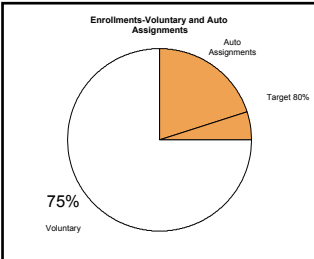
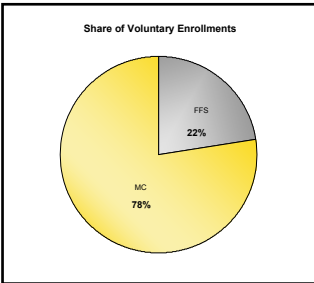


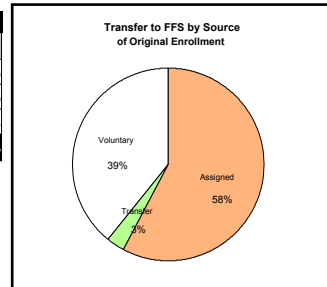
SCDMPRD

Enrollment Snapshot

Enrollment Snapshot													
Current Year													
Last Year													
Effective Month - Jan-2010	Jan-10		Dec-09		SFY 2010 Jul-09 - Jun-10		Jan-09		Dec-08		SFY 2009 Jul-08 - Jun-09		
	#	%	#	%	#	%	#	%	#	%	#	%	
A. Assignment Pool (Excludes FFS Default)	15,652		17,846		121,767		31,819		25,262		299,986		
B. Voluntary Choice	9,409		9,716		69,263		14,320		11,828		162,371		
B1. Managed Care	6,567		6,678		48,341		10,106		8,394		121,593		
B2. Fee For Service	2,842		3,038		20,922		4,214		3,434		40,778		
C. Voluntary Choice - Not in the Assignment Pool *	9,422		9,366		98,689		13,691		15,781		130,918		
C1. Managed Care	7,652		7,489		70,073		8,978		12,662		93,938		
C2. Fee For Service	1,391		1,679		27,084		4,520		2,959		35,780		
C3. Zaps to Managed Care	379		198		1,532		193		160		1,200		
D. Auto Assignments	6,243	25%	8,130	30%	52,504	24%	17,499	38%	13,434	33%	137,615	32%	
E. Total Voluntary Choice (= B + C)	18,831	75%	19,082	70%	167,952	76%	28,011	62%	27,609	67%	293,289	68%	
F. Total Enrollments (= B + C + D)	25,074		27,212		220,456		45,510		41,043		430,904		
G. Fee For Service	4,233		4,717		48,006		8,734		6,393		76,558		
G1. Share of Voluntary Enrollments (= (B2 + C2)/E)		22%		25%		29%		31%		23%		26%	
G2. Share of Total Enrollments (= (B2 + C2) / F)		17%		17%		22%		19%		16%		18%	
H. Members in 90 Day Choice Period	109,031		112,531		777,396		138,610		134,574		1,458,822		
H1. Total Transfers within 90 Days (= H3 + H4)	5,400		6,524		51,415		6,812		6,999		105,975		
H2. Transfer Percent		5%		6%		7%		5%		5%		7%	
H3.90 Day Transfers to Fee For Service	2,147	40%	2,329	36%	16,966	33%	3,350	49%	3,580	51%	NA	NA	
H4. 90 Day Transfers to Health Plans	3,253	60%	4,195	64%	34,449	67%	3,462	51%	3,419	49%	NA	NA	

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

January-2010 Snapshot		January 2010	Transfers					Current Eligibles			
Target	80%		From		To			Assignables		Non-Assignables	
			FFS	MCO	MHN	Total		Enrolled into MC			
Actual (= E / F)	75%			260	96	356		343,903		108,183	452,086
FFS Share of Voluntary Enrollment (= G1)	22%		MCO	1,878	1,974	4,330		71,980		22,145	94,125
MC Share of Voluntary Enrollment (100-G1)	78%		MHN	269	445	714		24,940		99,583	124,523
			<b>Total</b>	<b>2,147</b>	<b>2,679</b>	<b>5,400</b>		<b>Total</b>	<b>440,823</b>	<b>229,911</b>	<b>670,734</b>



Top Transfer/ Disenrollment Reasons			
Fee For Service Choice Reasons		Transfer to Fee For Service Reasons	
1) 41 A - Other (Phone)	1,409	35 - Doctor Not Part Of Network	1,089
2) 35 - Doctor Not Part Of Network	1,320	41 - Other	435
3) 42 - No reason provided on enrollment form	781	39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	274

Call Center Statistics			Current Year						Last Year					
Effective Month - Jan-2010	Jan-10		Dec-09		SFY 2010 Jul-09 - Jun-10			Jan-09		Dec-08		SFY 2009 Jul-08 - Jun-09		
	#	%	#	%	#	%		#	%	#	%			
A. Total Calls Received	18,656		19,968		173,991			29,183		23,677		287,828		
B. Total Calls Answered	18,393		19,840		172,202			26,374		22,607		278,845		
C. Totals Calls Abandoned after Threshold	145	1%	44		1,230	1%		2,809	10%	1,070	5%	8,983	3%	
D. Average Speed to Answer in seconds	20		13		-			86		44		-		
Days in Call Period	11/18/09 - 12/15/09		10/23/09 - 11/17/09					11/19/08 - 12/16/08		10/24/08 - 11/18/08				

20091220\_Dashboard\_January 2010\_Final

### SCDMPRD

### Historical Enrollment Data

Numerator													
	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09	12/09	01/10
A. Voluntary Choice - Assignment Pool	14,320	13,499	6,815	7,940	6,968	11,704	8,381	11,646	8,449	8,678	12,984	9,716	9,409
A1. Member Selected MC Plan	10,106	10,407	5,018	5,842	4,991	8,331	5,606	8,177	6,092	6,186	9,035	6,678	6,567
A2. Member Selected FFS	4,214	3,092	1,797	2,098	1,977	3,373	2,775	3,469	2,357	2,492	3,949	3,038	2,842
B. Voluntary Choice - Not in Assign Pool	13,691	11,539	15,607	15,201	14,174	16,578	15,699	15,815	15,777	15,995	16,615	9,366	9,422
B1. Member Selected MC Plan	8,978	8,712	11,428	10,922	10,110	11,088	10,774	10,968	10,933	10,848	11,409	7,489	7,652
B2. Member Selected FFS	4,520	2,739	3,980	4,179	3,988	5,106	4,725	4,687	4,636	4,981	4,985	1,679	1,391
B3. Member Zapped into MC Plan	193	88	199	100	76	384	200	160	208	166	221	198	379
<b>Total Voluntary Choice (=A+B)</b>	<b>28,011</b>	<b>25,038</b>	<b>22,422</b>	<b>23,141</b>	<b>21,142</b>	<b>28,282</b>	<b>24,080</b>	<b>27,461</b>	<b>24,226</b>	<b>24,673</b>	<b>29,599</b>	<b>19,082</b>	<b>18,831</b>
Denominator													
	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09	12/09	01/10
C. Members up for auto-enroll	32,886	26,453	13,122	15,754	14,300	20,087	15,605	19,084	16,651	15,580	22,262	18,203	15,887
B. Voluntary Choice - Not in Assign Pool	13,691	11,539	15,607	15,201	14,174	16,578	15,699	15,815	15,777	15,995	16,615	9,366	9,422
D. FFS by Default **	(1,067)	(819)	(243)	(281)	(191)	(219)	(154)	(216)	(149)	(169)	(225)	(357)	(235)
<b>Total Beneficiaries in the Month (= C+B+D)</b>	<b>45,510</b>	<b>37,173</b>	<b>28,486</b>	<b>30,674</b>	<b>28,283</b>	<b>36,446</b>	<b>31,150</b>	<b>34,683</b>	<b>32,279</b>	<b>31,406</b>	<b>38,652</b>	<b>27,212</b>	<b>25,074</b>
	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09	12/09	01/10
Members Auto Assigned	17,499	12,135	6,064	7,533	7,141	8,164	7,070	7,222	8,053	6,733	9,053	8,130	6,243
Auto Assignment Rate	38%	33%	21%	25%	25%	22%	23%	21%	25%	21%	23%	30%	25%
	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09	12/09	01/10
Voluntary Selection Rate	62%	67%	79%	75%	75%	78%	77%	79%	75%	79%	77%	70%	75%
Total MC Choices (= A1+B1+B3)	19,277	19,207	16,645	16,864	15,177	19,803	16,580	19,305	17,233	17,200	20,665	14,365	14,598
Total FFS Choices (= A2+B2)	8,734	5,831	5,777	6,277	5,965	8,479	7,500	8,156	6,993	7,473	8,934	4,717	4,233
FFS Choice as a Percent of Member Choices	31%	23%	26%	27%	28%	30%	31%	30%	29%	30%	30%	25%	22%

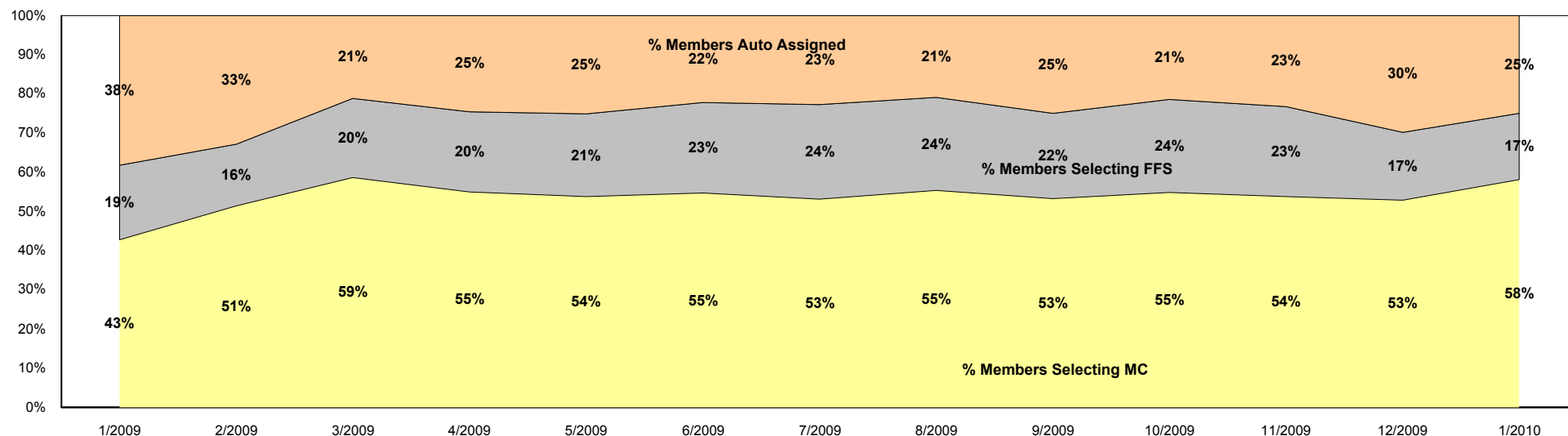
\*\* Beneficiaries who were part of the pool initially but at the time of auto enrollment were no longer eligible.

**SCDMPRD**

**Historical Enrollment Data - Graphical Summary**

<b>Trendlines - Quantities</b>	<b>01/09</b>	<b>02/09</b>	<b>03/09</b>	<b>04/09</b>	<b>05/09</b>	<b>06/09</b>	<b>07/09</b>	<b>08/09</b>	<b>09/09</b>	<b>10/09</b>	<b>11/09</b>	<b>12/09</b>	<b>01/10</b>
All Members Selected MC Plan	19,277	19,207	16,645	16,864	15,177	19,803	16,580	19,305	17,233	17,200	20,665	14,365	14,598
All Members Selected FFS	8,734	5,831	5,777	6,277	5,965	8,479	7,500	8,156	6,993	7,473	8,934	4,717	4,233
All Members Auto Assigned	17,499	12,135	6,064	7,533	7,141	8,164	7,070	7,222	8,053	6,733	9,053	8,130	6,243
<b>Total (Volume)</b>	<b>45,510</b>	<b>37,173</b>	<b>28,486</b>	<b>30,674</b>	<b>28,283</b>	<b>36,446</b>	<b>31,150</b>	<b>34,683</b>	<b>32,279</b>	<b>31,406</b>	<b>38,652</b>	<b>27,212</b>	<b>25,074</b>

<b>Trendlines - Percentages (Graphed below)</b>	<b>01/09</b>	<b>02/09</b>	<b>03/09</b>	<b>04/09</b>	<b>05/09</b>	<b>06/09</b>	<b>07/09</b>	<b>08/09</b>	<b>09/09</b>	<b>10/09</b>	<b>11/09</b>	<b>12/09</b>	<b>01/10</b>
All Members Selected MC Plan (%)	43%	51%	59%	55%	54%	55%	53%	55%	53%	55%	54%	53%	58%
All Members Selected FFS (%)	19%	16%	20%	20%	21%	23%	24%	24%	22%	24%	23%	17%	17%
All Members Auto Assigned (%)	38%	33%	21%	25%	25%	22%	23%	21%	25%	21%	23%	30%	25%

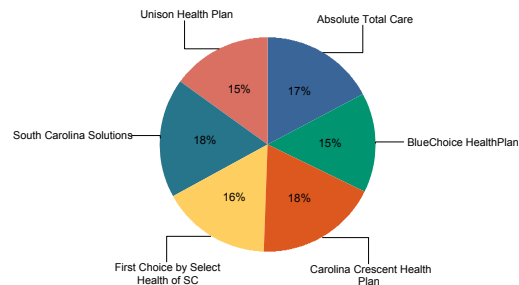


**\*\* Note:** For the graphical representation we consider ALL members regardless whether they are in the Assignment Pool.

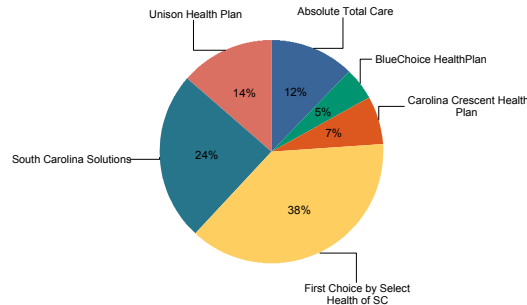
**Plan Summary: Current and Previous Month Comparison**

Effective Month 01/10								Effective Month 12/09					
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total		Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	1,775	1,072	2,847	62%	38%	14%		1,824	1,357	3,181	57%	43%	14%
AMERIGROUP Community Care	-	-	-	-	-	-		-	-	-	-	-	-
BlueChoice HealthPlan	685	943	1,628	42%	58%	8%		667	1,177	1,844	36%	64%	8%
Carolina Crescent Health Plan	1,010	1,148	2,158	47%	53%	10%		1,035	1,472	2,507	41%	59%	11%
CHCcares of South Carolina	-	-	-	-	-	-		-	-	-	-	-	-
First Choice by Select Health of SC	5,588	1,020	6,608	85%	15%	32%		6,192	1,454	7,646	81%	19%	34%
South Carolina Solutions	3,559	1,125	4,684	76%	24%	22%		2,763	1,473	4,236	65%	35%	19%
Unison Health Plan	1,981	935	2,916	68%	32%	14%		1,884	1,197	3,081	61%	39%	14%
Totals	14,598	6,243	20,841	70%	30%	100%	14,365	8,130	22,495	64%	36%	100%	

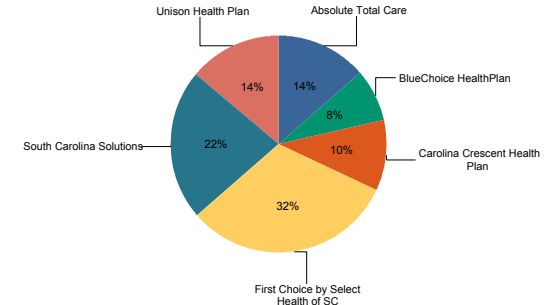
Current Month: Share of Auto Assignments



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 01/09								Effective Month 12/08					
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total		Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	1,041	2,849	3,890	27%	73%	11%		1,029	1,770	2,799	37%	63%	8%
AMERIGROUP Community Care	698	-	698	100%	-	2%		1,118	1,686	2,804	40%	60%	8%
BlueChoice HealthPlan	1,247	2,385	3,632	34%	66%	10%		1,100	1,866	2,966	37%	63%	9%
Carolina Crescent Health Plan	1,270	3,077	4,347	29%	71%	12%		1,559	1,645	3,204	49%	51%	9%
CHCcares of South Carolina	200	1,141	1,341	15%	85%	4%		136	410	546	25%	75%	2%
First Choice by Select Health of SC	6,829	3,067	9,896	69%	31%	27%		8,074	2,473	10,547	77%	23%	30%
South Carolina Solutions	4,570	2,535	7,105	64%	36%	19%		5,135	2,053	7,188	71%	29%	21%
Unison Health Plan	3,422	2,445	5,867	58%	42%	16%		3,065	1,531	4,596	67%	33%	13%
Totals	19,277	17,499	36,776	52%	48%	100%		21,216	13,434	34,650	61%	39%	100%

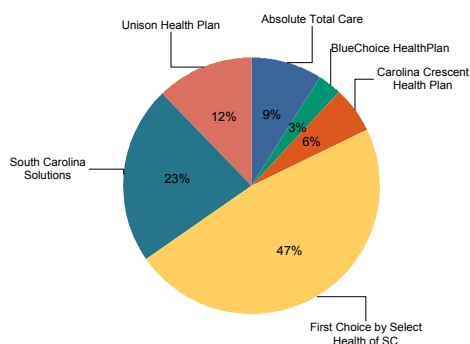
**Plan Summary: SFY 2010 vs SFY 2009 Comparison**

	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	10,961	8,914	19,875	55%	45%	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	5,749	7,641	13,390	43%	57%	8%		7,092	9,709	16,801	42%	58%	8%
Carolina Crescent Health Plan	9,204	9,540	18,744	49%	51%	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	50,823	9,333	60,156	84%	16%	35%		50,039	12,406	62,445	80%	20%	31%
South Carolina Solutions	26,218	9,226	35,444	74%	26%	21%		30,071	11,239	41,310	73%	27%	21%
Unison Health Plan	16,839	7,850	24,689	68%	32%	14%		19,563	9,675	29,238	67%	33%	15%
<b>Totals</b>	<b>119,946</b>	<b>52,504</b>	<b>172,450</b>	<b>70%</b>	<b>30%</b>	<b>100%</b>		<b>128,189</b>	<b>71,970</b>	<b>200,159</b>	<b>64%</b>	<b>36%</b>	<b>100%</b>

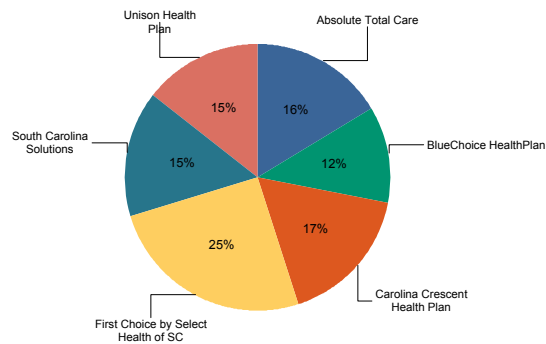
**Plan Summary: Current and Previous Month Existing Total Enrollment Comparison**

	As of 01/10							As of 12/09					
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total		Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	32,859	14,069	46,928	70%	30%	10%		31,904	14,089	45,993	69%	31%	10%
AMERIGROUP Community Care	-	-	-	-	-	-		-	-	-	-	-	-
BlueChoice HealthPlan	11,170	10,176	21,346	52%	48%	5%		10,933	10,196	21,129	52%	48%	5%
Carolina Crescent Health Plan	20,702	14,785	35,487	58%	42%	8%		20,215	14,791	35,006	58%	42%	8%
CHCcares of South Carolina	-	-	-	-	-	-		-	-	-	-	-	-
First Choice by Select Health of SC	173,575	21,843	195,418	89%	11%	43%		171,501	21,858	193,359	89%	11%	43%
South Carolina Solutions	82,670	13,086	95,756	86%	14%	21%		81,788	13,526	95,314	86%	14%	21%
Unison Health Plan	44,603	12,548	57,151	78%	22%	13%		44,000	12,594	56,594	78%	22%	13%
<b>Totals</b>	<b>365,579</b>	<b>86,507</b>	<b>452,086</b>	<b>81%</b>	<b>19%</b>	<b>100%</b>		<b>360,341</b>	<b>87,054</b>	<b>447,395</b>	<b>81%</b>	<b>19%</b>	<b>100%</b>

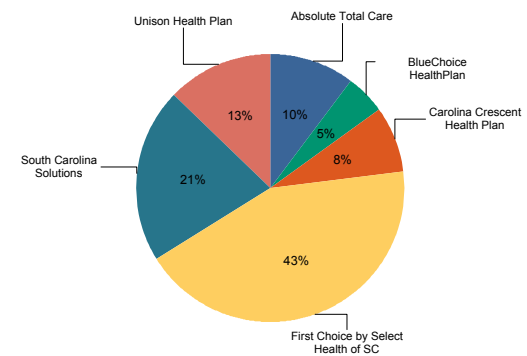
**Total Choice Enrollments**



**Total Auto Assignments**



**Total Enrollments**



# South Carolina Healthy Connections Choices

**Enrollment Period January 2010**

Enrollment Numbers are as of 12/20/2009

SCDMPRD

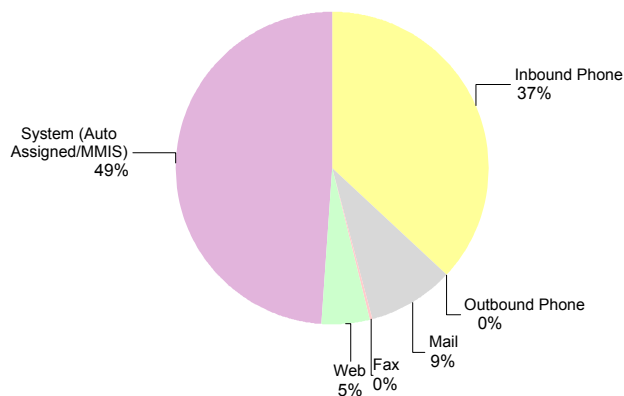
## Historical Enrollment by Method - Data

	01/09	02/09	03/09	04/09	05/09	06/09	07/09	08/09	09/09	10/09	11/09	12/09	01/10
<b>Plan Enrollments</b>	<b>36,583</b>	<b>31,254</b>	<b>22,510</b>	<b>24,297</b>	<b>22,242</b>	<b>27,583</b>	<b>23,450</b>	<b>26,367</b>	<b>25,078</b>	<b>23,767</b>	<b>29,497</b>	<b>22,297</b>	<b>20,462</b>
	81%	84%	80%	79%	79%	76%	76%	76%	78%	76%	77%	83%	83%
Inbound Phone	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%	7,961 36%	7,552 37%
Outbound Phone	24 -	15 -	25 -	11 -	12 -	42 -	14 -	11 -	22 -	4 -	28 -	22 -	33 -
Mail	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%	2,199 10%	1,798 9%
Fax	209 1%	198 1%	125 1%	118 -	103 -	151 1%	116 -	123 -	136 1%	124 1%	128 -	105 -	73 -
Web	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%	1,040 5%	1,001 5%
System (Auto Assigned/MMIS)	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%	10,970 49%	10,005 49%
<b>FFS Enrollments</b>	<b>8,734</b>	<b>5,831</b>	<b>5,777</b>	<b>6,277</b>	<b>5,965</b>	<b>8,479</b>	<b>7,500</b>	<b>8,156</b>	<b>6,993</b>	<b>7,473</b>	<b>8,934</b>	<b>4,717</b>	<b>4,233</b>
	19%	16%	20%	21%	21%	24%	24%	24%	22%	24%	23%	17%	17%
Inbound Phone	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%	3,485 74%	3,122 74%
Outbound Phone	13 -	11 -	10 -	17 -	15 -	13 -	8 -	16 -	8 -	4 -	11 -	3 -	8 -
Mail	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%	786 17%	753 18%
Fax	49 1%	32 1%	37 1%	39 1%	40 1%	63 1%	47 1%	53 1%	51 1%	41 1%	72 1%	54 1%	30 1%
Web	407 5%	414 7%	329 6%	451 7%	307 5%	562 7%	378 5%	443 5%	429 6%	391 5%	525 6%	389 8%	320 8%
<b>Total Enrollments</b>	<b>45,317</b>	<b>37,085</b>	<b>28,287</b>	<b>30,574</b>	<b>28,207</b>	<b>36,062</b>	<b>30,950</b>	<b>34,523</b>	<b>32,071</b>	<b>31,240</b>	<b>38,431</b>	<b>27,014</b>	<b>24,695</b>
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Inbound Phone	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%	11,446 42%	10,674 43%
Outbound Phone	37 -	26 -	35 -	28 -	27 -	55 -	22 -	27 -	30 -	8 -	39 -	25 -	41 -
Mail	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%	2,985 11%	2,551 10%
Fax	258 1%	230 1%	162 1%	157 1%	143 1%	214 1%	163 1%	176 1%	187 1%	165 1%	200 1%	159 1%	103 -
Web	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%	1,429 5%	1,321 5%
System (Auto Assigned/MMIS)	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%	10,970 41%	10,005 41%

Historical Enrollment by Method - Graphical Summary

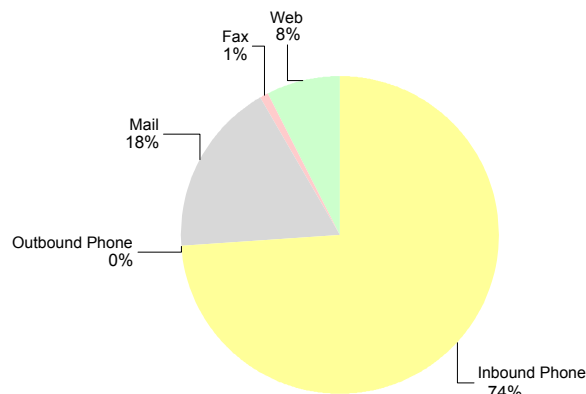
Health Plan Enrollments by Method

Current Enrollment Period



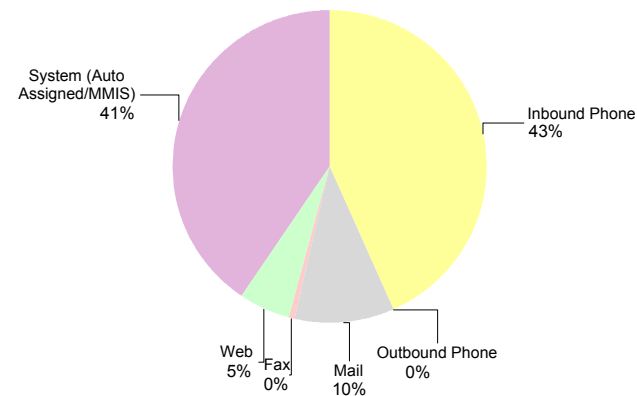
FFS Enrollments by Method

Current Enrollment Period



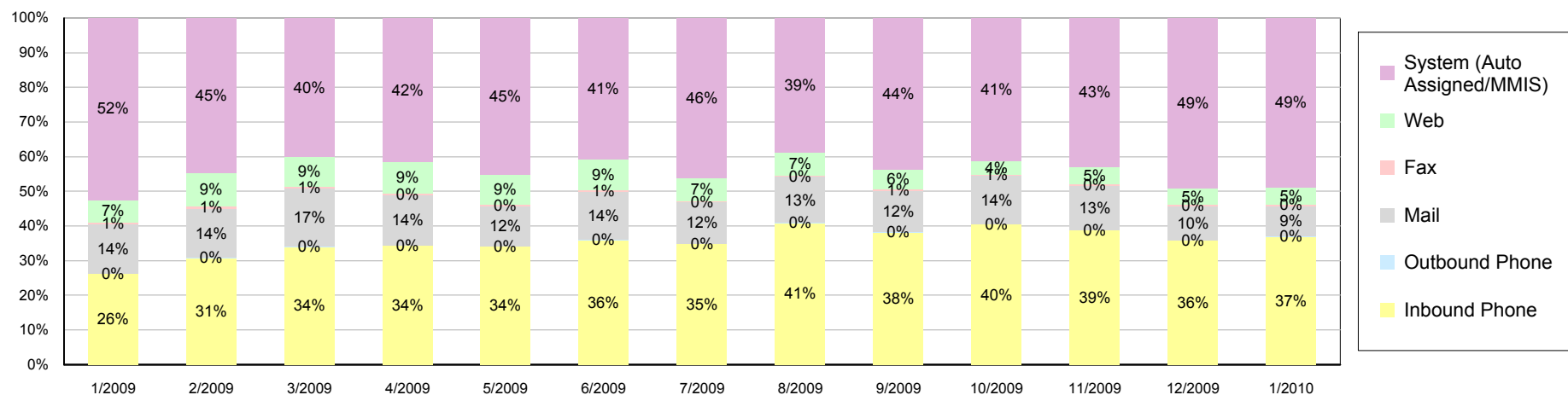
Total Enrollments by Method

Current Enrollment Period



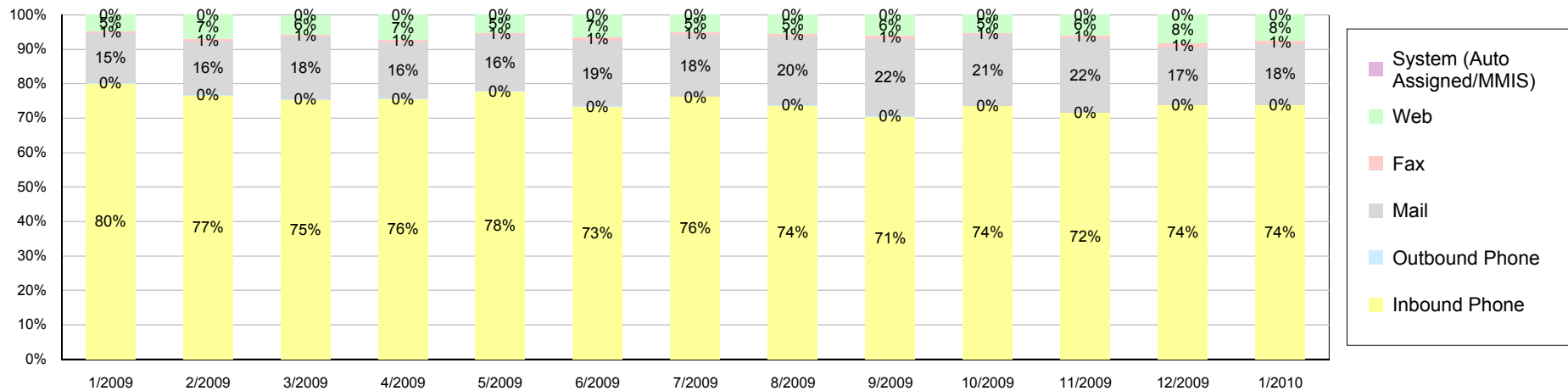
Health Plan Enrollments by Method

Historical Trend



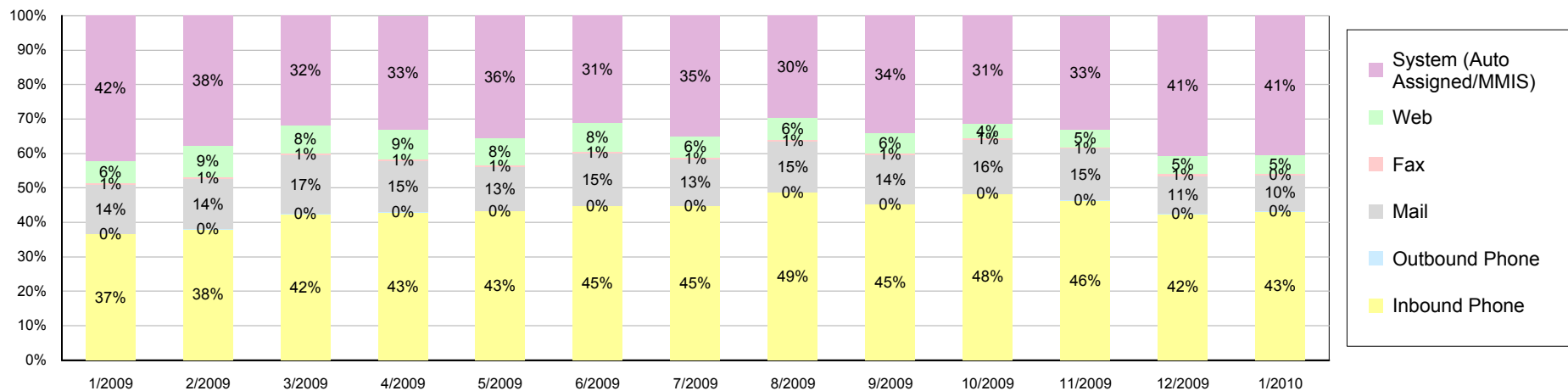
**Fee For Service Enrollments by Method**

Historical Trend



**Total Enrollments by Method**

Historical Trend





### SCDMPRD

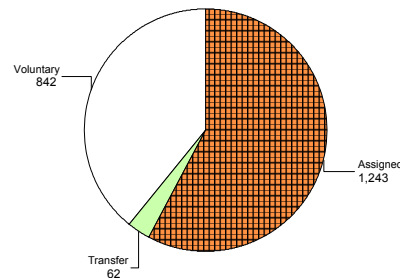
### Disenrollment Information

Fee For Service Choice Reasons			Jan-10			Dec-09			SFY 2010 Jul-09 - Jun-10		
* 41-Other was not split into Mail/Fax/Web & Phone until August 09			#	%	#	%	#	%	#	%	
35 - Doctor Not Part Of Network			1,320	31%	1,404	30%	15,787	33%			
36 - Lack of Access to Providers Experienced With Member's Health Care Needs			34	1%	82	2%	512	1%			
37 - Entering A Waiver Program or enters MFCP			6	0%	9	0%	60	0%			
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid			165	4%	209	4%	1,430	3%			
41 A - Other (Phone)			1,409	33%	1,499	32%	13,480	28%			
41 B - Other (Mail, Fax, Web)			318	8%	383	8%	6,788	14%			
42 - No reason provided on enrollment form			781	18%	833	18%	8,345	17%			
64 - Plan does not cover certain services because of moral or religious reasons			2	0%	6	0%	13	0%			
70 - Member Placed Out of Home			-	0%	12	0%	62	0%			
75 - Pharmacy Not Part Of Network			3	0%	5	0%	21	0%			
84 - Member utilizes services from multiple par and non-par providers			195	5%	273	6%	1,486	3%			
A - Administrative			-	0%	2	0%	22	0%			
Total Fee For Service Choice			4,233	100%	4,717	100%	48,006	100%			

Transfer to Fee For Service Reasons			Jan-10			Dec-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			3	0%	8	0%	51	0%			
31 - Got Poor Quality Care			2	0%	24	1%	190	1%			
34 - Lack of Access to Services Covered Under the Contract			66	3%	83	4%	396	2%			
35 - Doctor Not Part Of Network			1,089	51%	1,142	49%	8,805	52%			
36 - Lack of Access to Providers Experienced With Member's Health Care Needs			45	2%	27	1%	219	1%			
37 - Entering A Waiver Program or enters MFCP			9	0%	11	0%	163	1%			
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid			274	13%	329	14%	1,921	11%			
41 - Other			435	20%	465	20%	3,930	23%			
42 - No reason provided on enrollment form			18	1%	35	2%	172	1%			
53 - Didn't Realize What I was Signing Up For			21	1%	12	1%	175	1%			
64 - Plan does not cover certain services because of moral or religious reasons			1	0%	3	0%	28	0%			
69 - Fraudulent Use of Medicaid Card			-	0%	-	0%	-	0%			
70 - Member Placed Out of Home			9	0%	14	1%	73	0%			
75 - Pharmacy Not Part Of Network			9	0%	3	0%	21	0%			
83 - Want to be Plan with Family Members			17	1%	20	1%	108	1%			
84 - Member utilizes services from multiple par and non-par providers			133	6%	141	6%	625	4%			
85 - Health Plan Referral Policy is unfavorable to Member			16	1%	12	1%	82	0%			
A - Administrative			-	0%	-	0%	6	0%			
Total Transfers to Fee For Service			2,147	100%	2,329	100%	16,966	100%			

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	1	0%	2	3%	-	0%	3	0%
31 - Got Poor Quality Care	1	0%	1	2%	-	0%	2	0%
34 - Lack of Access to Services Covered Under the Contract	34	4%	2	3%	30	2%	66	3%
35 - Doctor Not Part Of Network	377	45%	24	39%	688	55%	1,089	51%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	19	2%	6	10%	20	2%	45	2%
37 - Entering A Waiver Program or enters MFCP	6	1%	-	0%	3	0%	9	0%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	144	17%	9	15%	121	10%	274	13%
41 - Other	153	18%	12	19%	270	22%	435	20%
42 - No reason provided on enrollment form	13	2%	-	0%	5	0%	18	1%
53 - Didn't Realize What I was Signing Up For	17	2%	-	0%	4	0%	21	1%
64 - Plan does not cover certain services because of moral or religious reasons	1	0%	-	0%	-	0%	1	0%
69 - Fraudulent Use of Medicaid Card	-	0%	-	0%	-	0%	-	0%
70 - Member Placed Out of Home	6	1%	-	0%	3	0%	9	0%
75 - Pharmacy Not Part Of Network	2	0%	-	0%	7	1%	9	0%
83 - Want to be Plan with Family Members	6	1%	1	2%	10	1%	17	1%
84 - Member utilizes services from multiple par and non-par providers	49	6%	5	8%	79	6%	133	6%
85 - Health Plan Referral Policy is unfavorable to Member	13	2%	-	0%	3	0%	16	1%
A - Administrative	-	0%	-	0%	-	0%	-	0%
<b>Total Enrollment</b>	<b>842</b>	<b>100%</b>	<b>62</b>	<b>100%</b>	<b>1,243</b>	<b>100%</b>	<b>2,147</b>	<b>100%</b>

Transfer to Fee For Service by Source of Original Enrollment



	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		19	43	276	97	81	349	865
BlueChoice HealthPlan	33		51	272	71	73	250	750
Carolina Crescent Health Plan	61	24		239	79	64	327	794
First Choice by Select Health of SC	85	27	100		163	111	535	1,021
South Carolina Solutions	55	31	25	256		78	269	714
Unison Health Plan	54	21	36	304	68		417	900
FFS	39	10	34	111	96	66		356
Total Transfers To	327	132	289	1,458	574	473	2,147	5,400

#### 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

20091220\_Dashboard\_January 2010\_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.
<b>Current Enrollment Period Snapshot Percentages</b>		
	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)
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#### 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.
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