

State Based Marketplace Data Collection Template: Open Enrollment Period Weekly and Monthly Reporting

General		
1	Total Plan Selections (net)	Count of unique individuals who have selected a Plan Year (PY) 20XX Marketplace medical plan. Count includes all new and re-enrolling consumers (defined in indicators 2 and 3), regardless of whether the consumer has paid the first month premium. Count does not include plans that were canceled or terminated. Instant check: This metric should total the sum of new consumers (2) and total re-enrollees (3); the sum of Number of Plan Selections with Financial Assistance (21) and the Number of Plan Selections without Financial Assistance (25).
2	New Consumers (net)	Count of unique individuals who have selected a (PY) 20XX Marketplace medical plan, where the consumer did not have (PY) 20XX Marketplace medical coverage on or after 11/1/20XX. Count does not include plans that were canceled or terminated. Instant check: This metric should total the sum of new consumer breakouts (12-14).
3	Total Re-enrollees (net)	Count of unique individuals who have selected a (PY) 20XX Marketplace medical plan, where the consumer had non-canceled (PY) 20XX Marketplace medical coverage on or after 11/1/20XX. Count includes consumers who either returned to the Marketplace and actively selected a (PY) 20XX Marketplace medical coverage or were automatically enrolled into a (PY) 20XX Marketplace medical coverage. Count does not include plans that were canceled or terminated. Instant check: This metric should total the sum of active re-enrollees (4) and automatic re-enrollees (5).
4	Active Re-enrollees (net)	Count of unique individuals who returned to the Marketplace to actively select a (PY) 20XX Marketplace medical plan, where the consumer had non-canceled a (PY) 20XX Marketplace medical coverage on or after 11/1/20XX. Count does not include plans that were canceled or terminated.
5	Automatic Re-enrollees (net)	Count of unique individuals who were automatically re-enrolled into a (PY) 20XX Marketplace medical plan, where the consumer had non-canceled (PY) 20XX Marketplace medical coverage on or after 11/1/20XX. Count does not include plans that were canceled or terminated.
6	Number of Submitted Applications	Total count of submitted electronic and paper applications. When a consumer is renewed into a plan, whether automatic or active, that should be counted as an application submission. Updated applications should not be counted as an additional application.

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7	Consumers on Applications Submitted	Total count of individuals requesting coverage on submitted applications. Both new consumers and consumers re-enrolling (automatic and active) in coverage should be counted. Instant check: This metric should be greater than both the Number of Submitted Applications (6) and the Total Plan Selections (1).
8	Consumers Determined Eligible for Medicaid/CHIP (net)	Count of individuals on submitted applications who are determined or assessed eligible for enrollment in Medicaid or CHIP. Both new consumers and consumers re-enrolling (automatic and active) in coverage but found ineligible should be counted.
9	Consumers Eligible for QHP (net)	Count of individuals on submitted applications who were determined eligible for enrollment in a (PY) 20XX Marketplace medical plan, regardless of whether they applied for or are eligible for financial assistance. Both new consumers and consumers re-enrolling (automatic and active) in coverage should be counted. Instant check: This metric should be greater than the Total Plan Selections (1).
10	Consumers Not Found Eligible for QHP or Medicaid/CHIP (net)	Count of individuals on submitted applications who were determined ineligible for enrollment in a (PY) 20XX Marketplace medical plan or Medicaid/CHIP. Both new consumers and consumers re-enrolling (automatic and active) in coverage should be counted.
11	Consumers with a 20XX Plan Selection as of 11/1/20XX (ONE TIME)	Count of unique individuals with non-canceled (PY) 20XX Marketplace medical coverage ending on or after November 1, 20XX.
12	New Consumers without a Previous Marketplace Application (net)	Count of unique individuals with a non-canceled (PY) 20XX Marketplace medical plan selection, where the unique individual has never submitted a Marketplace application previously.
13	New Consumers with a Prior Application but No Plan Selection (net)	Count of unique individuals with a non-canceled (PY) 20XX Marketplace medical plan selection, where the unique individual submitted a Marketplace application in any previous plan year but did not make a plan selection in those years.
14	New Consumers with a Prior Plan Selection but No Coverage on November 1, 20XX (net)	Count of unique individuals with a non-canceled (PY) 20XX Marketplace medical plan selection, where the unique individual had a plan selection in any previous plan year but did not have (PY) 20XX Marketplace medical coverage on or after 11/01/20XX.
15	Total Plan Selections (gross)	Count of all individuals who have selected a (PY) 20XX Marketplace medical plan. Count includes all new and re-enrolling consumers (defined in indicators 16 and 17), regardless of whether the consumer has paid the first month premium. Count includes all plan selections, including those plans which are later canceled or terminated. For example, if a person selects a

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		plan in November, cancels it, then makes another plan selection in December, both plan selections would be counted. Instant check: This count should sum to the total of gross new consumers (16) and total gross re-enrollees (17).
16	New Consumers (gross)	Count of all individuals who have selected a (PY) 20XX Marketplace medical plan, where the consumer did not have (PY) 20XX Marketplace medical coverage on or after 11/1/20XX. Count includes all plan selections made by new enrollees, including those plans which are later canceled or terminated. For example, if a person selects a plan in November, cancels it, then makes another plan selection in December, both plan selections would be counted.
17	Total Re-enrollees (gross)	Count of all individuals who have selected a (PY) 20XX Marketplace medical plan, where the consumer had non-canceled (PY) 20XX Marketplace medical coverage on or after 11/1/20XX. Count includes consumers who either returned to the Marketplace and actively selected (PY) 20XX Marketplace medical coverage or were automatically enrolled into (PY) 20XX Marketplace medical coverage. Count includes all plan selections made by re-enrollees, including those plans which are later canceled or terminated. For example, if a person selects a plan in November, cancels it, then makes another plan selection in December, both plan selections would be counted. Instant check: This metric should total the sum of gross active re-enrollees (18) and gross automatic re-enrollees (19).
18	Active Re-enrollees (gross)	Count of all individuals who returned to the Marketplace to actively select a (PY) 20XX Marketplace medical plan, where the consumer had non-canceled (PY) 20XX Marketplace medical coverage on or after 11/1/20XX. Count includes all plan selections made by re-enrollees, including those plans which are later canceled or terminated. For example, if a consumer with coverage on 11/1/20XX, selects a plan for (PY) 20XX Marketplace medical coverage in November, cancels that selection, and selects another plan in December, both plan selections should be counted.
19	Automatic Re-enrollees (gross)	Count of all individuals who were automatically re-enrolled into a (PY) 20XX Marketplace medical plan, where the consumer had non-canceled (PY) 20XX Marketplace medical coverage on or after 11/1/20XX. Count includes all plan selections made for automatic re-enrollees, including those plans which are later canceled or terminated. For example, if a (PY) 20XX Marketplace medical plan selection is made on behalf of a consumer with coverage on 11/1/20XX, but that plan selection is later canceled, the original plan selection should still be counted.
20	Cancellations and Terminations (gross)	Count of individuals who have cancelled their (PY) 20XX Marketplace medical plan or had their (PY) 20XX Marketplace medical plan terminated by the issuer or Exchange during Open Enrollment. All cancellations and terminations should be counted. For example, if an individual selects a plan in November and immediately cancels it, then selects another plan in December and again immediately cancels it, both cancellations should be counted.
Financial Assistance/Premiums		
21	Number of Plan Selections with Financial Assistance (net)	Count of unique individuals with a (PY) 20XX Marketplace medical plan selection that have an APTC amount greater than \$0 and/or that includes CSR. This count includes consumers with APTC and CSRs (22), consumers with only APTC (23), and consumers with only CSRs (24). Instant check: This metric should total the sum of plan selections with financial assistance breakouts (22-24).
22	Number of Plan	Count of unique individuals with a (PY) 20XX Marketplace medical plan selection that have an APTC amount greater than

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	Selections with both CSR and APTC (net)	\$0 and that includes CSR. Count includes consumers with APTC and CSRs. Consumers with only APTC or with only CSRs should not be counted.
23	Number of Plan Selections with APTC only (net)	The number of unique individuals who made a (PY) 20XX Marketplace medical plan selection with APTC in an amount greater than \$0. Consumers with APTC and CSRs should not be counted.
24	Number of Plan Selections with CSR only (net)	The number of unique individuals who made a (PY) 20XX Marketplace medical plan selection with CSR in an amount greater than \$0. Consumers with APTC and CSRs should not be counted.
25	Number of Plan Selections without Financial Assistance (net)	Count of unique individuals with a (PY) 20XX Marketplace medical plan selection that do not have an APTC or that have an APTC amount equal to \$0, and/or that do not receive CSRs.
26	Average Premium for All Consumers with a Plan Selection (net)	The average per person monthly premium for all consumers with a non-canceled (PY) 20XX Marketplace medical plan selection, before the application of any APTC.
27	Average Premium after APTC (net)	The average per person monthly premium for all consumers with a non-canceled (PY) 20XX Marketplace medical plan selection, after the application of any APTC. That is, where the consumer receives APTC, the policy premium should be reduced by the APTC amount before being included in the numerator. The denominator should be the total covered lives.
28	Average APTC Amount for Consumers Receiving APTC (net)	The average per person monthly APTC for all consumers with a non-canceled (PY) 20XX Marketplace medical plan selection, who have elected to receive an APTC amount greater than \$0.
29	Average Premium after APTC for Consumers Receiving APTC (net)	The average per person monthly premium for all consumers with a non-canceled (PY) 20XX Marketplace medical plan selection, who have elected to receive an APTC amount greater than \$0, after the application of APTC.
Demographics		
30	Number of Plan Selections where age < 18 (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who are age 0-17. Age represents the recorded age as of the policy effective coverage date.
31	Number of Plan Selections where age 18 - 34 (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who are age 18-34. Age represents the recorded age as of the policy effective coverage date.
32	Number of Plan Selections where age 35	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who are age 35-54. Age represents the recorded age as of the policy effective coverage date.

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	- 54 (net)	
33	Number of Plan Selections where age 55+ (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who are age 55+. Age represents the recorded age as of the policy effective coverage date.
34	Number of Plan Selections where age is unknown (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and whose age is unknown. Age represents the recorded age as of the policy effective coverage date.
35	Number of Plan Selections where gender is Female (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and whose gender is Female, according to the selected policy.
36	Number of Plan Selections where gender is Male (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and whose gender is Male, according to the selected policy.
37	Number of Plan Selections where gender is Unknown (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and whose gender is unknown, according to the selected policy.
38	Number of Plan Selections where Race/Ethnicity is Hispanic or Latino (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who have indicated they are Mexican, Mexican American or Chicano/a, Puerto Rican, Cuban, or "other ethnicity" on their application.
39	Number of Plan Selections where Race/Ethnicity is White (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who have indicated they are white on their application.
40	Number of Plan Selections where Race/Ethnicity is African American (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who have indicated they are black or African American on their application.
41	Number of Plan Selections where Race/Ethnicity is Asian (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who have indicated they are Asian Indian, Chinese, Filipino, Korean, Vietnamese, Japanese, or "other Asian" on their application.
42	Number of Plan	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who have

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	Selections where Race/Ethnicity is Native Hawaiian/Pacific Islander (net)	indicated they are Guamanian or Chamorro, Native Hawaiian, Samoan, or Other Pacific Islander on their application.
43	Number of Plan Selections where Race/Ethnicity is American Indian/Alaska Native (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who have indicated they are American Indian or Alaska Native on their application.
44	Number of Plan Selections where Race/Ethnicity is Multi-Racial (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who have indicated more than one distinct racial group as defined above: American Indian / Alaska Native, Asian, Native Hawaiian / Pacific Islander, African-American, and White, on their application.
45	Number of Plan Selections where Race/Ethnicity is Unknown (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who did not indicate a race on their application.
46	Number of Plan Selections where Metal Level is Platinum (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan where the metal level is Platinum.
47	Number of Plan Selections where Metal Level is Gold (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan where the metal level is Gold.
48	Number of Plan Selections where Metal Level is Silver (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan where the metal level is Silver.
49	Number of Plan Selections where Metal Level is Bronze (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan where the metal level is Bronze.
50	Number of Plan Selections where Metal Level is Catastrophic (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan where the metal level is Catastrophic.
51	Consumers with a Plan	Count of unique individuals in households with income less than 100% of FPL who have selected a non-canceled (PY) 20XX

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	Selection and Income is < 100%	Marketplace medical plan.
52	Consumers with a Plan Selection and Income \geq 100% FPL and \leq 138% FPL (net)	Count of unique individuals in households with income greater than or equal to 100% and less than or equal to 138% of FPL who have selected a non-canceled (PY) 20XX Marketplace medical plan.
53	Consumers with a Plan Selection and Income > 138% FPL and \leq 250% FPL (net)	Count of unique individuals in households with income greater than 138% and less than or equal to 250% of FPL who have selected a non-canceled (PY) 20XX Marketplace medical plan.
54	Consumers with a Plan Selection and Income > 250% FPL and \leq 400% FPL (net)	Count of unique individuals in households with income greater than 250% and less than or equal to 400% of FPL who have selected a non-canceled (PY) 20XX Marketplace medical plan.
55	Consumers with a Plan Selections and Income > 400% FPL (net)	Count of unique individuals in households with income greater than 400% of FPL who have selected a non-canceled (PY) 20XX Marketplace medical plan.
56	Number of Plan Selections where Income as a Percent of FPL is Unknown (net)	Count of unique individuals in households with non-reported income and who have selected a non-canceled (PY) 20XX Marketplace medical plan. Count should include individuals who do not report income because they are not requesting financial assistance.
Operations		
57	Call Center Volume (gross)	The total number of incoming calls received by the call center. Repeat calls from the same number should be counted separately.
58	Call Center Wait Time (in seconds)	The average wait time, rounded to the nearest second, for each incoming call to the call center.
59	Calls Abandoned (gross)	The number of incoming calls terminated while waiting to speak to a call center representative.
60	Average Call Handle Time (in seconds)	The average amount of time, rounded to the nearest second, spent by call center representatives on each individual call.

61	Number of Website Visits (gross)	The count of webpage visits of each IP address that has not made a webpage visit within the last 30 minutes. For example, if IP address 147.194.0.3 requests the webpage at 12:30 PM and 1:01 PM, that gets counted as 2 visits. If IP address 147.194.0.3 requests the webpage at 1:24, 1:54, and 1:56, this counts as 1 visit. At 1:24, there was no previous request within 30 minutes; at 1:54, there was a previous request exactly 30 minutes prior, and at 1:56 there was a previous request at 1:54. A subsequent request by that same IP address at 3:00 PM would be a new visit.
62	Number of Website Unique Visitors (gross)	The count of the unique IP addresses requesting the webpage (e.g. IP 147.194.0.3 requests, gets counted as 1 unique visitor). A single person using dynamic IP address assignment (identified by login to the same Exchange account or some other method) should still be counted as two unique visitors if the IP addresses differ at the time of login.
63	Planned Website Downtime (gross)	The amount of planned downtime for the Exchange website, rounded to the nearest second.
64	Unplanned Website Downtime (gross)	The amount of unplanned downtime for the Exchange website, rounded to the nearest second.
65	Plan Selections -Any assistance (net)	The count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who received any form of personal assistance with enrollment. Instant Check: This metric should total the sum of the breakouts of Plan Selections with assistance (72-73).
66	Plan Selections -Broker (net)	The count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who received personal assistance with enrollment from an agent or broker.
67	Plan Selections -Other assistance (net)	The count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who received personal assistance with enrollment from an assister other than an agent or broker.
68	Plan Selections -No assistance (net)	The count of unique individuals who have selected a non-canceled (PY) 20XX Marketplace medical plan and who received no personal assistance with enrollment.
Issuers		
69	Plan Selection by Issuer: Issuer 1	
70	Plan Selection by Issuer: Issuer 2	
71	Plan Selection by Issuer: Issuer 3	
72	Plan Selection by Issuer: Issuer 4	
73	Plan Selection by Issuer: Issuer 5	
74	Plan Selection by Issuer:	

	Issuer 6	
75	Plan Selection by Issuer: Issuer 7	
76	Plan Selection by Issuer: Issuer 8	
77	Plan Selection by Issuer: Issuer 9	
78	Plan Selection by Issuer: Issuer 10	
79	Plan Selection by Issuer: Issuer 11	
80	Plan Selection by Issuer: Issuer 12	
81	Plan Selection by Issuer: Issuer 13	
82	Plan Selection by Issuer: Issuer 14	
83	Plan Selection by Issuer: Issuer 15	
84	Name Issuer 1	
85	Name Issuer 2	
86	Name Issuer 3	
87	Name Issuer 4	
88	Name Issuer 5	
89	Name Issuer 6	
90	Name Issuer 7	
91	Name Issuer 8	
92	Name Issuer 9	
93	Name Issuer 10	
94	Name Issuer 11	
95	Name Issuer 12	
96	Name Issuer 13	
97	Name Issuer 14	

98	Name Issuer 15	
Stand-alone Dental Plans		
99	Total SADP Plan Selections (net)	Count of unique individuals who have selected a (PY) 20XX SADP. Count does not include plans that were canceled or terminated.
100	Number of Plan Selections where age < 18 (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX SADP and who are age 0 - 17. Age represents the recorded age as of the policy effective coverage date.
101	Number of Plan Selections where age is 18 - 34 (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX SADP and who are age 18 - 34. Age represents the recorded age as of the policy effective coverage date
102	Number of Plan Selections where age is 35 - 54 (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX SADP and who are age 35 - 54. Age represents the recorded age as of the policy effective coverage date.
103	Number of Plan Selections where age is 55+ (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX SADP and who are age 55+. Age represents the recorded age as of the policy effective coverage date.
104	Number of Plan Selections where age is unknown (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX SADP and whose age is unknown. Age represents the recorded age as of the policy effective coverage date.
105	Number of Plan Selections where gender is Female (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX SADP and whose gender is Female, according to the selected policy.
106	Number of Plan Selections where gender is Male (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX SADP and whose gender is Male, according to the selected policy.
107	Number of Plan Selections where gender is unknown (net)	Count of unique individuals who have selected a non-canceled (PY) 20XX SADP and whose gender is unknown, according to the selected policy.
Metal Level by Age and Income		
108	Silver plans selected by consumers age < 18 (net)	
109	Silver plans selected by	

	consumers age 18 - 34 (net)	
110	Silver plans selected by consumers age age 35 - 54 (net)	
111	Silver plans selected by consumers age 55+ (net)	
112	Silver plans selected by consumers age is unknown (net)	
113	Bronze plans selected by consumers age < 18 (net)	
114	Bronze plans selected by consumers age 18 - 34 (net)	
115	Bronze plans selected by consumers age 35 - 54 (net)	
116	Bronze plans selected by consumers age 55+ (net)	
117	Bronze plans selected by consumers age is unknown (net)	
118	Silver plans selected by consumers with income > 100% FPL (net)	
119	Silver plans selected by consumers with income \geq 100% FPL and \leq 138% FPL (net)	
120	Silver plans selected by	

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	consumers with income > 138% FPL and ≤ 250% FPL (net)	
121	Silver plans selected by consumers with income ≥ 250% PL and ≤ 400% FPL (net)	
122	Silver plans selected by consumers with income > 400% FPL (net)	
123	Silver plans selected by consumers whose income is unknown (net)	
124	Bronze plans selected by consumers with income > 100% FPL (net)	
125	Bronze plans selected by consumers with income ≥ 100% FPL and ≤ 138% FPL (net)	
126	Bronze plans selected by consumers with income > 138% FPL and ≤ 250% FPL (net)	
127	Bronze plans selected by consumers with income ≥ 250% PL and ≤ 400% FPL (net)	
128	Bronze plans selected by consumers with income > 400% FPL (net)	
129	Bronze plans selected by consumers whose	

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	income is unknown (net)	
Consumer Type by Age, Metal Level, and Income		
130	New consumers who are age < 18	
131	Active re-enrollees who are age < 18	
132	Automatic re-enrollees who are age < 18	
133	New consumers who are age 18 - 34	
134	Active re-enrollees who are age 18 - 34	
135	Automatic re-enrollees who are age 18 - 34	
136	New consumers who are age 35 - 54	
137	Active re-enrollees who are age 35 - 54	
138	Automatic re-enrollees who are age 35 - 54	
139	New consumers who are age 55+	
140	Active re-enrollees who are age 55+	
141	Automatic re-enrollees who are age 55+	
142	New consumers whose age is unknown	
143	Active re-enrollees whose age is unknown	
144	Automatic re-enrollees whose age is unknown	

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145	New consumers who selected a silver plan	
146	Active re-enrollees who selected a silver plan	
147	Automatic re-enrollees who selected a silver plan	
148	New consumers who selected a bronze plan	
149	Active re-enrollees who selected a bronze plan	
150	Automatic re-enrollees who selected a bronze plan	
151	New consumers whose income is < 100% FPL	
152	Active re-enrollees whose income is < 100% FPL	
153	Automatic Re-enrollees whose income is < 100% FPL	
154	New consumers whose income is \geq 100% FPL and \leq 138% FPL (net)	
155	Active re-enrollees whose income is \geq 100% FPL and \leq 138% FPL (net)	
156	Automatic Re-enrollees whose income is \geq 100% FPL and \leq 138% FPL (net)	

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157	New consumers whose income is > 138% FPL and ≤ 250% FPL	
158	Active re-enrollees whose income is > 138% FPL and ≤ 250% FPL	
159	Automatic Re-enrollees whose income is > 138% FPL and ≤ 250% FPL	
160	New consumers whose income is > 250% FPL and ≤ 400% FPL	
161	Active re-enrollees whose income is > 250% FPL and ≤ 400% FPL	
162	Automatic Re-enrollees whose income is > 250% FPL and ≤ 400% FPL	
163	New consumers whose income is > 400% FPL	
164	Active re-enrollees whose income is > 400% FPL	
165	Automatic Re-enrollees whose income is > 400% FPL	
166	New consumers whose income is unknown	
167	Active re-enrollees whose income is unknown	
168	Automatic Re-enrollees whose income is unknown	

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Basic Health Plan Program - only for states with BHP		
169	Enrolled Consumers (Total Enrollees) (net)	Count of unique individuals who have enrolled in the BHP program. Count does not include enrollments that were canceled or terminated or individuals enrolled in Medicaid/CHIP programs that are not BHP.
170	New Consumers (New Enrollees) (net)	Count of unique individuals who have enrolled in BHP who were not enrolled in an exchange-facilitated program (i.e. BHP, QHP, or any other integrated programs, like Medicaid) immediately prior to this BHP enrollment.
171	Returning Consumers (Re-enrollees) (net)	Count of unique individuals enrolled in BHP who were enrolled in an exchange-facilitated program (i.e. BHP, QHP, or any other integrated programs, like Medicaid) immediately prior to this BHP enrollment.
172	Consumers Eligible for BHP (gross)	Count of all individuals determined or assessed eligible for BHP. Only individuals on submitted applications and requesting coverage are included. Count all individuals determined/assessed eligible even if the individual does not subsequently enroll or if the individual subsequently cancels coverage. Count includes all plan selections, including those plans which are later canceled or terminated. For example, an individual who is determined eligible but subsequently cancels or fails to enroll in BHP should still be counted as 1.
173	Consumers enrolled in a BHP as of 11/1/20XX (ONE TIME)	Count of unique individuals with non-canceled BHP coverage ending on or after 11/1/20XX.
174	Number of Plan Selections where age < 18 (net)	Count of unique individuals who have non-canceled BHP coverage and who are age 0 - 17. Age represents the recorded age as of the policy effective coverage date.
175	Number of Plan Selections where age 18 - 34 (net)	Count of unique individuals who have non-canceled BHP coverage and who are age 18 - 34. Age represents the recorded age as of the policy effective coverage date.
176	Number of Plan Selections where age 35 - 54 (net)	Count of unique individuals who have non-canceled BHP coverage and who are age 35 - 54. Age represents the recorded age as of the policy effective coverage date.
177	Number of Plan Selections where age 55+ (net)	Count of unique individuals who have non-canceled BHP coverage and who are age 55+. Age represents the recorded age as of the policy effective coverage date.
178	Number of Plan Selections where age is unknown (net)	Count of unique individuals who have non-canceled BHP coverage and whose age is unknown. Age represents the recorded age as of the policy effective coverage date.
179	Number of Plan	Count of unique individuals who have non-canceled BHP coverage and whose gender is Female, according to the selected

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	Selections where gender is Female (net)	policy.
180	Number of Plan Selections where gender is Male (net)	Count of unique individuals who have non-canceled BHP coverage and whose gender is Male, according to the selected policy.
181	Number of Plan Selections where gender is unknown (net)	Count of unique individuals who have non-canceled BHP coverage and whose gender is unknown, according to the selected policy.
182	Number of Plan Selections where Race/Ethnicity is Hispanic or Latino (net)	Count of unique individuals who have non-canceled BHP coverage and who have indicated they are Mexican, Mexican American or Chicano/a, Puerto Rican, Cuban, or "other ethnicity" on their application.
183	Number of Plan Selections where Race/Ethnicity is White (net)	Count of unique individuals who have non-canceled BHP coverage and who have indicated they are white on their application.
184	Number of Plan Selections where Race/Ethnicity is African American (net)	Count of unique individuals who have non-canceled BHP coverage and who have indicated they are black or African American on their application.
185	Number of Plan Selections where Race/Ethnicity is Asian (net)	Count of unique individuals who have non-canceled BHP coverage and who have indicated they are Asian Indian, Chinese, Filipino, Korean, Vietnamese, Japanese, or "other Asian" on their application.
186	Number of Plan Selections where Race/Ethnicity is Native Hawaiian/Pacific Islander (net)	Count of unique individuals who have non-canceled BHP coverage and who have indicated they are Guamanian or Chamorro, Native Hawaiian, Samoan, or Other Pacific Islander on their application.
187	Number of Plan Selections where Race/Ethnicity is American Indian/Alaska Native (net)	Count of unique individuals who have non-canceled BHP coverage and who have indicated they are American Indian or Alaska Native on their application.

188	Number of Plan Selections where Race/Ethnicity is Multi-Racial (net)	Count of unique individuals who have non-canceled BHP coverage and who have indicated more than one distinct racial group as defined above: American Indian / Alaska Native, Asian, Native Hawaiian / Pacific Islander, African-American, and White, on their application.
189	Number of Plan Selections where Race/Ethnicity is Unknown (net)	Count of unique individuals who have non-canceled BHP coverage and who did not indicate a race on their application.