

Edit Monthly Report

Your data will be saved in progress whenever you are entering detailed metrics.

Reporting Period

07/01/2014 to 07/31/2014

Call Center Information

Medicaid Customer Contact Center,
Maximus Application Vendor, Colorado
EEMAP Vendor

[Edit Call Center Information](#)

Call Center #1

Medicaid Customer Contact Center

Call Center #6

Call Center #2

Maximus Application Vendor

Call Center #7

Call Center #3

Colorado EEMAP Vendor

Call Center #8

Call Center #4

Call Center #9

Call Center #5

Call Center #10

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Call Volume

Total Call Center Volume

Medicaid Customer Contact Center

Maximus Application Vendor

Colorado EEMAP Vendor

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Call Center Wait Time

Average Call Center Wait Time

Value in minutes, rounded to nearest whole r

Medicaid Customer Contact Center

Maximus Application Vendor

Colorado EEMAP Vendor

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Abandonment Rate

Average Call Center Abandonment Rate

Value between 0 and 1 (inclusive), up to thre

Medicaid Customer Contact Center

Maximus Application Vendor

Colorado EEMAP Vendor

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Number of Application Received in Previous Month

Total Applications Received

This value should equal to a sum of following 3 highlighted fields.

By the Medicaid Agency

Total Medicaid Applications Received

Medicaid Applications Received Online

Medicaid Applications Received by Mail

Medicaid Applications Received In-Person

Medicaid Applications Received by Phone

Medicaid Applications Received via Other Channel

By a Separate CHIP Agency

Total CHIP Applications Received

CHIP Applications Received Online

CHIP Applications Received by Mail

CHIP Applications Received In-Person

CHIP Applications Received by Phone

CHIP Applications Received via Other Channel

By the State-Based Marketplace
Applications Received by SBM

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Number of Renewals

Total Number of Renewals

This value should equal to a sum of following 4 highlighted fields.

Medicaid MAGI Renewals

Medicaid non-MAGI Renewals

CHIP Renewals

Unknown Type

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Number of Electronic Accounts Transferred

Total Transfer Accounts Received

Total Transfer Accounts Sent

This value should equal to a sum of following 4 highlighted fields.

Transfers Received

Transfers Received from FFM

Transfers Sent

Transfers to FFM

Transfers Received from SBM

Transfers to Non-Integrated SBM Systems

Transfers Received from Unknown Source

Determined Account Transfers Received

Assessed Account Transfers Received

Request for Full Determination Transfers Received

Transfers of Unknown Type Received

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Total Enrollment

Total Medicaid Enrollees

Total CHIP Enrollees

This value should equal to a sum of following 2 highlighted fields.

MAGI Enrollees

Total MAGI Enrollees

Non-MAGI Enrollees

Total Non-MAGI Enrollees

MAGI Child Enrollees

Non-MAGI Child Enrollees

MAGI Adult Enrollees

Non-MAGI Adult Enrollees

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Total Number of Individuals Determined Eligible

Total Medicaid Eligible

Total CHIP Eligible

This value should equal to a sum of following 6 highlighted fields.

Medicaid Eligibility

Medicaid MAGI Eligibility Determinations

Medicaid non-MAGI Eligibility Determinations

Medicaid Eligibility Determined at Application

Determined Medicaid Eligible at Application under MAGI Rules

Determined Medicaid Eligible at Application under non-MAGI Rules

Medicaid Eligibility Determined at Annual Renewal

Medicaid Eligible via Administrative Determination

Medicaid Eligible via Other Method

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

CHIP Eligibility

Determined CHIP Eligible at Application

Determined CHIP Eligible at Annual Renewal

All Others Determined CHIP Eligible

Total Number of Individuals Determined Ineligible

Total Medicaid Ineligible

Total CHIP Ineligible

This value should equal to a sum of following 5 highlighted fields.

Medicaid Determination

Medicaid Determination - Ineligibility Established

CHIP Determination

CHIP Determination - Ineligibility Established

Medicaid Determination - Eligibility Cannot be Established

CHIP Determination - Eligibility Cannot be Established

Medicaid Determination - Ineligible at Application

CHIP Determination - Ineligible at Application

Medicaid Determination - Ineligible at Annual Renewal

CHIP Determination - Ineligible at Annual Renewal

Medicaid Determination - Ineligible via Other Application Type

CHIP Determination - Ineligible via Other Application Type

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Total Number of Pending Applications/Redeterminations

Number Pending at Medicaid

Number Pending at Separate CHIP Agency

Type of Number Pending at Medicaid

Type of Number Pending at Separate CHIP Agency

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Processing Time for Determinations

Median Processing Time (Days) at Medicaid

Please enter a 0 only to indicate real time processing

Median Processing Time (Days) at Separate CHIP Agency

Please enter a 0 only to indicate real time processing

Medicaid Agency

Processing Time for MAGI Determination

Please enter a 0 only to indicate real time processing

Processing Time for Non-MAGI Determination

Please enter a 0 only to indicate real time processing

Processing Time for Direct Application to Medicaid Agency

Please enter a 0 only to indicate real time processing

Processing Time for Transfer Application from FFM/SBM

Please enter a 0 only to indicate real time processing

MAGI Determinations Processed Within 24 Hours

MAGI Determinations Processed in 1 - 7 Days

MAGI Determinations Processed in 8 - 30 Days

MAGI Determinations Processed in 31 - 45 Days

MAGI Determinations Processed in Over 45 Days

Non-MAGI Determinations Processed Within 30 Days

Non-MAGI Determinations Processed in 31 - 60 Days

Non-MAGI Determinations Processed in 61 - 90 Days

Non-MAGI Determinations Processed in Over 90 Days

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Separate CHIP Agency

Processing Time for Direct Application to CHIP Agency

Please enter a 0 only to indicate real time processing

Processing Time for Transfer Application from FFM/SBM

Please enter a 0 only to indicate real time processing

MAGI Determinations Processed Within 24 Hours

MAGI Determinations Processed in 1 - 7 Days

MAGI Determinations Processed in 8 - 30 Days

MAGI Determinations Processed in 31 - 45 Days

MAGI Determinations Processed in Over 45 Days

Data Limitations

Please include an explanation of any data limitations that would affect the interpretation of the numbers reported for these indicators.

Save Report