

Plan Changes Requests by Reason
 Effective Date March 01, 2012
 Sub Report: On Going Population - Changes Within 90 Days



Summary

Transfer Reason Description	Data						
	Amerigroup	Community Health Solutions	Lacare	LA Healthcare Connections	United Healthcare	Fee For Service	Total Transfers
90 Day Enrollment Grace Period	1,233	582	1,858	1,132	981	0	5,786
Death of recipient	1	1	0	4	0	0	6
Disenrolled due to Medicare coverage.	12	2	11	7	11	1	44
Documented lack of access to providers experienced in dealing with the member's healthcare needs	0	0	0	0	1	0	1
Lack of access to services covered under the contract	0	0	7	5	6	0	18
Involuntary disenrollment	3	3	2	2	2	0	12
Member is enrolled in a Medicaid home and community-based services waiver(HDBS) ;	0	0	1	0	1	0	2
Member requests to be assigned to the same CCN as family members	3	1	3	4	4	0	15
Not applicable (use when not a disenrollment record)	27	15	27	16	22	0	107
Poor quality of care	5	0	2	1	0	0	8
Recipient does not meet LOC criteria	1	2	3	0	0	0	6
Recipient has other health insurance	1	1	9	3	3	0	17
Recipient is not categorically eligible	2	1	0	0	0	0	3
Recipient moved out of service area	0	2	1	4	3	0	10
Recipient moved out of state	6	4	14	4	12	0	40
Termination of a future-dated linkage	121	91	112	82	137	0	543
To implement the decision of a hearing officer	1	0	0	0	0	0	1
Voluntary disenrollment	2,105	1,100	3,028	2,259	1,655	0	10,147
Total	3,521	1,805	5,078	3,523	2,838	1	16,766

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Note: Data reflects enrollment transactions as accepted by State Fiscal Intermediary

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