

PERFORMANCE INDICATORS SAMPLE HOUSEHOLDS

August 2016

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, 2016, 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 or separate CHIP application process. On February 9, 2016, 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, 2016, 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 2016 submission (due Feb. 8)	February 2016 submission (due Mar. 8)	March 2016 submission (due Apr. 8)
Indicator 4: Number of applications received				
4a	Total applications received	Yes, 1 application	No	No
4b	Applications received by Medicaid agency	No	No	No
4e	Applications received by separate CHIP agency through separate CHIP application process	No	No	No
4h	Applications for financial assistance received by SBM	Yes, 1 application	No	No
Indicator 6: Number of Renewals				
	All fields	No	No	No
Indicator 7: Total Enrollment				
7a	Total Medicaid enrollees	No ¹	Yes, 1 enrollee (mother) ¹	Yes, 2 enrollees (mother and father) ¹
7b	Medicaid MAGI enrollees	No	Yes, 1 enrollee (mother)	Yes, 1 enrollee (mother)
7c	Medicaid MAGI child enrollees	No	No	No

		Included in performance indicators data submission?		
		January 2016 submission (due Feb. 8)	February 2016 submission (due Mar. 8)	March 2016 submission (due Apr. 8)
7d	Medicaid MAGI adult enrollees	No	Yes, 1 enrollee (mother)	Yes, 1 enrollee (mother)
7e	Medicaid non-MAGI enrollees	No	No	Yes, 1 enrollee (father)
7f	Medicaid non-MAGI child enrollees	No	No	No
7g	Medicaid non-MAGI adult enrollees	No	No	Yes, 1 enrollee (father)
7h	Total CHIP enrollees	No	Yes, 1 enrollee (child) ¹	Yes, 1 enrollee (child)
Indicator 8: Total number of individuals determined eligible				
8a	Total individuals determined Medicaid eligible	No	Yes, 1 determination (mother)	Yes, 1 determination (father)
8b	Medicaid MAGI eligible determinations	No	Yes, 1 determination (mother)	No
8c	Medicaid non-MAGI eligible determinations	No	No	Yes, 1 determination (father)
8d	Determined Medicaid eligible at application	No	Yes, 1 determination (mother)	Yes, 1 determination (father)
8e	Determined Medicaid eligible at application under MAGI rules	No	Yes, 1 determination (mother)	No
8f	Determined Medicaid eligible at application under non-MAGI rules	No	No	Yes, 1 determination (father)
8g	Determined Medicaid eligible at annual renewal	No	No	No
8h	Determined Medicaid eligible via administrative determination	No	No	No
8i	All others determined Medicaid eligible	No	No	No
8j	Total individuals determined CHIP eligible	No	Yes, 1 determination (child)	No
8k	Determined CHIP eligible at application	No	Yes, 1 determination (child)	No
8l	Determined CHIP eligible at annual renewal	No	No	No
8m	All others determined CHIP eligible	No	No	No
Indicator 9: Total number of individuals determined ineligible				
	All fields	No	No	No
Indicator 10: Pending applications/redeterminations				
10a	Number pending at Medicaid agency ²	Yes, 1 household or 3 individuals (mother, father, and child)	Yes, 1 household or 1 individual (father)	No

		Included in performance indicators data submission?		
		January 2016 submission (due Feb. 8)	February 2016 submission (due Mar. 8)	March 2016 submission (due Apr. 8)
10c	Number pending at separate CHIP agency	No	No	No

		Included in performance indicators data submission?		
		January 2016 submission (due Feb. 8)	February 2016 submission (due Mar. 8)	March 2016 submission (due Apr. 8)
Indicator 11: Processing time for determinations at application³				
11a	Median processing time – all Medicaid and CHIP determinations at application	No	Yes, 12 days (mother) and 12 days (child)	Yes, 46 days (father)
11b	Median processing time – MAGI Medicaid and CHIP determinations at application	No	Yes, 12 days (mother) and 12 days (child)	No
11c	Median processing time – non-MAGI determinations at application	No	No	Yes, 46 days (father)
11d	Median processing time – direct application to state agency	No	Yes, 12 days (mother) and 12 days (child)	Yes, 46 days (father)
11e	Median processing time – transfer application from FFM	No	No	No
Number of MAGI Medicaid and CHIP determinations at application in:				
11f	Less than 24 hours	No	No	No
11g	24 hours–7 days	No	No	No
11h	8 days–30 days	No	Yes, 2 (mother and child)	No
11i	31 days–45 days	No	No	No
11j	More than 45 days	No	No	No
Number of non-MAGI determinations at application in:				
11k	Less than 30 days	No	No	No
11l	31 days–60 days	No	No	Yes, 1 (father)
11m	61 days–90 days	No	No	No
11n	More than 90 days	No	No	No

¹ 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.

² States can report either the number of households or the number of individuals awaiting determination in the pending indicator.

³ Processing time counts calendar days, not business days.

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 2015, 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

group and enrolled. In June 2016, 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, 2016, the child was redetermined eligible for CHIP. On August 30, 2016, 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 2016 should be captured in the performance indicator monthly submissions.

Table 2. Morgan household’s path through the performance indicators in 2016

		Included in performance indicators data submission?		
		June 2016 submission (due July 8)	July 2016 submission (due Aug. 8)	August 2016 submission (due Sept. 8)
Indicator 4: Number of applications received				
All fields		No	No	No
Indicator 6: Number of Renewals				
6a	Number of renewals up for annual redetermination	Yes, mother and child	No	No
6b	Medicaid MAGI renewals	No	No	No
6c	Medicaid non-MAGI renewals	Yes, mother	No	No
6d	CHIP renewals	Yes, child	No	No
Indicator 7: Total Enrollment				
7a	Total Medicaid enrollment	Yes, 1 enrollee (mother)	Yes, 1 enrollee (mother)	No ¹
7b	Medicaid MAGI enrollees	No	No	No
7c	Medicaid MAGI child enrollees	No	No	No
7d	Medicaid MAGI adult enrollees	No	No	No
7e	Medicaid non-MAGI enrollees	Yes, 1 enrollee (mother)	Yes, 1 enrollee (mother)	No
7f	Medicaid non-MAGI child enrollees	No	No	No
7g	Medicaid non-MAGI adult enrollees	Yes, 1 enrollee (mother)	Yes, 1 enrollee (mother)	No
7h	Total CHIP enrollees	Yes, 1 enrollee (child)	Yes, 1 enrollee (child)	Yes, 1 enrollee (child)
Indicator 8: Total number of individuals determined eligible				
8a	Total individuals determined Medicaid eligible	No	No	No
8b	Medicaid MAGI eligible determinations	No	No	No
8c	Medicaid non-MAGI eligible determinations	No	No	No
8d	Determined Medicaid eligible at application	No	No	No
8e	Determined Medicaid eligible at application under MAGI rules	No	No	No
8f	Determined Medicaid eligible at application under non-MAGI rules	No	No	No
8g	Determined Medicaid eligible at annual renewal	No	No	No

		Included in performance indicators data submission?		
		June 2016 submission (due July 8)	July 2016 submission (due Aug. 8)	August 2016 submission (due Sept. 8)
8h	Determined Medicaid eligible via administrative determination	No	No	No
8i	All others determined Medicaid eligible	No	No	No
8j	Total individuals determined CHIP eligible	No	Yes, 1 determination (child)	No
8k	Determined CHIP eligible at application	No	No	No
8l	Determined CHIP eligible at annual renewal	No	Yes, 1 determination (child)	No
8m	All others determined CHIP eligible	No	No	No
Indicator 9: Total number of individuals determined ineligible				
9a	Total individuals determined Medicaid and CHIP ineligible by Medicaid agency	No	No	Yes, 1 determination (mother)
9b	Medicaid agency determination – ineligibility established for Medicaid and CHIP	No	No	No
9c	Medicaid agency determination – eligibility cannot be established for Medicaid or CHIP	No	No	Yes, 1 determination (mother)
9d	Medicaid agency determination – ineligible at application	No	No	No
9e	Medicaid agency determination – ineligible at annual renewal	No	No	Yes, 1 determination (mother)
9f	Medicaid agency determination – all others determined ineligible	No	No	No
Indicator 10: Pending applications/redeterminations				
10a	Number pending at Medicaid agency	Yes, 1 household or 2 individuals (child and mother)	Yes, 1 household or 1 individual (mother) ²	No ³
10c	Number pending at CHIP agency	No	No	No
Indicator 11: Processing time for determinations at application				
	All fields	No	No	No

¹ 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 2016 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.

² The mother is included in the count for the pending indicator in July 2016 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.

³ The mother is not included in the count for the pending indicator in August 2016 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.

EXAMPLE 3

The Clark household includes a single male adult in an FFM assessment state. On January 4, 2016, he applies online to the FFM, and his electronic account is transferred to the state 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 2016 submission (due Feb. 8)	February 2016 submission (due Mar. 8)	March 2016 submission (due Apr. 8)
Indicator 4: Number of applications received¹				
All fields		No	No	No
Indicator 6: Number of renewals				
All fields		No	No	No
Indicator 7: Total enrollment				
7a	Total Medicaid enrollment	Yes, 1 enrollee	Yes, 1 enrollee	No
7b	Medicaid MAGI enrollees	Yes, 1 enrollee	Yes, 1 enrollee	No
7c	Medicaid MAGI child enrollees	No	No	No
7d	Medicaid MAGI adult enrollees	Yes, 1 enrollee	Yes, 1 enrollee	No
7e	Medicaid non-MAGI enrollees	No	No	No
7f	Medicaid non-MAGI child enrollees	No	No	No
7g	Medicaid non-MAGI adult enrollees	No	No	No
7h	Total CHIP enrollees	No	No	No
Indicator 8: Total number of individuals determined eligible				
8a	Total individuals determined Medicaid eligible	Yes, 1 determination	No	No
8b	Medicaid MAGI eligible determinations	Yes, 1 determination	No	No
8c	Medicaid non-MAGI eligible determinations	No	No	No
8d	Determined Medicaid eligible at application	Yes, 1 determination	No	No
8e	Determined Medicaid eligible at application under MAGI rules	Yes, 1 determination	No	No
8f	Determined Medicaid eligible at application under non-MAGI rules	No	No	No
8g	Determined Medicaid eligible at annual renewal	No	No	No
8h	Determined Medicaid eligible via administrative determination	No	No	No

		Included in performance indicators data submission?		
		January 2016 submission (due Feb. 8)	February 2016 submission (due Mar. 8)	March 2016 submission (due Apr. 8)
8i	All others determined Medicaid eligible	No	No	No
8j	Total individuals determined CHIP eligible	No	No	No
8k	Determined CHIP eligible at application	No	No	No
8l	Determined CHIP eligible at annual renewal	No	No	No
8m	All others determined CHIP eligible	No	No	No
Indicator 9: Determined ineligible				
9a	Total individuals determined Medicaid and CHIP ineligible by Medicaid agency	No	No	Yes, 1 determination
9b	Medicaid agency determination – ineligibility established for Medicaid and CHIP	No	No	Yes, 1 determination
9c	Medicaid agency determination – eligibility cannot be established for Medicaid or CHIP	No	No	No
9d	Medicaid agency determination – ineligible at application	No	No	No
9e	Medicaid agency determination – ineligible at annual renewal	No	No	No
9f	Medicaid agency determination – all others determined ineligible	No	No	Yes, 1 determination ²
Indicator 10: Pending applications/redeterminations				
	All fields	No	No	No
Indicator 11: Processing time for determinations at application³				
11a	Median processing time – all Medicaid and CHIP determinations at application	Yes, 1 day	No	No ⁴
11b	Median processing time – MAGI Medicaid and CHIP determinations at application	Yes, 1 day	No	No
11c	Median processing time – non-MAGI determinations at application	No	No	No
11d	Median processing time – direct application to state agency	No	No	No
11e	Median processing time – transfer application from FFM	Yes, 1 day	No	No
Number of MAGI Medicaid and CHIP determinations at application made in:				
11f	Less than 24 hours	No	No	No
11g	24 hours–7 days	Yes, 1 determination	No	No
11h	8 days–30 days	No	No	No
11i	31 days–45 days	No	No	No
11j	More than 45 days	No	No	No

¹ Accounts transferred from the FFM are not included in the applications indicator.

² Reporting a move out of the state would trigger a redetermination made outside of the annual renewal process, which is reported under Medicaid Agency Determination – All Others Determined Ineligible (9f).

³ Processing time counts calendar days, not business days.

⁴ 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, trainings on the performance indicator data, and guide to submitting data in Socrata are available on the Performance Indicator Technical Assistance webpage: <http://medicaid.gov/medicaid-chip-program-information/program-information/sdis.html>.

States are encouraged to contact the CMS PI team with any questions by emailing PerformanceindicatorsTA@cms.hhs.gov.