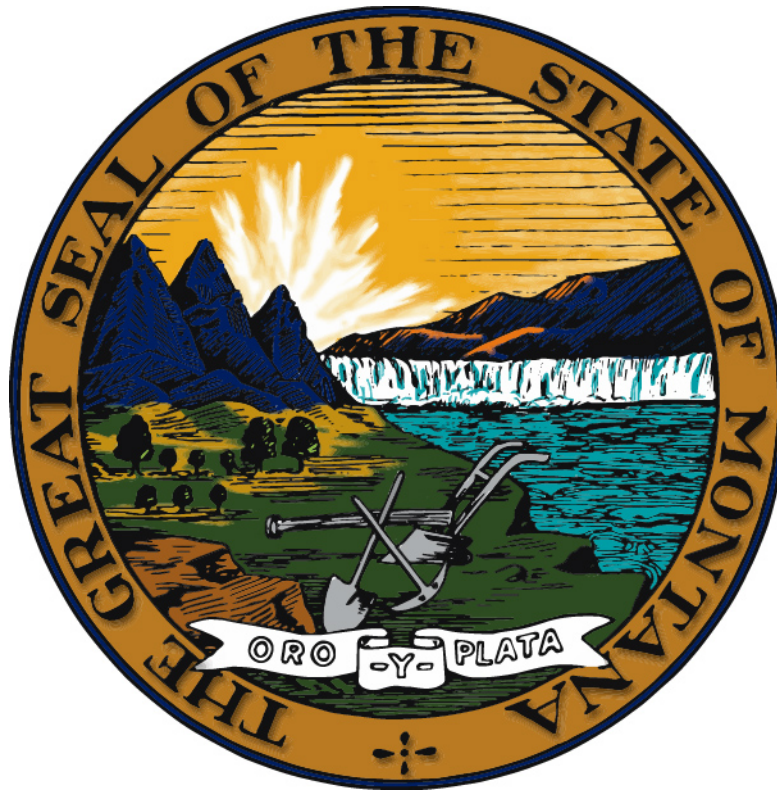


# Montana Health and Economic Livelihood Partnership (HELP) Program Demonstration

SECTION 1115 WAIVER QUARTERLY REPORT  
State of Montana



**REPORTING PERIOD**  
**Quarter: 1(1/1/2019 –3/31/2019)**  
**Demonstration Year: 4(01/01/19 – 12/31/19)**  
**Date submitted to CMS: 05/29/19**

### **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 Public Health and Human Services (DPHHS) submitted an amendment to the Medicaid Aligned Alternative Benefit Plan (ABP) 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 This request was withdrawn on January 11, 2018, per a phone discussion with CMS, and resubmitted on January 16, 2018.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 4, quarter 1.

### **Challenges**

Montana's biennial legislative session began in early January, 2019, and ends in early May, 2019. The scheduled sunset of Medicaid expansion (the HELP ACT) is June 30, 2019. Two bills have been introduced and are subject to debate and alteration. HB 425 and HB 658. HB 425 supports the dissolution of the sunset and the continuation of Medicaid expansion forward, with no changes. HB 658 calls for the addition of new community engagement requirements and some updates to other aspects of the program.

## **Key Milestones and Accomplishments**

### *Participant Enrollment*

In the six-months between October 1, 2018 and April 1, 2019, Medicaid expansion enrollment remained nearly steady, reducing by only 171 members to 95,246.

### *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. Residual issues that carried into quarter 1 of 2019 were minimal and easily rectified.

## **Oversight and Monitoring**

### *Conduent Oversight*

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

### *HELP ACT Oversight Committee*

Montana's HELP ACT Oversight Committee is currently active, though a bill to dissolve this committee (HB 83) is under consideration.

## **Post Award Forum**

No post award forums were held during this quarter. The next forum will be in Quarter 4.

## **Demonstration Waiver Deliverable Timeline**

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

## **Appendix A – 1115 Demonstration Waiver Deliverable Timeline**

<b>Quarterly Reports</b>	<b>Submit to CMS</b>	<b>Date Submitted</b>
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	5/30/2018	12/20/18
Q2	8/31/2018	12/20/18
Q3	11/30/2018	12/20/18
April 2019 - DY4, Q1	5/30/2019	N/A
Q2	8/29/2019	N/A
Q3	11/29/2019	N/A
April 2020 - DY5, Q1	5/30/2020	N/A
Q2	8/29/2020	N/A
Q3	11/29/2020	N/A

<b>Annual Reports</b>	<b>Submit to CMS</b>	<b>Date Submitted</b>
2016 - DY1	3/31/2017	3/30/2017
2017 - DY2	3/31/2018	8/8/2018
2018 - DY3	3/31/2019	3/1/2019
2019 - DY4	3/31/2020	N/A
2020 - DY5	3/31/2021	N/A
<b>Post Award Forum</b>	N/A	N/A
2016 - DY1	7/1/2016	6/15/2016
2017 - DY2	7/1/2017	6/20/2017
2018 - DY3	11/1/2018	12/12/2018
2019 - DY4 (combined with amendment public hearing forums)	TBD, two days in June, 2019	N/A
2020 - DY5	11/1/2020	N/A

<b>Other Deliverables</b>	<b>Submit to CMS</b>	<b>Date Submitted</b>
Amendment/Extension/Renewal Request	8/31/2019	N/A
<b>Demonstration Ends</b>	12/31/2020	N/A

**APPENDIX B**

**Montana HELP Program**

**Quarterly Reporting Measures for Quarter1, 2019 (01/01/2019 – 03/31/2019)**

**MT HELP Program 1115 Waiver  
Quarter 1 Measures  
January 2019 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	100122	74817	11274	3401	7868	2762
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	974	634	154	28	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	2856	2086	361	86	243	80

#	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	100122	6210	41434	21447	15473	15266	290
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	974	56	390	212	179	137	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	2856	323	1212	674	357	288	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	100122	16147	428	69220	241	932	13144
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	974	137	5	688	4	19	121
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	2856	458	11	2060	4	28	295

#	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	100122	3012	73448	23662
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	974	27	678	269
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	2856	107	2291	458

#	Measure	Definition	Overall Measure	Female	Male
1	Monthly count of total enrollment	Number of unduplicated individuals enrolled at any time during the month	100122	53654	46468
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	974	424	550
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	2856	1684	1172

### 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	8277	0	4376	0	3901	0
5	Monthly count of beneficiaries in the grace period	Among enrolled individuals who owe premiums, number of beneficiaries who did not pay their premium for the month but are not three months past due	11267	0	6052	0	5215	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	2646	0	0	0	2646	0
7	Monthly count of beneficiaries with collectible debt	Among enrolled individuals who owe premium payments, number of beneficiaries who have collectible debt	5695	0	4119	0	1576	0

### Mid-year change in circumstance in household composition or income

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
8	Monthly count of beneficiaries who gave notice of mid-year change in circumstance in household or income information	Number of enrolled beneficiaries who notified the state of a mid-year change in circumstance and the change was effective during the reporting month	20728	14826	2621	565	2221	494
9	No premium change following mid-year update of household or income information	Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced no change in their premium requirement during the reporting month	19524	14825	2056	565	1583	494
10	Premium increase following mid-year update of household or income information	Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced an increase in their premium requirement during the reporting month	830	0	285	0	545	0
11	Premium decrease following mid-year update of household or income information	Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced a decrease in their premium requirement during the reporting month	374	1	280	0	93	0

### Disenrollment 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)	2743	1992	127	86	255	283
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	139	0	0	0	139	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	485	485	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	2119	1507	127	86	116	283

#	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)	2743	252	1135	478	376	421	81
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	139	5	78	36	9	11	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	485	33	210	101	74	67	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	2119	214	847	341	293	343	81

#	Measure	Definition	Overall Measure	Native American/ Alaskan Native	Asian	White	Pacific Islander	Black	Unspecified Race
12	Monthly count of total disenrollment	Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month)	2743	351	7	1991	8	34	352
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	139	0	0	115	0	1	23
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	485	55	3	335	1	13	78
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	2119	296	4	1541	7	20	251

#	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)	2743	61	2075	607
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	139	2	104	33
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	485	14	308	163
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	2119	45	1663	411

#	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)	2743	1475	1268
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	139	87	52
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	485	251	234
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	2119	1137	982



## Cost sharing limit

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
16	Monthly count of beneficiaries who have exceeded 2% co-pay credit but not reached 5% limit	Count of enrolled individuals who have hit 2% co-pay credit since enrollment and must now make cost sharing payments, but who have not yet reached the 5% cost sharing limit	18401	0	10957	0	7444	0
17	Monthly count of beneficiaries who have hit 5% cost sharing limit	Count of enrolled individuals who have hit 5% limit on cost sharing and premiums since enrollment, and no longer make cost sharing payments	128884	128421	180	1	278	4

## 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 six months prior to the reporting month.

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46394	34244	4945	1906	3632	1667
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	0.46	0.46	0.43	0.55	0.42	0.56

#	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	46394	1751	15521	10260	9181	9681	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	0.46	0.24	0.37	0.49	0.59	0.63	0.00

#	Measure	Definition	Overall Measure	Native American/ Alaskan Native	Asian or Pacific Islander	White	Black	Multi-Racial	Unspecified Race
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46394	7232	168	32494	346	658	5496
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	0.46	0.46	0.33	0.47	0.41	0.45	0.42

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non-Hispanic/Latino or Unspecified
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46394	1290	4501
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	0.46	0.43	0.46

#	Measure	Definition	Overall Measure	Female	Male
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46394	27985	18409
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	0.46	0.52	0.40

### Use of other services\*\*

\*\*Measures 20 through 24 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled six months prior to the reporting month.

#	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	0.53	0.55	0.44	0.62	0.45	0.62
20b.	Physician or mid-level practitioner utilization	PMPM utilization of physician or mid-level practitioner visits for currently enrolled beneficiaries	0.68	0.68	0.64	0.75	0.65	0.74
21	Prescription drug use	PMPM prescription fills greater than 28 days for currently enrolled beneficiaries	0.50	0.50	0.48	0.59	0.49	0.60
22	Emergency department utilization, emergency	PMPM emergency department visits for emergent conditions among currently enrolled beneficiaries (i.e. those not subject to a copayment)	0.265	0.295	0.142	0.342	0.128	0.319
23	Emergency department utilization, non-emergency	PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment)	0.000	0.000	0.000	0.000	0.000	0.000
24	Inpatient admissions	PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment)	0.072	0.083	0.027	0.089	0.026	0.095

### Renewal

#	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	10545	10452	36	26	21	10
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	10292	10280	0	9	1	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	19	11	0	4	2	2
28	No premium change	Number of beneficiaries due for renewal in the reporting month who remain eligible, with no change in premium requirement	232	160	36	13	17	6
29	Premium increase	Number of beneficiaries due for renewal in the reporting month who remain eligible, with an increase in required premium	1	0	0	0	1	0
30	Premium decrease	Number of beneficiaries due for renewal in the reporting month who remain eligible, with a decrease required premium	1	1	0	0	0	0

### Complaints, grievances, and appeals

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
31	Complaints and grievances, Medicaid program	Total number of complaints and grievances filed in the reporting month regarding the HELP program	0	N/A	N/A	N/A	N/A	N/A
32	Complaints and grievances, plan administrator	Total number of complaints and grievances filed in the reporting month regarding the plan administrator	0	N/A	N/A	N/A	N/A	N/A
33	Complaints and grievances, provider	Total number of complaints and grievances filed in the reporting month regarding a provider	0	N/A	N/A	N/A	N/A	N/A
34	Appeals, eligibility	Total number of appeals filed in the reporting month regarding eligibility	66	N/A	N/A	N/A	N/A	N/A
35	Appeals, premiums	Total number of appeals filed in the reporting month regarding the size of premium payments	16	N/A	N/A	N/A	N/A	N/A
36	Appeals, denial of benefits	Total number of appeals filed in the reporting month regarding denials of benefits	10	N/A	N/A	N/A	N/A	N/A

### Enrollment duration among disenrollees

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
37	Enrollment duration 0-3 months	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 3 or fewer months at the time of disenrollment	199	171	4	0	14	10
38	Enrollment duration 4-6 months	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for between 4 and 6 months at the time of disenrollment	342	284	11	4	24	19
39	Enrollment duration >6 months	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 6 or more months at the time of disenrollment	2200	1535	112	82	217	254

### Monthly premiums owed at disenrollment

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
40	Amount of monthly premium at time of disenrollment >\$0 and <\$15	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) whose monthly premium at the time of disenrollment was greater than \$0 but less than \$15	23	0	21	0	2	0
41	Amount of monthly premium at time of disenrollment \$15- <\$30	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$15 or greater, but less than \$30	168	0	71	0	97	0
42	Amount of monthly premium at time of disenrollment \$30- <\$50	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$30 or greater, but less than \$50	152	0	27	0	125	0
43	Amount of monthly premium at time of disenrollment \$50- <\$75	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$50 or greater, but less than \$75.	36	0	7	0	29	0
44	Amount of monthly premium at time of disenrollment ≥\$75	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$75 or greater.	6	0	1	0	5	0

### Total debt owed at disenrollment for failure to pay

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
45	Amount of total debt owed at time of disenrollment for failure to pay: <\$50	Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was less than \$50.	0	0	0	0	0	0
46	Amount of total debt owed at time of disenrollment for failure to pay: ≥\$50 but <\$100	Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was greater than or equal to \$50, but less than \$100.	4	0	0	0	4	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.	39	0	0	0	39	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.	99	0	0	0	99	0

**MT HELP Program 1115 Waiver  
Quarter 1 Measures  
February 2019 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	100858	75357	11388	3397	7992	2724
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	900	556	144	27	155	18
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	2942	2144	353	92	259	94

#	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	100858	6196	41725	21719	15541	15356	321
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	900	74	374	215	123	114	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	2942	342	1225	690	391	291	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	100858	16261	442	69818	248	957	13132
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	900	102	2	645	6	16	129
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	2942	488	18	2091	8	31	306

#	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	100858	3056	74136	23666
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	900	33	618	249
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	2942	101	2362	479

#	Measure	Definition	Overall Measure	Female	Male
1	Monthly count of total enrollment	Number of unduplicated individuals enrolled at any time during the month	100858	54039	46819
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	900	408	492
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	2942	1726	1216

### 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	7688	0	4079	0	3609	0
5	Monthly count of beneficiaries in the grace period	Among enrolled individuals who owe premiums, number of beneficiaries who did not pay their premium for the month but are not three months past due	11452	0	6146	0	5306	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	2657	0	0	0	2657	0
7	Monthly count of beneficiaries with collectible debt	Among enrolled individuals who owe premium payments, number of beneficiaries who have collectible debt	5734	0	4129	0	1605	0

### Mid-year change in circumstance in household composition or income

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
8	Monthly count of beneficiaries who gave notice of mid-year change in circumstance in household or income information	Number of enrolled beneficiaries who notified the state of a mid-year change in circumstance and the change was effective during the reporting month	22082	15951	2724	625	2271	509
9	No premium change following mid-year update of household or income information	Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced no change in their premium requirement during the reporting month	20838	15950	2128	625	1624	509
10	Premium increase following mid-year update of household or income information	Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced an increase in their premium requirement during the reporting month	846	0	295	0	551	0
11	Premium decrease following mid-year update of household or income information	Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced a decrease in their premium requirement during the reporting month	398	1	301	0	96	0

### Disenrollment 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)	2410	1708	119	89	243	251
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	154	0	0	0	154	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	554	553	0	0	0	1
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	1702	1155	119	89	89	250

#	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)	2410	201	1054	475	323	287	67
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	154	7	79	36	21	11	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	554	18	254	98	82	102	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	1702	176	721	341	220	174	67

#	Measure	Definition	Overall Measure	Native American/ Alaskan Native	Asian	White	Pacific Islander	Black	Unspecified Race
12	Monthly count of total disenrollment	Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month)	2410	315	10	1749	7	23	306
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	154	0	0	130	0	3	21
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	554	60	7	397	1	8	81
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	1702	255	3	1222	6	12	204

#	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)	2410	96	1742	572
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	154	6	116	32
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	554	23	339	192
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	1702	267	1287	348

#	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)	2410	1251	1159
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	154	92	62
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	554	262	292
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	1702	897	805

## Cost sharing limit

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
16	Monthly count of beneficiaries who have exceeded 2% co-pay credit but not reached 5% limit	Count of enrolled individuals who have hit 2% co-pay credit since enrollment and must now make cost sharing payments, but who have not yet reached the 5% cost sharing limit	650	0	300	0	350	0
17	Monthly count of beneficiaries who have hit 5% cost sharing limit	Count of enrolled individuals who have hit 5% limit on cost sharing and premiums since enrollment, and no longer make cost sharing payments	4509	4034	164	0	308	3

## 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 six months prior to the reporting month.

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46439	34315	4953	1934	3577	1660
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	0.46	0.46	0.43	0.56	0.42	0.56

#	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	46439	1729	15593	10223	9189	9705	0
019	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	0.46	0.23	0.37	0.49	0.59	0.63	0.00

#	Measure	Definition	Overall Measure	Native American/Alaskan Native	Asian or Pacific Islander	White	Black	Multi-Racial	Unspecified Race
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46439	7278	168	32485	338	652	5518
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	0.46	0.47	0.33	0.47	0.39	0.44	0.42

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non-Hispanic/Latino or Unspecified
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46439	1300	45139
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	0.46	0.42	0.46

#	Measure	Definition	Overall Measure	Female	Male
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46439	28013	18426
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	0.46	0.52	0.39

### Use of other services\*\*

\*\*Measures 20 through 24 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled six months prior to the reporting month.

#	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	0.54	0.55	0.47	0.63	0.47	0.62
20b.	Physician or mid-level practitioner utilization	PMPM utilization of physician or mid-level practitioner visits for currently enrolled beneficiaries	0.68	0.68	0.66	0.76	0.66	0.75
21	Prescription drug use	PMPM prescription fills greater than 28 days for currently enrolled beneficiaries	0.50	0.50	0.48	0.60	0.49	0.60
22	Emergency department utilization, emergency	PMPM emergency department visits for emergent conditions among currently enrolled beneficiaries (i.e. those not subject to a copayment)	0.268	0.294	0.158	0.343	0.141	0.324
23	Emergency department utilization, non-emergency	PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment)	0.000	0.000	0.000	0.000	0.000	0.000
24	Inpatient admissions	PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment)	0.074	0.084	0.031	0.094	0.029	0.097

### Renewal

#	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	11085	11031	21	13	15	5
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	10931	10926	0	4	0	1
27	Number who lost eligibility	Number of beneficiaries due for renewal in the reporting month who respond to renewal notices, but are determined ineligible for the HELP program	10	5	1	3	0	1
28	No premium change	Number of beneficiaries due for renewal in the reporting month who remain eligible, with no change in premium requirement	141	100	18	6	14	3
29	Premium increase	Number of beneficiaries due for renewal in the reporting month who remain eligible, with an increase in required premium	2	0	1	0	1	0
30	Premium decrease	Number of beneficiaries due for renewal in the reporting month who remain eligible, with a decrease required premium	1	0	1	0	0	0

### Complaints, grievances, and appeals

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
31	Complaints and grievances, Medicaid program	Total number of complaints and grievances filed in the reporting month regarding the HELP program	0	N/A	N/A	N/A	N/A	N/A
32	Complaints and grievances, plan administrator	Total number of complaints and grievances filed in the reporting month regarding the plan administrator	0	N/A	N/A	N/A	N/A	N/A
33	Complaints and grievances, provider	Total number of complaints and grievances filed in the reporting month regarding a provider	0	N/A	N/A	N/A	N/A	N/A
34	Appeals, eligibility	Total number of appeals filed in the reporting month regarding eligibility	53	N/A	N/A	N/A	N/A	N/A
35	Appeals, premiums	Total number of appeals filed in the reporting month regarding the size of premium payments	13	N/A	N/A	N/A	N/A	N/A
36	Appeals, denial of benefits	Total number of appeals filed in the reporting month regarding denials of benefits	12	N/A	N/A	N/A	N/A	N/A



### Enrollment duration among disenrollees

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
37	Enrollment duration 0-3 months	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 3 or fewer months at the time of disenrollment	111	91	4	1	11	4
38	Enrollment duration 4-6 months	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for between 4 and 6 months at the time of disenrollment	272	220	9	5	21	17
39	Enrollment duration >6 months	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 6 or more months at the time of disenrollment	2025	1395	106	83	211	230

### Monthly premiums owed at disenrollment

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
40	Amount of monthly premium at time of disenrollment >\$0 and <\$15	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) whose monthly premium at the time of disenrollment was greater than \$0 but less than \$15	11	0	11	0	0	0
41	Amount of monthly premium at time of disenrollment \$15- <\$30	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$15 or greater, but less than \$30	163	0	81	0	82	0
42	Amount of monthly premium at time of disenrollment \$30- <\$50	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$30 or greater, but less than \$50	137	0	24	0	113	0
43	Amount of monthly premium at time of disenrollment \$50- <\$75	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$50 or greater, but less than \$75.	43	0	3	0	40	0
44	Amount of monthly premium at time of disenrollment ≥\$75	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$75 or greater.	8	0	0	0	8	0

### Total debt owed at disenrollment for failure to pay

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
45	Amount of total debt owed at time of disenrollment for failure to pay: <\$50	Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was less than \$50.	2	0	0	0	2	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.	3	0	0	0	3	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.	37	0	0	0	37	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.	112	0	0	0	112	0

**MT HELP Program 1115 Waiver  
Quarter 1 Measures  
March 2019 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	100175	74735	11395	3385	7965	2695
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	1019	644	175	26	144	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	3210	2346	378	110	284	92

#	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	100175	6056	41295	21733	15475	15297	317
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	1019	75	421	188	172	163	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	3210	345	1336	735	445	343	6

#	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	100175	16190	444	69457	252	959	12903
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	1019	124	10	737	4	17	127
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	3210	484	13	2353	7	41	312

#	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	100175	3048	73855	23272
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	1019	32	719	268
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	3210	90	2649	471

#	Measure	Definition	Overall Measure	Female	Male
1	Monthly count of total enrollment	Number of unduplicated individuals enrolled at any time during the month	100175	53669	46506
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	1019	433	586
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	3210	1883	1327

### 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	8734	0	4704	0	4030	0
5	Monthly count of beneficiaries in the grace period	Among enrolled individuals who owe premiums, number of beneficiaries who did not pay their premium for the month but are not three months past due	11778	0	6388	0	5390	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	2547	0	0	0	2547	0
7	Monthly count of beneficiaries with collectible debt	Among enrolled individuals who owe premium payments, number of beneficiaries who have collectible debt	5767	0	4147	0	1620	0

### Mid-year change in circumstance in household composition or income

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
8	Monthly count of beneficiaries who gave notice of mid-year change in circumstance in household or income information	Number of enrolled beneficiaries who notified the state of a mid-year change in circumstance and the change was effective during the reporting month	23429	17024	2861	686	2306	550
9	No premium change following mid-year update of household or income information	Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced no change in their premium requirement during the reporting month	22109	17023	2208	686	1640	550
10	Premium increase following mid-year update of household or income information	Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced an increase in their premium requirement during the reporting month	886	0	321	0	565	0
11	Premium decrease following mid-year update of household or income information	Number of beneficiaries who notified the state of a mid-year change in circumstance and experienced a decrease in their premium requirement during the reporting month	434	1	332	0	101	0

### Disenrollment 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)	3438	2655	114	102	253	314
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	133	0	0	0	133	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	1098	1097	0	1	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	2207	1558	114	101	120	314

#	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)	3438	254	1567	654	451	423	89
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	133	10	74	26	20	3	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	1098	65	530	209	146	148	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	2207	179	963	419	285	272	89

#	Measure	Definition	Overall Measure	Native American/ Alaskan Native	Asian	White	Pacific Islander	Black	Unspecified Race
12	Monthly count of total disenrollment	Number of beneficiaries disenrolled from the HELP program mid-year in the reporting month (exclude beneficiaries who disenrolled during their renewal month)	3438	442	18	2437	8	39	494
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	133	0	0	103	2	4	24
14	Monthly count of disenrollment, continuous eligibility exceptions	Number of beneficiaries disenrolled mid-year in the reporting month (not their renewal month) due to specifically noted continuous eligibility exceptions for individuals	1098	115	4	773	1	17	188
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	2207	327	14	1561	1	18	282

#	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)	3438	124	2459	855
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	133	5	99	29
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	1098	40	687	371
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	2207	79	1673	455

#	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)	3438	1733	1705
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	133	75	58
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	1098	537	561
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	2207	1121	1086

### Cost sharing limit

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
16	Monthly count of beneficiaries who have exceeded 2% co-pay credit but not reached 5% limit	Count of enrolled individuals who have hit 2% co-pay credit since enrollment and must now make cost sharing payments, but who have not yet reached the 5% cost sharing limit	478	0	221	0	257	0
17	Monthly count of beneficiaries who have hit 5% cost sharing limit	Count of enrolled individuals who have hit 5% limit on cost sharing and premiums since enrollment, and no longer make cost sharing payments	3866	3407	192	0	266	1

### 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 six months prior to the reporting month.

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46377	34386	34386	1941	3523	1651
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	0.46	0.46	0.43	0.57	0.43	0.57

#	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	46377	1732	15603	10193	9139	9710	0
019	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	0.46	0.23	0.38	0.49	0.59	0.63	0.00

#	Measure	Definition	Overall Measure	Native American/ Alaskan Native	Asian or Pacific Islander	White	Black	Multi-Racial	Unspecified Race
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46377	7296	177	32387	346	667	5504
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	0.46	0.47	0.35	0.47	0.40	0.45	0.42

#	Measure	Definition	Overall Measure	Hispanic/Latino	Non-Hispanic/Latino or Unspecified
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46377	1297	45080
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	0.46	0.42	0.46

#	Measure	Definition	Overall Measure	Female	Male
18	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	Monthly count of beneficiaries who have accessed incentivized preventive services, overall	46377	28016	18361
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	0.46	0.52	0.39

### Use of other services\*\*

\*\*Measures 20 through 24 incorporate a six-month lag to allow for claim submission; these numbers correlate with members enrolled six months prior to the reporting month.

#	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	0.54	0.55	0.49	0.63	0.49	0.62
20b.	Physician or mid-level practitioner utilization	PMPM utilization of physician or mid-level practitioner visits for currently enrolled beneficiaries	0.68	0.68	0.68	0.76	0.68	0.75
21	Prescription drug use	PMPM prescription fills greater than 28 days for currently enrolled beneficiaries	0.50	0.49	0.49	0.60	0.49	0.60
22	Emergency department utilization, emergency	PMPM emergency department visits for emergent conditions among currently enrolled beneficiaries (i.e. those not subject to a copayment)	0.271	0.295	0.168	0.346	0.151	0.326
23	Emergency department utilization, non-emergency	PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment)	0.000	0.000	0.000	0.000	0.000	0.000
24	Inpatient admissions	PMPM emergency department visits for non-emergent conditions among currently enrolled beneficiaries (i.e. those subject to a copayment)	0.075	0.084	0.034	0.094	0.031	0.101

### Renewal

#	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	11863	11799	21	18	11	14
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	11696	11689	0	5	0	2
27	Number who lost eligibility	Number of beneficiaries due for renewal in the reporting month who respond to renewal notices, but are determined ineligible for the HELP program	18	7	0	6	0	5
28	No premium change	Number of beneficiaries due for renewal in the reporting month who remain eligible, with no change in premium requirement	143	102	18	7	9	7
29	Premium increase	Number of beneficiaries due for renewal in the reporting month who remain eligible, with an increase in required premium	3	0	2	0	1	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

### Complaints, grievances, and appeals

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
31	Complaints and grievances, Medicaid program	Total number of complaints and grievances filed in the reporting month regarding the HELP program	0	N/A	N/A	N/A	N/A	N/A
32	Complaints and grievances, plan administrator	Total number of complaints and grievances filed in the reporting month regarding the plan administrator	0	N/A	N/A	N/A	N/A	N/A
33	Complaints and grievances, provider	Total number of complaints and grievances filed in the reporting month regarding a provider	0	N/A	N/A	N/A	N/A	N/A
34	Appeals, eligibility	Total number of appeals filed in the reporting month regarding eligibility	45	N/A	N/A	N/A	N/A	N/A
35	Appeals, premiums	Total number of appeals filed in the reporting month regarding the size of premium payments	18	N/A	N/A	N/A	N/A	N/A
36	Appeals, denial of benefits	Total number of appeals filed in the reporting month regarding denials of benefits	9	N/A	N/A	N/A	N/A	N/A

### Enrollment duration among disenrollees

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
37	Enrollment duration 0-3 months	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 3 or fewer months at the time of disenrollment	114	90	3	1	9	11
38	Enrollment duration 4-6 months	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for between 4 and 6 months at the time of disenrollment	378	287	17	8	37	29
39	Enrollment duration >6 months	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) who had been enrolled in the demonstration for 6 or more months at the time of disenrollment	2941	2273	94	93	207	274

### Monthly premiums owed at disenrollment

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
40	Amount of monthly premium at time of disenrollment >\$0 and <\$15	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12) whose monthly premium at the time of disenrollment was greater than \$0 but less than \$15	13	0	13	0	0	0
41	Amount of monthly premium at time of disenrollment \$15- <\$30	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$15 or greater, but less than \$30	172	0	75	0	97	0
42	Amount of monthly premium at time of disenrollment \$30- <\$50	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$30 or greater, but less than \$50	136	0	24	0	112	0
43	Amount of monthly premium at time of disenrollment \$50- <\$75	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$50 or greater, but less than \$75.	34	0	2	0	32	0
44	Amount of monthly premium at time of disenrollment ≥\$75	Number of beneficiaries disenrolled from the demonstration in the reporting month (measure 12), whose monthly premium at the time of disenrollment was \$75 or greater.	12	0	0	0	12	0

### Total debt owed at disenrollment for failure to pay

#	Measure	Definition	Overall Measure	< 50% FPL	50-100% FPL w/premium	50-100% FPL no premium	>100% FPL w/premium	>100% FPL no premium
45	Amount of total debt owed at time of disenrollment for failure to pay: <\$50	Number of beneficiaries disenrolled from the demonstration in the reporting month for failure to pay (measure 13), whose total debt owed at the time of disenrollment was less than \$50.	2	0	0	0	2	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.	3	0	0	0	3	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.	35	0	0	0	35	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.	93	0	0	0	93	0

# MONTANA HEALTH AND ECONOMIC LIVELIHOOD PARTNERSHIP (HELP) PROGRAM

**DY 4 (CY2019) - Q1**

**From Waiver Inception Forward**

## HELP Budget Neutrality – With Waiver and Without Waiver

n/a	CY16	CY17	CY18	CY19	CY20
Member Months	390,384	480,541	542,012	578,307	585,536
Medicaid Services PMPM	\$ 532.79	\$ 554.63	\$ 577.37	\$ 601.05	\$ 625.69
<b>Total Expense</b>	<b>\$ 208,152,528</b>	<b>\$ 266,524,742</b>	<b>\$ 313,521,050</b>	<b>\$ 347,589,814</b>	<b>\$ 366,364,009</b>

## HELP Actual Expenditures and Enrollment

n/a	CY16	CY17	CY18	CY19 1/1/19 – 3/31/19 (accumulating through the year)	CY20
Member Months	666,385	1,016,759	1,194,610	496,381	(pending)
Medicaid Services PMPM	\$ 369.59	\$ 384.00	\$ 222.42	\$ 319.27	(pending)
<b>Total Expense</b>	<b>\$ 246,289,033</b>	<b>\$ 390,436,906</b>	<b>\$ 265,701,160</b>	<b>\$ 158,481,479</b>	<b>(pending)</b>