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 (1/1/2018 - 3/31/2018) Demonstration Year: 3 (01/01/18 - 12/31/18) Date submitted to CMS: December 20, 2018

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 the States Alternative Benefit Plan, which is fully aligned with the States Medicaid Plan.

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

Delivery System

In 2017 an amendment to the Section 1115 Montana HELP Program Waiver was submitted and approved by CMS, allowing DPHHS to eliminate the Third Party Administrator (TPA) for the HELP Program. This amendment was implemented January 1, 2018. TPA enrollees in the HELP Program began receiving services approved in the Medicaid State Plan through the State's Fee-for-service system (FFS). Additionally, the premium credit was removed. However, these enrollees continue to be responsible for a monthly premium of two percent of their income and up to three percent of income can be incurred in copayments. Members are not subject to cost share above the maximum five percent income. Blue Cross Blue Shield of Montana (BCBSMT) will continue to be responsible for the claim run out period, which includes claims incurred in 2017 but not processed, through December 31, 2018.

In December, 2017, the Montana Department of Health and Human Services (DPHHS) submitted an amendment to the Medicaid Aligned Alternative Benefit Plan (APB) State Plan to remove any reference to the TPA and confirm alignment of benefits to Standard Medicaid. This request was withdrawn on January 11, 2018, per a phone discussion with CMS, and resubmitted on January 16, 2018. Additionally, DPHHS submitted an amendment to the Cost Share State Plan to remove all reference to the TPA and remove the HELP Plan TPA cost share table. Both amendments were approved on May 3, 2018.

Participant and Provider Education

- Participants:
 - The HELP Plan member webpage was updated on January 15, 2018, to reflect the transition.
 - The Medicaid Newsletter was published to the Medicaid website on February 1, 2018.
 - The Medicaid Member Guide was updated and published on March 7, 2018.
- Providers:
 - The HELP Plan provider webpage was updated on January 15, 2018 to reflect the transition.

Evaluation Activities

Federal Evaluation

No, updates in demonstration year 3, quarter 1.

Challenges

Premium billing: The DPHHS Montana's Program for Automating and Transforming Health Care (MPATH) team was selected to develop a Request for Proposal (RFP) and contract for a new premium invoice billing process as BCBSMT would no longer be contractually obligated to process the HELP Program premiums. Certifi was awarded the contract in early fall 2017. The HELP Program team, MPATH, DPHHS fiscal, and BCBSMT worked together to develop and implement a new process. Members received their final premium invoice from BCBSMT in December 2017 with their first invoice coming from Certifi in January 2018. In the beginning of 2018, there was a slight delay between BCBSMT shutting down their premium payment system and Certifi implementing their system. During this period, the Department

offered an interim solution and was able to accept payment via the Montana Medicaid webpage, this did generate a temporary increase in call volume. Certifi was able to accept payment beginning January 4, 2018.

Key Milestones and Accomplishments

Participant Enrollment

Medicaid expansion enrollment grew to 95,221 using enrollment data as of March 31, 2018. *Transition*

The Department was successful in transiting HELP TPA members to the Medicaid State Plan through the State's Fee-for-service system (FFS) effective January 1, 2018.

Oversight and Monitoring

TPA Oversight

Oversight of the TPA will continue through the claim run out period, December 31, 2018. DPHHS staff continues to participate in adhoc meetings with TPA staff to address any outstanding items, such as claim data. In addition, the Department continues to review weekly, monthly, and quarterly reports submitted by the TPA in regards to claims processed during the claim run out period.

Conduent Oversite

The States MPATH team has been designated to monitor the contract between DPHHS and Conduent for the claim processing.

HELP ACT Oversight Committee

The HELP Oversight Committee met on March 8, 2018. DPHHS meets and presents on a quarterly basis with the HELP ACT Oversight Committee to generally review the implementation of the programs established in the HELP ACT. The committee consists of nine voting members, including legislative members, industry experts, a representative of the states auditor's office, and a member of the general public or staff member of the Governor's Office.

Monitoring Tools

Below is a list of monitoring tools used by DPHHS for the TPA, these tools will continue through the claim run out period.

Tool	Description	Frequency
IT Status Meetings with TPA	Address any technical updates and/or outstanding items	Bi-weekly
In-Person Meetings with TPA	Discuss agenda items and TPA task list	As needed
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

Tool	Description	Frequency
TPA Reporting Requirements	TPA reports provided to the	Weekly, Monthly, Quarterly,
	state to monitor claims,	Annually
	utilization, and customer service.	

Post Award Forum

No post award forums were held during this quarter. The next forum will be in Demonstration Year 3, Quarter 2.

Demonstration Waiver Deliverable Timeline

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

Appendix A – 1115 Demonstration Waiver Deliverable Timeline

Quarterly Reports	Submit to CMS	Date Submitted
April 2017 - DY2, Q1	5/31/2017	5/31/2017
Q2	8/31/2017	8/30/2017
Q3	11/30/2017	11/30/2017
April 2018 - DY3, Q1	5/31/2018	12/20/18
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	3/30/2017
2017 - DY2	3/31/2018	8/8/2018
2018 - DY3	3/31/2019	
2019 - DY4	3/31/2020	
2020 - DY5	3/31/2021	
Post Award Forum		
2016 - DY1	7/1/2016	6/15/2016
2017 - DY2	7/1/2017	6/20/2017
2018 - DY3	7/1/2018	
2019 - DY4	7/1/2019	
2020 - DY5	7/1/2020	

Quarterly Reports	Submit to CMS	Date Submitted
Extension Request	7/1/2020	
Demonstration Ends	12/31/2020	

<u>APPENDIX B</u> <u>Montana HELP Program</u> <u>Quarterly Reporting Measures for Quarter 1, 2018 (01/01/2018 – 03/31/2018)</u>

Quarterly HELP Act Measures

Quarter 1 Measures January 2018 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	900,018	64,809	11,229	3,189	8,175	2,703	
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	1,364	863	253	38	180	30	
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	2,455	1,683	346	103	245	79	
#	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	9008	6298	37058	18431	14199	13818	214
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	1364	71	611	259	214	209	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	2455	422	989	526	336	182	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	90018	13903	386	62227	196	774	12532
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	1364	169	3	919	3	14	256
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	2455	434	7	1755	6	29	224

					Non-	Unspecified
#	Measure	Definition	Overall Measure	Hispanic/Latino	Hispanic/Latino	Ethnicity
	Monthly count of	Number of unduplicated individuals				
1	total enrollment	enrolled at any time during the month	90018	2520	65172	22326
	Monthly count of	Number of individuals who began a new				
	new enrollees	enrollment spell this month who have				
		not had Medicaid coverage within prior				
2		3 months	1364	26	934	404
	Monthly count of	Number of individuals who began a new				
	re-enrollments	enrollment spell this month who have				
		had Medicaid coverage within the prior	2455	4.00	2026	227
3		3 months	2455	102	2026	327
						1
#	Measure	Definition	Overall Measure	Female	Male	
#	Measure Monthly count of	Definition Number of unduplicated individuals	Overall Measure	Female	Male	
#			Overall Measure 90018	Female 48514	Male 41504	
	Monthly count of	Number of unduplicated individuals				
	Monthly count of total enrollment	Number of unduplicated individuals enrolled at any time during the month				
	Monthly count of total enrollment Monthly count of	Number of unduplicated individuals enrolled at any time during the month Number of individuals who began a new	90018	48514	41504	
	Monthly count of total enrollment Monthly count of	Number of unduplicated individuals enrolled at any time during the month Number of individuals who began a new enrollment spell this month who have				
1	Monthly count of total enrollment Monthly count of	Number of unduplicated individuals enrolled at any time during the month Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior	90018	48514	41504	
1	Monthly count of total enrollment Monthly count of new enrollees	Number of unduplicated individuals enrolled at any time during the month Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months	90018	48514	41504	
1	Monthly count of total enrollment Monthly count of new enrollees Monthly count of	Number of unduplicated individuals enrolled at any time during the month Number of individuals who began a new enrollment spell this month who have not had Medicaid coverage within prior 3 months Number of individuals who began a new	90018	48514	41504	

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 Among enrolled individuals who owe beneficiaries premiums, number of beneficiaries who					P. 0		P. 0
	who paid a	paid their premium for this month						
4	premium during the month		3852	328	0	1805	0	1720
4	Monthly count of	Among enrolled individuals who owe	5052	520	0	1005	0	1720
	beneficiaries in	premiums, number of beneficiaries who						
	the grace period	did not pay their premium for the month						
		but are not three months past due						
5			12382	14	6852	1	5516	0
	Monthly count of	Among enrolled individuals who owe						
	beneficiaries in	premiums, number of beneficiaries who						
	long term arrears	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						
6		had been greater than 100% FPL	8167	23	5016	3	3117	9
	Monthly count of	Among enrolled individuals who owe						
	beneficiaries	premium payments, number of						
_	with collectible	beneficiaries who have collectible debt	5700	0	1255	1	1447	c
7	debt		5709	0	4255	L	1447	6

					FO 1000/ FDI	50 1000/ FDL ma	>100% FPL	>1000/ EDL ===
#	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	Overall Weasure		w/premium	premum	w/premium	premium
	beneficiaries	notified the state of a mid-year change						
	who gave notice	in circumstance and the change was						
	of mid-year	effective during the reporting month						
	change in	cheetive during the reporting month						
	circumstance in							
	household or							
	income							
8	information		1436	828	236	37	285	50
	No premium	Number of beneficiaries who notified						Ī
	change following	the state of a mid-year change in						
	mid-year update	circumstance and experienced no						
	of household or	change in their premium requirement						
	income	during the reporting month	4040	000	1.40			50
9	information		1212	828	148	37	149	50
	Premium	Number of beneficiaries who notified						
	increase	the state of a mid-year change in						
	following mid-	circumstance and experienced an						
	year update of	increase in their premium requirement						
	household or	during the reporting month ^y						
10	income information							
10	mormation		159	0	48	0	111	0
	Premium	Number of beneficiaries who notified	100					
	decrease	the state of a mid-year change in						
	following mid-	circumstance and experienced a						
	year update of	decrease in their premium requirement						
	household or	during the reporting month ^y						
	income							
11	information		65	0	40	0	25	0

Mid-year change in circumstance in household composition or income

* 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.

Dis-enrollments outside annual renewal determinations (by FPL and Demographic Categories)

		D. C. W.	0	. 50% 501	50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no	
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium	
	Monthly count of	Number of beneficiaries disenrolled							
	total	from the HELP program mid-year in the							
	disenrollment	reporting month (exclude beneficiaries who disenrolled during their renewal							
		0							
12		month)	2484	1886	165	89	241	176	
12	Monthly count of	Number of beneficiaries disenrolled mid-	2-10-1	1000	105	05	271	1/0	
	disenrollment,	year in the reporting month (not their							
	failure to pay	renewal month) for failure to pay							
13	Tallure to pay	premiums	187	0	0	0	187	0	
15	Monthly count of	Number of beneficiaries disenrolled mid-		-	-			-	
	disenrollment,	year in the reporting month (not their							
	continuous	renewal month) due to specifically							
	eligibility	noted continuous eligibility exceptions							
	exceptions	for individuals							
14			592	592	0	0	0	0	
	Monthly count of	Number of beneficiaries disenrolled mid-							
	disenrollment,	year in the reporting month (not their							
	other	renewal month) for any reason other							
		than failure to pay premiums or a							
		specific continuous eligibility exception							
			1705	1294	105	00	F 4	176	
15		-			165	89	54		
#	Measure	Definition	Overall Measure	19-20YR	21-34YR	35-44YR	45-54YR	55-64YR	>65YR
	Monthly count of	Number of beneficiaries disenrolled							
	total	from the HELP program mid-year in the							
	disenrollment	reporting month (exclude beneficiaries	2404	101	1005	462	227	245	70
12		who disenrolled during their renewal	2484	181	1085	463	337	345	73
12	Manthly any - f	month)							
	Monthly count of disenrollment,	Number of beneficiaries disenrolled mid- year in the reporting month (not their							
	failure to pay	renewal month) for failure to pay							
13	railure to pay	premiums	187	8	109	39	19	12	0
10		•	107	5	105	55	1.7	+4	
		Number of bonoticiaries disearelled mid			1	1	1	1	1
	Monthly count of	Number of beneficiaries disenrolled mid-							
	disenrollment,	year in the reporting month (not their							
	disenrollment, continuous	year in the reporting month (not their renewal month) due to specifically	592	23	271	91	92	114	1
14	disenrollment, continuous eligibility	year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions	592	23	271	91	92	114	1
14	disenrollment, continuous eligibility exceptions	year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals	592	23	271	91	92	114	1
14	disenrollment, continuous eligibility exceptions Monthly count of	year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals Number of beneficiaries disenrolled mid-	592	23	271	91	92	114	1
14	disenrollment, continuous eligibility exceptions	year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals Number of beneficiaries disenrolled mid- year in the reporting month (not their	592	23	271	91	92	114	1
14	disenrollment, continuous eligibility exceptions Monthly count of disenrollment,	year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals Number of beneficiaries disenrolled mid-	592	23	271	91	92	219	1

			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							
	Monthly count	reporting month (exclude beneficiaries							
	of total	who disenrolled during their renewal			_		-		
12	disenrollment	month)	2484	428	7	1713	9	26	301
	Monthly count	Number of beneficiaries disenrolled mid-							
	of	year in the reporting month (not their							
	disenrollment,	renewal month) for failure to pay					_		
13	failure to pay	premiums	187	0	0	143	1	2	41
	Monthly count								
	of	Number of beneficiaries disenrolled mid-							
	disenrollment,	year in the reporting month (not their							
	continuous	renewal month) due to specifically noted							
	eligibility	continuous eligibility exceptions for	500	<i>cc</i>	2	425	2		0.4
14	exceptions	individuals	592	66	3	425	3	11	84
		Number of beneficiaries disenrolled mid-							
	Monthly count	year in the reporting month (not their							
	of	renewal month) for any reason other							
	disenrollment,	than failure to pay premiums or a specific	4705	262		4445	-	12	470
15	other	continuous eligibility exception	1705	362	4	1145	5	13	176

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non- Hispanic/Latino	Unspecified Ethnicity
#	Monthly count of	Number of beneficiaries disenrolled		Hispanic/Latino	hispanic/Latito	Lumency
	total	from the HELP program mid-year in the				
	disenrollment	reporting month (exclude beneficiaries				
12		who disenrolled during their renewal month)	2484	59	1884	541
12	Monthly count of	Number of beneficiaries disenrolled mid-	2-0-	55	1004	541
	disenrollment,	year in the reporting month (not their				
	failure to pay	renewal month) for failure to pay				
13		premiums	187	3	130	54
	Monthly count of	Number of beneficiaries disenrolled mid-				
	disenrollment, continuous	year in the reporting month (not their renewal month) due to specifically				
	eligibility	noted continuous eligibility exceptions				
14	exceptions	for individuals	592	14	370	208
	Monthly count of	Number of beneficiaries disenrolled mid-				
	disenrollment,	year in the reporting month (not their				
	other	renewal month) for any reason other than failure to pay premiums or a				
15		specific continuous eligibility exception	1705	42	1384	279

#	Measure	Definition	Overall Measure	Female	Male
		Number of beneficiaries disenrolled			
	Monthly count of	from the HELP program mid-year in the reporting month (exclude beneficiaries			
	total	who disenrolled during their renewal			
12	disenrollment	month)	2484	1334	1150
		Number of beneficiaries disenrolled mid-			
	Monthly count of	year in the reporting month (not their			
	disenrollment,	renewal month) for failure to pay	187	96	91
13	failure to pay	premiums	187	90	91
	Monthly count of	Number of beneficiaries disenrolled mid-			
	disenrollment, continuous	year in the reporting month (not their			
	eligibility	renewal month) due to specifically noted continuous eligibility exceptions			
14	exceptions	for individuals	592	311	281
17	exceptions	Number of beneficiaries disenrolled mid-			
		year in the reporting month (not their			
	Monthly count of	renewal month) for any reason other			
	disenrollment,	than failure to pay premiums or a			
15	other	specific continuous eligibility exception	1705	927	778

Cost sharing limit

					50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Monthly count of	Count of enrolled individuals who have						
1	beneficiaries	hit 2% co-pay credit since enrollment						
	who have	and must now make cost sharing						
	exceeded 2% co-	payments, but who have not yet						
	pay credit but	reached the 5% cost sharing limit						
	not reached 5%					_		-
16	limit		139925	120212	11578	3	8125	9
	Monthly count of	Count of enrolled individuals who have						
	beneficiaries	hit 5% limit on cost sharing and						
	who have hit 5%	premiums since enrollment, and no						
17	cost sharing limit	longer make cost sharing payments	124457	123768	234	1	454	0

mease		orate a six-month lag to allow for claim submiss			50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no]
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium	
	Monthly count of	Monthly count of beneficiaries who have							
	beneficiaries	accessed incentivized preventive							
	who have	services, overall							
	accessed								
	incentivized								
	preventive		51103	37028	5670	2194	4297	1914	
18	services, overall	Tatal available of annualting convicts	51105	37028	5070	2194	4237	1914	
	Monthly count of beneficiaries	Total number of preventive services provided during the month six months							
	who have	prior to the reporting month, divided by							
	accessed	the number of members enrolled during							
	incentivized	that month							
	preventive								
19	services, overall		0.60	0.62	0.51	0.71	0.50	0.73	
#	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	accessed incentivized preventive							
	have accessed	services, overall							
	incentivized								
18	preventive services, overall		51103	2721	18796	10634	9600	9352	0
10	Monthly count of	Total number of preventive services	51105	2721	10/00	10031	5000	5552	Ŭ
	beneficiaries who	provided during the month six months							
	have accessed	prior to the reporting month, divided by							
	incentivized	the number of members enrolled during							
	preventive	that month							
	services, overall		0.00						
19			0.60	0.42	0.54	0.63	0.70	0.73	0
				Native American					Unspecified
#	Measure	Definition	Overall Measure	/ Alaskan Native	Asian	White	Pacific Islander	Black	Race
	Monthly count	Monthly count of beneficiaries who have							
	of beneficiaries	accessed incentivized preventive							
	who have	services, overall							
	accessed								
	incentivized preventive								
18	services, overall		51103	7652	202	35976	363	650	6260
10	Monthly count	Total number of preventive services							
	of beneficiaries	provided during the month six months							
	who have	prior to the reporting month, divided by							
	accessed	the number of members enrolled during							
	incentivized	that month							
	preventive								
19	services, overall		0.60	0.61	0.50	0.61	0.55	0.58	0.55
			0.00	0.01	0.50	0.01	0.55	0.50	0.55

Use of preventative 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 June of 2017

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non- Hispanic/Latino or Unspecified
	Monthly count	Monthly count of beneficiaries who			
	of beneficiaries	have accessed incentivized preventive			
	who have	services, overall			
	accessed incentivized				
	preventive				
18	services, overall		51103	1387	49716
10	Monthly count	Total number of preventive services			
	of beneficiaries	provided during the month six months			
	who have	prior to the reporting month, divided by			
	accessed	the number of members enrolled during			
	incentivized	that month			
	preventive		0.00	0.50	0.00
19	services, overall		0.60	0.58	0.60
#	Measure	Definition	Overall Measure	Female	Male
	Monthly count of	Monthly count of beneficiaries who have			
	beneficiaries	accessed incentivized preventive			
	beneficiaries who have				
	beneficiaries who have accessed	accessed incentivized preventive			
	beneficiaries who have accessed incentivized	accessed incentivized preventive			
18	beneficiaries who have accessed incentivized preventive	accessed incentivized preventive	51103	30601	20502
18	beneficiaries who have accessed incentivized	accessed incentivized preventive	51103	30601	20502
18	beneficiaries who have accessed incentivized preventive services, overall	accessed incentivized preventive services, overall	51103	30601	20502
18	beneficiaries who have accessed incentivized preventive services, overall Monthly count of	accessed incentivized preventive services, overall Total number of preventive services provided during the month six months prior to the reporting month, divided by	51103	30601	20502
18	beneficiaries who have accessed incentivized preventive services, overall Monthly count of beneficiaries who have accessed	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	51103	30601	20502
18	beneficiaries who have accessed incentivized preventive services, overall Monthly count of beneficiaries who have accessed incentivized	accessed incentivized preventive services, overall Total number of preventive services provided during the month six months prior to the reporting month, divided by	51103	30601	20502
18	beneficiaries who have accessed incentivized preventive services, overall Monthly count of beneficiaries who have accessed	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	51103 0.60	30601 0.67	20502

Use of other services**

mou		Incorporate a six-month lag to allow for cl			50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
20a	Physician	PMPM utilization of physician visits						
	service	for currently enrolled beneficiaries						
	utilization		0.42	0.53	0.05	0.59	0.04	0.58
20b	Physician or	PMPM utilization of physician or						
	mid-level	mid-level practitioner visits for						
	practitioner	currently enrolled beneficiaries	0.00	0.66	0.20	0.72	0.20	0.72
	utilization		0.58	0.66	0.30	0.72	0.28	0.72
24	Prescription	PMPM prescription fills greater						
21	drug use	than 28 days for currently enrolled beneficiaries	0.48	0.49	0.44	0.58	0.43	0.60
	Emergency	PMPM emergency department	0.40	0.45	0.44	0.50	0.45	0.00
	department	visits for emergent conditions						
	utilization,	among currently enrolled						
22	emergency	beneficiaries (i.e. those not subject						
	0 ,	to a copayment)	0.222	0.281	0.024	0.315	0.016	0.299
	Emergency	PMPM emergency department						
	department	visits for non-emergent conditions						
	utilization, non-	among currently enrolled						
23	emergency	beneficiaries (i.e. those subject to a	2 250	2 2 6 7		0	0	0
		copayment)	2.358	3.367	0	0	0	0
	Inpatient	PMPM emergency department						
24	admissions	visits for non-emergent conditions						
		among currently enrolled						
		beneficiaries (i.e. those subject to a	0.065	0.082	0.008	0.097	0.003	0.083
		copayment)	0.005	0.002	0.000	0.007	0.005	0.005

**Measures 20 through 24 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled in June of 2017

Renewal (starting in 2017)

				iai (otai ting i	· ·			
					50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Monthly count of	Number of beneficiaries due for renewal						
25	beneficiaries due	in the reporting month						
	for renewal		4576	3330	519	201	382	144
26	Number who did	Number of beneficiaries due for renewal						
	not renew	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	20	10	2	2	2	4
27	Number who lost	Number of beneficiaries due for renewal						
	eligibility	in the reporting month who respond to						
		renewal notices, but are determined						
		ineligible for the HELP program	15	8	0	1	1	5
28	No premium	Number of beneficiaries due for renewal						
	change	in the reporting month who remain						
		eligible, with no change in premium						
		requirement	4526	3308	512	197	374	135
29	Premium	Number of beneficiaries due for renewal						
	increase	in the reporting month who remain						
		eligible, with an increase in required						
		premium***	9	0	4	0	5	0
30	Premium	Number of beneficiaries due for renewal						
	decrease	in the reporting month who remain						
		eligible, with a decrease required						
		premium***	6	4	1	1	0	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

				i T	50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Complaints and	Total number of complaints and						
	grievances,	grievances filed in the reporting month						
	Medicaid	regarding the HELP program		,	,	,	,	,
31	program		0	n/a	n/a	n/a	n/a	n/a
	Complaints and	Total number of complaints and						
	grievances, plan	grievances filed in the reporting month		,	,	,	,	,
32	administrator	regarding the plan administrator	0	n/a	n/a	n/a	n/a	n/a
	Complaints and	Total number of complaints and						
	grievances,	grievances filed in the reporting month		,	,	,	,	,
33	provider	regarding a provider	2	n/a	n/a	n/a	n/a	n/a
	Appeals,	Total number of appeals filed in the		,	,	,	,	,
34	eligibility	reporting month regarding eligibility	38	n/a	n/a	n/a	n/a	n/a
	Appeals,	Total number of appeals filed in the						
	premiums	reporting month regarding the size of		,	,	,	,	,
35		premium payments	0	n/a	n/a	n/a	n/a	n/a
	Appeals, denial	Total number of appeals filed in the						
	of benefits	reporting month regarding denials of		,	,	,	,	,
36		benefits	46	n/a	n/a	n/a	n/a	n/a

Enrollment duration among dis-enrollee
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					50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Enrollment	Number of beneficiaries disenrolled						
	duration 0-3	from the demonstration in the reporting						
	months	month (measure 12) who had been						
		enrolled in the demonstration for 3 or						
		fewer months at the time of						
37		disenrollment	435	367	11	15	9	45
	Enrollment	Number of beneficiaries disenrolled						
	duration 4-6	from the demonstration in the reporting						
	months	month (measure 12) who had been						
		enrolled in the demonstration for						
		between 4 and 6 months at the time of						
38		disenrollment	416	331	19	16	42	21
	Enrollment	Number of beneficiaries disenrolled						
	duration >6	from the demonstration in the reporting						
	months	month (measure 12) who had been						
		enrolled in the demonstration for 6 or						
		more months at the time of						
39		disenrollment	1612	1187	135	58	190	110

Monthly premiums owed at dis-enrollment

					50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12) whose monthly						
	of disenrollment	premium at the time of disenrollment	. –		. –			
40	>\$0 and <\$15	was greater than \$0 but less than \$15	17	0	17	0	0	0
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly						
	of disenrollment	premium at the time of disenrollment		_		-		_
41	\$15-<\$30	was \$15 or greater, but less than \$30	221	0	99	0	122	0
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly						
	of disenrollment	premium at the time of disenrollment						
42	\$30-<\$50	was \$30 or greater, but less than \$50	134	0	47	0	87	0
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly						
	of disenrollment	premium at the time of disenrollment						
43	\$50-<\$75	was \$50 or greater, but less than \$75.	36	0	2	0	34	0
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly						
	of disenrollment	premium at the time of disenrollment						
44	≥\$75	was \$75 or greater.	1	0	0	0	1	0

					50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Amount of total	Number of beneficiaries disenrolled						
	debt owed at	from the demonstration in the reporting						
	time of	month for failure to pay (measure 13),						
	disenrollment for	whose total debt owed at the time of						
45	failure to pay:	disenrollment was less than \$50.						
	<\$50		1	0	0	0	1	0
	Amount of total	Number of beneficiaries disenrolled						
	debt owed at	from the demonstration in the reporting						
	time of	month for failure to pay (measure 13),						
	disenrollment for	whose total debt owed at the time of						
46	failure to pay:	disenrollment was greater than or equal		_		_		
	≥\$50 but <\$100	to \$50, but less than \$100.	29	0	0	0	29	0
	Amount of total	Number of beneficiaries disenrolled						
	debt owed at	from the demonstration in the reporting						
	time of	month for failure to pay (measure 13),						
	disenrollment for	whose total debt owed at the time of						
47	failure to pay:	disenrollment was greater than or equal		_		_		
	≥\$100 but <\$150	to \$100, but less than \$150.	81	0	0	0	81	0
	Amount of total	Number of beneficiaries disenrolled						
	debt owed at	from the demonstration in the reporting						
	time of	month for failure to pay (measure 13),						
	disenrollment for	whose total debt owed at the time of						
48	failure to pay:	disenrollment was greater than \$150.						
	≥\$150		78	0	0	0	78	0

Total debt owed at disenrollment for failure to pay

Quarterly HELP Act Measures

Quarter 1 Measures February 2018 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	92293	66513	11485	3281	8338	2763	
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	909	597	130	24	133	25	
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	2217	1569	290	93	211	57	
#	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	92293	6464	38069	18854	14576	14101	228
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	909	67	411	158	131	142	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	2217	357	948	493	238	180	1
#	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	92293	14243	393	63804	205	808	12840
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	909	109	0	626	2	10	162
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	2217	411	8	1539	6	24	229

					Non-	Unspecified
#	Measure	Definition	Overall Measure	Hispanic/Latino	Hispanic/Latino	Ethnicity
1	Monthly count of total enrollment	Number of unduplicated individuals enrolled at any time during the month	92293	2605	66880	22808
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	909	29	617	263
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	2217	72	1829	316
						1
#	Measure	Definition	Overall Measure	Female	Male	
# 1	Measure Monthly count of total enrollment	Definition Number of unduplicated individuals enrolled at any time during the month	Overall Measure 92293	Female 49636	Male 42657	
	Monthly count of	Number of unduplicated individuals				

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	6537	378	0	3126	0	3033
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	11296	6	6079	1	5210	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	9413	20	5870	3	3508	13
7	Monthly count of beneficiaries with collectible debt	Among enrolled individuals who owe premium payments, number of beneficiaries who have collectible debt	5544	0	4108	2	1426	8

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Monthly count of	Number of enrolled beneficiaries who	Overall ivieasure	< 50% FPL	w/premium	premium	w/premium	premium
	beneficiaries	notified the state of a mid-year change						
	who gave notice	in circumstance and the change was						
	of mid-year	effective during the reporting month						
	change in							
	circumstance in							
	household or		1205	coc	242	20	264	
	income		1285	696	242	39	264	44
8	information							
	No premium	Number of beneficiaries who notified		T				
	change following	the state of a mid-year change in						
	mid-year update	circumstance and experienced no						
	of household or	change in their premium requirement	1050	695	144	39	128	44
	income	during the reporting month	1050	095	144	35	120	44
9	information							
	Premium	Number of beneficiaries who notified						
	increase	the state of a mid-year change in						
	following mid-	circumstance and experienced an						
	year update of	increase in their premium requirement						
	household or	during the reporting month ^y						
	income		157	0	46	0	111	0
10	information							•
	Premium	Number of beneficiaries who notified						
	decrease	the state of a mid-year change in						
	following mid-	circumstance and experienced a						
	year update of	decrease in their premium requirement						
	household or	during the reporting month ^y	78	1	52	0	25	0
	income		/ 0	-	52		25	l č
11	information							

Mid-year change in circumstance in household composition or income

^Y 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.

Dis-enrollments 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)	1982	1484	145	66	240	114	
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	187	0	0	0	187	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	580	580	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	1215	904	145	66	53	114	
#	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)	1982	149	900	411	247	212	63
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	187	20	84	46	20	17	0
		Number of beneficiaries disenrolled mid-							
14	Monthly count of disenrollment, continuous eligibility exceptions	year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals	580	36	275	105	76	88	0

				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							
	Monthly count	reporting month (exclude beneficiaries	1982	280	4	1391	0	21	286
	of total	who disenrolled during their renewal	1001	200		1001	•		200
12	disenrollment	month)							
	Monthly count	Number of beneficiaries disenrolled mid-							
	of	year in the reporting month (not their	187	1	1	155	0	1	29
	disenrollment,	renewal month) for failure to pay	-				-		_
13	failure to pay	premiums							
	Monthly count								
	of	Number of beneficiaries disenrolled mid-							
	disenrollment,	year in the reporting month (not their							
	continuous	renewal month) due to specifically noted	580	59	3	396	0	8	114
	eligibility	continuous eligibility exceptions for			-		-	_	
14	exceptions	individuals							
	Manthlusaunt	Number of beneficiaries disenrolled mid-							
	Monthly count	year in the reporting month (not their							
	of	renewal month) for any reason other	1215	220	0	840	0	12	143
15	disenrollment,	than failure to pay premiums or a specific							
15	other	continuous eligibility exception							

#	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)	1982	67	1404	511
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	187	3	134	50
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	580	17	320	243
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	1215	47	950	218

#	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)	1982	1073	909
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	187	106	81
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	580	308	272
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	1215	659	556

Cost sharing limit

					50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Monthly count of	Count of enrolled individuals who have						
	beneficiaries	hit 2% co-pay credit since enrollment						
	who have	and must now make cost sharing						
	exceeded 2% co-	payments, but who have not yet						
	pay credit but	reached the 5% cost sharing limit	2334	1647	337	0	348	2
	not reached 5%		2004	1047	557	0	540	2
16	limit							
	Monthly count of	Count of enrolled individuals who have						
	beneficiaries	hit 5% limit on cost sharing and	4462	3951	204	2	304	1
	who have hit 5%	premiums since enrollment, and no	4402	3331	204	2	504	1
17	cost sharing limit	longer make cost sharing payments						

		orate a six-month lag to allow for claim submiss			50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no	
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium	
	Monthly count of	Monthly count of beneficiaries who have							
	beneficiaries who have	accessed incentivized preventive services, overall							
	accessed	services, overall							
	incentivized								
	preventive		52265	38023	5788	2220	4308	1926	
18	services, overall								
10	Monthly count of	Total number of preventive services							
	beneficiaries	provided during the month six months							
	who have	prior to the reporting month, divided by							
	accessed	the number of members enrolled during							
	incentivized	that month	0.60	0.62	0.51	0.71	0.50	0.73	
	preventive		0.00	0.02	0.51	0.71	0.50	0.75	
19	services, overall								
#	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	accessed incentivized preventive							
	have accessed	services, overall							
	incentivized		52265	2788	19263	10940	9730	9544	0
10	preventive								
18	services, overall Monthly count of	Total number of preventive services							
	beneficiaries who	provided during the month six months							
	have accessed	prior to the reporting month, divided by							
	incentivized	the number of members enrolled during							
	preventive	that month							
19	services, overall								
-	,		0.60	0.41	0.54	0.63	0.70	0.73	0
		•		Native American					Unspecified
#	Measure	Definition	Overall Measure	/ Alaskan Native	Asian	White	Pacific Islander	Black	Race
	Monthly count	Monthly count of beneficiaries who have							
	of beneficiaries	accessed incentivized preventive							
	who have	services, overall							
	accessed								
	incentivized								
	preventive		52265	7881	213	36692	0	371	7108
18	services, overall		52205	7001	215	50052	0	571	/100
	Monthly sound	Total number of proventive convices							
	Monthly count of beneficiaries	Total number of preventive services provided during the month six months							
	who have	prior to the reporting month, divided by							
	accessed	the number of members enrolled during							
	incentivized	that month							
	preventive								
19	services, overall		0.60	0.61	0.51	0.61	0	0.54	1.12
			1		1	1	1	1	

Use of preventative 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 June of 2017

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non- Hispanic/Latino or Unspecified
	Monthly count	Monthly count of beneficiaries who			
	of beneficiaries	have accessed incentivized preventive			
	who have	services, overall			
	accessed incentivized				
	preventive		52265	1429	50836
18	services, overall				
	Monthly count	Total number of preventive services			
	of beneficiaries	provided during the month six months			
	who have	prior to the reporting month, divided by			
	accessed	the number of members enrolled during			
	incentivized	that month	0.60	0.58	0.60
	preventive		0.00	0.50	0.00
19	services, overall				
#	Measure	Definition	Overall Measure	Female	Male
	Monthly count of beneficiaries	Monthly count of beneficiaries who have			
	who have	accessed incentivized preventive services, overall			
	accessed	services, overall			
	incentivized		53365	24227	20020
	preventive		52265	31327	20938
18	services, overall				
	Monthly count of	Total number of preventive services			
	beneficiaries	provided during the month six months			
	beneficiaries who have	provided during the month six months prior to the reporting month, divided by			
	beneficiaries who have accessed	provided during the month six months prior to the reporting month, divided by the number of members enrolled during			
	beneficiaries who have accessed incentivized	provided during the month six months prior to the reporting month, divided by	0.60	0.67	0.52
19	beneficiaries who have accessed	provided during the month six months prior to the reporting month, divided by the number of members enrolled during	0.60	0.67	0.52

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
20a	Physician service utilization	PMPM utilization of physician visits for currently enrolled beneficiaries	0.570	0.655	0.271	0.707	0.256	0.713
20b	Physician or mid-level practitioner utilization	PMPM utilization of physician or mid-level practitioner visits for currently enrolled beneficiaries	0.580	0.661	0.296	0.711	0.284	0.719
21	Prescription drug use	PMPM prescription fills greater than 28 days for currently enrolled beneficiaries	0.481	0.486	0.440	0.576	0.435	0.593
22	Emergency department utilization, emergency	PMPM emergency department visits for emergent conditions among currently enrolled beneficiaries (i.e. those not subject to a copayment)	0.226	0.285	0.023	0.317	0.015	0.300
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)	2.310	3.281	0	0	0	0
24	Inpatient admissions	PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment)	0.066	0.083	0.009	0.097	0.003	0.080

**Measures 20 through 24 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled in June of 2017

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	4893	3547	570	216	419	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	20	12	1	3	2	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	14	7	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	4840	3527	561	209	406	137	
29	Premium increase	Number of beneficiaries due for renewal in the reporting month who remain eligible, with an increase in required premium***	16	0	7	0	9	0	
30	Premium decrease	Number of beneficiaries due for renewal in the reporting month who remain eligible, with a decrease required premium***	3	1	1	0	1	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
	Complaints and	Total number of complaints and				·		
	grievances,	grievances filed in the reporting month	0					
31	Medicaid program	regarding the HELP program		N/A	N/A	N/A	N/A	N/A
	Complaints and	Total number of complaints and	0					
32	grievances, plan administrator	grievances filed in the reporting month regarding the plan administrator		N/A	N/A	N/A	N/A	N/A
	Complaints and	Total number of complaints and	4					
33	grievances, provider	grievances filed in the reporting month regarding a provider		N/A	N/A	N/A	N/A	N/A
	Appeals,	Total number of appeals filed in the	25					
34	eligibility	reporting month regarding eligibility		N/A	N/A	N/A	N/A	N/A
	Appeals,	Total number of appeals filed in the	0					
35	premiums	reporting month regarding the size of premium payments		N/A	N/A	N/A	N/A	N/A
	Appeals, denial	Total number of appeals filed in the	13					
36	of benefits	reporting month regarding denials of benefits	-	N/A	N/A	N/A	N/A	N/A

Enrollment duration among dis-enrollees	Enrollment	duration	among	dis-enrollees
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				<u></u>	50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Enrollment	Number of beneficiaries disenrolled						
	duration 0-3	from the demonstration in the reporting						
	months	month (measure 12) who had been						
		enrolled in the demonstration for 3 or	158	143	4	5	6	5
		fewer months at the time of	150	143	7	5	0	5
37		disenrollment						
	Enrollment	Number of beneficiaries disenrolled						
	duration 4-6	from the demonstration in the reporting						
	months	month (measure 12) who had been						
		enrolled in the demonstration for	344	259	18	10	53	21
		between 4 and 6 months at the time of	• • •					
38		disenrollment						
	Enrollment	Number of beneficiaries disenrolled						
	duration >6	from the demonstration in the reporting						
	months	month (measure 12) who had been						
		enrolled in the demonstration for 6 or	1455	1081	123	51	181	88
		more months at the time of	1.55	1001	125	5±	101	00
39		disenrollment						

Monthly premiums owed at dis-enrollment

					50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12) whose monthly	20	0	17	0	3	0
	of disenrollment	premium at the time of disenrollment	20	0	1/	0	5	0
40	>\$0 and <\$15	was greater than \$0 but less than \$15						
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly	207	0	92	0	115	0
	of disenrollment	premium at the time of disenrollment	207	0	92	0	115	0
41	\$15-<\$30	was \$15 or greater, but less than \$30						
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly	129	0	34	0	95	0
	of disenrollment	premium at the time of disenrollment	129	0	54	0	95	0
42	\$30-<\$50	was \$30 or greater, but less than \$50						
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly	28	0	2	0	26	0
	of disenrollment	premium at the time of disenrollment	20	0	2	0	20	0
43	\$50-<\$75	was \$50 or greater, but less than \$75.						
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly	4	0	0	0	4	0
	of disenrollment	premium at the time of disenrollment	4	U	0	U	4	0
44	≥\$75	was \$75 or greater.						

#	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.	1	0	0	0	1	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.	23	0	0	0	23	0
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.	89	0	0	0	89	0
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.	77	0	0	0	77	0

Total debt owed at disenrollment for failure to pay

Quarterly HELP Act Measures

Quarter 1 Measures March 2018 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	93515	67654	11458	3324	8353	2813	
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	1068	676	165	34	162	31	
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	2139	1556	262	100	166	57	
#	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	93515	6504	38594	19190	14661	14307	258
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	1068	60	452	227	179	150	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	2139	378	882	439	266	171	3
#	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	93515	14541	392	64616	207	824	12935
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	1068	124	6	746	2	4	186
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	2139	415	7	1480	5	20	212

#	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	93515	2668	67994	22853
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	1068	29	724	315
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	2139	75	1753	311
						1
#	Measure	Definition	Overall Measure	Female	Male	
# 1	Measure Monthly count of total enrollment	Definition Number of unduplicated individuals enrolled at any time during the month	Overall Measure 93515	Female 50295	Male 43223	
	Monthly count of	Number of unduplicated individuals				

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	7912	243	0	4022	0	3647
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	10678	1	5622	1	5054	0
	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	10014	17	6313	3	3665	17
6	Monthly count of beneficiaries with collectible debt	had been greater than 100% FPL Among enrolled individuals who owe premium payments, number of beneficiaries who have collectible debt	5401	0	3983	2	1404	12

#	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	Overall ivieasure	< 30% FFL	w/premium	premium	w/premum	premium
	beneficiaries	notified the state of a mid-year change						
	who gave notice	in circumstance and the change was						
	of mid-year	effective during the reporting month						
	change in							
	circumstance in							
	household or		1201	626	238	39	252	44
	income		1201	020	230	55	252	
8	information							
	No premium	Number of beneficiaries who notified						
	change following	the state of a mid-year change in						
	mid-year update	circumstance and experienced no						
	of household or	change in their premium requirement	954	625	128	39	116	46
9	income information	during the reporting month						
9	Premium	Number of beneficiaries who notified						
	increase	the state of a mid-year change in						
	following mid-	circumstance and experienced an						
	year update of	increase in their premium requirement						
	household or	during the reporting month ^y						
	income		100		F 4	•	112	0
10	information		163	0	51	0	112	0
	Premium	Number of beneficiaries who notified						
	decrease	the state of a mid-year change in						
	following mid-	circumstance and experienced a						
	year update of	decrease in their premium requirement						
	household or	during the reporting month ^y	84	1	59	0	24	0
	income			-		Ĩ	- ·	Ť
11	information		1					

Mid-year change in circumstance in household composition or income

^Y 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.

Dis-enrollments 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)	2076	1655	155	60	178	124	
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	105	0	0	0	105	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	815	815	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	1156	840	115	60	73	124	
#	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)	2076	156	982	408	272	207	51
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	105	5	47	65	11	7	0
	Monthly count of	Number of beneficiaries disenrolled mid-							
14	disenrollment, continuous eligibility exceptions	year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals	815	37	439	139	116	83	1

				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							
	Monthly count	reporting month (exclude beneficiaries	2076	223	10	1519	5	25	294
	of total	who disenrolled during their renewal	2070	225	10	1010	5	23	231
12	disenrollment	month)							
	Monthly count	Number of beneficiaries disenrolled mid-							
	of	year in the reporting month (not their	105	0	0	88	1	0	16
	disenrollment,	renewal month) for failure to pay	105	0	0	00	-	0	10
13	failure to pay	premiums							
	Monthly count								
	of	Number of beneficiaries disenrolled mid-							
	disenrollment,	year in the reporting month (not their							
	continuous	renewal month) due to specifically noted	815	62	6	585	3	15	144
	eligibility	continuous eligibility exceptions for	015	02	0	565	5	15	744
14	exceptions	individuals							
		Number of beneficiaries disenrolled mid-							
	Monthly count	year in the reporting month (not their							
	of	renewal month) for any reason other	1156	161	4	846	1	10	134
	disenrollment,	than failure to pay premiums or a specific	1100	101	4	040	⊥	10	104
15	other	continuous eligibility exception							

#	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)	2076	66	1434	576
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	105	2	75	28
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	815	24	478	313
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	1156	40	881	235

#	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)	2076	1063	1013
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	105	48	57
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	815	425	390
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	1156	590	566

Cost sharing limit

					50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Monthly count of	Count of enrolled individuals who have						
	beneficiaries	hit 2% co-pay credit since enrollment						
	who have	and must now make cost sharing						
	exceeded 2% co-	payments, but who have not yet						
	pay credit but	reached the 5% cost sharing limit	1762	1247	248	0	266	1
	not reached 5%		1702	1247	240	0	200	1
16	limit							
	Monthly count of	Count of enrolled individuals who have						
	beneficiaries	hit 5% limit on cost sharing and	4349	3787	226	0	333	3
	who have hit 5%	premiums since enrollment, and no	4343	5707	220	U	555	5
17	cost sharing limit	longer make cost sharing payments						

	<i>_</i>	orate a six-month lag to allow for claim submiss			50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no	
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium	
	Monthly count of beneficiaries who have accessed incentivized	Monthly count of beneficiaries who have accessed incentivized preventive services, overall							
18	preventive services, overall		53622	39233	5836	2271	4334	1948	
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	0.61	0.63	0.52	0.71	0.51	0.72	
#	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	53622	2890	19835	11249	9926	9722	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	0.61	0.42	0.55	0.63	0.71	0.74	0
				Native American					Unspecified
#	Measure	Definition	Overall Measure	/ Alaskan Native	Asian	White	Pacific Islander	Black	Race
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	53622	8126	227	37587	0	391	7291
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	0.61	0.61	0.54	0.62	0	0.55	1.14

Use of preventative 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 June of 2017

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non- Hispanic/Latino or Unspecified
	Monthly count	Monthly count of beneficiaries who			
	of beneficiaries who have	have accessed incentivized preventive services, overall			
	accessed	services, overall			
	incentivized		53622	1485	52137
	preventive		53622	1485	52137
18	services, overall				
	Monthly count	Total number of preventive services			
	of beneficiaries	provided during the month six months			
	who have	prior to the reporting month, divided by			
	accessed incentivized	the number of members enrolled during that month			
	preventive	that month	0.61	0.59	0.61
19	services, overall				
15	Services, overall				
#	Measure	Definition	Overall Measure	Female	Male
#	Monthly count of	Monthly count of beneficiaries who have	Overall Measure	Female	Male
#	Monthly count of beneficiaries	Monthly count of beneficiaries who have accessed incentivized preventive	Overall Measure	Female	Male
#	Monthly count of beneficiaries who have	Monthly count of beneficiaries who have	Overall Measure	Female	Male
#	Monthly count of beneficiaries who have accessed	Monthly count of beneficiaries who have accessed incentivized preventive	Overall Measure	Female	Male
#	Monthly count of beneficiaries who have accessed incentivized	Monthly count of beneficiaries who have accessed incentivized preventive	Overall Measure	Female 32143	Male 21479
#	Monthly count of beneficiaries who have accessed incentivized preventive	Monthly count of beneficiaries who have accessed incentivized preventive			
	Monthly count of beneficiaries who have accessed incentivized	Monthly count of beneficiaries who have accessed incentivized preventive services, overall			
	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive			
	Monthly count of beneficiaries who have accessed incentivized preventive services, overall Monthly count of	Monthly count of beneficiaries who have accessed incentivized preventive services, overall Total number of preventive services			
	Monthly count of beneficiaries who have accessed incentivized preventive services, overall Monthly count of beneficiaries who have accessed	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			
	Monthly count of beneficiaries who have accessed incentivized preventive services, overall Monthly count of beneficiaries who have accessed incentivized	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	53622	32143	21479
	Monthly count of beneficiaries who have accessed incentivized preventive services, overall Monthly count of beneficiaries who have accessed	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			

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
20a	Physician service utilization	PMPM utilization of physician visits for currently enrolled beneficiaries	0.576	0.662	0.273	0.704	0.255	0.711
20b	Physician or mid-level practitioner utilization	PMPM utilization of physician or mid-level practitioner visits for currently enrolled beneficiaries	0.588	0.669	0.297	0.708	0.286	0.716
21	Prescription drug use	PMPM prescription fills greater than 28 days for currently enrolled beneficiaries	0.486	0.489	0.446	0.576	0.444	0.589
22	Emergency department utilization, emergency	PMPM emergency department visits for emergent conditions among currently enrolled beneficiaries (i.e. those not subject to a copayment)	0.229	0.287	0.021	0.322	0.016	0.302
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)	2.277	3.215	0	0	0	0
24	Inpatient admissions	PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment)	0.067	0.084	0.008	0.096	0.003	0.080

**Measures 20 through 24 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled in June of 2017

Renewal (starting in 2017)

				ai (otai ting in				
#	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	4655	3412	550	225	337	131
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	25	12	2	8	2	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	9	4	1	0	0	4
28	No premium change	Number of beneficiaries due for renewal in the reporting month who remain eligible, with no change in premium requirement	4602	3393	538	217	329	125
29	Premium increase	Number of beneficiaries due for renewal in the reporting month who remain eligible, with an increase in required premium***	14	0	8	0	6	0
30	Premium decrease	Number of beneficiaries due for renewal in the reporting month who remain eligible, with a decrease required premium***	5	3	1	0	0	1

***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

			•		50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Complaints and	Total number of complaints and						
	grievances,	grievances filed in the reporting month	0					
	Medicaid	regarding the HELP program	U	N1/A	N1 / A	N1 / A		N1/A
31	program			N/A	N/A	N/A	N/A	N/A
	Complaints and	Total number of complaints and	0					
	grievances, plan	grievances filed in the reporting month	U	N1 / A	N1 / A	N1 / A	N1/A	N1/A
32	administrator	regarding the plan administrator		N/A	N/A	N/A	N/A	N/A
	Complaints and	Total number of complaints and	3					
	grievances,	grievances filed in the reporting month	5					
33	provider	regarding a provider		N/A	N/A	N/A	N/A	N/A
	Appeals,	Total number of appeals filed in the	46					
34	eligibility	reporting month regarding eligibility		N/A	N/A	N/A	N/A	N/A
				NA	N/A	N/A	N/A	IN/A
	Appeals,	Total number of appeals filed in the	0					
	premiums	reporting month regarding the size of		N/A	NI/A	NI / A		NI/A
35		premium payments		N/A	N/A	N/A	N/A	N/A
	Appeals, denial	Total number of appeals filed in the	13					
	of benefits	reporting month regarding denials of		N1/A	N1/A	N1 / A	N1/A	N1/A
36		benefits		N/A	N/A	N/A	N/A	N/A

Enrollment duration among dis-enrollees

					50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Enrollment	Number of beneficiaries disenrolled					-	
	duration 0-3	from the demonstration in the reporting						
	months	month (measure 12) who had been						
		enrolled in the demonstration for 3 or	135	115	2	1	10	13
		fewer months at the time of	155	115	2	-	10	15
37		disenrollment						
	Enrollment	Number of beneficiaries disenrolled						
	duration 4-6	from the demonstration in the reporting						
	months	month (measure 12) who had been						
		enrolled in the demonstration for	323	273	10	8	18	17
		between 4 and 6 months at the time of	010			•		
38		disenrollment						
	Enrollment	Number of beneficiaries disenrolled						
	duration >6	from the demonstration in the reporting						
	months	month (measure 12) who had been						
		enrolled in the demonstration for 6 or	1607	1265	103	51	150	94
		more months at the time of						•
39		disenrollment						

Monthly premiums owed at dis-enrollment

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					50-100% FPL	50-100% FPL no	>100% FPL	>100% FPL no
#	Measure	Definition	Overall Measure	< 50% FPL	w/premium	premium	w/premium	premium
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12) whose monthly	13	0	13	0	0	0
	of disenrollment	premium at the time of disenrollment	15	0	15	0	0	0
40	>\$0 and <\$15	was greater than \$0 but less than \$15						
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly	147	0	73	0	74	0
	of disenrollment	premium at the time of disenrollment	147	0	/5	0	/4	0
41	\$15-<\$30	was \$15 or greater, but less than \$30						
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly	104	0	29	0	75	0
	of disenrollment	premium at the time of disenrollment	104	0	29	0	75	0
42	\$30-<\$50	was \$30 or greater, but less than \$50						
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
	premium at time	month (measure 12), whose monthly	28	0	1	0	27	0
	of disenrollment	premium at the time of disenrollment	20	0	1 1	0	27	0
43	\$50-<\$75	was \$50 or greater, but less than \$75.						
	Amount of	Number of beneficiaries disenrolled						
	monthly	from the demonstration in the reporting						
1	premium at time	month (measure 12), whose monthly	2	0	0	0	2	0
1	of disenrollment	premium at the time of disenrollment	<u> </u>		0		<u> </u>	0
44	≥\$75	was \$75 or greater.						

#	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.	1	0	0	0	1	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.	24	0	0	0	24	0
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.	47	0	0	0	47	0
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.	33	0	0	0	33	0

Total debt owed at disenrollment for failure to pay