



CMS PERM—PETT 2.0 Web Application Project

User Guide Documentation

May 13, 2012

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1.0 Introduction

Each state participating in the Payment Error Rate Measurement (PERM) program is required to conduct Medicaid and CHIP eligibility reviews and to submit sample, eligibility review and payment review data on a monthly basis. To facilitate this process, CMS worked with VMD Systems and The Lewin Group to develop the new PERM Eligibility Tracking Tool (PETT 2.0), a secure, web-based system that allows states to submit, manage, track, and view reports of their data online.

PETT 2.0 facilitates the data submission process and allows states to examine eligibility review findings and error rates throughout the PERM eligibility cycle. It now provides the following new features:

- ▶ A centralized dashboard to track the submission of time-sensitive state data
- ▶ The ability to upload data using an excel spreadsheet or submit data directly to the website as well as edit data directly on the website
- ▶ Access to several exportable and printable data reports that enhance user understanding of submitted data and findings

The PETT 2.0 website is accessible to authorized system and program administrators (*e.g., CMS, Lewin, and VMD*), state administrators, and state viewers who monitor data submission or provide input to the PERM program. Users will have different website privileges depending on their program roles. During the registration process, state users will be asked to select which level of access they are requesting – state administrator or state viewer. Users will be approved by CMS and Lewin after the state eligibility lead notifies CMS and Lewin regarding which individuals should have access to the website.

The remaining sections of this document describe how to access and use the PETT 2.0 website.

2.0 User Registration and Login

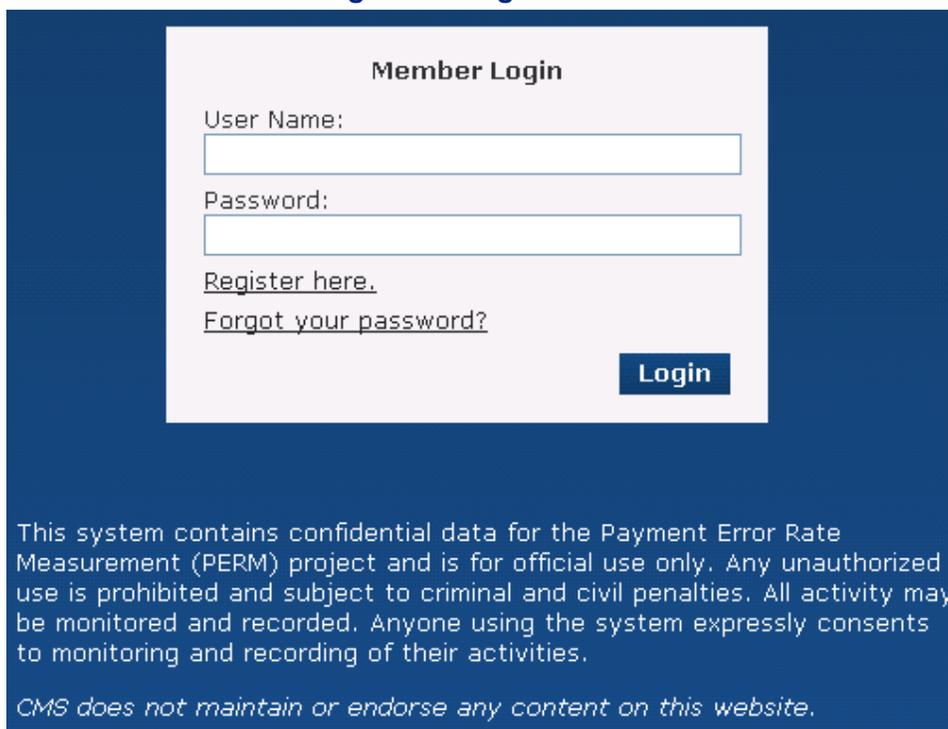
2.1 Login Screen

To access this feature: Go to the PETT 2.0 website which can be accessed at the following web address: <https://www.cmspett2.org>.

The login screen is the first screen that users will see when they go to the PETT 2.0 website. New users will need to register. If you have already registered, enter your case-sensitive user name and password and click the “**Login**” button.

If a user is inactive for 15 minutes, the user will have to login again to continue working. The user will be returned automatically to the web section they had been working on.

Figure 1: Login Screen



2.2 Registration

To access this feature: Click the “[Register here](#)” link on the login screen.

Figure 2: Registration Page

Sign Up For Your Login Account

*Required Fields

*First Name: *Last Name:

*User Name: *State:

*Email:

*Password: *Confirm Password:

Please note: Your password must be at least 8 characters, including at least 1 lowercase letter, 1 uppercase letter, 1 number, and 1 special character.

*System Role: *Project Role:

Example: "CHIP Lead"

*My Program(s): Medicaid CHIP

My Status: I am a State Lead

Continue

New users must register for access to the PETT 2.0 website. Each state will be allowed to have up to four users. Each state user will be designated as either a state administrator or a state viewer. State administrators will be able to input, edit, and review their state's data, while state viewers will only be able to review their state's submitted data.

During the registration process, state users should select the appropriate level of access from the “**System Role**” drop-down box. State users should also identify their “**Project Role**” (e.g., *CHIP lead, reviewer, state contractor*). Finally, the state PERM eligibility lead has the option of selecting the box under “**My Status**” to indicate their role as the State Lead. The State Lead informs CMS and Lewin who in their state should have access as a state administrator or state viewer.

Users also need to identify themselves as working with Medicaid, CHIP, or both programs by selecting the appropriate boxes under “**My Program(s)**.” Users will only be able to see data for the specific program(s) for which they are registered.

New users will need to create a case-sensitive user name and password. Passwords must be at least eight characters long and contain at least one of each of the following:

- ▶ A number
- ▶ An upper case letter
- ▶ A lower case letter
- ▶ A special character `!#$%&()*+,-./:;<=>@[\\]^_`{|}~`

Users will need to change their passwords every 60 days; after changing the password, the user will need to login again.

All new account registrations are sent to system administrators (CMS and Lewin) for review. If they approve the new user, the system administrator will enable the account and send the new user a “User Account Approved” email with login instructions. Confirmation emails will be sent from PERMSC.2013@Lewin.com typically within 48 hours of registration. To ensure that emails are received, users should add PERMSC.2013@Lewin.com to their contact list and follow up with CMS and Lewin if confirmation is not received within 48 hours.

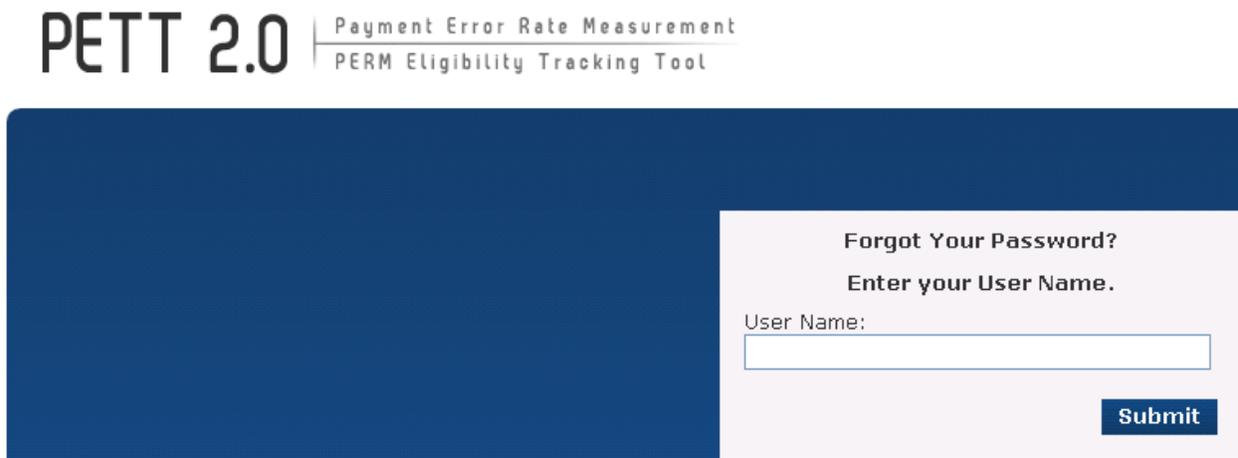
2.3 Password Retrieval Feature

To access this feature: Click the “*Forgot your password?*” link on the login screen.

Users should enter their user name. A new password will be sent to the email address associated with the user name. Users can only reset their password once per day.

Forgotten user names can only be retrieved by contacting the system administrators, which can be accomplished using the contact form (*described in Section 3.4*).

Figure 3: New Password Dialog Box



3.0 General System Areas and Features

3.1 System Navigation and Getting Around

Once users login to the PETT 2.0 website, they will see the home screen. The home screen features the main dashboard and links to other pages of the website.

Users can access the data management features of the PETT 2.0 system via the tab-based navigation area. Users can hover over each tab to view the sub-menu. In Figure 4, the sub-menu for View Reports is displayed.

Users can also access account management and support features via the bar in the upper right corner. These navigation tools appear on the home screen and every page of the website.

Figure 4: Home Screen Featuring Main Dashboard

State	Sample	Eligibility	Payment	Sample	Eligibility	Payment	Last Updated
LewinStrat	33 %	17 %	8 %	50 %	33 %	33 %	11/7/2012 RFSLs
Month	Sample	Eligibility	Payment	Sample	Eligibility	Payment	Last Updated
October	Approved ✓	Submitted ✓	Submitted ✓	Approved ✓	Submitted ✓	Submitted ✓	11/7/2012 RFSLs
November	Approved ✓	Submitted ✓	Draft ⚠	Approved ✓	Submitted ✓	Submitted ✓	11/6/2012 RFSLs
December	Approved ✓	Draft ⚠	Pending ⚠	Approved ✓	Submitted ✓	Submitted ✓	11/6/2012 RFSLs
January	Approved ✓	Draft ⚠	Pending ⚠	Approved ✓	Submitted ✓	Submitted ✓	11/6/2012 RFSLs
February	Draft ⚠	Pending ⚠	Pending ⚠	Approved ✓	Draft ⚠	Pending ⚠	11/7/2012 RFSLs
March	Draft ⚠	Pending ⚠	Pending ⚠	Approved ✓	Draft ⚠	Pending ⚠	11/7/2012 RFSLs
April	Pending ⚠	Pending ⚠	Pending ⚠	Pending ⚠	Pending ⚠	Pending ⚠	

3.2 Main Dashboard

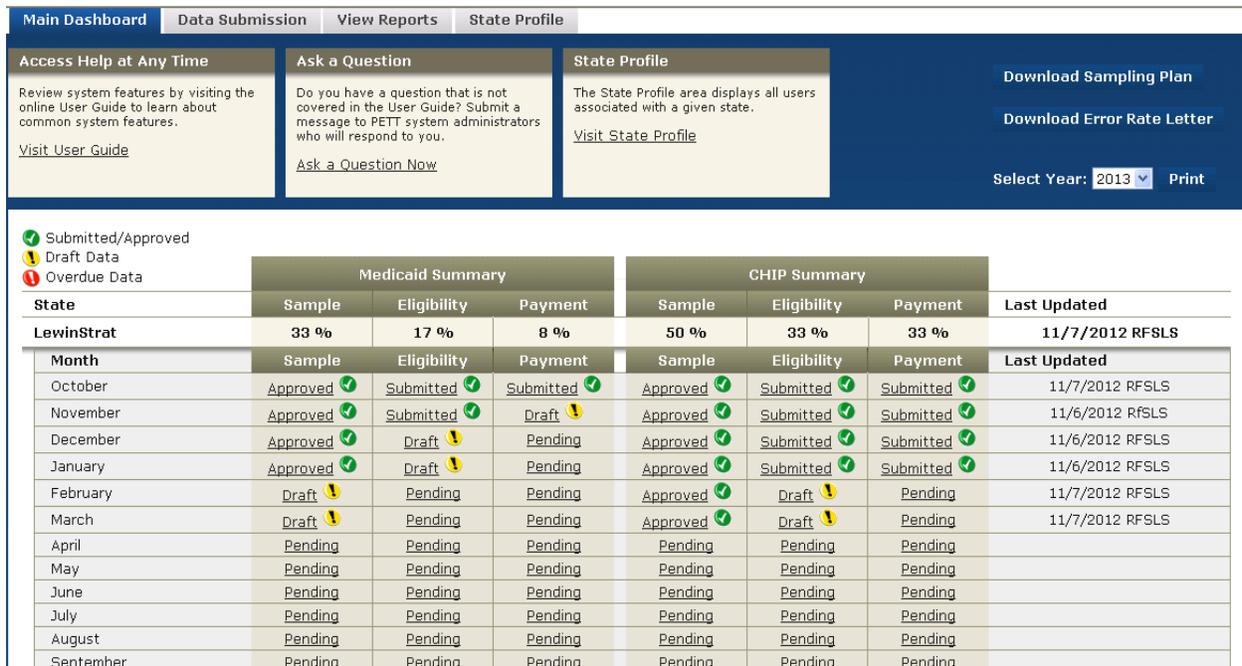
To access this feature: After logging in to the website, users will be taken directly to the Main Dashboard which is located on the PETT 2.0 website’s homepage. If you navigate away from this screen, you can return by clicking the “Main Dashboard” tab.

The Main Dashboard displays a summary of the data submission status of the user’s state for the selected fiscal year. Users can select the fiscal year they’d like to view using the “**Select Year**” drop-down menu on the right side of the screen. Users will only see information about the programs for which they are registered. For instance, if a user is associated with a stand-alone CHIP program, the dashboard will display only the state’s CHIP program (*which will include information on the Medicaid expansion component as well, if applicable*).

The top line of the Main Dashboard is the state summary line and shows the percentage of cases for which complete data has been submitted for each type of data submission (*i.e., sample, eligibility review, and payment review*). Also shown is the date and user who last updated the state’s data. Below the state summary line is an inset with the status for each month. A checkmark in a green circle will be displayed for all submissions that are complete for the given month. Data in draft form is indicated visually by a black exclamation point in a yellow circle. Overdue data is indicated by a white exclamation point in a red circle.

Clicking the status link for any month/submission will take the user directly to the corresponding data submission form.

Figure 5: Main Dashboard



3.3 Manage My Account

To access this feature: Click the “*Manage My Account*” link in the upper right navigation bar.

The Manage My Account page allows users to perform account management tasks such as changing their password, name, and contact information.

Users cannot update their user name, system role, state, program, status as state lead, or preference to receive notifications. To change these settings, users should contact the system administrators using the contact form (*described in section 3.4*).

Figure 6: Manage My Account Screen

The screenshot shows a web application interface with a navigation bar at the top containing four tabs: "Main Dashboard", "Data Submission", "View Reports", and "State Profile". The main content area is divided into two panels. The left panel, titled "Change Your Password", contains three input fields: "Enter Current Password:", "Enter New Password:", and "Confirm New Password:", followed by a "Change Password" button. The right panel, titled "My Account Settings", contains a section for "*Required Fields" with several input fields: "*First Name:" (Susan), "*Last Name:" (Miller), "*Email:" (susan.miller@state.gov), "Phone:", "Fax:", "Project Role:" (Tester), "User Name:" (RFSLS), "System Role:" (State Admin), "State:" (LewinStrat), and "Programs:" (Medicaid, CHIP). There are also two checked checkboxes: "State Lead" and "Receive Notifications", and an "Update" button at the bottom right.

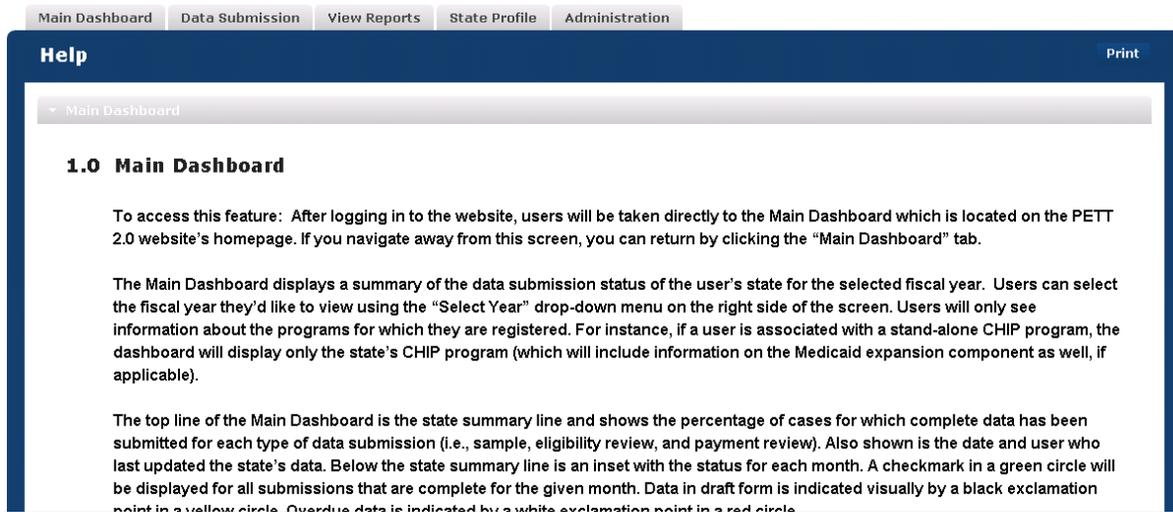
3.4 Help

To access this feature: Click “*Help*” in the upper right screen navigation bar from any area of the system.

The Help area provides a web-based version of the guidance provided in this document. System administrators will update this area based on feedback from users and the need for additional program clarification.

The Help area can be accessed even if users are not logged into the PETT 2.0 system.

Figure 7: Help Screen



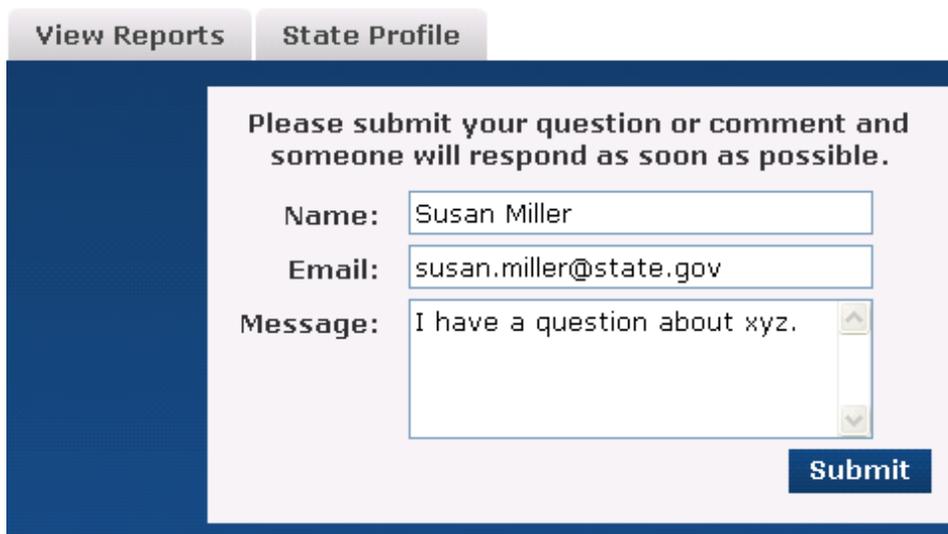
3.5 Contact

To access this feature: Click the "**Contact**" link in the upper right navigation bar from any area of the system.

PETT 2.0 contains a Contact feature allowing users to submit questions and comments directly to system administrators. The system administrators will be able to assist users with any issues users may encounter including data submission errors and PETT 2.0 website use. Users will receive a response to their messages typically within 48 hours of submission. To ensure that they receive a response, users should add PERMSC.2013@Lewin.com to their contact list.

The contact form can be accessed even if users are not logged into the PETT 2.0 system.

Figure 8: Contact Screen



4.0 Data Submission

As a part of the PERM eligibility review, states are required to submit sample, eligibility review, and payment review data for each month of the PERM eligibility cycle. States have two options to submit their data:

- (1) Enter data directly onto the PETT 2.0 website
- (2) Upload data to the PETT 2.0 website using an Excel spreadsheet template.

The following section describes the types of data that states must submit, the methods for data submission, and the process for submitting data at each phase of the eligibility review (*monthly sample, eligibility review and payment review*).

If a user is inactive for 15 minutes, the user will have to login again to continue working. The user will be returned automatically to the web section they had been working on.

4.1 Types of Data to be Submitted

States are required to submit monthly sample, eligibility review, and payment review data onto the PETT 2.0 website. The following section gives brief descriptions of each data type.

Sample Data

Sample data details basic information about the cases that were sampled in each month of the PERM cycle. Both active and negative cases that are sampled in a given month, including any oversample cases, must be included in the data submission. Users must provide the state name, the sample month, the sample year, the active universe total, negative universe total, and the universe total for each stratum (*if applicable*). Furthermore, the following information is required for each case in the sample submission (*see Appendix B for specific field definitions and requirements*):

- ▶ Case or Beneficiary ID
- ▶ Universe (Active or Negative)
- ▶ Stratum (if applicable)

Note: While Eligibility Category is displayed online after Case ID, this information is not required until the eligibility review data is submitted.

Eligibility Review Data

States must submit data on their eligibility review findings for each sampled case. The eligibility review data provides additional detail regarding the type of case that was sampled and whether the case was correctly granted (*i.e., application or redetermination*) or denied (*i.e., denial or termination*) eligibility. The following information is required for the eligibility review submission for each sampled case (*see Appendix B for specific field definitions and requirements*):

- ▶ Eligibility Category
- ▶ Case Action
- ▶ Review Month
- ▶ Review Finding
- ▶ Cause of Error
- ▶ Optional Cause of Error

Note: The “*Optional Cause of Error*” field only needs to be completed if the case has a “*Technical Error*” review finding.

Payment Review Data

States submit payment review data for each program in each month of the sampling timeframe. The payment review data describes the payments made either correctly or in error as a result of a case’s eligibility review. The following information is required for the payment review submission for each sampled case (*see Appendix B for specific field definitions and requirements*):

- ▶ Total Dollars
- ▶ Total Dollars in Error
- ▶ Total Dollars Correct
- ▶ Total Dollars Undetermined

4.2 Data Submission Timeline

The three types of data described above must be submitted in order according to the PERM review process. For each month, users must submit sample data before they can submit eligibility review data and they must submit eligibility review data before they can submit payment review data.

Sample data must be submitted by the 15th day of the month following the sample month and ***it must be submitted before eligibility reviews begin***. Upon submission, the PETT 2.0 website will review the data to ensure the state has entered all of the required fields and has submitted the required number of cases based on the state-specific sample sizes calculated for the program. The user will be required to correct any errors the PETT 2.0 website identifies. ***Once the sample data is approved, the state can proceed with the eligibility reviews.***

Eligibility review data is due approximately five months after the end of the sample month. Payment review data is due approximately seven months after the end of the sample month. The complete timeline for FY 2013 can be found in *Appendix E* of these instructions. States should contact CMS and Lewin if submission delays are anticipated with any of the required reports.

4.3 Input Data Online

To access this feature: Hover your mouse over the “*Data Submission*” tab and click “*Input Data Online*.”

The “**Data Submission**” page is used to enter, submit, and edit monthly data submission details. The first section seen is the “**Select Submission Information**” box which allows users to select the desired program (*i.e.*, *CHIP or Medicaid*), month/year, and data type (*Sample, Eligibility Review, or Payment Review*).

After you make the selection, you will see three sections in the online submission form:

- (1) The “**Select Submission Information**” box
- (2) The “**Submission Snapshot**” box shows the data submission status for the program, month, and year selected
- (3) The “**Data Submission**” box is used to enter data onto the PETT 2.0 website

The process for submitting data online differs slightly for each report being submitted, as described below.

Figure 9: Online Data Submission Form Universe Screen

Submission Snapshot for CHIP, October 2012					
Sample Data:	Due Thursday, November 15, 2012	⚠ Pending			
Eligibility Review:	Due Sunday, March 31, 2013	⚠ Pending			
Payment Review:	Due Friday, May 31, 2013	⚠ Pending			
Last Updated:					

Sample Data Submission for CHIP, October 2012					
Active Universe Total:	Stratum 1 Total:	Stratum 2 Total:	Stratum 3 Total:	Negative Universe Total:	Start Sample
13,500	1500	3000	9000	1000	

To submit Sample data online the user should:

- (1) Select the program, month/year, and type of data (*i.e.*, *sample*) that is being submitted in the “**Select Submission Information**” box.
- (2) Click “**Go**.”
- (3) Enter the active universe total, negative universe total, and strata universe totals (*if applicable*).
- (4) Click “**Start Sample**” and the first case entry boxes will appear to enter sample information (*see Figure 10*).
- (5) Enter the Case ID, Eligibility Category (*if known at time of sample submission*), Universe and Stratum (*if appropriate*) for the first case to be entered.
- (6) Click the Over-Sample box if the case is part of the oversample.
- (7) Click “**Insert**” and the entry will be loaded onto the PETT 2.0 website.
- (8) Repeat steps 5—7 for each sampled case.

- (9) Once all of the sample data has been input, click the “**Submit Data**” button.

Figure 10: Online Data Submission Form Case Entry Screen

To submit Eligibility Review or Payment Review data online, the user should:

- (1) Enter the program, month/year, and type of data (i.e., *Eligibility Review or Payment Review*) that is being submitted in the “**Select Submission Information**” box.
- (2) Click “**Go.**”
- (3) Click the “**Add/Update**” button to the right of each case.
- (4) Enter the Eligibility Review information [Eligibility Category, Case Action, Review Month, Review Finding, Cause of Error, and Optional Cause of Error (*if applicable*)] or Payment Review information (*Total Dollars, Total Dollars in Error, Total Dollars Correct and Total Dollars Undetermined*) for each case.
- (5) Click “**Save.**”
- (6) Repeat steps 3—5 for each sampled case. (*Note: Payment review information is not required for negative cases.*)
- (7) Once all of the data has been input, Click “**Submit Data.**”

Figure 11: Online Submission Of Eligibility Review Data

Eligibility Review Data Submission for CHIP, October 2012

Active Universe Total:	Stratum 1 Total:	Stratum 2 Total:	Stratum 3 Total:	Negative Universe Total:	Update Totals	Submit Data
13,500	1,500	3,000	9,000	1,000		Print

Case ID	Eligibility Category	Universe	Stratum	Over-Sample	Case Action	Review Finding	Error Cause	Dollars in Error	Dollars Correct	Dollars Undet.	Total Dollars	Add/Update
1. 101	Familie...	Active	1	<input type="checkbox"/>	Appl...	E						Add/Update
2. 102		Active	2	<input checked="" type="checkbox"/>	Redet...							Add/Update
3. 103		Active	3	<input type="checkbox"/>								Add/Update
4. 104		Active	3	<input type="checkbox"/>								Add/Update
5. 105		Active	3	<input type="checkbox"/>								Add/Update

Sample Report: Case ID: 102, Eligibility Category: Select, Universe: Active, Stratum: 2 (Redetermination), Over-Sample:

Eligibility Review: Case Action: Redetermination, Review Month: Select, Review Finding: Select, Error Cause: Select

Optional Cause of Error Detail:

save cancel

Figure 12: Online Submission Of Payment Review Data

Payment Review Data Submission for CHIP, October 2012

Active Universe Total:	Stratum 1 Total:	Stratum 2 Total:	Stratum 3 Total:	Negative Universe Total:	Update Totals	Submit Data
13,500	1,500	3,000	9,000	1,000		Print

Case ID	Eligibility Category	Universe	Stratum	Over-Sample	Case Action	Review Finding	Error Cause	Dollars in Error	Dollars Correct	Dollars Undet.	Total Dollars	Add/Update
1. 101	Familie...	Active	1	<input type="checkbox"/>	Appl...	E		\$0	\$50	\$0	\$50	Add/Update
2. 102	Childre...	Active	2	<input checked="" type="checkbox"/>	Redet...	E						Add/Update
3. 103	Childre...	Active	3	<input type="checkbox"/>	Redet...	NE	Income:...					Add/Update

Sample Report: Case ID: 102, Eligibility Category: Children (All Ages) less than 133% Federa, Universe: Active, Stratum: 2 (Redetermination), Over-Sample:

Eligibility Review: Case Action: Redetermination, Review Month: October, Review Finding: E - Eligible, Error Cause: Select

Optional Cause of Error Detail:

Payment Review: Dollars in Error: 0, Dollars Correct: 100, Dollars Undetermined: 0, Total Dollars: 100

save cancel

4.4 Upload Data via Spreadsheet

To access this feature: Hover your mouse over the “*Data Submission*” tab and select “*Upload Data via Spreadsheet.*”

The PETT 2.0 website allows states to upload data from a formatted Excel spreadsheet. Users can download this spreadsheet from the “*Upload Data via Spreadsheet*” web page. Users should not change the format of the spreadsheet to ensure the data will be uploaded properly. After data is uploaded, users will be able to make changes directly on the website.

Figure 13: Spreadsheet Upload Screen

It is important to note that sample, eligibility review, and payment review need to be uploaded to the PETT 2.0 website separately even though all the data for a given month and program is included in one spreadsheet.

The following section describes this process for users.

To upload the data via spreadsheet, the user should:

- (1) Select the program, month/year, and type of data (e.g., *Sample*) that is being submitted in the “**Select Spreadsheet to Upload**” box.
- (2) Click “**Go**”.
- (3) Click the “**Browse**” button in the “**Upload Sample File**” box.
- (4) Browse your computer and select the spreadsheet to be uploaded.
- (5) Click the “**Process Spreadsheet Data**” button (*will appear after selecting the spreadsheet to be uploaded*).
- (6) Check the uploaded data for accuracy. If uploading sample data, click the “**Oversample**” box for any case that is part of the oversample.
- (7) Click the “**Submit Data**” button.

Figure 14: Spreadsheet Upload Process

Main Dashboard | **Data Submission** | **View Reports**

Please Select Spreadsheet to Upload ?

State: LewinStrat

Program: CHIP Medicaid

Month/Year: October 2012

Type: Sample

Go

[Download the spreadsheet template](#)

State Profile

Upload Sample file for Medicaid, October 2012

C:\Documents and Settings\rita.furst.se **Browse...** **Process Spreadsheet Data**

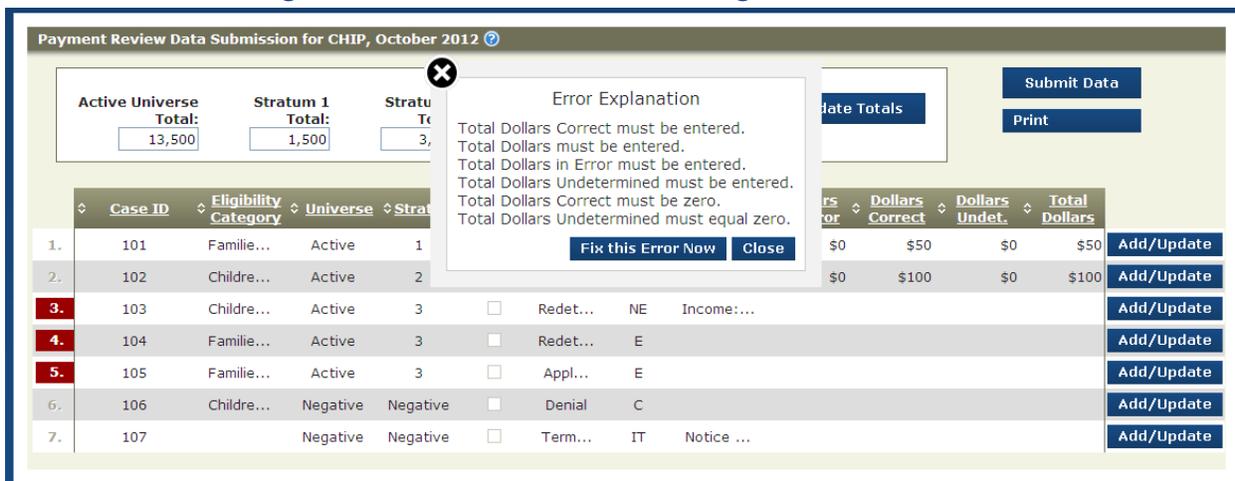
Your spreadsheet has been uploaded and is ready to be processed. Select "Process Spreadsheet Data" to proceed.

4.5 Data Submission Errors

The PETT 2.0 website will alert users about data errors in one of two ways.

- (1) The website alerts users of an error when they initially try to insert, update, or upload data. Users will need to correct the data before the website will accept it. Errors may include entries that have missing required data elements and incorrect payment review data (e.g., *entry of a value other than zero in the "Dollars in Error" field for a case with a review finding of eligible*).
 - a. If inserting data online, users will receive an error message when they try to insert or save the entry.
 - b. If uploading data via spreadsheet, users will get an error message when the website processes the spreadsheet.
- (2) The PETT 2.0 website alerts users after they try to save or submit data. Any cases containing errors will be flagged with a red row number. Users can click on the red row number to view an explanation of the error. They will need to fix the error before they can submit their data. Examples of errors include data entries with a case action that does not agree with the stratum and missing review finding when uploading data.

Figure 15: Error Notification During Data Submission



4.6 Viewing and Editing Data

To access this feature: Hover your mouse over the “*Data Submission*” tab and select “*View Data*.”

To view monthly data, select the desired program (CHIP or Medicaid), month/year, and sample type (i.e., *sample, eligibility review, or payment review*) in the “*Select Submission Information*” box and click “*Go*.”

After data has been successfully submitted (*via online submission or through the data upload process*), users can change data by clicking the “*Edit*” button to the right of each case row. The website will prompt users to provide an explanation for the change before they save the data.

Users **should not drop any case** without first contacting CMS and The Lewin Group. Once a request for a dropped case is received, CMS and The Lewin Group will review the issue and either approve the dropped case or request additional information/action from the state. Following this, users can drop the case on PETT 2.0 by selecting “**X**” as the “*Review Finding*.” After selecting “**X**,” an administrator will have to approve the dropped case again before it appears on the website. This double approval process ensures that CMS and The Lewin Group are aware of all dropped cases.

Users can also click on “*Print to Excel*” to obtain a spreadsheet version of each month’s entries.

Figure 16: View Data Screen

Please Select Submission Information

State: LewinStrat

Program: CHIP Medicaid

Month/Year: October 2012

Type: Sample

Submission Snapshot for CHIP, October 2012

Sample Data: Due Thursday, November 15, 2012 ✔ Approved

Eligibility Review: Due Sunday, March 31, 2013 ✔ Approved

Payment Review: Due Friday, May 31, 2013 ✔ Approved

Last Updated: 10/30/2012 by [RFSLS](#)

Sample Data Submission for CHIP, October 2012

Active Universe Total:	Stratum 1 Total:	Stratum 2 Total:	Stratum 3 Total:	Negative Universe Total:	<input type="button" value="Update Totals"/>
13,500	1,500	3,000	9,000	1,000	

	Case ID	Eligibility Category	Universe	Stratum	Over-Sample	Case Action	Review Finding	Error Cause	Dollars in Error	Dollars Correct	Dollars Undet.	Total Dollars	
1.	101	Familie...	Active	1	<input type="checkbox"/>	Appl...	E		\$0	\$50	\$0	\$50	<input type="button" value="Edit"/>
2.	102	Childre...	Active	2	<input type="checkbox"/>	Redet...	E		\$0	\$100	\$0	\$100	<input type="button" value="Edit"/>
3.	103	Childre...	Active	3	<input type="checkbox"/>	Redet...	NE	Income:...	\$200	\$0	\$0	\$200	<input type="button" value="Edit"/>
4.	104	Familie...	Active	3	<input type="checkbox"/>	Redet...	E		\$0	\$200	\$0	\$200	<input type="button" value="Edit"/>
5.	105	Familie...	Active	3	<input type="checkbox"/>	Appl...	E		\$0	\$0	\$0	\$0	<input type="button" value="Edit"/>

5.0 View Reports

The following section provides information on the various data reports that are accessible on the PETT 2.0 website. All reports can be printed by selecting the **“Print Report”** in the top right corner of the screen.

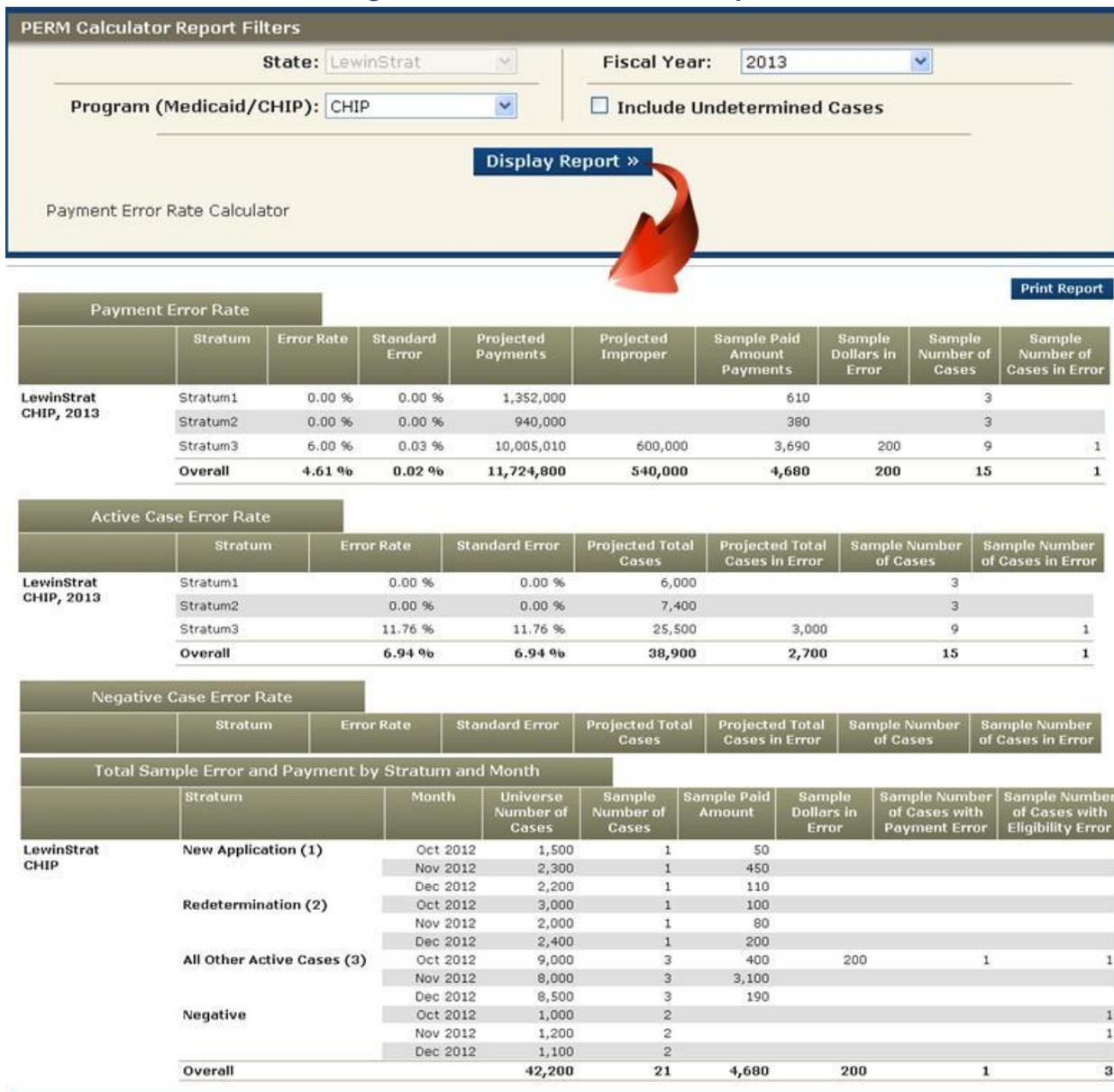
5.1 PERM Calculator

To access this feature: Hover your mouse over the **“View Reports”** tab and click on **“PERM Calculator.”**

To access the PERM Calculator report, states should select the desired fiscal year and program, then click **“Display Report”**. The PERM calculator report provides states with information on all three state error rates – active payment rate, active case rate, negative case rate—by stratum, if applicable, as well as summary information on sample errors and payments.

Note: The calculator report will only populate after three complete months of payment data have been submitted to the PETT website as at least one quarter of information is necessary to provide states with statistically relevant results.

Figure 17: PERM Calculator Report



5.2 Eligibility Report

To access this feature: Hover your mouse over the “View Reports” tab and click on “Eligibility Report.”

To access the Eligibility Report, users should select the desired fiscal year and program, then click “Display Report.” This report provides states with information on the eligibility review findings by universe, case action or stratum, eligibility category and cause of error. The findings are presented as percent of the total number of cases reviewed that fall into each error type (e.g., eligible, not eligible, eligible with ineligible services, etc.). All information is pulled directly from the data submitted by states to the website for each sample month.

Figure 18: Eligibility Report

Eligibility Findings Report																Print Report				
	Universe	Case Action or Stratum	Eligibility Category	Cause of Error	E	NE	EI	U	L/O	L/U	MCE1	MCE2	C	ID	IT	Total				
LewinStrat 2013 CHIP	Active	1	Familie...	No Error	3	14%										3	14%			
		2	Childre...	No Error	1	5%											1	5%		
			Familie...	No Error	1	5%												1	5%	
			Qualify...	No Error	1	5%												1	5%	
		3	Childre...	Income:...				1	5%									1	5%	
			Familie...	No Error			5	24%										5	24%	
	Familie...		Eligibi...														1	5%		
		Newborn...	No Error			1	5%										1	5%		
		Pregnan...	No Error			1	5%										1	5%		
			Total			13	62%	1	5%								15	71%		
	Negative	Negative		Notice ...												1	5%	1	5%	
				Caretak...	No Error										1	5%		1	5%	
				Childre...	No Error										1	5%		1	5%	
			Familie...	No Error										2	10%		2	10%		
			Notice ...												1	5%	1	5%		
			Total												4	19%	1	5%	1	5%
Showing 1 to 1 of 1 entries																First	Previous	1	Next	Last

5.3 Summary Report

To access this feature: Hover your mouse over the “View Reports” tab and click on “Summary Report.”

To access the Summary Findings report, states should select the desired fiscal year, program, and sample month, then click “Display Report.” Note: States can see information for the entire cycle by selecting from the Sample Month drop-down box the option “All”.

The report is structured to meet the requirements of the Summary Review Findings table which is due to CMS at the end of each PERM eligibility cycle. The report provides sample summary information including universe totals, number of cases sampled and dropped, number of cases correct, incorrect and undetermined, total dollars paid, total dollars correct, total dollars in error, and total dollars undetermined. All information is pulled directly from the data submitted by states to the website for each sample month. For additional information on the required fields for the Summary Review Findings report, please refer to *Appendices C and D*.

Figure 19: Summary Report

Summary Findings Report											Print Report
		Number of Cases in Universe	Number of Cases Sampled	Number of Cases Dropped	Number of Cases Correct	Number of Cases Incorrect	Number of Cases Undetermined	Total Dollars Paid	Total Dollars Correct	Total Dollars in Error	Total Dollars Undetermined
LewinStrat Oct 2012 CHIP	Active	13,500	5		4	1		550	350	200	
	Stratum1	1,500	1		1			50	50		
	Stratum2	3,000	1		1			100	100		
	Stratum3	9,000	3		2	1		400	200	200	
	Negative	1,000	2		1	1					
	Denials	1,000	1		1						
	Terminations	1,000	1			1					
	Totals	14,500	7		5	2		550	350	200	
LewinStrat Nov 2012 CHIP	Active	12,300	5		4		1	3,330	3,330		300
	Stratum1	2,300	1		1			450	450		
	Stratum2	2,000	1		1			80	80		
	Stratum3	8,000	3		2		1	2,800	2,800		300
	Negative	1,200	2		1	1					
	Denials	1,200	1			1					
	Terminations	1,200	1		1						
	Totals	13,500	7		5	1	1	3,330	3,330		300
LewinStrat Dec 2012 CHIP	Active	13,100	5		5			500	500		
	Stratum1	2,200	1		1			110	110		
	Stratum2	2,400	1		1			200	200		
	Stratum3	8,500	3		3			190	190		

5.4 Submission Change Report

To access this feature: Hover your mouse over the “*View Reports*” tab and click on “*Submission Change Report*.”

To access this report, states should select the desired fiscal year and program, then click “*Display Report*.” Note: States can see information for the entire cycle by selecting from the Sample Month drop-down box the option “*All*”.

This report details the changes made by states to previously submitted data. The report identifies what was changed in the report for a given month and program as well as indicates which user made the change, the date of the change, and the reason for the change. States can download the Submission Change report in an Excel file by clicking “*Print to Excel*.”

Figure 20: Submission Change Report

PERM Submission Change Report Filters

State: Fiscal Year:

Program (Medicaid/CHIP): Sample Month:

Display Report »

Submission logs with reasons for modifications and resubmissions

[Print to Excel](#)

Submission Change Report						
Report	Changed By	Date/Reason Changed	Case ID	Field	Old Value	New Value
Lewin Test Oct 2012 Medicaid	Eligibility Review	stateuser1	10/31/2012 Original sample submission.		Submission	10/31/2012
	Payment Review		11/2/2012 Original eligibility review submission.		Submission	11/2/2012
			11/2/2012 Original payment review submission.		Submission	11/2/2012
	CHIP	Sample		11/8/2012 Original sample submission.		Submission
Eligibility Review			12/21/2012 Original eligibility review submission.		Submission	12/21/2012
Nov 2012 Medicaid	Payment Review		11/2/2012 Original sample submission.		Submission	11/2/2012
			11/5/2012		Submission	11/5/2012
			11/5/2012 Original eligibility review submission.		Submission	11/5/2012
		11/8/2012 Original payment review submission.		Submission	11/8/2012	
		12/21/2012 Test	3875448937	Binding Code	E	X
	vmdtest	2/25/2013 changed		Active Total	3000	200000

5.5 Payment Weight Report

To access this feature: Hover your mouse over the “*View Reports*” tab and click on “*Payment Weight Report*”.

To access this report, states should select the desired fiscal year and program, then click “*Display Report*.” The report provides states with information on the top ten highest weighted case IDs (*i.e., the ten cases that currently have the greatest impact on the active case payment error rate*). States can use this information to both understand what might be driving the payment rate as well as to focus on any cases that might be undetermined.

Figure 21: Payment Weight Report

PERM Payment Weight Findings Report Filters

State: Fiscal Year:

Program (Medicaid/CHIP): Include Undetermined Cases

Display Report »

Top ten highest weighted cases and their projected dollars in error

Payment Weight Findings Report					
	Program	Stratum	Payment Error Rate	Top Ten Highest Weighted Case IDs	Total Projected Dollars in Error
LewinStrat 2013	CHIP	1	0.00 %	101 201 301 C401	
		2		102 202 302 C402	
		3		103 105 203 204 205 303 304 305 C403 C404	\$600,000

Showing 1 to 1 of 1 entries

Print Report

First Previous 1 Next Last

5.6 Error Rate Report

To access this feature: Hover your mouse over the “*View Reports*” tab and click on “*Error Rate Report*.”

To access this report, states should select the desired fiscal year and program, then click “*Display Report*.” The error rate report is a simplified version of the PERM Calculator report, providing the error rates by program and stratum, if applicable.

Figure 22: Error Rate Report



5.7 Case Review Detail Report

To access this feature: Hover your mouse over the “*View Reports*” tab and click on “*Case Review Detail Report*”.

To access this report, states should select the desired fiscal year and program, then click “*Display Report*.” Note: States can see information for the entire cycle by selecting from the Sample Month drop-down box the option “*All*”.

This report provides a detailed listing of each sampled case, the reviewing finding and the dollars associated with the case.

Figure 23: Case Review Findings Report



5.8 PETT Data Exports

To access this feature: Hover your mouse over the “*View Reports*” tab and click on “*PETT Data Exports*.”

To export submitted data, states should select the desired fiscal year and program, sample month, and “*Case Detail*” or “*Universe Totals*” to be downloaded. Note: States can export information for the entire cycle by selecting the option “*All*” from the Sample Month drop-down box. Click “*Export Data*” then “*Download Spreadsheet*”. Data will be downloaded in an Excel file format. Note: Some computers may require users to change their security settings or allow pop-ups in order to download the Excel file. State admins and state viewers can export data for the program(s) they are approved to access.

Figure 24: PETT Data Exports



6.0 State Profile

6.1 View State Details

To access this feature: Hover your mouse over the “*State Profile*” tab and click on “*View State Details*.”

The State Profile shows the list of users for the selected state. Each row shows the user’s name, email address, site login name, programs assigned, site access role, and project role.

Figure 25: State Profile



Appendix A: PERM Eligibility Form

Figure 26: Appendix A Excel Spreadsheet

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Payment Error Rate Measurement (PERM) Eligibility Reviews: Reporting Form					Payment Error Rate Measurement (PERM) Eligibility Reviews: Reporting Form				
A. State	Select State				A. State	Select State			
B. Date					B. Date				
C. Program	Select Program				C. Program	Select Program			
D. Sample Month & Year	Select Sample Month	Select Sample Year			D. Sample Month & Year	Select Sample Month	Select Sample Year		
E. Active Universe Total					E. Active Universe Total				
E.1 - Stratum 1 total (if applicable)					E.1 - Stratum 1 total (if applicable)				
E.2 - Stratum 2 total (if applicable)					E.2 - Stratum 2 total (if applicable)				
E.3 - Stratum 3 total (if applicable)					E.3 - Stratum 3 total (if applicable)				
F. Negative Universe Total					F. Negative Universe Total				
Optional Reason for Changing Totals					Optional Reason for Changing Totals				Optional Change or Add Reason
Case/ Beneficiary ID	Eligibility Category	Universe	Stratum (only complete if stratifying)	Case Ac					
1	Select Eligibility Category	Select Universe	Select Stratum	Select Case					
2	Select Eligibility Category	Select Universe	Select Stratum	Select Case					
3	Select Eligibility Category	Select Universe	Select Stratum	Select Case					
4	Select Eligibility Category	Select Universe	Select Stratum	Select Case					
5	Select Eligibility Category	Select Universe	Select Stratum	Select Case					
6	Select Eligibility Category	Select Universe	Select Stratum	Select Case Action	Select Review Month	Select Review Finding	Select Cause of Error		
7	Select Eligibility Category	Select Universe	Select Stratum	Select Case Action	Select Review Month	Select Review Finding	Select Cause of Error		
8	Select Eligibility Category	Select Universe	Select Stratum	Select Case Action	Select Review Month	Select Review Finding	Select Cause of Error		
9	Select Eligibility Category	Select Universe	Select Stratum	Select Case Action	Select Review Month	Select Review Finding	Select Cause of Error		
10	Select Eligibility Category	Select Universe	Select Stratum	Select Case Action	Select Review Month	Select Review Finding	Select Cause of Error		

Appendix B: PERM Eligibility Review Findings Form Line by Line Instructions

▶ **Line A: State**

The name of the State is pre-populated on the form if using the Direct Data Entry method. If using the Upload option, select the appropriate State from the drop-down list.

▶ **Line B: Date**

The current date is pre-populated on the form if using the Direct Data Entry method. If using the Upload option, the current date will populate after you upload the form.

▶ **Line C: Program**

The program (Medicaid or CHIP) is pre-populated on the form if using the Direct Data Entry method. If using the Upload option, select the appropriate program from the drop-down list.

▶ **Line D: Sample Month and Year**

The sample month and year is pre-populated on the form if using the Direct Data Entry method. If using the Upload option, select the sample month and year from the drop-down lists.

▶ **Line E: Active Universe Total**

The Active Universe is the total number of cases in the sample month that are considered eligible for services based on a completed application, redetermination, or are currently on the program rolls. The universe will be unique for each month.

If the State is stratifying active cases, complete E.1, E.2, and E.3.

Enter the total number of active cases during the sample month. For active cases, include the number of cases in each stratum in the respective cell as follows:

- **E.1—Stratum 1 total**—Enter the total number of Stratum 1 cases during the sample month. A case is in Stratum 1 (Applications) in the month the decision is made to grant eligibility or in the month the eligibility becomes effective, whichever is later.
- **E.2—Stratum 2 total**—Enter the total number of Stratum 2 cases during the sample month. A case is in Stratum 2 (Redeterminations) in the month the decision is made to continue eligibility or in the month the new period of eligibility becomes effective, whichever is later.
- **E.3—Stratum 3 total**—Enter the total number of Stratum 3 cases during the sample month. A case is in Stratum 3 (All Other Cases) if the case is on the program in the sample month but does not meet the Strata 1 or 2 criteria.

▶ **Line F: Negative Universe Total**

The Negative Universe is comprised of all cases denied in the sample month and all cases where the termination is effective in the sample month. The universe will be unique for each month.

▶ **Case ID**

Enter the case identification (ID) for each sampled case selected from both the active and negative universes. States should use the ID that correlates with the case in the State's eligibility system. The State may assign a "dummy" case ID to each case to protect personally identifiable information. If the State assigns dummy IDs, a crosswalk between the "dummy"

case ID and the actual case ID should be sent on a monthly basis to CMS via secure email or a password-protected CD.

► **Eligibility Category**

The eligibility category is the eligibility coverage program in which the beneficiary is enrolled under Medicaid or CHIP. This information can be completed when you submit the Eligibility Review Report and is not required for Negative Universe cases. For each case, select the appropriate eligibility category from the drop-down list. The Eligibility Category options are provided below.

If the sampled individual is enrolled in more than one category, choose what the state believes is the "primary" category. Note that the "primary" category will not necessarily be based on dollars associated with the case, but instead could be based on the category requested at application.

Example: An individual is enrolled in QMB and Nursing Home Medicaid. Nursing Home is the primary because the applicant is in need of nursing care at the time of application, and is at that time also found eligible for QMB. In this example, QMB is considered the secondary category.

States are also provided an “Other” category if none of the descriptions apply to a sampled case, e.g. a State has a CMS approved waiver and the waiver category does not fit one of the PERM categories.

Eligibility Category Options	
Families with Dependent Children (General)	SLMB
Caretaker Relative—Categorically Needy	Qualifying Individual
Caretaker Relative—Medically Needy	Qualified Disabled and Working Individuals
Children (All Ages) less than 133% Federal Poverty Limit	Other Full Benefit Dual Eligible (FBDE)
Children (All Ages) Medically Needy	Home and Community-Based Services
Pregnant Woman	Katie Beckett
Newborn	Nursing Home
Unborn Child (Undocumented Pregnant Woman)	Elderly Waivers
Transitional Medicaid	Family Planning Services
Aged, Blind & Disabled Categorically Needy	Women with Breast or Cervical Cancer
Aged, Blind & Disabled Medically Needy	Emergency Services (Including for Non-Citizens)
SSI Recipients (Non-1634 States)	Medicaid expansion
Institutional or Hospital Care	CHIP Stand-alone
QMB	Other (None of the Above)

▶ **Universe**

For each case, select Active or Negative universe.

▶ **Stratum (only complete if stratifying)**

For each case, select Stratum 1 (Applications), Stratum 2 (Redeterminations) or Stratum 3 (All Other Cases).

▶ **Case Action**

Identify the last case action on the case that is under review. For Active Cases, enter Application if the action on the case was to grant eligibility based on a completed application or Redetermination if the action on the case was to redetermine eligibility based on a completed redetermination. (**Note:** When submitting data directly into the PETT website, States that stratify will only have to enter this information for Stratum 3 cases; Stratum 1 and Stratum 2 cases are pre-populated on the form based on the data provided in the Stratum field). For Negative Cases, states should select Denial if the action being reviewed is the denial of a new application or Termination if the action being reviewed is termination based on a redetermination of eligibility.

▶ **Review Month**

Enter the review month for which eligibility is being verified which may not be the sample month. In general, the review month is the month of the last action. If the last action was more than 12 months prior to the sample month, the review month is the sample month. For Stratum 1 (Applications) and Stratum 2 (Redeterminations) cases, the review month should be the same as the sample month if the decision and effective dates are in the same month. For Negative Universe cases, the review month would be the month a case was denied or terminated.

▶ **Review Finding**

Select the letter code for the review finding (e.g., E, NE, EI, MCE1) for each case. The active and negative case review finding codes are defined as follows:

Active Cases

- ▶ **E—Eligible** –A case meets the State’s categorical and financial criteria for receipt of benefits under the program
- ▶ **NE—Not eligible** – An individual beneficiary or family is receiving benefits under the program but does not meet the State’s categorical and financial criteria being verified using the State’s documented policy and procedures.
- ▶ **EI—Eligible with ineligible services** – An individual beneficiary or family meets the State’s categorical and financial criteria for receipt of benefits under the Medicaid or CHIP program but was not eligible to receive particular services in accordance with the State’s documented policies and procedures
- ▶ **U—Undetermined**—The case record lacks or contains insufficient documentation, in accordance with the State’s documented policies and procedures, to make a definitive review decision for eligibility or ineligibility
- ▶ **L/O-SD—Liability overstated-spend down** – The beneficiary overpaid toward a spend down amount and the State underpaid
- ▶ **L/O-BP—Liability overstated-beneficiary premium** – The beneficiary overpaid toward a beneficiary premium and the State underpaid
- ▶ **L/O-O—Liability overstated-other** – The beneficiary overpaid toward an assigned liability amount or cost of institutional care and the State underpaid
- ▶ **L/U-SD—Liability understated-spend down** – The beneficiary underpaid toward a spend down amount and the State overpaid
- ▶ **L/U-BP—Liability understated-beneficiary premium** – The beneficiary underpaid toward a beneficiary premium and the State overpaid
- ▶ **L/U-O—Liability understated-other** – The beneficiary underpaid toward an assigned liability amount or cost of institutional care and the State overpaid
- ▶ **MCE1—Managed care error, Ineligible for managed care** -- Upon verification of residency and program eligibility, the beneficiary is enrolled in managed care but is not eligible for managed care
- ▶ **MCE2—Managed care error, Eligible for managed care but improperly enrolled** — Beneficiary is eligible for both the program and for managed care but not enrolled in the correct managed care plan as of the month eligibility is being verified
- ▶ **X—Dropped** – Case is dropped from the sample. Sampling situations that might cause a State to adjust the sample and the universe after it has already been pulled include when:
 - A case is found to be under active beneficiary fraud investigation
 - A case should have been excluded from the sampling universe but was included inadvertently in the universe and sampled (e.g., a State-only case was sampled)
 - A case was enrolled in Medicaid or CHIP using States’ Express Lane Eligibility option, set forth in Section 1902(e)(13) and Section 2107(e)(1) of the Social Security Act (although these cases should be coded in a way that they could be excluded from the sampling universe)
- ▶ **TE-ACT—Technical error active universe** – PERM review found an error in the case that did not affect eligibility or result in an improper payment

Note: If a case is identified in the sample under the above conditions, or other circumstances not listed here that may warrant a drop, please contact CMS and the SC before making a resubmission.

This will help CMS identify the scope of any sampling concerns and provide the appropriate guidance for how to proceed.

Negative Cases

- ▶ **C—Correct** – The negative case was properly denied or terminated by the State
- ▶ **ID—Improper denial** – An application for program benefits was denied by the State for not meeting a categorical and/or financial eligibility requirement but, upon review, is found to be eligible for the tested category or a different category under the program in accordance with the State’s documented policies and procedures
- ▶ **IT—Improper termination** – During a redetermination, the State determined that an existing beneficiary no longer met the program’s categorical and/or financial eligibility requirements and was terminated but upon review is found to have been eligible for the tested category or a different category under the program in accordance with the State’s documented policies and procedures
- ▶ **X—Dropped** – Case is dropped from the sample. Please contact CMS and the SC when a case needs to be dropped
- ▶ **TE—Technical error negative universe** – PERM review found an error in the case that did not affect the state’s decision to deny or terminate the case

▶ **Cause of Error**

Enter the cause of the error for findings other than Eligible or Correct. For each error, select the appropriate cause of error from the drop-down list. The Cause of Error options are provided below.

For cases that are found to have more than one cause of error, CMS leaves discretion to the States to identify the primary cause of error. For cases where more than one aspect of eligibility cannot be verified, the State should select “Eligibility Criteria Cannot be Verified.”

The list of PERM error causes is not all-inclusive. If cases are in error based on agency or client circumstances that are not listed here, States may select one of the “Other” error causes.

Active Case Options	
Income: Client Failed to Report Countable Income	Citizenship/Identification/Residency: Case Record Missing Citizenship/Identity Doc
Income: Agency Failed to Collect Appropriate Income Verification	Citizenship/Identification/Residency: Agency Failed to Accept Appropriate Citizenship/Identification Doc
Income: Agency Miscalculated Countable Income	Citizenship/Identification/Residency: Residency Cannot be Determined
Income: Other	Citizenship/Identification/Residency: Recipient is Not a State Resident
Assets: Agency Failed to Accept Appropriate Asset Verification	Citizenship/Identification/Residency: Other

Active Case Options	
Assets: Agency Miscalculated Countable Assets	State Procedure: Application is Incomplete
Assets: Client Failed to Report Countable Assets	State Procedure: Missing/Insufficient/Inconsistent Case Notes
Assets: Other	State Procedure: Missing Pregnancy Verification (Eligibility/Technical Error)
Household Composition: Person Improperly Included/Excluded from Budget Group	State Procedure: Beneficiary Premium Payment Miscalculated
Household Composition: Agency Accepted Inappropriate Verification of Household Composition	State Procedure: Recipient in Wrong Medicaid Category
Household Composition: Other	State Procedure: CHIP Case not Properly Screened for Medicaid Eligibility
Third Party Liability (TPL): Client Failed to Report TPL	State Procedure: Agency Failed to Accept Appropriate Self Declaration
Third Party Liability (TPL): TPL Failed to Pay Applicable Medical Expenses	State Procedure: Other
Third Party Liability (TPL): Client Ineligible Due to TPL	Eligibility Criteria Cannot be Verified
Third Party Liability (TPL): Other	

Negative Case Options	
Recipient Not Given 10 Day Advance Notice	Case Not Evaluated for Transitional Medicaid/Medicaid Extension
Notice had Incorrect Denial/Termination Reason	Case Terminated Without Evaluation for Other Medicaid Category
Missing Case Record	Other
Agency Failed to Act on Timely Verification	

► **Optional Cause of Error Detail**

Use this is a free text entry field to enter the cause of any error or technical error that did not result in a payment error. The field can also be used to enter additional information, if

necessary, to clarify the selected Cause of Error code. This field is required for cases with a “Technical Error” review finding.

Note: Per the PERM eligibility guidelines, technical errors are errors identified during the eligibility review that do not affect the eligibility of a case for a given program (Medicaid or CHIP) and would not result in a difference between the amount that was paid and the amount that should have been paid on behalf of the sampled case.

▶ **Total Dollars**

For all Active Universe cases except those with a Review Finding of Undetermined (U), enter the total dollars the State paid for services received in the sample month for each case. It includes payments to a provider, insurer or managed care organization for the program and for the services received.

- ▶ For fee-for-service cases, enter the total amount of dollars paid for the beneficiary based on claims for services received at any time through the sample month and paid in that month or the four subsequent months, allowing 60 days for adjustments
- ▶ For managed care cases, enter the capitated amount paid for the case. All managed care payments for the sample month are included regardless of the actual payment date so long as the coverage dates fall within the sample month and are paid by the end of the fourth subsequent month after the sample month. Prospective capitation payments are also included in the payment review so long as the prospective payment is applied to the beneficiary’s coverage in the sample month
- ▶ Do not include payments made by the beneficiary.
- ▶ Place a zero in this column if the State did not make any payments for the sample month.
- ▶ Place a zero in this column if the review finding for the case is Undetermined.

▶ **Total Dollars in Error**

For all Active Universe cases not found to be Undetermined, enter the amount of payment that is in error based on each case’s:

- ▶ Ineligibility for the program
- ▶ Ineligibility for the services received
- ▶ Liability overstated or understated
- ▶ Ineligibility for managed care
- ▶ Eligibility for managed care but enrollment in the wrong managed care plan
(*e.g., the difference in the amount managed care capitation payment for which the case is eligible, if any*)

Enter the portion of the total payments, in whole or in part, that was in error for each sampled case.

For cases that involve an incorrect calculation of beneficiary spend down, contribution to care or beneficiary-paid premium to the state, enter the difference between what the beneficiary was told to pay/contribute versus what the beneficiary should have been told to pay/contribute. **Please contact CMS or The Lewin Group for additional guidance on liability errors.**

For cases that are found to have both an error in the beneficiary premium calculation and an error for any other reason (e.g., Eligible with Ineligible Services), Total Dollars in Error would equal the sum of these two errors.

Place a zero in this column if there is no payment amount in error or if the review finding for the case is Undetermined.

▶ **Total Dollars Correct**

For all Active Universe cases except those with a Review Finding of Undetermined (U), a correct payment amount is a payment to a provider, insurer or managed care organization based on the case's eligibility for the program and for the services received under the coverage group for which the case is eligible as defined in the State's plan.

- ▶ For fee-for-service cases, enter the total amount of dollars paid for the beneficiary based on claims for services received at any time through the sample month and paid in that month or the four subsequent months, allowing 60 days for adjustments
- ▶ For managed care cases, enter the capitated amount paid for the case. All managed care payments for the sample month are included regardless of the actual payment date so long as coverage dates fall within the sample month and are paid by the end of the fourth subsequent month after the sample month. Prospective capitation payments are also included in the payment review so long as the prospective payment is applied to the beneficiary's coverage in the sample month

Enter the portion of the payments, in whole or in part, as appropriate, that were correct for each sampled case. Place a zero in this column if there is no correct payment amount.

Do not include payments made by the beneficiary.

Place a zero in this column if the review finding for the case is Undetermined.

▶ **Total Dollars Undetermined**

For all Active Universe cases that are found to be Undetermined (based on a case not having the verification necessary to make an eligibility review decision), enter the total amount of payments associated with the case. Place a zero in this column if the case is not undetermined.

Note: While reported separately on the PETT website, Total Dollars Undetermined is included in the error rate calculations. Total Dollars Undetermined is combined with Total Dollars to obtain the Sample Paid Amount. Total Dollars Undetermined is combined with Total Dollars in Error to obtain the Sample Error Amount. (On the PETT website, States also have the option to calculate the error rates with undetermined cases excluded as errors. In those instances, Total Dollars Undetermined is not added to Total Dollars in Error.)

Leave payment columns blank if a case is dropped and leave payment columns blank for all negative cases.

Appendix C: PERM Eligibility Summary Case Review Findings Form

Payment Error Rate Measurement (PERM) Eligibility Reviews: Summary Findings

Categories	Summary Details									
<i>A. State</i>										
<i>B. Date</i>										
<i>C. Program</i>										
	Number of Cases in Universe	Number of Cases Sampled	Number of Cases Dropped from Sample	Number of Cases Correct	Number of Cases Incorrect	Number of Cases Undetermined	Total Dollars Paid	Total Dollars Correct	Total Dollars in Error	Total Dollars Undetermined
<i>D. Active</i>										
<i>Stratum 1</i>										
<i>Stratum 2</i>										
<i>Stratum 3</i>										
<i>E. Negatives</i>										
<i>Denials</i>										
<i>Terminations</i>										
<i>F. Totals</i>										

I certify that this information is accurate and that the State will maintain the sampled case records used in the calculation of the eligibility error rate for a minimum period of three years from this date. I understand that this information may be subject to Federal review and that our sampled case records are subject to Federal audit.

Signature: _____ Date: _____

State Medicaid or CHIP Director or Designee

Appendix D: PERM Eligibility Summary Case Review Findings Form Line by Line Instructions

▶ **Line A: State**

Enter the name of the State participating in the PERM program that is submitting this report.

▶ **Line B: Date**

Enter the date the Summary Findings form is being submitted to CMS (e.g. July 1, 2010).

▶ **Line C: Program**

Enter the program for which the Summary Findings form applies (e.g. Medicaid or CHIP).

▶ **Line D: Active**

Enter information on all active cases from across the twelve sampling months of the PERM cycle. An active case is a case containing information on beneficiaries who are enrolled in the Medicaid or CHIP program in the sample month.

- **Stratum 1—Applications:** Enter information on all Stratum 1 active cases from across the twelve sampling months of the PERM cycle.
- **Stratum 2—Redeterminations:** Enter the information on all Stratum 2 active cases from across the twelve sampling months of the PERM cycle.
- **Stratum 3—All Other Cases:** Enter the information on all Stratum 3 active cases from across the twelve sampling months of the PERM cycle.

Please note that the rows with the three eligibility strata are not used if a State decides not to stratify the eligibility universes and samples.

▶ **Line E: Negative**

Enter the appropriate information on all negative cases from across the twelve sampling months of the PERM cycle. A negative case is a case containing information on a beneficiary who applied for benefits and was denied or whose program benefits were terminated based on the State agency's eligibility determination.

- **Denials:** Enter the appropriate information on all cases where the State rejected an application for not meeting categorical and financial eligibility requirements.
- **Terminations:** Enter the appropriate information on all cases where the State took an action to termination program eligibility when an existing beneficiary no longer meets eligibility requirements.

▶ **Line F: Totals**

Enter the total number of cases and dollars in each column. For example, in column one, sum the total number of active cases and the total number of negative cases and in column two, sum the total number of active and negative cases sampled.

For each row described above, enter the appropriate numbers in each column as follows:

▶ **Number of Cases in the Universe Column**

Enter the number of cases in the universe subject to sampling for the months reviewed throughout the fiscal year. These cells should be left blank in the Denials and Terminations rows because States are not required to collect this level of information.

▶ **Number of Cases Sampled Column**

Enter the number of cases sampled in each of the categories described in the rows above (*when applicable*).

▶ **Number of Cases Dropped from Sample**

Enter the number of cases excluded from the sample due to the acceptable reasons given in the PERM eligibility guidance in each of the categories described in the rows (when applicable). These should equal the number of dropped cases reported on the monthly PERM Eligibility Review Findings form.

Note: In the Summary Review Findings form on PETT, the Number of Dropped Cases is not counted in the Sample Number of Cases which only reflects the number of cases that were reviewed by the State.

▶ **Number of Cases Correct Column**

Enter the number of cases deemed to be correct through the PERM eligibility reviews in each of the categories described in the rows (*when applicable*).

For active cases, the column should equal the number of cases reported on the PERM Eligibility Review Findings forms completed throughout the fiscal year with a review finding of E-eligible, EI-eligible with ineligible services, L/O-liability overstated, L/U-liability understated, MCE1-managed care error, ineligible for managed care or MCE2-eligible for managed care, but improperly enrolled.

The State should not include any cases with a review finding of U—undetermined in this column.

For negative cases, the column should equal the number of denied and terminated cases reported on the PERM Eligibility Review Findings forms completed throughout the fiscal year with a review finding of C—correct.

▶ **Number of Cases Incorrect Column**

Enter the number of cases deemed to be incorrect through the PERM eligibility review in each of the categories described in the rows.

For active cases, the column should equal the number of cases reported on the PERM Eligibility Review Findings forms completed throughout the fiscal year with a review finding of NE—not eligible.

The State should not include any cases with a review finding of U—undetermined in this column.

For negative cases, the column should equal the number of cases reported on the PERM Eligibility Review Findings forms completed throughout the fiscal year with a review finding of either ID—incorrect denial or IT—incorrect termination.

▶ **Number of Cases Undetermined Column**

Enter the number of cases for which the State was unable to determine eligibility in each of the rows (*when applicable*).

For active cases, the column should equal the number of cases reported on the PERM Eligibility Review Findings forms completed throughout the fiscal year with a review finding of U-Undetermined.

The cells should be left blank in the Negative, Denials and Terminations rows because Undetermined review findings do not apply to negative cases.

▶ **Total Dollars Paid Column**

Enter the total dollars paid that corresponds with each of the categories described in the rows (*when applicable*).

The cells should be left blank for Undetermined cases which are reported separately.

The cells should be left blank in the Negative, Denials and Terminations rows because payment reviews are not completed for negative cases.

▶ **Total Dollars Correct Column**

Enter the total dollars paid correctly that corresponds with each of the categories described in the rows (*when applicable*).

The cells should be left blank for Undetermined cases which are reported separately.

The cells should be left blank in the Negatives, Denials and Terminations rows because payment reviews are not completed for negative case.

▶ **Total Dollars in Error Column**

Enter the total dollars paid in error that corresponds with each of the categories described in the rows (*when applicable*).

The cells should be left blank for Undetermined cases which are reported separately.

The cells should be left blank in the Negatives, Denials and Terminations rows because payment reviews are not completed for negative cases.

▶ **Total Dollars Undetermined Column**

Enter the total dollars associated with all cases cited as Undetermined for each of the categories described in the rows (*when applicable*).

The cells should be left blank in the Negative, Denials and Terminations rows because payment reviews are not completed for negative cases and undetermined cases are not associated with negative cases.

Appendix E: PERM Eligibility Medicaid and CHIP Timeline

PERM Eligibility Timeline for Medicaid and CHIP														
	Quarter 1			Quarter 2			Quarter 3			Quarter 4				
	August	September	October	November	December	January	February	March	April	May	June	July	August	September
Sampling Plan	States submit Sampling Plans: Due August 1	CMS Sampling Plan review	States take action to implement approved Sampling Plans											
Monthly Sample				Select October Sample: Due November 15	Select November Sample: Due December 15	Select December Sample: Due January 15	Select January Sample: Due February 15	Select February Sample: Due March 15	Select March Sample: Due April 15	Select April Sample: Due May 15	Select May Sample: Due June 15	Select June Sample: Due July 15	Select July Sample: Due August 15	Select August Sample: Due September 15
Eligibility Reviews								October Eligibility Review Findings: Due March 31	November Eligibility Review Findings: Due April 30	December Eligibility Review Findings: Due May 31	January Eligibility Review Findings: Due June 30	February Eligibility Review Findings: Due July 31	March Eligibility Review Findings: Due August 31	April Eligibility Review Findings: Due September 30
Payment Reviews										October Payment Review Findings: Due May 15	November Payment Review Findings: Due June 15	December Payment Review Findings: Due July 15	January Payment Review Findings: Due August 15	February Payment Review Findings: Due September 15
Post Cycle														
PERM Eligibility Timeline for Medicaid and CHIP—Continued														
	August	September	October	November	December	January	February	March	April	May	June	July	August	September
Sampling Plan														
Monthly Sample			Select September Sample: Due October 15											
Eligibility Reviews			May Eligibility Review Findings: Due October 31	June Eligibility Review Findings: Due November 30	July Eligibility Review Findings: Due December 31	August Eligibility Review Findings: Due January 31	September Eligibility Review Findings: Due February 28							
Payment Reviews			March Payment Review Findings: Due October 15	April Payment Review Findings: Due November 15	May Payment Review Findings: Due December 15	June Payment Review Findings: Due January 15	July Payment Review Findings: Due February 15	August Payment Review Findings: Due March 15	September Payment Review Findings: Due April 15					
Post Cycle										States must finalize all eligibility reviews, payment reviews, and appeal results		Finalized Error Findings: Due July 1		