

	NHP COUNT	%	UHP COUNT	%	THP COUNT	%	TOTAL COUNT
PROGRAM : MEDICAID EXPANSION							
01 DEATH	00000		00000		00000		00000
15 INCARCERATED	00063		00023		00010		00096
30 LOSS OF PROGRAM ELIGIBILITY	00053		00037		00007		00097
31 LOST MEDICAID ELIGIBILITY	00064		00047		00013		00124
34 PERMANENT PLACEMENT IN NURSING HOME	00000		00000		00000		00000
36 PLAN CHANGE	00020		00008		00004		00032
37 PROGRAM CHANGE	00027		00015		00001		00043
PROGRAM TOTAL:	00227	57.9%	00130	33.2%	00035	8.9%	00392
PROGRAM : RITE CARE							
01 DEATH	00000		00000		00000		00000
05 ELIGIBILITY DETERMINATION ERROR	00000		00000		00000		00000
14 LOSS OF ELIGIBILITY	00330		00156		00044		00530
15 OTHER	00098		00046		00007		00151
17 CHANGE IN ELIGIBILITY ONLY	02394		01052		00190		03636
18 REDETERMINATION OF ELIG DURING 6 MO GUARANTEE	00002		00000		00000		00002
19 LOSS OF MANAGED CARE ELIGIBILITY	00283		00187		00014		00484
20 CLOSURE DUE TO CHANGE IN MID	00001		00000		00000		00001
22 DETERMINED RITE SHARE ELIGIBLE	00007		00005		00000		00012
42 90 DAY PLAN CHANGE	00017		00018		00018		00053
PROGRAM TOTAL:	03132	64.3%	01464	30.1%	00273	5.6%	04869
PROGRAM : RITESMILES							
01 DEATH	00000		00000		00000		00000
02 NON-RI ADDRESS FOUND	00000		00137		00000		00137
10 TPL DENTAL COVERAGE ACQUIRED	00000		00078		00000		00078
15 INCARCERATED	00000		00004		00000		00004
30 CANCELLED DENTAL PLAN	00000		00000		00000		00000
31 NO MA ELIGIBILITY FOUND	00000		00356		00000		00356
36 NO RS AID CATEGORY	00000		00000		00000		00000
PROGRAM TOTAL:	00000	0.0%	00575	100.0%	00000	0.0%	00575
PLAN GRAND TOTAL	03359		02169		00308		05836

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PROGRAM : TRANSPORTATION BROKER							
	MTM COUNT	%					
01 DOD IS APPLIED	00014		00000		00000		00014
14 AID CATEGORY CODE NOT APPROVED	00018		00000		00000		00018
15 INCARCERATED	00126		00000		00000		00126
31 LOST MEDICAID ELIGIBILITY	00893		00000		00000		00893
36 ACQUIRED NEW AID CATEGORY	01365		00000		00000		01365
37 ACQUIRED PACE	00006		00000		00000		00006
TRANSPORTATION BROKER PROGRAM TOTAL:	02422	100.0%	00000	0.0%	00000	0.0%	02422

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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