CMSP Utilizing Members and Expenditures by Aid Code

County Comparison-Butte

FY2019-2020 Dates of Service													
		All Co	unties			Butte County							
Aid Code	Member Months	Utilizing Members	Claims		Amount Paid	Member Months	Utilizing Members	Claims	А	mount Paid			
РН	52,067	5,195	24,017	\$	3,661,820	1,608	170	813	\$	82,174			
50	1,243	73	596	\$	203,786	71	6	92	\$	22,759			
8F	24	0	0	\$	-	3	0	0	\$	-			
85	0	0	0	\$	-	0	0	0	\$	-			
88	533	57	612	\$	174,977	33	6	81	\$	34,530			
89	4,335	294	1,892	\$	1,486,460	348	19	181	\$	174,512			
Total*	58,202		27,117	\$	5,527,043	2,063		1,167	\$	313,975			

* Total enrolled and utilizing members may be counted in more than one aid code for a given period

Data Source: Incurred claims from 7/1/2019 through 6/30/2020 and paid through January 31, 2021

Aid Codes Aid Code Descriptions (FY2019-2020):

- PH Path to Health Primary and preventative health care for persons with restricted scope Medi-Cal
- 50 CMSP Primary care, preventative care, and emergency benefits; member cannot verify citizenship undocumented (Share of Cost and no Share of Cost)
- 8F CMSP Acute inpatient benefits only; member is otherwise eligible for CMSP but has been placed into SNF care
- 85 CMSP Last Eligibility month May 1, 2016 (See ACL16-02)
- 88 CMSP At/below 138% of Federal Poverty Level (no Share of Cost) primary and preventative care with no share of cost.
- 89 CMSP 139% FLP up to 300% Federal Proverty Level (Share of Cost) primary and preventative care with no share of cost.

CMSP Utilizing Members and Expenditures by Service Type County Comparison-Butte

FY 2019-2020 Dates of Service											
	All Cou	ntie	s	Butte County							
Service Type	Utilizing Members	Amount Paid		Utilizing Members	Amount Paid						
AMBULANCE	30	\$	33,121	1	377						
CLINIC	5,167	\$	3,520,984	169	77,551						
HOME HEALTH/DME	4	\$	4,055	1	258						
HOSPITAL INPATIENT	140	\$	1,569,988	13	211,435						
HOSPITAL OUTPATIENT	276	\$	154,899	28	15,726						
PHARMACY	1,270	\$	207,363	37	8,235						
PHYSICIAN/MEDICAL	143	\$	35,275	3	276						
SPECIAL FACILITY	6	\$	1,358	1	115						
Total		\$	5,527,043		\$ 313,975						

Data Source: Incurred claims from 7/1/2019 through 6/30/2020 and paid through January 31, 2021

Service Type Descriptions:

Ambulance - Includes air and ground transportation

Clinic - Includes medical claims for Rural Health Clinics, Federally Qualified Health Centers & Tribal Health Program providers

Dental - Includes claims paid through AMM

Home Health/DME - Includes claims for home health and durable medical equipment not dispensed through a retail pharmacy

Hospital Inpatient - Includes acute care hospitals and inpatient mental health claims

Hospital Outpatient - Includes hospital outpatient services, including physical therapy, radiology, etc.

Pharmacy - Includes claims paid through MedImpact (CMSP's Pharmacy Benefit Manager)

Physician/Medical - Includes physicians and physicians groups

CMSP Eligibility by Aid Code by Month FY 2019-2020 Butte County

Aid Code	07-2019	08-2019	09-2019	10-2019	11-2019	12-2019	01-2020	02-2020	03-2020	04-2020	05-2020	06-2020
PH	95	109	116	123	120	120	131	132	122	137	186	217
50	4	6	5	3	6	7	7	7	8	6	6	6
8F	0	0	0	0	0	0	1	1	1	0	0	0
85	0	0	0	0	0	0	0	0	0	0	0	0
88	5	4	3	2	2	3	3	1	2	3	2	3
89	31	31	33	28	29	29	30	29	25	28	28	27
Total	135	150	157	156	157	159	172	170	158	174	222	253

Data Source: Through January 2021

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89 CMSP - 139% FLP up to 300% Federal Proverty Level (Share of Cost) - primary and preventative care with no share of cost.

CMSP Eligibility by Aid Code by Month FY 2019-2020 All County

Aid Code	07-2019	08-2019	09-2019	10-2019	11-2019	12-2019	01-2020	02-2020	03-2020	04-2020	05-2020	06-2020
PH	2898	3168	3371	3453	3596	3900	4301	4705	4883	5455	5928	6409
50	113	118	112	116	115	109	97	98	93	89	87	96
8F	1	1	1	2	2	2	3	3	3	2	2	2
85	0	0	0	0	0	0	0	0	0	0	0	0
88	60	60	52	42	41	38	38	39	42	40	40	41
89	535	516	478	442	386	341	280	262	264	250	273	308
Total	3607	3863	4014	4055	4140	4390	4719	5107	5285	5836	6330	6856

Data Source: Through January 2021

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