

	NHP COUNT	%	UHP COUNT	%	THP COUNT	%	TOTAL COUNT
PROGRAM : MEDICAID EXPANSION							
01 DEATH	00004		00001		00000		00005
15 INCARCERATED	00048		00025		00006		00079
30 LOSS OF PROGRAM ELIGIBILITY	00073		00036		00011		00120
31 LOST MEDICAID ELIGIBILITY	00551		00343		00114		01008
34 PERMANENT PLACEMENT IN NURSING HOME	00000		00000		00000		00000
36 PLAN CHANGE	00014		00016		00005		00035
37 PROGRAM CHANGE	00038		00032		00001		00071
PROGRAM TOTAL:	00728	55.2%	00453	34.4%	00137	10.4%	01318
PROGRAM : RITE CARE							
01 DEATH	00003		00000		00000		00003
05 ELIGIBILITY DETERMINATION ERROR	00000		00000		00000		00000
14 LOSS OF ELIGIBILITY	00539		00322		00077		00938
15 OTHER	00123		00074		00024		00221
17 CHANGE IN ELIGIBILITY ONLY	02953		01175		00256		04384
18 REDETERMINATION OF ELIG DURING 6 MO GUARANTEE	00000		00000		00000		00000
19 LOSS OF MANAGED CARE ELIGIBILITY	00326		00173		00016		00515
20 CLOSURE DUE TO CHANGE IN MID	00003		00001		00000		00004
22 DETERMINED RITE SHARE ELIGIBLE	00003		00009		00000		00012
42 90 DAY PLAN CHANGE	00015		00017		00006		00038
PROGRAM TOTAL:	03965	64.8%	01771	29.0%	00379	6.2%	06117
PROGRAM : RITESMILES							
01 DEATH	00000		00003		00000		00003
02 NON-RI ADDRESS FOUND	00000		00173		00000		00173
10 TPL DENTAL COVERAGE ACQUIRED	00000		00077		00000		00077
15 INCARCERATED	00000		00006		00000		00006
30 CANCELLED DENTAL PLAN	00000		00000		00000		00000
31 NO MA ELIGIBILITY FOUND	00000		00535		00000		00535
36 NO RS AID CATEGORY	00000		00000		00000		00000
PROGRAM TOTAL:	00000	0.0%	00794	100.0%	00000	0.0%	00794
PLAN GRAND TOTAL	04693		03018		00516		08229

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	MTM COUNT	%					
PROGRAM : TRANSPORTATION BROKER							
01 DOD IS APPLIED	00019		00000		00000		00019
14 AID CATEGORY CODE NOT APPROVED	00034		00000		00000		00034
15 INCARCERATED	00115		00000		00000		00115
31 LOST MEDICAID ELIGIBILITY	02366		00000		00000		02366
36 ACQUIRED NEW AID CATEGORY	03090		00000		00000		03090
37 ACQUIRED PACE	00011		00000		00000		00011
TRANSPORTATION BROKER PROGRAM TOTAL:	05635	100.0%	00000	0.0%	00000	0.0%	05635

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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