

File Name: X2022039

SCHEDULE NAME: EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY - WRITE INS
PAGE NUMBER: 017

COLUMN NUMBER	COLUMN NAME	FORMAT	LENGTH
1	COCODE	NUMERIC	5
2	LINE_NO	ALPHA	10
3	WRITEIN_DESC	ALPHA	300
4	PR_YR_TOT_MEMBERS	NUMERIC	14
5	FIRST_QTR_TOT_MEMBERS	NUMERIC	14
6	SECOND_QTR_TOT_MEMBERS	NUMERIC	14
7	THIRD_QTR_TOT_MEMBERS	NUMERIC	14
8	CURR_YR_TOT_MEMBERS	NUMERIC	14
9	CURR_YR_MEM_MONTHS	NUMERIC	14

The following column/row intersections either do not exist or do not have values on the Annual Statement.

COLUMN	LINE NUMBER
WRITEIN_DESC	0699

VALID LINE NUMBERS

LINE NUMBER	LINE DESCRIPTION
0601	0601-0696 as needed
0699	Write-in total for other lines of business