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

PROGRAM : MEDICAID EXPANSION

MEMBER CHOICE	1335		734		068				
60 DAY LOOK BACK	090		053		024				
DEFAULT TO FAMILY PLAN	013		007		000				
RANDOM AUTO-ASSIGNMENT	096		094		095				
PROGRAM TOTAL:	1534	58.8%	888	34.0%	187	7.2%	774	1835	

PROGRAM : RHODY HEALTH PARTNERS

MEMBER CHOICE	054		038		004				
60 DAY LOOK BACK	007		013		003				
DEFAULT TO FAMILY PLAN	030		007		002				
RANDOM AUTO-ASSIGNMENT	014		012		012				
PROGRAM TOTAL:	105	53.6%	070	35.7%	021	10.7%	178	018	

PROGRAM : RITE CARE

MEMBER CHOICE	488		168		071				670
60 DAY LOOK BACK	001		000		000				001
DEFAULT TO FAMILY PLAN	001		004		000				005
RANDOM AUTO-ASSIGNMENT	053		065		066				184
AUTO-ASSIGNMENT FAM	032		040		033				066
PROGRAM TOTAL:	575	56.3%	277	27.1%	170	16.6%	1109	-87	

PLAN GRAND TOTAL	2214		1235		378		2061	1766	

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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.
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                                              END OF REPORT