

	NHP COUNT	%	UHP COUNT	%	THP COUNT	%	TOTAL COUNT
PROGRAM : MEDICAID EXPANSION							
01 DEATH	00000		00000		00000		00000
15 INCARCERATED	00070		00036		00014		00120
30 LOSS OF PROGRAM ELIGIBILITY	00066		00026		00008		00100
31 LOST MEDICAID ELIGIBILITY	00128		00082		00015		00225
34 PERMANENT PLACEMENT IN NURSING HOME	00000		00000		00000		00000
36 PLAN CHANGE	00014		00008		00006		00028
37 PROGRAM CHANGE	00022		00010		00001		00033
PROGRAM TOTAL:	00300	59.3%	00162	32.0%	00044	8.7%	00506
PROGRAM : RITE CARE							
01 DEATH	00002		00000		00000		00002
05 ELIGIBILITY DETERMINATION ERROR	00000		00000		00000		00000
14 LOSS OF ELIGIBILITY	00383		00222		00095		00700
15 OTHER	00088		00044		00015		00147
17 CHANGE IN ELIGIBILITY ONLY	01957		00923		00170		03050
18 REDETERMINATION OF ELIG DURING 6 MO GUARANTEE	00000		00000		00000		00000
19 LOSS OF MANAGED CARE ELIGIBILITY	00276		00163		00018		00457
20 CLOSURE DUE TO CHANGE IN MID	00000		00000		00000		00000
22 DETERMINED RITE SHARE ELIGIBLE	00019		00006		00001		00026
42 90 DAY PLAN CHANGE	00004		00003		00005		00012
PROGRAM TOTAL:	02729	62.1%	01361	31.0%	00304	6.9%	04394
PROGRAM : RITESMILES							
01 DEATH	00000		00001		00000		00001
02 NON-RI ADDRESS FOUND	00000		00155		00000		00155
10 TPL DENTAL COVERAGE ACQUIRED	00000		00056		00000		00056
15 INCARCERATED	00000		00008		00000		00008
30 CANCELLED DENTAL PLAN	00000		00000		00000		00000
31 NO MA ELIGIBILITY FOUND	00000		00430		00000		00430
36 NO RS AID CATEGORY	00000		00000		00000		00000
PROGRAM TOTAL:	00000	0.0%	00650	100.0%	00000	0.0%	00650
PLAN GRAND TOTAL	03029		02173		00348		05550

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PROGRAM : TRANSPORTATION BROKER							
	MTM COUNT	%					
01 DOD IS APPLIED	00015		00000		00000		00015
14 AID CATEGORY CODE NOT APPROVED	00015		00000		00000		00015
15 INCARCERATED	00159		00000		00000		00159
31 LOST MEDICAID ELIGIBILITY	01210		00000		00000		01210
36 ACQUIRED NEW AID CATEGORY	01643		00000		00000		01643
37 ACQUIRED PACE	00013		00000		00000		00013
TRANSPORTATION BROKER PROGRAM TOTAL:	03055	100.0%	00000	0.0%	00000	0.0%	03055

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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