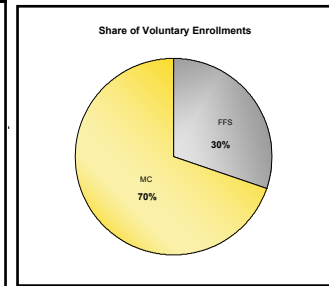
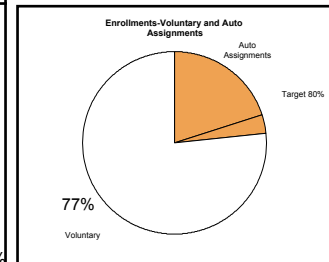


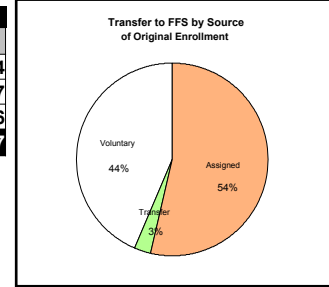
Enrollment Snapshot

Enrollment Snapshot	Current Year						Last Year					
Effective Month - Nov-2009	Nov-09		Oct-09		SFY 2010 Jul-09 - Jun-10		Nov-08		Oct-08		SFY 2009 Jul-08 - Jun-09	
	#	%	#	%	#	%	#	%	#	%	#	%
A. Assignment Pool (Excludes FFS Default)	22,037		15,411		88,269		31,738		26,477		299,986	
B. Voluntary Choice	12,984		8,678		50,138		17,038		12,321		162,371	
B1. Managed Care	9,035		6,186		35,096		12,559		8,753		121,593	
B2. Fee For Service	3,949		2,492		15,042		4,479		3,568		40,778	
C. Voluntary Choice - Not in the Assignment Pool *	16,615		15,995		79,901		9,374		4,625		130,918	
C1. Managed Care	11,409		10,848		54,932		4,485		3,200		93,938	
C2. Fee For Service	4,985		4,981		24,014		4,889		1,425		35,780	
C3. Zaps to Managed Care	221		166		955		-		-		1,200	
D. Auto Assignments	9,053	23%	6,733	21%	38,131	23%	14,700	36%	14,156	46%	137,615	32%
E. Total Voluntary Choice (= B + C)	29,599	77%	24,673	79%	130,039	77%	26,412	64%	16,946	54%	293,289	68%
F. Total Enrollments (= B + C + D)	38,652		31,406		168,170		41,112		31,102		430,904	
G. Fee For Service	8,934		7,473		39,056		9,368		4,993		76,558	
G1. Share of Voluntary Enrollments (= (B2 + C2)/E)		30%		30%		30%		35%		29%		26%
G2. Share of Total Enrollments (= (B2 + C2) / F)		23%		24%		23%		23%		16%		18%
H. Members in 90 Day Choice Period	116,780		110,222		555,834		-		-		1,458,822	
H1. Total Transfers within 90 Days (= H3 + H4)	9,042		7,302		39,491		9,718		6,570		105,975	
H2. Transfer Percent		8%		7%		7%		-		-		7%
H3. 90 Day Transfers to Fee For Service	2,694	30%	2,331	32%	12,490	32%	5,049	52%	3,558	54%	NA	NA
H4. 90 Day Transfers to Health Plans	6,348	70%	4,971	68%	27,001	68%	4,669	48%	3,012	46%	NA	NA



* Members who are in a future assignment pool or in the outreach pool. The first auto assignment took place in October 2007

November-2009 Snapshot	%	November 2009	Transfers					Current Eligibles			
			From	To				Current Eligibles			Total
Target	80%		FFS	MCO	MHN	Total	Enrolled into MC	Assignable	Non-Assignable	Total	
Actual (= E / F)	77%		-	2,137	534	2,671	331,662		109,592	441,254	
FFS Share of Voluntary Enrollment (= G1)	30%		2,296	2,531	516	5,343	72,856		22,131	94,987	
MC Share of Voluntary Enrollment (100-G1)	70%		398	630	-	1,028	28,025		100,871	128,896	
			Total	2,694	5,298	1,050	9,042	Total	432,543	232,594	665,137



Top Transfer/ Disenrollment Reasons			
Fee For Service Choice Reasons		Transfer to Fee For Service Reasons	
1)	41 A - Other (Phone)	3,074	35 - Doctor Not Part Of Network 1,296
2)	35 - Doctor Not Part Of Network	2,619	41 - Other 664
3)	42 - No reason provided on enrollment form	1,838	39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid 348

Call Center Statistics	Current Year						Last Year					
Effective Month - Nov-2009	Nov-09		Oct-09		SFY 2010 Jul-09 - Jun-10		Nov-08		Oct-08		SFY 2009 Jul-08 - Jun-09	
	#	%	#	%	#	%	#	%	#	%	#	%
A. Total Calls Received	30,691		25,408		132,685		33,081		20,889		287,828	
B. Total Calls Answered	30,317		24,992		131,297		32,437		20,436		278,845	
C. Totals Calls Abandoned after Threshold	190	1%	248	1%	1,027	1%	644	2%	453	2%	8,983	3%
D. Percent Answered within 60 seconds	93%		92%		95%		91%		89%		88%	
E. Average Speed to Answer in seconds	17		19		-		21		23		-	
Days in Call Period	09/18/09 - 10/22/09			08/21/09 - 09/17/09			09/19/08 - 10/23/08			08/22/08 - 09/18/08		

SCDMPRD

Historical Enrollment Data

Numerator													
	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09
A. Voluntary Choice - Assignment Pool	17,038	11,828	14,320	13,499	6,815	7,940	6,968	11,704	8,381	11,646	8,449	8,678	12,984
A1. Member Selected MC Plan	12,559	8,394	10,106	10,407	5,018	5,842	4,991	8,331	5,606	8,177	6,092	6,186	9,035
A2. Member Selected FFS	4,479	3,434	4,214	3,092	1,797	2,098	1,977	3,373	2,775	3,469	2,357	2,492	3,949
B. Voluntary Choice - Not in Assign Pool	9,374	15,781	13,691	11,539	15,607	15,201	14,174	16,578	15,699	15,815	15,777	15,995	16,615
B1. Member Selected MC Plan	4,485	12,662	8,978	8,712	11,428	10,922	10,110	11,088	10,774	10,968	10,933	10,848	11,409
B2. Member Selected FFS	4,889	2,959	4,520	2,739	3,980	4,179	3,988	5,106	4,725	4,687	4,636	4,981	4,985
B3. Member Zapped into MC Plan	-	160	193	88	199	100	76	384	200	160	208	166	221
Total Voluntary Choice (=A+B)	26,412	27,609	28,011	25,038	22,422	23,141	21,142	28,282	24,080	27,461	24,226	24,673	29,599
Denominator													
	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09
C. Members up for auto-enroll	32,538	25,986	32,886	26,453	13,122	15,754	14,300	20,087	15,605	19,084	16,651	15,580	22,262
B. Voluntary Choice - Not in Assign Pool	9,374	15,781	13,691	11,539	15,607	15,201	14,174	16,578	15,699	15,815	15,777	15,995	16,615
D. FFS by Default **	(800)	(724)	(1,067)	(819)	(243)	(281)	(191)	(219)	(154)	(216)	(149)	(169)	(225)
Total Beneficiaries in the Month (= C+B+D)	41,112	41,043	45,510	37,173	28,486	30,674	28,283	36,446	31,150	34,683	32,279	31,406	38,652
	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09
Members Auto Assigned	14,700	13,434	17,499	12,135	6,064	7,533	7,141	8,164	7,070	7,222	8,053	6,733	9,053
Auto Assignment Rate	36%	33%	38%	33%	21%	25%	25%	22%	23%	21%	25%	21%	23%
	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09
Voluntary Selection Rate	64%	67%	62%	67%	79%	75%	75%	78%	77%	79%	75%	79%	77%
Total MC Choices (= A1+B1+B3)	17,044	21,216	19,277	19,207	16,645	16,864	15,177	19,803	16,580	19,305	17,233	17,200	20,665
Total FFS Choices (= A2+B2)	9,368	6,393	8,734	5,831	5,777	6,277	5,965	8,479	7,500	8,156	6,993	7,473	8,934
FFS Choice as a Percent of Member Choices	35%	23%	31%	23%	26%	27%	28%	30%	31%	30%	29%	30%	30%

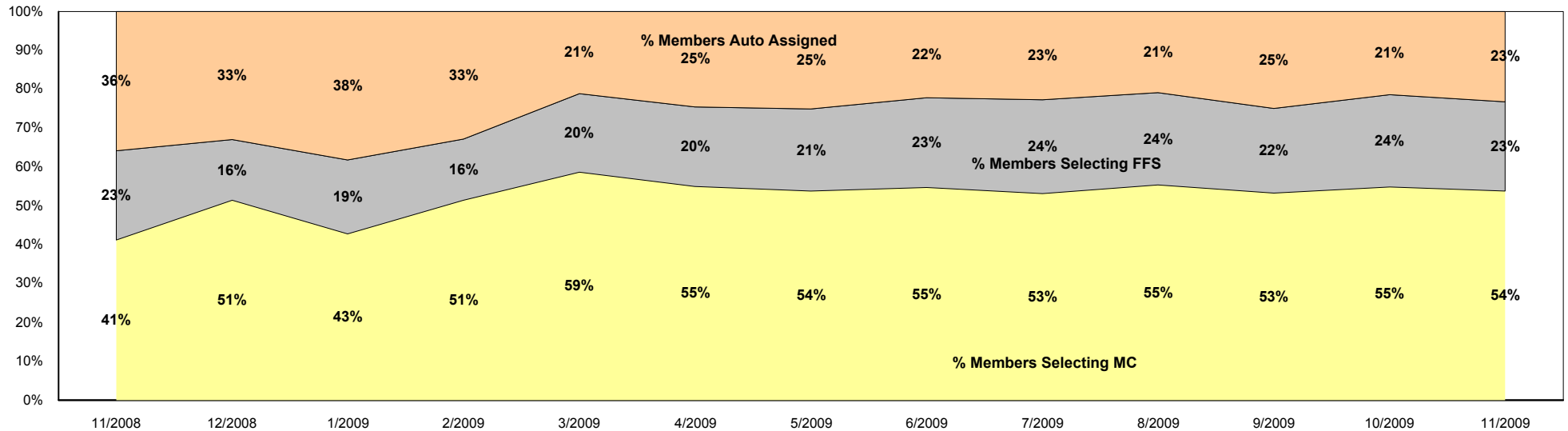
** Beneficiaries who were part of the pool initially but at the time of auto enrollment were no longer eligible.

SCDMPRD

Historical Enrollment Data - Graphical Summary

Trendlines - Quantities	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09
All Members Selected MC Plan	17,044	21,216	19,277	19,207	16,645	16,864	15,177	19,803	16,580	19,305	17,233	17,200	20,665
All Members Selected FFS	9,368	6,393	8,734	5,831	5,777	6,277	5,965	8,479	7,500	8,156	6,993	7,473	8,934
All Members Auto Assigned	14,700	13,434	17,499	12,135	6,064	7,533	7,141	8,164	7,070	7,222	8,053	6,733	9,053
Total (Volume)	41,112	41,043	45,510	37,173	28,486	30,674	28,283	36,446	31,150	34,683	32,279	31,406	38,652

Trendlines - Percentages (Graphed below)	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09
All Members Selected MC Plan (%)	41%	51%	43%	51%	59%	55%	54%	55%	53%	55%	53%	55%	54%
All Members Selected FFS (%)	23%	16%	19%	16%	20%	20%	21%	23%	24%	24%	22%	24%	23%
All Members Auto Assigned (%)	36%	33%	38%	33%	21%	25%	25%	22%	23%	21%	25%	21%	23%

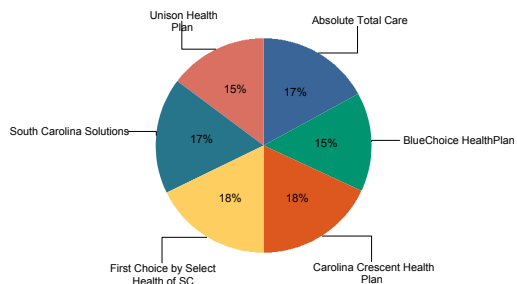


** Note: For the graphical representation we consider ALL members regardless whether they are in the Assignment Pool.

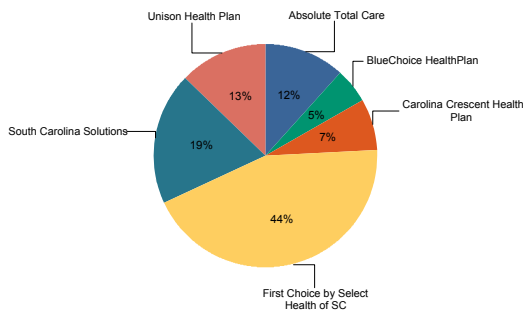
Plan Summary: Current and Previous Month Comparison

	Effective Month 11/09						Effective Month 10/09					
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	2,415	1,536	3,951	61%	39%	13%	1,292	1,143	2,435	53%	47%	10%
AMERIGROUP Community Care	-	-	-	-	-	-	-	-	-	-	-	-
BlueChoice HealthPlan	1,043	1,344	2,387	44%	56%	8%	808	964	1,772	46%	54%	7%
Carolina Crescent Health Plan	1,509	1,637	3,146	48%	52%	11%	1,355	1,221	2,576	53%	47%	11%
CHCcares of South Carolina	-	-	-	-	-	-	-	-	-	-	-	-
First Choice by Select Health of SC	9,080	1,625	10,705	85%	15%	36%	7,708	1,215	8,923	86%	14%	37%
South Carolina Solutions	3,979	1,583	5,562	72%	28%	19%	3,639	1,181	4,820	75%	25%	20%
Unison Health Plan	2,639	1,328	3,967	67%	33%	13%	2,398	1,009	3,407	70%	30%	14%
Totals	20,665	9,053	29,718	70%	30%	100%	17,200	6,733	23,933	72%	28%	100%

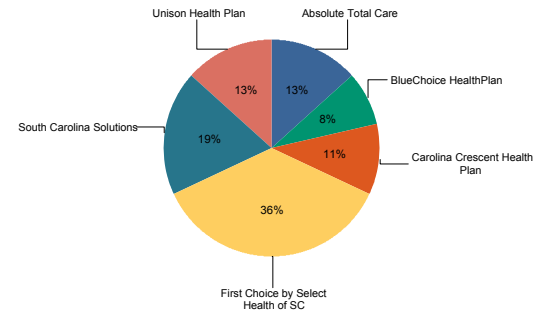
Current Month: Share of Auto Assignments



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 11/08						Effective Month 10/08					
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	-	-	-	-	-	-	-	-	-	-	-	-
AMERIGROUP Community Care	-	-	-	-	-	-	-	-	-	-	-	-
BlueChoice HealthPlan	-	-	-	-	-	-	-	-	-	-	-	-
Carolina Crescent Health Plan	-	-	-	-	-	-	-	-	-	-	-	-
CHCcares of South Carolina	-	-	-	-	-	-	-	-	-	-	-	-
First Choice by Select Health of SC	-	-	-	-	-	-	-	-	-	-	-	-
South Carolina Solutions	-	-	-	-	-	-	-	-	-	-	-	-
Unison Health Plan	-	-	-	-	-	-	-	-	-	-	-	-
Totals	-	-	-	-	-	-	-	-	-	-	-	-

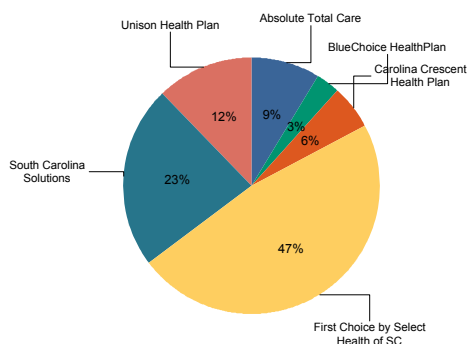
Plan Summary: SFY 2010 vs SFY 2009 Comparison

	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	7,362	6,485	13,847	53%	47%	11%	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	4,397	5,521	9,918	44%	56%	8%	7,092	9,709	16,801	42%	58%	8%
Carolina Crescent Health Plan	7,159	6,920	14,079	51%	49%	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	39,043	6,859	45,902	85%	15%	36%	50,039	12,406	62,445	80%	20%	31%
South Carolina Solutions	19,896	6,628	26,524	75%	25%	21%	30,071	11,239	41,310	73%	27%	21%
Unison Health Plan	12,974	5,718	18,692	69%	31%	14%	19,563	9,675	29,238	67%	33%	15%
Totals	90,983	38,131	129,114	70%	30%	100%	128,189	71,970	200,159	64%	36%	100%

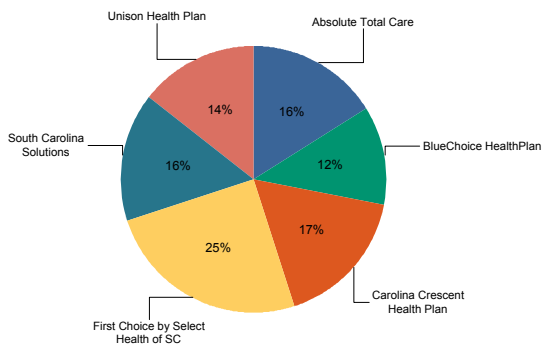
Plan Summary: Current and Previous Month Existing Total Enrollment Comparison

	As of 11/09			As of 10/09								
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	31,030	13,907	44,937	69%	31%	10%	30,045	13,629	43,674	69%	31%	10%
AMERIGROUP Community Care	-	-	-	-	-	-	-	-	-	-	-	-
BlueChoice HealthPlan	10,817	10,098	20,915	52%	48%	5%	10,480	9,769	20,249	52%	48%	5%
Carolina Crescent Health Plan	19,852	14,625	34,477	58%	42%	8%	18,883	14,222	33,105	57%	43%	8%
CHCcares of South Carolina	-	-	-	-	-	-	-	-	-	-	-	-
First Choice by Select Health of SC	168,782	21,542	190,324	89%	11%	43%	162,640	21,080	183,720	89%	11%	43%
South Carolina Solutions	81,221	13,310	94,531	86%	14%	21%	79,175	13,257	92,432	86%	14%	22%
Unison Health Plan	43,715	12,355	56,070	78%	22%	13%	42,769	12,036	54,805	78%	22%	13%
Totals	355,417	85,837	441,254	81%	19%	100%	343,992	83,993	427,985	80%	20%	100%

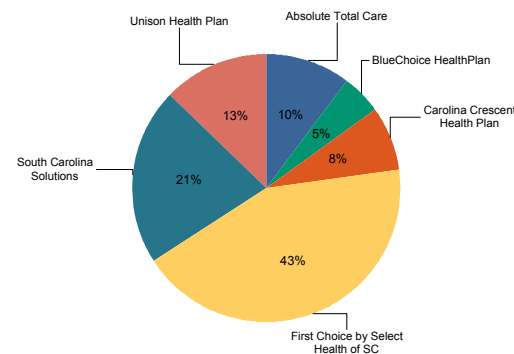
Total Choice Enrollments



Total Auto Assignments



Total Enrollments



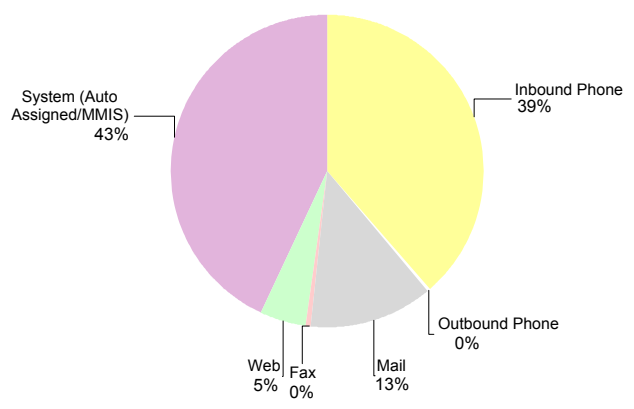
Historical Enrollment by Method - Data

	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09
Plan Enrollments	44,378	34,490	36,583	31,254	22,510	24,297	22,242	27,583	23,450	26,367	25,078	23,767	29,497
	100%	84%	81%	84%	80%	79%	79%	76%	76%	76%	78%	76%	77%
Inbound Phone	16,829 38%	12,211 35%	9,596 26%	9,627 31%	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%
Outbound Phone	115 -	66 -	24 -	15 -	25 -	11 -	12 -	42 -	14 -	11 -	22 -	4 -	28 -
Mail	5,688 13%	3,198 9%	5,171 14%	4,453 14%	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%
Fax	286 1%	391 1%	209 1%	198 1%	125 1%	118 -	103 -	151 1%	116 -	123 -	136 1%	124 1%	128 -
Web	3,882 9%	2,676 8%	2,420 7%	2,967 9%	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%
System (Auto Assigned/MMIS)	17,578 40%	15,948 46%	19,163 52%	13,994 45%	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%
FFS Enrollments	-	6,393	8,734	5,831	5,777	6,277	5,965	8,479	7,500	8,156	6,993	7,473	8,934
	-	16%	19%	16%	20%	21%	21%	24%	24%	24%	22%	24%	23%
Inbound Phone	-	5,433 85%	6,993 80%	4,467 77%	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%
Outbound Phone	-	31 -	13 -	11 -	10 -	17 -	15 -	13 -	8 -	16 -	8 -	4 -	11 -
Mail	-	608 10%	1,272 15%	907 16%	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%
Fax	-	65 1%	49 1%	32 1%	37 1%	39 1%	40 1%	63 1%	47 1%	53 1%	51 1%	41 1%	72 1%
Web	-	256 4%	407 5%	414 7%	329 6%	451 7%	307 5%	562 7%	378 5%	443 5%	429 6%	391 5%	525 6%
Total Enrollments	44,378	40,883	45,317	37,085	28,287	30,574	28,207	36,062	30,950	34,523	32,071	31,240	38,431
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Inbound Phone	16,829 38%	17,644 43%	16,589 37%	14,094 38%	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%
Outbound Phone	115 -	97 -	37 -	26 -	35 -	28 -	27 -	55 -	22 -	27 -	30 -	8 -	39 -
Mail	5,688 13%	3,806 9%	6,443 14%	5,360 14%	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%
Fax	286 1%	456 1%	258 1%	230 1%	162 1%	157 1%	143 1%	214 1%	163 1%	176 1%	187 1%	165 1%	200 1%
Web	3,882 9%	2,932 7%	2,827 6%	3,381 9%	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%
System (Auto Assigned/MMIS)	17,578 40%	15,948 39%	19,163 42%	13,994 38%	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%

Historical Enrollment by Method - Graphical Summary

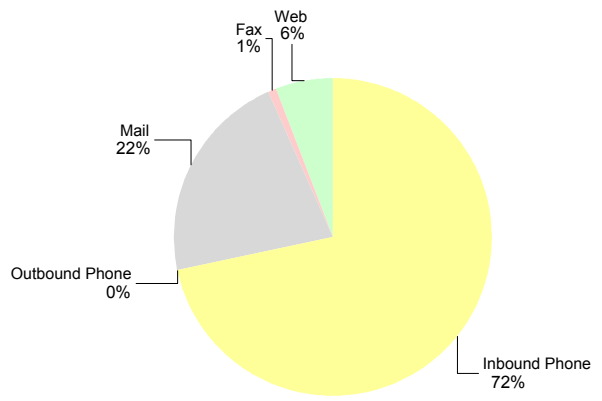
Health Plan Enrollments by Method

Current Enrollment Period



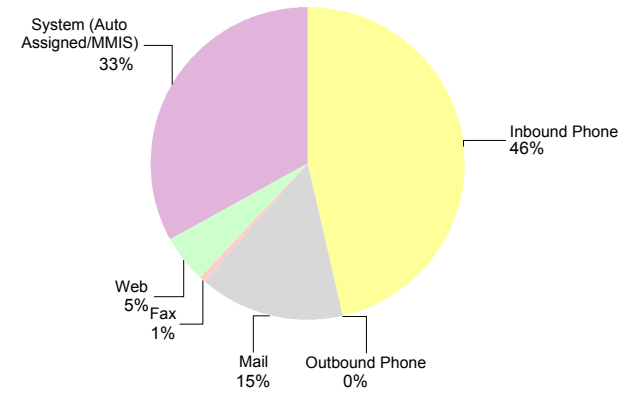
FFS Enrollments by Method

Current Enrollment Period



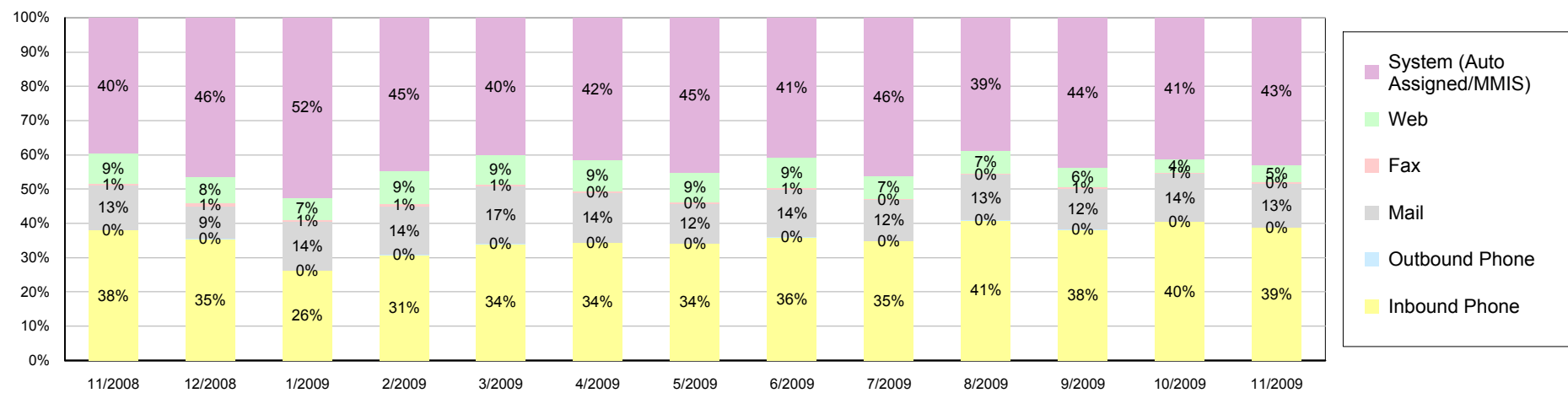
Total Enrollments by Method

Current Enrollment Period



Health Plan Enrollments by Method

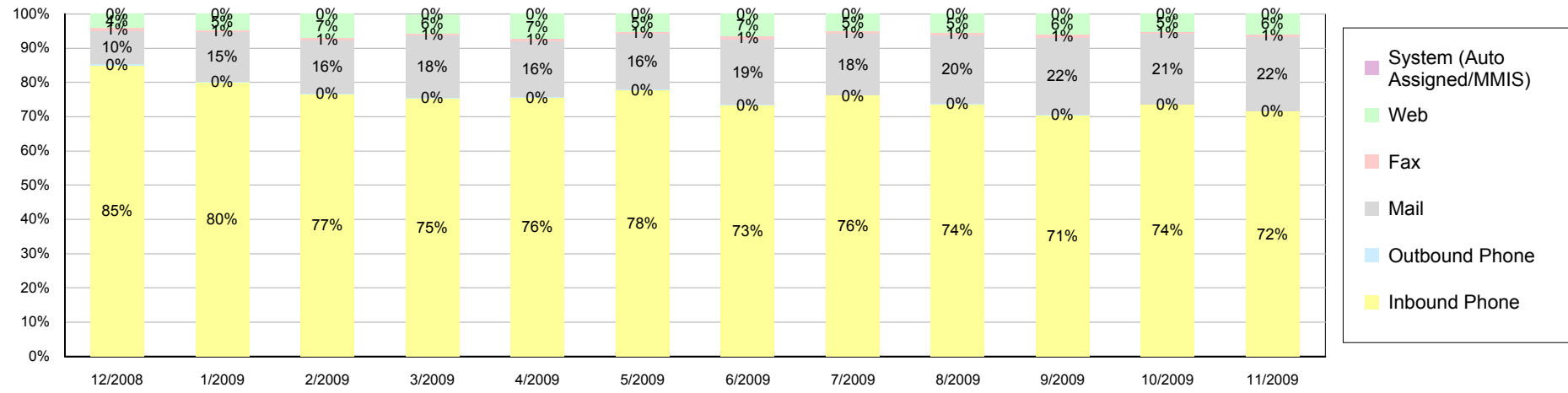
Historical Trend



Historical Enrollment by Method - Graphical Summary (contd.)

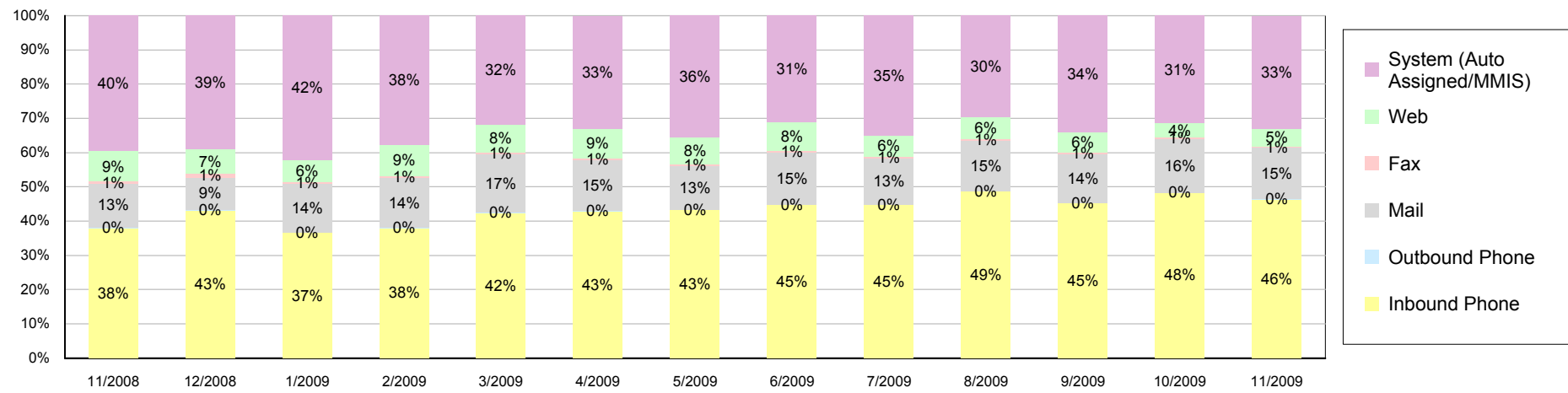
Fee For Service Enrollments by Method

Historical Trend



Total Enrollments by Method

Historical Trend



Disenrollment Information

Fee For Service Choice Reasons

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

	Nov-09		Oct-09		SFY 2010 Jul-09 - Jun-10	
	#	%	#	%	#	%
35 - Doctor Not Part Of Network	2,619	29%	2,497	33%	13,063	33%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	97	1%	60	1%	396	1%
37 - Entering A Waiver Program or enters MFPC	8	0%	11	0%	45	0%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	306	3%	168	2%	1,056	3%
41 A - Other (Phone)	3,074	34%	2,627	35%	10,572	27%
41 B - Other (Mail, Fax, Web)	617	7%	603	8%	6,087	16%
42 - No reason provided on enrollment form	1,838	21%	1,294	17%	6,731	17%
64 - Plan does not cover certain services because of moral or religious reasons	3	0%	-	0%	5	0%
70 - Member Placed Out of Home	11	0%	15	0%	50	0%
75 - Pharmacy Not Part Of Network	13	0%	-	0%	13	0%
84 - Member utilizes services from multiple par and non-par providers	346	4%	194	3%	1,018	3%
A - Administrative	2	0%	4	0%	20	0%
Total Fee For Service Choice	8,934	100%	7,473	100%	39,056	100%

Nov-08		Oct-08		SFY 2009 Jul-08 - Jun-09	
#	%	#	%	#	%
2,515	27%	519	13%	20,862	34%
63	1%	-	-	481	1%
-	-	-	-	13	-
70	1%	-	-	972	2%
-	-	-	-	-	-
6,603	70%	3,433	85%	36,241	60%
-	-	-	-	872	1%
2	-	-	-	16	-
-	-	-	-	17	-
-	-	-	-	-	-
115	1%	6	-	1,242	2%
-	-	61	2%	127	-
9,368	100%	4,019	100%	60,843	100%

Transfer to Fee For Service Reasons

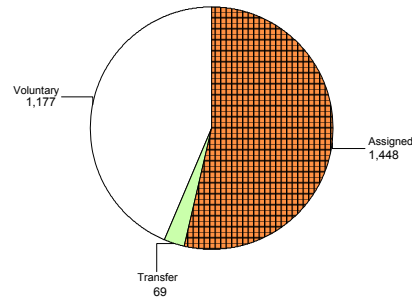
	Nov-09		Oct-09		SFY 2010 Jul-09 - Jun-10	
	#	%	#	%	#	%
06 - Managed Care Provider Terminated	-	0%	-	0%	1	0%
08 - Member Has Private HMO Coverage	-	0%	-	0%	-	0%
30 - Moved Out of Plan Service Area	6	0%	4	0%	40	0%
31 - Got Poor Quality Care	37	1%	28	1%	164	1%
34 - Lack of Access to Services Covered Under the Contract	65	2%	39	2%	247	2%
35 - Doctor Not Part Of Network	1,296	48%	1,204	52%	6,574	53%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	28	1%	36	2%	147	1%
37 - Entering A Waiver Program or enters MFPC	38	1%	11	0%	143	1%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	348	13%	230	10%	1,318	11%
41 - Other	664	25%	645	28%	3,030	24%
42 - No reason provided on enrollment form	30	1%	21	1%	119	1%
53 - Didn't Realize What I was Signing Up For	27	1%	27	1%	142	1%
64 - Plan does not cover certain services because of moral or religious reasons	4	0%	2	0%	24	0%
69 - Fraudulent Use of Medicaid Card	-	0%	-	0%	-	0%
70 - Member Placed Out of Home	13	0%	11	0%	50	0%
75 - Pharmacy Not Part Of Network	9	0%	-	0%	9	0%
83 - Want to be Plan with Family Members	14	1%	10	0%	71	1%
84 - Member utilizes services from multiple par and non-par providers	102	4%	58	2%	351	3%
85 - Health Plan Referral Policy is unfavorable to Member	13	0%	3	0%	54	0%
A - Administrative	-	0%	2	0%	6	0%
Total Transfers to Fee For Service	2,694	100%	2,331	100%	12,490	100%

Nov-08		Oct-08		SFY 2009 Jul-08 - Jun-09	
#	%	#	%	#	%
-	-	-	-	-	-
-	-	4	-%	6	-%
14	-%	14	-%	108	-%
27	1%	-	-	376	1%
77	2%	55	2%	458	1%
2,292	45%	1,215	37%	18,174	54%
19	-%	1	-%	293	1%
-	-	-	-	25	-%
322	6%	2	-%	3,220	10%
2,141	42%	1,862	57%	9,185	27%
-	-	-	-	14	-%
32	1%	11	-%	378	1%
-	-	-	-	19	-%
2	-%	-	-	3	-%
-	-	-	-	16	-%
-	-	-	-	-	-
2	-%	-	-	107	-%
76	2%	76	2%	998	3%
21	-%	9	-%	110	-%
24	-%	41	1%	191	1%
5,049	100%	3,290	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	3	0%	1	1%	2	0%	6	0%
31 - Got Poor Quality Care	23	2%	2	3%	12	1%	37	1%
34 - Lack of Access to Services Covered Under the Contract	50	4%	2	3%	13	1%	65	2%
35 - Doctor Not Part Of Network	513	44%	19	28%	764	53%	1,296	48%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	13	1%	3	4%	12	1%	28	1%
37 - Entering A Waiver Program or enters MFCP	19	2%	3	4%	16	1%	38	1%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	195	17%	13	19%	140	10%	348	13%
41 - Other	236	20%	24	35%	404	28%	664	25%
42 - No reason provided on enrollment form	28	2%	-	0%	2	0%	30	1%
53 - Didn't Realize What I was Signing Up For	22	2%	-	0%	5	0%	27	1%
64 - Plan does not cover certain services because of moral or religious reasons	2	0%	1	1%	1	0%	4	0%
69 - Fraudulent Use of Medicaid Card	-	0%	-	0%	-	0%	-	0%
70 - Member Placed Out of Home	9	1%	-	0%	4	0%	13	0%
75 - Pharmacy Not Part Of Network	9	1%	-	0%	-	0%	9	0%
83 - Want to be Plan with Family Members	6	1%	1	1%	7	0%	14	1%
84 - Member utilizes services from multiple par and non-par providers	43	4%	-	0%	59	4%	102	4%
85 - Health Plan Referral Policy is unfavorable to Member	6	1%	-	0%	7	0%	13	0%
A - Administrative	-	0%	-	0%	-	0%	-	0%
Total Enrollment	1,177	100%	69	100%	1,448	100%	2,694	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	693	16	74	425	92	76	387	1,070
BlueChoice HealthPlan	50	349	60	359	87	67	339	962
Carolina Crescent Health Plan	58	10	633	353	82	64	435	1,002
First Choice by Select Health of SC	79	25	48	2,791	145	138	626	1,061
South Carolina Solutions	49	11	43	433	1,050	94	398	1,028
Unison Health Plan	64	19	47	499	110	832	509	1,248
FFS	393	268	361	722	534	393	2,694	2,671
Total Transfers To	693	349	633	2,791	1,050	832	2,694	9,042

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

20091026_Dashboard_November 2009_Final

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.