

	NHP COUNT	UHP COUNT	THP COUNT	TERMINATIONS COUNT	TOTAL COUNT	RITE CARE HOUSEHOLD ENROLLMENT COUNT
PROGRAM : MEDICAID EXPANSION						
MEMBER CHOICE	1341	785	069			
60 DAY LOOK BACK	053	025	006			
DEFAULT TO FAMILY PLAN	037	037	003			
RANDOM AUTO-ASSIGNMENT	038	034	288			
PROGRAM TOTAL:	1469	881	366	938	1778	
	54.1%	32.4%	13.5%			
PROGRAM : RHODY HEALTH PARTNERS						
MEMBER CHOICE	041	027	003			
60 DAY LOOK BACK	000	007	004			
DEFAULT TO FAMILY PLAN	008	004	000			
RANDOM AUTO-ASSIGNMENT	004	004	026			
PROGRAM TOTAL:	053	042	033	177	-49	
	41.4%	32.8%	25.8%			
PROGRAM : RITE CARE						
MEMBER CHOICE	492	225	066			683
60 DAY LOOK BACK	004	001	002			006
DEFAULT TO FAMILY PLAN	024	003	004			022
RANDOM AUTO-ASSIGNMENT	011	008	078			097
AUTO-ASSIGNMENT FAM	003	002	048			034
PROGRAM TOTAL:	534	239	198	949	022	
	55.0%	24.6%	20.4%			
PLAN GRAND TOTAL	2056	1162	597	2064	1751	

 NOTE:

**AUTO-ASSIGNMENT CATEGORY DEFINITIONS:

MEMBER CHOICE: HEALTH PLAN (NHP, UHP, THP) ASSIGNMENT IS SELECTED BY THE RECIPIENT.

60 DAY LOOK-BACK: HEALTH PLAN (NHP, UHP, THP) ASSIGNMENT IS BASED ON PREVIOUS ENROLLMENT SEGMENT FOR THE RECIPIENT WITHIN THE PAST 60 DAYS.

DEFAULT TO FAMILY PLAN: THE HEALTH PLAN (NHP, UHP, THP) ASSIGNMENT IS BASED ON EXISTING HEAD OF HOUSEHOLD FAMILY ENROLLMENT WITH AN EXISTING HEALTH PLAN.

RANDOM AUTO-ASSIGNMENT: HEALTH PLAN (NHP, UHP, THP) ASSIGNMENT IS BASED ON RANDOM AUTO-ASSIGNMENT PROCESSING WHERE THERE IS NO SELECTION BY RECIPIENT AND NO PREVIOUS ENROLLMENT WITHIN THE PAST 60 DAYS.

RANDOM AUTO-ASSIGNMENT TO FAMILY PLAN: FOR RITE CARE ONLY, THE HEALTH PLAN (NHP, UHP, THP) ASSIGNMENT IS APPLIED WHEN ANOTHER FAMILY MEMBER HAS BEEN RANDOMLY AUTO-ASSIGNED WITHIN THE SAME DAY. THE PROCESS WILL SYSTEMATICALLY ENROLL ALL ELIGIBLE FAMILY MEMBERS IN THE SAME PLAN WITH SAME START DATE AND IS BASED ON THE ELIGIBLE HEAD OF HOUSEHOLD TO BE AUTO-ASSIGNED (OR THE OLDEST FAMILY MEMBER RANDOMLY AUTO-ASSIGNED). DOES NOT INCLUDE CORRESPONDING HEAD OF HOUSEHOLD COUNT AS THAT COUNT IS INCLUDED IN THE RANDOM AUTO-ASSIGNMENT COUNT.

**HEALTH PLAN COUNTS: INCLUDES NEW ENROLLMENT SEGMENTS ONLY (DOES NOT INCLUDE PLAN CHANGES WITHIN THE SAME PROGRAM)

**TERMINATION COUNT: INCLUDES ENROLLMENT SEGMENTS TERMINATED/CANCELLED DURING THE MONTH WHERE ANOTHER ACTIVE SEGMENT WAS NOT CREATED WITHIN THE SAME PROGRAM

**TOTAL COUNT: SUM OF ALL HEALTH PLAN ENROLLMENTS WITHIN THE PROGRAM LESS TERMINATIONS COUNT

**RITE CARE HOUSEHOLD ENROLLMENT COUNT: TOTAL NUMBER OF DISTINCT HOUSEHOLDS ENROLLED

**DATA CONTENT DISCLOSURE: DATA QUALITY IS DEPENDENT UPON EXISTING AUTO-ASSIGNMENT FUNCTIONALITY AND PLAN CHOICE DATA AND MAY DIFFER WHEN COMPARED TO OTHER REPORTS DUE TO TIMING OF DATA COLLECTION AND LOGIC DIFFERENCES IMPACTING TOTALS. MANUAL ENROLLMENTS (FACN=) WILL BE INCLUDED IN THE HEALTH PLAN COUNTS AND ASSIGNED AS 'MEMBER CHOICE'.

**REPORT IS REFLECTING ALL ENROLLMENT TRANSACTIONS RECORDED DURING THE INDICATED PERIOD, WHICH COULD INCLUDE:
 ENROLLMENTS EFFECTIVE FIRST DAY OF THE PROSPECTIVE MONTH.
 FUTURE ENROLLMENTS: THOSE WITH AN EFFECTIVE DATE GREATER THAN THE FIRST DAY OF THE PROSPECTIVE MONTH.
 RETRO ENROLLMENTS: THOSE WITH AN EFFECTIVE DATE PREVIOUS TO THE FIRST DAY OF THE PROSPECTIVE MONTH.

END OF REPORT

