

	NHP	UHP	THP	TERMINATIONS	TOTAL	RITE CARE HOUSEHOLD
	COUNT	COUNT	COUNT	COUNT	COUNT	ENROLLMENT COUNT
PROGRAM : MEDICAID EXPANSION						
MEMBER CHOICE	1498	743	105			
60 DAY LOOK BACK	105	043	015			
DEFAULT TO FAMILY PLAN	012	005	002			
RANDOM AUTO-ASSIGNMENT	026	023	191			
PROGRAM TOTAL:	1641	814	313	668	2100	
	59.3%	29.4%	11.3%			
PROGRAM : RHODY HEALTH PARTNERS						
MEMBER CHOICE	053	033	004			
60 DAY LOOK BACK	000	000	000			
DEFAULT TO FAMILY PLAN	000	000	000			
RANDOM AUTO-ASSIGNMENT	000	000	000			
PROGRAM TOTAL:	053	033	004	159	-69	
	58.9%	36.7%	4.4%			
PROGRAM : RITE CARE						
MEMBER CHOICE	723	300	087			918
60 DAY LOOK BACK	035	013	000			036
DEFAULT TO FAMILY PLAN	044	024	013			043
RANDOM AUTO-ASSIGNMENT	009	008	112			129
AUTO-ASSIGNMENT FAM	007	003	054			042
PROGRAM TOTAL:	818	348	266	1474	-42	
	57.1%	24.3%	18.6%			
PLAN GRAND TOTAL	2512	1195	583	2301	1989	

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 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