

### PERFORMANCE INDICATORS SAMPLE HOUSEHOLDS

#### September 2015

The following examples describe three sample households and show how they would be reported in the performance indicators.

### **EXAMPLE 1**

The Adams household includes a pregnant mother; her husband, who is disabled; and their 3-year-old child. On January 28, 2015, the family applies online for health care coverage through the state-based marketplace (SBM) in a state that does not have a separate Children's Health Insurance Program (CHIP) agency. On February 9, 2015, the pregnant mother is determined eligible for Medicaid under modified adjusted gross income (MAGI) eligibility rules. That same day, her 3-year-old daughter is determined eligible for a Medicaid-expansion CHIP group under MAGI eligibility rules. On March 15, 2015, the father is determined eligible in a non-MAGI eligibility group. All three family members are awarded eligibility back to the date of application, January 28.

Table 1 summarizes how this family's path through the application, eligibility determination, and enrollment process should be captured in the performance indicator monthly submissions.

Table 1. Adams household's path through the performance indicators

		Included in performance indicators data submission?		
		January 2015 submission (due Feb. 8)	February 2015 submission (due Mar. 8)	March 2015 submission (due Apr. 8)
Indic	cator 5: Applications received			
5a	Total applications	Yes, 1 application	No	No
5b	Applications received by Medicaid Agency	No	No	No
5h	Applications received by CHIP Agency	No	No	No
5n	Applications received by SBM	Yes, 1 application	No	No
Indic	cator 7: Renewals			
	All fields	No	No	No
Indic	cator 8: Enrollment			
8a	Total Medicaid enrollment	No <sup>1</sup>	Yes, 1 enrollee (mother) <sup>1</sup>	Yes, 2 enrollees (mother and father) <sup>1</sup>
8b	Medicaid MAGI enrollees	No	Yes, 1 enrollee (mother)	Yes, 1 enrollee (mother)
8c	Medicaid MAGI child enrollees	No	No	No
8d	Medicaid MAGI adult enrollees	No	Yes, 1 enrollee (mother)	Yes, 1 enrollee (mother)



		Included in performance indicators data submission?		
		January 2015 submission (due Feb. 8)	February 2015 submission (due Mar. 8)	March 2015 submission (due Apr. 8)
8e	Medicaid non-MAGI enrollees	No	No	Yes, 1 enrollee (father)
8f	Medicaid non-MAGI child enrollees	No	No	No
8g	Medicaid non-MAGI adult enrollees	No	No	Yes, 1 enrollee (father)
8h	Total CHIP enrollment	No	Yes, 1 enrollee (child) <sup>1</sup>	Yes, 1 enrollee (child)
Indic	ator 9: Determined eligible			
9a	Total Medicaid eligible	No	Yes, 1 determination (mother)	Yes, 1 determination (father)
9b	Medicaid MAGI determinations	No	Yes, 1 determination (mother)	No
9c	Medicaid non-MAGI determinations	No	No	Yes, 1 determination (father)
9d	Medicaid – determined at application	No	Yes, 1 determination (mother)	Yes, 1 determination (father)
9e	Medicaid – determined at application under MAGI rules	No	Yes, 1 determination (mother)	No
9f	Medicaid – determined at application under non-MAGI rules	No	No	Yes, 1 determination (father)
9g	Medicaid – determined at annual renewal	No	No	No
9h	Medicaid – administrative determination	No	No	No
9i	Medicaid – other method	No	No	No
9ј	Total CHIP eligible	No	Yes, 1 determination (child)	No
9k	CHIP eligible at application	No	Yes, 1 determination (child)	No
91	CHIP eligible at annual renewal	No	No	No
9m	All others determined CHIP eligible	No	No	No
Indic	ator 10: Determined ineligible			
	All fields	No	No	No
Indicator 11: Pending applications/redeterminations				
11a	Number pending at Medicaid agency <sup>2</sup>	Yes, 1 household or 3 individuals (mother, father, and child)	Yes, 1 household or 1 individual (father)	No
11c	Number pending at separate CHIP agency	No	No	No



		Included in performance indicators data submission?		
		January 2015 submission (due Feb. 8)	February 2015 submission (due Mar. 8)	March 2015 submission (due Apr. 8)
Indic	ator 12: Application processing time <sup>3</sup>			
12a	Median processing time – All Medicaid determinations	No	Yes, 12 days (mother) and 12 days (child)	Yes, 46 days (father)
12b	Median processing time – MAGI determinations	No	Yes, 12 days (mother) and 12 days (child)	No
12c	Median processing time – non-MAGI determinations	No	No	Yes, 46 days (father)
12d	Median processing time – direct application	No	Yes, 12 days (mother) and 12 days (child)	Yes, 46 days (father)
12e	Median processing time – transfer application from FFM	No	No	No
Num	ber of MAGI determinations in:			
12f	Less than 24 hours	No	No	No
12g	24 hours-7 days	No	No	No
12h	8 days–30 days	No	Yes, 2 (mother and child)	No
12i	31 days–45 days	No	No	No
12j	More than 45 days	No	No	No
Number of non-MAGI determinations in:				
12k	Less than 30 days	No	No	No
121	31 days–60 days	No	No	Yes, 1 (father)
12m	61 days–90 days	No	No	No
12n	More than 90 days	No	No	No

<sup>&</sup>lt;sup>1</sup> Although the mother, father, and child are awarded eligibility back to the date of application (January 28), and thus all would be enrollees as of the last day of the January reporting period, the state system tracking enrollment will not have a record of the mother and child's enrollment as of the January submission due date, as the determinations were made after February 8. When January enrollment numbers are updated (at the same time the state submits its February data on March 8), the data should reflect that both the mother and child were enrolled effective January 28. The father's enrollment back to the date of application will not be available for the initial January or February submissions. However, his enrollment should be included in the March submission and in the updated February submission, both of which are due on April 8.

### **EXAMPLE 2**

The Morgan household includes a mother with a disability and her 9-year-old child living in a state that uses the federally facilitated marketplace (FFM) and does not have a separate CHIP agency. In June 2014, the mother is determined eligible for Medicaid under non-MAGI eligibility rules and enrolled, and her child is determined eligible for a Medicaid-expansion CHIP

<sup>&</sup>lt;sup>2</sup> States can report either the number of households or the number of individuals awaiting determination in the pending indicator.

<sup>&</sup>lt;sup>3</sup> Processing time counts calendar days, not business days.



group and enrolled. In June 2015, the household received and responded to the state's renewal form with the requested verification information for the child, but did not include the requested verification information for the mother. On July 3, 2015, the child was redetermined eligible for CHIP. On August 30, 2015, the mother's account was closed due to lack of response.

Table 2 summarizes how this family's path through the renewal, eligibility determination, and enrollment process in 2015 should be captured in the performance indicator monthly submissions.

Table 2. Morgan household's path through the performance indicators in 2015

		Included in performance indicators data submission?		
		June 2015 submission (due July 8)	July 2015 submission (due Aug. 8)	August 2015 submission (due Sept. 8)
Indica	ator 5: Applications received			
	All fields	No	No	No
Indica	ator 7: Renewals			
7a	Number of renewals up for annual redetermination	Yes, mother and child	No	No
7b	Medicaid MAGI renewals	No	No	No
7c	Medicaid non-MAGI renewals	Yes, mother	No	No
7d	CHIP renewals	Yes, child	No	No
Indica	ator 8: Enrollment			
8a	Total Medicaid enrollment	Yes, 1 enrollee (mother)	Yes, 1 enrollee (mother)	No <sup>1</sup>
8b	Medicaid MAGI enrollees	No	No	No
8c	Medicaid MAGI child enrollees	No	No	No
8d	Medicaid MAGI adult enrollees	No	No	No
8e	Medicaid non-MAGI enrollees	Yes, 1 enrollee (mother)	Yes, 1 enrollee (mother)	No
8f	Medicaid non-MAGI child enrollees	No	No	No
8g	Medicaid non-MAGI adult enrollees	Yes, 1 enrollee (mother)	Yes, 1 enrollee (mother)	No
8h	Total CHIP enrollment	Yes, 1 enrollee (child)	Yes, 1 enrollee (child)	Yes, 1 enrollee (child)
Indica	ator 9: Determined eligible			
9a	Total Medicaid eligible	No	No	No
9b	Medicaid MAGI determinations	No	No	No
9c	Medicaid non-MAGI determinations	No	No	No
9d	Medicaid – determined at application	No	No	No
9e	Medicaid – determined at application under MAGI rules	No	No	No
9f	Medicaid – determined at application under non-MAGI rules	No	No	No
9g	Medicaid – determined at annual renewal	No	No	No



		Included in performance indicators data submission?		
		June 2015 submission (due July 8)	July 2015 submission (due Aug. 8)	August 2015 submission (due Sept. 8)
9h	Medicaid – administrative determination	No	No	No
9i	Medicaid – other method	No	No	No
9j	Total CHIP eligible	No	Yes, 1 determination (child)	No
9k	CHIP eligible at application	No	No	No
91	CHIP eligible at annual renewal	No	Yes, 1 determination (child)	No
9m	All others determined CHIP eligible	No	No	No
Indica	tor 10: Determined ineligible			
10a	Total Medicaid ineligible	No	No	Yes, 1 determinatior (mother)
10b	Medicaid – ineligibility established	No	No	No
10c	Medicaid - eligibility cannot be established	No	No	Yes, 1 determination (mother)
10d	Medicaid – ineligible at application	No	No	No
10e	Medicaid – ineligible at annual renewal	No	No	Yes, 1 determinatior (mother)
10f	Medicaid – other ineligible	No	No	No
Indica	tor 11: Pending applications/redeterminations			
11a	Number pending at Medicaid agency	Yes, 1 household or 2 individuals (child and mother)	Yes, 1 household or 1 individual (mother) <sup>2</sup>	No <sup>3</sup>
11c	Number pending at CHIP agency	No	No	No
Indica	tor 12: Application processing time (all sub-in	dicators)		
	All fields	No	No	No

<sup>&</sup>lt;sup>1</sup> Because the enrollment indicator captures point-in-time enrollment as of the last day of the month, the mother is not counted in the enrollment indicator for August 2015 because she was not enrolled on August 31, the last day of the month. Her account was closed due to lack of response on August 30.

# **EXAMPLE 3**

The Clark household includes a single male adult in an FFM assessment state. On January 4, 2015, he applies online to the FFM, and his electronic account is transferred to the state

<sup>&</sup>lt;sup>2</sup> The mother is included in the count for the pending indicator in July 2015 because pending cases should be included, even if the case is pending due to outstanding verification items on the part of the applicant or renewing household.

<sup>&</sup>lt;sup>3</sup> The mother is not included in the count for the pending indicator in August 2015 because the pending indicator is a point-in-time count that captures pending applications or renewals as of the last day of the month, and the mother's account was closed on August 30 due to a lack of response with the requested verification information.



Medicaid agency on the same day. On January 5, he is determined eligible under MAGI eligibility rules. Two months later, on March 6, he moves out of the state and reports the change to the Medicaid agency, which results in his disenrollment from Medicaid on March 14.

Table 3 summarizes how Mr. Clark's path through the application, eligibility determination, and enrollment process should be captured in the performance indicator monthly submissions.

Table 3. Clark household's path through the performance indicators

		Included in performance indicators data submission?		
		January 2015 submission (due Feb. 8)	February 2015 submission (due Mar. 8)	March 2015 submission (due Apr. 8)
Indic	ator 5: Applications received <sup>1</sup>			
	All fields	No	No	No
Indic	ator 7: Renewals			
	All fields	No	No	No
Indic	ator 8: Enrollment			
8a	Total Medicaid enrollment	Yes, 1 enrollee	Yes, 1 enrollee	No
8b	Medicaid MAGI enrollees	Yes, 1 enrollee	Yes, 1 enrollee	No
8c	Medicaid MAGI child enrollees	No	No	No
8d	Medicaid MAGI adult enrollees	Yes, 1 enrollee	Yes, 1 enrollee	No
8e	Medicaid non-MAGI enrollees	No	No	No
8f	Medicaid non-MAGI child enrollees	No	No	No
8g	Medicaid non-MAGI adult enrollees	No	No	No
8h	Total CHIP enrollment	No	No	No
Indic	ator 9: Determined eligible			
9a	Total Medicaid eligible	Yes, 1 determination	No	No
9b	Medicaid MAGI determinations	Yes, 1 determination	No	No
9c	Medicaid non-MAGI determinations	No	No	No
9d	Medicaid – determined at application	Yes, 1 determination	No	No
9e	Medicaid – determined at application under MAGI rules	Yes, 1 determination	No	No
9f	Medicaid – determined at application under non-MAGI rules	No	No	No
9g	Medicaid – determined at annual renewal	No	No	No
9h	Medicaid – administrative determination	No	No	No
9i	Medicaid – other method	No	No	No
9j	Total CHIP eligible	No	No	No
9k	CHIP eligible at application	No	No	No
91	CHIP eligible at annual renewal	No	No	No



		Included in performance indicators data submission		
		January 2015 submission (due Feb. 8)	February 2015 submission (due Mar. 8)	March 2015 submission (due Apr. 8)
9m	All others determined CHIP eligible	No	No	No
Indica	ator 10: Determined ineligible			
10a	Total Medicaid ineligible	No	No	Yes, 1 determination
10b	Medicaid – ineligibility established	No	No	Yes, 1 determination
10c	Medicaid – eligibility cannot be established	No	No	No
10d	Medicaid – ineligible at application	No	No	No
10e	Medicaid – ineligible at annual renewal	No	No	No
10f	Medicaid – other ineligible	No	No	Yes, 1 determination <sup>2</sup>
Indica	ator 11: Pending applications/redetermination	าร		
	All fields	No	No	No
Indica	ator 12: Application processing time <sup>3</sup>			
12a	Median processing time – all Medicaid determinations	Yes, 1 day	No	No <sup>4</sup>
12b	Median processing time – MAGI determinations	Yes, 1 day	No	No
12c	Median processing time – non-MAGI determinations	No	No	No
12d	Median processing time – direct application	No	No	No
12e	Median processing time – transfer application from FFM	Yes, 1 day	No	No
Numb	per of MAGI determinations in:			
12f	Less than 24 hours	No	No	No
12g	24 hours–7 days	Yes, 1 determination	No	No
12h	8 days–30 days	No	No	No
12i	31 days–45 days	No	No	No
12j	More than 45 days	No	No	No

<sup>&</sup>lt;sup>1</sup> Accounts transferred from the FFM are not included in the applications indicator.

<sup>&</sup>lt;sup>2</sup> Reporting a move out of the state would trigger a redetermination made outside of the annual renewal process, which is reported under Medicaid Determination – Other Ineligible (10f).

<sup>&</sup>lt;sup>3</sup> Processing time counts calendar days, not business days.

<sup>&</sup>lt;sup>4</sup> This indicator only applies to determinations at application and does not apply to redeterminations (in this example, one prompted by the household reporting a move out of state).



## **RESOURCES**

Additional resources on the performance indicators, including a data dictionary, compendium of Frequently Asked Questions (FAQs), and trainings on the performance indicator data, are available on the Performance Indicator Technical Assistance webpage: <a href="http://medicaid.gov/medicaid-chip-program-information/program-information/sdis.html">http://medicaid.gov/medicaid-chip-program-information/program-information/sdis.html</a>.

States are encouraged to contact the CMS PI team with any questions by emailing <a href="PerformanceindicatorsTA@cms.hhs.gov">PerformanceindicatorsTA@cms.hhs.gov</a>.