

# HEALTH CARE SERVICE PLAN COMPLAINT DATA

1999 REQUESTS FOR ASSISTANCE



STATE OF CALIFORNIA  
DEPARTMENT OF CORPORATIONS  
HEALTH PLAN DIVISION  
MAY 2000

**DEPARTMENT OF CORPORATIONS  
HEALTH PLAN DIVISION**

Sacramento, California

**NOTICE**

Section 1397.5(b) of the Knox-Keene Health Care Service Plan Act of 1975 ("Act") requires that this report include the following disclaimer:

THIS INFORMATION IS PROVIDED FOR STATISTICAL PURPOSES ONLY. THE COMMISSIONER OF CORPORATIONS HAS NEITHER INVESTIGATED NOR DETERMINED WHETHER THE COMPLAINTS COMPILED WITHIN THIS SUMMARY ARE REASONABLE OR VALID.

Section 1368.04(a) of the Act states:

The commissioner shall, as appropriate, investigate and take enforcement action against plans regarding complaints by enrollees and subscribers. The commissioner shall periodically evaluate complaints to determine if any audit, investigative or enforcement actions should be undertaken by the department.

**ADDITIONAL COPIES**

Additional copies of this report, as well as copies of the 1995, 1996, 1997, 1998, Annual Reports and the 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> Quarter of 1999 are available. To request additional copies, please send a request to the "Department" specifying the quantity desired, year(s)/quarter(s) of interest (4<sup>th</sup> Quarter 1999, 3<sup>rd</sup> Quarter 1999, 2<sup>nd</sup> Quarter 1999, 1<sup>st</sup> Quarter 1999 or 1999, 1998, 1997, 1996, 1995 Annual Reports), and destination address to:

Department of Corporations  
320 West 4<sup>th</sup> Street, Suite 750  
Los Angeles, CA 90013

This report may also be viewed at any Department of Corporations Office. The address and telephone number of each office can be found below. In addition, this report, and the 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> Quarter of 1999, the 1998 or 1997 Annual Reports may be accessed by visiting our home page at <http://www.corp.ca.gov>.



## Health Care Service Plan Complaint Data

### **1999 Requests for Assistance**

#### 1. What is this report?

This report details the number and types of complaints or grievances (also known as "Requests for Assistance" or "RFAs") received by the Department during the 1999 calendar year.

#### 2. What is a "Request for Assistance"?

A Request for Assistance is the Department's term for a grievance or complaint against a health care service plan which has been received by the Department.

#### 3. Why was this report created?

The Department licenses and regulates health care service plans under the Knox-Keene Health Care Service Plan Act of 1975 ("Act" -- California Health and Safety Code Section 1340 *et seq.*). Section 1397.5(a) of the Act requires that this report be filed annually as a public record.

#### 4. What is a "Health Care Service Plan"?

Health care service plans are commonly referred to as "HMOs" or "health maintenance organizations." Health care service plans either arrange for the provision of health services to enrollees, or pay for or reimburse the cost of those services in return for a prepaid or periodic charge. In contrast, an insurance company indemnifies and reimburses an insured for health care costs that are incurred. The insurance company does not provide or contract for those services to be provided to the insured. Health care service plans in California offer some or all of the following services: medical, dental, vision, psychological, chiropractic, and prescription/pharmacy.

#### 5. What is a "Referral to Plan"?

Section 1368(b)(1)(A) of the Act requires in most cases that enrollees with a grievance first participate in the health plan's internal grievance process for at least 30 days before seeking assistance from the Department. Enrollees are not required to participate in a health plan's grievance process before requesting Department assistance if the grievance involves an imminent and serious threat to the health of the enrollee.

If an enrollee seeks the Department's assistance with a non-emergency grievance without first accessing the health plan's internal grievance process as described above, the Department will forward the grievance to the health plan for direct handling. For reporting purposes, the HPD classifies such cases as "Referrals to Plan," not "Requests for Assistance." In this report, "Referrals to Plan" and "Requests for Assistance" are separate and distinct categories.

6. Does this report contain plan-specific information?

This report does contain plan-specific information. The summary report lists all health plans which were licensed on or before December 31, 1999; the number of complaints which the Department received against each health plan; and the four broad categories under which these complaints are classified by the Department (Accessibility, Benefits/Coverage, Claims, and Quality of Care).

Additionally, the report contains a section with an individual page for each health plan that was licensed during the 1999 calendar year.

7. Is this report a report card?

This report is not a report card on health plan performance. This report provides specific information about the number and types of complaints received by the Department involving health care service plans during the 1999 calendar year.

8. Should I select a health plan based on this information?

The data in this report reflects one discrete measure of health plan performance. The Department recommends that no individual make a health plan selection based on any single measure of performance. This report is but one source of information regarding health plans. There are many organizations that prepare and distribute health plan performance evaluations. An individual should learn as much as possible about the health plans he or she is considering before making a final selection.

9. How can I use the data in this report to determine how well my health plan is doing?

As previously mentioned, the data in this report should not be used in isolation to judge plan performance. Rather, the report should be used as part of the total mix of information available about health plans.

10. What are "Issue Categories"?

The Department recognizes and records 32 RFA issue types. On the summary report, the 32 issue types are condensed into four broad issue categories: 1) Accessibility, 2) Benefits/Coverage, 3) Claims, and 4) Quality of Care. For more information on the RFA issue types, please see the attached description list.

11. Why is the number of issues for some health plans higher than the number of RFAs received?

An RFA received by the Department may contain more than one issue. Therefore, the total number of issues for a particular health plan may be larger than the number of RFAs received by the HPD for the same plan.

12. Why do some health plans have two names listed?

The Department has listed health plans according to their official licensed name. In instances where a plan is known by more than one name (such as a DBA) the licensed name is shown first with the other name in parentheses.

13. How was health plan enrollment determined?

The health plan enrollment figures used are an average of the quarterly enrollment data which health plans provide to the Department. \*

\* During the 1<sup>st</sup> Quarter 1999, an enrollment figure was inadvertently reported for CareAmerica Southern California. This health plan merged with Blue Shield of California in 1998 and should not have appeared on the 1<sup>st</sup> Quarter 1999 report.

As a result of the merger between the parent companies of HMO California and Universal Care, the two health plans combined enrollment information was reported to the Department starting with the third quarter of 1999. Enrollment is reported under Universal Care for the calendar year 1999.

14. Why do some health plans have no enrollment?

The typical reason why a health plan may have no enrollees is because the health plan may have been recently granted a Knox-Keene license.

The following health plans received Knox-Keene licenses in 1999:

<u>Plan</u>	<u>Date Licensed</u>
On Lok Senior Health Services	01/20/99
ProMed Health Care Administrators	04/07/99
Scripps Clinic Health Plan Services	04/07/99
Merk-Medco Managed Care of CA, Inc	7/23/99
Eye Care Plan of America-CA, Inc	12/30/99

15. Why would a health plan appear in last year's report and not appear in this report?

A health plan which appeared in last year's report but does not appear this year may have surrendered its Knox-Keene license.

The following health plans surrendered their Knox-Keene license in 1999 (unless otherwise listed):

<u>Plan</u>	<u>Date Surrendered</u>
Foundation Health Psychcare Services	01/99
San Joaquin Valley Dental Plan	03/99
Monarch Plan, Inc	04/99
Health Benefits, Inc.	05/99
California Pacific Medical Group dba Brown & Toland Medical Group	10/99
THIPA Management Consultants, Inc.	11/99
Preventive Dental Systems	12/99

16. What explains the large variations in the numbers of RFAs filed against various health plans?

A number of factors can influence the number of RFAs filed with respect to a particular health plan. These include, among others, the total number of enrollees in the health plan, the degree to which the health plan discloses to enrollees the right to file an RFA with the Department, the effectiveness of the health plan's internal grievance procedures, and the quality of the health plan's services.

In the report, the number of RFAs for each health plan is also presented as "RFAs per 10,000 Enrollees." This presentation allows for comparisons of health plans of significantly different enrollments.

Also in this report, the Department has included a third column representing an industry wide average of issues per 10,000 enrollees. This presentation allows for a comparison of individual Health Plans to the industry average.

## **REQUEST FOR ASSISTANCE ISSUE TYPE DESCRIPTIONS**

Listed below are the 32 issue types the Department recognizes and records regarding Requests for Assistance ("RFAs"). Each issue type is followed by a brief definition/explanation. The issue types are grouped according to the four broad categories found in the annual Health Care Service Plan Complaint Data Report. For purposes of this list, the term "physician" includes other providers as well.

### **CATEGORY 1: ACCESSIBILITY**

#### \*Excessively Long Wait/Appointment Schedule Time

Routine, specialty, ancillary appointments

#### \*Lack of Primary Care Physician Availability

By geographic area, telephone, or for visits

#### \*Lack of Specialist Availability

By geographic area, telephone, or for visits

#### \*Lack of Telephone Accessibility

Plan, provider entity, primary care physician (PCP), specialist

### **CATEGORY 2: BENEFITS/COVERAGE**

#### \*Assignment of Benefits

Member authorizes non-participating provider to receive payment directly from health plan

#### \*Cancellation of Coverage

Member/dependent

#### \*Disenrollment Problems

Dispute over disenrollment of member/dependent

#### \*Dispute over Covered Services

Disagreement about whether or not a service is covered under member contract/evidence of coverage (EOC)

\*Does Not Like Benefit

Member unhappy with benefit

\*Improper Marketing/Solicitation

By plan, provider entity, physician, solicitor firm

\*Non-Acceptance for Coverage

Individual, spouse, dependent denied coverage

\*Slow Reply

To enrollee inquiries

**CATEGORY 3: CLAIMS**

\*Insufficient Payment

For services rendered

\*Premium Increased

Member premium

\*Premium Refund Request

Member request

\*Refusal to Pay Equipment

Durable medical equipment (DME) services

\*Refusal to Pay Treatment

Medical services received by member or dependent

\*Slow Payment

For services received



**CATEGORY 4: QUALITY OF CARE**

\*Experimental/Investigational Procedure Denied

By plan, provider entity

\*In-Area Emergency/Urgent Service Denied

By plan, provider entity

\*Inadequate Facilities

Hospital, physician's office, skilled nursing facility (SNF), hospice

\*Inappropriate Ancillary Care

Diagnostic treatment & services, physical therapy, speech therapy, occupational therapy, home health

\*Inappropriate Hospital Care

By staff

\*Inappropriate Physician Care

PCP or specialist

\*Out-of-Area Emergency/Urgent Services Denied

In-plan and out-of-plan services

\*Plan Denial of Treatment

Refusal to authorize

\*Plan Inappropriate Care

Overall quality of care provided to member, not physician specific

\*Plan Refusal to Refer

Specialist, ancillary services

\*Poor Physician/Staff Attitude

Physician/staff specific

\*Provider Entity Denial of Treatment

PCP or specialist refusal to authorize

\*Provider Entity Inappropriate Care

Overall care provided to member, not physician specific

\*Provider Entity Refusal to Refer

Specialist, ancillary services

**California Department of Corporations**  
**Summary of 1999 Enrollee Requests for Assistance (RFAs)**  
**01/01/1999 to 12/31/1999**

Plan Type Plan Name	RFAs Received	Referrals To Plan	Enrollees	RFAs Per 10,000 Enrollees	Issue Categories							
					Accessibility		Benefits/Coverage		Claims		Quality of Care	
					Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees
<b>Full Service</b>												
Aetna US Healthcare of California, Inc.	87	69	583,810	1.4902	8	0.1370	20	0.3426	35	0.5995	52	0.8907
Alameda Alliance for Health	0	0	78,734	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Blue Cross of California	390	245	3,725,312	1.0469	18	0.0483	168	0.4510	147	0.3946	155	0.4161
California Pacific Medical Group (Brown & Toland Md Gr)	1	2	184,757	0.0541	0	0.0000	0	0.0000	0	0.0000	2	0.1083
California Physician's Service ( Blue Shield of CA )	223	147	2,056,823	1.0842	8	0.0389	62	0.3014	90	0.4376	103	0.5008
Care First Health Plan	2	0	73,536	0.2720	0	0.0000	0	0.0000	0	0.0000	3	0.4080
Cedars-Sinai Provider Plan, LLC	0	0	1,626	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Chinese Community Health Plan	0	0	6,582	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Cigna HealthCare of California, Inc.	149	54	690,029	2.1593	8	0.1159	36	0.5217	50	0.7246	102	1.4782
Cohen Medical Corporation (Tower Health Services)	3	1	112,741	0.2661	0	0.0000	0	0.0000	1	0.0887	5	0.4435
Community Health Group	1	0	77,912	0.1283	0	0.0000	0	0.0000	0	0.0000	1	0.1283
Concentrated Care, Inc.	0	0	16,483	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Contra Costa County Medical Svcs (Contra Costa Hlth)	1	0	50,429	0.1983	0	0.0000	1	0.1983	0	0.0000	0	0.0000
County of LA-Dept. of Health Svcs(Community HP)	0	0	121,735	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
County of Ventura (Ventura County Health Care Plan)	0	1	8,316	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
FPA Medical Management of CA, Inc.	0	0	242,984	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Great American Health Plan	0	0	9,838	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Greater Pacific HMO, Inc.	6	1	2,854	21.0231	2	7.0077	0	0.0000	4	14.0154	2	7.0077
Health Net	386	179	2,171,738	1.7774	32	0.1473	84	0.3868	131	0.6032	221	1.0176
Health Plan of The Redwoods	19	4	87,666	2.1673	0	0.0000	3	0.3422	3	0.3422	15	1.7110
Heritage Provider Network, Inc.	0	0	353,600	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
HMO California (Healthmax America)	1	0	0	0.0000	0	0.0000	0	0.0000	0	0.0000	1	0.0000
Inland Empire Health Plan	1	2	165,301	0.0605	0	0.0000	1	0.0605	0	0.0000	0	0.0000
Inter Valley Health Plan	10	5	65,021	1.5380	0	0.0000	2	0.3076	1	0.1538	10	1.5380
Kaiser Foundation Added Choice Health Plan	0	0	0	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Kaiser Foundation Health Plan, Inc.	657	313	5,889,922	1.1155	63	0.1070	152	0.2581	170	0.2886	492	0.8353
Kern Health Systems, Inc.	0	0	48,269	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Key Health Plan, Inc.	3	1	10,576	2.8366	0	0.0000	1	0.9455	0	0.0000	2	1.8911
Lifeguard, Inc.	21	7	246,528	0.8518	2	0.0811	4	0.1623	7	0.2839	15	0.6085
Local Initiative Health Authority for LA Co /LA Care HP	1	0	613,315	0.0163	1	0.0163	0	0.0000	0	0.0000	2	0.0326
Maxicare (Maxicare of California, Inc.)	27	26	278,708	0.9688	0	0.0000	9	0.3229	17	0.6100	9	0.3229

**California Department of Corporations**  
**Summary of 1999 Enrollee Requests for Assistance (RFAs)**  
**01/01/1999 to 12/31/1999**

Plan Type Plan Name	RFAs Received	Referrals To Plan	Enrollees	RFAs Per 10,000 Enrollees	Issue Categories							
					Accessibility		Benefits/Coverage		Claims		Quality of Care	
					Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees
Medpartners Provider Network, Inc.	2	2	701,975	0.0285	0	0.0000	0	0.0000	1	0.0142	1	0.0142
Molina Medical Centers (American Family)	0	1	158,521	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
National Med, Inc.	14	7	49,024	2.8557	2	0.4080	4	0.8159	3	0.6119	6	1.2239
Omni Healthcare, Inc.	23	12	94,578	2.4319	0	0.0000	5	0.5287	11	1.1631	12	1.2688
On Lok Senior Health Services	0	0	810	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
One Health Plan of California, Inc.	2	2	64,819	0.3086	0	0.0000	0	0.0000	1	0.1543	1	0.1543
PacifiCare of California	445	167	2,301,296	1.9337	29	0.1260	83	0.3607	142	0.6170	283	1.2297
Primecare Medical Network, Inc. A CA Corp	0	0	117,850	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Priorityplus of California	0	0	101,790	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
ProMed Health Care Administrators	0	0	0	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Prudential Health Care Plan of CA, Inc.	86	57	938,060	0.9168	4	0.0426	11	0.1173	46	0.4904	40	0.4264
Regents of the University of California ( UC San Diego)	1	0	14,536	0.6879	0	0.0000	0	0.0000	0	0.0000	1	0.6879
San Francisco Health Plan	0	0	27,283	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
San Joaquin Co Health Commission (HP of San Joaquin)	0	0	55,159	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
San Mateo Health Commission (HP of San Mateo)	0	0	38,430	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Santa Clara Co. (Valley Health Plan)	1	0	31,161	0.3209	0	0.0000	1	0.3209	0	0.0000	0	0.0000
Santa Clara County Health Authority(Snta Clar Family HP)	0	0	44,437	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
SCAN Health Plan (SmartCare)	22	7	37,782	5.8229	2	0.5294	3	0.7940	6	1.5881	16	4.2348
Scripps Clinic Health Services	0	0	16,223	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Sharp Health Plan	5	1	75,545	0.6619	0	0.0000	2	0.2647	2	0.2647	2	0.2647
St. Joseph's Provider Network (Calaveras Provider Ntwk)	0	0	26,167	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
THIPA Management Consultants, Inc.	0	0	0	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
United Healthcare of CA, Inc.	9	12	138,759	0.6486	2	0.1441	2	0.1441	3	0.2162	3	0.2162
Universal Care	10	2	250,828	0.3987	0	0.0000	3	0.1196	1	0.0399	7	0.2791
Vivahealth, Inc. (BPS HMO)	0	1	19,635	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Watts Health Foundation (UHP Healthcare)	11	6	103,550	1.0623	2	0.1931	2	0.1931	3	0.2897	7	0.6760
Western Health Advantage	3	0	39,077	0.7677	0	0.0000	0	0.0000	3	0.7677	0	0.0000
Subtotals & Averages	2623	1,334	23,422,440	1.1199	183	0.0781	659	0.2814	878	0.3749	1,571	0.6707
<b>Dental</b>												
Access Dental Plan	5	2	87,440	0.5718	0	0.0000	1	0.1144	1	0.1144	5	0.5718
Aetna US Healthcare Dental Plan of California, Inc.	1	0	946,665	0.0106	0	0.0000	0	0.0000	0	0.0000	1	0.0106

**California Department of Corporations**  
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					Accessibility		Benefits/Coverage		Claims		Quality of Care	
					Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees
American Healthguard Corporation	0	0	12,141	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Ameritas Managed Dental Plan, Inc (Consolidated Hlth)	3	2	43,013	0.6975	0	0.0000	1	0.2325	0	0.0000	2	0.4650
Baycare Health Plan	0	0	1,020	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
CA Pacific Dental (formerly Pacific Union)	6	1	204,742	0.2931	0	0.0000	0	0.0000	6	0.2931	2	0.0977
California Benefits Dental Plan	2	1	20,975	0.9535	0	0.0000	2	0.9535	0	0.0000	1	0.4768
California Dental Network, Inc.	0	0	13,349	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Century Dental Plan	0	0	6,164	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Cigna Dental Health of California, Inc.	12	4	462,624	0.2594	0	0.0000	0	0.0000	7	0.1513	10	0.2162
Community Dental Services (SmileCare)	3	1	251,788	0.1191	0	0.0000	1	0.0397	2	0.0794	2	0.0794
Consumer Health, Inc. (Newport Dental Plan)	0	1	30,826	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Continental Dental Plan	0	0	0	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Dedicated Dental Systems, Inc.	2	0	43,857	0.4560	0	0.0000	0	0.0000	0	0.0000	3	0.6840
Delta Dental Plan of California	145	71	10,330,985	0.1404	3	0.0029	42	0.0407	89	0.0861	24	0.0232
Dental Benefit Providers of California, Inc.	2	0	133,738	0.1495	0	0.0000	1	0.0748	0	0.0000	2	0.1495
Dental Health Services	1	2	92,552	0.1080	0	0.0000	0	0.0000	0	0.0000	2	0.2161
Denticare of California, Inc.	15	4	494,284	0.3035	1	0.0202	3	0.0607	5	0.1012	11	0.2225
Golden West Health Plan, Inc.	3	0	203,108	0.1477	0	0.0000	1	0.0492	1	0.0492	2	0.0985
Greater California Dental Plan (Smilesaver)	4	2	338,834	0.1181	0	0.0000	0	0.0000	2	0.0590	4	0.1181
Health Benefits Inc. (Golden Eagle)	0	0	3,416	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Healthdent of California, Inc.	3	3	17,063	1.7582	0	0.0000	0	0.0000	1	0.5861	3	1.7582
Ideal Dental Health Plan	0	0	1,641	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Laurel Dental Plan, Inc.	0	0	312	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Managed Dental Care	1	0	28,598	0.3497	0	0.0000	0	0.0000	0	0.0000	1	0.3497
PacifiCare Dental & Vision	26	3	943,416	0.2756	1	0.0106	5	0.0530	13	0.1378	20	0.2120
Preferred Health Plan, Inc.	0	1	15,842	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Preventive Dental Systems, Inc.	0	0	12,978	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
PrimeCare Dental Plan, Inc.	0	0	5,770	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Private Medical-Care, Inc. (PMI)	33	21	1,274,853	0.2589	4	0.0314	8	0.0628	11	0.0863	23	0.1804
Safeguard Health Plans, Inc.	31	2	478,548	0.6478	3	0.0627	8	0.1672	12	0.2508	23	0.4806
San Joaquin Valley Dental Plan, Inc.	0	0	143	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
UDC Dental California, Inc.	5	0	82,413	0.6067	0	0.0000	0	0.0000	1	0.1213	5	0.6067

**California Department of Corporations**  
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					Accessibility		Benefits/Coverage		Claims		Quality of Care	
					Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees
United Concordia DP of CA (Mida)	4	2	252,851	0.1582	1	0.0395	2	0.0791	1	0.0395	1	0.0395
Western Dental Services, Inc.	14	12	321,252	0.4358	1	0.0311	1	0.0311	1	0.0311	14	0.4358
Subtotals & Averages	321	135	17,157,201	0.1871	14	0.0082	76	0.0443	153	0.0892	161	0.0938
<b>Vision</b>												
Dr. Leventhal's Vision Care Ctrs of America	0	0	0	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Eyecare Service Plan, Inc.	0	0	160,379	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Eyemed, Inc. (Eyexam 2000 of California, Inc.)	0	0	972,741	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
For Eyes Vision Plan, Inc.	0	0	21,398	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Foundation Health Vision (AVP)	0	0	399,567	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Medical Eye Services, Inc.	0	0	19,345	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Nval Visioncare Systems of California, Inc.	0	0	3	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Pearle Visioncare, Inc.	0	0	110,138	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Procure Eye Exam, Inc.	0	0	18,100	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Vision First Eye Care, Inc.	0	1	2,359	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Vision Plan of America	0	0	35,750	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Vision Service Plan	3	1	9,030,575	0.0033	0	0.0000	2	0.0022	0	0.0000	1	0.0011
Visioncare of California (Sterling)	0	1	235,993	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Subtotals & Averages	3	3	11,006,348	0.0027	0	0.0000	2	0.0018	0	0.0000	1	0.0009
<b>Psychological</b>												
Health And Human Resource Center	0	0	157,629	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Holman Professional Counseling Centers	0	0	156,641	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Human Affairs International of California	0	0	759,704	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Managed Health Network	3	0	13,243,763	0.0023	0	0.0000	0	0.0000	1	0.0008	3	0.0023
MCC Behavioral Care of California, Inc.	2	0	503,560	0.0397	0	0.0000	0	0.0000	1	0.0199	1	0.0199
Merit Behavioral Care of California, Inc.	1	0	867,198	0.0115	0	0.0000	0	0.0000	1	0.0115	0	0.0000
PacificCare Behavioral Health of CA, Inc.	8	1	1,262,238	0.0634	0	0.0000	1	0.0079	4	0.0317	4	0.0317
U. S. Behavioral Health Plan, California	2	0	352,973	0.0567	0	0.0000	2	0.0567	0	0.0000	1	0.0283
ValueOptions of CA (frmrlly Value Behavioral)	1	0	325,674	0.0307	0	0.0000	1	0.0307	0	0.0000	0	0.0000
Vista Behavioral Health Plans	0	1	123,291	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000
Subtotals & Averages	17	2	17,752,671	0.0096	0	0.0000	4	0.0023	7	0.0039	9	0.0051

**California Department of Corporations**  
**Summary of 1999 Enrollee Requests for Assistance (RFAs)**  
**01/01/1999 to 12/31/1999**

Plan Type Plan Name	RFAs Received	Referrals To Plan	Enrollees	RFAs Per 10,000 Enrollees	Issue Categories								
					Accessibility		Benefits/Coverage		Claims		Quality of Care		
					Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	Issues	Issues Per 10,000 Enrollees	
<b>Other</b>													
American Speciality Health Plans(ACN/Amer. Chiro. Net)	1	0	3,537,553	0.0028	0	0.0000	0	0.0000	1	0.0028	0	0.0000	
ChiroSave, Inc.	0	1	1,197	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000	
Landmark Healthplan of CA, Inc.	0	0	215,496	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000	
Merk-Medco Managed Care of California, Inc.	0	0	39,277	0.0000	0	0.0000	0	0.0000	0	0.0000	0	0.0000	
Subtotals & Averages	1	1	3,793,523	0.0026	0	0.0000	0	0.0000	1	0.0026	0	0.0000	
<b>Totals &amp; Averages</b>	<b>2,965</b>	<b>1,475</b>	<b>73,132,183</b>	<b>0.4054</b>	<b>197</b>	<b>0.0269</b>	<b>741</b>	<b>0.1013</b>	<b>1,039</b>	<b>0.1421</b>	<b>1,742</b>	<b>0.2382</b>	

Section 1397.5(b) of the Knox-Keene Act requires the following disclaimer:

THIS INFORMATION IS PROVIDED FOR STATISTICAL PURPOSES ONLY. THE COMMISSIONER OF CORPORATIONS HAS NEITHER INVESTIGATED NOR DETERMINED WHETHER THE COMPLAINTS COMPILED WITHIN THIS SUMMARY ARE REASONABLE OR VALID.

Section 1368.04(a) of the Knox-Keene Act:

The commissioner shall, as appropriate, investigate and take enforcement action against plans regarding complaints by enrollees and subscribers. The commissioner shall periodically evaluate complaints to determine if any audit, investigative, or enforcement actions should be undertaken by the department.

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Access Dental Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
5	87,440	0.5718	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.1144	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.1144	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.1144	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.1144	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	2	0.2287	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.1144	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	1	0.1144	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	1	0.1144	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	5	0.5718	0.0938
<b>Issues Total:</b>	<b>7</b>	<b>0.8005</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Aetna US Healthcare Dental Plan of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	946,665	0.0106	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	1	0.0106	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.0106	0.0938
<b>Issues Total:</b>	<b>1</b>	<b>0.0106</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Aetna US Healthcare of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
87	583,810	1.4902	69

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	1	0.0171	
Lack of Primary Care Physician Availability	1	0.0171	
Lack of Specialist Availability	5	0.0856	
Lack of Telephone Accessibility	1	0.0171	
Accessibility Issues Subtotal:	8	0.1370	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	2	0.0343	
Disenrollment Problems	1	0.0171	
Dispute Over Covered Services	8	0.1370	
Does Not Like Benefit	5	0.0856	
Improper Marketing/Solicitation	2	0.0343	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	2	0.0343	
Benefits/Coverage Issues Subtotal:	20	0.3426	0.2810
<b>Claims</b>			
Insufficient Payment	1	0.0171	
Premium Increased	1	0.0171	
Premium Refund Request	2	0.0343	
Refusal to Pay Equipment	5	0.0856	
Refusal to Pay Treatment	23	0.3940	
Slow Payment	3	0.0514	
Claims Issues Subtotal:	35	0.5995	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	1	0.0171	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	8	0.1370	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	23	0.3940	
Plan Inappropriate Care	4	0.0685	
Plan Refusal to Refer	7	0.1199	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	4	0.0685	
Provider Entity Inappropriate Care	1	0.0171	
Provider Entity Refusal to Refer	4	0.0685	
Quality of Care Issues Subtotal:	52	0.8907	0.6699
<b>Issues Total:</b>	<b>115</b>	<b>1.9698</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Alameda Alliance for Health**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	78,734	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**American Healthguard Corporation**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	12,141	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**American Speciality Health Plans(ACN/Amer. Chiro. Net)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	3,537,553	0.0028	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Other Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Other Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0000
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0028	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.0028	0.0026
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0000
<b>Issues Total:</b>	<b>1</b>	<b>0.0028</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Ameritas Managed Dental Plan, Inc (Consolidated Hlth)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
3	43,013	0.6975	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.2325	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.2325	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	2	0.4650	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	2	0.4650	0.0938
<b>Issues Total:</b>	<b>3</b>	<b>0.6975</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Baycare Health Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	1,020	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Blue Cross of California**  
**1/1/1999 to 12/31/1999**

RFA'S Received  
390

Enrollees  
3,725,312

RFA's/10,000 Enrollees  
1.0469

Referrals to Plan  
245

Issue Category		Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue		Issues		
<b>Accessibility</b>				
Excessively Long Wait/Appt. Sched Time		6	0.0161	
Lack of Primary Care Physician Availability		4	0.0107	
Lack of Specialist Availability		7	0.0188	
Lack of Telephone Accessibility		1	0.0027	
	Accessibility Issues Subtotal:	18	0.0483	0.0780
<b>Benefits/Coverage</b>				
Assignment of Benefits		0	0.0000	
Cancellation of Coverage		21	0.0564	
Disenrollment Problems		3	0.0081	
Dispute Over Covered Services		72	0.1933	
Does Not Like Benefit		11	0.0295	
Improper Marketing/Solicitation		7	0.0188	
Non-Acceptance for Coverage		39	0.1047	
Slow Reply		15	0.0403	
	Benefits/Coverage Issues Subtotal:	168	0.4510	0.2810
<b>Claims</b>				
Insufficient Payment		22	0.0591	
Premium Increased		22	0.0591	
Premium Refund Request		17	0.0456	
Refusal to Pay Equipment		4	0.0107	
Refusal to Pay Treatment		74	0.1986	
Slow Payment		8	0.0215	
	Claims Issues Subtotal:	147	0.3946	0.3744
<b>Quality of Care</b>				
Experimental/Investigational Proc. Denied		6	0.0161	
Inadequate Facilities		0	0.0000	
Inappropriate Ancillary Care		2	0.0054	
Inappropriate Hospital Care		1	0.0027	
Inappropriate Physician Care		24	0.0644	
In-Area Emergency/Urgent Serv. Denied		4	0.0107	
Out-of-Area Emerg/Urgent Serv. Denied		1	0.0027	
Plan Denial of Treatment		44	0.1181	
Plan Inappropriate Care		30	0.0805	
Plan Refusal to Refer		21	0.0564	
Poor Physician/Staff Attitude		1	0.0027	
Provider Entity Denial of Treatment		11	0.0295	
Provider Entity Inappropriate Care		4	0.0107	
Provider Entity Refusal to Refer		6	0.0161	
	Quality of Care Issues Subtotal:	155	0.4161	0.6699
	<b>Issues Total:</b>	<b>488</b>	<b>1.3100</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**CA Pacific Dental (formerly Pacific Union)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
6	204,742	0.2931	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	1	0.0488	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	5	0.2442	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	6	0.2931	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.0488	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0488	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	2	0.0977	0.0938
<b>Issues Total:</b>	<b>8</b>	<b>0.3907</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**California Benefits Dental Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
2	20,975	0.9535	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.4768	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	1	0.4768	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	2	0.9535	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.4768	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.4768	0.0938
<b>Issues Total:</b>	<b>3</b>	<b>1.4303</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**California Dental Network, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	13,349	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**California Pacific Medical Group (Brown & Toland Md Gr)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	184,757	0.0541	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.0541	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	1	0.0541	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	2	0.1083	0.6699
<b>Issues Total:</b>	<b>2</b>	<b>0.1083</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**California Physician's Service ( Blue Shield of CA )**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
223	2,056,823	1.0842	147

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	3	0.0146	
Lack of Primary Care Physician Availability	3	0.0146	
Lack of Specialist Availability	2	0.0097	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	8	0.0389	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	10	0.0486	
Disenrollment Problems	4	0.0194	
Dispute Over Covered Services	17	0.0827	
Does Not Like Benefit	6	0.0292	
Improper Marketing/Solicitation	2	0.0097	
Non-Acceptance for Coverage	19	0.0924	
Slow Reply	4	0.0194	
Benefits/Coverage Issues Subtotal:	62	0.3014	0.2810
<b>Claims</b>			
Insufficient Payment	11	0.0535	
Premium Increased	5	0.0243	
Premium Refund Request	2	0.0097	
Refusal to Pay Equipment	3	0.0146	
Refusal to Pay Treatment	64	0.3112	
Slow Payment	5	0.0243	
Claims Issues Subtotal:	90	0.4376	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	3	0.0146	
Inadequate Facilities	2	0.0097	
Inappropriate Ancillary Care	2	0.0097	
Inappropriate Hospital Care	3	0.0146	
Inappropriate Physician Care	12	0.0583	
In-Area Emergency/Urgent Serv. Denied	1	0.0049	
Out-of-Area Emerg/Urgent Serv. Denied	2	0.0097	
Plan Denial of Treatment	37	0.1799	
Plan Inappropriate Care	14	0.0681	
Plan Refusal to Refer	12	0.0583	
Poor Physician/Staff Attitude	3	0.0146	
Provider Entity Denial of Treatment	5	0.0243	
Provider Entity Inappropriate Care	1	0.0049	
Provider Entity Refusal to Refer	6	0.0292	
Quality of Care Issues Subtotal:	103	0.5008	0.6699
<b>Issues Total:</b>	<b>263</b>	<b>1.2787</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Care First Health Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
2	73,536	0.2720	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	2	0.2720	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	1	0.1360	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	3	0.4080	0.6699
<b>Issues Total:</b>	<b>3</b>	<b>0.4080</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Cedars-Sinai Provider Plan, LLC**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	1,626	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Century Dental Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	6,164	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Chinese Community Health Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	6,582	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**ChiroSave, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	1,197	0.0000	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Other Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Other Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0000
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0026
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0000
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Cigna Dental Health of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
12	462,624	0.2594	4

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	1	0.0216	
Premium Increased	0	0.0000	
Premium Refund Request	1	0.0216	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	5	0.1081	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	7	0.1513	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	4	0.0865	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0216	
Plan Inappropriate Care	3	0.0648	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	2	0.0432	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	10	0.2162	0.0938
<b>Issues Total:</b>	<b>17</b>	<b>0.3675</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Cigna HealthCare of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
149	690,029	2.1593	54

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	3	0.0435	
Lack of Primary Care Physician Availability	2	0.0290	
Lack of Specialist Availability	3	0.0435	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	8	0.1159	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	4	0.0580	
Disenrollment Problems	1	0.0145	
Dispute Over Covered Services	24	0.3478	
Does Not Like Benefit	3	0.0435	
Improper Marketing/Solicitation	3	0.0435	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	1	0.0145	
Benefits/Coverage Issues Subtotal:	36	0.5217	0.2810
<b>Claims</b>			
Insufficient Payment	4	0.0580	
Premium Increased	0	0.0000	
Premium Refund Request	2	0.0290	
Refusal to Pay Equipment	4	0.0580	
Refusal to Pay Treatment	36	0.5217	
Slow Payment	4	0.0580	
Claims Issues Subtotal:	50	0.7246	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	1	0.0145	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	2	0.0290	
Inappropriate Hospital Care	3	0.0435	
Inappropriate Physician Care	6	0.0870	
In-Area Emergency/Urgent Serv. Denied	3	0.0435	
Out-of-Area Emerg/Urgent Serv. Denied	6	0.0870	
Plan Denial of Treatment	30	0.4348	
Plan Inappropriate Care	20	0.2898	
Plan Refusal to Refer	22	0.3188	
Poor Physician/Staff Attitude	2	0.0290	
Provider Entity Denial of Treatment	3	0.0435	
Provider Entity Inappropriate Care	1	0.0145	
Provider Entity Refusal to Refer	3	0.0435	
Quality of Care Issues Subtotal:	102	1.4782	0.6699
<b>Issues Total:</b>	<b>196</b>	<b>2.8405</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Cohen Medical Corporation (Tower Health Services)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
3	112,741	0.2661	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0887	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.0887	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	1	0.0887	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	1	0.0887	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0887	
Plan Inappropriate Care	1	0.0887	
Plan Refusal to Refer	1	0.0887	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	5	0.4435	0.6699
<b>Issues Total:</b>	<b>6</b>	<b>0.5322</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Community Dental Services (SmileCare)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
3	251,788	0.1191	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	1	0.0397	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.0397	0.0443
<b>Claims</b>			
Insufficient Payment	1	0.0397	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0397	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	2	0.0794	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	1	0.0397	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	1	0.0397	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	2	0.0794	0.0938
<b>Issues Total:</b>	<b>5</b>	<b>0.1986</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Community Health Group**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	77,912	0.1283	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	1	0.1283	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.1283	0.6699
<b>Issues Total:</b>	<b>1</b>	<b>0.1283</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Concentrated Care, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	16,483	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Consumer Health, Inc. (Newport Dental Plan)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	30,826	0.0000	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Continental Dental Plan**  
**1/1/1999 to 12/31/1999**

RFA'S Received  
0

Enrollees  
0

RFA's/10,000 Enrollees

Referrals to Plan  
0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0		
Lack of Primary Care Physician Availability	0		
Lack of Specialist Availability	0		
Lack of Telephone Accessibility	0		
Accessibility Issues Subtotal:	0		0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0		
Cancellation of Coverage	0		
Disenrollment Problems	0		
Dispute Over Covered Services	0		
Does Not Like Benefit	0		
Improper Marketing/Solicitation	0		
Non-Acceptance for Coverage	0		
Slow Reply	0		
Benefits/Coverage Issues Subtotal:	0		0.0443
<b>Claims</b>			
Insufficient Payment	0		
Premium Increased	0		
Premium Refund Request	0		
Refusal to Pay Equipment	0		
Refusal to Pay Treatment	0		
Slow Payment	0		
Claims Issues Subtotal:	0		0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0		
Inadequate Facilities	0		
Inappropriate Ancillary Care	0		
Inappropriate Hospital Care	0		
Inappropriate Physician Care	0		
In-Area Emergency/Urgent Serv. Denied	0		
Out-of-Area Emerg/Urgent Serv. Denied	0		
Plan Denial of Treatment	0		
Plan Inappropriate Care	0		
Plan Refusal to Refer	0		
Poor Physician/Staff Attitude	0		
Provider Entity Denial of Treatment	0		
Provider Entity Inappropriate Care	0		
Provider Entity Refusal to Refer	0		
Quality of Care Issues Subtotal:	0		0.0938
<b>Issues Total:</b>	<b>0</b>		

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Contra Costa County Medical Svcs (Contra Costa Hlth)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	50,429	0.1983	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.1983	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.1983	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>1</b>	<b>0.1983</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**County of LA-Dept. of Health Svcs(Community HP)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	121,735	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**County of Ventura (Ventura County Health Care Plan)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	8,316	0.0000	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Dedicated Dental Systems, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
2	43,857	0.4560	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	2	0.4560	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.2280	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	3	0.6840	0.0938
<b>Issues Total:</b>	<b>3</b>	<b>0.6840</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Delta Dental Plan of California**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
145	10,330,985	0.1404	71

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	3	0.0029	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	3	0.0029	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	1	0.0010	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	14	0.0136	
Does Not Like Benefit	25	0.0242	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	2	0.0019	
Benefits/Coverage Issues Subtotal:	42	0.0407	0.0443
<b>Claims</b>			
Insufficient Payment	13	0.0126	
Premium Increased	0	0.0000	
Premium Refund Request	1	0.0010	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	73	0.0707	
Slow Payment	2	0.0019	
Claims Issues Subtotal:	89	0.0861	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	11	0.0106	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	3	0.0029	
Plan Inappropriate Care	9	0.0087	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	1	0.0010	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	24	0.0232	0.0938
<b>Issues Total:</b>	<b>158</b>	<b>0.1529</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Dental Benefit Providers of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
2	133,738	0.1495	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	1	0.0748	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.0748	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.0748	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0748	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	2	0.1495	0.0938
<b>Issues Total:</b>	<b>3</b>	<b>0.2243</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Dental Health Services**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	92,552	0.1080	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.1080	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	1	0.1080	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	2	0.2161	0.0938
<b>Issues Total:</b>	<b>2</b>	<b>0.2161</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Denticare of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
15	494,284	0.3035	4

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	1	0.0202	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	1	0.0202	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	2	0.0405	
Does Not Like Benefit	1	0.0202	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	3	0.0607	0.0443
<b>Claims</b>			
Insufficient Payment	1	0.0202	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	4	0.0809	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	5	0.1012	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	3	0.0607	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	3	0.0607	
Plan Inappropriate Care	3	0.0607	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	1	0.0202	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	1	0.0202	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	11	0.2225	0.0938
<b>Issues Total:</b>	<b>20</b>	<b>0.4046</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Dr. Leventhal's Vision Care Ctrs of America**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	0		0

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0		
Lack of Primary Care Physician Availability	0		
Lack of Specialist Availability	0		
Lack of Telephone Accessibility	0		
Accessibility Issues Subtotal:	0		0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0		
Cancellation of Coverage	0		
Disenrollment Problems	0		
Dispute Over Covered Services	0		
Does Not Like Benefit	0		
Improper Marketing/Solicitation	0		
Non-Acceptance for Coverage	0		
Slow Reply	0		
Benefits/Coverage Issues Subtotal:	0		0.0018
<b>Claims</b>			
Insufficient Payment	0		
Premium Increased	0		
Premium Refund Request	0		
Refusal to Pay Equipment	0		
Refusal to Pay Treatment	0		
Slow Payment	0		
Claims Issues Subtotal:	0		0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0		
Inadequate Facilities	0		
Inappropriate Ancillary Care	0		
Inappropriate Hospital Care	0		
Inappropriate Physician Care	0		
In-Area Emergency/Urgent Serv. Denied	0		
Out-of-Area Emerg/Urgent Serv. Denied	0		
Plan Denial of Treatment	0		
Plan Inappropriate Care	0		
Plan Refusal to Refer	0		
Poor Physician/Staff Attitude	0		
Provider Entity Denial of Treatment	0		
Provider Entity Inappropriate Care	0		
Provider Entity Refusal to Refer	0		
Quality of Care Issues Subtotal:	0		0.0009
<b>Issues Total:</b>	<b>0</b>		

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Eyecare Service Plan, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	160,379	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Eyemed, Inc. (Eyexam 2000 of California, Inc.)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	972,741	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**For Eyes Vision Plan, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	21,398	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Foundation Health Vision (AVP)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	399,567	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**FPA Medical Management of CA, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	242,984	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Golden West Health Plan, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
3	203,108	0.1477	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.0492	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.0492	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0492	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.0492	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	2	0.0985	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	2	0.0985	0.0938
<b>Issues Total:</b>	<b>4</b>	<b>0.1969</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Great American Health Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	9,838	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Greater California Dental Plan (Smilesaver)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
4	338,834	0.1181	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	1	0.0295	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0295	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	2	0.0590	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	2	0.0590	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	2	0.0590	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	4	0.1181	0.0938
<b>Issues Total:</b>	<b>6</b>	<b>0.1771</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Greater Pacific HMO, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
6	2,854	21.0231	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	1	3.5039	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	1	3.5039	
Accessibility Issues Subtotal:	2	7.0077	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	4	14.0154	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	4	14.0154	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	1	3.5039	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	1	3.5039	
Quality of Care Issues Subtotal:	2	7.0077	0.6699
<b>Issues Total:</b>	<b>8</b>	<b>28.0308</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Health And Human Resource Center**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	157,629	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0023
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0039
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0051
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Health Benefits Inc. (Golden Eagle)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	3,416	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Health Net**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
386	2,171,738	1.7774	179

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	14	0.0645	
Lack of Primary Care Physician Availability	6	0.0276	
Lack of Specialist Availability	8	0.0368	
Lack of Telephone Accessibility	4	0.0184	
Accessibility Issues Subtotal:	32	0.1473	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	9	0.0414	
Disenrollment Problems	6	0.0276	
Dispute Over Covered Services	44	0.2026	
Does Not Like Benefit	9	0.0414	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	4	0.0184	
Slow Reply	12	0.0553	
Benefits/Coverage Issues Subtotal:	84	0.3868	0.2810
<b>Claims</b>			
Insufficient Payment	10	0.0460	
Premium Increased	1	0.0046	
Premium Refund Request	3	0.0138	
Refusal to Pay Equipment	9	0.0414	
Refusal to Pay Treatment	90	0.4144	
Slow Payment	18	0.0829	
Claims Issues Subtotal:	131	0.6032	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	2	0.0092	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	8	0.0368	
Inappropriate Hospital Care	1	0.0046	
Inappropriate Physician Care	21	0.0967	
In-Area Emergency/Urgent Serv. Denied	2	0.0092	
Out-of-Area Emerg/Urgent Serv. Denied	2	0.0092	
Plan Denial of Treatment	91	0.4190	
Plan Inappropriate Care	20	0.0921	
Plan Refusal to Refer	34	0.1566	
Poor Physician/Staff Attitude	1	0.0046	
Provider Entity Denial of Treatment	17	0.0783	
Provider Entity Inappropriate Care	8	0.0368	
Provider Entity Refusal to Refer	14	0.0645	
Quality of Care Issues Subtotal:	221	1.0176	0.6699
<b>Issues Total:</b>	<b>468</b>	<b>2.1550</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Health Plan of The Redwoods**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
19	87,666	2.1673	4

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	2	0.2281	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	1	0.1141	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	3	0.3422	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	2	0.2281	
Slow Payment	1	0.1141	
Claims Issues Subtotal:	3	0.3422	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	2	0.2281	
Out-of-Area Emerg/Urgent Serv. Denied	1	0.1141	
Plan Denial of Treatment	7	0.7985	
Plan Inappropriate Care	3	0.3422	
Plan Refusal to Refer	2	0.2281	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	15	1.7110	0.6699
<b>Issues Total:</b>	<b>21</b>	<b>2.3955</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Healthdent of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
3	17,063	1.7582	3

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.5861	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.5861	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.5861	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	2	1.1721	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	3	1.7582	0.0938
<b>Issues Total:</b>	<b>4</b>	<b>2.3443</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Heritage Provider Network, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	353,600	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**HMO California (Healthmax America)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	0		0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0		
Lack of Primary Care Physician Availability	0		
Lack of Specialist Availability	0		
Lack of Telephone Accessibility	0		
Accessibility Issues Subtotal:	0		0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0		
Cancellation of Coverage	0		
Disenrollment Problems	0		
Dispute Over Covered Services	0		
Does Not Like Benefit	0		
Improper Marketing/Solicitation	0		
Non-Acceptance for Coverage	0		
Slow Reply	0		
Benefits/Coverage Issues Subtotal:	0		0.2810
<b>Claims</b>			
Insufficient Payment	0		
Premium Increased	0		
Premium Refund Request	0		
Refusal to Pay Equipment	0		
Refusal to Pay Treatment	0		
Slow Payment	0		
Claims Issues Subtotal:	0		0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0		
Inadequate Facilities	0		
Inappropriate Ancillary Care	0		
Inappropriate Hospital Care	0		
Inappropriate Physician Care	0		
In-Area Emergency/Urgent Serv. Denied	0		
Out-of-Area Emerg/Urgent Serv. Denied	0		
Plan Denial of Treatment	0		
Plan Inappropriate Care	1		
Plan Refusal to Refer	0		
Poor Physician/Staff Attitude	0		
Provider Entity Denial of Treatment	0		
Provider Entity Inappropriate Care	0		
Provider Entity Refusal to Refer	0		
Quality of Care Issues Subtotal:	1		0.6699
<b>Issues Total:</b>	<b>1</b>		

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Holman Professional Counseling Centers**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	156,641	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0023
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0039
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0051
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Human Affairs International of California**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	759,704	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0023
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0039
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0051
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Ideal Dental Health Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	1,641	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Inland Empire Health Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	165,301	0.0605	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	1	0.0605	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.0605	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>1</b>	<b>0.0605</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Inter Valley Health Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
10	65,021	1.5380	5

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.1538	
Does Not Like Benefit	1	0.1538	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	2	0.3076	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	1	0.1538	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.1538	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	2	0.3076	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	4	0.6152	
Plan Inappropriate Care	2	0.3076	
Plan Refusal to Refer	1	0.1538	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	1	0.1538	
Quality of Care Issues Subtotal:	10	1.5380	0.6699
<b>Issues Total:</b>	<b>13</b>	<b>1.9994</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Kaiser Foundation Added Choice Health Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	0		0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0		
Lack of Primary Care Physician Availability	0		
Lack of Specialist Availability	0		
Lack of Telephone Accessibility	0		
Accessibility Issues Subtotal:	0		0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0		
Cancellation of Coverage	0		
Disenrollment Problems	0		
Dispute Over Covered Services	0		
Does Not Like Benefit	0		
Improper Marketing/Solicitation	0		
Non-Acceptance for Coverage	0		
Slow Reply	0		
Benefits/Coverage Issues Subtotal:	0		0.2810
<b>Claims</b>			
Insufficient Payment	0		
Premium Increased	0		
Premium Refund Request	0		
Refusal to Pay Equipment	0		
Refusal to Pay Treatment	0		
Slow Payment	0		
Claims Issues Subtotal:	0		0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0		
Inadequate Facilities	0		
Inappropriate Ancillary Care	0		
Inappropriate Hospital Care	0		
Inappropriate Physician Care	0		
In-Area Emergency/Urgent Serv. Denied	0		
Out-of-Area Emerg/Urgent Serv. Denied	0		
Plan Denial of Treatment	0		
Plan Inappropriate Care	0		
Plan Refusal to Refer	0		
Poor Physician/Staff Attitude	0		
Provider Entity Denial of Treatment	0		
Provider Entity Inappropriate Care	0		
Provider Entity Refusal to Refer	0		
Quality of Care Issues Subtotal:	0		0.6699
<b>Issues Total:</b>	<b>0</b>		

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Kaiser Foundation Health Plan, Inc.**  
**1/1/1999 to 12/31/1999**

RFA'S Received  
657

Enrollees  
5,889,922

RFA's/10,000 Enrollees  
1.1155

Referrals to Plan  
313

Issue Category		Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue		Issues		
<b>Accessibility</b>				
Excessively Long Wait/Appt. Sched Time		35	0.0594	
Lack of Primary Care Physician Availability		10	0.0170	
Lack of Specialist Availability		8	0.0136	
Lack of Telephone Accessibility		10	0.0170	
	Accessibility Issues Subtotal:	63	0.1070	0.0780
<b>Benefits/Coverage</b>				
Assignment of Benefits		3	0.0051	
Cancellation of Coverage		14	0.0238	
Disenrollment Problems		22	0.0374	
Dispute Over Covered Services		29	0.0492	
Does Not Like Benefit		31	0.0526	
Improper Marketing/Solicitation		1	0.0017	
Non-Acceptance for Coverage		31	0.0526	
Slow Reply		21	0.0357	
	Benefits/Coverage Issues Subtotal:	152	0.2581	0.2810
<b>Claims</b>				
Insufficient Payment		19	0.0323	
Premium Increased		6	0.0102	
Premium Refund Request		5	0.0085	
Refusal to Pay Equipment		6	0.0102	
Refusal to Pay Treatment		131	0.2224	
Slow Payment		3	0.0051	
	Claims Issues Subtotal:	170	0.2886	0.3744
<b>Quality of Care</b>				
Experimental/Investigational Proc. Denied		3	0.0051	
Inadequate Facilities		3	0.0051	
Inappropriate Ancillary Care		11	0.0187	
Inappropriate Hospital Care		33	0.0560	
Inappropriate Physician Care		148	0.2513	
In-Area Emergency/Urgent Serv. Denied		32	0.0543	
Out-of-Area Emerg/Urgent Serv. Denied		10	0.0170	
Plan Denial of Treatment		47	0.0798	
Plan Inappropriate Care		103	0.1749	
Plan Refusal to Refer		68	0.1155	
Poor Physician/Staff Attitude		17	0.0289	
Provider Entity Denial of Treatment		2	0.0034	
Provider Entity Inappropriate Care		8	0.0136	
Provider Entity Refusal to Refer		7	0.0119	
	Quality of Care Issues Subtotal:	492	0.8353	0.6699
	<b>Issues Total:</b>	<b>877</b>	<b>1.4890</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Kern Health Systems, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	48,269	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Key Health Plan, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
3	10,576	2.8366	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	1	0.9455	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.9455	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	1	0.9455	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.9455	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	2	1.8911	0.6699
<b>Issues Total:</b>	<b>3</b>	<b>2.8366</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Landmark Healthplan of CA, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	215,496	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Other Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Other Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0000
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0026
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0000
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Laurel Dental Plan, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	312	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Lifeguard, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
21	246,528	0.8518	7

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	2	0.0811	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	2	0.0811	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	1	0.0406	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	2	0.0811	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	1	0.0406	
Benefits/Coverage Issues Subtotal:	4	0.1623	0.2810
<b>Claims</b>			
Insufficient Payment	1	0.0406	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	2	0.0811	
Refusal to Pay Treatment	3	0.1217	
Slow Payment	1	0.0406	
Claims Issues Subtotal:	7	0.2839	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.0406	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	1	0.0406	
Plan Denial of Treatment	7	0.2839	
Plan Inappropriate Care	1	0.0406	
Plan Refusal to Refer	4	0.1623	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	1	0.0406	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	15	0.6085	0.6699
<b>Issues Total:</b>	<b>28</b>	<b>1.1358</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Local Initiative Health Authority for LA Co /LA Care HP**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	613,315	0.0163	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	1	0.0163	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	1	0.0163	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.0163	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	1	0.0163	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	2	0.0326	0.6699
<b>Issues Total:</b>	<b>3</b>	<b>0.0489</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Managed Dental Care**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	28,598	0.3497	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.3497	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.3497	0.0938
<b>Issues Total:</b>	<b>1</b>	<b>0.3497</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Managed Health Network**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
3	13,243,763	0.0023	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0023
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0008	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.0008	0.0039
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	2	0.0015	
Plan Inappropriate Care	1	0.0008	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	3	0.0023	0.0051
<b>Issues Total:</b>	<b>4</b>	<b>0.0030</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Maxicare (Maxicare of California, Inc.)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
27	278,708	0.9688	26

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	2	0.0718	
Does Not Like Benefit	2	0.0718	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	5	0.1794	
Benefits/Coverage Issues Subtotal:	9	0.3229	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	1	0.0359	
Refusal to Pay Equipment	3	0.1076	
Refusal to Pay Treatment	10	0.3588	
Slow Payment	3	0.1076	
Claims Issues Subtotal:	17	0.6100	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	3	0.1076	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0359	
Plan Inappropriate Care	2	0.0718	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	1	0.0359	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	2	0.0718	
Quality of Care Issues Subtotal:	9	0.3229	0.6699
<b>Issues Total:</b>	<b>35</b>	<b>1.2558</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**MCC Behavioral Care of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
2	503,560	0.0397	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0023
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0199	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.0199	0.0039
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0199	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.0199	0.0051
<b>Issues Total:</b>	<b>2</b>	<b>0.0397</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Medical Eye Services, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	19,345	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Medpartners Provider Network, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
2	701,975	0.0285	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0142	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.0142	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0142	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.0142	0.6699
<b>Issues Total:</b>	<b>2</b>	<b>0.0285</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Merit Behavioral Care of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	867,198	0.0115	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0023
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0115	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.0115	0.0039
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0051
<b>Issues Total:</b>	<b>1</b>	<b>0.0115</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Merk-Medco Managed Care of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	39,277	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Other Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Other Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0000
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0026
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0000
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Molina Medical Centers (American Family)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	158,521	0.0000	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**National Med, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
14	49,024	2.8557	7

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	1	0.2040	
Lack of Specialist Availability	1	0.2040	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	2	0.4080	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	1	0.2040	
Dispute Over Covered Services	2	0.4080	
Does Not Like Benefit	1	0.2040	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	4	0.8159	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	1	0.2040	
Refusal to Pay Treatment	2	0.4080	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	3	0.6119	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	2	0.4080	
Plan Inappropriate Care	3	0.6119	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	1	0.2040	
Quality of Care Issues Subtotal:	6	1.2239	0.6699
<b>Issues Total:</b>	<b>15</b>	<b>3.0597</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Nval Visioncare Systems of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	3	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Omni Healthcare, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
23	94,578	2.4319	12

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	1	0.1057	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	2	0.2115	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	1	0.1057	
Slow Reply	1	0.1057	
Benefits/Coverage Issues Subtotal:	5	0.5287	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	1	0.1057	
Refusal to Pay Treatment	9	0.9516	
Slow Payment	1	0.1057	
Claims Issues Subtotal:	11	1.1631	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	1	0.1057	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	2	0.2115	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	4	0.4229	
Plan Inappropriate Care	3	0.3172	
Plan Refusal to Refer	2	0.2115	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	12	1.2688	0.6699
<b>Issues Total:</b>	<b>28</b>	<b>2.9605</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**On Lok Senior Health Services**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	810	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**One Health Plan of California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
2	64,819	0.3086	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.1543	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.1543	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	1	0.1543	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.1543	0.6699
<b>Issues Total:</b>	<b>2</b>	<b>0.3086</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**PacifiCare Behavioral Health of CA, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
8	1,262,238	0.0634	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.0079	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.0079	0.0023
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	4	0.0317	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	4	0.0317	0.0039
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.0079	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0079	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	2	0.0158	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	4	0.0317	0.0051
<b>Issues Total:</b>	<b>9</b>	<b>0.0713</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**PacifiCare Dental & Vision**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
26	943,416	0.2756	3

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	1	0.0106	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	1	0.0106	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	3	0.0318	
Does Not Like Benefit	1	0.0106	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	1	0.0106	
Benefits/Coverage Issues Subtotal:	5	0.0530	0.0443
<b>Claims</b>			
Insufficient Payment	4	0.0424	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	7	0.0742	
Slow Payment	2	0.0212	
Claims Issues Subtotal:	13	0.1378	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	14	0.1484	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0106	
Plan Inappropriate Care	1	0.0106	
Plan Refusal to Refer	1	0.0106	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	2	0.0212	
Provider Entity Refusal to Refer	1	0.0106	
Quality of Care Issues Subtotal:	20	0.2120	0.0938
<b>Issues Total:</b>	<b>39</b>	<b>0.4134</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**PacifiCare of California**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
445	2,301,296	1.9337	167

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	12	0.0521	
Lack of Primary Care Physician Availability	5	0.0217	
Lack of Specialist Availability	10	0.0435	
Lack of Telephone Accessibility	2	0.0087	
Accessibility Issues Subtotal:	29	0.1260	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	5	0.0217	
Disenrollment Problems	6	0.0261	
Dispute Over Covered Services	47	0.2042	
Does Not Like Benefit	8	0.0348	
Improper Marketing/Solicitation	3	0.0130	
Non-Acceptance for Coverage	4	0.0174	
Slow Reply	10	0.0435	
Benefits/Coverage Issues Subtotal:	83	0.3607	0.2810
<b>Claims</b>			
Insufficient Payment	14	0.0608	
Premium Increased	1	0.0043	
Premium Refund Request	3	0.0130	
Refusal to Pay Equipment	15	0.0652	
Refusal to Pay Treatment	81	0.3520	
Slow Payment	28	0.1217	
Claims Issues Subtotal:	142	0.6170	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	1	0.0043	
Inadequate Facilities	3	0.0130	
Inappropriate Ancillary Care	9	0.0391	
Inappropriate Hospital Care	4	0.0174	
Inappropriate Physician Care	40	0.1738	
In-Area Emergency/Urgent Serv. Denied	4	0.0174	
Out-of-Area Emerg/Urgent Serv. Denied	2	0.0087	
Plan Denial of Treatment	103	0.4476	
Plan Inappropriate Care	18	0.0782	
Plan Refusal to Refer	62	0.2694	
Poor Physician/Staff Attitude	3	0.0130	
Provider Entity Denial of Treatment	17	0.0739	
Provider Entity Inappropriate Care	6	0.0261	
Provider Entity Refusal to Refer	11	0.0478	
Quality of Care Issues Subtotal:	283	1.2297	0.6699
<b>Issues Total:</b>	<b>537</b>	<b>2.3335</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Pearle Visioncare, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	110,138	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Preferred Health Plan, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	15,842	0.0000	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Preventive Dental Systems, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	12,978	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**PrimeCare Dental Plan, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	5,770	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Primecare Medical Network, Inc. A CA Corp**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	117,850	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Priorityplus of California**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	101,790	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Private Medical-Care, Inc. (PMI)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
33	1,274,853	0.2589	21

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	4	0.0314	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	4	0.0314	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	3	0.0235	
Does Not Like Benefit	4	0.0314	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	1	0.0078	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	8	0.0628	0.0443
<b>Claims</b>			
Insufficient Payment	3	0.0235	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	8	0.0628	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	11	0.0863	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	9	0.0706	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	2	0.0157	
Plan Inappropriate Care	10	0.0784	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	2	0.0157	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	23	0.1804	0.0938
<b>Issues Total:</b>	<b>46</b>	<b>0.3608</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Procare Eye Exam, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	18,100	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**ProMed Health Care Administrators**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	0		0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0		
Lack of Primary Care Physician Availability	0		
Lack of Specialist Availability	0		
Lack of Telephone Accessibility	0		
Accessibility Issues Subtotal:	0		0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0		
Cancellation of Coverage	0		
Disenrollment Problems	0		
Dispute Over Covered Services	0		
Does Not Like Benefit	0		
Improper Marketing/Solicitation	0		
Non-Acceptance for Coverage	0		
Slow Reply	0		
Benefits/Coverage Issues Subtotal:	0		0.2810
<b>Claims</b>			
Insufficient Payment	0		
Premium Increased	0		
Premium Refund Request	0		
Refusal to Pay Equipment	0		
Refusal to Pay Treatment	0		
Slow Payment	0		
Claims Issues Subtotal:	0		0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0		
Inadequate Facilities	0		
Inappropriate Ancillary Care	0		
Inappropriate Hospital Care	0		
Inappropriate Physician Care	0		
In-Area Emergency/Urgent Serv. Denied	0		
Out-of-Area Emerg/Urgent Serv. Denied	0		
Plan Denial of Treatment	0		
Plan Inappropriate Care	0		
Plan Refusal to Refer	0		
Poor Physician/Staff Attitude	0		
Provider Entity Denial of Treatment	0		
Provider Entity Inappropriate Care	0		
Provider Entity Refusal to Refer	0		
Quality of Care Issues Subtotal:	0		0.6699
<b>Issues Total:</b>	<b>0</b>		

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Prudential Health Care Plan of CA, Inc.**  
**1/1/1999 to 12/31/1999**

RFA'S Received  
86

Enrollees  
938,060

RFA's/10,000 Enrollees  
0.9168

Referrals to Plan  
57

Issue Category		Issues	Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue		Issues		
<b>Accessibility</b>				
Excessively Long Wait/Appt. Sched Time		1	0.0107	
Lack of Primary Care Physician Availability		1	0.0107	
Lack of Specialist Availability		2	0.0213	
Lack of Telephone Accessibility		0	0.0000	
	Accessibility Issues Subtotal:	4	0.0426	0.0780
<b>Benefits/Coverage</b>				
Assignment of Benefits		0	0.0000	
Cancellation of Coverage		5	0.0533	
Disenrollment Problems		0	0.0000	
Dispute Over Covered Services		3	0.0320	
Does Not Like Benefit		0	0.0000	
Improper Marketing/Solicitation		1	0.0107	
Non-Acceptance for Coverage		0	0.0000	
Slow Reply		2	0.0213	
	Benefits/Coverage Issues Subtotal:	11	0.1173	0.2810
<b>Claims</b>				
Insufficient Payment		3	0.0320	
Premium Increased		1	0.0107	
Premium Refund Request		1	0.0107	
Refusal to Pay Equipment		0	0.0000	
Refusal to Pay Treatment		32	0.3411	
Slow Payment		9	0.0959	
	Claims Issues Subtotal:	46	0.4904	0.3744
<b>Quality of Care</b>				
Experimental/Investigational Proc. Denied		0	0.0000	
Inadequate Facilities		1	0.0107	
Inappropriate Ancillary Care		0	0.0000	
Inappropriate Hospital Care		0	0.0000	
Inappropriate Physician Care		8	0.0853	
In-Area Emergency/Urgent Serv. Denied		2	0.0213	
Out-of-Area Emerg/Urgent Serv. Denied		0	0.0000	
Plan Denial of Treatment		14	0.1492	
Plan Inappropriate Care		5	0.0533	
Plan Refusal to Refer		9	0.0959	
Poor Physician/Staff Attitude		0	0.0000	
Provider Entity Denial of Treatment		1	0.0107	
Provider Entity Inappropriate Care		0	0.0000	
Provider Entity Refusal to Refer		0	0.0000	
	Quality of Care Issues Subtotal:	40	0.4264	0.6699
	<b>Issues Total:</b>	<b>101</b>	<b>1.0767</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Regents of the University of California ( UC San Diego)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	14,536	0.6879	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.6879	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.6879	0.6699
<b>Issues Total:</b>	<b>1</b>	<b>0.6879</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Safeguard Health Plans, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
31	478,548	0.6478	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	1	0.0209	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	2	0.0418	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	3	0.0627	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	5	0.1045	
Does Not Like Benefit	1	0.0209	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	2	0.0418	
Benefits/Coverage Issues Subtotal:	8	0.1672	0.0443
<b>Claims</b>			
Insufficient Payment	2	0.0418	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	9	0.1881	
Slow Payment	1	0.0209	
Claims Issues Subtotal:	12	0.2508	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	12	0.2508	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	5	0.1045	
Plan Inappropriate Care	5	0.1045	
Plan Refusal to Refer	1	0.0209	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	23	0.4806	0.0938
<b>Issues Total:</b>	<b>46</b>	<b>0.9612</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**San Francisco Health Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	27,283	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**San Joaquin Co Health Commission (HP of San Joaquin)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	55,159	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**San Joaquin Valley Dental Plan, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	143	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0938
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**San Mateo Health Commission (HP of San Mateo)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	38,430	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Santa Clara Co. (Valley Health Plan)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	31,161	0.3209	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.3209	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.3209	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>1</b>	<b>0.3209</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Santa Clara County Health Authority(Snta Clar Family HP)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	44,437	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**SCAN Health Plan (SmartCare)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
22	37,782	5.8229	7

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	1	0.2647	
Lack of Primary Care Physician Availability	1	0.2647	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	2	0.5294	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	1	0.2647	
Improper Marketing/Solicitation	1	0.2647	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	1	0.2647	
Benefits/Coverage Issues Subtotal:	3	0.7940	0.2810
<b>Claims</b>			
Insufficient Payment	1	0.2647	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	2	0.5294	
Refusal to Pay Treatment	3	0.7940	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	6	1.5881	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	1	0.2647	
Inappropriate Physician Care	1	0.2647	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	4	1.0587	
Plan Inappropriate Care	4	1.0587	
Plan Refusal to Refer	2	0.5294	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	2	0.5294	
Provider Entity Inappropriate Care	1	0.2647	
Provider Entity Refusal to Refer	1	0.2647	
Quality of Care Issues Subtotal:	16	4.2348	0.6699
<b>Issues Total:</b>	<b>27</b>	<b>7.1463</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Scripps Clinic Health Services**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	16,223	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Sharp Health Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
5	75,545	0.6619	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	1	0.1324	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	1	0.1324	
Benefits/Coverage Issues Subtotal:	2	0.2647	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	2	0.2647	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	2	0.2647	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	1	0.1324	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.1324	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	2	0.2647	0.6699
<b>Issues Total:</b>	<b>6</b>	<b>0.7942</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**St. Joseph's Provider Network (Calaveras Provider Ntwk)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	26,167	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**THIPA Management Consultants, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	0		0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0		
Lack of Primary Care Physician Availability	0		
Lack of Specialist Availability	0		
Lack of Telephone Accessibility	0		
Accessibility Issues Subtotal:	0		0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0		
Cancellation of Coverage	0		
Disenrollment Problems	0		
Dispute Over Covered Services	0		
Does Not Like Benefit	0		
Improper Marketing/Solicitation	0		
Non-Acceptance for Coverage	0		
Slow Reply	0		
Benefits/Coverage Issues Subtotal:	0		0.2810
<b>Claims</b>			
Insufficient Payment	0		
Premium Increased	0		
Premium Refund Request	0		
Refusal to Pay Equipment	0		
Refusal to Pay Treatment	0		
Slow Payment	0		
Claims Issues Subtotal:	0		0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0		
Inadequate Facilities	0		
Inappropriate Ancillary Care	0		
Inappropriate Hospital Care	0		
Inappropriate Physician Care	0		
In-Area Emergency/Urgent Serv. Denied	0		
Out-of-Area Emerg/Urgent Serv. Denied	0		
Plan Denial of Treatment	0		
Plan Inappropriate Care	0		
Plan Refusal to Refer	0		
Poor Physician/Staff Attitude	0		
Provider Entity Denial of Treatment	0		
Provider Entity Inappropriate Care	0		
Provider Entity Refusal to Refer	0		
Quality of Care Issues Subtotal:	0		0.6699
<b>Issues Total:</b>	<b>0</b>		



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**U. S. Behavioral Health Plan, California**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
2	352,973	0.0567	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.0283	
Does Not Like Benefit	1	0.0283	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	2	0.0567	0.0023
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0039
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0283	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.0283	0.0051
<b>Issues Total:</b>	<b>3</b>	<b>0.0850</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**UDC Dental California, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
5	82,413	0.6067	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.1213	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.1213	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.1213	
In-Area Emergency/Urgent Serv. Denied	2	0.2427	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	1	0.1213	
Plan Refusal to Refer	1	0.1213	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	5	0.6067	0.0938
<b>Issues Total:</b>	<b>6</b>	<b>0.7280</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**United Concordia DP of CA (Mida)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
4	252,851	0.1582	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	1	0.0395	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	1	0.0395	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	2	0.0791	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	2	0.0791	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0395	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.0395	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.0395	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.0395	0.0938
<b>Issues Total:</b>	<b>5</b>	<b>0.1977</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**United Healthcare of CA, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
9	138,759	0.6486	12

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	1	0.0721	
Lack of Specialist Availability	1	0.0721	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	2	0.1441	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.0721	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	1	0.0721	
Benefits/Coverage Issues Subtotal:	2	0.1441	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	1	0.0721	
Refusal to Pay Treatment	2	0.1441	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	3	0.2162	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	1	0.0721	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	1	0.0721	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	1	0.0721	
Quality of Care Issues Subtotal:	3	0.2162	0.6699
<b>Issues Total:</b>	<b>10</b>	<b>0.7207</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Universal Care**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
10	250,828	0.3987	2

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	2	0.0797	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	1	0.0399	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	3	0.1196	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0399	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.0399	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	1	0.0399	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	2	0.0797	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	3	0.1196	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	1	0.0399	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	7	0.2791	0.6699
<b>Issues Total:</b>	<b>11</b>	<b>0.4385</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**ValueOptions of CA (fmrly Value Behavioral)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
1	325,674	0.0307	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.0307	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.0307	0.0023
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0039
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0051
<b>Issues Total:</b>	<b>1</b>	<b>0.0307</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Vision First Eye Care, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	2,359	0.0000	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Vision Plan of America**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	35,750	0.0000	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	



**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Vision Service Plan**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
3	9,030,575	0.0033	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.0011	
Does Not Like Benefit	1	0.0011	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	2	0.0022	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	1	0.0011	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	1	0.0011	0.0009
<b>Issues Total:</b>	<b>3</b>	<b>0.0033</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Visioncare of California (Sterling)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	235,993	0.0000	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Vision Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0018
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0000
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0009
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Vista Behavioral Health Plans**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	123,291	0.0000	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Psychological Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0000
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.0023
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.0039
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.0051
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Vivahealth, Inc. (BPS HMO)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
0	19,635	0.0000	1

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	0	0.0000	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	0	0.0000	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>0</b>	<b>0.0000</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Watts Health Foundation (UHP Healthcare)**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
11	103,550	1.0623	6

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	1	0.0966	
Lack of Specialist Availability	1	0.0966	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	2	0.1931	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.0966	
Does Not Like Benefit	1	0.0966	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	2	0.1931	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	2	0.1931	
Slow Payment	1	0.0966	
Claims Issues Subtotal:	3	0.2897	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	1	0.0966	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	3	0.2897	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	2	0.1931	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	1	0.0966	
Quality of Care Issues Subtotal:	7	0.6760	0.6699
<b>Issues Total:</b>	<b>14</b>	<b>1.3520</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Western Dental Services, Inc.**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
14	321,252	0.4358	12

Issue Category	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Dental Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	1	0.0311	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	1	0.0311	0.0082
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	1	0.0311	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	1	0.0311	0.0443
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	1	0.0311	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	1	0.0311	0.0892
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	6	0.1868	
In-Area Emergency/Urgent Serv. Denied	1	0.0311	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	6	0.1868	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	1	0.0311	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	14	0.4358	0.0938
<b>Issues Total:</b>	<b>17</b>	<b>0.5292</b>	

**California Department of Corporations**  
**Individual Report of 1999 Enrollee Requests for Assistance (RFA)**  
**Western Health Advantage**  
**1/1/1999 to 12/31/1999**

<u>RFA'S Received</u>	<u>Enrollees</u>	<u>RFA's/10,000 Enrollees</u>	<u>Referrals to Plan</u>
3	39,077	0.7677	0

Issue Category	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
Issue	Issues	Issues Per 10,000 Enrollees	Full Service Avg. Issues Per 10,000 Enrollees
<b>Accessibility</b>			
Excessively Long Wait/Appt. Sched Time	0	0.0000	
Lack of Primary Care Physician Availability	0	0.0000	
Lack of Specialist Availability	0	0.0000	
Lack of Telephone Accessibility	0	0.0000	
Accessibility Issues Subtotal:	0	0.0000	0.0780
<b>Benefits/Coverage</b>			
Assignment of Benefits	0	0.0000	
Cancellation of Coverage	0	0.0000	
Disenrollment Problems	0	0.0000	
Dispute Over Covered Services	0	0.0000	
Does Not Like Benefit	0	0.0000	
Improper Marketing/Solicitation	0	0.0000	
Non-Acceptance for Coverage	0	0.0000	
Slow Reply	0	0.0000	
Benefits/Coverage Issues Subtotal:	0	0.0000	0.2810
<b>Claims</b>			
Insufficient Payment	0	0.0000	
Premium Increased	0	0.0000	
Premium Refund Request	0	0.0000	
Refusal to Pay Equipment	0	0.0000	
Refusal to Pay Treatment	3	0.7677	
Slow Payment	0	0.0000	
Claims Issues Subtotal:	3	0.7677	0.3744
<b>Quality of Care</b>			
Experimental/Investigational Proc. Denied	0	0.0000	
Inadequate Facilities	0	0.0000	
Inappropriate Ancillary Care	0	0.0000	
Inappropriate Hospital Care	0	0.0000	
Inappropriate Physician Care	0	0.0000	
In-Area Emergency/Urgent Serv. Denied	0	0.0000	
Out-of-Area Emerg/Urgent Serv. Denied	0	0.0000	
Plan Denial of Treatment	0	0.0000	
Plan Inappropriate Care	0	0.0000	
Plan Refusal to Refer	0	0.0000	
Poor Physician/Staff Attitude	0	0.0000	
Provider Entity Denial of Treatment	0	0.0000	
Provider Entity Inappropriate Care	0	0.0000	
Provider Entity Refusal to Refer	0	0.0000	
Quality of Care Issues Subtotal:	0	0.0000	0.6699
<b>Issues Total:</b>	<b>3</b>	<b>0.7677</b>	