



**Iowa Wellness Plan Quarterly Report
1115 Demonstration Waiver
April 1, 2016 – June 30, 2016**

September 2016

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I. EXECUTIVE SUMMARY

During the second quarter of 2016, the state worked on finalizing implementation activities to support the High Quality Health Care Initiative for the Iowa Medicaid program. This initiative was designed to serve members through a statewide managed care delivery in a highly coordinated manner and improve health outcomes. On April 1, 2016, the majority of Medicaid members and Iowa Wellness Plan members (IWP) began receiving services through the IA Health Link managed care program. IWP members enrolled in IA Health Link continue to receive the same program structure, benefit coverage, cost sharing, and premium obligations under the amended IWP that was approved December 24, 2015.

The third extension of the non-emergency medical transportation (NEMT) waiver was set to expire on June 30, 2016. In May 2016, the state requested an additional extension of the NEMT waiver through the end of the 1115 demonstration period, December 31, 2016. On May 31, 2016, CMS approved the extension to December 31, 2016.

The Iowa Health and Wellness Plan (IHAWP) has proven to be a successful program over the initial three-year demonstration period. Interim evaluation reports of the Iowa Health and Wellness Plan have revealed positive findings that align with the state's following objectives: 1) improvements in enrollee health and wellness through healthy behaviors and use of preventive services; (2) increases in enrollee engagement and accountability in their health care; and (3) increases in enrollee access to dental care. On June 1, 2016, the state submitted a request to CMS to extend the IWP demonstration waiver and the NEMT waiver from January 1, 2017 through December 31, 2019. The extension of both waivers will enable the state to continue its efforts, utilizing the new managed care delivery system for the IWP population.

Other major activities or milestones that occurred during second quarter included the following:

- Continued member support through communications designed to provide education about Medicaid programs and managed care.
- Stakeholder communications providing program updates and other useful information.
- Provider outreach that included training sessions on managed care.
- Preparations to add a second dental carrier under the Dental Wellnes Plan.

Following this letter is a detailed report of key activities and related statistics for the first quarter, consistent with the Special Terms and Conditions. Additional information about the IHAWP can be found at <https://dhs.iowa.gov/IHAWP>. Please contact me at 515-256-4621 or mstier@dhs.state.ia.us, or Deanna Jones at 515-256-4652 or djones1@dhs.state.ia.us should you have any questions about this report.

II. SIGNIFICANT ACTIVITIES OF THE QUARTER

1. Communication and Outreach

Communication related activities for the second quarter are outlined below.

Monthly Member Mailings:

- **IA Health Link Member Handbook:** This packet is mailed to all new IHAWP members and it includes information about IHAWP benefits, healthy behaviors and the MCO selection process.
- **Healthy Behaviors Reminder Letters:** These are sent from the member's MCO. This letter reminds members of their need to complete their healthy behaviors to keep their free health coverage.
- **IHAWP Contribution Statements:** These statements are sent to members who are required to pay monthly contributions. An informational piece on healthy behaviors is included with these monthly statements. In June, statements were updated to reflect changes to the Dental Wellness Plan.

Website Content:

- April - Updated to reflect IA Health Link implementation
- May - Updated to include choice cut-off dates, new FAQs, updated 'how to read your statement' and other information.
- June - Updated to reflect changes to the Dental Wellness Plan.

Medicaid e-News:

- Medicaid e-News is sent to 3,600+ providers and stakeholders as needed and includes important updates, links to member mailings, useful resources and informational letters. The e-News also provides key contact information for the MCOs and their transportation brokers.

Public Notice:

- April - Public notice of the state's request to renew the Iowa Wellness Plan Demonstration Waiver and to terminate the Marketplace Choice Demonstration Waiver was issued. This public notice announced public hearings and was featured in the Medicaid e-News, on the DHS website and published in the Des Moines Register and 8 other publications.
- June - Public notice of the state's application to renew the Iowa Wellness Plan Demonstration Waiver and to terminate the Marketplace Choice Demonstration Waiver was issued. This public notice was featured in the Medicaid e-News, on the DHS website and published in the Des Moines Register and 8 other publications.

2. Provider Outreach

During second quarter 2016, the state conducted provider training sessions to assist the provider community with the transition to managed care. These sessions were held to provide specific information related to the implementation of managed care, which included member communication, covered benefits, and billing impacts. A total of 515 providers attended these

sessions across the state at the following events:

- April 15, 2016 – Iowa Medical Group Management Association Quarterly meeting in Iowa City
- April 21, 2016 – Iowa Physical Therapy Association (IPTA) Spring Conference in Des Moines
- April 23, 2016 – Iowa Podiatric Medical Society (IPMS) Annual Spring Meeting in Des Moines
- April 27, 2016 – Iowa Rural Health Clinic Spring Conference in West Des Moines
- May 4, 2016 – Midwest Association for Medical Equipment Services (MAMES) in Des Moines
- May 23, 2016 – Changing Minds Event with Child Health Specialty Clinics in Dubuque
- June 23, 2016 – Iowa Medical Group Management Association Annual Panel of Payers event in West Des Moines

3. Legislative Developments

There were no legislative related activities to report during second quarter 2016.

II. ELIGIBILITY/ENROLLMENT

1. Quarterly Enrollment

The IWP population totaled 144,082 at the end of second quarter. Monthly enrollment totals by population group are shown below.

Population Group	April	May	June
0-100% FPL	108,390	108,116	108,789
101-133% FPL	35,660	35,427	34,954
Presumptive	247	230	339
Total	144,297	143,773	144,082

2. Special Population Groups

The state monitors specific population groups enrolled in the IHAWP to ensure their health care needs are met in accordance with the Special Terms and Conditions (STC). These groups are comprised of: (1) Nineteen and twenty year-olds, (2) American Indian/Alaskan Natives, and (3) the medically exempt (frail). Below are IWP enrollment totals for these groups during second quarter 2016.

Population Group	April	May	June
<u>19-20 Year-old</u>			
0-100% FPL	5,570	5,509	5,508
101-133%FPL	1,156	1,155	1,155
<u>American Indian/Alaskan Native</u>			
0-100% FPL	1,535	1,536	1,554
101-133%FPL	394	399	394
<u>Medically Exempt</u>			
0-100% FPL	14,769	14,678	15,002
101-133%FPL	2,991	2,985	3,031
Total	26,415	26,262	26,644

III. ACCESS/DELIVERY

Effective April 1, 2016, the majority of Medicaid members began accessing services through the IA Health Link managed care program. Information on access and delivery is available in managed care reports for the months of April and May of 2016. See the Network Adequacy and Historical Utilization section at http://dhs.iowa.gov/news-releases/story_2.

IV. MEMBER GRIEVANCES AND APPEALS

1. Grievances

Beginning April 1, 2016, all Medicaid members enrolled in MCOs have access to their respective member hotlines to report complaints about the IA Health Link program. A summary of MCO grievances and appeals can be found in the MCO quarterly reports, Consumer Protections and Supports section at <https://dhs.iowa.gov/ime/about/performance-data/MC-quarterly-reports>

IHAWP members in the Fee-for-Service (FFS) program are able to report their complaints to the Iowa Medicaid Member Services Call Center. A summary of these complaints is provided below.

Complaint Type	April	May	June
Benefits and Services	3	2	6
Access	0	0	0

Substance Abuse/Mental Health Access	0	0	0
Quality of Care	0	0	0
Medical Provider Network	1	2	0
Premiums and Cost Sharing	0	0	0
Healthy Behaviors	1	2	1
Non-emergency Medical Transportation	0	0	0
EPSDT Services	0	0	0

2. Appeals and Exceptions

During second quarter the state received requests for 44 exceptions to Medicaid policy and 45 requests for appeal hearings for IHAWP members in FFS. See Attachment 1 for more details.

VI. Financial Report

See Attachment 2 for the actual number of member months for the IWP as of June 30, 2016. This report is required under the STCs for the purpose of tracking program costs, which includes calculating the budget neutrality expenditure cap.

VII. Other Activities

1. Dental Wellness Plan

Delta Dental has been the sole dental carrier since the Dental Wellness Plan was established on May 1, 2014. During second quarter, the state prepared to finalize contract negotiations with Managed Care of North America (MCNA) to join the Dental Wellness Plan (DWP). MCNA Dental is required to provide the same benefits as Delta Dental, which allows IWP members a choice between two dental carriers.

On May 23, 2016, the Iowa Medicaid Enterprise (IME) met with MCNA to kick-off the readiness review process. In June of 2016, the state conducted an on-site review of MCNA's operations and determined MCNA had the operational capacity and ability to offer high quality, coordinated care to the IWP population. On July 12, 2016, the state announced that MCNA Dental joined the DWP, effective immediately.

For more information about the addition of MCNA Dental, see [Informational Letter 1696](#) and visit the [DWP Webpage](#). In addition, see Attachment 3 for an update of Delta Dental's operations and member benefit utilization.

2. Premium Monitoring and the Healthy Behaviors Program

In accordance with the STCs, the state is required to collect premium related data to monitor the effects of premiums on IWP members with incomes between 50 and 133 percent of the FPL. This information is contained in Attachment 4.

3. Non-Emergency Medical Transportation (NEMT)

The STCs of the original IWP 1115 demonstration required the waiver of non-emergency medical transportation (NEMT) to sunset on December 31, 2014, with a possible waiver extension based on evaluation results of the impact on access to care. Below is a description of events related to the extension of NEMT waiver.

- In September of 2014, the state proposed an amendment to extend the NEMT waiver because adequate data were not available to conduct a full evaluation within the allowed time period. In December 2014, CMS approved the state's request to extend the NEMT waiver through July 31, 2015, with additional time to present further data by May 31, 2015.
- On May 29, 2015, the state submitted a second amendment with new evaluation results to CMS requesting continuation of the NEMT waiver through December 31, 2016, to maintain the state's original approach to Medicaid expansion within the 1115 demonstrations. In July 2015, CMS approved an extension of the waiver through March 31, 2016, with the expectation that the state complete additional surveys and analyses.
- In January 2016, CMS approved the state's request to allow a temporary extension of the NEMT waiver to June 30, 2016. This approval allows the state to align with the timelines established for the extension of the 1115 demonstration IWP waiver, which is set to expire December 31, 2016.
- In May 2016, the state submitted a request to CMS to extend the IWP demonstration to January 1, 2017 through December 31, 2019. The state's request included an extension of the NEMT waiver to December 31, 2016. On May 31, 2016, CMS granted a temporary extension of the NEMT waiver through the end of demonstration period, December 31, 2016.

Attachments

1. IWP Appeals and Exceptions Report
2. Financial Reporting - IWP Member Months
3. Dental Wellness Plan Report
4. Premium Monitoring Report

DEPARTMENT OF HUMAN SERVICES (DHS)
IOWA WELLNESS PLAN - 2nd QUARTER 2016

EXCEPTION TO POLICY REQUESTS

MONTH	CATEGORY	OUTCOME*	COUNT
April	Noncovered Service	Approved	6
		Denied	11
	Dental	Withdrawn	1
	Claim	Denied	1
	Vision	Approved	1
		Denied	1
Withdrawn		1	
May	Dental	Approved	2
		Denied	2
	Claim	Denied	1
	Vision	Approved	2
		Denied	1
June	Noncovered Service	Approved	3
		Denied	6
	Pharmacy	Approved	3
	Claim	Denied	1
		Withdrawn	1
TOTAL EXCEPTIONS			44

**Approved - Exception granted.*

Denied - Payment/coverage denied.

Withdrawn - Request declared unnecessary for approval; withdrawn by DHS.

MEMBER APPEALS

MONTH	CATEGORY	OUTCOME*	COUNT
April	Noncovered Service	Affirmed	1
		Dismissed	1
	Claim	Affirmed	1
	Pharmacy	Affirmed	3
		Denied	1
		Withdrawn	1
		Dismissed	1
	Lock-in	Affirmed	1
		Dismissed	1
	May	Dental	Reversed
Claim		Affirmed	1
		Dismissed	2
Contributions/Premiums		Affirmed	7
		Reversed	1
		Withdrawn	1
		Dismissed	1
June	Claim	Withdrawn	1
	Contributions/Premiums	Affirmed	6
		Reversed	4
		Withdrawn	5
		Dismissed	2
		Pending	2
TOTAL APPEALS			45

* Affirmed - DHS' action is correct.

Dismissed - Appeal is unnecessary for approval of coverage/payment; dismissed by DHS.

Reversed - Appellant's request is approved; DHS is ordered to reverse its action.

Iowa Wellness Plan Member Months - 2nd Quarter 2016

Income 50 - 100% FPL

MCO - Medically Exempt

Member Counts								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	0	0	0	0	0	0	0
	2/1/2016		0	0	0	0	0	0
	3/1/2016			0	0	0	0	0
	4/1/2016				618	716	13,390	14,724
	5/1/2016					33	988	1,021
	6/1/2016						629	629
Grand Total		0	0	0	618	749	15,007	16,374

Member Months								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	0	0	0	0	0	0	0
	2/1/2016		0	0	0	0	0	0
	3/1/2016			0	0	0	0	0
	4/1/2016				618	1,432	40,125	42,175
	5/1/2016					33	1,976	2,009
	6/1/2016						629	629
Grand Total		0	0	0	618	1,465	42,730	44,813

MCO

Member Counts								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	0	0	0	0	0	0	0
	2/1/2016		0	0	0	0	0	0
	3/1/2016			0	0	0	0	0
	4/1/2016				4940	4892	80,333	90,165
	5/1/2016					282	5,827	6,109
	6/1/2016						5,940	5,940
Grand Total		0	0	0	4940	5174	92,100	102,214

Member Months								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	0	0	0	0	0	0	0
	2/1/2016		0	0	0	0	0	0
	3/1/2016			0	0	0	0	0
	4/1/2016				4,940	9,784	240,793	255,517
	5/1/2016					282	11,654	11,936
	6/1/2016						5,940	5,940
Grand Total		0	0	0	4,940	10,066	258,387	273,393

Fee-for-service- Medically Exempt

Member Counts								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	885	915	14,061	173	94	260	16,388
	2/1/2016		32	581	21	10	40	684
	3/1/2016			334	82	10	30	456

Eligibility Start Date		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
4/1/2016					15	53	38	106
5/1/2016						20	72	92
6/1/2016							84	84
Grand Total		885	947	14,976	291	187	524	17,810

Member Months								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	885	1,830	42,150	679	438	1,434	47,416
	2/1/2016		32	1,162	62	40	196	1,492
	3/1/2016			334	164	29	120	647
	4/1/2016				15	106	113	234
	5/1/2016					20	144	164
	6/1/2016						84	84
Grand Total		885	1,862	43,646	920	633	2,091	50,037

Fee-for-service

Member Counts								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	7,022	6,295	85,178	1,371	1,071	1,367	102,304
	2/1/2016		335	5,320	353	181	636	6,825
	3/1/2016			2,849	2,059	281	844	6,033
	4/1/2016				472	2,033	990	3,495
	5/1/2016					665	2,592	3,257
	6/1/2016						2,412	2,412
Grand Total		7,022	6,630	93,347	4,255	4,231	8,841	124,326

Member Months								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	7,022	12,590	255,302	5,426	5,183	7,624	293,147
	2/1/2016		335	10,640	1,056	719	3,162	15,912
	3/1/2016			2,849	4,118	834	3,349	11,150
	4/1/2016				472	4,066	2,965	7,503
	5/1/2016					665	5,184	5,849
	6/1/2016						2,412	2,412
Grand Total		7,022	12,925	268,791	11,072	11,467	24,696	335,973

Income Over 100% FPL

MCO - Medically Exempt

Member Counts								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	0	0	0	0	0	0	0
	2/1/2016		0	0	0	0	0	0
	3/1/2016			0	0	0	0	0
	4/1/2016				204	193	2,634	3,031
	5/1/2016					26	212	238
	6/1/2016						223	223
Grand Total		0	0	0	204	219	3,069	3,492

Member Months								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total

Eligibility Start Date	1/1/2016	0	0	0	0	0	0	0
	2/1/2016		0	0	0	0	0	0
	3/1/2016			0	0	0	0	0
	4/1/2016				204	386	7,898	8,488
	5/1/2016					26	424	450
	6/1/2016						223	223
	Grand Total		0	0	0	204	412	8,545

MCO

Member Counts								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	0	0	0	0	0	0	0
	2/1/2016		0	0	0	0	0	0
	3/1/2016			0	0	0	0	0
	4/1/2016				2,177	2,381	27,191	31,749
	5/1/2016					139	2,446	2,585
	6/1/2016						2,581	2,581
	Grand Total		0	0	0	2,177	2,520	32,218

Member Months								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	0	0	0	0	0	0	0
	2/1/2016		0	0	0	0	0	0
	3/1/2016			0	0	0	0	0
	4/1/2016				2,177	4,762	81,499	88,438
	5/1/2016					139	4,892	5,031
	6/1/2016						2,581	2,581
	Grand Total		0	0	0	2,177	4,901	88,972

Fee-for-service - Medically Exempt

Member Counts								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	295	285	2,614	22	16	32	3,264
	2/1/2016		16	260	5	2	8	291
	3/1/2016			202	18	4	7	231
	4/1/2016				12	11	5	28
	5/1/2016					7	22	29
	6/1/2016						14	14
	Grand Total		295	301	3,076	57	40	88

Member Months								
Eligibility End Date								
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	295	570	7,838	88	72	188	9,051
	2/1/2016		16	520	15	8	39	598
	3/1/2016			202	36	12	28	278
	4/1/2016				12	22	15	49
	5/1/2016					7	44	51
	6/1/2016						14	14
	Grand Total		295	586	8,560	151	121	328

Fee-for-service

Member Counts								
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		Eligibility End Date						
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	3,276	2,732	27,828	325	289	490	34,940
	2/1/2016		235	2,866	164	62	187	3,514
	3/1/2016			2,123	630	131	215	3,099
	4/1/2016				221	594	294	1,109
	5/1/2016					261	754	1,015
	6/1/2016						774	774
Grand Total		3,276	2,967	32,817	1,340	1,337	2,714	44,451

		Member Months						
		Eligibility End Date						
		1/31/2016	2/29/2016	3/31/2016	4/30/2016	5/31/2016	6/30/2016	Grand Total
Eligibility Start Date	1/1/2016	3,276	5,464	83,374	1,282	1,390	2,760	97,546
	2/1/2016		235	5,732	487	245	918	7,617
	3/1/2016			2,123	1,260	391	851	4,625
	4/1/2016				221	1,188	878	2,287
	5/1/2016					261	1,508	1,769
	6/1/2016						774	774
Grand Total		3,276	5,699	91,229	3,250	3,475	7,689	114,618

Iowa Dental Wellness Plan Report – 2nd Qtr. 2016

<p>Operations</p>	<ul style="list-style-type: none"> • Activities/Results <ul style="list-style-type: none"> ○ Customer Service calls received for quarter: 8,338 ○ 864,100 dental services provided to 84,505 unique members ○ Completed Risk Assessments to date: 45,802 first time risk assessment and 10,870 second time risk assessment. ○ 19 local Public Health Agencies are providing outreach and referral services to DWP members and working with community providers to increase awareness • Claims <ul style="list-style-type: none"> ○ Processing Time (average): 7.92 days ○ Payment for Claims: \$8,864,476.06 • Complaints/Appeals <ul style="list-style-type: none"> ○ 79 complaints, 79 resolved (program to date) ○ 16 complaints, 16 resolved (2nd quarter of 2016) ○ 10 appeals, 10 resolved (program to date) ○ 4 appeal, 4 resolved (2nd quarter of 2016) ○ No reports from members on not receiving timely services • Network <ul style="list-style-type: none"> ○ Number of dentist providing services 4/1- 6/30, 2016: ○ 653 General Dentists ○ 54 Oral Surgeons ○ 9 Periodontists ○ 5 Pedodontists ○ 5 Endodontists ○ 5 Prosthodontists
<p>DWP Benefit Design and Related Data</p>	<ul style="list-style-type: none"> • To date members that have received services <ul style="list-style-type: none"> ○ 96.8% received a Diagnostic and Prevention Service ○ 45.6% received a Stabilization Service ○ 32.7% received an Emergent Service • Earned Benefits <ul style="list-style-type: none"> ○ 36.51% of members with qualifying service have earned Enhanced or Enhanced Plus benefits

Premium Monitoring Report - 2nd Qtr 2016*							
	APRIL		MAY		JUNE		
	FPL < 101%	FPL > 100%	FPL < 101%	FPL > 100%	FPL < 101%	FPL > 100%	
Members who owe premiums - Did not complete healthy behaviors (FPL > 49% FPL)	15,698	11,300	16,340	11,692	16,687	11,740	
Members who completed Healthy Behaviors (premiums waived)	3,617	2,773	3,546	2,819	3,663	2,945	
Members who completed Healthy Behaviors during 31-day grace period (premiums waived)	9	20	7	15	14	21	
Members who declared hardship (premiums waived)	1,504	1,448	1,594	1,367	1,558	1,183	
American Indian/Alaskan Natives (exempt)	634	159	643	174	688	200	
Medically Frail (exempt)	2,780	2,124	2,883	2,176	3,041	2,310	
Members in the Health Insurance Premium Payment Program (exempt)	54	92	50	90	42	68	
Members ineligible for IHAWP - churn (exempt)	41	23	41	29	35	26	
Members with incomes below 50% FPL (exempt)	29,102	NA	29,894	NA	30,879	NA	
Members with debt sent to collections for failure to pay premiums within 90-day grace period	7,784	4,738	7,968	4,848	-	-	
Members disenrolled for failure to pay premiums within 90-day grace period (FPL > 100%)	NA	377	NA	512	NA	710	
Members who reenrolled during the quarter	NA	184	NA	257	NA	333	
<i>*Values represent monthly enrollment totals as of 8/1/16.</i>							
<i>Exception - Reenrollments represent totals as of 9/1/16.</i>							