Center for Consumer Information & Insurance Oversight

Centers for Medicare & Medicaid Services

Department of Health & Human Services

SBM Weekly Indicators: Layout for State's Data Submission

This document is the submission format for states with state based marketplaces to submit data to the federal government. This format does not require the submission of individual-level, granular data. The data will be used to assess the Marketplace progress in operational performance, QHP plan premiums and subsidies, and enrollment/eligibility activity for initial years of operations.

QHP Data in this layout are specific to medical QHPs ands stand-alone dental plans (not vision) and coverage offered through the marketplaces (not Medicaid or CHIP coverage).

If no data match the restrictions of a particular data element, enter "-777". If the data are believed to be reportable at the time that the data are submitted, enter "-888" to indicate the data are not available. If it is not possible to report a data element because of the way the marketplace is operated, enter "-999" to indicate the data elements are not applicable.

Reporting Schedule: Weekly during Open Enrollment; aggregated to 4 weeks of data during other parts of the year. For each report, states should report cumulative data from the start of Open Enrollment (November 15, 2014). The first scheduled reporting due date is November 25, 2014. Questions should be directed to Nick Sukachevin at Nickom.Sukachevin@cms.hhs.gov or Carly Rhyne at Carly.Rhyne@cms.hhs.gov

State (se	elect cell to reveal drop down box)	Select One:	
Referend	ce Period (DD/MM/YY) - (DD/MM/YY)	Select One:	NOTE: First Reference Period is 11/15/14-11/22/14. <u>***If</u> applicable, report any early 2015 QHP re-enrollments (performed before 11/15/14) during this reporting period.***
Date of	Report (DD/MM/YY)	Select One:	Date of Report (if not listed in dropdown):

Indicator Number	Category	Measure	Indicator for Cell	Special Enrollment Period (SEP): 2014 Coverage (Applies only to 11/15/2014- 12/31/2014, NOT Including Stand-alone Dental Plans)	Enrollment: 2015 Coverage (Not Including Stand-alone Dental Plans)	Enrollment: Stand-alone Dental Plans: 2015 Coverage
1	Initial Applications - Application Level (see Glossary)		Compl Appl: Electronic			
2		Number of Applications Completed, by Electronic and Paper	Compl Appl: Paper			
3			Compl Appl: Total			
		Number of Individuals Applying for Coverage through the				
4		Marketplace (Individual Level)	Individuals Appl: Total			
5	Determined Eligible QHP / Assessed Eligible Medicaid/CHIP		Eligible: Total			
6	For QHPs: An individual is QHP Eligible if they submitted a completed application (or had a complete application submitted on their behalf) and the SBM	into a QHP (whether or not applying for financial assistance,	Eligible: Without FA			
7	has deemed the individual eligible for QHP enrollment (either provisional or final eligibility) during the	Financial Assistance IFAL (APTC Only APTC + CSRs)	Eligible with FA: APTC Only			
8	reference period. These individuals may or may not		Eligible with FA: APTC + CSRs			
9	have enrolled in coverage (meaning picked a QHP or paid the first premium) by the end of the reference		Eligible by Language Preference: No Language Preference			
10	period.	Number of Individuals Determined Eligible for Enrollment	Eligible by Language Preference: Spanish			
11		Into a QHP (Individual Level) by Language Preference	Eligible by Language Preference: Other Language			
12			Eligible by Gender: Male			
13		into a OHP by Gender	Eligible by Gender: Female			
14			Eligib assessment: Medicaid (if breakout possible)			
15		Distribution of Assessed Eligible Individuals by Medicaid and	Eligib assessment: CHIP (if breakout possible)			
16			Eligib assessment: Medicaid + CHIP			
	Plan Selection: Effective (not effectuated) Enrollment					
17	During the Reference Period. Individuals Who were deemed QHP eligible, selected a QHP and a financial assistance [FA] amount (if eligible), and the SBM	Number of Individuals with QHP Plan Selection: TOTAL Calculate Covered Lives	Individuals Enrolled: Total			
18	approved the QHP selection during the reference period	Number of Individuals with QHP Plan Selection by Language	Plan Selection by Language Preference: No Language Preference			
19	period	Preference	Plan Selection by Language Preference: Language Spanish			
20			Plan Selection by Language Preference: Other Language			
21		Number of Individuals Selecting a 2015 QHP Who Were Not	Plan Selection for New Enrollees: Total			
22		Enrolled in a 2014 Marketplace Plan (New Enrollment). Enter Stand Alone Dental Plan new enrollments separately	Plan Selection for New Enrollees by FA: Enrollment New without FA	-		
23		in SADP column. Calculate Covered Lives	Plan Selection for New Enrollees by FA: Enrollment New with FA			
24		Number of Individuals Selecting a 2015 QHP Who Were	Plan Selection for Re-enrollees: Total			
25		Enrolled in a 2014 Marketplace Plan (Re-Enrollment). Enter Stand Alone Dental Plan Re-enrollments separately in SADP				
26		column. Calculate Covered Lives	Plan Selection for Re-enrollees by FA: Re-enrollment with FA			
27			Plan Selection without FA: Total			
28		Number of Individuals Selecting a QHP by FA (No FA, APTC Only, and APTC+CSRs)	Plan Selection by FA: APTC Only			
29		Calculate Covered Lives	Plan Selection by FA: APTC + CSRs			
30		Number of Individuals Selecting a QHP by Gender	Plan Selection by Gender: Male			
31		Calculate Covered Lives	Plan Selection by Gender: Female			
32			Plan Selection by Age: AGE1<18			
33			Plan Selection by Age: AGE2 18-25			
34			Plan Selection by Age: AGE3 26-34			
35		Number of Individuals Selecting a QHP by Age Group Calculate Covered Lives	Plan Selection by Age: AGE4 35-44			
36			Plan Selection by Age: AGE5 45-54			
37			Plan Selection by Age: AGE6 55-64			
38			Plan Selection by Age: AGE7 >=65			
39			Plan Selection by Gender: Male: AGE1<18			
40			Plan Selection by Gender and Age: Male: AGE2 18-25			
41			Plan Selection by Gender and Age: Male: AGE3 26-34			
42			Plan Selection by Gender and Age: Male: AGE4 35-44			
43			Plan Selection by Gender and Age: Male: AGE5 45-54			
44			Plan Selection by Gender and Age: Male: AGE6 55-64			
45		Number of Individuals Selecting a QHP by Gender and Age	Plan Selection by Gender and Age: Male: AGE7 >=65			
46		Group Calculate Covered Lives	Plan Selection by Gender and Age: Female: AGE1<18			
47			Plan Selection by Gender and Age: Female: AGE2 18-25			
48			Plan Selection by Gender and Age: Female: AGE3 26-34			
49			Plan Selection by Gender and Age: Female: AGE4 35-44			
50			Plan Selection by Gender and Age: Female: AGE5 45-54			
51			Plan Selection by Gender and Age: Female: AGE6 55-64			
52			Plan Selection by Gender and Age: Female: AGE7 ≥65			
53			Plan Selection by Metal Level: Catastrophic			
54			Plan Selection by Metal Level: Bronze			
55		Number of Individuals Selecting a QHP by Metal Level Calculate Covered Lives	Plan Selection by Metal Level: Silver			
56			Plan Selection by Metal Level: Gold			
57			Plan Selection by Metal Level: Platinum			
58			Plan Selection by Age and Metal Level: AGE1<18: Catastrophic			
59			Plan Selection by Age and Metal Level: AGE1<18: Bronze			
60			Plan Selection by Age and Metal Level: AGE1<18: Silver			
61			Plan Selection by Age and Metal Level: AGE1<18: Gold			
62			Plan Selection by Age and Metal Level: AGE1<18: Platinum			
63			Plan Selection by Age and Metal Level: AGE2 18-25: Catastrophic			
			Dian Selection by Age and Motel Levels ACE2 19, 25; Pronze			
64			Plan Selection by Age and Metal Level: AGE2 18-25: Bronze			
64 65			Plan Selection by Age and Metal Level: AGE2 18-25: Silver			

Indicator Number	Category	Measure	Indicator for Cell	Special Enrollment Period (SEP): 2014 Coverage (Applies only to 11/15/2014- 12/31/2014, NOT Including Stand-alone Dental Plans)	Enrollment: 2015 Coverage (Not Including Stand-alone Dental Plans)	Enrollment: Stand-alone Dental Plans: 2015 Coverage
67			Plan Selection by Age and Metal Level: AGE2 18-25: Platinum			
68 69			Plan Selection by Age and Metal Level: AGE3 26-34: Catastrophic Plan Selection by Age and Metal Level: AGE3 26-34: Bronze			
70			Plan Selection by Age and Metal Level: AGE3 26-34: Silver			
71			Plan Selection by Age and Metal Level: AGE3 26-34: Gold			
72			Plan Selection by Age and Metal Level: AGE3 26-34: Platinum			
73			Plan Selection by Age and Metal Level: AGE4 35-44: Catastrophic			
74		Number of Individuals Selecting a OHD by Age and Motal	Plan Selection by Age and Metal Level: AGE4 35-44: Bronze			
75			Plan Selection by Age and Metal Level: AGE4 35-44: Silver			
76		Calculate Covered Lives	Plan Selection by Age and Metal Level: AGE4 35-44: Gold			
77			Plan Selection by Age and Metal Level: AGE4 35-44: Platinum			
78			Plan Selection by Age and Metal Level: AGE5 45-54: Catastrophic			
79			Plan Selection by Age and Metal Level: AGE5 45-54: Bronze			
80			Plan Selection by Age and Metal Level: AGE5 45-54: Silver			
81 82			Plan Selection by Age and Metal Level: AGE5 45-54: Gold			
83			Plan Selection by Age and Metal Level: AGE5 45-54: Platinum Plan Selection by Age and Metal Level: AGE6 55-64: Catastrophic			
84			Plan Selection by Age and Metal Level: AGE6 55-64: Bronze			
85			Plan Selection by Age and Metal Level: AGE6 55-64: Silver			
86			Plan Selection by Age and Metal Level: AGE6 55-64: Gold			
87			Plan Selection by Age and Metal Level: AGE6 55-64: Platinum			
88			Plan Selection by Age and Metal Level: AGE7 >=65: Catastrophic			
89			Plan Selection by Age and Metal Level: AGE7 >=65: Bronze			
90			Plan Selection by Age and Metal Level: AGE7 >=65: Silver			
91			Plan Selection by Age and Metal Level: AGE7 >=65: Gold			
92			Plan Selection by Age and Metal Level: AGE7 >=65: Platinum			
93			Plan Selection by FA and Metal Level: Enrolled Without FA: Catastrophic			
94			Plan Selection by FA and Metal Level: Enrolled without FA: Bronze			
95 96			Plan Selection by FA and Metal Level: Enrolled without FA: Silver Plan Selection by FA and Metal Level: Enrolled without FA: Gold			
96			Plan Selection by FA and Metal Level: Enrolled without FA: Gold Plan Selection by FA and Metal Level: Enrolled without FA: Platinum			
98		with FA) and Metal Level Calculate Covered Lives	Plan Selection by FA and Metal Level: Enrolled with FA: Catastrophic			
99			Plan Selection by FA and Metal Level: Enrolled with FA: Bronze			
100			Plan Selection by FA and Metal Level: Enrolled with FA: Silver			
101			Plan Selection by FA and Metal Level: Enrolled with FA: Gold			
102			Plan Selection by FA and Metal Level: Enrolled with FA: Platinum			
103			Plan Selection with FA by FPL: FA and FPL1			
104			Plan Selection with FA by FPL: FA and FPL2			
105			Plan Selection with FA by FPL: FA and FPL3			
106		Number of Individuals with FA Selecting a QHP by FPL	Plan Selection with FA by FPL: FA and FPL4			
107		(Among Indiviudals Receiving FA) Calculate Covered Lives	Plan Selection with FA by FPL: FA and FPL5			
108			Plan Selection with FA by FPL: FA and FPL6			
109 110			Plan Selection with FA by FPL: FA and FPL7 Plan Selection with FA by FPL: FA and FPL8			
111			Plan Selection with FA by FPL: FA and FPL9 (unknown)			
119			Plan Selection by Issuer: Issuer 1			
120			Plan Selection by Issuer: Issuer 2			
121			Plan Selection by Issuer: Issuer 3			
122			Plan Selection by Issuer: Issuer 4			
123			Plan Selection by Issuer: Issuer 5			
124			Plan Selection by Issuer: Issuer 6			
125			Plan Selection by Issuer: Issuer 7			
126			Plan Selection by Issuer: Issuer 8			
127			Plan Selection by Issuer: Issuer 9			
128 129			Plan Selection by Issuer: Issuer 10			
129			Plan Selection by Issuer: Issuer 11 Plan Selection by Issuer: Issuer 12			
131			Plan Selection by Issuer: Issuer 12 Plan Selection by Issuer: Issuer 13		+	
132			Plan Selection by Issuer: Issuer 14			
133		Number of Individuals Selecting a QHP by Issuer	Plan Selection by Issuer: Issuer 15			
134		Calculate Covered Lives	Name Issuer 1	Enter Text Here	Enter Text Here	Enter Text Here
135			Name Issuer 2	Enter Text Here	Enter Text Here	Enter Text Here
136			Name Issuer 3	Enter Text Here	Enter Text Here	Enter Text Here
137			Name Issuer 4	Enter Text Here	Enter Text Here	Enter Text Here
138			Name Issuer 5	Enter Text Here	Enter Text Here	Enter Text Here
139			Name Issuer 6	Enter Text Here	Enter Text Here	Enter Text Here
140			Name Issuer 7	Enter Text Here	Enter Text Here	Enter Text Here
141 142			Name Issuer 8 Name Issuer 9	Enter Text Here Enter Text Here	Enter Text Here Enter Text Here	Enter Text Here Enter Text Here
142			Name Issuer 9 Name Issuer 10	Enter Text Here Enter Text Here	Enter Text Here	Enter Text Here
143			Name Issuer 11	Enter Text Here	Enter Text Here	Enter Text Here
145			Name Issuer 12	Enter Text Here	Enter Text Here	Enter Text Here
146			Name Issuer 13	Enter Text Here	Enter Text Here	Enter Text Here
147			Name Issuer 14	Enter Text Here	Enter Text Here	Enter Text Here
148			Name Issuer 15	Enter Text Here	Enter Text Here	Enter Text Here
149			Median Individ Age Level: AGE1<18			
150			Median Individ Age Level: AGE2 18-25		ļ	
151		Median Individual-Policy QHP Premium by Age Group-	Median Individ Age Level: AGE3 26-34			
152		Calculate cumulative since November 15, 2014	Median Individ Age Level: AGE4 35-44		<u> </u>	
153			Median Individ Age Level: AGE5 45-54			
			Median Individ Age Level: AGE6 55-64 Median Individ Age Level: AGE7 >=65			
154				1	1	
154 155						
		Median Individual-Policy QHP Premium Before APTC (\$): (Only individuals who enroll with APTC) <u>Calculate</u>	Median Indiv Premium: Before APTC			
155		Median Individual-Policy QHP Premium Before APTC (\$):				

Indicator Number	Category	Measure	Indicator for Cell	Special Enrollment Period (SEP): 2014 Coverage (Applies only to 11/15/2014- 12/31/2014, NOT Including Stand-alone Dental Plans)	Enrollment: 2015 Coverage (Not Including Stand-alone Dental Plans)	Enrollment: Stand-alone Dental Plans: 2015 Coverage
4.50		Average Per Person Full Premium for Plans with APTC				
158		Individuals Before APTC Applied. [Average Individual Premium Before APTC Deducted (\$)] All QHPs	Ave indiv premium all QHPs:Before APTC			
159		Average Per Person Full premium for Plans With APTC Individuals, After APTC Applied. Average Individual Premium After APTC Deducted (\$) All QHPs	Ave indiv premium all QHPs:After APTC			
160		Average Per Person Full Premium for Plans With APTC Individuals, Before APTC Applied. [Average Individual Premium Before APTC Deducted (\$)]	Ave Indiv Premium: Before APTC			
161		Average Per Person Premium for Plans With APTC Individuals, After APTC Applied. Average Individual Premium After APTC Deducted (\$)	Ave Indiv premium: After APTC			
162			Ave Individ Premium: APTC: Catastrophic			
163		Average Per Person Full Premium Before APTC Deducted	Ave Individ Premium:APTC: Bronze			
164 165		by Metal Level (\$) <u>Calculate cumulative since November</u> <u>15, 2014.</u>	Ave Individ Premium: APTC: Silver Ave Individ Premium: APTC: Gold			
166			Ave Individ Premium: APTC: Platinum			
167			Ave Individ Premium: No APTC:Catastrophic			
168			Ave Individ Premium: No APTC:Bronze			
169		Average Per Person Premium Without APTC by Metal Level (\$) <u>Calculate cumulative since November 15, 2014.</u>	Ave Individ Premium: No APTC:Silver			
170			Ave Individ Premium: No APTC:Gold			
171			Ave Individ Premium: No APTC:Platinum			
172		Average APTC Payment Selected, by tax household (\$) See glossary. <u>Calculate cumulative since November 15, 2014.</u>	Ave APTC Selected			
173 174		Number of Enrollments Using Assistance (at Application Level)	Enrollment Using Assistance: Yes Enrollment Using Assistance: No			
175	Effectuated Enrollment Individuals who have submitted an application (or had application submitted on their behalf), were deemed QHP Eligible and selected a QHP, the SBM has approved the QHP	Number of Individuals with Effectuated Enrollment in QHP: TOTAL Calculate Covered Lives	Individ Effect:Total			
176	selection, and the first premium payment was received (either directly by the SBM or by the issuer).	Number of Individuals with Effectuated Enrollment in QHP	Effect by Language Preference: No Language Preference			
177		by Language Preference Individual Level	Effect by Language Preference: Spanish			
178			Effect by Language Preference: Other Language			
179		Effectuated Enrollment by New Enrollees: Number of Individuals with Effectuated Enrollment in a 2015 QHP who	Effectuated Enrollment New Enrollee: Total	_		
180		Were NOT Enrolled in a 2014 Marketplace Plan (New Enrollment)	Effectuated Enrollment New Enrollee by FA: Effect New without FA	-		
181		Calculate Covered Lives	Effectuated Enrollment New Enrollee by FA: Effect New with FA	_		
182			Effectuated Enrollment for Re-enrollees: Total			
183		Effectuated Enrollmenbt by Re-enrollees: Number of individuals with Effectuated Enrollment in a 2015 QHP who	Effectiveted Equally and for Deconvellege by EA. Effect requiring the set EA			
		were Enrolleed in a 2014 Marketplace Plan (Re-enrollments) Calculate Covered Lives		-		
184			Effectuated Enrollment for Re-enrollees by FA: Effect new with FA			
185		Number of Individuals with Effectuated Enrollment in QHP	Effect without FA: Total			
186 187		by FA (no FA, APTC Only, and APTC + CSRs) Calculate Covered Lives	Effect with FA: APTC Only Effect with FA: APTCs+CSRs			
188						
189		by Gender Calculate Covered Lives	Effect by Gender: Female			
190			Effect by Age: AGE1<18			
191			Effect by Age: AGE2 18-25			
192 193		Number of Individuals with Effectuated Enrollment in QHP by Age Group	Effect by Age: AGE3 26-34 Effect by Age: AGE4 35-44			
194		Calculate Covered Lives	Effect by Age: AGE5 45-54			
195			Effect by Age: AGE6 55-64			
196			Effect by Age: AGE7 >=65			
197 198			Effect by Gender: Male: AGE1<18 Effect by Gender and Age: Male: AGE2 18-25			
198			Effect by Gender and Age: Male: AGE2 18-25 Effect by Gender and Age: Male: AGE3 26-34			
200			Effect by Gender and Age: Male: AGE4 35-44			
201			Effect by Gender and Age: Male: AGE5 45-54			
202		Number of Industry the Effect of the T	Effect by Gender and Age: Male: AGE6 55-64			
203 204		Number of Individuals with Effectuated Enrollment in QHP by Gender and Age Group Calculate Covered Lives	Effect by Gender and Age: Male: AGE7 >=65 Effect by Gender and Age: Female: AGE1<18			
204			Effect by Gender and Age: Female: AGE2 18-25			
206			Effect by Gender and Age: Female: AGE3 26-34			
207			Effect by Gender and Age: Female: AGE4 35-44			
208			Effect by Gender and Age: Female: AGE5 45-54			
209 210			Effect by Gender and Age: Female: AGE6 55-64 Effect by Gender and Age: Female: AGE7 ≥65			
210			Effect by Level: Catastrophic			
212		Number of Individuals with Effectuated Enrollment in QHP	Effect by Level: Bronze			
213		by Metal Level Calculate Covered Lives	Effect by Level: Silver			
214			Effect by Level: Gold			
215 216			Effect by Level: Platinum Effect by Age and Metal Level: AGE1<18: Catastrophic			
217			Effect by Age and Metal Level: AGE1<18: Bronze			
218			Effect by Age and Metal Level: AGE1<18: Silver			
219			Effect by Age and Metal Level: AGE1<18: Gold			
220			Effect by Age and Metal Level: AGE1<18: Platinum			
221 222			Effect by Age and Metal Level: AGE2 18-25: Catastrophic Effect by Age and Metal Level: AGE2 18-25: Bronze			
222			Effect by Age and Metal Level: AGE2 18-25: Silver			
224			Effect by Age and Metal Level: AGE2 18-25: Gold			
225			Effect by Age and Metal Level: AGE2 18-25: Platinum			
226			Effect by Age and Metal Level: AGE3 26-34: Catastrophic			
227 228			Effect by Age and Metal Level: AGE3 26-34: Bronze Effect by Age and Metal Level: AGE3 26-34: Silver			
228 229			Effect by Age and Metal Level: AGE3 26-34: Silver Effect by Age and Metal Level: AGE3 26-34: Gold			
230			Effect by Age and Metal Level: AGE3 26-34: Platinum			
231			Effect by Age and Metal Level: AGE4 35-44: Catastrophic			
232		Number of Individuals with Effectuated Enrollment in a	Effect by Age and Metal Level: AGE4 35-44: Bronze			
233		QHP by Age and Metal Level Calculate Covered Lives	Effect by Age and Metal Level: AGE4 35-44: Silver			
234			Effect by Age and Metal Level: AGE4 35-44: Gold			

T						
Indicator Number	Category	Measure	Indicator for Cell	Special Enrollment Period (SEP): 2014 Coverage (Applies only to 11/15/2014- 12/31/2014, NOT Including Stand-alone Dental Plans)	Enrollment: 2015 Coverage (Not Including Stand-alone Dental Plans)	Enrollment: Stand-alone Dental Plans: 2015 Coverage
235			Effect by Age and Metal Level: AGE4 35-44: Platinum			
236			Effect by Age and Metal Level: AGE5 45-54: Catastrophic			
237			Effect by Age and Metal Level: AGE5 45-54: Bronze			
238			Effect by Age and Metal Level: AGE5 45-54: Silver			
239			Effect by Age and Metal Level: AGE5 45-54: Gold			
240			Effect by Age and Metal Level: AGE5 45-54: Platinum			
241			Effect by Age and Metal Level: AGE6 55-64: Catastrophic			
242			Effect by Age and Metal Level: AGE6 55-64: Bronze			
243			Effect by Age and Metal Level: AGE6 55-64: Silver			
244			Effect by Age and Metal Level: AGE6 55-64: Gold			
245			Effect by Age and Metal Level: AGE6 55-64: Platinum			
246			Effect by Age and Metal Level: AGE7 >=65: Catastrophic			
247			Effect by Age and Metal Level: AGE7 >=65: Bronze			
248			Effect by Age and Metal Level: AGE7 >=65: Silver			
249			Effect by Age and Metal Level: AGE7 >=65: Gold			
250			Effect by Age and Metal Level: AGE7 >=65: Platinum			
251			Effect by FA and Metal Level: Enrolled without FA: Catastrophic			
252			Effect by FA and Metal Level: Enrolled without FA: Bronze			
252			Effect by FA and Metal Level: Enrolled without FA: Silver			
253			Effect by FA and Metal Level: Enrolled without FA: Gold			
		Number of Individuals with Effectuated Enrollment in QHP				
255		by FA (Without FA, With FA) by Metal Level				
256			Effect by FA and Metal Level: Enrolled with FA: Catastrophic			
257			Effect by FA and Metal Level: Enrolled with FA: Bronze			
258			Efffect by FA and Metal Level: Enrolled with FA: Silver			
259			Effect by FA and Metal Level: Enrolled with FA: Gold			
260			Effect by FA and Metal Level: Enrolled with FA: Platinum			
261			Effect with FA by FPL: FA and FPL1			
262			Effect with FA by FPL: FA and FPL2			
263			Effect with FA and FPL: FA and FPL3			
264		Number of Individuals with FA Effect Enrolled in a QHP by	Effect with FA by FPL: FA and FPL4			
265		FPL (Among Individuals Receiving FA) Calculate Covered Lives	Effect with FA by FPL: FA and FPL5			
266			Effect with FA by FPL: FA and FPL6			
267			Effect with FA by FPL: FA and FPL7			
268			Effect with FA by FPL: FA and FPL8			
269			Effect with FA and FPL: FA and FPL9 (unknown)			
270	SHOP	Number of Employers who completed an application through SHOP	SHOP: Employers Appl: Total	_		
271		Number of SHOP Participating Employers (Effectuated Enrollment) Calculate cumulative since January 1, 2015.	SHOP: Employers Effect: Total			
272		Average Number of SHOP Employees per Participating Employer (Effectuated Enrollment) Calculate cumulative since January 1, 2015.	SHOP: Ave Enrolled Employees in Empl Gr			
273		Average Employer Premium Contribution Percent (Effectuated Enrollment) <u>Calculate cumulative since January</u> <u>1, 2015.</u>	SHOP: Ave Percent Empl Contrib			
274		Number of Employees (covered lives, including dependents) Enrolled through SHOP (Effectuated Enrollment) Calculate				
275	Operations	cumulative since January 1, 2015. Call Center Volume	Call Ctr: Total Calls			
276			Call Ctr: Ave Wait Time			
277			Call Ctr: Aband Rate			
278			Call Ctr: Ave Handle Time			
279			Written+Fax: Total			
280			Website: Visits: Total			
280			Website: Visitors: Total			
281			Website: Views:Total			
282		Number of Trained/Certified Assistors Calculate cumulative				
		since November, 2014.	Website Offline: Total Time			
284		website time Offline (in seconds)				

Category	Measure/Indicator	Definition / Clarification
Data Coding	Applies to any numeric indicator	If no data match the restrictions of a particular data element, enter "-777". If the data are believed to be reportable in the future, but are not reportable at the time that the data are submitted, enter "-888" to indicate the data are not available. If it is not possible to report a data element because of the way the marketplace is operated, enter "-999" to indicate the data elements are not applicable.
Initial Applications	Initiated Electronic Applications	An initiated application submitted via electronic channels includes applications where data is provided through the web portal by the applicant or inputted into the system electronically by call center staff or other assisters. The applicant must have a registered account, started the application, and provided enough information to hit "save."
Application level Individual Market Only	Number of Applications Completed, by Electronic and Paper	A completed application is defined as an application that was submitted during the reference period with sufficient information to begin processing eligibility for any type of coverage (QHP or Medicaid/CHIP). For electronic applications, these applications where the applicant has 'hit submit' and the application is accepted for further processing.
	Eligible for enrollment into a QHP	An individual is QHP Eligible if s/he submitted a completed application (or had a complete application submitted on their behalf) and the SBM has deemed the individual eligible for QHP enrollment (either provisional or final eligibility) during the reference period. These individuals may or may not have enrolled in coverage (meaning picked a QHP or paid the first premium) by the end of the reference period. • Individuals deemed eligible for Medicaid or CHIP are not considered QHP Eligible.
Determined Eligible QHP / Assessed Eligible Medicaid/CHIP Individual Market Only		 Unit/population of interest includes all of the following: Individuals deemed ineligible for QHP coverage with financial assistance (APTC and/or CSR) Individuals that requested their application not be considered for financial assistance Individuals deemed eligible for QHP coverage with financial assistance (APTC and/or CSR) but did not select financial assistance. Individuals that do not fall into "Total Eligible with FA: APTC only" or "Total Eligible with FA: APTCs+CSRs" should be counted in "Eligible without FA"
	Eligible with FA: APTC Only: Total	Number of individuals determined eligible for enrollment to a QHP with <i>only</i> an APTC
	Eligible with APTCs + CSRs: Total	Number of individuals determined eligible for enrollment to a QHP with <i>both</i> an APTC and CSR
	Eligib assessment: Medicaid	
	Eligib assessment: CHIP	For SBMs with integrated eligibility systems: report the number of individuals assessed for Medicaid or CHIP eligibility based on Medicaid MAGI during the reference period. This data element includes all Medicaid MAGI assessments, whether the individuals are found to be eligible or ineligible.
	Eligib assessment: Medicaid + CHIP	If a state does not break out Medicaid or CHIP, please provide the number of individuals determined eligible for Medicaid or CHIP in this cell.
	Number of Individuals enrolled in QHP	Number of individuals that received effective enrollment during the reference period. These individuals were deemed QHP eligible, selected a QHP and a financial assistance amount (if eligible), and the SBM approved the QHP selection during the reference period.
	Number of individuals Selecting a 2015 QHP Who Were Not Enrolled in a 2014 Marketplace Plan (New Enrollment)	Units/population of interest: Individuals enrolled in any 2015 Marketplace QHP who were not enrolled in ANY Marketplace QHP at any time during the 2014 coverage year. For Stand Alone Dental Plans (SADP): Individuals enrolled in any 2015 Marketplace SADP who were not enrolled in any Marketplace SADP at any time in 2014. Calculate SADP new enrollments and report separately in SADP column.

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	Number of individuals Selecting a 2015 QHP Who Were Enrolled in a 2014 Marketplace Plan (Re-Enrollments)	Units/population of interest: Individuals enrolled in any 2015 Marketplace QHP who were enrolled in a Marketplace QHP at some point during the 2014 coverage year (regardless of current status of the 2014 policy). For Stand Alone Dental Plans (SADP): Individuals enrolled in any 2015 Marketplace SADP who were enrolled in a Marketplace SADP at some point in 2014 (regardless of current status of current status of current status of some point status of current status). For Stand Alone Dental Plans (SADP): Individuals enrolled in any 2015 Marketplace SADP who were enrolled in a Marketplace SADP at some point in 2014 (regardless of current status of current status of 2014 policy). Calculate SADP re-enrollments and report separately in SADP column.
		Total Number of Individuals enrolled in a QHP without Financial Assistance (FA)
	Enrolled without FA	Individuals that do not fall into "Total Enrolled with FA: APTC only" or "Total Enrolled with FA: APTCs+CSRs" should be counted in "Enrolled without FA"
	Enrolled with FA	Total Number of Individuals Submitting Enrollment in a QHP with APTC only OR with both APTC and CSRs
	Total Enrolled with FA: APTC only	Total Number of Individuals Submitting Enrollment in a QHP with APTC only
	Total Enrolled with FA: APTCs+CSRs	Total Number of Individuals Submitting Enrollment in a QHP with <i>both</i> APTC and CSR
	Median Individual-Policy QHP Premium - By Age Group	Unit/population of interest: Individuals enrolled in Individual-only QHPs (excludes individuals enrolled in multi-member/family policies). Full Premium Before Any Financial Assistance Applied. (All Individual-only QHPs; Include those with and Financial Assistance.)
	Median Individual Premium Before APTC deducted (\$)	Unit/population of interest: Individuals enrolled in Individual-only QHPs (excludes individuals enrolled in multi-member/family policies) and who enroll with APTC. Calculate based on full premium amount, before the APTC is deducted.
	Median Individual Premium After APTC Deducted (\$)	Unit/population of interest: Individuals enrolled in Individual-only QHPs (excludes individuals enrolled in multi-member/family policies) and who enroll with APTC. Calculate based on the balance of the premium owed, after the APTC is deducted. (Full premium minus APTC.)
Enrollment Activity Individual Market Only	Average Per Person Full Premium for Plans with APTC Individuals Before APTC Applied. [Average Individual Premium Before APTC Deducted (\$)] All QHPs	Unit/population of interest: All enrolled individuals (= # in Indicator 17). Sum the full premiums of all QHPs <i>before</i> the APTC is deducted. Then divide by the number of individuals covered by all QHPs (Indicator 17).
	Average Per Person Full premium for Plans With APTC Individuals, After APTC Applied. Average Individual Premium After APTC Deducted (\$) All QHPs	Unit/population of interest: All enrolled individuals (= # in Indicator 17). Sum the premiums for all QHP enrollees; <i>after</i> the APTC is deducted. Then divide by the number of individuals covered by all QHPs (Indicator 17).
	Average Per Person Full Premium for Plans With APTC Individuals, Before APTC Applied. [Average Individual Premium Before APTC Deducted (\$)]	Unit/population of interest: Individuals who enroll with an APTC (includes enrollees in multi-enrollee policies). Sum the premiums of QHPs which are associated with an APTC <i>before</i> the APTC is deducted. Then divide by the number of individuals covered by those plans associated with an APTC (sum of indicators 28 and 29).
	Average Per Person Premium for Plans With APTC Individuals, After APTC Applied. Average Individual Premium After APTC Deducted (\$)	Unit/population of interest: Individuals who enroll with an APTC (includes enrollees multi-enrollee policies). Sum the premiums of QHPs which are associated with an APTC <i>after</i> the APTC is deducted. Then divide by the number of individuals covered by those plans associated with an APTC (sum of indicators 28 and 29).
	Average APTC payment selected, by tax household.	Reflects the average monthly APTC that the tax household selects. The population included are tax households with individuals that received effective enrollment during the reference period, and qualified for APTC, including those who qualify for an APTC but select \$0.

New Columns Sendal Density Plans. 2015 Coverage Unliky/population of interest: Total number of individuals who enviled in a 2015 Sund Alone Dental Plans. Record Using Statement or supplication for GMP and Interest. Total number of individuals who enviled in a 2015 Sund Alone Dental Plans. Record Using Statement in Statement or Statement in Statement in Statement in Statement or Statement in Statement				
Special Enrollment Period: 2014 Coverage December 31, 2014. Do not include enrollments in stand-alone dental plans. Record Using Special Enrollment Period Colu New Columns Stand-alone Dental Plans: 2015 Coverage Units/population of interest: Total number of Individuals who enrolled in a 2015 Stand-Alone Dental Plan. Record Using Stand-alone Dental Plans: 2015 Coverage Effectuated Enrollment Number of Individuals with Effectuated Enrollment in QHP Effectuated enrollment occurs when an individual has submitted an application (or had application submitted on their befwas deemed QHP Eligible and selected a QHP, the SBM has approved the QHP selection, and the first premium payment w received (either directly by the SBM or by the issuer). Number of Individuals with Effectuated Enrollment in QHP Please exclude individuals eligible for APTC but where no APTC is not applied to the premium. Also, please exclude individuals eligible for CSB, but is not in a plan with CSB			Enrollment Using Assistance (Yes/no)	is intended to capture all recorded types of assistance either with submission of application for QHP enrollment or with selection of a QHP. Describes whether individuals received assistance with either submission of application for QHP enrollment or With selection of a QHP. **This does not include insurance agents and brokers. ** 1) Any (i.e. at least one type of the assistors list below) 2) None (i.e., no recorded assistance) CCIIO recognizes that some assistance is provided but not recorded, and therefore cannot be reported. Also, not all states each of these types of assistance. We are not distinguishing between certified and non-certified assistors; they are conside equivalent for the purposes of this layout. Individuals may have more than one type of assistance Navigator - In-Person Assistor (IPA) - Certified Application Counselor (CAC) - Authorized Representative - Other (includes Community Health Center and other types of assistance not categorized above)Describes whether individuals
Stand-alone Dental Plans: 2015 Coverage Units/population of interest: Total number of Individuals who enrolled in a 2015 Stand-Alone Dental Plan. Record Using Stand-Alone Dental Plan. Record Using Stand-Alone Dental Plan. Record Using Stand-Alone Dental Plan column. Effectuated Enrollment Number of Individuals with Effectuated Effectuated enrollment occurs when an individual has submitted an application (or had application submitted on their befwas deemed QHP Eligible and selected a QHP, the SBM has approved the QHP selection, and the first premium payment we received (either directly by the SBM or by the issuer). Individual Market Only Number of Individuals with Effectuated Errollment in QHP Please exclude individuals eligible for APTC but where no APTC is not applied to the premium. Also, please exclude individuals eligible for CSB, but is not in a nam with CSB		-	Special Enrollment Period: 2014 Coverage	
Effectuated Enrollment Number of Individuals with Effectuated was deemed QHP Eligible and selected a QHP, the SBM has approved the QHP selection, and the first premium payment were ceived (either directly by the SBM or by the issuer). Individual Market Only Number of Individuals with Effectuated Enrollment with APTCs only, and APTCs Please exclude individuals eligible for APTC but where no APTC is not applied to the premium. Also, please exclude individuals eligible for CSB, but is not in a plan with CSB.	New Column	New Columns	Stand-alone Dental Plans: 2015 Coverage	
Enrollment with APTCs only, and APTCs eligible for CSR but is not in a plan with CSR			Enrollment in QHP	was deemed QHP Eligible and selected a QHP, the SBM has approved the QHP selection, and the first premium payment w
			Enrollment with APTCs only, and APTCs	

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	Number of Employers who completed an application through SHOP	Unit of interest: Report the number of employers who completed an application for a SHOP QHP for coverage beginning in the 2015 coverage year (January 1, 2015 and thereafter).
	Number of SHOP Participating Employers (Effectuated Enrollment) <u>Calculate</u> <u>cumulative since January 1, 2015.</u>	Unit of interest: Report the number of employers with at least one employee who has effectuated enrollment in a SHOP QHP beginning on January 1, 2015.
	Average Number of SHOP Employees per Participating Employer (Effectuated Enrollment) <u>Calculate cumulative since</u> January 1, 2015.	Calculate the average number of employees who have effectuated coverage in a SHOP QHP for 2015 coverage out of the total employees on the employee rosters submitted by employers.
	Average Employer Premium Contribution Percent (Effectuated Enrollment) Calculate cumulative since January 1, 2015.	Calculate the average percent that all employers participating in SHOP in 2015 are contributing to their employees' premiums.
	Number of Employees (covered lives, including dependents) Enrolled through SHOP (Effectuated Enrollment) <u>Calculate</u> <u>cumulative number of employees that</u> <u>effectuate coverage beginning on January</u> 1, 2015.	Unit of interest: Total number of covered lives (including employees and their dependents) across all SHOP QHPs who have effectuated coverage for the 2015 coverage year.
	# Enrollment Assisters completing Marketplace training	Number of enrollment assisters who completed Marketplace training during the reference period.
	# Enrollment Assisters registered and certified	Number of enrollment assisters who were registered and certified during the reference period. Please exclude agents and brokers.
	Total call volume	Number of calls that entered the integrated voice response system during the reference period.
	Average call wait time (Average speed of answer- ASA)	Average length of time for which a call is connected to automated call distribution system before answered (average time a caller waits in queue before being connected to an agent) during the reference period. Average is for the reporting time period. Reported in timestamp format (hh:mm:ss).
	Average call handle time (AHT)	Average amount of time an agent spends on call. Average is for the reporting time period. Quarterly reporting is a Quarterly average. Reported in timestamp format (mm:ss).
Operations	Abandonment Rate	Count of total number of calls abandoned (numerator)in the queue (Calls that terminate or drop before reaching an agent or being answered) divided by total call volume (denominator). Carry answer to 2 decimal points.
	Total website page views	Count of page views across the whole Marketplace site during the reference period.
	Total website visits	Count of unique visits to the marketplace website during the reference period.
	Total website unique visitors	Count of unique visitors to the marketplace website during the reference period.
	# of registered users	Count of secure accounts established (registered users) during the reference period.
	Number of Mail/Written Correspondence	Number of letters or written inquiries received via mail or fax; please exclude correspondence <u>not</u> related to Marketplace
	Received	functions, health insurance, or coverage for any insurance affordability program.
	Website Time Offline	Please include only unplanned time offline.
		FPL (Federal Poverty Level) is calculated based on the projected, total, annual modified adjusted gross income (MAGI) for the taxpayer's family. FPL is based on the same MAGI as the SBM uses to determine eligibility of APTC. - MAGI includes the sum of the income of the taxpayer and the lawfully present individuals for whom the taxpayer properly claims a deduction for personal exemption for the taxable year. For additional information see Health Insurance Premium Ta - To report FPL, MAGI should be compared to the HHS poverty guidelines (current levels found here
		http://aspe.hhs.gov/poverty/13poverty.cfm), which is adjusted for the size of the family and state of residence. - For the purposes of the SBM Supplemental Data Submission, MAGI may or may not be verified. States should report FPL
		based on incomes as of the most recent eligibility determination. - For individuals that do not request an eligibility determination for financial assistance, MAGI may not be available. If MAGI is unavailable, populate the cell for the number of people with unknown FPL and enter -888 for each FPL category to signal data unavailable. Entering zero would signify no individuals at that income level
		unavailable. Entering zero would signify no individuals at that income level.
	FPL	

Data Breakouts		1) <100% 2) \geq 100 - \leq 138% 3) >138 - \leq 150% 4) >150 - \leq 200% 5) >200 - \leq 250% 6) >250 - \leq 300% 7) >300- \leq 400% 8) > 400% 9) Unkown
	Age	Age of the individual as of the most recent effective enrollment date. 1. < 18 years 2) 18-25 3) 26-34 4) 35-44 5) 45-54 6) 55-64 7) \geq 65 8) Unknown

