Medi-Cal Facts and Figures

For more on California's Medicaid program and how it has evolved over the years, see www.chcf.org.

CALIFORNIA HEALTH CARE ALMANAC QUICK REFERENCE GUIDE

DECEMBER 2017



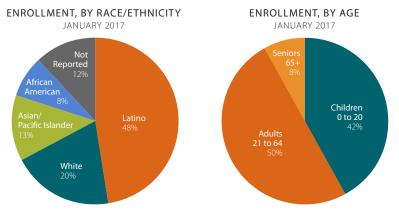
MEDI-CAL ENROLLMENT, JANUARY 2006 TO JANUARY 2017 (IN MILLIONS)





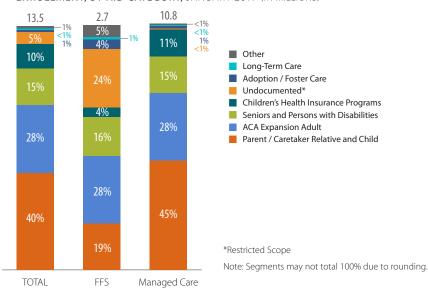
ELIGIBILITY LEVELS, SELECTED PROGRAMS, BY DEMOGRAPHIC, 2017

Adults: 138% FPL (ACA expansion) Pregnant Women: 213% FPL Children: 266% FPL Note: In 2017, the Federal Poverty Level (*FPL*) is \$12,060 for a single person and \$24,600 for a family of 4.



Notes: In 2017, Native American enrollment was <1%. Segments may not total 100% due to rounding.

ENROLLMENT, BY AID CATEGORY, JANUARY 2017 (IN MILLIONS)



Sources: E-4 Population Estimates for Cities, Counties, and the State, 2001-2010, with 2000 & 2010 Census Counts (November 2012) and E-4 Population Estimates for Cities, Counties, and the State, 2011-2017, with 2010 Census Benchmark (May 2017), State of California, Department of Finance, Sacramento, California. Trend in Medi-Cal Program Enrollment by Managed Care Status, FY 2004-12 (July 2013), California Department of Health Care Services (DHCS). Medi-Cal Certified Eligibles Statewide Pivot, June 2017, DHCS, www.dhcs.ca.gov. Medi-Cal Monthly Enrollments Fast Facts, January 2017, DHCS, www.dhcs.ca.gov (PDF).

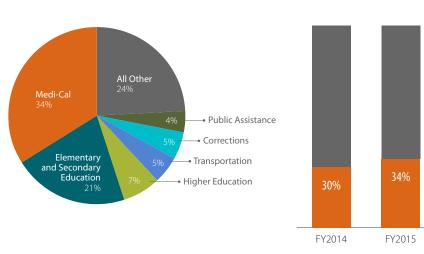
CALIFORNIA STATE EXPENDITURES FY2015

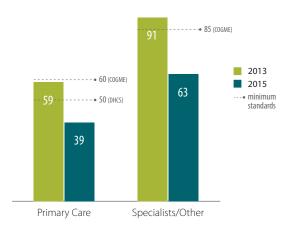
MEDI-CAL SHARE OF STATE EXPENDITURES FY2014 TO FY2016

35%

FY2016

MEDI-CAL PARTICIPATING PHYSICIANS PER 100,000 ENROLLEES, 2013 AND 2015



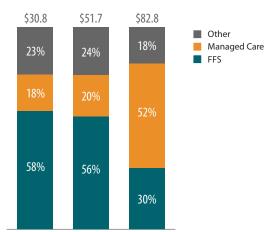


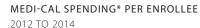
Note: State expenditures includes spending from state funds, federal matching funds, and other funds and revenue sources.

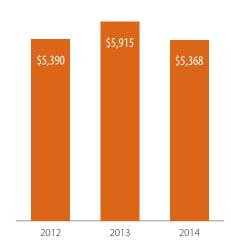
Notes: The Council of Graduate Medical Education (COGME) studies workforce trends and needs. COGME ratios include Doctors of Osteopathic Medicine (DOs). Department of Health Care Services (DHCS) does not have a minimum standard for Specialists/Other.

MEDI-CAL EXPENDITURES, BY SERVICE CATEGORY

FY2006 TO FY2016, SELECTED YEARS (IN BILLIONS)

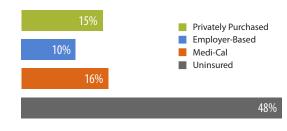






*Defined as personal health care spending, which excludes public health activities, administration, and investment.

NO USUAL SOURCE OF CARE, 2016



DELAYED OR DIDN'T GET MEDICAL CARE, 2016



Notes: *Other* includes dental, mental health, audits, Early and Periodic Screening, Diagnostic and Treatment (EPSDT), Medicare, Drug Medi-Cal, state hospital, recoveries, and miscellaneous services. Excludes general funds for state departments other than DHCS.

FY2016

Sources: State Expenditure Report (2016), National Association of State Budget Officers, www.nasbo.org (PDF). Medi-Cal Local Assistance Estimates, State of California, Department of Health Care Services, May 2006, May 2011, May 2016. California Health Interview Survey, University of California, Los Angeles, 2016. "Health Expenditures by State of Residence, 1991-2014," Centers for Medicare & Medicaid Services, www.cms.gov.

CALIFORNIA HEALTH CARE FOUNDATION

FY2011

FY2006

Foundation

California Health Care

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