# 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: 1 (01/01/17 – 03/31/2017)

Demonstration Year: 2 (01/01/17 – 12/31/17)

Date submitted to CMS: May 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**

2017 Montana Legislature

Montana's Department of Public Health and Human Services (DPHHS) provided a Medicaid Expansion report to the Montana Legislature in January, 2017, which included:

- 71,002 participants enrolled,
- 284 million dollars in health care services to Montanans,
- 2.7 million dollars in premiums collected, and
- 3,024 disenrolled for nonpayment of premiums.

#### Participant and Provider Education

DPHHS worked with the TPA to create education materials 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.

New materials created and implemented during this quarter include:

Quarterly Participant Wellness Newsletter:

Information regarding getting and staying healthy with topics including: smoking cessation; Hepatitis C; diabetes services and education; and participant care coordination programs.

Updates to the online participant portal:

- Viewing pending claims;
- Easier access to premium and billing information; and
- Access to participant Explanation of Benefits (EOBs).

#### **Evaluation Activities**

State Evaluation

No updates occurred in the first quarter of 2017.

#### Federal Evaluation

Montana was presented with the Urban Institute and Social & Scientific Systems (SSS), Inc.'s federal evaluation design and timeline in December 2016, and has since given extensive 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 June 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 has grown to 78,548 as of March 31, 2017.

# New Benefit Coverage

Montana is currently in the process of adding a contact lenses benefit for participants with covered diagnoses whose vision cannot be effectively corrected with glasses. This benefit will be retroactively effective as of January 1, 2017.

## **Oversight and Monitoring**

TPA Oversight

The annual on-site visit of the TPA was performed by DPHHS staff in February 2017. The visit included: claims processing demonstration, call center overview and actual calls, review of 2016 operational changes, overview of data collection process, appeal process, wellness overview, and provider and participant education overview.

#### **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	Annually
	functions of TPA	
In-Person Meetings with TPA	Discuss agenda items and TPA	Monthly
	task list	
Waiver Compliance Tables	Includes both section 1115 and	Quarterly
	1915(b)(4) waiver requirements	
	– the TPA must demonstrate	
	compliance with all	
	requirements	
Numbered Letters	Official correspondence to the	As needed
	TPA	
Incident Reports	Description of inaccurate or non-	Within two business days of
	compliant IT items, the TPA must	occurrence
	provide details of the item,	
	resolution, and timeline	

Deliverables	IT, policy, participant and	Ongoing
	provider education and	
	correspondence, and materials.	
TPA Reporting Requirements	TPA reports provided to the	Weekly, Monthly, Quarterly,
	state to monitor premiums,	Annually
	claims, utilization, wellness	
	programs, and other aspects of	
	the programs	

# **Post Award Forum**

No post award forums were held during this quarter. The next forum is scheduled for June 20, 2017.

# **<u>Demonstration Waiver Deliverable Timeline</u>**

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

# **APPENDIX A**

# **Montana HELP Program**

# 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				
Draft Interim Report	6/30/2018				
Final Interim Evaluation Report	60 days after CMS comment				
Draft Final Evaluation Submission	4/30/2016				
Final Evaluation Report	60 days after CMS comment				
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				

# MT HELP Program 1115 Waiver Quarterly Measures 2017 Quarter 1 Report January 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			
	Monthly count of total	Number of unduplicated individuals enrolled at any			.,	,		,			
	1 enrollment	time during the month	75014	50265	10583	2850	8657	2659			
		Number of individuals who began a new enrollment									
		spell this month who have not had Medicaid									
	2 Monthly count of new enrollees	coverage within prior 3 months	3536	2206	591	78	564	97			
		Number of individuals who began a new enrollment									
	Monthly count of re-	spell this month who have had Medicaid coverage									
	3 enrollments	within the prior 3 months	10412	7044	1361	570	975	462			

#	Measure	Definition	Overall Measure	19-20YR	21-34YR	35-44YR	45-54YR	55-64YR	>65YR
	Monthly count of total	Number of unduplicated individuals enrolled at any							
	1 enrollment	time during the month	75014	5671	30766	14569	12435	11573	0
		Number of individuals who began a new enrollment							
		spell this month who have not had Medicaid							
	2 Monthly count of new enrollees	coverage within prior 3 months	3536	212	1673	617	536	498	0
		Number of individuals who began a new enrollment							
	Monthly count of re-	spell this month who have had Medicaid coverage							
	3 enrollments	within the prior 3 months	10412	941	4466	2542	1496	967	0

				Native American/					Unspecified
#	Measure	Definition	Overall Measure	Alaskan Native	Asian	White	Pacific Islander	Black	Race
	Monthly count of total	Number of unduplicated individuals enrolled at any							
	l enrollment	time during the month	75014	10286	282	53028	178	609	10631
		Number of individuals who began a new enrollment							
		spell this month who have not had Medicaid							
- 2	Monthly count of new enrollees	coverage within prior 3 months	3536	421	23	2395	9	48	640
		Number of individuals who began a new enrollment							
	Monthly count of re-	spell this month who have had Medicaid coverage							
3	enrollments	within the prior 3 months	10412	1591	38	7803	30	77	873

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non-Hispanic/Latino	Unspecified Ethnicity
	Monthly count of total	Number of unduplicated individuals enrolled at any				
1	enrollment	time during the month	75014	1956	53734	19324
		Number of individuals who began a new enrollment				
		spell this month who have not had Medicaid				
2	Monthly count of new enrollees	coverage within prior 3 months	3536	95	2293	1148
		Number of individuals who began a new enrollment				
	Monthly count of re-	spell this month who have had Medicaid coverage				
3	enrollments	within the prior 3 months	10412	314	8946	1152

#	Measure	Definition	Overall Measure	Female	Male
	Monthly count of total	Number of unduplicated individuals enrolled at any			
1	enrollment	time during the month		40598	34416
		Number of individuals who began a new enrollment			
		spell this month who have not had Medicaid			
2	Monthly count of new enrollees	coverage within prior 3 months	3536	1610	1926
		Number of individuals who began a new enrollment			
	Monthly count of re-	spell this month who have had Medicaid coverage			
3	enrollments	Ilments within the prior 3 months		6751	3661

				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	
	Monthly count of beneficiaries	Among enrolled individuals who owe premiums,							
	who paid a premium during the	number of beneficiaries who paid their premium for							
	1 month	this month	To be reported in phase 2 - End of Q2 2017						
		Among enrolled individuals who owe premiums,							
		number of beneficiaries who did not pay their							
	Monthly count of beneficiaries	premium for the month but are not three months							
	in the grace period	past due			To be reporte	ed in phase 2 - End of Q2 2017	•		
		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							
	Monthly count of beneficiaries	premiums if their income had been greater than							
	in long term arrears	100% FPL			To be reporte	ed in phase 2 - End of Q2 2017	•		
		Among enrolled individuals who owe premium		•			•		
	Monthly count of beneficiaries	payments, number of beneficiaries who have							
	with collectible debt	collectible debt			To be reporte	ed in phase 2 - End of Q2 2017	·		

		Mid-y	ear change in circu	mstance in househo	ld 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
	Monthly count of beneficiaries							
	who gave notice of mid-year							
	change in circumstance in	Number of enrolled beneficiaries who notified the						
	household or income	state of a mid-year change in circumstance and the						
	8 information	change was effective during the reporting month	2479	1558	380	112	358	71
		Number of beneficiaries who notified the state of a						
	No premium change following	mid-year change in circumstance and experienced						
	mid-year update of household	no change in their premium requirement during the						
	or income information	reporting month	2186	1556	234	112	213	71
		Number of beneficiaries who notified the state of a						
	Premium increase following	mid-year change in circumstance and experienced						
	mid-year update of household	an increase in their premium requirement during						
1	or income information	the reporting month <sup>y</sup>	203	0	79	0	124	0
		Number of beneficiaries who notified the state of a						
	Premium decrease following	mid-year change in circumstance and experienced a						
	mid-year update of household	decrease in their premium requirement during the						
1	1 or income information	reporting month <sup>y</sup>	90	2	67	0	21	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 of	outside annual rene	wal determinations	(by FPL and Demographic Ca	tegories)		
#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
		Number of beneficiaries disenrolled from the HELP						
		program mid-year in the reporting month (exclude						
	Monthly count of total	beneficiaries who disenrolled during their renewal						
12	2 disenrollment	month)	2386	1794	119	51	295	127
		Number of beneficiaries disenrolled mid-year in the						
	Monthly count of	reporting month (not their renewal month) for						
13	disenrollment, failure to pay	failure to pay premiums	216	-	-	-	216	-
		Number of beneficiaries disenrolled mid-year in the						
	Monthly count of	reporting month (not their renewal month) due to						
	disenrollment, continuous	specifically noted continuous eligibility exceptions						
14	4 eligibility exceptions	for individuals	558	558	0	0	0	0
		Number of beneficiaries disenrolled mid-year in the						
		reporting month (not their renewal month) for any						
	Monthly count of	reason other than failure to pay premiums or a						
15	disenrollment, other	specific continuous eligibility exception	1612	1236	119	51	79	127

#	Measure	Definition	Overall Measure	19-20YR	21-34YR	35-44YR	45-54YR	55-64YR	>65YR
		Number of beneficiaries disenrolled from the HELP							
		program mid-year in the reporting month (exclude							
	Monthly count of total	beneficiaries who disenrolled during their renewal							
12	disenrollment	month)	2386	187	1099	416	340	278	66
		Number of beneficiaries disenrolled mid-year in the							
	Monthly count of	reporting month (not their renewal month) for							
13	disenrollment, failure to pay	failure to pay premiums	216	10	128	46	27	5	0
		Number of beneficiaries disenrolled mid-year in the							
	Monthly count of	reporting month (not their renewal month) due to							
	disenrollment, continuous	specifically noted continuous eligibility exceptions							
14	eligibility exceptions	for individuals	558	37	249	94	69	109	0
		Number of beneficiaries disenrolled mid-year in the							
		reporting month (not their renewal month) for any							
	Monthly count of	reason other than failure to pay premiums or a							
15	disenrollment, other	specific continuous eligibility exception	1612	140	722	276	244	164	66

				Native American/					Unspecified
#	Measure	Definition	Overall Measure	Alaskan Native	Asian	White	Pacific Islander	Black	Race
		Number of beneficiaries disenrolled from the HELP							
		program mid-year in the reporting month (exclude							
	Monthly count of total	beneficiaries who disenrolled during their renewal							
12	disenrollment	month)	2386	271	11	1740	1	23	340
		Number of beneficiaries disenrolled mid-year in the							
	Monthly count of	reporting month (not their renewal month) for							
13	disenrollment, failure to pay	failure to pay premiums	216	0	1	178	1	2	34
		Number of beneficiaries disenrolled mid-year in the							
	Monthly count of	reporting month (not their renewal month) due to							
	disenrollment, continuous	specifically noted continuous eligibility exceptions							
14	eligibility exceptions	for individuals	558	54	1	401	0	6	96
		Number of beneficiaries disenrolled mid-year in the							
		reporting month (not their renewal month) for any							
	Monthly count of	reason other than failure to pay premiums or a							
15	disenrollment, other	specific continuous eligibility exception	1612	217	9	1161	0	15	210

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non-Hispanic/Latino	Unspecified Ethnicity
		Number of beneficiaries disenrolled from the HELP				
		program mid-year in the reporting month (exclude				
	Monthly count of total	beneficiaries who disenrolled during their renewal				
12	disenrollment	month)	2386	55	1696	635
		Number of beneficiaries disenrolled mid-year in the				
	Monthly count of	reporting month (not their renewal month) for				
13	disenrollment, failure to pay	failure to pay premiums	216	5	148	63
		Number of beneficiaries disenrolled mid-year in the				
	Monthly count of	reporting month (not their renewal month) due to				
	disenrollment, continuous	specifically noted continuous eligibility exceptions				
14	eligibility exceptions	for individuals	558	10	315	233
		Number of beneficiaries disenrolled mid-year in the				
		reporting month (not their renewal month) for any				
	Monthly count of	reason other than failure to pay premiums or a				
15	disenrollment, other	specific continuous eligibility exception	1612	40	1233	339

#	Measure	Definition	Overall Measure	Female	Male
		Number of beneficiaries disenrolled from the HELP			
		program mid-year in the reporting month (exclude			
	Monthly count of total	beneficiaries who disenrolled during their renewal			
12	disenrollment	month)	2386	1257	1129
		Number of beneficiaries disenrolled mid-year in the			
	Monthly count of	reporting month (not their renewal month) for			
13	disenrollment, failure to pay	failure to pay premiums	216	110	106
		Number of beneficiaries disenrolled mid-year in the			
	Monthly count of	reporting month (not their renewal month) due to			
	disenrollment, continuous	specifically noted continuous eligibility exceptions			
14	eligibility exceptions	for individuals	558	285	273
		Number of beneficiaries disenrolled mid-year in the			
		reporting month (not their renewal month) for any			
	Monthly count of	reason other than failure to pay premiums or a			
15	disenrollment, other	specific continuous eligibility exception	1612	862	750

					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
			Count of enrolled individuals who have hit 2% co-						
	Monthly count of	f beneficiaries	pay credit since enrollment and must now make cost						
	who have exceed	led 2% co-pay	sharing payments, but who have not yet reached the						
	16 credit but not rea	ached 5% limit	5% cost sharing limit			To be reporte	d in phase 2 - End of Q2 2017		
	Monthly count of	f beneficiaries	Count of enrolled individuals who have hit 5% limit						
	who have hit 5%	cost sharing	on cost sharing and premiums since enrollment, and						
	17 limit		no longer make cost sharing payments			To be reporte	d in phase 2 - End of Q2 2017		

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

_	The date of the da							
#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
	Monthly count of beneficiaries							
	who have accessed incentivized	Monthly count of beneficiaries who have accessed						
18	preventive services, overall	incentivized preventive services, overall	30302	18612	4196	2345	3496	1653
		Total number of preventive services provided during						
	Monthly count of beneficiaries	the month six months prior to the reporting month,						
	who have accessed incentivized	divided by the number of members enrolled during						
19	preventive services, overall	that month	0.97	1.15	0.59	0.96	0.55	1.13

#	I	Measure	Definition	Overall Measure	19-20YR	21-34YR	35-44YR	45-54YR	55-64YR	>65YR
	ı	Monthly count of beneficiaries								
	,	who have accessed incentivized	Monthly count of beneficiaries who have accessed							
	18	preventive services, overall	incentivized preventive services, overall	30302	1507	10416	6231	6238	5910	0
			Total number of preventive services provided during							
	I	Monthly count of beneficiaries	the month six months prior to the reporting month,							
	,	who have accessed incentivized	divided by the number of members enrolled during							
	19	preventive services, overall	that month	0.97	0.34	0.54	1.01	1.51	1.72	0

			Native American/					Unspecified
#	Measure Definition	Overall Measure	Alaskan Native	Asian or Pacific Islander	White	Black	Multi-Racial	Race
	Monthly count of beneficiaries							
	who have accessed incentivized Monthly coun	t of beneficiaries who have accessed						
	18 preventive services, overall incentivized p	reventive services, overall 30302	3654	119	22179	192	338	3820
	Total number	of preventive services provided during						
	Monthly count of beneficiaries the month six	months prior to the reporting month,						
	who have accessed incentivized divided by the	number of members enrolled during						
	19 preventive services, overall that month	0.97	0.95	0.57	0.99	0.66	1.00	0.90

					Non-Hispanic/Latino or
#	Measure	Definition	Overall Measure	Hispanic/Latino	Unspecified
	Monthly count of beneficiaries				
	who have accessed incentivized	Monthly count of beneficiaries who have accessed			
18	preventive services, overall	incentivized preventive services, overall	30302	774	29528
		Total number of preventive services provided during			
	Monthly count of beneficiaries	the month six months prior to the reporting month,			
	who have accessed incentivized	divided by the number of members enrolled during			
19	preventive services, overall	that month	0.97	0.77	0.97

#	Measure	Definition	Overall Measure	Female	Male
	Monthly count of beneficiaries				
	who have accessed incentivized	Monthly count of beneficiaries who have accessed			
18	preventive services, overall	incentivized preventive services, overall	30302	18477	11825
		Total number of preventive services provided during			
	Monthly count of beneficiaries	the month six months prior to the reporting month,			
	who have accessed incentivized	divided by the number of members enrolled during			
19	preventive services, overall	that month	0.97	1.08	0.83

#### Use of other services\*\*

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
		PMPM utilization of physician visits for currently						
20a.	Physician service utilization	enrolled beneficiaries	0.41	0.45	0.32	0.40	0.30	0.35
	Physician or mid-level practitioner utilization	PMPM utilization of physician or mid-level practitioner visits for currently enrolled beneficiaries	0.56	0.62	0.46	0.54	0.45	0.47
200.	practitioner utilization	PMPM prescription fills greater than 28 days for	0.50	0.02	0.40	0.54	0.43	0.47
21	Prescription drug use	currently enrolled beneficiaries	0.87	1.00	0.61	0.84	0.57	1.00
	Emergency department utilization, emergency	PMPM emergency department visits for emergent conditions among currently enrolled beneficiaries (i.e. those not subject to a copayment)	0.071	0.092	0.035	0.056	0.035	0.048
	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
		PMPM emergency department visits for non- emergent conditions among currently enrolled						
24	Inpatient admissions	beneficiaries (i.e. those subject to a copayment)	0.012	0.015	0.005	0.013	0.004	0.013

	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			
	Monthly count of beneficiaries	Number of beneficiaries due for renewal in the	6505	F.446	140	100	400	450			
25	due for renewal	reporting month	6595	5416	440	180	409	150			
		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									
26	Number who did not renew	documentation, or who were lost to follow up	2999	2988	0	3	3	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	206	105	7	35	22	37			
		Number of beneficiaries due for renewal in the reporting month who remain eligible, with no			400						
28	No premium change	Ŭ i i	3330	2320	409	142	353	106			
29	Premium increase	Number of beneficiaries due for renewal in the reporting month who remain eligible, with an increase in required premium***	40	0	16	0	24	0			
		Number of beneficiaries due for renewal in the reporting month who remain eligible, with a decrease required premium***	20	2	9	0	7				

<sup>\*\*\*</sup> 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.

			Compla	ints, grievances, and	l 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
	Complaints and grievances,	Total number of complaints and grievances filed in						
31	Medicaid program	the reporting month regarding the HELP program	0	-	-	-	-	-
		Total number of complaints and grievances filed in						
	Complaints and grievances,	the reporting month regarding the plan						
32	plan administrator	administrator	0	-	-	-	-	-
	Complaints and grievances,	Total number of complaints and grievances filed in						
33	provider	the reporting month regarding a provider	2	-	=	-	-	=
		Total number of appeals filed in the reporting month						
34	Appeals, eligibility	regarding eligibility	60	-	-	-	-	-
		Total number of appeals filed in the reporting month						
35	Appeals, premiums	regarding the size of premium payments	1	-	-	-	-	-
		Total number of appeals filed in the reporting month						
36	Appeals, denial of benefits	regarding denials of benefits	57	-	-	-	-	-

			Enrollmer	nt duration among di	senrollees			
#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12)						
	Enrollment duration 0-3	who had been enrolled in the demonstration for 3 or						
37	months	fewer months at the time of disenrollment	350	323	3	4	5	15
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12)						
		who had been enrolled in the demonstration for						
	Enrollment duration 4-6	between 4 and 6 months at the time of						
38	months	disenrollment	398	343	12	8	22	13
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12)						
		who had been enrolled in the demonstration for 6 or						
39	Enrollment duration >6 months	more months at the time of disenrollment	1638	1128	104	39	268	99

			Monthly <sub>I</sub>	premiums owed a	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
		Number of beneficiaries disenrolled from the						
	Amount of monthly premium at	demonstration in the reporting month (measure 12)						
	time of disenrollment >\$0 and	whose monthly premium at the time of						
40	<\$15	disenrollment was greater than \$0 but less than \$15			To be reporte	ed in phase 2 - End of Q2 2017	7	
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12),						
		whose monthly premium at the time of						
41		disenrollment was \$15 or greater, but less than \$30			To be reporte	ed in phase 2 - End of Q2 2017	7	
					•			
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12),						
	Amount of monthly premium at	whose monthly premium at the time of						
42	time of disenrollment \$30-<\$50	disenrollment was \$30 or greater, but less than \$50			To be reporte	ed in phase 2 - End of Q2 2017	7	
1		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12),						
		whose monthly premium at the time of						
43		disenrollment was \$50 or greater, but less than \$75.			To be reporte	ed in phase 2 - End of Q2 2017	7	
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12),						
	Amount of monthly premium at	whose monthly premium at the time of						
44	time of disenrollment ≥\$75	disenrollment was \$75 or greater.			To be reporte	ed in phase 2 - End of Q2 2017	7	

			Total debt ow	ed at disenrollme	nt 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
		Number of beneficiaries disenrolled from the						
	Amount of total debt owed at	demonstration in the reporting month for failure to						
	time of disenrollment for	pay (measure 13), whose total debt owed at the						
45	failure to pay: <\$50	time of disenrollment was less than \$50.			To be reporte	ed in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month for failure to						
	Amount of total debt owed at	pay (measure 13), whose total debt owed at the						
	time of disenrollment for	time of disenrollment was greater than or equal to						
46	failure to pay: ≥\$50 but <\$100	\$50, but less than \$100.			To be reporte	ed in phase 2 - End of Q2 2017	1	
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month for failure to						
	Amount of total debt owed at	pay (measure 13), whose total debt owed at the						
	time of disenrollment for	time of disenrollment was greater than or equal to						
47	failure to pay: ≥\$100 but <\$150	\$100, but less than \$150.			To be reporte	ed in phase 2 - End of Q2 2017	1	
					·	·		·
		Number of beneficiaries disenrolled from the						
	Amount of total debt owed at	demonstration in the reporting month for failure to						
	time of disenrollment for	pay (measure 13), whose total debt owed at the						
48	failure to pay: ≥\$150	time of disenrollment was greater than \$150.			To be reporte	ed in phase 2 - End of Q2 2017	•	

# MT HELP Program 1115 Waiver Quarterly Measures 2017 Quarter 1 Report February 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	
	Monthly count of total	Number of unduplicated individuals enrolled at							
1	enrollment	any time during the month	76930	51876	10827	2942	8611	2674	
		Number of individuals who began a new							
	Monthly count of new	enrollment spell this month who have not had							
2	enrollees	Medicaid coverage within prior 3 months	1743	1118	272	64	243	46	
		Number of individuals who began a new							
	Monthly count of re-	enrollment spell this month who have had							
3	enrollments	Medicaid coverage within the prior 3 months	10724	7236	1433	588	984	483	

#	Measure	Definition	Overall Measure	19-20YR	21-34YR	35-44YR	45-54YR	55-64YR	>65YR
	Monthly count of total	Number of unduplicated individuals enrolled at							
	1 enrollment	any time during the month	76930	5874	31612	14979	12719	11745	1
		Number of individuals who began a new							
	Monthly count of new	enrollment spell this month who have not had							
	2 enrollees	Medicaid coverage within prior 3 months	1743	110	782	336	284	231	0
		Number of individuals who began a new							
	Monthly count of re-	enrollment spell this month who have had							
	3 enrollments	Medicaid coverage within the prior 3 months	10724	957	4522	2625	1583	1037	0

				Native American/					Unspecified
#	Measure	Definition	Overall Measure	Alaskan Native	Asian	White	Pacific Islander	Black	Race
	Monthly count of total	Number of unduplicated individuals enrolled at							
1	enrollment	any time during the month	76930	10701	291	54238	175	641	10884
		Number of individuals who began a new							
	Monthly count of new	enrollment spell this month who have not had							
2	enrollees	Medicaid coverage within prior 3 months	1743	253	6	1175	2	21	286
		Number of individuals who began a new							
	Monthly count of re-	enrollment spell this month who have had							
3	enrollments	Medicaid coverage within the prior 3 months	10724	1604	37	8067	30	90	896

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non-Hispanic/Latino	Unspecified Ethnicity
	Monthly count of total	Number of unduplicated individuals enrolled at				
1	enrollment	any time during the month	76930	2017	55320	19593
		Number of individuals who began a new				
	Monthly count of new	enrollment spell this month who have not had				
2	enrollees	Medicaid coverage within prior 3 months	1743	53	1262	428
		Number of individuals who began a new				
	Monthly count of re-	enrollment spell this month who have had				
3	enrollments	Medicaid coverage within the prior 3 months	10724	304	9204	1216

#	Measure	Definition	Overall Measure	Female	Male
	Monthly count of total	Number of unduplicated individuals enrolled at			
1	. enrollment	any time during the month	76930	41505	35425
		Number of individuals who began a new			
	Monthly count of new	enrollment spell this month who have not had			
2	enrollees	Medicaid coverage within prior 3 months	1743	731	1012
		Number of individuals who began a new			
	Monthly count of re-	enrollment spell this month who have had			
3	enrollments	Medicaid coverage within the prior 3 months	10724	6885	3839

				Premium P	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
	Monthly count of	Among enrolled individuals who owe		•	•	•	•	•
	4 beneficiaries who paid a	premiums, number of beneficiaries who paid			To be reporte	ed in phase 2 - End of Q2 2017		
	Monthly count of	Among enrolled individuals who owe						
	beneficiaries in the grace	premiums, number of beneficiaries who did						
	5 period	not pay their premium for the month but are			To be reporte	ed in phase 2 - End of Q2 2017		
		Among enrolled individuals who owe						
		premiums, number of beneficiaries who have						
		not paid a premium in over three months. This						
	Monthly count of	includes individuals with income between 50-						
	beneficiaries in long term	100% FPL who would have been disenrolled for						
	6 arrears	non-payment of premiums if their income had			To be reporte	ed in phase 2 - End of Q2 2017		
	Monthly count of	Among enrolled individuals who owe premium		•			•	
	7 beneficiaries with	payments, number of beneficiaries who have			To be reporte	ed in phase 2 - End of Q2 2017		

			Mid-year change in	circumstance in hou	sehold composition or incom	ie		
#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
	Monthly count of	Number of enrolled beneficiaries who notified						
	beneficiaries who gave	the state of a mid-year change in circumstance						
	notice of mid-year change	and the change was effective during the						
8	in circumstance in	reporting month	3462	2185	554	160	472	90
	No premium change	Number of beneficiaries who notified the state						
	following mid-year update	of a mid-year change in circumstance and						
9	of household or income	experienced no change in their premium	3072	2181	352	160	288	90
	Premium increase following	Number of beneficiaries who notified the state						
	mid-year update of	of a mid-year change in circumstance and						
10	household or income	experienced an increase in their premium	274	0	109	0	165	0
	Premium decrease	Number of beneficiaries who notified the state						
	following mid-year update	of a mid-year change in circumstance and						
11	of household or income	experienced a decrease in their premium	116	4	93	0	19	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.

		Disenrollme	ents outside annual	renewal determinat	ions (by FPL and Demographi	c 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
		Number of beneficiaries disenrolled from the						
	Monthly count of total	HELP program mid-year in the reporting month						
1	2 disenrollment	(exclude beneficiaries who disenrolled during	1824	1334	80	29	273	108
	Monthly count of	Number of beneficiaries disenrolled mid-year						
	disenrollment, failure to	in the reporting month (not their renewal						
1	3 pay	month) for failure to pay premiums	184	-	-	-	184	-
		Number of beneficiaries disenrolled mid-year						
	Monthly count of	in the reporting month (not their renewal						
	disenrollment, continuous	month) due to specifically noted continuous						
1	4 eligibility exceptions	eligibility exceptions for individuals	519	519	0	0	0	0
		Number of beneficiaries disenrolled mid-year						
		in the reporting month (not their renewal						
	Monthly count of	month) for any reason other than failure to pay						
1	5 disenrollment, other	premiums or a specific continuous eligibility	1121	815	80	29	89	108

#	Measure	Definition	Overall Measure	19-20YR	21-34YR	35-44YR	45-54YR	55-64YR	>65YR
		Number of beneficiaries disenrolled from the							
	Monthly count of total	HELP program mid-year in the reporting month							
12	disenrollment	(exclude beneficiaries who disenrolled during	1824	151	844	360	197	222	50
	Monthly count of	Number of beneficiaries disenrolled mid-year							
	disenrollment, failure to	in the reporting month (not their renewal							
13	pay	month) for failure to pay premiums	184	11	105	49	13	6	0
		Number of beneficiaries disenrolled mid-year							
	Monthly count of	in the reporting month (not their renewal							
	disenrollment, continuous	month) due to specifically noted continuous							
14	eligibility exceptions	eligibility exceptions for individuals	519	40	251	64	75	89	0
		Number of beneficiaries disenrolled mid-year							
		in the reporting month (not their renewal							
	Monthly count of	month) for any reason other than failure to pay							
15	disenrollment, other	premiums or a specific continuous eligibility	1121	100	488	247	109	127	50

				Native American/					Unspecified
#	Measure	Definition	Overall Measure	Alaskan Native	Asian	White	Pacific Islander	Black	Race
		Number of beneficiaries disenrolled from the							
	Monthly count of total	HELP program mid-year in the reporting month							
17	disenrollment	(exclude beneficiaries who disenrolled during	1824	197	7	1323	7	17	273
	Monthly count of	Number of beneficiaries disenrolled mid-year							
	disenrollment, failure to	in the reporting month (not their renewal							
13	pay	month) for failure to pay premiums	184	0	2	146	2	5	28
		Number of beneficiaries disenrolled mid-year							
	Monthly count of	in the reporting month (not their renewal							
	disenrollment, continuous	month) due to specifically noted continuous							
14	eligibility exceptions	eligibility exceptions for individuals	519	38	3	368	0	3	107
		Number of beneficiaries disenrolled mid-year							
		in the reporting month (not their renewal							
	Monthly count of	month) for any reason other than failure to pay							
15	disenrollment, other	premiums or a specific continuous eligibility	1121	159	2	809	5	9	138

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non-Hispanic/Latino	Unspecified Ethnicity
		Number of beneficiaries disenrolled from the				
	Monthly count of total	HELP program mid-year in the reporting month				
12	disenrollment	(exclude beneficiaries who disenrolled during	1824	55	1296	473
	Monthly count of	Number of beneficiaries disenrolled mid-year				
	disenrollment, failure to	in the reporting month (not their renewal				
13	pay	month) for failure to pay premiums	184	6	138	39
		Number of beneficiaries disenrolled mid-year				
	Monthly count of	in the reporting month (not their renewal				
	disenrollment, continuous	month) due to specifically noted continuous				
14	eligibility exceptions	eligibility exceptions for individuals	519	8	277	234
		Number of beneficiaries disenrolled mid-year				
		in the reporting month (not their renewal				
	Monthly count of	month) for any reason other than failure to pay				
15	disenrollment, other	premiums or a specific continuous eligibility	1121	41	881	200

#	Measure	Definition	Overall Measure	Female	Male
		Number of beneficiaries disenrolled from the			
	Monthly count of total	HELP program mid-year in the reporting month			
12	disenrollment	(exclude beneficiaries who disenrolled during	1824	991	833
	Monthly count of	Number of beneficiaries disenrolled mid-year			
	disenrollment, failure to	in the reporting month (not their renewal			
13	pay	month) for failure to pay premiums	184	107	77
		Number of beneficiaries disenrolled mid-year			
	Monthly count of	in the reporting month (not their renewal			
	disenrollment, continuous	month) due to specifically noted continuous			
14	eligibility exceptions	eligibility exceptions for individuals	519	286	233
		Number of beneficiaries disenrolled mid-year			
		in the reporting month (not their renewal			
	Monthly count of	month) for any reason other than failure to pay			
15	disenrollment, other	premiums or a specific continuous eligibility	1121	598	523

					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
		Monthly count of	Count of enrolled individuals who have hit 2%						
		beneficiaries who have	co-pay credit since enrollment and must now						
		exceeded 2% co-pay credit	make cost sharing payments, but who have not						
	16	but not reached 5% limit	yet reached the 5% cost sharing limit			To be reporte	ed in phase 2 - End of Q2 2017		
		Monthly count of	Count of enrolled individuals who have hit 5%						
		beneficiaries who have hit	limit on cost sharing and premiums since						
	17	5% cost sharing limit	enrollment, and no longer make cost sharing			To be reporte	ed in phase 2 - End of Q2 2017		

## 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 July 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
	Monthly count of	Monthly count of beneficiaries who have						
	beneficiaries who have	accessed incentivized preventive services,						
18	accessed incentivized	overall	32760	20365	4476	2453	3642	1824
	Monthly count of	Total number of preventive services provided						
	beneficiaries who have	during the month six months prior to the						
19	accessed incentivized	reporting month, divided by the number of	1.09	1.28	0.64	1.15	0.66	1.35

#		Measure	Definition	Overall Measure	19-20YR	21-34YR	35-44YR	45-54YR	55-64YR	>65YR
		Monthly count of	Monthly count of beneficiaries who have							
		beneficiaries who have	accessed incentivized preventive services,							
	18	accessed incentivized	overall	32760	1705	11411	6676	6631	6337	0
		Monthly count of	Total number of preventive services provided							
		beneficiaries who have	during the month six months prior to the							
	19	accessed incentivized	reporting month, divided by the number of	1.09	0.38	0.61	1.16	1.71	1.93	0

				Native American/					Unspecified
#	Measure	Definition	Overall Measure	Alaskan Native	Asian or Pacific Islander	White	Black	Multi-Racial	Race
	Monthly count of	Monthly count of beneficiaries who have							
	beneficiaries who have	accessed incentivized preventive services,							
	18 accessed incentivized	overall	32760	4018	129	23893	215	359	4146
	Monthly count of	Total number of preventive services provided							
	beneficiaries who have	during the month six months prior to the							
	19 accessed incentivized	reporting month, divided by the number of	1.09	1.12	0.63	1.11	0.77	1.23	1.02

					Non-Hispanic/Latino or
#	Measure	Definition	Overall Measure	Hispanic/Latino	Unspecified
	Monthly count of Monthly count of beneficiaries who h				
	beneficiaries who have accessed incentivized preventive				
18	accessed incentivized	overall	32760	832	31928
	Monthly count of	Total number of preventive services provided			
	beneficiaries who have during the month six months prior to				
19	19 accessed incentivized reporting month, divided by the number of		1.09	0.88	1.10

#	Measure	Definition	Overall Measure	Female	Male
	Monthly count of	Monthly count of beneficiaries who have			
	beneficiaries who have	accessed incentivized preventive services,			
18	accessed incentivized	overall	32760	19877	12883
	Monthly count of	Total number of preventive services provided			
	beneficiaries who have	during the month six months prior to the			
19	accessed incentivized	reporting month, divided by the number of	1.09	1.23	0.93

				Use of other				
** Meas	sures 20 through 24 incorp	prate a six-month lag to allow for claim submissi	on; these numbers	correlate with me	mbers enrolled in July of 2016			
# M	leasure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
		PMPM utilization of physician visits for						
20a. Ph	hysician service utilization	currently enrolled beneficiaries	0.497	0.568	0.374	0.440	0.349	0.476
Ph	hysician or mid-level	PMPM utilization of physician or mid-level						
20b. pr	ractitioner utilization	practitioner visits for currently enrolled	0.687	0.776	0.530	0.610	0.514	0.644
		PMPM prescription fills greater than 28 days						
21 Pr	rescription drug use	for currently enrolled beneficiaries	0.970	1.095	0.660	1.024	0.666	1.188
		PMPM emergency department visits for						
En	mergency department	emergent conditions among currently enrolled						
22 ut	tilization, emergency	beneficiaries (i.e. those not subject to a	0.071	0.092	0.034	0.056	0.035	0.051
		PMPM emergency department visits for non-						
En	mergency department	emergent conditions among currently enrolled						
23 ut	tilization, non-emergency	beneficiaries (i.e. those subject to a	0.000	0.000	0.000	0.000	0.000	0.000
		PMPM emergency department visits for non-						
		emergent conditions among currently enrolled						
24 In	patient admissions	beneficiaries (i.e. those subject to a	0.013	0.016	0.006	0.015	0.005	0.011

				Renewal (starting	g 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
	Monthly count of	Number of beneficiaries due for renewal in the						
25	beneficiaries due for	reporting month	7008	5682	520	207	441	158
		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						
26	Number who did not renew	required documentation, or who were lost to	2852	2847	1	0	2	2
		Number of beneficiaries due for renewal in the						
		reporting month who respond to renewal						
27	Number who lost eligibility	notices, but are determined ineligible for the	152	81	4	19	15	33
		Number of beneficiaries due for renewal in the						
		reporting month who remain eligible, with no						
28	No premium change	change in premium requirement	3953	2751	496	188	395	123
		Number of beneficiaries due for renewal in the						
		reporting month who remain eligible, with an						
29	Premium increase	increase in required premium***	42	0	16	0	26	0
		Number of beneficiaries due for renewal in the						
		reporting month who remain eligible, with a						
30	Premium decrease	decrease required premium***	9	3	3	0	3	0

<sup>\*\*\*</sup> 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.

			Co	mplaints, grievances	s, 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
	Complaints and grievances,	Total number of complaints and grievances						
3:	Medicaid program	filed in the reporting month regarding the HELP	0	-	-	-	-	-
	Complaints and grievances,	Total number of complaints and grievances						
3	plan administrator	filed in the reporting month regarding the plan	1	-	-	-	-	-
	Complaints and grievances,	Total number of complaints and grievances						
3	provider	filed in the reporting month regarding a	6	-	-	-	-	-
		Total number of appeals filed in the reporting						
3	Appeals, eligibility	month regarding eligibility	47	-	-	-	-	-
		Total number of appeals filed in the reporting						
3.	Appeals, premiums	month regarding the size of premium	4	-	-	-	-	-
		Total number of appeals filed in the reporting						
3	Appeals, denial of benefits	month regarding denials of benefits	69	-	-	-	-	-

		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		
		Number of beneficiaries disenrolled from the								
		demonstration in the reporting month								
	Enrollment duration 0-3	(measure 12) who had been enrolled in the								
3	7 months	demonstration for 3 or fewer months at the	276	245	4	3	6	18		
		Number of beneficiaries disenrolled from the								
		demonstration in the reporting month								
	Enrollment duration 4-6	(measure 12) who had been enrolled in the								
3	8 months	demonstration for between 4 and 6 months at	324	252	9	9	42	12		
		Number of beneficiaries disenrolled from the								
		demonstration in the reporting month								
	Enrollment duration >6	(measure 12) who had been enrolled in the								
3	9 months	demonstration for 6 or more months at the	1224	837	67	17	225	78		

			Mon	thly premiums ow	ed 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
		Number of beneficiaries disenrolled from the						
	Amount of monthly	demonstration in the reporting month						
	premium at time of	(measure 12) whose monthly premium at the						
40	disenrollment >\$0 and <\$15	time of disenrollment was greater than \$0 but			To be reporte	ed in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
	Amount of monthly	demonstration in the reporting month						
	premium at time of	(measure 12), whose monthly premium at the						
41	disenrollment \$15-<\$30	time of disenrollment was \$15 or greater, but			To be reporte	ed in phase 2 - End of Q2 2017	ı	
		Number of beneficiaries disenrolled from the						
	Amount of monthly	demonstration in the reporting month						
	premium at time of	(measure 12), whose monthly premium at the						
42	disenrollment \$30-<\$50	time of disenrollment was \$30 or greater, but			To be reporte	ed in phase 2 - End of Q2 2017	I.	
		Number of beneficiaries disenrolled from the						
	Amount of monthly	demonstration in the reporting month						
	premium at time of	(measure 12), whose monthly premium at the						
43	disenrollment \$50-<\$75	time of disenrollment was \$50 or greater, but			To be reporte	ed in phase 2 - End of Q2 2017	I.	
		Number of beneficiaries disenrolled from the						
	Amount of monthly	demonstration in the reporting month						
	premium at time of	(measure 12), whose monthly premium at the						
44	disenrollment ≥\$75	time of disenrollment was \$75 or greater.			To be reporte	ed in phase 2 - End of Q2 2017		

			Total dek	t owed at disenre	ollment 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
		Number of beneficiaries disenrolled from the		•	•	•	•	
	Amount of total debt owed	demonstration in the reporting month for						
	at time of disenrollment for	failure to pay (measure 13), whose total debt						
45	failure to pay: <\$50	owed at the time of disenrollment was less			To be reporte	d in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
	Amount of total debt owed	demonstration in the reporting month for						
	at time of disenrollment for	failure to pay (measure 13), whose total debt						
	failure to pay: ≥\$50 but	owed at the time of disenrollment was greater						
46	<\$100	than or equal to \$50, but less than \$100.			To be reporte	d in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
	Amount of total debt owed	demonstration in the reporting month for						
	at time of disenrollment for	failure to pay (measure 13), whose total debt						
	failure to pay: ≥\$100 but	owed at the time of disenrollment was greater						
47	<\$150	than or equal to \$100, but less than \$150.			To be reporte	d in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
	Amount of total debt owed	demonstration in the reporting month for						
	at time of disenrollment for	failure to pay (measure 13), whose total debt						
48	failure to pay: ≥\$150	owed at the time of disenrollment was greater			To be reporte	d in phase 2 - End of Q2 2017		

# MT HELP Program 1115 Waiver Quarterly Measures 2017 Quarter 1 Report March Data

Enrollment (by FPL and Demographic Categories)

		Elifolilleli	t (by FPL and Demograp	mic 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	
Monthly count of total	Number of unduplicated individuals enrolled at any							1
1 enrollment	time during the month	78548	53350	11028	2963	8716	2491	
	Number of individuals who began a new enrollment							1
	spell this month who have not had Medicaid coverage							
2 Monthly count of new enrollees	within prior 3 months	2078	1358	319	63	288	50	
	Number of individuals who began a new enrollment							1
Monthly count of re-	spell this month who have had Medicaid coverage							
3 enrollments	within the prior 3 months	11207	7527	1546	610	1046	478	
								_
Measure	Definition	Overall Measure	19-20YR	21-34YR	35-44YR	45-54YR	55-64YR	>65YR
Monthly count of total	Number of unduplicated individuals enrolled at any							
1 enrollment	time during the month	78548	6058	32310	15360	12925	11892	3
	Number of individuals who began a new enrollment							
	spell this month who have not had Medicaid coverage							
2 Monthly count of new enrollees	within prior 3 months	2078	138	926	396	335	283	0
	Number of individuals who began a new enrollment							
Monthly count of re-	spell this month who have had Medicaid coverage							
3 enrollments	within the prior 3 months	11207	984	4702	2743	1651	1127	0
			Native American/					Unspecific
Measure	Definition	Overall Measure	Alaskan Native	Asian	White	Pacific Islander	Black	Race
Monthly count of total	Number of unduplicated individuals enrolled at any							
1 enrollment	time during the month	78548	11103	299	55204	177	666	11099
	Number of individuals who began a new enrollment							
	spell this month who have not had Medicaid coverage							

	#	Measure	Definition	Overall Measure	Alaskan Native	Asian	White	Pacific Islander	Black	Race
		Monthly count of total	Number of unduplicated individuals enrolled at any							
	1	enrollment	time during the month	78548	11103	299	55204	177	666	11099
			Number of individuals who began a new enrollment							
			spell this month who have not had Medicaid coverage							
	2	Monthly count of new enrollees	within prior 3 months	2078	325	7	1369	3	24	350
			Number of individuals who began a new enrollment							
		Monthly count of re-	spell this month who have had Medicaid coverage							
	3	enrollments	within the prior 3 months	11207	1663	38	8443	34	87	942
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	Measure	Definition	Overall Measure	Unspecified Ethnicity	Non-Hispanic/Latino	Hispanic/Latino
	Monthly count of total	Number of unduplicated individuals enrolled at any				
1	enrollment	time during the month	78548	19771	56699	2078
		Number of individuals who began a new enrollment				
		spell this month who have not had Medicaid coverage				
2	Monthly count of new enrollees	within prior 3 months	2078	532	1489	57
		Number of individuals who began a new enrollment				
	Monthly count of re-	spell this month who have had Medicaid coverage				
3	enrollments	within the prior 3 months	11207	1292	9582	333
	2	Monthly count of total  1 enrollment  2 Monthly count of new enrollees  Monthly count of re-	Monthly count of total 1 enrollment 2 Number of unduplicated individuals enrolled at any 1 time during the month 2 Number of individuals who began a new enrollment 1 spell this month who have not had Medicaid coverage 1 within prior 3 months 2 Number of individuals who began a new enrollment 1 spell this month who have had Medicaid coverage 2 Monthly count of re- 1 spell this month who have had Medicaid coverage 1 spell this month who have had Medicaid this mo	Monthly count of total Number of unduplicated individuals enrolled at any time during the month 78548  Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months 2078  Number of individuals who began a new enrollment spell this month who have had Medicaid coverage within prior 3 months 2078  Number of individuals who began a new enrollment spell this month who have had Medicaid coverage	Monthly count of total Number of unduplicated individuals enrolled at any time during the month 78548 19771  Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage 2 Monthly count of new enrollees within prior 3 months 2078 532  Number of individuals who began a new enrollment spell this month who have had Medicaid coverage	Monthly count of total Number of unduplicated individuals enrolled at any time during the month 78548 19771 56699  Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage 2 Monthly count of new enrollees within prior 3 months 2078 532 1489  Number of individuals who began a new enrollment spell this month who have had Medicaid coverage

#	Measure	Definition	Overall Measure	Female	Male
	Monthly count of total	Number of unduplicated individuals enrolled at any			
1	enrollment	time during the month	78548	42308	36240
		Number of individuals who began a new enrollment			
		spell this month who have not had Medicaid coverage			
2	Monthly count of new enrollees	within prior 3 months	2078	932	1146
		Number of individuals who began a new enrollment			
	Monthly count of re-	spell this month who have had Medicaid coverage			
3	enrollments	within the prior 3 months	11207	7143	4064

				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
	Monthly count of beneficiaries	Among enrolled individuals who owe premiums,						
	who paid a premium during the	number of beneficiaries who paid their premium for						
4	month	this month			To be reported	I in phase 2 - End of Q2 2017		
		Among enrolled individuals who owe premiums,						
	Monthly count of beneficiaries	number of beneficiaries who did not pay their						
5	in the grace period	premium for the month but are not three months			To be reported	I in phase 2 - End of Q2 2017		
		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						
	Monthly count of beneficiaries	disenrolled for non-payment of premiums if their						
6	in long term arrears	income had been greater than 100% FPL			To be reported	I in phase 2 - End of Q2 2017		
		Among enrolled individuals who owe premium						
	Monthly count of beneficiaries	payments, number of beneficiaries who have						
7	with collectible debt	collectible debt			To be reported	I in phase 2 - End of Q2 2017		

		Mi	d-year change in ci	rcumstance 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
	Monthly count of beneficiaries							
	who gave notice of mid-year							
	change in circumstance in	Number of enrolled beneficiaries who notified the						
	household or income	state of a mid-year change in circumstance and the						
8	information	change was effective during the reporting month	4843	2975	785	203	751	127
		Number of beneficiaries who notified the state of a						
	No premium change following	mid-year change in circumstance and experienced no						
	mid-year update of household	change in their premium requirement during the						
9	or income information	reporting month	4136	2971	471	203	362	127
		Number of beneficiaries who notified the state of a						
	Premium increase following mid-	mid-year change in circumstance and experienced an						
	year update of household or	increase in their premium requirement during the						
10	income information	reporting month <sup>y</sup>	542	0	181	0	361	0
		Number of beneficiaries who notified the state of a						
	Premium decrease following	mid-year change in circumstance and experienced a						
	mid-year update of household	decrease in their premium requirement during the						
11	or income information	reporting month <sup>y</sup>	165	4	133	0	28	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.

		Disenrollment	ts outside annual re	newal determinations (b	y FPL and Demographic Categ	ories)		
#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
		Number of beneficiaries disenrolled from the HELP						
		program mid-year in the reporting month (exclude						
	Monthly count of total	beneficiaries who disenrolled during their renewal						
12	2 disenrollment	month)	2067	1439	116	55	296	161
		Number of beneficiaries disenrolled mid-year in the						
	Monthly count of	reporting month (not their renewal month) for failure						
13	3 disenrollment, failure to pay	to pay premiums	183	-	-	-	183	-
		Number of beneficiaries disenrolled mid-year in the						
	Monthly count of	reporting month (not their renewal month) due to						
	disenrollment, continuous	specifically noted continuous eligibility exceptions for						
14	4 eligibility exceptions	individuals	494	494	0	0	0	0
		Number of beneficiaries disenrolled mid-year in the						
		reporting month (not their renewal month) for any						
	Monthly count of	reason other than failure to pay premiums or a						
15	5 disenrollment, other	specific continuous eligibility exception	1390	945	116	55	113	161

ŧ	Measure	Definition	Overall Measure	19-20YR	21-34YR	35-44YR	45-54YR	55-64YR	>65YR
		Number of beneficiaries disenrolled from the HELP							
		program mid-year in the reporting month (exclude							
	Monthly count of total	beneficiaries who disenrolled during their renewal							
12	disenrollment	month)	2067	148	933	383	295	240	69
		Number of beneficiaries disenrolled mid-year in the							
	Monthly count of	reporting month (not their renewal month) for failure							
13	disenrollment, failure to pay	to pay premiums	183	7	108	34	20	14	0
		Number of beneficiaries disenrolled mid-year in the							
	Monthly count of	reporting month (not their renewal month) due to							
	disenrollment, continuous	specifically noted continuous eligibility exceptions for							
14	eligibility exceptions	individuals	494	31	221	72	71	99	0
		Number of beneficiaries disenrolled mid-year in the							
		reporting month (not their renewal month) for any							
	Monthly count of	reason other than failure to pay premiums or a							
15	disenrollment, other	specific continuous eligibility exception	1390	109	604	277	204	127	69

				Native American/					Unspecified
#	Measure	Definition	Overall Measure	Alaskan Native	Asian	White	Pacific Islander	Black	Race
		Number of beneficiaries disenrolled from the HELP							
		program mid-year in the reporting month (exclude							
	Monthly count of total	beneficiaries who disenrolled during their renewal							
12	disenrollment	month)	2067	198	8	1558	2	15	281
		Number of beneficiaries disenrolled mid-year in the							
	Monthly count of	reporting month (not their renewal month) for failure							
13	disenrollment, failure to pay	to pay premiums	183	0	1	153	1	1	27
		Number of beneficiaries disenrolled mid-year in the							
	Monthly count of	reporting month (not their renewal month) due to							
	disenrollment, continuous	specifically noted continuous eligibility exceptions for							
14	eligibility exceptions	individuals	494	38	1	356	0	4	93
		Number of beneficiaries disenrolled mid-year in the							
		reporting month (not their renewal month) for any							
	Monthly count of	reason other than failure to pay premiums or a							
15	disenrollment, other	specific continuous eligibility exception	1390	160	6	1049	1	10	161

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non-Hispanic/Latino	Unspecified Ethnicity
		Number of beneficiaries disenrolled from the HELP				
		program mid-year in the reporting month (exclude				
	Monthly count of total	beneficiaries who disenrolled during their renewal				
12	disenrollment	month)	2067	66	1468	528
		Number of beneficiaries disenrolled mid-year in the				
	Monthly count of	reporting month (not their renewal month) for failure				
13	disenrollment, failure to pay	to pay premiums	183	7	136	40
		Number of beneficiaries disenrolled mid-year in the				
	Monthly count of	reporting month (not their renewal month) due to				
	disenrollment, continuous	specifically noted continuous eligibility exceptions for				
14	eligibility exceptions	individuals	494	14	275	203
		Number of beneficiaries disenrolled mid-year in the				
		reporting month (not their renewal month) for any				
	Monthly count of	reason other than failure to pay premiums or a				
15	disenrollment, other	specific continuous eligibility exception	1390	45	1057	285

#	Measure	Definition	Overall Measure	Female	Male
		Number of beneficiaries disenrolled from the HELP			
		program mid-year in the reporting month (exclude			
	Monthly count of total	beneficiaries who disenrolled during their renewal			
12	disenrollment	month)	2067	1109	958
		Number of beneficiaries disenrolled mid-year in the			
	Monthly count of	reporting month (not their renewal month) for failure			
13	disenrollment, failure to pay	to pay premiums	183	92	91
		Number of beneficiaries disenrolled mid-year in the			
	Monthly count of	reporting month (not their renewal month) due to			
	disenrollment, continuous	specifically noted continuous eligibility exceptions for			
14	eligibility exceptions	individuals	494	275	219
		Number of beneficiaries disenrolled mid-year in the			
		reporting month (not their renewal month) for any			
	Monthly count of	reason other than failure to pay premiums or a			
15	disenrollment, other	specific continuous eligibility exception	1390	742	648

	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		
		Count of enrolled individuals who have hit 2% co-pay								
	Monthly count of beneficiaries	credit since enrollment and must now make cost								
	who have exceeded 2% co-pay	sharing payments, but who have not yet reached the								
1	6 credit but not reached 5% limit	5% cost sharing limit			To be reported	in phase 2 - End of Q2 2017				
	Monthly count of beneficiaries	Count of enrolled individuals who have hit 5% limit on								
	who have hit 5% cost sharing	cost sharing and premiums since enrollment, and no								
1	7 limit	longer make cost sharing payments			To be reported	in phase 2 - End of Q2 2017				

\*\* Measures 18 and 19 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled in September 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
	Monthly count of beneficiaries							
	who have accessed incentivized	Monthly count of beneficiaries who have accessed						
18	preventive services, overall	incentivized preventive services, overall	35036	22141	4756	2477	3791	1871
		Total number of preventive services provided during						
	Monthly count of beneficiaries	the month six months prior to the reporting month,						
	who have accessed incentivized	divided by the number of members enrolled during						
19	preventive services, overall	that month	1.06	1.21	0.65	1.18	0.67	1.33

#	Measure	Definition	Overall Measure	19-20YR	21-34YR	35-44YR	45-54YR	55-64YR	>65YR
	Monthly count of beneficiaries								
	who have accessed incentivized	Monthly count of beneficiaries who have accessed							
1	8 preventive services, overall	incentivized preventive services, overall	35036	1844	12329	7102	7060	6701	0
		Total number of preventive services provided during							
	Monthly count of beneficiaries	the month six months prior to the reporting month,							
	who have accessed incentivized	divided by the number of members enrolled during							Ĭ
1	9 preventive services, overall	that month	1.06	0.36	0.61	1.11	1.66	1.84	0

				Native American/					Unspecified
#	Measure	Definition	Overall Measure	Alaskan Native	Asian or Pacific Islander	White	Black	Multi-Racial	Race
	Monthly count of beneficiaries								
	who have accessed incentivized	Monthly count of beneficiaries who have accessed							
1	8 preventive services, overall	incentivized preventive services, overall	35036	4382	140	25426	239	392	4457
		Total number of preventive services provided during							
	Monthly count of beneficiaries	the month six months prior to the reporting month,							
	who have accessed incentivized	divided by the number of members enrolled during							
1	9 preventive services, overall	that month	1.06	1.06	0.59	1.08	0.75	1.18	0.97

#	Measure	Definition	Overall Measure		Non-Hispanic/Latino or Unspecified
	Monthly count of beneficiaries				
	who have accessed incentivized	Monthly count of beneficiaries who have accessed			
18	preventive services, overall	incentivized preventive services, overall	35036	873	34163
		Total number of preventive services provided during			
	Monthly count of beneficiaries	the month six months prior to the reporting month,			
	who have accessed incentivized	divided by the number of members enrolled during			
19	preventive services, overall	that month	1.06	0.85	1.07

#		Measure	Definition	Overall Measure	Female	Male
		Monthly count of beneficiaries				
		who have accessed incentivized	Monthly count of beneficiaries who have accessed			
	18	preventive services, overall	incentivized preventive services, overall	35036	21206	13830
			Total number of preventive services provided during			
		Monthly count of beneficiaries	the month six months prior to the reporting month,			
		who have accessed incentivized	divided by the number of members enrolled during			
	19	preventive services, overall	that month	1.06	1.19	0.90

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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 August 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
		PMPM utilization of physician visits for currently						
20a.	Physician service utilization	enrolled beneficiaries	0.476	0.528	0.376	0.472	0.354	0.447
	Physician or mid-level	PMPM utilization of physician or mid-level						
20b.	practitioner utilization	practitioner visits for currently enrolled beneficiaries	0.657	0.722	0.523	0.636	0.522	0.616
		PMPM prescription fills greater than 28 days for						
21	Prescription drug use	currently enrolled beneficiaries	0.937	1.037	0.662	1.006	0.659	1.183
		PMPM emergency department visits for emergent						
	Emergency department	conditions among currently enrolled beneficiaries (i.e.						
22	utilization, emergency	those not subject to a copayment)	0.067	0.084	0.035	0.061	0.031	0.055
		PMPM emergency department visits for non-						
	Emergency department	emergent conditions among currently enrolled						
23	utilization, non-emergency	beneficiaries (i.e. those subject to a copayment)	0.000	0.000	0.000	0.000	0.000	0.000
		PMPM emergency department visits for non-						
		emergent conditions among currently enrolled						
24	Inpatient admissions	beneficiaries (i.e. those subject to a copayment)	0.011	0.014	0.004	0.017	0.005	0.011

				Renewal (starting in 201	7)			
#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
	Monthly count of beneficiaries	Number of beneficiaries due for renewal in the						
25	due for renewal	reporting month	6909	5443	599	252	445	170
		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						
26	Number who did not renew	documentation, or who were lost to follow up	2347	2339	1	2	2	3
		Number of beneficiaries due for renewal in the						
		reporting month who respond to renewal notices, but						
27	Number who lost eligibility	are determined ineligible for the HELP program	185	84	9	40	14	38
		Number of beneficiaries due for renewal in the						
		reporting month who remain eligible, with no change						
28	No premium change	in premium requirement	4273	3013	544	210	377	129
		Number of beneficiaries due for renewal in the						
		reporting month who remain eligible, with an increase						
29	Premium increase	in required premium***	72	0	26	0	46	0
		Number of beneficiaries due for renewal in the						
		reporting month who remain eligible, with a decrease						
30	Premium decrease	required premium***	32	7	19	0	6	0

<sup>\*\*\*</sup> 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
	Complaints and grievances,	Total number of complaints and grievances filed in the						
3	Medicaid program	reporting month regarding the HELP program	0	=	-	-	-	-
	Complaints and grievances, plan	Total number of complaints and grievances filed in the						
3	32 administrator	reporting month regarding the plan administrator	0	-	-	-	-	-
	Complaints and grievances,	Total number of complaints and grievances filed in the						
3	33 provider	reporting month regarding a provider	3	-	-	-	-	-
		Total number of appeals filed in the reporting month						
3	34 Appeals, eligibility	regarding eligibility	79	=	-	-	-	-
		Total number of appeals filed in the reporting month						
3	35 Appeals, premiums	regarding the size of premium payments	2	=	-	-	-	-
		Total number of appeals filed in the reporting month						
3	36 Appeals, denial of benefits	regarding denials of benefits	59	-	-	=	-	-

	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
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12)						
		who had been enrolled in the demonstration for 3 or						
37	Enrollment duration 0-3 months	fewer months at the time of disenrollment	199	167	2	6	4	20
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12)						
		who had been enrolled in the demonstration for						
38	Enrollment duration 4-6 months	between 4 and 6 months at the time of disenrollment	423	330	17	10	43	23
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12)						
		who had been enrolled in the demonstration for 6 or						
39	Enrollment duration >6 months	more months at the time of disenrollment	1445	942	97	39	249	118

			Month	ly premiums owed at di	senrollment			
#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
		Number of beneficiaries disenrolled from the						
	Amount of monthly premium at	demonstration in the reporting month (measure 12)						
	time of disenrollment >\$0 and	whose monthly premium at the time of disenrollment						
40	<\$15	was greater than \$0 but less than \$15			To be reported	in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12),						
	Amount of monthly premium at	whose monthly premium at the time of disenrollment						
41	time of disenrollment \$15-<\$30	was \$15 or greater, but less than \$30			To be reported	in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12),						
	Amount of monthly premium at	whose monthly premium at the time of disenrollment						
42	time of disenrollment \$30-<\$50	was \$30 or greater, but less than \$50			To be reported	in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month (measure 12),						
	Amount of monthly premium at	whose monthly premium at the time of disenrollment						
43	time of disenrollment \$50-<\$75	was \$50 or greater, but less than \$75.			To be reported	in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the					•	
		demonstration in the reporting month (measure 12),						
	Amount of monthly premium at	whose monthly premium at the time of disenrollment						
44	time of disenrollment ≥\$75	was \$75 or greater.			To be reported	in phase 2 - End of Q2 2017		

			Total debt of	owed at disenrollment fo	r 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
		Number of beneficiaries disenrolled from the						
	Amount of total debt owed at	demonstration in the reporting month for failure to						
	time of disenrollment for failure	pay (measure 13), whose total debt owed at the time						
45	to pay: <\$50	of disenrollment was less than \$50.			To be reported	in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month for failure to						
	Amount of total debt owed at	pay (measure 13), whose total debt owed at the time						
	time of disenrollment for failure	of disenrollment was greater than or equal to \$50, but						
46	to pay: ≥\$50 but <\$100	less than \$100.			To be reported	in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
		demonstration in the reporting month for failure to						
	Amount of total debt owed at	pay (measure 13), whose total debt owed at the time						
	time of disenrollment for failure	of disenrollment was greater than or equal to \$100,						
47	to pay: ≥\$100 but <\$150	but less than \$150.			To be reported	in phase 2 - End of Q2 2017		
		Number of beneficiaries disenrolled from the						
	Amount of total debt owed at	demonstration in the reporting month for failure to						
	time of disenrollment for failure	pay (measure 13), whose total debt owed at the time						
48	to pay: ≥\$150	of disenrollment was greater than \$150.			To be reported	in phase 2 - End of Q2 2017		