

Plan Changes Requests by Reason
Effective Date July 01, 2012

Changes within 90 Days

Summary							
Transfer Reason Description	Amerigroup	Community Health Solutions	LaCare	LA Healthcare Connection	United Healthcare	Legacy Medicaid	Total Transfers
90 Day Enrollment Grace Period	1,971	987	1,782	2,137	1,087	0	7,964
Death of recipient	2	0	3	0	0	0	5
Death of recipient, DOD unknown	0	0	0	1	0	0	1
Disenrolled due to Medicare coverage.	9	0	9	12	6	0	36
Documented lack of access to providers experienced in dealing with the member healthcare needs	499	170	534	631	347	0	2,181
Involuntary disenrollment	15	14	20	22	8	0	79
Lack of access to services covered under the contract	189	86	161	178	74	0	688
Member requests to be assigned to the same CCN as family members	319	209	317	367	192	0	1,404
Not applicable (use when not a disenrollment record)	99	46	134	102	62	0	443
Poor quality of care	26	11	19	34	11	0	101
Recipient admitted to institution	0	0	2	0	0	0	2
Recipient does not meet LOC criteria	1	0	8	13	1	0	23
Recipient has other health insurance	22	13	31	27	18	0	111
Recipient is not categorically eligible	2	6	4	14	6	0	32
Recipient moved out of service area	22	9	16	18	10	0	75
Termination of a future-dated linkage	125	126	139	173	94	0	657
The member needs related services to be performed at the same time	166	93	178	161	70	0	668
Voluntary disenrollment	382	219	429	426	260	0	1,716
Total	3,849	1,989	3,786	4,316	2,246	0	16,186

Detail

Transfer Reason Description	Amerigroup	Community Health Solutions	LaCare	LA Healthcare Connection	United Healthcare	Legacy Medicaid	Total Transfers
Approved Out-of-State							
90 Day Enrollment Grace Period	2	0	0	0	0	0	2
GSA A							
90 Day Enrollment Grace Period	84	18	65	50	44	0	261
Documented lack of access to providers experienced in dealing with the member healthcar	19	4	24	15	4	0	66
Involuntary disenrollment	5	0	0	0	0	0	5
Lack of access to services covered under the contract	11	9	16	15	9	0	60
Member requests to be assigned to the same CCN as family members	2	5	12	6	5	0	30
Not applicable (use when not a disenrollment record)	58	29	93	67	39	0	286
Poor quality of care	0	1	1	1	1	0	4
Recipient does not meet LOC criteria	1	0	0	0	0	0	1
Recipient has other health insurance	0	0	2	0	1	0	3
Recipient moved out of service area	1	0	0	0	2	0	3
Termination of a future-dated linkage	20	15	17	15	10	0	77
The member needs related services to be performed at the same time	8	1	5	6	3	0	23
Voluntary disenrollment	4	1	8	8	1	0	22
GSA B							
90 Day Enrollment Grace Period	492	250	425	450	187	0	1,804
Disenrolled due to Medicare coverage.	1	0	2	5	0	0	8
Documented lack of access to providers experienced in dealing with the member healthcar	120	55	141	140	56	0	512
Involuntary disenrollment	5	5	0	0	0	0	10
Lack of access to services covered under the contract	47	31	52	58	17	0	205
Member requests to be assigned to the same CCN as family members	63	57	71	88	28	0	307
Not applicable (use when not a disenrollment record)	41	15	39	35	19	0	149
Poor quality of care	10	3	7	11	2	0	33
Recipient does not meet LOC criteria	0	0	0	2	0	0	2
Recipient has other health insurance	2	2	7	5	1	0	17
Recipient is not categorically eligible	1	3	1	3	0	0	8
Recipient moved out of service area	3	2	5	5	2	0	17
Termination of a future-dated linkage	26	28	38	53	22	0	167
The member needs related services to be performed at the same time	60	25	52	49	13	0	199
Voluntary disenrollment	52	39	72	84	36	0	283
GSA C							
90 Day Enrollment Grace Period	1,393	719	1,292	1,637	856	0	5,897
Death of recipient	2	0	3	0	0	0	5
Death of recipient, DOD unknown	0	0	0	1	0	0	1
Disenrolled due to Medicare coverage.	8	0	7	7	6	0	28
Documented lack of access to providers experienced in dealing with the member healthcar	360	111	369	476	287	0	1,603
Involuntary disenrollment	5	9	20	22	8	0	64
Lack of access to services covered under the contract	131	46	93	105	48	0	423
Member requests to be assigned to the same CCN as family members	254	147	234	273	159	0	1,067
Not applicable (use when not a disenrollment record)	0	2	2	0	4	0	8
Poor quality of care	16	7	11	22	8	0	64
Recipient admitted to institution	0	0	2	0	0	0	2
Recipient does not meet LOC criteria	0	0	8	11	1	0	20
Recipient has other health insurance	20	11	22	22	16	0	91
Recipient is not categorically eligible	1	3	3	11	6	0	24
Recipient moved out of service area	18	7	11	13	6	0	55
Termination of a future-dated linkage	79	83	84	105	62	0	413
The member needs related services to be performed at the same time	98	67	121	106	54	0	446
Voluntary disenrollment	326	179	349	334	223	0	1,411
Total	3,849	1,989	3,786	4,316	2,246	0	16,186

Description: This report shows a summary of plan changes requests by reason created during the reporting month.