

	NHP	UHP	THP	TERMINATIONS	TOTAL	RITE CARE HOUSEHOLD
	COUNT %	COUNT %	COUNT %	COUNT	COUNT	ENROLLMENT COUNT

PROGRAM : MEDICAID EXPANSION

MEMBER CHOICE	1196	620	090			
60 DAY LOOK BACK	091	050	011			
DEFAULT TO FAMILY PLAN	003	001	004			
RANDOM AUTO-ASSIGNMENT	021	018	153			
PROGRAM TOTAL:	1311 58.1%	689 30.5%	258 11.4%	768	1490	

PROGRAM : RHODY HEALTH PARTNERS

MEMBER CHOICE	047	025	003			
60 DAY LOOK BACK	008	008	005			
DEFAULT TO FAMILY PLAN	014	000	000			
RANDOM AUTO-ASSIGNMENT	005	006	032			
PROGRAM TOTAL:	074 48.4%	039 25.5%	040 26.1%	185	-32	

PROGRAM : RITE CARE

MEMBER CHOICE	460	216	079		635	
60 DAY LOOK BACK	004	002	001		007	
DEFAULT TO FAMILY PLAN	025	016	008		037	
RANDOM AUTO-ASSIGNMENT	015	009	100		124	
AUTO-ASSIGNMENT FAM	008	008	071		051	
PROGRAM TOTAL:	512 50.1%	251 24.6%	259 25.3%	1138	-116	

PLAN	GRAND	TOTAL	1897	979	557	2091	1342
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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 (FACNs) 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