

	NHP COUNT	%	UHP COUNT	%	THP COUNT	%	TOTAL COUNT
PROGRAM : MEDICAID EXPANSION							
01 DEATH	00001		00001		00000		00002
15 INCARCERATED	00068		00035		00008		00111
30 LOSS OF PROGRAM ELIGIBILITY	00050		00027		00009		00086
31 LOST MEDICAID ELIGIBILITY	00088		00072		00020		00180
34 PERMANENT PLACEMENT IN NURSING HOME	00000		00000		00000		00000
36 PLAN CHANGE	00019		00022		00002		00043
37 PROGRAM CHANGE	00020		00012		00003		00035
PROGRAM TOTAL:	00246	53.8%	00169	37.0%	00042	9.2%	00457
PROGRAM : RITE CARE							
01 DEATH	00000		00000		00000		00000
05 ELIGIBILITY DETERMINATION ERROR	00000		00000		00000		00000
14 LOSS OF ELIGIBILITY	00340		00218		00066		00624
15 OTHER	00103		00066		00026		00195
17 CHANGE IN ELIGIBILITY ONLY	01969		00986		00200		03155
18 REDETERMINATION OF ELIG DURING 6 MO GUARANTEE	00000		00000		00000		00000
19 LOSS OF MANAGED CARE ELIGIBILITY	00260		00164		00017		00441
20 CLOSURE DUE TO CHANGE IN MID	00000		00000		00000		00000
22 DETERMINED RITE SHARE ELIGIBLE	00025		00012		00000		00037
42 90 DAY PLAN CHANGE	00004		00005		00014		00023
PROGRAM TOTAL:	02701	60.4%	01451	32.4%	00323	7.2%	04475
PROGRAM : RITESMILES							
01 DEATH	00000		00000		00000		00000
02 NON-RI ADDRESS FOUND	00000		00125		00000		00125
10 TPL DENTAL COVERAGE ACQUIRED	00000		00009		00000		00009
15 INCARCERATED	00000		00006		00000		00006
30 CANCELLED DENTAL PLAN	00000		00000		00000		00000
31 NO MA ELIGIBILITY FOUND	00000		00399		00000		00399
36 NO RS AID CATEGORY	00000		00000		00000		00000
PROGRAM TOTAL:	00000	0.0%	00539	100.0%	00000	0.0%	00539
PLAN GRAND TOTAL	02947		02159		00365		05471

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PROGRAM : TRANSPORTATION BROKER							
	MTM COUNT	%					
01 DOD IS APPLIED	00019		00000		00000		00019
14 AID CATEGORY CODE NOT APPROVED	00040		00000		00000		00040
15 INCARCERATED	00158		00000		00000		00158
31 LOST MEDICAID ELIGIBILITY	01304		00000		00000		01304
36 ACQUIRED NEW AID CATEGORY	01758		00000		00000		01758
37 ACQUIRED PACE	00007		00000		00000		00007
TRANSPORTATION BROKER PROGRAM TOTAL:	03286	100.0%	00000	0.0%	00000	0.0%	03286

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NOTE:  
 \*\*REPORT IS REFLECTING ALL TERMINATION TRANSACTIONS RECORDED DURING THE INDICATED PERIOD:  
 TERMINATIONS EFFECTIVE ANY DAY OF THE REPORT RUN MONTH.

\*\*THIS REPORT WILL POPULATE ONLY THE TOP REASON CODES; THEREFORE, THE TOTAL NUMBER OF TERMINATIONS  
 MAY NOT ALIGN WITH OTHER REPORTING. PER PRIOR AGREEMENT WITH THE STATE, ALL REASON CODES ARE NOT  
 LISTED IN THIS REPORT.

END OF REPORT