,788
Refugee/Entrant	13,148	14,159	16,477	19,092	24,829	24,654	23,214	12,302	9,002	6,511
100 Percent Poverty	NA	NA	/c/	358	1,678	3,352	5,499	8,960	12,904	24,317
133 Percent Poverty	NA	789	9,257	17,914	26,325	33,229	39,105	45,586	47,245	51,817
185 Percent Poverty (renamed Income Disregard)	13,975	104,268	149,887	177,982	201,842	208,727	232,316	268,289	257,724	282,042
200 Percent Poverty	0	5,521	11,466	11,275	11,156	6,309	3,374	2,222	1,188	776
60-Day Postpartum	1,771	1,765	1,668	1,735	2,093	1,704	1,900	1,585	1,836	2,773
Dialysis	465	260	363	342	269	364	1,019	157	296	168
Total Parenteral Nutrition	307	316	201	280	281	181	329	160	128	24
Qualified Medicare Beneficiary	NA	104	300	504	899	1,407	1,398	1,630	3,056	41,944
Presumptive Eligibility for Pregnant Women	NA	NA	NA	NA	3	10,985	25,782	45,797	59,186	73,344
Medi-Cal Tuberculosis Program	NA	NA	NA	NA	NA	/c/	74	179	243	387
Minor Consent	NA	NA	NA	NA	NA	NA	NA	NA	7,139	42,232
Not Reported	3,167	5,372	5,868	5,542	6,196	20,788	79,673	34,008	41,302	48,003

INA Information Not Available.  
NA Not Applicable.  
/a/ Includes COHS, HCPs, and FFS.  
/b/ Includes FFS Only.

Note: IRCA = Immigration Reform and Control Act; OBRA Omnibus Budget Reconciliation Act.  
Payments are rounded independently and may not add to totals.

Source: State of California, Department of Health Services, Medi-Cal Certified CID Eligibles, Calendar Year Reports; Prepaid Health Plan Status Code 1 Reports; Rate Sheet for Managed Care Plans; and MEDSSUM File dated April 1999.

## APPENDICES

**Appendix A** Definitions of Terms

**Appendix B** Aid Codes Master Chart

**Appendix C** Selected Medical Care Statistics Reports  
Selected Medical Care Statistics Reports Available on Diskette  
Publication Order Form

APPENDIX A  
DEFINITIONS OF TERMS



## DEFINITIONS OF TERMS

The following defines commonly used terms used in discussions of Medi-Cal. The definitions are essentially correct, but some are much more complex than indicated below.

Beneficiary:	Inconsistently used to indicate a person who receives service (user or recipient) or a person eligible for service.
Capitate:	Refers to the payment of a set amount of money per month per person Capitation to an agency. The agency then provides medical care for all persons paid for. Essentially an insurance premium arrangement.
CID:	The Centralized Identification system was a computer system, which mailed out Medi-Cal ID cards each month to eligibles. Some reports on eligibility still use this term.
COHS:	County Organized Health Systems. Under this approach, the county acts as the primary contractor serving most Medi-Cal beneficiaries in the county. The COHS receive a capitated rate for each beneficiary in the county, and assume full financial risk.
Costs:	Medi-Cal Program payments or expenditures, usually to providers for services rendered. But may include all program expenditures.
Crossover: (X-over)	Refers to a claim that has been processed and paid in part by Medi-care and then processed by Medi-Cal for those with dual eligibility. Also referred to as Medi-Medi Claim.
Encounter:	Service/Supply rendered to a Medi-Cal beneficiary. Also referred to as a Shadow Claim if the Service/Supply is rendered under Managed Care.
Eligibles:	Persons who have been processed through the system and determined to meet the criteria for receiving medical assistance under the Medi-Cal Program.
Enrollees:	Eligibles who have joined Managed Care Plans.
Expenditures:	See Costs.
Family P.A.C.T.	Family P.A.C.T. (Also known as SOFP - State Only Family Planning).Comprehensive family planning services for low income residents of California with no other source of health care coverage.

## DEFINITIONS OF TERMS, Continued

Federal Financial Participation: (FFP)	The amount of money the Federal Government pays in the operation of the Medicaid Program. FFP varies from 50 percent to 90 percent depending on type of service and meeting of stipulated criteria.
Fee-For-Service: (FFS)	Used to distinguish regular Medi-Cal Program from the Managed Care Program: "Fee-For-Service eligibles" are persons not enrolled in Managed Care Plans.
GMC:	Geographic Managed Care. Under this approach, the Medi-Cal Program negotiates contracts directly with providers to accept beneficiaries within a specified area, again paying a monthly rate based on the estimated cost of providing services to similar beneficiaries under the fee-for-service system. The Department implemented this approach in Sacramento County in April 1994.
HCPs:	Health Care Plans. Medi-Cal contracts with private entities to provide care to specific beneficiary categories that include the managed care models COHS, GMC, PHP, PCCM, and Two-Plan Model.
HMO:	Health Maintenance Organization. (See HCPs.)
Linked:	Individuals who meet the federal definition of aged (65 years of age or older), blind, or disabled, or families with children where the children are deprived of parental support or care due to the absence, death, incapacity, or unemployment of a parent.
Medi-Cal:	California's name for Medicaid includes the federal and state program of medical assistance for needy and low-income persons. (Federal designation of the Medical Assistance Program authorized under Title XIX of the Social Security Act.)
Medi-Cal Card:	An identification card given to Medi-Cal eligibles.
Medically Indigent:	Individuals who are eligible for Medi-Cal but are not in any other category, such as not in the Public Assistance or Medically Needy category, because they are not linked. For example, a child who lives in a two parent family with moderate income, but limited property who is not deprived is Medically Indigent.
Medically Needy:	Individuals and families eligible for Medi-Cal because they are linked, but who are not in the Public Assistance category. This category also includes linked individuals in specialized programs such as those who are in long term care, Section 1931(b), but who are not receiving CalWORKs concurrently, or who are receiving Transitional Medi-Cal. For example, a person who is over age 65 but has too much income to qualify for SSI/SSP is Medically Needy.

## DEFINITIONS OF TERMS, Continued

- Medicare:** The Federal Social Security Program (Title XVIII of the Social Security Act) provides medical care to aged and certain disabled persons.
- This is essentially a medical insurance program, as opposed to Medicaid, which is a public assistance program for the needy.
- MEDS:** Medi-Cal Eligibility Data System. A major Electronic Data Processing (EDP) system providing online access to over 17 million records of current or former Welfare, Medi-Cal, or County Medical Services Program (CMSP) clients to support administration of those programs and delivery of benefits.
- MEDSSUM File:** An eligibility summary file that summarizes the number of eligibles by aid code and county on a monthly basis for each month of eligibility.
- Minor Consent:** Covers minors under 21. Limited to services related to sexually transmitted diseases, sexual assault, drug and alcohol abuse, pregnancy, family planning and outpatient mental health treatment.
- Paid Claims:** A claim for medical services paid in behalf of a Medi-Cal eligible. Claims data are captured on computer tape and comprise the major data base of the Program. Usually "paid claims" refers to this data base rather than the actual document.
- PCCM:** Primary Care Case Management. PCCM plans are paid a monthly capitation rate to manage selected outpatient services to Medi-Cal beneficiaries enrolled in the plan.
- Percent Programs:  
Pregnant Women  
Infants and  
Children** These programs provide zero share of cost Medi-Cal to (1) pregnant women and infants up to age 1 with family income at or under 200 percent of the federal poverty level (FPL) generally referred to as the Income Disregard program; (2) children ages 1 up to age six with family income at or under 133 percent of the FPL (the 133 Percent program); and (3) children ages 6 up to nineteen with family income at or under 100 percent of the FPL (the 100 Percent program).
- PHPs:** Prepaid Health Plans. Now referred to as (HCPs) Health Care Plans.
- Provider:** Any individual, group, business, or facility authorized to bill the Medi-Cal Program for services rendered to Medi-Cal eligibles. Includes the full scope of practitioners and facilities, such as physicians, hospitals, chiropractors, pharmacies, nursing facilities, intermediate care facilities, home health agencies, etc.

## DEFINITIONS OF TERMS, Continued

- Public Assistance:** Refers to those individuals eligible for cash assistance under various programs such as the Supplemental Security Income/State Supplementary Program (SSI/SSP), the California Work Opportunities and Responsibility to Kids program (CalWORKs), the In-Home Supportive Services program or the Aid to Families with Dependent Children Foster Care program. This category also includes some individuals whose Medi-Cal eligibility is derived from these programs such as former SSI/SSP recipients who for varying reasons continue to be eligible for Medi-Cal with no share of cost, such as those who are eligible under the Pickle program.
- Recipient:** A user of a specified type of service.
- SDX:** State Data eXchange: The computer tapes received from Social Security Administration which contain names and addresses of persons eligible for Medicare and Medi-Cal concurrently.
- Services:** What providers provide Medi-Cal patients and are paid for by the Medi-Cal Program. Services have to be defined within the context in which they're reported. For example, the units of service for inpatient hospital services are patient days, the unit in prescription drugs is prescriptions, the unit in outpatient visits is visits, etc.
- SSI/SSP:** Supplemental Security Income/State Supplementary Payment. If you get a SSI/SSP grant, Medi-Cal eligibility is automatically set up by your Social Security district office.
- Two-Plan Model:** Two-Plan Contractors now provide or are preparing to provide medical services to nearly all Medi-Cal recipients in 12 counties (Alameda, Contra Costa, Fresno, Kern, Los Angeles, Riverside, San Bernardino, San Francisco, San Joaquin, Santa Clara, Stanislaus and Tulare).
- The Department will contract with only two managed care plans. One plan will be a locally developed, comprehensive managed care system referred to as the Local Initiative. The other plan will be a non-governmentally operated Health Management Organization referred to as the Commercial Plan.
- Vendor:** See Provider.

APPENDIX B  
AID CODES MASTER CHART

The following aid codes identify the types of services for which different Medi-Cal/CMSRP recipients are eligible.

<b>Code</b>	<b>Benefits</b>	<b>SOC</b>	<b>Program/Description</b>
0A	Full	No	Refugee Cash Assistance (FF). Includes unaccompanied children. Covers all eligible refugees during their first eight months in the United States. Unaccompanied children are not subject to the eighth-month limitation provision. This population is the same as aid code 01, except that they are exempt from grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.
01	Full	No	Refugee Cash Assistance (FFP). Includes unaccompanied children. Covers all eligible refugees during their first eight months in the United States. Unaccompanied children are not subject to the eighth-month limitation provision.
02	Full	Y/N	Refugee Medical Assistance/Entrant Medical Assistance (FFP). Covers refugees and entrants who need Medi-Cal and who do not qualify for or want cash assistance.
03	Full	No	Adoption Assistance Program (AAP) (FFP). A cash grant program to facilitate the adoption of hard-to-place children who would require permanent foster care placement without such assistance.
04	Full	No	Adoption Assistance Program/Aid for Adoption of Children (AAP/AAC) (non-FFP). Covers cash grant children receiving Medi-Cal by virtue of eligibility to AAP/AAC benefits.
07	Restricted to emergency services	No	Asset Waiver Program. Infant – Undocumented/Nonimmigrant Alien (but otherwise eligible). Provides emergency services only for infants up to age one year and continues beyond one year when inpatient status, which began before first birthday, continues and family income is between 185 percent and 200 percent of the federal poverty level (State-only program).
08	Full	No	Entrant Cash Assistance (ECA) (FFP). Provides ECA benefits to Cuban/Haitian entrants, including unaccompanied children who are eligible, during their first eight months in the United States. (For entrants, the month begins with their date of parole). Unaccompanied children are not subject to the eighth-month limitation provision.
1G	Full	No	Aged – Medically Needy (ABD-MN). Formerly PRUCOL SSI/SSP aliens (FFP for emergency services).
10	Full	No	SSI/SSP Aid to the Aged (FFP). A cash assistance program administered by the SSA which pays a cash grant to needy persons 65 years of age or older.
13	Full	Y/N	Aid to the Aged – LTC (FFP). Covers persons 65 years of age or older who are medically needy and in LTC status.
14	Full	No	Aid to the Aged – Medically Needy (FFP). Covers persons 65 years of age or older who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.

<b>Code</b>	<b>Benefits</b>	<b>SOC</b>	<b>Program/Description</b>
16	Full	No	Aid to the Aged – Pickle Eligibles (FFP). Covers persons 65 years of age or older who were eligible for and receiving SSI/SSP and Title II benefits concurrently in any month since April 1977 and were subsequently discontinued from SSI/SSP but would be eligible to receive SSI/SSP if their Title II cost-of-living increases were disregarded. These persons are eligible for Medi-Cal benefits as public assistance recipients in accordance with the provisions in the <u>Lynch v. Rank</u> lawsuit.
17	Full	Yes	Aid to the Aged – Medically Needy, SOC (FFP). Covers persons 65 years of age or older who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only. SOC required.
18	Full	No	Aid to the Aged – IHSS (FFP). Covers aged IHSS cash recipients, 65 years of age or older, who are not eligible for SSI/SSP cash benefits.
2G	Full	No	Blind – Medically Needy (ABD-MN). Formerly PRUCOL SSI/SSP aliens (FFP for emergency services).
20	Full	No	SSI/SSP Aid to the Blind (FFP). A cash assistance program, administered by the SSA, which pays a cash grant to needy blind persons of any age.
23	Full	Y/N	Aid to the Blind – LTC Status (FFP). Covers persons who meet the federal criteria for blindness, are medically needy, and are in LTC status.
24	Full	No	Aid to the Blind – Medically Needy (FFP). Covers persons who meet the federal criteria for blindness who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.
26	Full	No	Aid to the Blind – Pickle Eligibles (FFP). Covers persons who meet the federal criteria for blindness and are covered by the provisions of the <u>Lynch v. Rank</u> lawsuit. (See aid code 16 for definition of Pickle eligibles).
27	Full	Yes	Aid to the Blind – Medically Needy, SOC (FFP). Covers persons who meet the federal criteria for blindness who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only. SOC is required of the beneficiaries.
28	Full	No	Aid to Blind – IHSS (FFP). Covers persons who meet the federal definition of blindness and are eligible for IHSS. (See aid code 18 for definition of eligibility for IHSS).
3A	Full	No	California Alternative Assistance Program – Aid to Families with Dependent Children, Family Group (CAAP-AFDC [FG]) (FFP). Individuals who have declined a federal cash grant and instead will receive child care assistance and Medi-Cal.
3C	Full	No	California Alternative Assistance Program – Aid to Families with Dependent Children, Unemployed Parent Group (CAAP-AFDC [U]) (FFP). Individuals who have declined a federal cash grant and instead will receive child care assistance and Medi-Cal.
<b><u>3E</u></b>	<b><u>Full</u></b>	<b><u>No</u></b>	<b><u>CalWORKS LEGAL IMMIGRANT – FAMILY GROUP (FFP). Provides aid to families in which a child is deprived because of the absence, incapacity or death of either parent.</u></b>

Code	Benefits	SOC	Program/Description
3G	Full	No	AFDC-FG (State only) (non-FFP cash grant FFP for Medi-Cal eligibles). Provides aid to families in which a child is deprived because of the absence, incapacity or death of either parent, who does <u>not</u> meet all federal requirements, but State rules require the individual(s) be aided. This population is the same as aid code 32, except that they are exempt from the AFDC grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.
3H	Full	No	AFDC-FU (State only) (non-FFP cash grant FFP for Medi-Cal eligibles). Provides aid to pregnant women (before their last trimester) who meet the federal definition of an unemployed parent but are not eligible because there are no other children in the home. This population is the same as aid code 33, except that they are exempt from the AFDC grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.
3L	Full	No	CalWORKS LEGAL IMMIGRANT – FAMILY GROUP (FFP). Provides aid to families in which a child is deprived because of the absence, incapacity or death of either parent.
3M	Full	No	CalWORKS LEGAL IMMIGRANT – UNEMPLOYED (FFP). Provides aid to families in which a child is deprived because of the unemployment of a parent living in the home.
3N	Full	No	AFDC – Mandatory Coverage Group Section 1931(b) (FFP). Section 1931 requires Medi-Cal be provided to low-income families who meet the requirements of the Aid to Families with Dependent Children (AFDC) State Plan in effect July 16, 1996.
3P	Full	No	AFDC Unemployed Parent (FFP cash) – Aid to families in which a child is deprived because of the unemployment of a parent living in the home and the unemployed parent meets all federal AFDC eligibility requirements. This population is the same as aid code 35, except that they are exempt from the AFDC grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.
3R	Full	No	Aid to Families with Dependent Children (AFDC) – Family Group (FFP) in which the child(ren) is deprived because of the absence, incapacity or death of either parent. This population is the same as aid code 30, except that they are exempt from the AFDC grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.
<b>3T</b>	<b><u>Restricted to pregnancy and emergency services</u></b>	<b>No</b>	<b><u>Initial Transitional Medi-Cal (TMC) (FFP). Provides six months of emergency and pregnancy-related initial TMC benefits (no SOC) for aliens who do not have satisfactory immigration status (SIS) and have been discontinued from Section 1931(b) due to increased earnings from employment.</u></b>
3U	Full	No	CalWORKS LEGAL IMMIGRANT – UNEMPLOYED (FFP). Provides aid to families in which a child is deprived because of the unemployment of a parent living in the home.
<b>3V</b>	<b><u>Restricted to pregnancy and emergency services</u></b>	<b>No</b>	<b><u>Section 1931(b) (FFP). Provides emergency and pregnancy-related benefits (no SOC) for aliens without SIS who meet the income, resources and deprivation requirements of the AFDC State Plan in effect July 16, 1996.</u></b>
30	Full	No	AFDC-FG (FFP). Provides aid to families with dependent children in a family group in which the child(ren) is deprived because of the absence, incapacity or death of either parent.



Code	Benefits	SOC	Program/Description
32	Full	No	AFDC-FG (State only) (non-FFP cash grant FFP for Medi-Cal eligibles). Provides aid to families in which a child is deprived because of the absence, incapacity, or death of either parent, who does <u>not</u> meet all federal requirements, but State rules require the individual(s) be aided.
33	Full	No	AFDC – Unemployed Parent (State-only program) (non-FFP cash grant FFP for Medi-Cal eligibles). Provides aid to pregnant women (before their last trimester) who meet the federal definition of an unemployed parent but are not eligible because there are no other children in the home.
34	Full	No	AFDC-MN (FFP). Covers families with deprivation of parental care or support who do not wish or are not eligible for a cash grant but are eligible for Medi-Cal only.
35	Full	No	AFDC-U (FFP cash). Provides aid to families in which a child is deprived because of unemployment of a parent living in the home, and the unemployed parent meets all federal AFDC eligibility requirements.
36	Full	No	Aid to Disabled Widow/ers (FFP). Covers persons who began receiving Title II SSA before age 60 who were eligible for and receiving SSI/SSP and Title II benefits concurrently and were subsequently discontinued from SSI/SSP but would be eligible to receive SSI/SSP if their Title II disabled widow/ers reduction factor and subsequent COLAs were disregarded.
37	Full	Yes	AFDC-MN (FFP). Covers families with deprivation of parental care or support who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only. SOC required of the beneficiaries.
38	Full	No	Continuing Medi-Cal Eligibility (FFP). <u>Edwards v. Kizer</u> court order provides for uninterrupted, no SOC Medi-Cal benefits for families discontinued from AFDC until the family's eligibility or ineligibility for Medi-Cal only has been determined and an appropriate <i>Notice of Action</i> sent.
39	Full	No	Initial Transitional Medi-Cal (TMC) – Six Months Continuing Eligibility (FFP). Provides coverage to certain clients subsequent to AFDC cash grant discontinuance due to increased earnings, increased hours of employment or loss of the \$30 and 1/3 disregard.
4C	Full	No	AFDC-FC Voluntarily Placed (Fed) (FFP). Provides financial assistance for those children who are in need of substitute parenting and who have been voluntarily placed in foster care.
4K	Full	No	Emergency Assistance (EA) Program (FFP). Covers juvenile probation cases placed in foster care.
40	Full	No	AFDC-FC/Non-Fed (State FC). Provides financial assistance for those children who are in need of substitute parenting and who have been placed in foster care.

Code	Benefits	SOC	Program/Description
42	Full	No	AFDC-FC/Fed (FFP). Provides financial assistance for those children who are in need of substitute parenting and who have been placed in foster care.
44	Restricted to pregnancy-related services	No	Income Disregard Program. Pregnant (FFP) United States Citizen/Permanent Resident Alien/PRUCOL Alien. Provides family planning, pregnancy-related and postpartum services for any age female if family income is at or below 200 percent of the federal poverty level.
45	Full	No	Children Supported by Public Funds (FFP). Children whose needs are met in whole or in part by public funds other than AFDC-FC.
47	Full	No	Income Disregard Program (FFP). Infant – United States Citizen, Permanent Resident Alien/PRUCOL Alien. Provides full Medi-Cal benefits to infants up to one year old and continues beyond one year when inpatient status, which began before first birthday, continues and family income is at or below 200 percent of the federal poverty level.
48	Restricted to pregnancy-related services	No	Income Disregard Program. Pregnant – Undocumented/Nonimmigrant Alien (but otherwise eligible). Provides family planning, pregnancy-related and postpartum services for any age female if family income is at or below 200 percent of the federal poverty level. Routine prenatal care is non-FFP. Labor, delivery and emergency prenatal care are FFP.
49	Restricted to pregnancy-related services	No	Income Disregard Program. Pregnancy – Amnesty Alien. Provides family planning, pregnancy-related and postpartum services to any age female with income at or below 200 percent of the federal poverty level.
5F	Restricted to pregnancy and emergency services	Y/N	OBRA Aliens. Covers non-immigrant and undocumented aliens who do not have proof of permanent resident alien, PRUCOL or amnesty alien status, but who are otherwise eligible for Medi-Cal.
5K	Full	No	Emergency Assistance (EA) Program (FFP). Covers child welfare cases placed in EA foster care.
<b>5T</b>	<b><u>Restricted to pregnancy and emergency services</u></b>	<b>No</b>	<b><u>Continuing TMC (FFP). Provides an additional six months of continuing emergency and pregnancy-related TMC benefits (no SOC) to qualifying aid code 3T recipients.</u></b>
<b>5W</b>	<b><u>Restricted to pregnancy and emergency services</u></b>	<b>No</b>	<b><u>Four Month Continuing (FFP). Provides four months of emergency and pregnancy-related benefits (no SOC) for aliens without SIS who are no longer eligible for Section 1931(b) due to the collection or increased collection of child/spousal support.</u></b>
5X	Full	No	Second Year Transitional Medi-Cal (TMC). Provides a second year of full-scope (no SOC) TMC benefits for citizens and qualified aliens age 19 and older who have received six months of additional full-scope TMC benefits under aid code 59 and who continue to meet the requirements of additional TMC. (State-only program.)

Code	Benefits	SOC	Program/Description
<b>5Y</b>	<b><u>Restricted to pregnancy and emergency services</u></b>	<b>No</b>	<b><u>Second Year TMC (state only). Provides a second year of continuing emergency and pregnancy related TMC benefits (no SOC) to qualifying aid code 5T recipients 19 years of age or older.</u></b>
50	Restricted to CMSP emergency services only	Y/N	CMSP. MI – Restricted. Covers persons who have undetermined immigration status.
53	Restricted to LTC services only	Y/N	Medically Indigent – LTC (Non-FFP). Covers persons age 21 or older and under 65 years of age who are residing in a Skilled Nursing or Intermediate Care Facility (SNF or ICF) and meet all other eligibility requirements of medically indigent, with or without SOC.
54	Full	No	Four-Month Continuing Eligibility (FFP). Covers persons discontinued from AFDC due to the increased collection of child/spousal support payments but eligible for Medi-Cal only.
55	Restricted to pregnancy and emergency services	No	Aid to Undocumented Aliens in LTC Not PRUCOL. Covers undocumented aliens in LTC not Permanently Residing Under Color Of Law (PRUCOL). LTC services: State-only funds; emergency and pregnancy-related services: State and federal funds. Recipients will remain in this aid code even if they leave LTC.
58	Restricted to pregnancy and emergency services	Y/N	OBRA Aliens. Covers nonimmigrant and undocumented aliens who do not have proof of permanent resident alien, PRUCOL or amnesty alien status, but who are otherwise eligible for Medi-Cal.
59	Full	No	Additional TMC – Additional Six Months Continuing Eligibility (FFP). Covers persons discontinued from AFDC due to the expiration of the \$30 plus 1/3 disregard, increased earnings or hours of employment, but eligible for Medi-Cal only, may receive this extension of TMC.
6A	Full	No	Disabled Adult Child(ren) (DAC)/Blindness (FFP).
6C	Full	No	Disabled Adult Child(ren) (DAC)/Disabled (FFP).

Code	Benefits	SOC	Program/Description
6G	Full	No	Disabled – Medically Needy (ABD-MN). Formerly PRUCOL SSI/SSP aliens (FFP for emergency services).
6N	Full	No	Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA)/No Longer Disabled Recipients (FFP). Former SSI disabled recipients (adults and children not in aid code 6R) who are appealing their cessation of SSI disability.
6P	Full	No	PRWORA/No Longer Disabled Children (FFP). Covers children under age 18 who lost SSI cash benefits on or after July 1, 1997, due to PRWORA of 1996, which provides a stricter definition of disability for children.
6R	Full	No	No longer Disabled Children (FFP). Covers former SSI disabled children under age 18 who lost SSI cash benefits due to cessation of disability and who are appealing their cessation of SSI disability.
6V	Full	No	<u>Aid to the Disabled – DDS Waiver (FFP).</u> <u>Covers persons who qualify for the</u> <u>Department of Developmental Services (DDS)</u> <u>Regional Waiver.</u>
6W	Full	Yes	<b><u>Aid to the Disabled – DDS Waiver (FFP). Covers persons who qualify for the Department of Developmental Services (DDS) Regional Waiver.</u></b>
6X	Full	No	<u>Aid to the Disabled – Model Waiver (FFP).</u> <u>Covers persons who qualify for the Model</u> <u>Waiver.</u>
6Y	Full	Yes	<u>Aid to the Disabled – Model Waiver (FFP).</u> <u>Covers persons who qualify for the Model</u> <u>Waiver.</u>
60	Full	No	SSI/SSP Aid to the Disabled (FFP). A cash assistance program administered by the SSA that pays a cash grant to needy persons who meet the federal definition of disability.
63	Full	Y/N	Aid to the Disabled – LTC Status (FFP). Covers persons who meet the federal definition of disability who are medically needy and in LTC status.
64	Full	No	Aid to the Disabled – Medically Needy (FFP). Covers persons who meet the federal definition of disability and do not wish or are not eligible for cash grant, but are eligible for Medi-Cal only.
65	Full	Y/N	Aid to the Disabled Substantial Gainful Activity/Aged, Blind, Disabled – Medically Needy IHSS (non-FFP). Covers persons who (a) were once determined to be disabled in accordance with the provisions of the SSI/SSP program and were eligible for SSI/SSP but became ineligible because of engagement in substantial gainful activity as defined in Title XVI regulations. They must also continue to suffer from the physical or mental impairment that was the basis of the disability determination or (b) are aged, blind or disabled medically needy and have the costs of IHSS deducted from their monthly income.
66	Full	No	Aid to the Disabled Pickle Eligibles (FFP). Covers persons who meet the federal definition of disability and are covered by the provisions of the <u>Lynch v. Rank lawsuit</u> . No age limit for this aid code.
67	Full	Yes	Aid to the Disabled – Medically Needy, SOC (FFP). (See aid code 64 for definition of Disabled – MN). SOC is required of the beneficiaries.

<b>Code</b>	<b>Benefits</b>	<b>SOC</b>	<b>Program/Description</b>
68	Full	No	Aid to the Disabled IHSS (FFP). Covers persons who meet the federal definition of disability and are eligible for IHSS. (See aid codes 18 and 65 for definition of eligibility for IHSS).
69	Restricted to emergency services	No	Income Disregard Program. Infant (FFP) – Undocumented/Nonimmigrant Alien (but otherwise eligible). Provides emergency services only for infants under 1 year of age and beyond 1 year when inpatient status, which began before 1st birthday, continues and family income is at or below 200 percent of the federal poverty level.
7A	Full	No	100 Percent Program. Child (FFP) – United States Citizen, Lawful Permanent Resident/PRUCOL/(IRCA Amnesty Alien [ABD or Under 18]). Provides full benefits to otherwise eligible children, ages 6 to 19 and beyond 19 when inpatient status began before the 19th birthday and family income is at or below 100 percent of the federal poverty level.
7C	Restricted to pregnancy and emergency services	No	100 Percent Program. Child – Undocumented/Nonimmigrant Status/[IRCA Amnesty Alien (Not ABD or Under 18)]. Covers emergency and pregnancy related services to otherwise eligible children, ages 6 to 19 and beyond 19 when inpatient status begins before the 19th birthday and family income is at or below 100 percent of the federal poverty level.
7F	Valid for pregnancy verification office visit	No	Presumptive Eligibility (PE) – Pregnancy Verification (FFP). This option allows the Qualified Provider to make a determination of PE for outpatient prenatal care services based on preliminary income information. 7F is valid for pregnancy test, initial visit, and services associated with the initial visit. Persons placed in 7F have pregnancy test results that are negative.
7G	Valid only for ambulatory prenatal care services	No	Presumptive Eligibility (PE) – Ambulatory Prenatal Care Services (FFP). This option allows the Qualified Provider to make a determination of PE for outpatient prenatal care services based on preliminary income information. 7G is valid for Ambulatory Prenatal Care Services. Persons placed in 7G have pregnancy test results that are positive.
7H	Valid only for TB- related outpatient services	No	Medi-Cal Tuberculosis (TB) Program. Covers individuals who are TB-infected for TB-related outpatient services only.
7M	Valid for Minor Consent services	Y/N	Minor Consent Program (Non-FFP). Covers minors aged 12 and under 21. Limited to services related to Sexually Transmitted Diseases, sexual assault, drug and alcohol abuse, and family planning.
7N	Valid for Minor Consent services	No	Minor Consent Program (FFP). Covers pregnant female minors under age 21. Limited to services related to pregnancy and family planning.
7P	Valid for Minor Consent services	Y/N	Minor Consent Program (Non-FFP). Covers minors age 12 and under 21. Limited to services related to Sexually Transmitted Diseases, sexual assault, drug and alcohol abuse, family planning, and outpatient mental health treatment.

Code	Benefits	SOC	Program/Description
7R	Valid for Minor Consent services	Y/N	Minor Consent Program (FFP). Covers minors under age 12. Limited to services related to family planning and sexual assault.
<b>7X</b>	<b>Full</b>	<b>No</b>	<b><u>One-Month Healthy Families (HF) Bridge (FFP). Provides one additional calendar month of health care benefits with no Share of Cost, through the same health care delivery system, to Medi-Cal-eligible children meeting the criteria of the HF Bridging Program.</u></b>
70	Restricted to pregnancy-related services	No	Asset Waiver Program (Pregnant). United States Citizen, Permanent Resident Alien/PRUCOL Alien or Undocumented/Nonimmigrant Alien (but otherwise eligible). Provides family planning, pregnancy-related, and postpartum services under the state-only funded expansion of the Medi-Cal program for a pregnant woman having income between 185 percent and 200 percent of the federal poverty level (State-Only Program).
71	Restricted to dialysis and supplemental dialysis-related services	Y/N	Medi-Cal Dialysis Only Program/Medi-Cal Dialysis Supplement Program (DP/DSP) (Non-FFP). Covers persons of any age who are eligible only for dialysis and related services.
72	Full	No	133 Percent Program. Child-United States Citizen, Permanent Resident Alien/PRUCOL Alien (FFP). Provides full Medi-Cal benefits to children ages 1 up to 6 and beyond 6 years when inpatient status, which began before 6th birthday, continues, and family income is at or below 133 percent of the federal poverty level.
73	Restricted to parenteral hyperalimentation-related expenses	Y/N	Medi-Cal TPN Only Program/Medi-Cal TPN Supplement Program (Non-FFP). Covers persons of any age who are eligible for parenteral hyperalimentation and related services and persons of any age who are eligible under the Medically Needy or Medically Indigent Programs.
74	Restricted to emergency services	No	133 Percent Program (OBRA). Child Undocumented/ Nonimmigrant Alien (but otherwise eligible) (FFP). Provides emergency services only for children ages 1 up to 6 and beyond 6 years when inpatient status, which began before 6th birthday, continues, and family income is at or below 133 percent of the federal poverty level.
75	Restricted to pregnancy-related services	No	Asset Waiver Program (Pregnant). Provides family planning, pregnancy-related, and postpartum services for amnesty aliens under the state-only funded expansion of the Medi-Cal program for a pregnant woman having income between 185 percent and 200 percent of the federal poverty level (State-Only Program).
76	Restricted to 60-day postpartum services	No	60-Day Postpartum Program (FFP). Provides Medi-Cal at no SOC to women who, while pregnant, were eligible for, applied for, and received Medi-Cal benefits. They may continue to be eligible for all postpartum services and family planning. This coverage begins on the last day of pregnancy and ends the last day of the month in which the 60th day occurs.

<b>Code</b>	<b>Benefits</b>	<b>SOC</b>	<b>Program/Description</b>
79	Full	No	Asset Waiver Program (Infant). Provides full Medi-Cal benefits to infants up to 1 year, and beyond 1 year when inpatient status, which began before 1st birthday, continues and family income is between 185 percent and 200 percent of the federal poverty level (State-Only Program).
8F	CMSP services only (companion aid code)	Y/N	CMSP Companion Aid Code. Covers persons eligible for certain benefits under the Medi-Cal Program and other benefits under CMSP. 8F is used in conjunction with Medi-Cal aid codes 52, 53 and 57 to facilitate the payment of claims for covered benefits. 8F will appear as a special aid code and will entitle the eligible client to full-scope CMSP coverage for those services not covered by Medi-Cal.
8G	Full	No	Qualified Severely Impaired Working Individual Program Aid Code. Allows recipients of the Qualified Severely Impaired Working Individual Program to continue their Medi-Cal eligibility.
8H	Family P.A.C.T. (SOFP services only) No Medi-Cal	N/A	Family P.A.C.T. (also known as SOFP – State Only Family Planning). Comprehensive family planning services for low income residents of California with no other source of health care coverage.
8N	Restricted to emergency services	No	133 Percent Program (OBRA). Child Undocumented/Nonimmigrant Alien (but otherwise eligible except for excess property) (FFP). Provides emergency services only for children ages 1 up to 6 and beyond 6 years when inpatient status, which began before 6th birthday, continues, and family income is at or below 133 percent of the federal poverty level.
8P	Full	No	133 Percent Program. Child – United States Citizen (with excess property), Permanent Resident Alien/PRUCOL Alien (FFP). Provides full-scope Medi-Cal benefits to children ages 1 up to 6 and beyond 6 years when inpatient status, which began before 6th birthday, continues, and family income is at or below 133 percent of the federal poverty level.
8R	Full	No	100 Percent Program. Child (FFP) – United States Citizen (with excess property), Lawful Permanent Resident/PRUCOL/(IRCA Amnesty Alien [ABD or Under 18]). Provides full-scope benefits to otherwise eligible children, ages 6 to 19 and beyond 19 when inpatient status begins before the 19th birthday and family income is at or below 100 percent of the federal poverty level.
8T	Restricted to pregnancy and emergency services	No	100 Percent Program. Child – Undocumented/Nonimmigrant Status/(IRCA Amnesty Alien [with excess property]). Covers emergency and pregnancy-related services only to otherwise eligible children ages 6 to 19 and beyond 19 when inpatient status begins before the 19th birthday and family income is at or below 100 percent of the federal poverty level.
80	Restricted to Medicare expenses	No	Qualified Medicare Beneficiary (QMB). Provides payment of Medicare Part A premium and Part A and B coinsurance and deductibles for eligible low income aged, blind, or disabled individuals.

Code	Benefits	SOC	Program/Description
81	Full	Y/N	MI-Adults Aid Paid Pending (Non-FFP). Aid Paid Pending for persons over 21 but under 65, with or without SOC.
82	Full	No	MI-Person (FFP). Covers medically indigent persons under 21 who meet the eligibility requirements of medical indigence. Covers persons until the age of 22 who were in an institution for mental disease before age 21. Persons may continue to be eligible under aid code 82 until age 22 if they have filed for a State hearing.
83	Full	Yes	MI-Person SOC (FFP). Covers medically indigent persons under 21 who meet the eligibility requirements of medically indigent.
84	CMSP services only (no Medi-Cal)	No	CMSP, MI-A (Non-FFP). Covers medically indigent adults aged 21 and over but under 65 years who meet the eligibility requirements of medically indigent.
85	CMSP services only (no Medi-Cal)	Yes	CMSP, MI-A (Non-FFP). Covers medically indigent adults aged 21 and over but under 65 years, who meet the eligibility requirements of medically indigent.
86	Full	No	MI-Confirmed Pregnancy (FFP). Covers persons aged 21 years or older, with confirmed pregnancy, who meet the eligibility requirements of medically indigent.
87	Full	Yes	MI-Confirmed Pregnancy (FFP). Covers persons aged 21 or older, with confirmed pregnancy, who meet the eligibility requirements of medically indigent but are not eligible for 185 percent/200 percent or the MN programs.
88	CMSP services only (no Medi-Cal)	No	CMSP, MI-A/Disability Pending (Non-FFP). Covers medically indigent adults aged 21 and over but under 65 years who meet the eligibility requirements of medically indigent and have a pending Medi-Cal disability application.
89	CMSP services only (no Medi-Cal)	Yes	CMSP, MI-A/Disability Pending (Non-FFP). Covers medically indigent adults aged 21 and over but under 65 years who meet the eligibility requirements of medically indigent and have a pending Medi-Cal disability application.
9A	BCEDP only	No	The Breast Cancer Early Detection Program (BCEDP) recipient identifier. BCEDP offers benefits to uninsured and underinsured women, 40 years and older, whose household income is at or below 200 percent of the federal poverty level. BCEDP offers reimbursement for screening, diagnostic and case management services.  Please note: BCEDP and Medi-Cal are separate programs, but BCEDP is using the Medi-Cal billing process (with few exceptions).
9H	HF services only (no Medi-Cal)	No	The Healthy Families (HF) Program provides a comprehensive health insurance plan for uninsured children from 1 to 19 years of age whose family's income is at or below 200 percent of the federal poverty level. HF covers medical, dental and vision services to enrolled children.

**Special Indicators:** These indicators, which appear in the aid code portion of the county ID number, help Medi-Cal identify the following:

**IE – Ineligible:** A person who is ineligible for Medi-Cal benefits in the case. An IE person may only use medical expenses to meet the SOC for other family members associated within the same case. Upon certification of the SOC, the IE individual is not eligible for Medi-Cal benefits in this case. An IE person may be eligible for Medi-Cal benefits in another case where the person is not identified as IE.

**RR – Responsible Relative –** An RR is allowed to use medical expenses to meet the SOC for other family members for whom he/she is responsible. Upon certification of the SOC, an RR individual is not eligible for Medi-Cal benefits in this Medi-Cal Budget Unit (MBU). The individual may be eligible for Medi-Cal benefits in another MBU where the person is not identified as RR.



## APPENDIX C

SELECTED MEDICAL CARE STATISTICS REPORTS,  
SELECTED MEDICAL CARE STATISTICS REPORTS AVAILABLE ON  
DISKETTE, AND PUBLICATION ORDER FORM

## SELECTED MEDICAL CARE STATISTICS REPORTS

	<u>Cost</u>
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