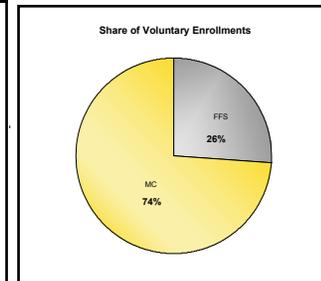
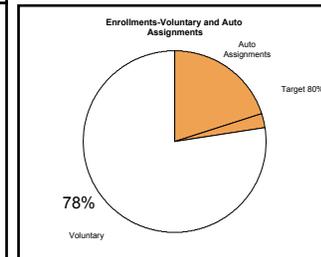


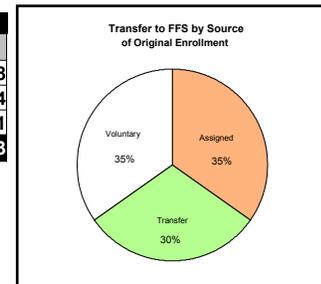
Enrollment Snapshot

Enrollment Snapshot		Current Year						Last Year					
Effective Month - Jul-2010		Jul-10		Jun-10		SFY 2011 Jul-10 - Jun-11		Jul-09		Jun-09		SFY 2010 Jul-09 - Jun-10	
		#	%	#	%	#	%	#	%	#	%	#	%
A. Assignment Pool (Excludes FFS Default)		14,900		16,231		14,900		15,451		19,868		206,499	
B. Voluntary Choice		9,222		9,441		9,222		8,381		11,704		121,764	
B1. Managed Care		6,101		6,305		6,101		5,606		8,331		83,782	
B2. Fee For Service		3,121		3,136		3,121		2,775		3,373		37,982	
C. Voluntary Choice - Not in the Assignment Pool *		10,429		14,386		10,429		15,699		16,578		159,658	
C1. Managed Care		8,263		12,425		8,263		10,774		11,088		121,441	
C2. Fee For Service		2,018		1,817		2,018		4,725		5,106		35,905	
C3. Zaps to Managed Care		148		144		148		200		384		2,312	
D. Auto Assignments		5,678 22%		6,790 22%		5,678 22%		7,070 23%		8,164 22%		84,735 23%	
E. Total Voluntary Choice (= B + C)		19,651 78%		23,827 78%		19,651 78%		24,080 77%		28,282 78%		281,422 77%	
F. Total Enrollments (= B + C + D)		25,329		30,617		25,329		31,150		36,446		366,157	
G. Fee For Service		5,139		4,953		5,139		7,500		8,479		73,887	
G1. Share of Voluntary Enrollments (= (B2 + C2)/E)													
G2. Share of Total Enrollments (= (B2 + C2) / F)													
H. Members in 90 Day Choice Period		130,812		134,563		130,812		106,318		112,740		1,358,378	
H1. Total Transfers within 90 Days (= H3 + H4)		6,123		36,454		6,123		7,019		9,995		123,575	
H2. Transfer Percent													
H3. 90 Day Transfers to Fee For Service		1,859		1,650		1,859		2,506		3,339		28,390	
H4. 90 Day Transfers to Health Plans		4,264		34,804		4,264		4,513		6,656		95,185	



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

July-2010 Snapshot	%	July 2010	Transfers					Current Eligibles				
			From	FFS	MCO	MHN	Total	Enrolled into MC	Assignable	Non-Assignable	Total	
Target	80%											
Actual (= E / F)	78%											
FFS Share of Voluntary Enrollment (= G1)	26%											
MC Share of Voluntary Enrollment (100-G1)	74%											
			FFS	MCO	MHN	Total		Enrolled into MC	Assignable	Non-Assignable	Total	
			-	267	101	368		368,765	106,213	474,978		
			1,651	2,344	1,250	5,245		69,702	23,832	93,534		
			208	302	-	510		19,964	95,327	115,291		
			Total	1,859	2,913	1,351	6,123		458,431	225,372	683,803	



Top Transfer/ Disenrollment Reasons			
Fee For Service Choice Reasons		Transfer to Fee For Service Reasons	
1)	41 A - Other (Phone)	1,834	35 - Doctor Not Part Of Network 909
2)	35 - Doctor Not Part Of Network	1,434	41 - Other 457
3)	42 - No reason provided on enrollment form	861	39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid 195

Call Center Statistics		Current Year						Last Year					
Effective Month - Jul-2010		Jul-10		Jun-10		SFY 2011 Jul-10 - Jun-11		Jul-09		Jun-09		SFY 2010 Jul-09 - Jun-10	
		#	%	#	%	#	%	#	%	#	%	#	%
A. Total Calls Received		21,764		20,529		23,004		22,153		27,033		296,583	
B. Total Calls Answered		21,549		20,405		22,780		21,881		26,890		287,896	
C. Totals Calls Abandoned after Threshold		61		30		62		272		143		5,187	
D. Average Speed to Answer in seconds		15		11		12		15		11		26	
Days in Call Period		05/21/10 - 06/17/10		04/23/10 - 05/20/10				05/22/09 - 06/18/09		04/17/09 - 05/21/09			

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Historical Enrollment Data

Numerator													
	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10	04/10	05/10	06/10	07/10
A. Voluntary Choice - Assignment Pool	8,381	11,646	8,449	8,678	12,984	9,716	9,409	12,147	7,906	8,857	14,150	9,441	9,222
A1. Member Selected MC Plan	5,606	8,177	6,092	6,186	9,035	6,678	6,567	8,586	5,436	5,777	9,337	6,305	6,101
A2. Member Selected FFS	2,775	3,469	2,357	2,492	3,949	3,038	2,842	3,561	2,470	3,080	4,813	3,136	3,121
B. Voluntary Choice - Not in Assign Pool	15,699	15,815	15,777	15,995	16,615	9,366	9,422	9,588	12,301	12,719	11,975	14,386	10,429
B1. Member Selected MC Plan	10,774	10,968	10,933	10,848	11,409	7,489	7,652	8,239	10,380	10,687	9,637	12,425	8,263
B2. Member Selected FFS	4,725	4,687	4,636	4,981	4,985	1,679	1,391	1,186	1,738	1,877	2,203	1,817	2,018
B3. Member Zapped into MC Plan	200	160	208	166	221	198	379	163	183	155	135	144	148
Total Voluntary Choice (=A+B)	24,080	27,461	24,226	24,673	29,599	19,082	18,831	21,735	20,207	21,576	26,125	23,827	19,651
Denominator													
	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10	04/10	05/10	06/10	07/10
C. Members up for auto-enroll	15,605	19,084	16,651	15,580	22,262	18,203	15,887	20,962	12,312	14,967	21,121	16,378	15,083
B. Voluntary Choice - Not in Assign Pool	15,699	15,815	15,777	15,995	16,615	9,366	9,422	9,588	12,301	12,719	11,975	14,386	10,429
D. FFS by Default **	(154)	(216)	(149)	(169)	(225)	(357)	(235)	(331)	(167)	(143)	(220)	(147)	(183)
Total Beneficiaries in the Month (= C+B+D)	31,150	34,683	32,279	31,406	38,652	27,212	25,074	30,219	24,446	27,543	32,876	30,617	25,329
	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10	04/10	05/10	06/10	07/10
Members Auto Assigned	7,070	7,222	8,053	6,733	9,053	8,130	6,243	8,484	4,239	5,967	6,751	6,790	5,678
Auto Assignment Rate	23%	21%	25%	21%	23%	30%	25%	28%	17%	22%	21%	22%	22%
	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10	04/10	05/10	06/10	07/10
Voluntary Selection Rate	77%	79%	75%	79%	77%	70%	75%	72%	83%	78%	79%	78%	78%
Total MC Choices (= A1+B1+B3)	16,580	19,305	17,233	17,200	20,665	14,365	14,598	16,988	15,999	16,619	19,109	18,874	14,512
Total FFS Choices (= A2+B2)	7,500	8,156	6,993	7,473	8,934	4,717	4,233	4,747	4,208	4,957	7,016	4,953	5,139
FFS Choice as a Percent of Member Choices	31%	30%	29%	30%	30%	25%	22%	22%	21%	23%	27%	21%	26%

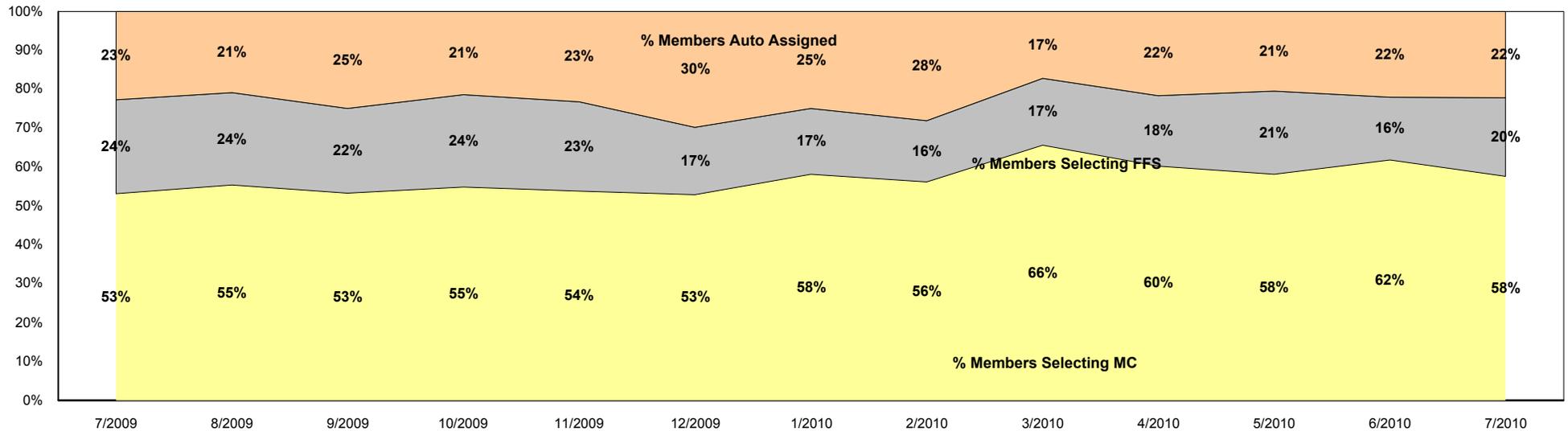
** Beneficiaries who were part of the pool initially but at the time of auto enrollment were no longer eligible.

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Historical Enrollment Data - Graphical Summary

Trendlines - Quantities	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10	04/10	05/10	06/10	07/10
All Members Selected MC Plan	16,580	19,305	17,233	17,200	20,665	14,365	14,598	16,988	15,999	16,619	19,109	18,874	14,512
All Members Selected FFS	7,500	8,156	6,993	7,473	8,934	4,717	4,233	4,747	4,208	4,957	7,016	4,953	5,139
All Members Auto Assigned	7,070	7,222	8,053	6,733	9,053	8,130	6,243	8,484	4,239	5,967	6,751	6,790	5,678
Total (Volume)	31,150	34,683	32,279	31,406	38,652	27,212	25,074	30,219	24,446	27,543	32,876	30,617	25,329

Trendlines - Percentages (Graphed below)	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10	04/10	05/10	06/10	07/10
All Members Selected MC Plan (%)	53%	55%	53%	55%	54%	53%	58%	56%	66%	60%	58%	62%	58%
All Members Selected FFS (%)	24%	24%	22%	24%	23%	17%	17%	16%	17%	18%	21%	16%	20%
All Members Auto Assigned (%)	23%	21%	25%	21%	23%	30%	25%	28%	17%	22%	21%	22%	22%

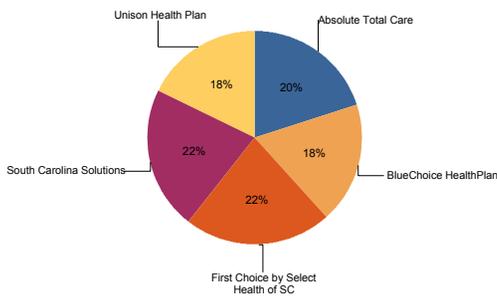


** Note: For the graphical representation we consider ALL members regardless whether they are in the Assignment Pool.

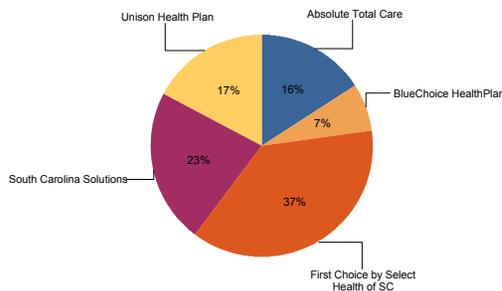
Plan Summary: Current and Previous Month Comparison

	Effective Month 07/10						Effective Month 06/10					
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	2,296	1,141	3,437	67%	33%	17%	7,032	1,105	8,137	86%	14%	32%
BlueChoice HealthPlan	1,008	1,029	2,037	49%	51%	10%	910	1,031	1,941	47%	53%	8%
Carolina Crescent Health Plan	-	-	-	-	-	-	-	-	-	-	-	-
First Choice by Select Health of SC	5,426	1,262	6,688	81%	19%	33%	5,404	1,635	7,039	77%	23%	27%
South Carolina Solutions	3,283	1,237	4,520	73%	27%	22%	3,235	1,760	4,995	65%	35%	19%
Unison Health Plan	2,499	1,009	3,508	71%	29%	17%	2,293	1,259	3,552	65%	35%	14%
Totals	14,512	5,678	20,190	72%	28%	100%	18,874	6,790	25,664	74%	26%	100%

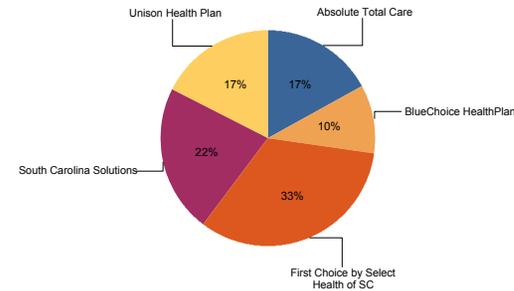
Current Month: Share of Auto Assignments



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 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	1,169	1,207	2,376	49%	51%	10%	1,437	1,313	2,750	52%	48%	10%
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%
Totals	16,580	7,070	23,650	70%	30%	100%	19,803	8,164	27,967	71%	29%	100%

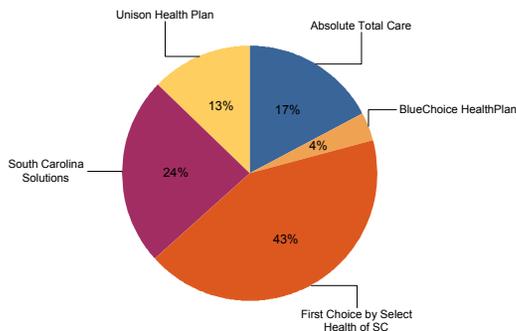
Plan Summary: SFY 2011 vs SFY 2010 Comparison

	SFY 2011			Jul-10 - Jun-11			SFY 2010			Jul-09 - Jun-10		
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	2,296	1,141	3,437	67%	33%	17%	27,676	14,891	42,567	65%	35%	15%
AMERIGROUP Community Care	0	0	0	-	-	-	-	-	-	-	-	-
BlueChoice HealthPlan	1,008	1,029	2,037	49%	51%	10%	10,115	12,884	22,999	44%	56%	8%
Carolina Crescent Health Plan	0	0	0	-	-	-	13,045	11,873	24,918	52%	48%	9%
CHCcares of South Carolina	0	0	0	-	-	-	152	-	152	100%	-	-%
First Choice by Select Health of SC	5,426	1,262	6,688	81%	19%	33%	79,284	15,628	94,912	84%	16%	32%
South Carolina Solutions	3,283	1,237	4,520	73%	27%	22%	48,105	16,168	64,273	75%	25%	22%
Unison Health Plan	2,499	1,009	3,508	71%	29%	17%	29,158	13,291	42,449	69%	31%	15%
Totals	14,512	5,678	20,190	72%	28%	100%	207,535	84,735	292,270	71%	29%	100%

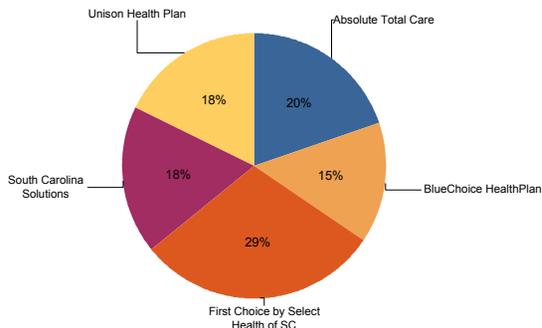
Plan Summary: Current and Previous Month Existing Total Enrollment Comparison

	As of 07/10			As of 06/10								
	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total	Choice	Auto Assign	Total	Choice	Auto Assign	% to Total
Absolute Total Care	68,423	15,131	83,554	82%	18%	18%	70,949	14,837	85,786	83%	17%	18%
BlueChoice HealthPlan	14,028	11,339	25,367	55%	45%	5%	13,230	11,029	24,259	55%	45%	5%
Carolina Crescent Health Plan	-	-	-	-	-	-	-	-	-	-	-	-
First Choice by Select Health of SC	169,728	22,570	192,298	88%	12%	40%	168,796	22,357	191,153	88%	12%	41%
South Carolina Solutions	94,808	13,938	108,746	87%	13%	23%	93,269	13,728	106,997	87%	13%	23%
Unison Health Plan	51,404	13,609	65,013	79%	21%	14%	50,324	13,375	63,699	79%	21%	13%
Totals	398,391	76,587	474,978	84%	16%	100%	396,568	75,326	471,894	84%	16%	100%

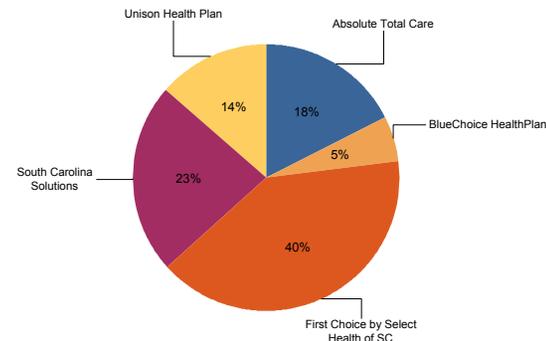
Total Choice Enrollments



Total Auto Assignments



Total Enrollments



South Carolina Healthy Connections Choices

Enrollment Period July 2010

Enrollment Numbers are as of 06/20/2010

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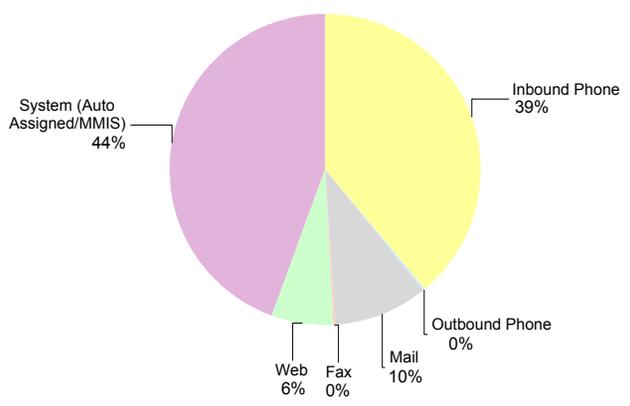
Historical Enrollment by Method - Data

	07/09	08/09	09/09	10/09	11/09	12/09	01/10	02/10	03/10	04/10	05/10	06/10	07/10
Plan Enrollments	23,450	26,367	25,078	23,767	29,497	22,297	20,462	25,309	20,055	22,431	25,725	25,520	20,042
	76%	76%	78%	76%	77%	83%	83%	84%	83%	82%	79%	84%	80%
Inbound Phone	8,158 35%	10,773 41%	9,580 38%	9,617 40%	11,423 39%	7,961 36%	7,552 37%	10,235 40%	8,241 41%	8,136 36%	10,576 41%	7,373 29%	7,812 39%
Outbound Phone	14 -	11 -	22 -	4 -	28 -	22 -	33 -	4 -	67 -	12 -	68 -	55 -	39 -
Mail	2,798 12%	3,510 13%	2,957 12%	3,312 14%	3,786 13%	2,199 10%	1,798 9%	2,283 9%	1,807 9%	1,902 8%	2,555 10%	1,881 7%	1,946 10%
Fax	116 -	123 -	136 1%	124 1%	128 -	105 -	73 -	127 1%	52 -	60 -	90 -	67 -	62 -
Web	1,532 7%	1,727 7%	1,441 6%	893 4%	1,451 5%	1,040 5%	1,001 5%	1,171 5%	770 4%	1,229 5%	1,647 6%	1,067 4%	1,267 6%
System (Auto Assigned/MMIS)	10,832 46%	10,223 39%	10,942 44%	9,817 41%	12,681 43%	10,970 49%	10,005 49%	11,489 45%	9,118 45%	11,092 49%	10,789 42%	15,077 59%	8,916 44%
FFS Enrollments	7,500	8,156	6,993	7,473	8,934	4,717	4,233	4,747	4,208	4,957	7,016	4,953	5,139
	24%	24%	22%	24%	23%	17%	17%	16%	17%	18%	21%	16%	20%
Inbound Phone	5,705 76%	6,006 74%	4,934 71%	5,498 74%	6,393 72%	3,485 74%	3,122 74%	3,465 73%	3,016 72%	3,567 72%	5,342 76%	3,698 75%	3,863 75%
Outbound Phone	8 -	16 -	8 -	4 -	11 -	3 -	8 -	3 -	7 -	12 -	47 1%	24 -	11 -
Mail	1,362 18%	1,638 20%	1,571 22%	1,539 21%	1,933 22%	786 17%	753 18%	844 18%	814 19%	895 18%	1,106 16%	838 17%	817 16%
Fax	47 1%	53 1%	51 1%	41 1%	72 1%	54 1%	30 1%	35 1%	46 1%	56 1%	54 1%	27 1%	38 1%
Web	378 5%	443 5%	429 6%	391 5%	525 6%	389 8%	320 8%	400 8%	325 8%	427 9%	467 7%	366 7%	410 8%
Total Enrollments	30,950	34,523	32,071	31,240	38,431	27,014	24,695	30,056	24,263	27,388	32,741	30,473	25,181
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Inbound Phone	13,863 45%	16,779 49%	14,514 45%	15,115 48%	17,816 46%	11,446 42%	10,674 43%	13,700 46%	11,257 46%	11,703 43%	15,918 49%	11,071 36%	11,675 46%
Outbound Phone	22 -	27 -	30 -	8 -	39 -	25 -	41 -	7 -	74 -	24 -	115 -	79 -	50 -
Mail	4,160 13%	5,148 15%	4,528 14%	4,851 16%	5,719 15%	2,985 11%	2,551 10%	3,127 10%	2,621 11%	2,797 10%	3,661 11%	2,719 9%	2,763 11%
Fax	163 1%	176 1%	187 1%	165 1%	200 1%	159 1%	103 -	162 1%	98 -	116 -	144 -	94 -	100 -
Web	1,910 6%	2,170 6%	1,870 6%	1,284 4%	1,976 5%	1,429 5%	1,321 5%	1,571 5%	1,095 5%	1,656 6%	2,114 6%	1,433 5%	1,677 7%
System (Auto Assigned/MMIS)	10,832 35%	10,223 30%	10,942 34%	9,817 31%	12,681 33%	10,970 41%	10,005 41%	11,489 38%	9,118 38%	11,092 40%	10,789 33%	15,077 49%	8,916 35%

Historical Enrollment by Method - Graphical Summary

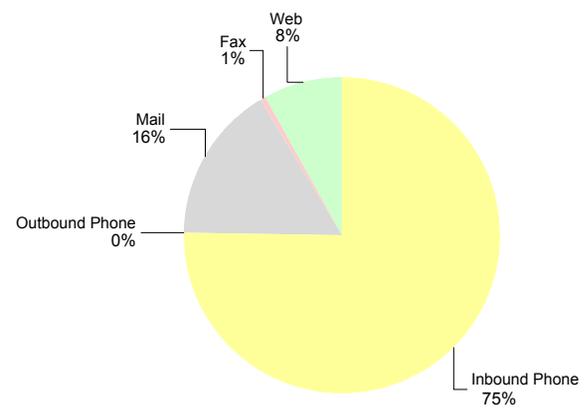
Health Plan Enrollments by Method

Current Enrollment Period



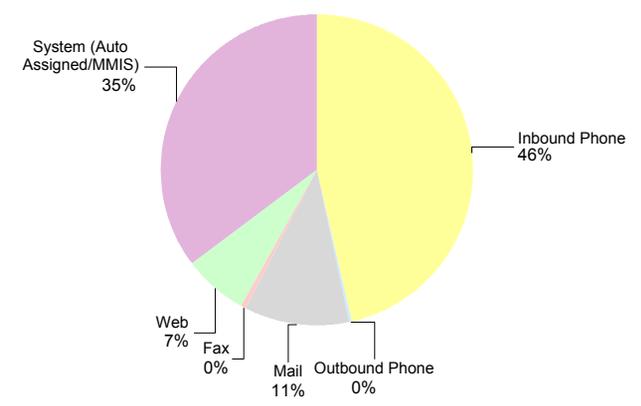
FFS Enrollments by Method

Current Enrollment Period



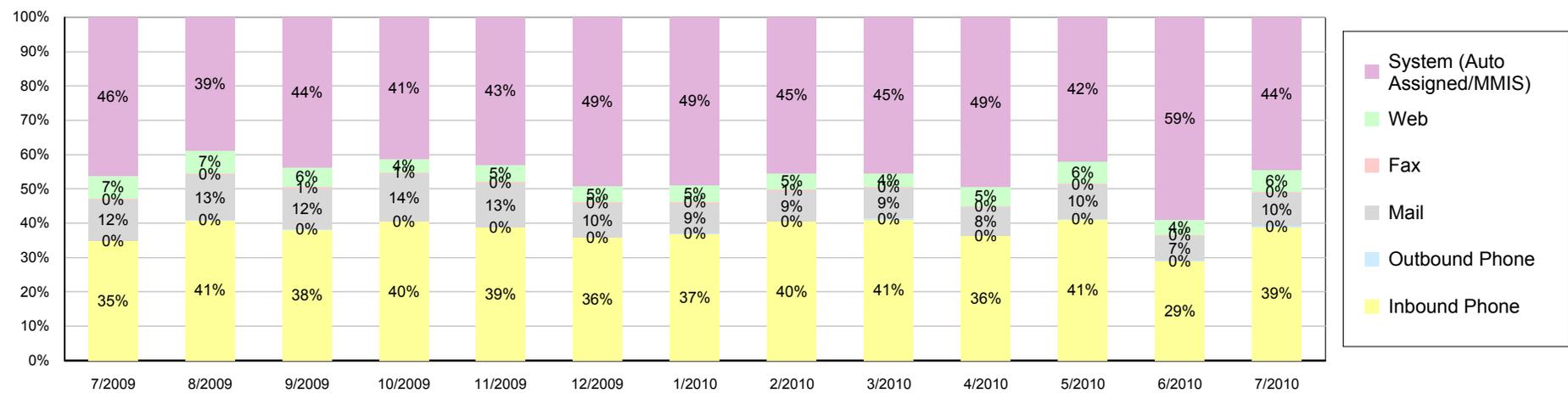
Total Enrollments by Method

Current Enrollment Period



Health Plan Enrollments by Method

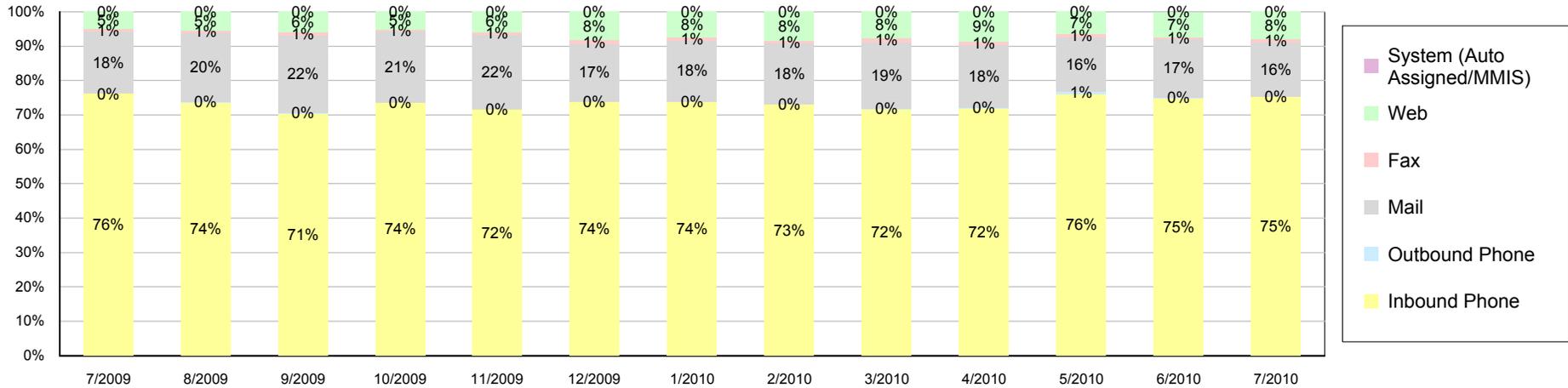
Historical Trend



Historical Enrollment by Method - Graphical Summary (contd.)

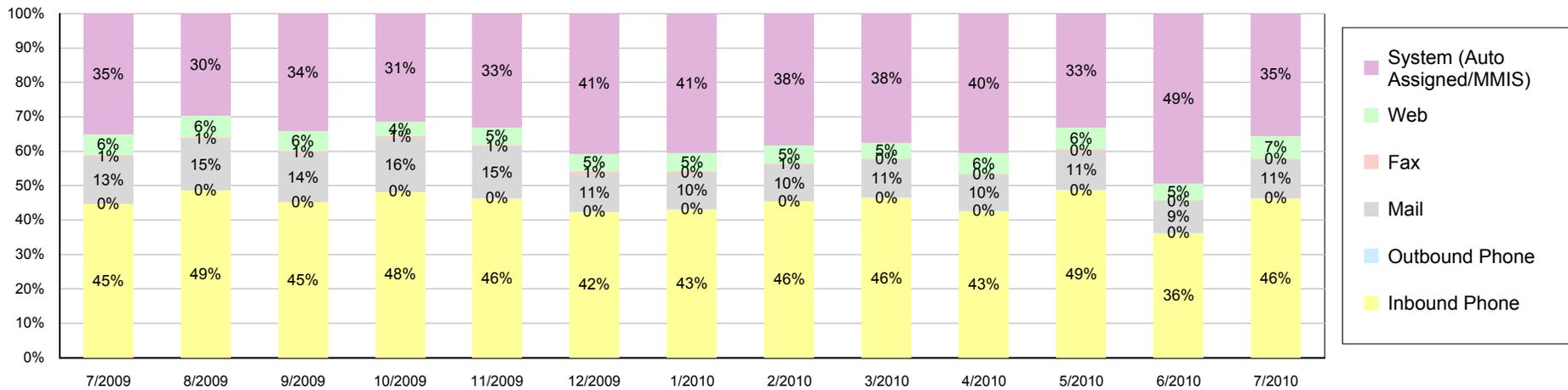
Fee For Service Enrollments by Method

Historical Trend



Total Enrollments by Method

Historical Trend



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Disenrollment Information

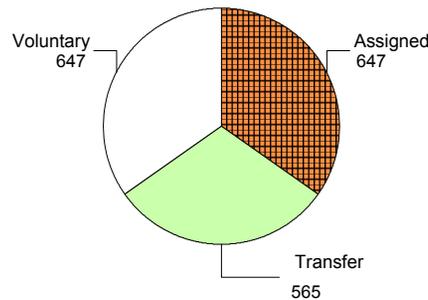
Fee For Service Choice Reasons <i>* 41-Other was not split into Mail/Fax/Web & Phone until August 09</i>	Jul-10		Jun-10		SFY 2011 Jul-10 - Jun-11		Jul-09		Jun-09		SFY 2010 Jul-09 - Jun-10	
	#	%	#	%	#	%	#	%	#	%	#	%
35 - Doctor Not Part Of Network	1,434	28%	1,426	29%	1,434	28%	2,589	35%	2,872	34%	23,540	32%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	40	1%	38	1%	40	1%	78	1%	118	1%	682	1%
37 - Entering A Waiver Program or enters MFCP	7	0%	4	0%	7	0%	4	-	13	-	74	-
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	177	3%	151	3%	177	3%	187	2%	208	2%	2,230	3%
41 A - Other (Phone)	1,834	36%	1,866	38%	1,834	36%	-	-	-	-	22,868	31%
41 B - Other (Mail, Fax, Web)	408	8%	414	8%	408	8%	3,393	45%	4,216	50%	8,962	12%
42 - No reason provided on enrollment form	861	17%	811	16%	861	17%	1,092	15%	872	10%	12,828	17%
64 - Plan does not cover certain services because of moral or religious reasons	-	0%	4	0%	-	0%	1	-	-	-	26	-
70 - Member Placed Out of Home	12	0%	5	0%	12	0%	7	-	17	-	83	-
75 - Pharmacy Not Part Of Network	1	0%	1	0%	1	0%	-	-	-	-	41	-
84 - Member utilizes services from multiple par and non-par providers	365	7%	233	5%	365	7%	140	2%	146	2%	2,525	3%
A - Administrative	-	0%	-	0%	-	0%	9	-	17	-	28	-
Total Fee For Service Choice	5,139	100%	4,953	100%	5,139	100%	7,500	100%	8,479	100%	73,887	100%

Transfer to Fee For Service Reasons	Jul-10		Jun-10		SFY 2011 Jul-10 - Jun-11		Jul-09		Jun-09		SFY 2010 Jul-09 - Jun-10	
	#	%	#	%	#	%	#	%	#	%	#	%
30 - Moved Out of Plan Service Area	2	0%	6	0%	2	0%	9	-%	14	-%	86	-%
31 - Got Poor Quality Care	6	0%	8	0%	6	0%	46	2%	43	1%	234	1%
34 - Lack of Access to Services Covered Under the Contract	31	2%	56	3%	31	2%	36	1%	79	2%	627	2%
35 - Doctor Not Part Of Network	909	49%	880	53%	909	49%	1,400	56%	1,917	57%	15,076	53%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	17	1%	30	2%	17	1%	36	1%	45	1%	417	1%
37 - Entering A Waiver Program or enters MFCP	9	0%	7	0%	9	0%	26	1%	25	1%	183	1%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	195	10%	162	10%	195	10%	273	11%	301	9%	3,053	11%
41 - Other	457	25%	361	22%	457	25%	514	21%	690	21%	6,465	23%
42 - No reason provided on enrollment form	23	1%	11	1%	23	1%	18	1%	14	-%	302	1%
53 - Didn't Realize What I was Signing Up For	11	1%	17	1%	11	1%	39	2%	36	1%	286	1%
64 - Plan does not cover certain services because of moral or religious reasons	3	0%	6	0%	3	0%	10	-%	3	-%	42	-%
70 - Member Placed Out of Home	18	1%	4	0%	18	1%	11	-%	16	-%	148	1%
75 - Pharmacy Not Part Of Network	-	0%	1	0%	-	0%	-	-	-	-	45	-%
83 - Want to be Plan with Family Members	6	0%	11	1%	6	0%	9	-%	17	1%	175	1%
84 - Member utilizes services from multiple par and non-par providers	139	7%	76	5%	139	7%	66	3%	133	4%	1,126	4%
85 - Health Plan Referral Policy is unfavorable to Member	12	1%	4	0%	12	1%	10	-%	4	-%	103	-%
A - Administrative	21	1%	10	1%	21	1%	3	-%	2	-%	21	-%
Total Transfers to Fee For Service	1,859	100%	1,650	100%	1,859	100%	2,506	100%	3,339	100%	28,389	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	
	#	%	#	%	#	%	#	%
30 - Moved Out of Plan Service Area	-	0%	-	0%	2	0%	2	0%
31 - Got Poor Quality Care	1	0%	2	0%	3	0%	6	0%
34 - Lack of Access to Services Covered Under the Contract	12	2%	6	1%	13	2%	31	2%
35 - Doctor Not Part Of Network	296	46%	296	52%	317	49%	909	49%
36 - Lack of Access to Providers Experienced With Member's Health Care Needs	9	1%	3	1%	5	1%	17	1%
37 - Entering A Waiver Program or enters MFCP	5	1%	3	1%	1	0%	9	0%
39 - Not Able To Get The Medicines I Was Able To Get In Regular Medicaid	84	13%	39	7%	72	11%	195	10%
41 - Other	143	22%	137	24%	177	27%	457	25%
42 - No reason provided on enrollment form	12	2%	1	0%	10	2%	23	1%
53 - Didn't Realize What I was Signing Up For	5	1%	1	0%	5	1%	11	1%
64 - Plan does not cover certain services because of moral or religious reasons	1	0%	-	0%	2	0%	3	0%
70 - Member Placed Out of Home	9	1%	7	1%	2	0%	18	1%
75 - Pharmacy Not Part Of Network	-	0%	-	0%	-	0%	-	0%
83 - Want to be Plan with Family Members	1	0%	5	1%	-	0%	6	0%
84 - Member utilizes services from multiple par and non-par providers	62	10%	46	8%	31	5%	139	7%
85 - Health Plan Referral Policy is unfavorable to Member	3	0%	3	1%	6	1%	12	1%
A - Administrative	4	1%	16	3%	1	0%	21	1%
Total Enrollment	647	100%	565	100%	647	100%	1,859	100%

Transfer to Fee For Service by Source of Original Enrollment



Transfer Summary

	Absolute Total Care	BlueChoice HealthPlan	First Choice by Select Health of SC	South Carolina Solutions	Unison Health Plan	FFS	Total Transfers From
Absolute Total Care		238	819	761	355	834	3,007
BlueChoice HealthPlan	38		173	73	42	150	476
First Choice by Select Health of SC	127	48		259	174	383	991
South Carolina Solutions	52	16	176		58	208	510
Unison Health Plan	59	20	251	157		284	771
FFS	69	18	120	101	60		368
Total Transfers To	345	340	1,539	1,351	689	1,859	6,123

Change Management Notes: May 2010: Please refer to CAR #1981 for several clean-up related changes that were made to Pages 4,5,9 and 10 of the Dashboard.

Page 1: Snapshot Summary

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

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

Please refer to the Snapshot Page Glossary for details.

Change Management Notes:

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

2) Current Eligibles section was added starting Dec 08 and is not available for prior months.

Page 2: Historical Enrollment Trends (Data)

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

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

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

Page 4 & 5: Health Plan Summary

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

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

Page 6: Enrollments by Method (Data)

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

Change Management Notes:

1) This page was added starting Dec 08. Includes enrollments by assign date and this data is not available for prior months.

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

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

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

Page 9 & 10: Disenrollment Information

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

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

Page 11: Health Plan Transfer Mix

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

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

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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. (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.