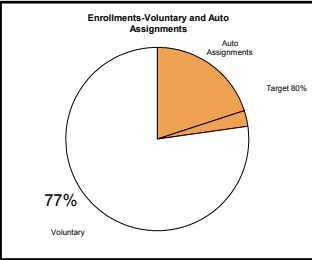
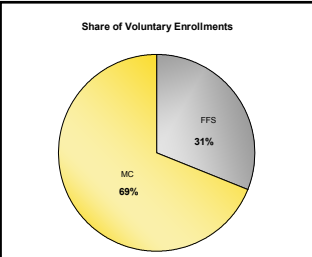
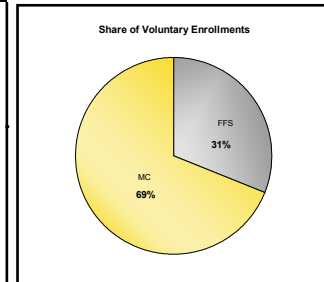
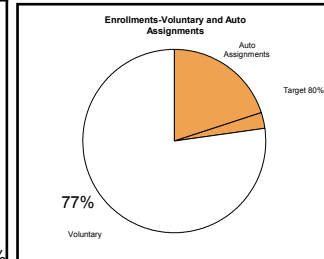


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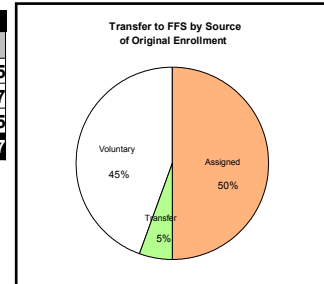
Enrollment Snapshot

Enrollment Snapshot													
Current Year													
Last Year													
Effective Month - Jul-2009	Jul-09		Jun-09		SFY 2010 Jul-09 - Jun-10		Jul-08		Jun-08		SFY 2009 Jul-08 - Jun-09		<div>Enrollments-Voluntary and Auto Assignments</div> 
	#	%	#	%	#	%	#	%	#	%	#	%	
A. Assignment Pool (Excludes FFS Default)	15,451		19,868		15,451		20,789		23,427		299,986		
B. Voluntary Choice	8,381		11,704		8,381		8,908		10,446		162,371		
B1. Managed Care	5,606		8,331		5,606		4,646		5,869		121,593		
B2. Fee For Service	2,775		3,373		2,775		4,262		4,577		40,778		
C. Voluntary Choice - Not in the Assignment Pool *	15,699		16,578		15,699		4,736		7,539		130,918		
C1. Managed Care	10,774		11,088		10,774		3,036		5,472		93,938		
C2. Fee For Service	4,725		5,106		4,725		1,700		2,067		35,780		
C3. Zaps to Managed Care	200		384		200		-		-		1,200		
D. Auto Assignments	7,070	23%	8,164	22%	7,070	23%	11,881	47%	12,981	42%	137,615	32%	
E. Total Voluntary Choice (= B + C)	24,080	77%	28,282	78%	24,080	77%	13,644	53%	17,985	58%	293,289	68%	
F. Total Enrollments (= B + C + D)	31,150		36,446		31,150		25,525		30,966		430,904		
G. Fee For Service	7,500		8,479		7,500		5,962		6,644		76,558		
G1. Share of Voluntary Enrollments (= (B2 + C2)/E)		31%		30%		31%		44%		37%		26%	
G2. Share of Total Enrollments (= (B2 + C2) / F)		24%		23%		24%		23%		21%		18%	
H. Members in 90 Day Choice Period	106,318		112,740		106,318		-		-		1,458,822		
H1. Total Transfers within 90 Days (= H3 + H4)	7,019		9,995		7,019		-		-		105,975		
H2. Transfer Percent		7%		9%		7%		-		-		7%	
H3.90 Day Transfers to Fee For Service	2,506	36%	3,339	33%	2,506	36%	-	-	-	-	NA	NA	
H4. 90 Day Transfers to Health Plans	4,513	64%	6,656	67%	4,513	64%	-	-	-	-	NA	NA	
<div>Share of Voluntary Enrollments</div> 													



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

July-2009 Snapshot		July 2009	Transfers To					Current Eligibles			
Target	80%		From	FFS	MCO	MHN	Total	Enrolled into MC	Assignable	Non-Assignable	Total
Actual (= E / F)	77%		FFS	-	1,508	354	1,862	286,469	115,976		402,445
FFS Share of Voluntary Enrollment (= G1)	31%		MCO	2,163	1,836	412	4,411	77,192	21,945		99,137
MC Share of Voluntary Enrollment (100-G1)	69%		MHN	343	403	-	746	26,731	119,244		145,975
			Total	2,506	3,747	766	7,019	Total	390,392	257,165	647,557



Top Transfer/ Disenrollment Reasons			
Fee For Service Choice Reasons		Transfer to Fee For Service Reasons	
1) 41 A - Other (Phone)	2,828	35 - Doctor or Pharmacy Not Part of Network	1,400
2) 35 - Doctor or Pharmacy Not Part of Network	2,589	41 - Other	514
3) 42 - No reason provided on enrollment form	1,092	39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	273

Call Center Statistics				Current Year		Last Year	
Effective Month - Jul-2009	Jul-09 # %	Jun-09 # %	SFY 2010 Jul-09 - Jun-10 # %	Jul-08 # %	Jun-08 # %	SFY 2009 Jul-08 - Jun-09 # %	
A. Total Calls Received	22,153	27,033	22,153	15,006	18,511	287,828	
B. Total Calls Answered	21,881	26,890	21,881	13,679	15,706	278,845	
C. Totals Calls Abandoned	272 1%	143 1%	272 1%	1,327 9%	2,805 15%	8,983 3%	
D. Percent Answered within 60 seconds	95%	98%	95%	84%	64%	88%	
E. Average Speed to Answer in seconds	15	11	-	-	-	-	
Days in Call Period	05/22/09 - 06/18/09	04/17/09 - 05/21/09		05/23/09 - 06/19/08	04/18/08 - 05/22/08		

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### Historical Enrollment Data

Numerator													
	07/08	08/08	09/08	10/08	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09
A. Voluntary Choice - Assignment Pool	8,908	11,332	13,837	12,321	17,038	11,828	14,320	13,499	6,815	7,940	6,968	11,704	8,381
A1. Member Selected MC Plan	4,646	6,420	10,321	8,753	12,559	8,394	10,106	10,407	5,018	5,842	4,991	8,331	5,606
A2. Member Selected FFS	4,262	4,912	3,516	3,568	4,479	3,434	4,214	3,092	1,797	2,098	1,977	3,373	2,775
B. Voluntary Choice - Not in Assign Pool	4,736	6,869	6,714	4,625	9,374	15,781	13,691	11,539	15,607	15,201	14,174	16,578	15,699
B1. Member Selected MC Plan	3,036	4,643	4,823	3,200	4,485	12,662	8,978	8,712	11,428	10,922	10,110	11,088	10,774
B2. Member Selected FFS	1,700	2,226	1,891	1,425	4,889	2,959	4,520	2,739	3,980	4,179	3,988	5,106	4,725
B3. Member Zapped into MC Plan	-	-	-	-	-	160	193	88	199	100	76	384	200
<b>Total Voluntary Choice (=A+B)</b>	<b>13,644</b>	<b>18,201</b>	<b>20,551</b>	<b>16,946</b>	<b>26,412</b>	<b>27,609</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>
Denominator													
	07/08	08/08	09/08	10/08	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09
C. Members up for auto-enroll	21,733	23,323	28,067	31,055	32,538	25,986	32,886	26,453	13,122	15,754	14,300	20,087	15,605
B. Voluntary Choice - Not in Assign Pool	4,736	6,869	6,714	4,625	9,374	15,781	13,691	11,539	15,607	15,201	14,174	16,578	15,699
D. FFS by Default **	(944)	(707)	(878)	(4,578)	(800)	(724)	(1,067)	(819)	(243)	(281)	(191)	(219)	(154)
<b>Total Beneficiaries in the Month (= C+B+D)</b>	<b>25,525</b>	<b>29,485</b>	<b>33,903</b>	<b>31,102</b>	<b>41,112</b>	<b>41,043</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>
	07/08	08/08	09/08	10/08	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09
Members Auto Assigned	11,881	11,284	13,352	14,156	14,700	13,434	17,499	12,135	6,064	7,533	7,141	8,164	7,070
Auto Assignment Rate	47%	38%	39%	46%	36%	33%	38%	33%	21%	25%	25%	22%	23%
	07/08	08/08	09/08	10/08	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09
Voluntary Selection Rate	53%	62%	61%	54%	64%	67%	62%	67%	79%	75%	75%	78%	77%
Total MC Choices (= A1+B1+B3)	7,682	11,063	15,144	11,953	17,044	21,216	19,277	19,207	16,645	16,864	15,177	19,803	16,580
Total FFS Choices (= A2+B2)	5,962	7,138	5,407	4,993	9,368	6,393	8,734	5,831	5,777	6,277	5,965	8,479	7,500
FFS Choice as a Percent of Member Choices	44%	39%	26%	29%	35%	23%	31%	23%	26%	27%	28%	30%	31%

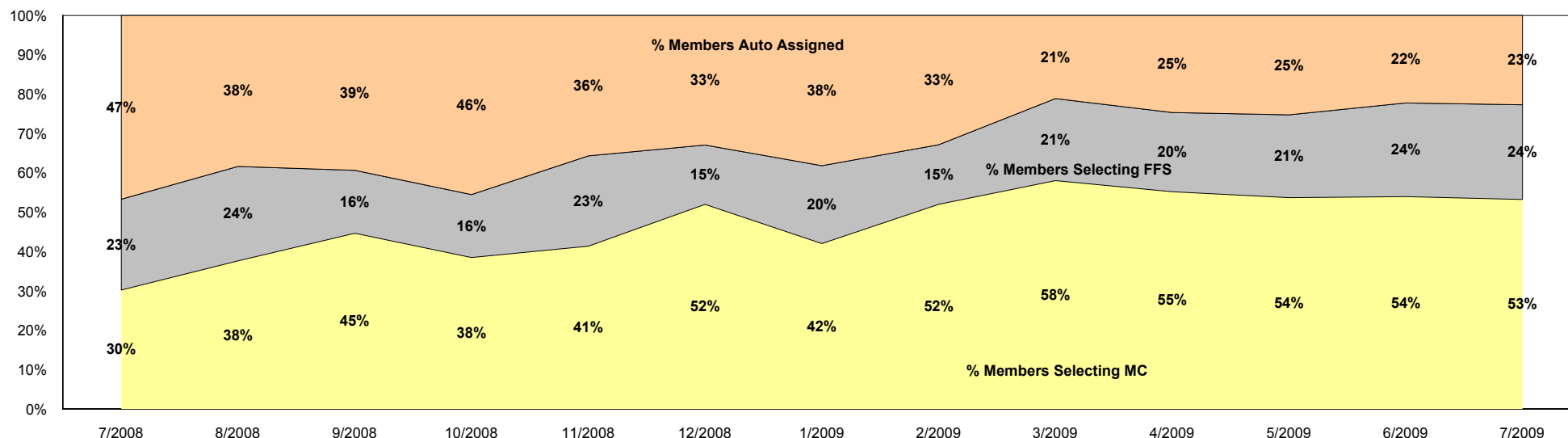
\*\* Beneficiaries who were part of the pool initially but at the time of auto enrollment were no longer eligible.

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Historical Enrollment Data - Graphical Summary

Trendlines - Quantities	07/08	08/08	09/08	10/08	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09
All Members Selected MC Plan	7,682	11,063	15,144	11,953	17,044	21,216	19,277	19,207	16,645	16,864	15,177	19,803	16,580
All Members Selected FFS	5,962	7,138	5,407	4,993	9,368	6,393	8,734	5,831	5,777	6,277	5,965	8,479	7,500
All Members Auto Assigned	11,881	11,284	13,352	14,156	14,700	13,434	17,499	12,135	6,064	7,533	7,141	8,164	7,070
<b>Total (Volume)</b>	<b>25,525</b>	<b>29,485</b>	<b>33,903</b>	<b>31,102</b>	<b>41,112</b>	<b>41,043</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>

Trendlines - Percentages (Graphed below)	07/08	08/08	09/08	10/08	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09
All Members Selected MC Plan (%)	30%	38%	45%	38%	41%	52%	42%	52%	58%	55%	54%	54%	53%
All Members Selected FFS (%)	23%	24%	16%	16%	23%	15%	20%	15%	21%	20%	21%	24%	24%
All Members Auto Assigned (%)	47%	38%	39%	46%	36%	33%	38%	33%	21%	25%	25%	22%	23%

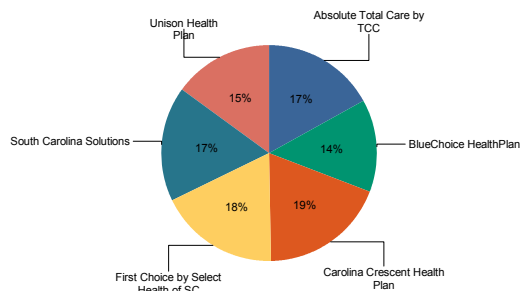


\*\* Note: For the graphical representation we consider ALL members regardless whether they are in the Assignment Pool.

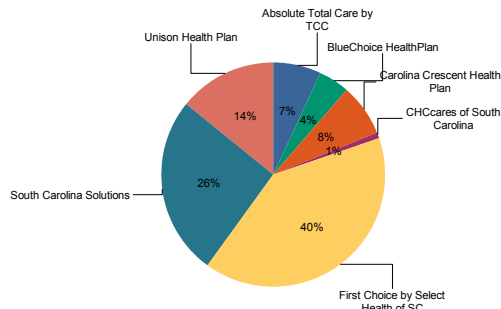
**Plan Summary: Current and Previous Month Comparison**

Effective Month 07/09							Effective Month 06/09						
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total		Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care by TCC	1,169	1,207	2,376	49%	51%	10%		1,437	1,313	2,750	52%	48%	10%
AMERIGROUP Community Care	-	-	-	-	-	-		-	-	-	-	-	-
BlueChoice HealthPlan	703	982	1,685	42%	58%	7%		926	1,070	1,996	46%	54%	7%
Carolina Crescent Health Plan	1,248	1,322	2,570	49%	51%	11%		1,512	1,437	2,949	51%	49%	11%
CHCcares of South Carolina	131	-	131	100%	-	1%		327	528	855	38%	62%	3%
First Choice by Select Health of SC	6,684	1,276	7,960	84%	16%	34%		8,172	1,328	9,500	86%	14%	34%
South Carolina Solutions	4,305	1,214	5,519	78%	22%	23%		4,395	1,371	5,766	76%	24%	21%
Unison Health Plan	2,340	1,069	3,409	69%	31%	14%		3,034	1,117	4,151	73%	27%	15%
<b>Totals</b>	<b>16,580</b>	<b>7,070</b>	<b>23,650</b>	<b>70%</b>	<b>30%</b>	<b>100%</b>		<b>19,803</b>	<b>8,164</b>	<b>27,967</b>	<b>71%</b>	<b>29%</b>	<b>100%</b>

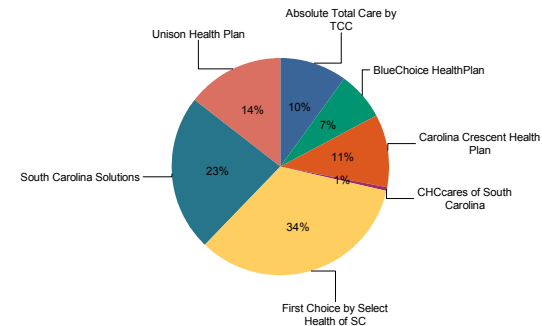
Current Month: Share of Auto Assignments



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 07/08							Effective Month 06/08						
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total		Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care by TCC	-	-	-	-	-	-		-	-	-	-	-	-
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	-	-	-	-	-	-		-	-	-	-	-	-
<b>Totals</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>		<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>

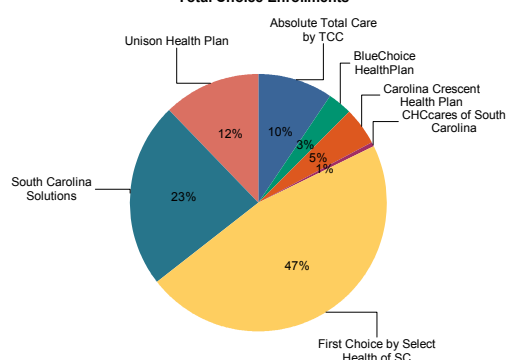
**Plan Summary: SFY 2010 vs SFY 2009 Comparison**

	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 by TCC	1,169	1,207	2,376	49%	51%	10%		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	703	982	1,685	42%	58%	7%		7,092	9,709	16,801	42%	58%	8%
Carolina Crescent Health Plan	1,248	1,322	2,570	49%	51%	11%		9,601	11,952	21,553	45%	55%	11%
CHCcares of South Carolina	131	0	131	100%	-	1%		1,293	4,001	5,294	24%	76%	3%
First Choice by Select Health of SC	6,684	1,276	7,960	84%	16%	34%		50,039	12,406	62,445	80%	20%	31%
South Carolina Solutions	4,305	1,214	5,519	78%	22%	23%		30,071	11,239	41,310	73%	27%	21%
Unison Health Plan	2,340	1,069	3,409	69%	31%	14%		19,563	9,675	29,238	67%	33%	15%
<b>Totals</b>	<b>16,580</b>	<b>7,070</b>	<b>23,650</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>

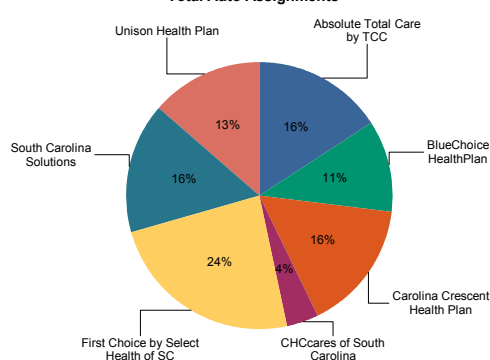
**Plan Summary: Current and Previous Month Existing Total Enrollment Comparison**

	As of 07/09			As of 06/09				As of 06/09			As of 06/09		
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total		Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care by TCC	30,248	13,439	43,687	69%	31%	11%		30,291	13,395	43,686	69%	31%	11%
AMERIGROUP Community Care	-	-	-	-	-	-		-	-	-	-	-	-
BlueChoice HealthPlan	9,184	9,477	18,661	49%	51%	5%		8,789	9,462	18,251	48%	52%	5%
Carolina Crescent Health Plan	15,470	13,567	29,037	53%	47%	7%		14,506	13,269	27,775	52%	48%	7%
CHCcares of South Carolina	1,697	3,430	5,127	33%	67%	1%		1,694	3,841	5,535	31%	69%	1%
First Choice by Select Health of SC	148,037	20,289	168,326	88%	12%	42%		144,549	20,197	164,746	88%	12%	42%
South Carolina Solutions	73,773	13,732	87,505	84%	16%	22%		72,277	13,868	86,145	84%	16%	22%
Unison Health Plan	38,581	11,521	50,102	77%	23%	12%		37,344	11,405	48,749	77%	23%	12%
<b>Totals</b>	<b>316,990</b>	<b>85,455</b>	<b>402,445</b>	<b>79%</b>	<b>21%</b>	<b>100%</b>		<b>309,450</b>	<b>85,437</b>	<b>394,887</b>	<b>78%</b>	<b>22%</b>	<b>100%</b>

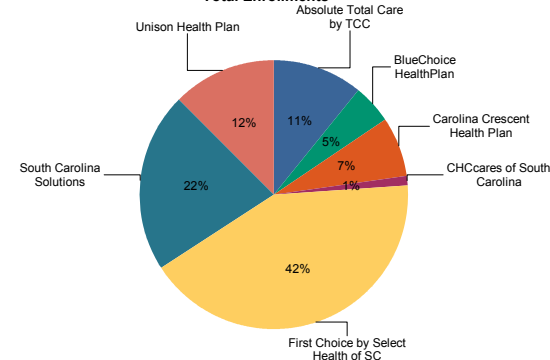
**Total Choice Enrollments**



**Total Auto Assignments**



**Total Enrollments**



# South Carolina Healthy Connections Choices

**Enrollment Period July 2009**

Enrollment Numbers are as of 06/22/2009

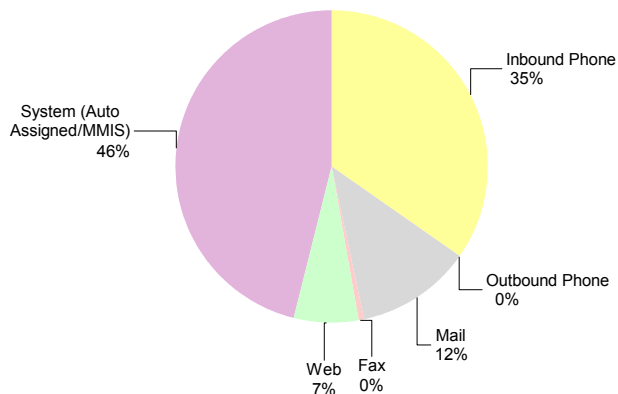
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## Historical Enrollment by Method - Data

	10/08	11/08	12/08	01/09	02/09	03/09	04/09	05/09	06/09	07/09
<b>Plan Enrollments</b>	<b>36,556</b>	<b>44,378</b>	<b>34,490</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>
	100%	100%	84%	81%	84%	80%	79%	79%	76%	76%
Inbound Phone	12,202 33%	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%
Outbound Phone	132	115	66	24	15	25	11	12	42	14
Mail	3,736 10%	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%
Fax	182	286 1%	391 1%	209 1%	198 1%	125 1%	118	103	151 1%	116
Web	3,058 8%	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%
System (Auto Assigned/MMIS)	17,246 47%	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%
<b>FFS Enrollments</b>	-	-	<b>6,393</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>
	-	-	16%	19%	16%	20%	21%	21%	24%	24%
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%
Outbound Phone	-	-	31	13	11	10	17	15	13	8
Mail	-	-	608 10%	1,272 15%	907 16%	1,049 18%	1,030 16%	966 16%	1,625 19%	1,362 18%
Fax	-	-	65 1%	49 1%	32 1%	37 1%	39 1%	40 1%	63 1%	47 1%
Web	-	-	256 4%	407 5%	414 7%	329 6%	451 7%	307 5%	562 7%	378 5%
<b>Total Enrollments</b>	<b>36,556</b>	<b>44,378</b>	<b>40,883</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>
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Inbound Phone	12,202 33%	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%
Outbound Phone	132	115	97	37	26	35	28	27	55	22
Mail	3,736 10%	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%
Fax	182	286 1%	456 1%	258 1%	230 1%	162 1%	157 1%	143 1%	214 1%	163 1%
Web	3,058 8%	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%
System (Auto Assigned/MMIS)	17,246 47%	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%

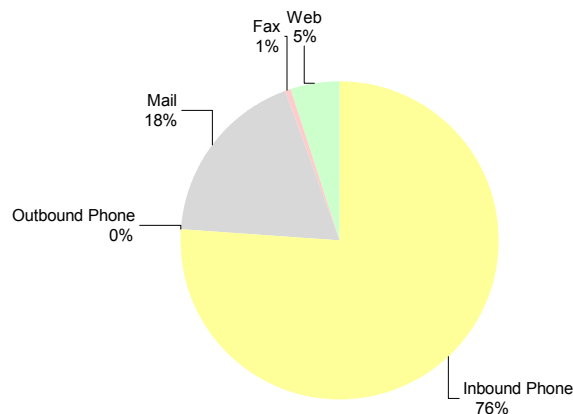
**Health Plan Enrollments by Method**

Current Enrollment Period



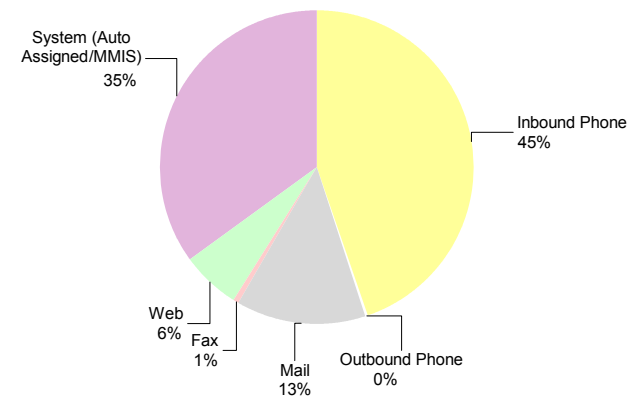
**FFS Enrollments by Method**

Current Enrollment Period



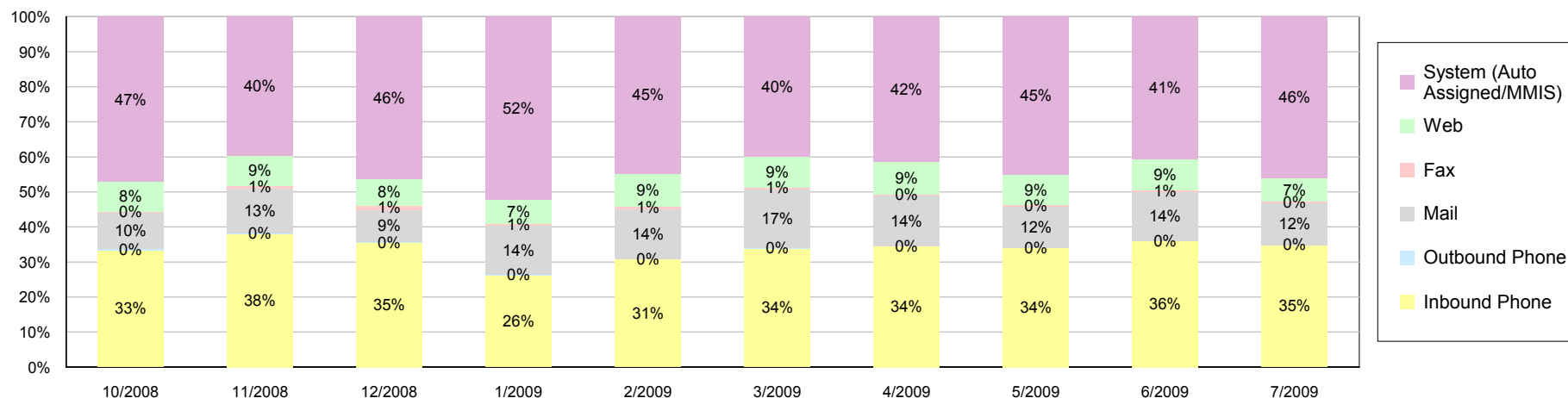
**Total Enrollments by Method**

Current Enrollment Period



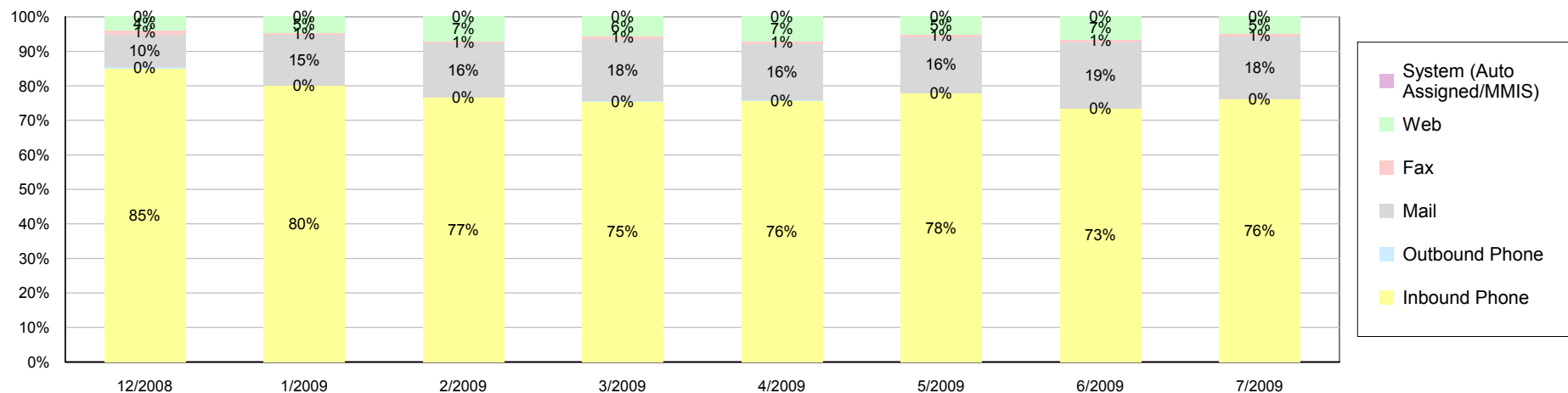
**Health Plan Enrollments by Method**

Historical Trend



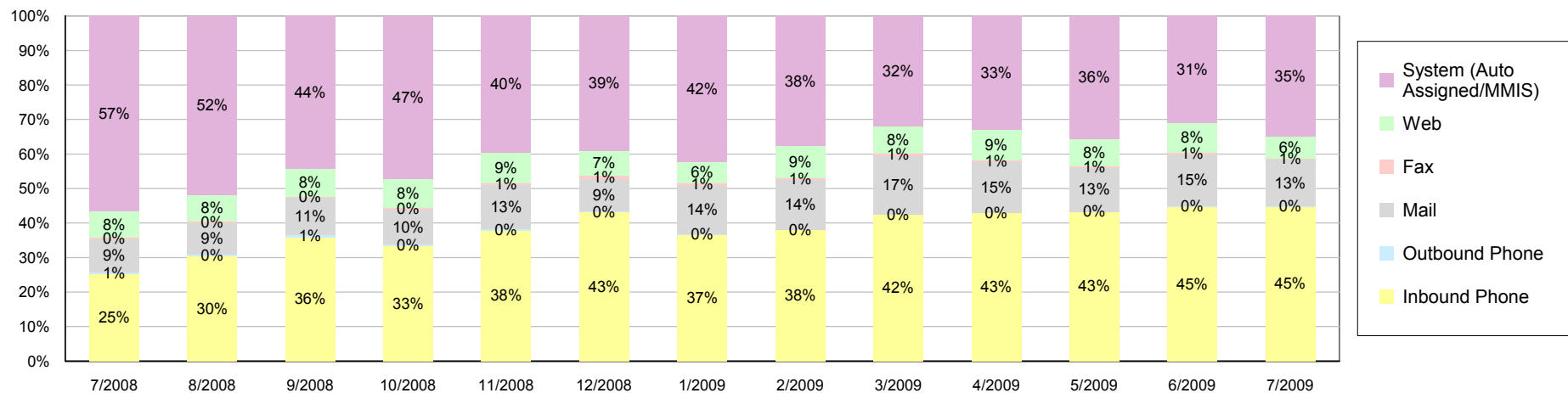
**Fee For Service Enrollments by Method**

Historical Trend



**Total Enrollments by Method**

Historical Trend



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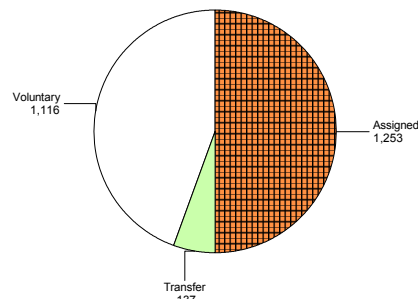
### Disenrollment Information

<b>Fee For Service Choice Reasons</b> * 41-Other was not split into Mail/Fax/Web & Phone until April 09	<b>Jul-09</b> # %	<b>Jun-09</b> # %	<b>SFY 2010</b> Jul-09 - Jun-10 # %	<b>Jul-08</b> # %	<b>Jun-08</b> # %	<b>SFY 2009</b> Jul-08 - Jun-09 # %
35 - Doctor or Pharmacy Not Part of Network	2,589 35%	2,872 34%	2,589 35%	- -	- -	20,862 34%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	78 1%	118 1%	78 1%	- -	- -	481 1%
37 - Entering A Waiver Program or enters MFCP	4 0%	13 0%	4 0%	- -	- -	13 -
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	187 2%	208 2%	187 2%	- -	- -	972 2%
41 A - Other (Phone)	2,828 38%	3,014 36%	2,828 38%	- -	- -	7,296 12%
41 B - Other (Mail, Fax, Web)	565 8%	1,202 14%	565 8%	- -	- -	28,945 48%
42 - No reason provided on enrollment form	1,092 15%	872 10%	1,092 15%	- -	- -	872 1%
64 - Plan does not cover certain services because of moral or religious reasons	1 0%	- 0%	1 0%	- -	- -	16 -
70 - Member Placed Out of Home	7 0%	17 0%	7 0%	- -	- -	17 -
84 - Member utilizes services from multiple par and non-par providers	140 2%	146 2%	140 2%	- -	- -	1,242 2%
A - Administrative	9 0%	17 0%	9 0%	- -	- -	127 -
<b>Total Fee For Service Choice</b>	<b>7,500 100%</b>	<b>8,479 100%</b>	<b>7,500 100%</b>	<b>- 100%</b>	<b>- 100%</b>	<b>60,843 100%</b>

<b>Transfer to Fee For Service Reasons</b>	<b>Jul-09</b> # %	<b>Jun-09</b> # %	<b>SFY 2010</b> Jul-09 - Jun-10 # %	<b>Jul-08</b> # %	<b>Jun-08</b> # %	<b>SFY 2009</b> Jul-08 - Jun-09 # %
06 - Managed Care Provider Terminated	- 0%	- 0%	- 0%	- -	- -	- -
08 - Member Has Private HMO Coverage	- 0%	- 0%	- 0%	- -	- -	6 -%
30 - Moved Out of Plan Service Area	9 0%	14 0%	9 0%	- -	- -	108 -%
31 - Got Poor Quality Care	46 2%	43 1%	46 2%	- -	- -	376 1%
34 - Lack of Access to Services Covered Under the Contract	36 1%	79 2%	36 1%	- -	- -	458 1%
35 - Doctor or Pharmacy Not Part of Network	1,400 56%	1,917 57%	1,400 56%	- -	- -	18,174 54%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	36 1%	45 1%	36 1%	- -	- -	293 1%
37 - Entering A Waiver Program or enters MFCP	26 1%	25 1%	26 1%	- -	- -	25 -%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	273 11%	301 9%	273 11%	- -	- -	3,220 10%
41 - Other	514 21%	690 21%	514 21%	- -	- -	9,185 27%
42 - No reason provided on enrollment form	18 1%	14 0%	18 1%	- -	- -	14 -%
53 - Didn't Realize What I was Signing Up For	39 2%	36 1%	39 2%	- -	- -	378 1%
64 - Plan does not cover certain services because of moral or religious reasons	10 0%	3 0%	10 0%	- -	- -	19 -%
69 - Fraudulent Use of Medicaid Card	- 0%	- 0%	- 0%	- -	- -	3 -%
70 - Member Placed Out of Home	11 0%	16 0%	11 0%	- -	- -	16 -%
83 - Want to be Plan with Family Members	9 0%	17 1%	9 0%	- -	- -	107 -%
84 - Member utilizes services from multiple par and non-par providers	66 3%	133 4%	66 3%	- -	- -	998 3%
85 - Health Plan Referral Policy is unfavorable to Member	10 0%	4 0%	10 0%	- -	- -	110 -%
A - Administrative	3 0%	2 0%	3 0%	- -	- -	191 1%
<b>Total Transfers to Fee For Service</b>	<b>2,506 100%</b>	<b>3,339 100%</b>	<b>2,506 100%</b>	<b>- 100%</b>	<b>- 100%</b>	<b>33,681 100%</b>

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	5	0%	-	0%	4	0%	9	0%
31 - Got Poor Quality Care	23	2%	1	1%	22	2%	46	2%
34 - Lack of Access to Services Covered Under the Contract	16	1%	4	3%	16	1%	36	1%
35 - Doctor or Pharmacy Not Part of Network	605	54%	59	43%	736	59%	1,400	56%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	17	2%	4	3%	15	1%	36	1%
37 - Entering A Waiver Program or enters MFCP	15	1%	2	1%	9	1%	26	1%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	163	15%	28	20%	82	7%	273	11%
41 - Other	181	16%	31	23%	302	24%	514	21%
42 - No reason provided on enrollment form	12	1%	-	0%	6	0%	18	1%
53 - Didn't Realize What I was Signing Up For	27	2%	1	1%	11	1%	39	2%
64 - Plan does not cover certain services because of moral or religious reasons	2	0%	1	1%	7	1%	10	0%
69 - Fraudulent Use of Medicaid Card	-	0%	-	0%	-	0%	-	0%
70 - Member Placed Out of Home	3	0%	-	0%	8	1%	11	0%
83 - Want to be Plan with Family Members	2	0%	-	0%	7	1%	9	0%
84 - Member utilizes services from multiple par and non-par providers	32	3%	6	4%	28	2%	66	3%
85 - Health Plan Referral Policy is unfavorable to Member	10	1%	-	0%	-	0%	10	0%
A - Administrative	3	0%	-	0%	-	0%	3	0%
<b>Total Enrollment</b>	<b>1,116</b>	<b>100%</b>	<b>137</b>	<b>100%</b>	<b>1,253</b>	<b>100%</b>	<b>2,506</b>	<b>100%</b>

Transfer to Fee For Service by Source of Original Enrollment



	Absolute Total Care by TCC	BlueChoice HealthPlan	Carolina Crescent Health Plan	CHCcares of South Carolina	First Choice by Select Health of SC	South Carolina Solutions	Unison Health Plan	FFS	Total Transfers From
Absolute Total Care by TCC		20	67	24	287	87	67	404	956
BlueChoice HealthPlan	25		19	3	195	64	48	290	644
Carolina Crescent Health Plan	37	5		1	196	55	48	355	697
CHCcares of South Carolina	15	13	21		89	15	32	163	348
First Choice by Select Health of SC	66	23	39	3		120	104	479	834
South Carolina Solutions	37	2	28	3	267		66	343	746
Unison Health Plan	35	19	42	2	291	71		472	932
FFS	208	173	282	10	523	354	312		1,862
Total Transfers To	423	255	498	46	1,848	766	677	2,506	7,019

## 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 will be populated starting July 2009.

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 April 2009.

## Page 11: Health Plan Transfer Mix

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

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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 current fiscal year 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.

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### 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. (MCOMCO, 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 April 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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