

SCDMPRD

Historical Enrollment Data

Numerator													
	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10
A. Voluntary Choice - Assignment Pool	6,815	7,940	6,968	11,704	8,381	11,646	8,449	8,678	12,984	9,716	9,409	12,147	7,906
A1. Member Selected MC Plan	5,018	5,842	4,991	8,331	5,606	8,177	6,092	6,186	9,035	6,678	6,567	8,586	5,436
A2. Member Selected FFS	1,797	2,098	1,977	3,373	2,775	3,469	2,357	2,492	3,949	3,038	2,842	3,561	2,470
B. Voluntary Choice - Not in Assign Pool	15,607	15,201	14,174	16,578	15,699	15,815	15,777	15,995	16,615	9,366	9,422	9,588	12,301
B1. Member Selected MC Plan	11,428	10,922	10,110	11,088	10,774	10,968	10,933	10,848	11,409	7,489	7,652	8,239	10,380
B2. Member Selected FFS	3,980	4,179	3,988	5,106	4,725	4,687	4,636	4,981	4,985	1,679	1,391	1,186	1,738
B3. Member Zapped into MC Plan	199	100	76	384	200	160	208	166	221	198	379	163	183
Total Voluntary Choice (=A+B)	22,422	23,141	21,142	28,282	24,080	27,461	24,226	24,673	29,599	19,082	18,831	21,735	20,207
Denominator													
	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10
C. Members up for auto-enroll	13,122	15,754	14,300	20,087	15,605	19,084	16,651	15,580	22,262	18,203	15,887	20,962	12,312
B. Voluntary Choice - Not in Assign Pool	15,607	15,201	14,174	16,578	15,699	15,815	15,777	15,995	16,615	9,366	9,422	9,588	12,301
D. FFS by Default **	(243)	(281)	(191)	(219)	(154)	(216)	(149)	(169)	(225)	(357)	(235)	(331)	(167)
Total Beneficiaries in the Month (= C+B+D)	28,486	30,674	28,283	36,446	31,150	34,683	32,279	31,406	38,652	27,212	25,074	30,219	24,446
Members Auto Assigned	6,064	7,533	7,141	8,164	7,070	7,222	8,053	6,733	9,053	8,130	6,243	8,484	4,239
Auto Assignment Rate	21%	25%	25%	22%	23%	21%	25%	21%	23%	30%	25%	28%	17%
Voluntary Selection Rate	79%	75%	75%	78%	77%	79%	75%	79%	77%	70%	75%	72%	83%
Total MC Choices (= A1+B1+B3)	16,645	16,864	15,177	19,803	16,580	19,305	17,233	17,200	20,665	14,365	14,598	16,988	15,999
Total FFS Choices (= A2+B2)	5,777	6,277	5,965	8,479	7,500	8,156	6,993	7,473	8,934	4,717	4,233	4,747	4,208
FFS Choice as a Percent of Member Choices	26%	27%	28%	30%	31%	30%	29%	30%	30%	25%	22%	22%	21%

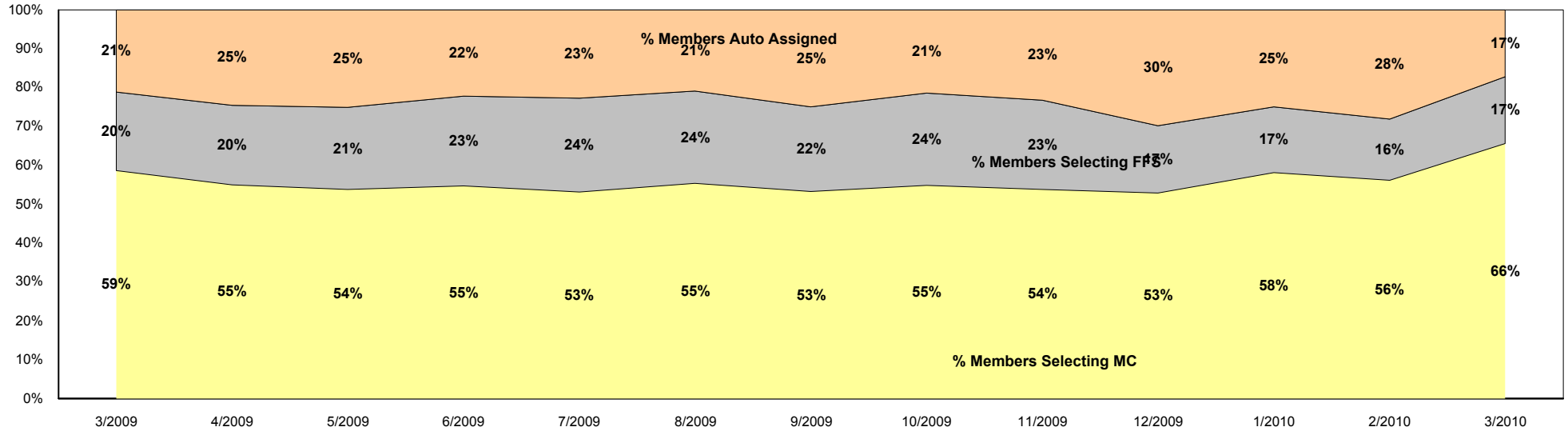
** Beneficiaries who were part of the pool initially but at the time of auto enrollment were no longer eligible.

SCDMPRD

Historical Enrollment Data - Graphical Summary

Trendlines - Quantities	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10
All Members Selected MC Plan	16,645	16,864	15,177	19,803	16,580	19,305	17,233	17,200	20,665	14,365	14,598	16,988	15,999
All Members Selected FFS	5,777	6,277	5,965	8,479	7,500	8,156	6,993	7,473	8,934	4,717	4,233	4,747	4,208
All Members Auto Assigned	6,064	7,533	7,141	8,164	7,070	7,222	8,053	6,733	9,053	8,130	6,243	8,484	4,239
Total (Volume)	28,486	30,674	28,283	36,446	31,150	34,683	32,279	31,406	38,652	27,212	25,074	30,219	24,446

Trendlines - Percentages (Graphed below)	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10
All Members Selected MC Plan (%)	59%	55%	54%	55%	53%	55%	53%	55%	54%	53%	58%	56%	66%
All Members Selected FFS (%)	20%	20%	21%	23%	24%	24%	22%	24%	23%	17%	17%	16%	17%
All Members Auto Assigned (%)	21%	25%	25%	22%	23%	21%	25%	21%	30%	25%	28%	28%	17%

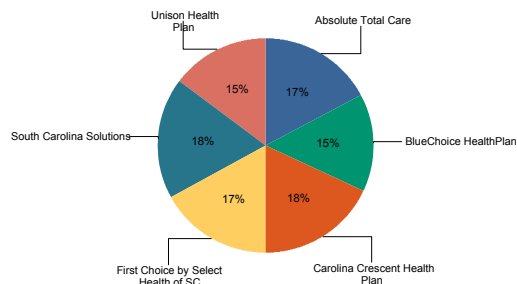


** Note: For the graphical representation we consider ALL members regardless whether they are in the Assignment Pool.

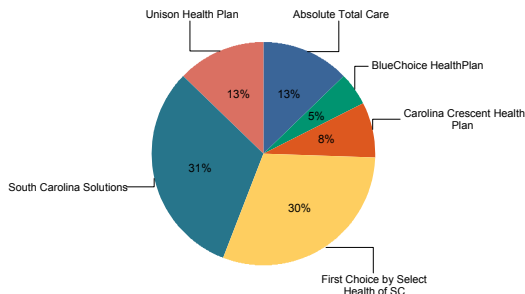
Plan Summary: Current and Previous Month Comparison

	Effective Month 03/10						Effective Month 02/10					
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	2,060	728	2,788	74%	26%	14%	2,658	1,453	4,111	65%	35%	16%
AMERIGROUP Community Care	-	-	-	-	-	-	-	-	-	-	-	-
BlueChoice HealthPlan	724	625	1,349	54%	46%	7%	808	1,270	2,078	39%	61%	8%
Carolina Crescent Health Plan	1,288	769	2,057	63%	37%	10%	1,607	1,564	3,171	51%	49%	12%
CHCcares of South Carolina	-	-	-	-	-	-	-	-	-	-	-	-
First Choice by Select Health of SC	4,857	712	5,569	87%	13%	28%	5,708	1,358	7,066	81%	19%	28%
South Carolina Solutions	5,028	778	5,806	87%	13%	29%	3,696	1,560	5,256	70%	30%	21%
Unison Health Plan	2,042	627	2,669	77%	23%	13%	2,511	1,279	3,790	66%	34%	15%
Totals	15,999	4,239	20,238	79%	21%	100%	16,988	8,484	25,472	67%	33%	100%

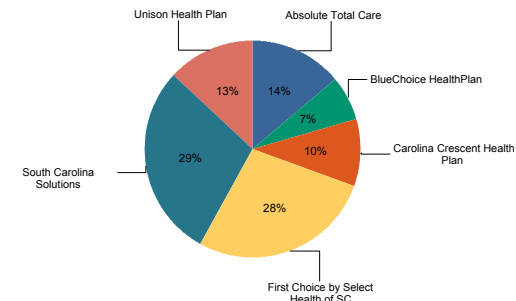
Current Month: Share of Auto Assignments



Current Month: Share of Choice Enrollments



Current Month: Share of Total Enrollments



Plan Summary: Last Year Current Month and Last Year Previous Month Comparison

	Effective Month 03/09						Effective Month 02/09					
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	1,700	994	2,694	63%	37%	12%	1,102	1,982	3,084	36%	64%	10%
AMERIGROUP Community Care	-	-	-	-	-	-	90	-	90	100%	-	-%
BlueChoice HealthPlan	891	784	1,675	53%	47%	7%	1,263	1,640	2,903	44%	56%	9%
Carolina Crescent Health Plan	1,099	1,075	2,174	51%	49%	10%	1,573	2,161	3,734	42%	58%	12%
CHCcares of South Carolina	147	332	479	31%	69%	2%	162	695	857	19%	81%	3%
First Choice by Select Health of SC	6,315	1,010	7,325	86%	14%	32%	7,505	2,095	9,600	78%	22%	31%
South Carolina Solutions	4,116	1,002	5,118	80%	20%	23%	4,465	1,859	6,324	71%	29%	20%
Unison Health Plan	2,377	867	3,244	73%	27%	14%	3,047	1,703	4,750	64%	36%	15%
Totals	16,645	6,064	22,709	73%	27%	100%	19,207	12,135	31,342	61%	39%	100%

Plan Summary (contd.)

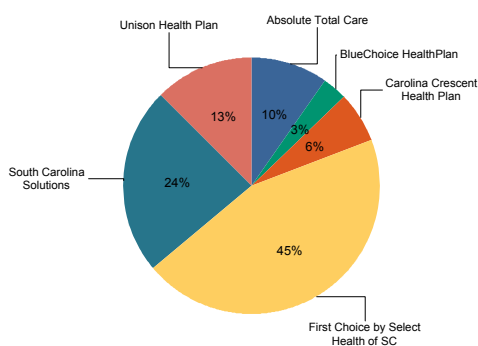
Plan Summary: SFY 2010 vs SFY 2009 Comparison

	SFY 2010			Jul-09 - Jun-10			SFY 2009			Jul-08 - Jun-09		
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	15,679	11,095	26,774	59%	41%	12%	8,624	11,302	19,926	43%	57%	10%
AMERIGROUP Community Care	0	0	0	-	-	-	1,906	1,686	3,592	53%	47%	2%
BlueChoice HealthPlan	7,281	9,536	16,817	43%	57%	8%	7,092	9,709	16,801	42%	58%	8%
Carolina Crescent Health Plan	12,099	11,873	23,972	50%	50%	11%	9,601	11,952	21,553	45%	55%	11%
CHCcares of South Carolina	152	0	152	100%	-	-%	1,293	4,001	5,294	24%	76%	3%
First Choice by Select Health of SC	61,388	11,403	72,791	84%	16%	33%	50,039	12,406	62,445	80%	20%	31%
South Carolina Solutions	34,942	11,564	46,506	75%	25%	21%	30,071	11,239	41,310	73%	27%	21%
Unison Health Plan	21,392	9,756	31,148	69%	31%	14%	19,563	9,675	29,238	67%	33%	15%
Totals	152,933	65,227	218,160	70%	30%	100%	128,189	71,970	200,159	64%	36%	100%

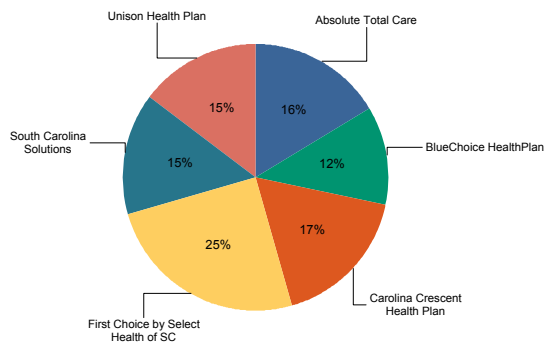
Plan Summary: Current and Previous Month Existing Total Enrollment Comparison

	As of 03/10			As of 02/10								
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	36,518	14,107	50,625	72%	28%	11%	35,458	14,488	49,946	71%	29%	11%
AMERIGROUP Community Care	-	-	-	-	-	-	-	-	-	-	-	-
BlueChoice HealthPlan	11,856	10,225	22,081	54%	46%	5%	11,547	10,490	22,037	52%	48%	5%
Carolina Crescent Health Plan	23,545	14,921	38,466	61%	39%	8%	22,456	15,295	37,751	59%	41%	8%
CHCcares of South Carolina	-	-	-	-	-	-	-	-	-	-	-	-
First Choice by Select Health of SC	167,330	21,384	188,714	89%	11%	41%	169,956	21,871	191,827	89%	11%	42%
South Carolina Solutions	88,391	12,666	101,057	87%	13%	22%	85,708	13,356	99,064	87%	13%	22%
Unison Health Plan	47,009	12,625	59,634	79%	21%	13%	46,295	12,856	59,151	78%	22%	13%
Totals	374,649	85,928	460,577	81%	19%	100%	371,420	88,356	459,776	81%	19%	100%

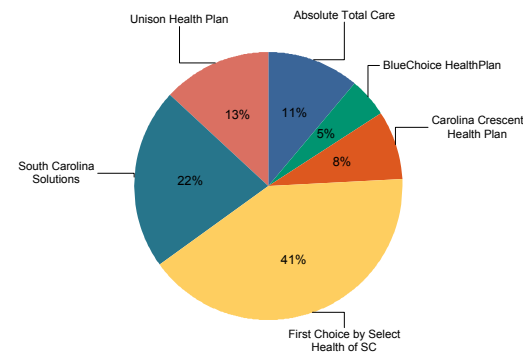
Total Choice Enrollments



Total Auto Assignments



Total Enrollments



South Carolina Healthy Connections Choices

Enrollment Period March 2010

Enrollment Numbers are as of 02/21/2010

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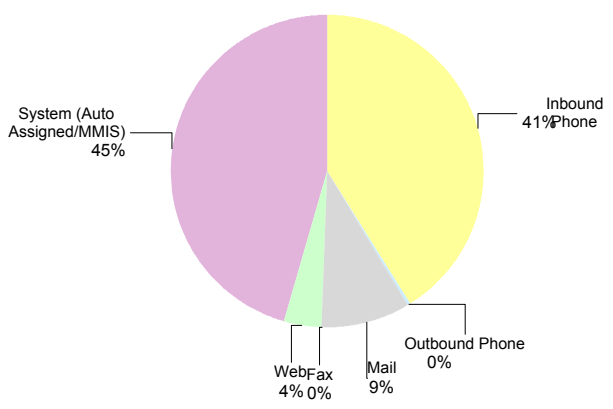
Historical Enrollment by Method - Data

	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10
Plan Enrollments	22,510	24,297	22,242	27,583	23,450	26,367	25,078	23,767	29,497	22,297	20,462	25,309	20,055
	80%	79%	79%	76%	76%	76%	78%	76%	77%	83%	83%	84%	83%
Inbound Phone	7,627 34%	8,377 34%	7,561 34%	9,908 36%	8,158 35%	10,773 41%	9,580 38%	9,617 40%	11,423 39%	7,961 36%	7,552 37%	10,235 40%	8,241 41%
Outbound Phone	25 -	11 -	12 -	42 -	14 -	11 -	22 -	4 -	28 -	22 -	33 -	4 -	67 -
Mail	3,782 17%	3,492 14%	2,598 12%	3,810 14%	2,798 12%	3,510 13%	2,957 12%	3,312 14%	3,786 13%	2,199 10%	1,798 9%	2,283 9%	1,807 9%
Fax	125 1%	118 -	103 -	151 1%	116 -	123 -	136 1%	124 1%	128 -	105 -	73 -	127 1%	52 -
Web	1,947 9%	2,215 9%	1,941 9%	2,463 9%	1,532 7%	1,727 7%	1,441 6%	893 4%	1,451 5%	1,040 5%	1,001 5%	1,171 5%	770 4%
System (Auto Assigned/MMIS)	9,004 40%	10,084 42%	10,027 45%	11,209 41%	10,832 46%	10,223 39%	10,942 44%	9,817 41%	12,681 43%	10,970 49%	10,005 49%	11,489 45%	9,118 45%
FFS Enrollments	5,777	6,277	5,965	8,479	7,500	8,156	6,993	7,473	8,934	4,717	4,233	4,747	4,208
	20%	21%	21%	24%	24%	24%	22%	24%	23%	17%	17%	16%	17%
Inbound Phone	4,352 75%	4,740 76%	4,637 78%	6,216 73%	5,705 76%	6,006 74%	4,934 71%	5,498 74%	6,393 72%	3,485 74%	3,122 74%	3,465 73%	3,016 72%
Outbound Phone	10 -	17 -	15 -	13 -	8 -	16 -	8 -	4 -	11 -	3 -	8 -	3 -	7 -
Mail	1,049 18%	1,030 16%	966 16%	1,625 19%	1,362 18%	1,638 20%	1,571 22%	1,539 21%	1,933 22%	786 17%	753 18%	844 18%	814 19%
Fax	37 1%	39 1%	40 1%	63 1%	47 1%	53 1%	51 1%	41 1%	72 1%	54 1%	30 1%	35 1%	46 1%
Web	329 6%	451 7%	307 5%	562 7%	378 5%	443 5%	429 6%	391 5%	525 6%	389 8%	320 8%	400 8%	325 8%
Total Enrollments	28,287	30,574	28,207	36,062	30,950	34,523	32,071	31,240	38,431	27,014	24,695	30,056	24,263
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Inbound Phone	11,979 42%	13,117 43%	12,198 43%	16,124 45%	13,863 45%	16,779 49%	14,514 45%	15,115 48%	17,816 46%	11,446 42%	10,674 43%	13,700 46%	11,257 46%
Outbound Phone	35 -	28 -	27 -	55 -	22 -	27 -	30 -	8 -	39 -	25 -	41 -	7 -	74 -
Mail	4,831 17%	4,522 15%	3,564 13%	5,435 15%	4,160 13%	5,148 15%	4,528 14%	4,851 16%	5,719 15%	2,985 11%	2,551 10%	3,127 10%	2,621 11%
Fax	162 1%	157 1%	143 1%	214 1%	163 1%	176 1%	187 1%	165 1%	200 1%	159 1%	103 -	162 1%	98 -
Web	2,276 8%	2,666 9%	2,248 8%	3,025 8%	1,910 6%	2,170 6%	1,870 6%	1,284 4%	1,976 5%	1,429 5%	1,321 5%	1,571 5%	1,095 5%
System (Auto Assigned/MMIS)	9,004 32%	10,084 33%	10,027 36%	11,209 31%	10,832 35%	10,223 30%	10,942 34%	9,817 31%	12,681 33%	10,970 41%	10,005 41%	11,489 38%	9,118 38%

Historical Enrollment by Method - Graphical Summary

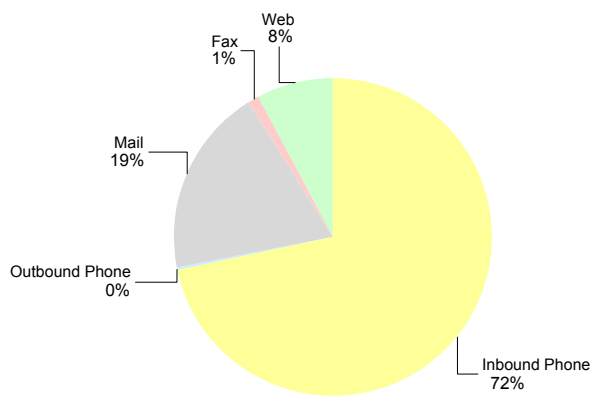
Health Plan Enrollments by Method

Current Enrollment Period



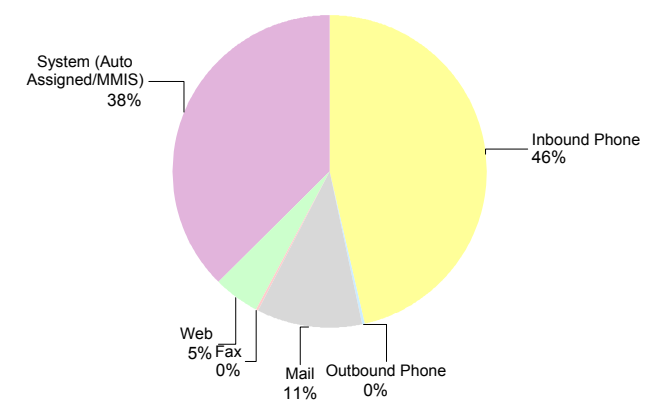
FFS Enrollments by Method

Current Enrollment Period



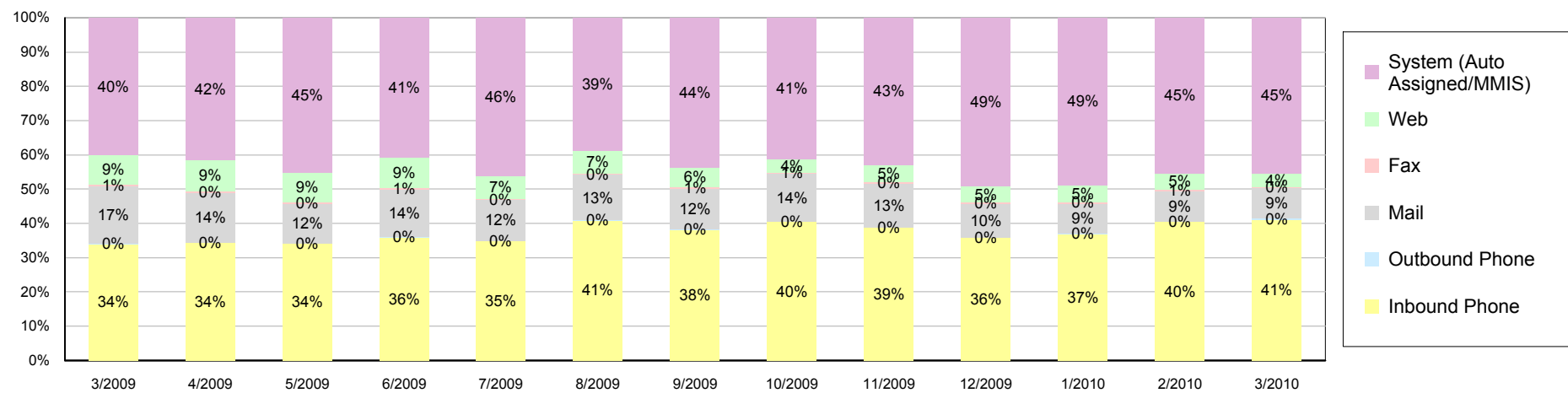
Total Enrollments by Method

Current Enrollment Period



Health Plan Enrollments by Method

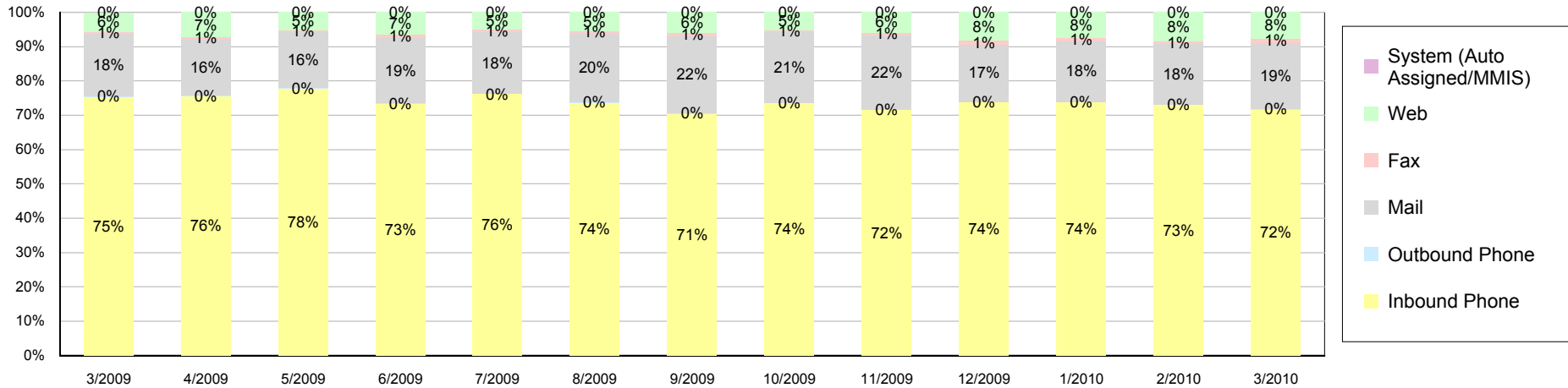
Historical Trend



Historical Enrollment by Method - Graphical Summary (contd.)

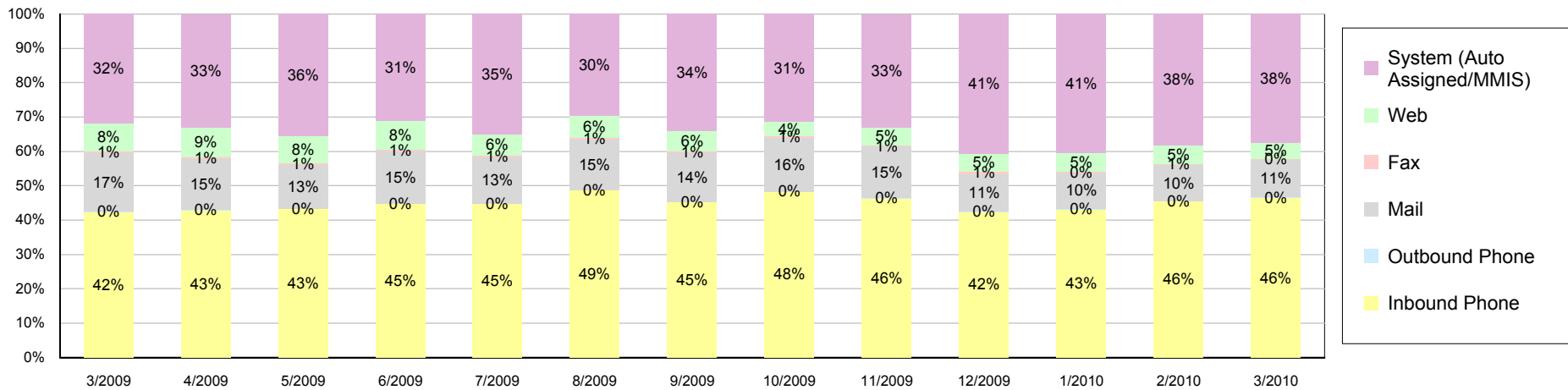
Fee For Service Enrollments by Method

Historical Trend



Total Enrollments by Method

Historical Trend



SCDMPRD

Disenrollment Information

Fee For Service Choice Reasons

* 41-Other was not split into Mail/Fax/Web & Phone until August 09

	Mar-10		Feb-10		SFY 2010 Jul-09 - Jun-10	
	#	%	#	%	#	%
35 - Doctor Not Part Of Network	1,261	30%	1,408	30%	18,456	32%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	36	1%	37	1%	585	1%
37 - Entering A Waiver Program or enters MFCP	1	0%	3	0%	64	0%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	125	3%	160	3%	1,715	3%
41 A - Other (Phone)	1,443	34%	1,624	34%	16,547	29%
41 B - Other (Mail, Fax, Web)	328	8%	417	9%	7,533	13%
42 - No reason provided on enrollment form	855	20%	862	18%	10,062	18%
64 - Plan does not cover certain services because of moral or religious reasons	2	0%	-	0%	15	0%
70 - Member Placed Out of Home	4	0%	4	0%	70	0%
75 - Pharmacy Not Part Of Network	4	0%	10	0%	35	0%
84 - Member utilizes services from multiple par and non-par providers	149	4%	220	5%	1,855	3%
A - Administrative	-	0%	2	0%	24	0%
Total Fee For Service Choice	4,208	100%	4,747	100%	56,961	100%

	Mar-09		Feb-09		SFY 2009 Jul-08 - Jun-09	
	#	%	#	%	#	%
	2,334	40%	2,279	39%	20,862	34%
	42	1%	47	1%	481	1%
	-	-	-	-	13	-
	113	2%	115	2%	972	2%
	-	-	-	-	-	-
	3,032	52%	3,290	56%	36,241	60%
	-	-	-	-	872	1%
	1	-	4	-	16	-
	-	-	-	-	17	-
	-	-	-	-	-	-
	240	4%	86	1%	1,242	2%
	15	-	10	-	127	-
	5,777	100%	5,831	100%	60,843	100%

Transfer to Fee For Service Reasons

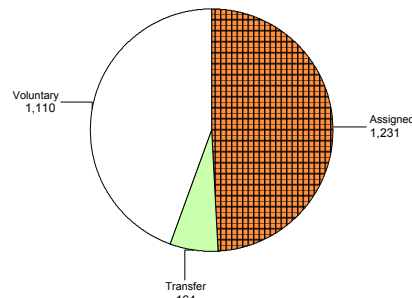
	Mar-10		Feb-10		SFY 2010 Jul-09 - Jun-10	
	#	%	#	%	#	%
06 - Managed Care Provider Terminated	-	0%	-	0%	1	0%
08 - Member Has Private HMO Coverage	-	0%	-	0%	-	0%
30 - Moved Out of Plan Service Area	6	0%	13	0%	70	0%
31 - Got Poor Quality Care	4	0%	6	0%	200	1%
34 - Lack of Access to Services Covered Under the Contract	59	2%	50	2%	505	2%
35 - Doctor Not Part Of Network	1,391	56%	1,605	55%	11,801	53%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	45	2%	59	2%	323	1%
37 - Entering A Waiver Program or enters MFCP	7	0%	2	0%	172	1%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	222	9%	325	11%	2,468	11%
41 - Other	570	23%	619	21%	5,119	23%
42 - No reason provided on enrollment form	39	2%	37	1%	248	1%
53 - Didn't Realize What I was Signing Up For	16	1%	31	1%	222	1%
64 - Plan does not cover certain services because of moral or religious reasons	2	0%	4	0%	34	0%
69 - Fraudulent Use of Medicaid Card	-	0%	-	0%	-	0%
70 - Member Placed Out of Home	7	0%	13	0%	93	0%
75 - Pharmacy Not Part Of Network	5	0%	8	0%	34	0%
83 - Want to be Plan with Family Members	17	1%	16	1%	141	1%
84 - Member utilizes services from multiple par and non-par providers	111	4%	140	5%	876	4%
85 - Health Plan Referral Policy is unfavorable to Member	3	0%	9	0%	94	0%
A - Administrative	1	0%	4	0%	11	0%
Total Transfers to Fee For Service	2,505	100%	2,941	100%	22,412	100%

	Mar-09		Feb-09		SFY 2009 Jul-08 - Jun-09	
	#	%	#	%	#	%
	-	-	-	-	-	-
	-	-	-	-	6	-%
	15	-%	3	-%	108	-%
	136	3%	52	1%	376	1%
	30	1%	48	1%	458	1%
	2,353	56%	2,646	60%	18,174	54%
	36	1%	27	1%	293	1%
	-	-	-	-	25	-%
	410	10%	625	14%	3,220	10%
	800	19%	778	18%	9,185	27%
	-	-	-	-	14	-%
	60	1%	77	2%	378	1%
	8	-%	-	-	19	-%
	-	-	-	-	3	-%
	-	-	-	-	16	-%
	-	-	-	-	-	-
	31	1%	17	-%	107	-%
	269	6%	75	2%	998	3%
	10	-%	32	1%	110	-%
	19	-%	15	-%	191	1%
	4,177	100%	4,395	100%	33,681	100%

Disenrollment Information (contd.)

Transfer to Fee For Service by Source of Original Enrollment	Member Enrolled Voluntarily		Member Transferred to the Plan		Member was assigned		Total Disenrollments	
	#	%	#	%	#	%	#	%
06 - Managed Care Provider Terminated	-	0%	-	0%	-	0%	-	0%
08 - Member Has Private HMO Coverage	-	0%	-	0%	-	0%	-	0%
30 - Moved Out of Plan Service Area	4	0%	1	1%	1	0%	6	0%
31 - Got Poor Quality Care	4	0%	-	0%	-	0%	4	0%
34 - Lack of Access to Services Covered Under the Contract	25	2%	14	9%	20	2%	59	2%
35 - Doctor Not Part Of Network	587	53%	68	41%	736	60%	1,391	56%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	29	3%	3	2%	13	1%	45	2%
37 - Entering A Waiver Program or enters MFCP	6	1%	-	0%	1	0%	7	0%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	108	10%	20	12%	94	8%	222	9%
41 - Other	239	22%	41	25%	290	24%	570	23%
42 - No reason provided on enrollment form	21	2%	4	2%	14	1%	39	2%
53 - Didn't Realize What I was Signing Up For	5	0%	1	1%	10	1%	16	1%
64 - Plan does not cover certain services because of moral or religious reasons	2	0%	-	0%	-	0%	2	0%
69 - Fraudulent Use of Medicaid Card	-	0%	-	0%	-	0%	-	0%
70 - Member Placed Out of Home	4	0%	-	0%	3	0%	7	0%
75 - Pharmacy Not Part Of Network	4	0%	-	0%	1	0%	5	0%
83 - Want to be Plan with Family Members	8	1%	3	2%	6	0%	17	1%
84 - Member utilizes services from multiple par and non-par providers	62	6%	9	5%	40	3%	111	4%
85 - Health Plan Referral Policy is unfavorable to Member	1	0%	-	0%	2	0%	3	0%
A - Administrative	1	0%	-	0%	-	0%	1	0%
Total Enrollment	1,110	100%	164	100%	1,231	100%	2,505	100%

Transfer to Fee For Service by Source of Original Enrollment



Transfer Summary

	Absolute Total Care	BlueChoice HealthPlan	Carolina Crescent Health Plan	First Choice by Select Health of SC	South Carolina Solutions	Unison Health Plan	FFS	Total Transfers From
Absolute Total Care		47	128	403	205	125	430	1,338
BlueChoice HealthPlan	40		29	229	55	73	293	719
Carolina Crescent Health Plan	44	16		200	90	34	347	731
First Choice by Select Health of SC	745	82	496		1,768	522	712	4,325
South Carolina Solutions	51	22	40	250		84	334	781
Unison Health Plan	63	25	55	253	106		389	891
FFS	61	15	48	127	139	84		474
Total Transfers To	1,004	207	796	1,462	2,363	922	2,505	9,259

Page 1: Snapshot Summary

This page provides a high level view of Enrollments, Disenrollments, Transfers and Call Center Statistics.

Data is presented for Current Month, Previous Month, and Current State Fiscal Year. Data for Previous Year in a similar format is also presented.

Please refer to the Snapshot Page Glossary for details.

Change Management Notes:

- 1) C3 - Zaps to Managed Care data was added starting Dec 08 and is not available for prior months. Voluntary Choice total did not include these numbers prior to Dec 08.
- 2) Current Eligibles section was added starting Dec 08 and is not available for prior months.

Page 2: Historical Enrollment Trends (Data)

This is a summary of all members who got letters for scheduled auto assignments and their enrollment outcomes (Chose a Health Plan, Chose FFS, were left in FFS for lack of eligibility or were Auto Assigned). It also provides a summary of those members that were not in the current month's assignment pool, but enrolled into a Health Plan or FFS voluntarily. It also provides Auto Assignment Rate and FFS Choice Rate.

Page 3: Historical Enrollment Trends (Percentages & Graphical Summary)

This page includes all members regardless of whether they were in the Assignment Pool and groups them by members selecting a Managed Care Plan, members selecting FFS and members who were Auto Assigned. It provides counts as well as percentages and includes a graphical representation of the percentages.

Page 4 & 5: Health Plan Summary

This page provides Voluntary and Auto Assign Enrollment s for members, who had a Current Auto Assign Date, and groups them by individual Health Plan.

Change Management Notes: This page was modified to display enrollments by assign date starting Dec 08. Enrollments by assign date are not available for prior months. Numbers on the third table (SFY 2009 section) include enrollments by start date for the months Jul 08 to Nov 08 and enrollments by assign date Dec 08 onwards. The last table is a count of all enrollments that currently exist in the system.

Page 6: Enrollments by Method (Data)

This page provides a count of members who had a Current Auto Assign Date and were thereby enrolled into a Health Plan or Fee For Service by their method of enrollment (calls, web, mail, fax, system etc.)

Change Management Notes:

- 1) This page was added starting Dec 08. Includes enrollments by assign date and this data is not available for prior months.
- 2) Voluntary Choice Managed Care Totals on the Snapshot Page (B1 + C1) do not match Health Plan Enrollments by Mail + Fax + Web + Inbound Phone + Outbound Phone on the Enroll by method Page, because some times Voluntary Choices are marked with an enrollment source of "System" and are counted under "System - Auto Assigned (MMIS)" on the Enroll by method page. This happens because of reinstatements, roster updates, system updates etc.. Similarly Auto Assigned total (D) from the Snapshot Page does not match the "System - Auto Assigned (MMIS)" total on the Enroll by method page. On January's report a total of 1,664 Voluntary Choice to Managed Care members were grouped under "System - Auto Assigned (MMIS)" on the Enroll by Method page. Also note that zaps to managed care are not included in the Enroll by Method page.

Page 7 & 8: Enrollments by Method (Percentages & Graphical Summary)

This page provides a graphical representation of enrollment by method data.

Page 9 & 10: Disenrollment Information

This page provides total counts of Initial Fee for Service Choices or members who are choosing Fee For Service prior to enrollment in a Health Plan. It also provides reasons as to why members transferred from Managed Care to Fee for Service. Sections indicate how their original selection was made before transferring to Fee For Service (voluntary, transferred before going to FFS or were auto assigned to a plan).

Change Management Notes: 41-Other reason code under FFS Initial Choice table, is being split into choices made on the Phone and choice made via Mail, Fax or Web starting Aug 2009.

Page 11: Health Plan Transfer Mix

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This page provides Summary of Transfers between Health Plans, Transfers from Health Plans to FFS and FFS to Health plans for the Current Month.

Item #	Item Name	Description
A	Assignment Pool	Count of all members who got letters for Scheduled Auto Assignments. This count excludes members who were left in Fee For Service by default, because of lack of eligibility.
B	Voluntary Choice	Sum of B1 and B2
B1	Voluntary Choice - Managed Care	Count of all members who got letters for Scheduled Auto Assignments and Voluntarily Chose a Managed Care Health Plan.
B2	Voluntary Choice - Fee For Service	Count of all members who got letters for Scheduled Auto Assignments and Voluntarily Chose Fee For Service.
C	Voluntary Choice - Not in Assignment Pool	Sum of C1, C2 and C3.
C1	Voluntary Choice - Not in Assignment Pool - Managed Care	Count of members who were in a Future Assignment or Outreach Pool but enrolled Voluntarily into a Managed Care Health Plan.
C2	Voluntary Choice - Not in Assignment Pool - Fee For Service	Count of members who were in a Future Assignment or Outreach Pool but enrolled Voluntarily into Fee For Service.
C3	Voluntary Choice - Not in Assignment Pool - Zaps to Managed Care	Count of members who were never enrolled into a Health Plan in the past 12 months but were zapped into one in the current assignment period.
D	Auto Assignments	Count of all members who got letters for Scheduled Auto Assignments and were assigned to a Managed Care Health Plan by the System because the members did not make a selection by the scheduled auto assignment date.
E	Total Voluntary Choice (=B+C)	Count of all members who Voluntarily chose a Managed Care Health Plan or to remain in Fee For Service. These members could have come from the current assignment pool, a future assignment pool or the outreach pool.
F	Total Enrollments (=B+C+D)	Count of all members who were enrolled into a Health Plan or Fee For Service, either by Voluntary Choice or by way of Auto Assignment.
G	Fee For Service	Count of all members who Chose Fee For Service. These members could have come from the current assignment pool, a future assignment pool the an outreach pool.
G1	FFS Share of Voluntary Enrollments (=(B2+C2)/E)	Percentage of members choosing Fee For Service among those who made a Voluntary Choice.
G2	FFS Share of Total Enrollments (=(B2+C2)/F)	Percentage of enrollments to Fee For Service among Total Enrollments.
H	Transfer within 90 Days (=H3 + H4)	Count of all members who are in their 90 day choice period and made a Transfer (either to a Health Plan or Fee For Service).
H1	90 Day Choice Period	Count of all members who are in their 90 day choice period. Note that their original enrollments could have been made 90 days prior to the current enrollment period.
H2	Transfer Percent (=(H3+H4)/H1)	Percentage of members who transferred (either to a Health Plan or Fee For Service) among those who were in their 90 Day Choice Period.
H3	90 Day Transfers to FFS	Count of all members who are in their 90 day choice period and transferred to Fee For Service in the Current Enrollment Period.
H4	90 Day Transfers to Health Plans	Count of all members who are in their 90 day choice period and transferred to a Managed Care Health Plan in the Current Enrollment Period.
Current Enrollment Period Snapshot Percentages		
	Target	Voluntary Choice Target
	Actual (=E/F)	Percentage of members Voluntarily choosing a Health Plan or Fee For Service among total members who were enrolled.
	FFS Share of Voluntary Enrollment(=G1)	Percentage of members choosing Fee For Service among those who made a Voluntary Choice.
	MC Share of Voluntary Enrollment (100-G1)	Percentage of members choosing a Managed Care Health Plan among those who made a Voluntary Choice.

SCDMPRD

Pie Charts		
1	Enrollments - Voluntary & Auto Assignments	Voluntary Vs Auto Assignment share of total enrollments. It also displays the share of auto assignments that had to be voluntary choices in order to achieve the Target Percentage
2	Share of Voluntary Enrollments	Fee For Service Vs Managed Care share of Voluntary Enrollments,
3	Transfers to FFS by Source of Original Enrollment	Number of members transferring to FFS grouped by their source of original enrollment (Were Auto assigned to a Health Plan before transferring to FFS, were in a Voluntarily selected Health Plan before transferring to FFS, transferred to a Health Plan before transferring to FFS).
Current Eligibles Grid		
1	Enrolled into Managed Care - Assignable	Count of all beneficiaries who were in our assignment pool at some point of time and are currently enrolled in a managed care health plan.
2	Enrolled into Managed Care - Non-Assignable	Count of all beneficiaries who are non assignable and are currently enrolled in a managed care health plan.
3	Enrolled into Managed Care - Total	Count of all beneficiaries who are currently enrolled in a managed care health plan.
4	FFS by Choice - Assignable	Count of all beneficiaries who were in our assignment pool at some point of time and are currently in FFS by choice.
5	FFS by Choice - Non-Assignable	Count of all beneficiaries who are non assignable and are currently in FFS by choice.
6	FFS by Choice - Total	Count of all beneficiaries who are currently in FFS by choice.
7	FFS by Default - Assignable	Count of all beneficiaries who were in our assignment pool at some point of time but had to be left in FFS for lack of eligibility OR are in a future assignment pool and currently in FFS.
8	FFS by Default - Non-Assignable	Count of all beneficiaries who are non-assignable and are currently in FFS by default.
9	FFS by Default - Total	Count of all beneficiaries who are in FFS by default.
10	Total - Assignable	Count of all beneficiaries in our system who are assignable.
11	Total - Non-Assignable	Count of all beneficiaries in our system who are NOT assignable.
12	Total	Count of all beneficiaries in our system
Current Enrollment Period Transfers Grid		
		Groups total number of members who were in their 90 day choice period and transferred by the type of transfer made. (MCO-MCO, MCO_MHN, MCO-FFS, MHN-MCO, MHN-FFS, FFS-MCO, FFS-MHN)
Top Transfer/Disenrollment Reasons		
	Fee For Service Choice	Top four reasons why members chose Fee For Service as their Initial Choice. 41-Other is being split into choices made on Phone Vs choices made via Mail/Fax/Web starting Aug 2009.
	Transfer to Fee For Service	Top four reasons why members chose to transfer to Fee For Service.
Call Center Statistics		
		Measures Call Center Performance and includes the said statistics for the current enrollment period.