

	NHP COUNT	%	UHP COUNT	%	THP COUNT	%	TOTAL COUNT
PROGRAM : MEDICAID EXPANSION							
01 DEATH	00000		00004		00000		00004
15 INCARCERATED	00062		00029		00010		00101
30 LOSS OF PROGRAM ELIGIBILITY	00046		00023		00007		00076
31 LOST MEDICAID ELIGIBILITY	00061		00070		00018		00149
34 PERMANENT PLACEMENT IN NURSING HOME	00000		00000		00000		00000
36 PLAN CHANGE	00010		00004		00001		00015
37 PROGRAM CHANGE	00024		00011		00001		00036
PROGRAM TOTAL:	00203	53.3%	00141	37.0%	00037	9.7%	00381
PROGRAM : RITE CARE							
01 DEATH	00001		00000		00000		00001
05 ELIGIBILITY DETERMINATION ERROR	00000		00000		00000		00000
14 LOSS OF ELIGIBILITY	00273		00173		00033		00479
15 OTHER	00095		00036		00012		00143
17 CHANGE IN ELIGIBILITY ONLY	02072		00999		00220		03291
18 REDETERMINATION OF ELIG DURING 6 MO GUARANTEE	00000		00000		00000		00000
19 LOSS OF MANAGED CARE ELIGIBILITY	00272		00165		00015		00452
20 CLOSURE DUE TO CHANGE IN MID	00000		00000		00000		00000
22 DETERMINED RITE SHARE ELIGIBLE	00021		00032		00000		00053
42 90 DAY PLAN CHANGE	00004		00010		00024		00038
PROGRAM TOTAL:	02738	61.4%	01415	31.7%	00304	6.8%	04458
PROGRAM : RITESMILES							
01 DEATH	00000		00002		00000		00002
02 NON-RI ADDRESS FOUND	00000		00110		00000		00110
10 TPL DENTAL COVERAGE ACQUIRED	00000		00062		00000		00062
15 INCARCERATED	00000		00005		00000		00005
30 CANCELLED DENTAL PLAN	00000		00000		00000		00000
31 NO MA ELIGIBILITY FOUND	00000		00291		00000		00291
36 NO RS AID CATEGORY	00000		00000		00000		00000
PROGRAM TOTAL:	00000	0.0%	00470	100.0%	00000	0.0%	00470
PLAN GRAND TOTAL	02941		02026		00341		05309

PROGRAM : TRANSPORTATION BROKER	MTM COUNT	%					
01 DOD IS APPLIED	00028		00000		00000		00028
14 AID CATEGORY CODE NOT APPROVED	00011		00000		00000		00011
15 INCARCERATED	00142		00000		00000		00142
31 LOST MEDICAID ELIGIBILITY	00873		00000		00000		00873
36 ACQUIRED NEW AID CATEGORY	01258		00000		00000		01258
37 ACQUIRED PACE	00016		00000		00000		00016
TRANSPORTATION BROKER PROGRAM TOTAL:	02328	100.0%	00000	0.0%	00000	0.0%	02328

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