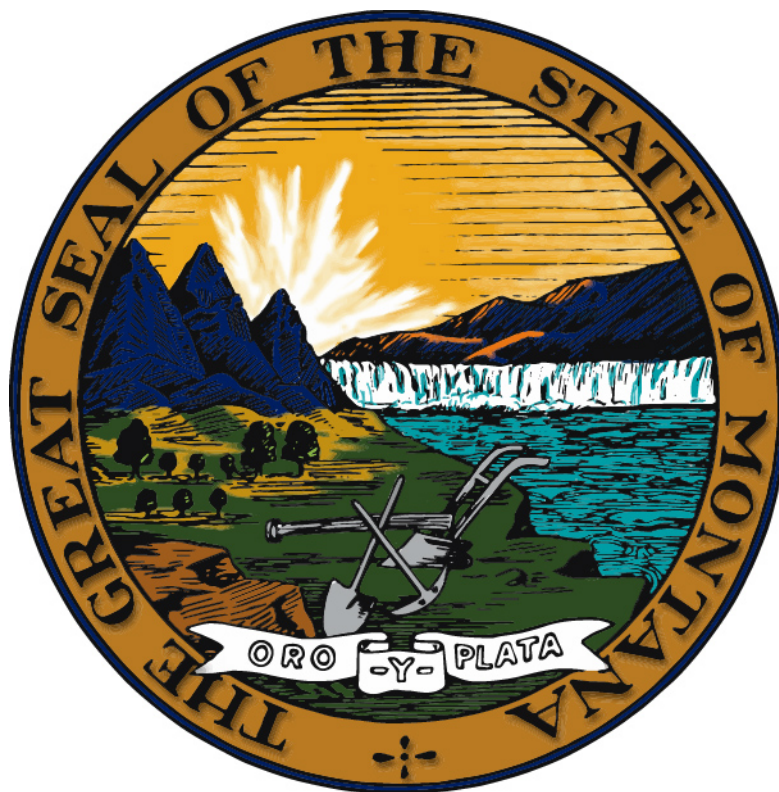


Montana Health and Economic Livelihood Partnership (HELP) Program Demonstration

Number: No. 11-W-00300/8

SECTION 1115 WAIVER QUARTERLY REPORT State of Montana



REPORTING PERIOD

Quarter: 2 (04/01/17 – 06/30/2017)
Demonstration Year: 2 (01/01/17 – 12/31/17)
Date submitted to CMS: August 31, 2017

Demonstration Population

This demonstration affects eligible individuals ages 19 through 64 in the new adult group under the state plan as authorized by Section 1902(a)(10)(A)(i)(VIII) of the Social Security Act, and 42 CFR 435.119; new adults receive all benefits described in an Alternative Benefit Plan State Plan.

The following populations are excluded from all portions of the demonstration other than the continuous eligibility provisions in Section VIII. Individuals:

- Who are medically frail;
- Whom the State determines have exceptional health care needs, including but not limited to a medical, mental health, or developmental condition;
- Who live in a region where the Third Party Administrator (TPA) is unable to contract with a sufficient number of providers;
- Whom the state determines, in accordance with objective standards approved by CMS, require continuity of coverage that is not available or could not be effectively delivered through the TPA; and
- Individuals with incomes below 50 percent of the FPL.

Events Related to Health Care Delivery, Enrollment, or Other Operations

Participant and Provider Education

DPHHS worked with the TPA to keep education materials current for HELP Program participants and providers. Upon enrollment, participants receive a Welcome Kit via mail, which includes a welcome letter, Participant Guide, and flyer for the TPA's online portal.

Materials updated and implemented during this quarter:

Blue Access for Members (BAM) Online Portal Flyer which include online participant resources such as:

- Requesting a new ID card;
- Locating a doctor or hospital in the HELP Program network;
- Completing the health assessment online;
- Payment and billing information;
- Claim status and claims history; and
- Viewing and printing an Explanation of Benefits (EOB).

Evaluation Activities

State Evaluation

DPHHS received a letter from CMS dated May 31, 2017, removing the state's obligation to perform an independent evaluation of the 1115 HELP Demonstration Waiver.

Federal Evaluation

Montana was presented with the Urban Institute and Social & Scientific Systems, Inc.'s (SSS) federal evaluation design and timeline in December 2016, and has since given feedback to ensure the evaluation provides a comprehensive view of the HELP Program. Montana signed a data use agreement with SSS in preparation to submit eligibility and claims data to SSS for the evaluation in May 2017. Beneficiary surveys and focus groups are planned to begin in September 2017. Montana will continue to assist with the federal evaluation as needed.

Challenges

No unusual challenges noted.

Key Milestones and Accomplishments

Participant Enrollment

Medicaid expansion enrollment grew to 82,897 using enrollment data as of July 31, 2017.

New Benefit Coverage

Montana successfully added a contact lenses benefit for participants with covered diagnoses whose vision cannot be effectively corrected with glasses.

Oversight and Monitoring

TPA Oversight

DPHHS staff continue to participate in a monthly in-person meeting with TPA staff. During these meetings, an agenda is reviewed and discussed as well as a detailed task list that has been provided to the TPA for completion. Items on the task list include: participant benefits and educational materials, provider outreach; implementing federal and state policy, administrative fee and claim reimbursement, reporting, and quality assurance.

Monitoring Tools

Below is a list of monitoring tools used by DPHHS for the TPA.

| Tool | Description | Frequency |
|-----------------------------|--|--|
| Annual On-Site Visit | Assess ongoing operational functions of TPA | Annually |
| In-Person Meetings with TPA | Discuss agenda items and TPA task list | Monthly |
| Waiver Compliance Tables | Includes both section 1115 and 1915(b)(4) waiver requirements – the TPA must demonstrate compliance with all requirements | Annually |
| Numbered Letters | Official correspondence to the TPA | As needed |
| Incident Reports | Description of inaccurate or non-compliant IT items, the TPA must provide details of the item, resolution, and timeline | Within two business days of occurrence |
| Deliverables | IT, policy, participant and provider education and correspondence, and materials. | Ongoing |
| TPA Reporting Requirements | TPA reports provided to the state to monitor premiums, claims, utilization, wellness programs, and other aspects of the programs | Weekly, Monthly, Quarterly, Annually |

Post Award Forum

The annual post award forum was held on June 20, 2017, in Helena, Montana. The public could attend either in-person or via WebEx. DPHHS discussed the following items:

- Waiver Summary for Section 1115, 1915(b), and 1915(c) waivers;
- Wellness Programs including a review of the HELP Healthy Behavior programs and participant health assessments;
- Review of utilized preventive care services;
- Review of participant enrollment;
- Possible upcoming changes related to Montana Senate Bill 261;
- Review of DPHHS contacts and resources; and
- A question and comment period.

Five members of the public attended the forum in Helena, Montana. Comments included clarification of the two percent premium credit, confirmation of the 1915(b)(4) waiver expiration, and a brief discussion on the administration of wellness programs.

Demonstration Waiver Deliverable Timeline

Please refer to Appendix A – Montana HELP Program 1115 Demonstration Waiver Deliverable Timeline.

1115 Demonstration Waiver Deliverable Timeline

| Quarterly Reports | Submit to CMS |
|---------------------------|----------------------|
| April 2017 - DY2, Q1 | 5/31/2017 |
| Q2 | 8/31/2017 |
| Q3 | 11/30/2017 |
| Q4 | 2/28/2018 |
| April 2018 - DY3, Q1 | 5/31/2018 |
| Q2 | 8/31/2018 |
| Q3 | 11/30/2018 |
| Q4 | 2/28/2019 |
| April 2019 - DY4, Q1 | 5/31/2019 |
| Q2 | 8/31/2019 |
| Q3 | 11/30/2019 |
| Q4 | 2/28/2020 |
| April 2020 - DY5, Q1 | 5/31/2020 |
| Q2 | 8/31/2020 |
| Q3 | 11/30/2020 |
| Q4 | 2/28/2021 |
| Annual Reports | |
| 2016 - DY1 | 3/31/2017 |
| 2017 - DY2 | 3/31/2018 |
| 2018 - DY3 | 3/31/2019 |
| 2019 - DY4 | 3/31/2020 |
| 2020 - DY5 | 3/31/2021 |
| Post Award Forum | |
| 2016 - DY1 | 7/1/2016 |
| 2017 - DY2 | 7/1/2017 |
| 2018 - DY3 | 7/1/2018 |
| 2019 - DY4 | 7/1/2019 |
| 2020 - DY5 | 7/1/2020 |
| Extension Request | 7/1/2020 |
| Demonstration Ends | 12/31/2020 |

Quarterly Help Act Measures

2017 Quarter 2 Report

April Data

Enrollment (by FPL and Demographic Categories)

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|---|-----------------------------------|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 79729 | 54620 | 10985 | 2958 | 8687 | 2479 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1707 | 1110 | 268 | 44 | 242 | 43 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 11748 | 7932 | 1598 | 625 | 1099 | 494 |

| # | Measure | Definition | Overall Measure | 19-20YR | 21-34YR | 35-44YR | 45-54YR | 55-64YR | >65YR |
|---|-----------------------------------|--|-----------------|---------|---------|---------|---------|---------|-------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 79729 | 6249 | 32825 | 15657 | 13081 | 11914 | 0 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1707 | 89 | 798 | 346 | 259 | 214 | 0 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 11748 | 1060 | 4905 | 2884 | 1743 | 1156 | 0 |

| # | Measure | Definition | Overall Measure | Native American/ Alaskan Native | Asian | White | Pacific Islander | Black | Unspecified Race |
|---|-----------------------------------|--|-----------------|------------------------------------|-------|-------|------------------|-------|------------------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 79729 | 11437 | 309 | 55866 | 181 | 683 | 11253 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1707 | 236 | 9 | 1155 | 5 | 19 | 283 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 11748 | 1818 | 41 | 8776 | 34 | 89 | 990 |

| # | Measure | Definition | Overall Measure | Hispanic/Latino | Non-Hispanic/Latino | Unspecified Ethnicity |
|---|-----------------------------------|--|-----------------|-----------------|---------------------|-----------------------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 79729 | 2142 | 57741 | 19846 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1707 | 59 | 1195 | 453 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 11748 | 345 | 10054 | 1349 |

| # | Measure | Definition | Overall Measure | Female | Male |
|---|-----------------------------------|--|-----------------|--------|-------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 79729 | 42911 | 36818 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1707 | 771 | 936 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 11748 | 7491 | 4257 |

| Premium Payment | | | | | | | | |
|-----------------|--|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
| 4 | Monthly count of beneficiaries who paid a premium during the month | Among enrolled individuals who owe premiums, number of beneficiaries who paid their premium for this month | 9482 | 0 | 5040 | 0 | 4442 | 0 |
| 5 | Monthly count of beneficiaries in the grace period | Among enrolled individuals who owe premiums, number of beneficiaries who did not pay their premium for the month but are not three months past due | 10665 | 0 | 6162 | 0 | 4503 | 0 |
| 6 | Monthly count of beneficiaries in long term arrears | Among enrolled individuals who owe premiums, number of beneficiaries who have not paid a premium in over three months. This includes individuals with income between 50-100% FPL who would have been disenrolled for non-payment of premiums if their income had been greater than 100% FPL | 478 | 0 | 478 | 0 | 0 | 0 |
| 7 | Monthly count of beneficiaries with collectible debt | Among enrolled individuals who owe premium payments, number of beneficiaries who have collectible debt | 3856 | 0 | 2927 | 0 | 929 | 0 |

| Mid-year change in circumstance in household composition or income | | | | | | | | |
|--|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
| 8 | Monthly count of beneficiaries who gave notice of mid-year change in circumstance in household or income information | Number of enrolled beneficiaries who notified the state of a mid-year change in circumstance and the change was effective during the reporting month | 6271 | 3966 | 983 | 256 | 896 | 170 |
| 9 | No premium change following mid-year update of household or income information | Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced no change in their premium requirement during the reporting month | 5455 | 3960 | 608 | 256 | 461 | 170 |
| 10 | Premium increase following mid-year update of household or income information | Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced an increase in their premium requirement during the reporting month [†] | 602 | 1 | 209 | 0 | 392 | 0 |
| 11 | Premium decrease following mid-year update of household or income information | Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced a decrease in their premium requirement during the reporting month [†] | 214 | 5 | 166 | 0 | 43 | 0 |

[†] These measures display the FPL bucket to which the individual moved after their premium increased or decreased. In future reports, these measures will display in which FPL bucket the individual originated prior to premium change.

| Disenrollments outside annual renewal determinations (by FPL and Demographic Categories) | | | | | | | | |
|--|---|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2333 | 1780 | 149 | 56 | 200 | 148 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 106 | 0 | 0 | 0 | 106 | 0 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 666 | 666 | 0 | 0 | 0 | 0 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1561 | 1114 | 149 | 56 | 94 | 148 |

| # | Measure | Definition | Overall Measure | 19-20YR | 21-34YR | 35-44YR | 45-54YR | 55-64YR | >65YR |
|----|---|--|-----------------|---------|---------|---------|---------|---------|-------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2333 | 152 | 1089 | 453 | 291 | 288 | 60 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 106 | 2 | 50 | 32 | 14 | 8 | 0 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 666 | 30 | 325 | 106 | 96 | 109 | 0 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1561 | 120 | 714 | 315 | 181 | 171 | 60 |

| # | Measure | Definition | Overall Measure | Native American/ Alaskan Native | Asian | White | Pacific Islander | Black | Unspecified Race |
|----|---|--|-----------------|------------------------------------|-------|-------|------------------|-------|---------------------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2333 | 252 | 10 | 1746 | 2 | 22 | 301 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 106 | 0 | 1 | 88 | 0 | 0 | 17 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 666 | 54 | 2 | 496 | 0 | 7 | 107 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1561 | 198 | 7 | 1162 | 2 | 15 | 177 |

| # | Measure | Definition | Overall Measure | Hispanic/Latino | Non-Hispanic/Latino | Unspecified Ethnicity |
|----|---|--|-----------------|-----------------|---------------------|-----------------------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2333 | 60 | 1690 | 583 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 106 | 1 | 81 | 24 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 666 | 17 | 396 | 253 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1561 | 42 | 1213 | 306 |

| # | Measure | Definition | Overall Measure | Female | Male |
|----|---|--|-----------------|--------|------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2333 | 1299 | 1034 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 106 | 60 | 46 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 666 | 349 | 317 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1561 | 890 | 671 |

Cost sharing limit

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|--|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 16 | Monthly count of beneficiaries who have exceeded 2% co-pay credit but not reached 5% limit | Count of enrolled individuals who have hit 2% co-pay credit since enrollment and must now make cost sharing payments, but who have not yet reached the 5% cost sharing limit | | | | | | |
| MT aims to submit these measures on the 2017 Q3 report | | | | | | | | |
| 17 | Monthly count of beneficiaries who have hit 5% cost sharing limit | Count of enrolled individuals who have hit 5% limit on cost sharing and premiums since enrollment, and no longer make cost sharing payments | | | | | | |
| MT aims to submit these measures on the 2017 Q3 report | | | | | | | | |

Use of preventive services* (by FPL and demographic categories)

* Measures 18 and 19 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled in October of 2016

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 33505 | 21615 | 4526 | 2068 | 3635 | 1661 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.92 | 0.99 | 0.62 | 1.17 | 0.66 | 1.23 |

| # | Measure | Definition | Overall Measure | 19-20YR | 21-34YR | 35-44YR | 45-54YR | 55-64YR | >65YR |
|----|--|--|-----------------|---------|---------|---------|---------|---------|-------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 33505 | 1605 | 11546 | 6796 | 6914 | 6644 | 0 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.92 | 0.28 | 0.51 | 0.93 | 1.45 | 1.68 | 0.00 |

| # | Measure | Definition | Overall Measure | Native American/ Alaskan Native | Asian or Pacific Islander | White | Black | Multi-Racial | Unspecified Race |
|----|--|--|-----------------|------------------------------------|---------------------------|-------|-------|--------------|---------------------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 33505 | 4163 | 121 | 24360 | 227 | 367 | 4267 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.92 | 0.81 | 0.56 | 0.95 | 0.71 | 1.00 | 0.85 |

| # | Measure | Definition | Overall Measure | Hispanic/Latino | Non-Hispanic/Latino or Unspecified |
|----|--|--|-----------------|-----------------|------------------------------------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 33505 | 833 | 32672 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.92 | 0.73 | 0.92 |

| # | Measure | Definition | Overall Measure | Female | Male |
|----|--|--|-----------------|--------|-------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 33505 | 20679 | 12826 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.92 | 1.02 | 0.79 |

Use of other services**

*** Measures 20 through 24 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled in October of 2016*

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|------|---|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 20a. | Physician service utilization | PMPM utilization of physician visits for currently enrolled beneficiaries | 0.469 | 0.502 | 0.397 | 0.532 | 0.366 | 0.452 |
| 20b. | Physician or mid-level practitioner utilization | PMPM utilization of physician or mid-level practitioner visits for currently enrolled beneficiaries | 0.652 | 0.689 | 0.567 | 0.720 | 0.535 | 0.634 |
| 21 | Prescription drug use | PMPM prescription fills greater than 28 days for currently enrolled beneficiaries | 0.920 | 0.982 | 0.670 | 1.143 | 0.706 | 1.216 |
| 22 | Emergency department utilization, emergency | PMPM emergency department visits for emergent conditions among currently enrolled beneficiaries (i.e. those not subject to a copayment) | 0.066 | 0.080 | 0.040 | 0.071 | 0.032 | 0.047 |
| 23 | Emergency department utilization, non-emergency | PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment) | 0.000 | 0.000 | 0.000 | 0.000 | 0.000 | 0.000 |
| 24 | Inpatient admissions | PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment) | 0.009 | 0.010 | 0.006 | 0.013 | 0.005 | 0.009 |

Renewal (starting in 2017)

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 25 | Monthly count of beneficiaries due for renewal | Number of beneficiaries due for renewal in the reporting month | 6181 | 5022 | 481 | 167 | 370 | 141 |
| 26 | Number who did not renew | Number of beneficiaries due for renewal in the reporting month who are determined ineligible for the HELP program because they failed to complete or return renewal forms or other required documentation, or who were lost to follow up | 2339 | 2328 | 3 | 2 | 1 | 5 |
| 27 | Number who lost eligibility | Number of beneficiaries due for renewal in the reporting month who respond to renewal notices, but are determined ineligible for the HELP program | 142 | 72 | 8 | 22 | 17 | 23 |
| 28 | No premium change | Number of beneficiaries due for renewal in the reporting month who remain eligible, with no change in premium requirement | 3642 | 2616 | 444 | 143 | 326 | 113 |
| 29 | Premium increase | Number of beneficiaries due for renewal in the reporting month who remain eligible, with an increase in required premium*** | 44 | 0 | 20 | 0 | 24 | 0 |
| 30 | Premium decrease | Number of beneficiaries due for renewal in the reporting month who remain eligible, with a decrease required premium*** | 14 | 6 | 6 | 0 | 2 | 0 |

*** These measures display the FPL bucket to which the individual moved after their premium increased or decreased. In future reports, these measures will display in which FPL bucket the individual originated prior to premium change.

Complaints, grievances, and appeals

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|---|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 31 | Complaints and grievances, Medicaid program | Total number of complaints and grievances filed in the reporting month regarding the HELP program | 0 | - | - | - | - | - |
| 32 | Complaints and grievances, plan administrator | Total number of complaints and grievances filed in the reporting month regarding the plan administrator | 1 | - | - | - | - | - |
| 33 | Complaints and grievances, provider | Total number of complaints and grievances filed in the reporting month regarding a provider | 2 | - | - | - | - | - |
| 34 | Appeals, eligibility | Total number of appeals filed in the reporting month regarding eligibility | 46 | - | - | - | - | - |
| 35 | Appeals, premiums | Total number of appeals filed in the reporting month regarding the size of premium payments | 2 | - | - | - | - | - |
| 36 | Appeals, denial of benefits | Total number of appeals filed in the reporting month regarding denials of benefits | 10 | - | - | - | - | - |

Enrollment duration among disenrollees

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--------------------------------|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 37 | Enrollment duration 0-3 months | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 3 or fewer months at the time of disenrollment | 214 | 202 | 0 | 2 | 3 | 7 |
| 38 | Enrollment duration 4-6 months | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for between 4 and 6 months at the time of disenrollment | 538 | 432 | 24 | 7 | 53 | 22 |
| 39 | Enrollment duration >6 months | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 6 or more months at the time of disenrollment | 1581 | 1146 | 125 | 47 | 144 | 119 |

Monthly premiums owed at disenrollment

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|---|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 40 | Amount of monthly premium at time of disenrollment >\$0 and <\$15 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) whose monthly premium at the time of disenrollment was greater than \$0 but less than \$15 | 23 | | 22 | | 1 | |
| 41 | Amount of monthly premium at time of disenrollment \$15-<\$30 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$15 or greater, but less than \$30 | 197 | | 101 | | 96 | |
| 42 | Amount of monthly premium at time of disenrollment \$30-<\$50 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$30 or greater, but less than \$50 | 111 | | 26 | | 85 | |
| 43 | Amount of monthly premium at time of disenrollment \$50-<\$75 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$50 or greater, but less than \$75. | 17 | | 0 | | 17 | |
| 44 | Amount of monthly premium at time of disenrollment ≥\$75 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$75 or greater. | 1 | | 0 | | 1 | |

Total debt owed at disenrollment for failure to pay

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 45 | Amount of total debt owed at time of disenrollment for failure to pay: <\$50 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was less than \$50. | 0 | | | | 0 | |
| 46 | Amount of total debt owed at time of disenrollment for failure to pay: ≥\$50 but <\$100 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was greater than or equal to \$50, but less than \$100. | 4 | | | | 4 | |
| 47 | Amount of total debt owed at time of disenrollment for failure to pay: ≥\$100 but <\$150 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was greater than or equal to \$100, but less than \$150. | 40 | | | | 40 | |
| 48 | Amount of total debt owed at time of disenrollment for failure to pay: ≥\$150 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was greater than \$150. | 62 | | | | 62 | |

Quarterly Help Act Measures

2017 Quarter 2 Report

May Data

Enrollment (by FPL and Demographic Categories)

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|---|-----------------------------------|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 81758 | 56387 | 11174 | 3010 | 8686 | 2501 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1542 | 1005 | 232 | 51 | 213 | 41 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 2532 | 1703 | 350 | 119 | 279 | 81 |

| # | Measure | Definition | Overall Measure | 19-20YR | 21-34YR | 35-44YR | 45-54YR | 55-64YR | >65YR |
|---|-----------------------------------|--|-----------------|---------|---------|---------|---------|---------|-------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 81758 | 5911 | 33700 | 16469 | 13302 | 12375 | 0 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1542 | 107 | 697 | 308 | 227 | 203 | 0 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 2531 | 420 | 1038 | 547 | 318 | 208 | 0 |

| # | Measure | Definition | Overall Measure | Native American/ Alaskan Native | Asian | White | Pacific Islander | Black | Unspecified Race |
|---|-----------------------------------|--|-----------------|------------------------------------|-------|-------|------------------|-------|------------------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 81758 | 12008 | 320 | 57080 | 187 | 695 | 11468 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1542 | 255 | 7 | 966 | 4 | 17 | 293 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 2532 | 476 | 11 | 1757 | 8 | 26 | 254 |

| # | Measure | Definition | Overall Measure | Hispanic/Latino | Non-Hispanic/Latino | Unspecified Ethnicity |
|---|-----------------------------------|--|-----------------|-----------------|---------------------|-----------------------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 81758 | 2195 | 59460 | 20103 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1542 | 32 | 1076 | 434 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 2532 | 89 | 2097 | 346 |

| # | Measure | Definition | Overall Measure | Female | Male |
|---|-----------------------------------|--|-----------------|--------|-------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 81758 | 44119 | 37639 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1542 | 707 | 835 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 2532 | 1539 | 993 |

| Premium Payment | | | | | | | | |
|-----------------|--|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
| 4 | Monthly count of beneficiaries who paid a premium during the month | Among enrolled individuals who owe premiums, number of beneficiaries who paid their premium for this month | 8735 | 0 | 4632 | 0 | 4103 | 0 |
| 5 | Monthly count of beneficiaries in the grace period | Among enrolled individuals who owe premiums, number of beneficiaries who did not pay their premium for the month but are not three months past due | 10043 | 0 | 5956 | 0 | 4087 | 0 |
| 6 | Monthly count of beneficiaries in long term arrears | Among enrolled individuals who owe premiums, number of beneficiaries who have not paid a premium in over three months. This includes individuals with income between 50-100% FPL who would have been disenrolled for non-payment of premiums if their income had been greater than 100% FPL | 387 | 0 | 387 | 0 | 0 | 0 |
| 7 | Monthly count of beneficiaries with collectible debt | Among enrolled individuals who owe premium payments, number of beneficiaries who have collectible debt | 3356 | 0 | 2705 | 0 | 651 | 0 |

| Mid-year change in circumstance in household composition or income | | | | | | | | |
|--|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
| 8 | Monthly count of beneficiaries who gave notice of mid-year change in circumstance in household or income information | Number of enrolled beneficiaries who notified the state of a mid-year change in circumstance and the change was effective during the reporting month | 7009 | 4460 | 1100 | 286 | 968 | 193 |
| 9 | No premium change following mid-year update of household or income information | Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced no change in their premium requirement during the reporting month | 6125 | 4455 | 667 | 286 | 522 | 193 |
| 10 | Premium increase following mid-year update of household or income information | Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced an increase in their premium requirement during the reporting month [†] | 655 | 1 | 249 | 0 | 405 | 0 |
| 11 | Premium decrease following mid-year update of household or income information | Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced a decrease in their premium requirement during the reporting month [†] | 229 | 4 | 184 | 0 | 41 | 0 |

[†] These measures display the FPL bucket to which the individual moved after their premium increased or decreased. In future reports, these measures will display in which FPL bucket the individual originated prior to premium change.

| Disenrollments outside annual renewal determinations (by FPL and Demographic Categories) | | | | | | | | |
|--|---|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2669 | 1869 | 181 | 72 | 380 | 167 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 252 | 0 | 0 | 0 | 252 | 0 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 705 | 705 | 0 | 0 | 0 | 0 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1712 | 1164 | 181 | 72 | 128 | 167 |

| # | Measure | Definition | Overall Measure | 19-20YR | 21-34YR | 35-44YR | 45-54YR | 55-64YR | >65YR |
|----|---|--|-----------------|---------|---------|---------|---------|---------|-------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2669 | 184 | 1261 | 535 | 348 | 280 | 61 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 252 | 19 | 148 | 42 | 24 | 19 | 0 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 705 | 50 | 334 | 131 | 103 | 87 | 0 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1712 | 115 | 779 | 362 | 221 | 174 | 61 |

| # | Measure | Definition | Overall Measure | Native American/ Alaskan Native | Asian | White | Pacific Islander | Black | Unspecified Race |
|----|---|--|-----------------|------------------------------------|-------|-------|------------------|-------|---------------------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2669 | 334 | 8 | 1883 | 7 | 34 | 403 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 252 | 0 | 0 | 209 | 0 | 3 | 40 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 705 | 84 | 1 | 468 | 2 | 12 | 138 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1712 | 250 | 7 | 1206 | 5 | 19 | 225 |

| # | Measure | Definition | Overall Measure | Hispanic/Latino | Non-Hispanic/Latino | Unspecified Ethnicity |
|----|---|--|-----------------|-----------------|---------------------|-----------------------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2669 | 73 | 1927 | 669 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 252 | 4 | 180 | 68 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 705 | 18 | 441 | 246 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1712 | 51 | 1306 | 355 |

| # | Measure | Definition | Overall Measure | Female | Male |
|----|---|--|-----------------|--------|------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2669 | 1353 | 1316 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 252 | 137 | 115 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 705 | 336 | 369 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1712 | 880 | 832 |

Cost sharing limit

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|--|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 16 | Monthly count of beneficiaries who have exceeded 2% co-pay credit but not reached 5% limit | Count of enrolled individuals who have hit 2% co-pay credit since enrollment and must now make cost sharing payments, but who have not yet reached the 5% cost sharing limit | | | | | | |
| MT aims to submit these measures on the 2017 Q3 report | | | | | | | | |
| 17 | Monthly count of beneficiaries who have hit 5% cost sharing limit | Count of enrolled individuals who have hit 5% limit on cost sharing and premiums since enrollment, and no longer make cost sharing payments | | | | | | |
| MT aims to submit these measures on the 2017 Q3 report | | | | | | | | |

Use of preventive services* (by FPL and demographic categories)

* Measures 18 and 19 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled in November of 2016

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 35113 | 23629 | 4649 | 1688 | 3676 | 1471 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.89 | 0.95 | 0.58 | 1.48 | 0.62 | 1.44 |

| # | Measure | Definition | Overall Measure | 19-20YR | 21-34YR | 35-44YR | 45-54YR | 55-64YR | >65YR |
|----|--|--|-----------------|---------|---------|---------|---------|---------|-------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 35113 | 1648 | 12143 | 7134 | 7220 | 6968 | 0 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.89 | 0.28 | 0.49 | 0.93 | 1.40 | 1.62 | 0 |

| # | Measure | Definition | Overall Measure | Native American/ Alaskan Native | Asian or Pacific Islander | White | Black | Multi-Racial | Unspecified Race |
|----|--|--|-----------------|------------------------------------|---------------------------|-------|-------|--------------|------------------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 35113 | 4423 | 126 | 25445 | 238 | 386 | 4495 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.89 | 0.78 | 0.48 | 0.93 | 0.65 | 1.00 | 0.81 |

| # | Measure | Definition | Overall Measure | Hispanic/Latino | Non-Hispanic/Latino or Unspecified |
|----|--|--|-----------------|-----------------|------------------------------------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 35113 | 875 | 34238 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.89 | 0.71 | 0.90 |

| # | Measure | Definition | Overall Measure | Female | Male |
|----|--|--|-----------------|--------|-------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 35113 | 21632 | 13481 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.89 | 0.99 | 0.78 |

Use of other services**

** Measures 20 through 24 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled in November of 2016

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|------|---|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 20a. | Physician service utilization | PMPM utilization of physician visits for currently enrolled beneficiaries | 0.464 | 0.484 | 0.384 | 0.687 | 0.360 | 0.508 |
| 20b. | Physician or mid-level practitioner utilization | PMPM utilization of physician or mid-level practitioner visits for currently enrolled beneficiaries | 0.644 | 0.664 | 0.556 | 0.938 | 0.527 | 0.707 |
| 21 | Prescription drug use | PMPM prescription fills greater than 28 days for currently enrolled beneficiaries | 0.917 | 0.963 | 0.634 | 1.467 | 0.681 | 1.442 |
| 22 | Emergency department utilization, emergency | PMPM emergency department visits for emergent conditions among currently enrolled beneficiaries (i.e. those not subject to a copayment) | 0.062 | 0.074 | 0.033 | 0.072 | 0.031 | 0.059 |
| 23 | Emergency department utilization, non-emergency | PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment) | 0.000 | 0.000 | 0.000 | 0.000 | 0.000 | 0.000 |
| 24 | Inpatient admissions | PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment) | 0.009 | 0.009 | 0.007 | 0.013 | 0.006 | 0.009 |

Renewal (starting in 2017)

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 25 | Monthly count of beneficiaries due for renewal | Number of beneficiaries due for renewal in the reporting month | 9053 | 7670 | 562 | 224 | 429 | 168 |
| 26 | Number who did not renew | Number of beneficiaries due for renewal in the reporting month who are determined ineligible for the HELP program because they failed to complete or return renewal forms or other required documentation, or who were lost to follow up | 4538 | 4534 | 0 | 3 | 0 | 1 |
| 27 | Number who lost eligibility | Number of beneficiaries due for renewal in the reporting month who respond to renewal notices, but are determined ineligible for the HELP program | 17 | 10 | 0 | 4 | 1 | 2 |
| 28 | No premium change | Number of beneficiaries due for renewal in the reporting month who remain eligible, with no change in premium requirement | 4442 | 3125 | 538 | 217 | 397 | 165 |
| 29 | Premium increase | Number of beneficiaries due for renewal in the reporting month who remain eligible, with an increase in required premium*** | 44 | 0 | 15 | 0 | 29 | 0 |
| 30 | Premium decrease | Number of beneficiaries due for renewal in the reporting month who remain eligible, with a decrease required premium*** | 12 | 1 | 9 | 0 | 2 | 0 |

*** These measures display the FPL bucket to which the individual moved after their premium increased or decreased. In future reports, these measures will display in which FPL bucket the individual originated prior to premium change.

Complaints, grievances, and appeals

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|---|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 31 | Complaints and grievances, Medicaid program | Total number of complaints and grievances filed in the reporting month regarding the HELP program | 0 | - | - | - | - | - |
| 32 | Complaints and grievances, plan administrator | Total number of complaints and grievances filed in the reporting month regarding the plan administrator | 3 | - | - | - | - | - |
| 33 | Complaints and grievances, provider | Total number of complaints and grievances filed in the reporting month regarding a provider | 5 | - | - | - | - | - |
| 34 | Appeals, eligibility | Total number of appeals filed in the reporting month regarding eligibility | 58 | - | - | - | - | - |
| 35 | Appeals, premiums | Total number of appeals filed in the reporting month regarding the size of premium payments | 4 | - | - | - | - | - |
| 36 | Appeals, denial of benefits | Total number of appeals filed in the reporting month regarding denials of benefits | 6 | - | - | - | - | - |

Enrollment duration among disenrollees

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--------------------------------|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 37 | Enrollment duration 0-3 months | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 3 or fewer months at the time of disenrollment | 226 | 197 | 2 | 4 | 13 | 10 |
| 38 | Enrollment duration 4-6 months | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for between 4 and 6 months at the time of disenrollment | 521 | 389 | 21 | 9 | 70 | 32 |
| 39 | Enrollment duration >6 months | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 6 or more months at the time of disenrollment | 1922 | 1283 | 158 | 59 | 297 | 125 |

Monthly premiums owed at disenrollment

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|---|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 40 | Amount of monthly premium at time of disenrollment >\$0 and <\$15 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) whose monthly premium at the time of disenrollment was greater than \$0 but less than \$15 | 39 | | 38 | | 1 | |
| 41 | Amount of monthly premium at time of disenrollment \$15-<\$30 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$15 or greater, but less than \$30 | 320 | | 108 | | 212 | |
| 42 | Amount of monthly premium at time of disenrollment \$30-<\$50 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$30 or greater, but less than \$50 | 166 | | 32 | | 134 | |
| 43 | Amount of monthly premium at time of disenrollment \$50-<\$75 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$50 or greater, but less than \$75. | 32 | | 3 | | 29 | |
| 44 | Amount of monthly premium at time of disenrollment ≥\$75 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$75 or greater. | 4 | | 0 | | 4 | |

Total debt owed at disenrollment for failure to pay

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 45 | Amount of total debt owed at time of disenrollment for failure to pay: <\$50 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was less than \$50. | 37 | | | | 37 | |
| 46 | Amount of total debt owed at time of disenrollment for failure to pay: ≥\$50 but <\$100 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was greater than or equal to \$50, but less than \$100. | 8 | | | | 8 | |
| 47 | Amount of total debt owed at time of disenrollment for failure to pay: ≥\$100 but <\$150 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was greater than or equal to \$100, but less than \$150. | 105 | | | | 105 | |
| 48 | Amount of total debt owed at time of disenrollment for failure to pay: ≥\$150 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was greater than \$150. | 102 | | | | 102 | |

Quarterly Help Act Measures

2017 Quarter 2 Report

June Data

Enrollment (by FPL and Demographic Categories)

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|---|-----------------------------------|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 82897 | 57504 | 11180 | 3022 | 8655 | 2536 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1397 | 936 | 200 | 38 | 182 | 41 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 2416 | 1634 | 346 | 101 | 251 | 84 |

| # | Measure | Definition | Overall Measure | 19-20YR | 21-34YR | 35-44YR | 45-54YR | 55-64YR | >65YR |
|---|-----------------------------------|--|-----------------|---------|---------|---------|---------|---------|-------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 82897 | 6041 | 34037 | 16812 | 13398 | 12609 | 0 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1396 | 92 | 596 | 292 | 206 | 210 | 0 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 2415 | 424 | 999 | 492 | 310 | 190 | 0 |

| # | Measure | Definition | Overall Measure | Native American/ Alaskan Native | Asian | White | Pacific Islander | Black | Unspecified Race |
|---|-----------------------------------|--|-----------------|------------------------------------|-------|-------|------------------|-------|------------------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 82897 | 12353 | 328 | 57689 | 188 | 704 | 11635 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1397 | 219 | 10 | 857 | 0 | 15 | 296 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 2416 | 451 | 11 | 1703 | 2 | 20 | 229 |

| # | Measure | Definition | Overall Measure | Hispanic/Latino | Non-Hispanic/Latino | Unspecified Ethnicity |
|---|-----------------------------------|--|-----------------|-----------------|---------------------|-----------------------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 82897 | 2212 | 60493 | 20192 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1397 | 38 | 927 | 432 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 2416 | 83 | 2002 | 331 |

| # | Measure | Definition | Overall Measure | Female | Male |
|---|-----------------------------------|--|-----------------|--------|-------|
| 1 | Monthly count of total enrollment | Number of unduplicated individuals enrolled at any time during the month | 82897 | 44741 | 38156 |
| 2 | Monthly count of new enrollees | Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months | 1397 | 644 | 753 |
| 3 | Monthly count of re-enrollments | Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within the prior 3 months | 2416 | 1515 | 901 |

| Premium Payment | | | | | | | | |
|-----------------|--|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
| 4 | Monthly count of beneficiaries who paid a premium during the month | Among enrolled individuals who owe premiums, number of beneficiaries who paid their premium for this month | 10158 | 0 | 5445 | 0 | 4713 | 0 |
| 5 | Monthly count of beneficiaries in the grace period | Among enrolled individuals who owe premiums, number of beneficiaries who did not pay their premium for the month but are not three months past due | 8695 | 0 | 5186 | 0 | 3509 | 0 |
| 6 | Monthly count of beneficiaries in long term arrears | Among enrolled individuals who owe premiums, number of beneficiaries who have not paid a premium in over three months. This includes individuals with income between 50-100% FPL who would have been disenrolled for non-payment of premiums if their income had been greater than 100% FPL | 742 | 0 | 742 | 0 | 0 | 0 |
| 7 | Monthly count of beneficiaries with collectible debt | Among enrolled individuals who owe premium payments, number of beneficiaries who have collectible debt | 4278 | 0 | 3201 | 0 | 1077 | 0 |

| Mid-year change in circumstance in household composition or income | | | | | | | | |
|--|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
| 8 | Monthly count of beneficiaries who gave notice of mid-year change in circumstance in household or income information | Number of enrolled beneficiaries who notified the state of a mid-year change in circumstance and the change was effective during the reporting month | 5937 | 3744 | 912 | 234 | 871 | 174 |
| 9 | No premium change following mid-year update of household or income information | Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced no change in their premium requirement during the reporting month | 5176 | 3742 | 551 | 234 | 473 | 174 |
| 10 | Premium increase following mid-year update of household or income information | Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced an increase in their premium requirement during the reporting month [†] | 555 | 1 | 197 | 0 | 357 | 0 |
| 11 | Premium decrease following mid-year update of household or income information | Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced a decrease in their premium requirement during the reporting month [†] | 206 | 1 | 164 | 0 | 41 | 0 |

[†] These measures display the FPL bucket to which the individual moved after their premium increased or decreased. In future reports, these measures will display in which FPL bucket the individual originated prior to premium change.

| Disenrollments outside annual renewal determinations (by FPL and Demographic Categories) | | | | | | | | |
|--|---|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2564 | 1966 | 183 | 73 | 213 | 129 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 99 | 0 | 0 | 0 | 99 | 0 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 721 | 721 | 0 | 0 | 0 | 0 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1744 | 1245 | 183 | 73 | 114 | 129 |

| # | Measure | Definition | Overall Measure | 19-20YR | 21-34YR | 35-44YR | 45-54YR | 55-64YR | >65YR |
|----|---|--|-----------------|---------|---------|---------|---------|---------|-------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2564 | 184 | 1271 | 448 | 338 | 264 | 58 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 99 | 6 | 55 | 18 | 14 | 6 | 0 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 721 | 45 | 368 | 101 | 114 | 93 | 0 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1744 | 133 | 848 | 329 | 210 | 165 | 58 |

| # | Measure | Definition | Overall Measure | Native American/ Alaskan Native | Asian | White | Pacific Islander | Black | Unspecified Race |
|----|---|--|-----------------|------------------------------------|-------|-------|------------------|-------|---------------------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2564 | 328 | 8 | 1794 | 4 | 29 | 401 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 99 | 0 | 0 | 83 | 1 | 2 | 13 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 721 | 88 | 1 | 489 | 0 | 13 | 130 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1744 | 240 | 7 | 1222 | 3 | 14 | 258 |

| # | Measure | Definition | Overall Measure | Hispanic/Latino | Non-Hispanic/Latino | Unspecified Ethnicity |
|----|---|--|-----------------|-----------------|---------------------|-----------------------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2564 | 95 | 1774 | 695 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 99 | 5 | 77 | 17 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 721 | 31 | 440 | 250 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1744 | 59 | 1257 | 428 |

| # | Measure | Definition | Overall Measure | Female | Male |
|----|---|--|-----------------|--------|------|
| 12 | Monthly count of total disenrollment | Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month) | 2564 | 1323 | 1241 |
| 13 | Monthly count of disenrollment, failure to pay | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for failure to pay premiums | 99 | 51 | 48 |
| 14 | Monthly count of disenrollment, continuous eligibility exceptions | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals | 721 | 330 | 391 |
| 15 | Monthly count of disenrollment, other | Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) for any reason other than failure to pay premiums or a specific continuous eligibility exception | 1744 | 942 | 802 |

Cost sharing limit

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--|--|--|-----------|-----------------------|------------------------|---------------------|----------------------|
| 16 | Monthly count of beneficiaries who have exceeded 2% co-pay credit but not reached 5% limit | Count of enrolled individuals who have hit 2% co-pay credit since enrollment and must now make cost sharing payments, but who have not yet reached the 5% cost sharing limit | | | | | | |
| | | | MT aims to submit these measures on the 2017 Q3 report | | | | | |
| 17 | Monthly count of beneficiaries who have hit 5% cost sharing limit | Count of enrolled individuals who have hit 5% limit on cost sharing and premiums since enrollment, and no longer make cost sharing payments | | | | | | |
| | | | MT aims to submit these measures on the 2017 Q3 report | | | | | |

Use of preventive services* (by FPL and demographic categories)

* Measures 18 and 19 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled in December of 2016

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 36516 | 24824 | 4689 | 1732 | 3733 | 1538 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.87 | 0.92 | 0.56 | 1.41 | 0.58 | 1.44 |

| # | Measure | Definition | Overall Measure | 19-20YR | 21-34YR | 35-44YR | 45-54YR | 55-64YR | >65YR |
|----|--|--|-----------------|---------|---------|---------|---------|---------|-------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 36516 | 1687 | 12740 | 7489 | 7439 | 7161 | 0 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.87 | 0.28 | 0.47 | 0.92 | 1.37 | 1.56 | 0 |

| # | Measure | Definition | Overall Measure | Native American/ Alaskan Native | Asian or Pacific Islander | White | Black | Multi-Racial | Unspecified Race |
|----|--|--|-----------------|------------------------------------|---------------------------|-------|-------|--------------|------------------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 36516 | 4724 | 133 | 26367 | 244 | 398 | 4650 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.87 | 0.78 | 0.47 | 0.90 | 0.69 | 0.96 | 0.80 |

| # | Measure | Definition | Overall Measure | Hispanic/Latino | Non-Hispanic/Latino or Unspecified |
|----|--|--|-----------------|-----------------|------------------------------------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 36516 | 928 | 35588 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.87 | 0.74 | 0.87 |

| # | Measure | Definition | Overall Measure | Female | Male |
|----|--|--|-----------------|--------|-------|
| 18 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | 36516 | 22531 | 13985 |
| 19 | Monthly count of beneficiaries who have accessed incentivized preventive services, overall | Total number of preventive services provided during the month six months prior to the reporting month, divided by the number of members enrolled during that month | 0.87 | 0.95 | 0.76 |

Use of other services**

*** Measures 20 through 24 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled in December of 2016*

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|------|---|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 20a. | Physician service utilization | PMPM utilization of physician visits for currently enrolled beneficiaries | 0.444 | 0.470 | 0.360 | 0.642 | 0.329 | 0.499 |
| 20b. | Physician or mid-level practitioner utilization | PMPM utilization of physician or mid-level practitioner visits for currently enrolled beneficiaries | 0.614 | 0.639 | 0.523 | 0.860 | 0.483 | 0.688 |
| 21 | Prescription drug use | PMPM prescription fills greater than 28 days for currently enrolled beneficiaries | 0.900 | 0.946 | 0.634 | 1.380 | 0.656 | 1.456 |
| 22 | Emergency department utilization, emergency | PMPM emergency department visits for emergent conditions among currently enrolled beneficiaries (i.e. those not subject to a copayment) | 0.061 | 0.072 | 0.034 | 0.084 | 0.028 | 0.064 |
| 23 | Emergency department utilization, non-emergency | PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment) | 0.000 | 0.000 | 0.000 | 0.000 | 0.000 | 0.000 |
| 24 | Inpatient admissions | PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment) | 0.010 | 0.011 | 0.005 | 0.019 | 0.005 | 0.014 |

Renewal (starting in 2017)

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 25 | Monthly count of beneficiaries due for renewal | Number of beneficiaries due for renewal in the reporting month | 8163 | 7027 | 457 | 178 | 373 | 128 |
| 26 | Number who did not renew | Number of beneficiaries due for renewal in the reporting month who are determined ineligible for the HELP program because they failed to complete or return renewal forms or other required documentation, or who were lost to follow up | 4087 | 4081 | 3 | 1 | 0 | 2 |
| 27 | Number who lost eligibility | Number of beneficiaries due for renewal in the reporting month who respond to renewal notices, but are determined ineligible for the HELP program | 8 | 6 | 0 | 0 | 0 | 2 |
| 28 | No premium change | Number of beneficiaries due for renewal in the reporting month who remain eligible, with no change in premium requirement | 4045 | 2937 | 440 | 177 | 367 | 124 |
| 29 | Premium increase | Number of beneficiaries due for renewal in the reporting month who remain eligible, with an increase in required premium*** | 14 | 0 | 10 | 0 | 4 | 0 |
| 30 | Premium decrease | Number of beneficiaries due for renewal in the reporting month who remain eligible, with a decrease required premium*** | 9 | 3 | 4 | 0 | 2 | 0 |

*** These measures display the FPL bucket to which the individual moved after their premium increased or decreased. In future reports, these measures will display in which FPL bucket the individual originated prior to premium change.

Complaints, grievances, and appeals

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|---|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 31 | Complaints and grievances, Medicaid program | Total number of complaints and grievances filed in the reporting month regarding the HELP program | 0 | - | - | - | - | - |
| 32 | Complaints and grievances, plan administrator | Total number of complaints and grievances filed in the reporting month regarding the plan administrator | 0 | - | - | - | - | - |
| 33 | Complaints and grievances, provider | Total number of complaints and grievances filed in the reporting month regarding a provider | 2 | - | - | - | - | - |
| 34 | Appeals, eligibility | Total number of appeals filed in the reporting month regarding eligibility | 76 | - | - | - | - | - |
| 35 | Appeals, premiums | Total number of appeals filed in the reporting month regarding the size of premium payments | 2 | - | - | - | - | - |
| 36 | Appeals, denial of benefits | Total number of appeals filed in the reporting month regarding denials of benefits | 15 | - | - | - | - | - |

Enrollment duration among disenrollees

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--------------------------------|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 37 | Enrollment duration 0-3 months | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 3 or fewer months at the time of disenrollment | 216 | 196 | 2 | 4 | 5 | 9 |
| 38 | Enrollment duration 4-6 months | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for between 4 and 6 months at the time of disenrollment | 519 | 379 | 30 | 21 | 63 | 26 |
| 39 | Enrollment duration >6 months | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 6 or more months at the time of disenrollment | 1829 | 1391 | 151 | 48 | 145 | 94 |

Monthly premiums owed at disenrollment

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|---|---|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 40 | Amount of monthly premium at time of disenrollment >\$0 and <\$15 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) whose monthly premium at the time of disenrollment was greater than \$0 but less than \$15 | 41 | | 41 | | 0 | |
| 41 | Amount of monthly premium at time of disenrollment \$15-<\$30 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$15 or greater, but less than \$30 | 227 | | 120 | | 107 | |
| 42 | Amount of monthly premium at time of disenrollment \$30-<\$50 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$30 or greater, but less than \$50 | 100 | | 21 | | 79 | |
| 43 | Amount of monthly premium at time of disenrollment \$50-<\$75 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$50 or greater, but less than \$75. | 25 | | 0 | | 25 | |
| 44 | Amount of monthly premium at time of disenrollment ≥\$75 | Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$75 or greater. | 3 | | 1 | | 2 | |

Total debt owed at disenrollment for failure to pay

| # | Measure | Definition | Overall Measure | < 50% FPL | 50-100% FPL w/premium | 50-100% FPL no premium | >100% FPL w/premium | >100% FPL no premium |
|----|--|--|-----------------|-----------|-----------------------|------------------------|---------------------|----------------------|
| 45 | Amount of total debt owed at time of disenrollment for failure to pay: <\$50 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was less than \$50. | 7 | | | | 7 | |
| 46 | Amount of total debt owed at time of disenrollment for failure to pay: ≥\$50 but <\$100 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was greater than or equal to \$50, but less than \$100. | 7 | | | | 7 | |
| 47 | Amount of total debt owed at time of disenrollment for failure to pay: ≥\$100 but <\$150 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was greater than or equal to \$100, but less than \$150. | 36 | | | | 36 | |
| 48 | Amount of total debt owed at time of disenrollment for failure to pay: ≥\$150 | Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was greater than \$150. | 49 | | | | 49 | |