

	NHP COUNT	%	UHP COUNT	%	THP COUNT	%	TOTAL COUNT
PROGRAM : MEDICAID EXPANSION							
01 DEATH	00000		00002		00000		00002
15 INCARCERATED	00062		00027		00010		00099
30 LOSS OF PROGRAM ELIGIBILITY	00052		00022		00006		00080
31 LOST MEDICAID ELIGIBILITY	00076		00051		00015		00142
34 PERMANENT PLACEMENT IN NURSING HOME	00000		00000		00000		00000
36 PLAN CHANGE	00018		00011		00001		00030
37 PROGRAM CHANGE	00041		00015		00000		00056
PROGRAM TOTAL:	00249	60.9%	00128	31.3%	00032	7.8%	00409
PROGRAM : RITE CARE							
01 DEATH	00003		00000		00000		00003
05 ELIGIBILITY DETERMINATION ERROR	00000		00000		00000		00000
14 LOSS OF ELIGIBILITY	00382		00215		00083		00680
15 OTHER	00074		00022		00010		00106
17 CHANGE IN ELIGIBILITY ONLY	02765		01206		00200		04171
18 REDETERMINATION OF ELIG DURING 6 MO GUARANTEE	00000		00000		00000		00000
19 LOSS OF MANAGED CARE ELIGIBILITY	00281		00141		00015		00437
20 CLOSURE DUE TO CHANGE IN MID	00001		00000		00001		00002
22 DETERMINED RITE SHARE ELIGIBLE	00014		00002		00000		00016
42 90 DAY PLAN CHANGE	00027		00008		00017		00052
PROGRAM TOTAL:	03547	64.9%	01594	29.2%	00326	6.0%	05467
PROGRAM : RITESMILES							
01 DEATH	00000		00001		00000		00001
02 NON-RI ADDRESS FOUND	00000		00180		00000		00180
10 TPL DENTAL COVERAGE ACQUIRED	00000		00049		00000		00049
15 INCARCERATED	00000		00004		00000		00004
30 CANCELLED DENTAL PLAN	00000		00000		00000		00000
31 NO MA ELIGIBILITY FOUND	00000		00435		00000		00435
36 NO RS AID CATEGORY	00000		00000		00000		00000
PROGRAM TOTAL:	00000	0.0%	00669	100.0%	00000	0.0%	00669
PLAN GRAND TOTAL	03796		02391		00358		06545

PROGRAM : TRANSPORTATION BROKER	MTM COUNT	%					
01 DOD IS APPLIED	00021		00000		00000		00021
14 AID CATEGORY CODE NOT APPROVED	00021		00000		00000		00021
15 INCARCERATED	00146		00000		00000		00146
31 LOST MEDICAID ELIGIBILITY	01135		00000		00000		01135
36 ACQUIRED NEW AID CATEGORY	01539		00000		00000		01539
37 ACQUIRED PACE	00003		00000		00000		00003
TRANSPORTATION BROKER PROGRAM TOTAL:	02865	100.0%	00000	0.0%	00000	0.0%	02865

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