

Attachment 2: JCR Requested Metrics



JCR Metric 1: Scheduled and Completed Redeterminations.

Table 1. Total Number of Medicaid Participants Scheduled for Redetermination and Observed Number of Redeterminations Completed, by Month (May-October 2023)

| Month | Scheduled for Redetermination | Completed Redetermination (Not based on Redetermination Date) |
|----------------|-------------------------------|--|
| May 2023 | 129,487 | 222,245 |
| June 2023 | 146,942 | 152,145 |
| July 2023 | 147,144 | 162,961 |
| August 2023 | 122,762 | 140,604 |
| September 2023 | 113,102 | 122,356 |
| October 2023 | 114,148 | 130,603 |
| Total | 773,585 | 930,914 |

Notes:

This table includes participants who were scheduled for a redetermination during that month as well as those who reported a change resulting in extension of coverage or disenrollment from Medicaid, and those who requested closure. These data show that over 150,000 participants reported a change ahead of their scheduled redetermination date through October 2023, thus completed redeterminations are higher than the amount of scheduled redeterminations.

The data found in the column “Scheduled for Redetermination” is based on monthly person-level files provided by the Maryland Health Benefit Exchange and the Department of Human Services. Data in the “Completed Redetermination” column is based on Medicaid’s system of record, MMIS2.

JCR Metric 2: The number of new individuals enrolled.

Table 1. Total Number of Newly Enrolled Medicaid Participants from May 2023, by Coverage Group at Enrollment and Last Coverage Group

| Eligibility Category | Coverage Category at Enrollment | Last Coverage Category |
|---------------------------------|--|-------------------------------|
| Aged, Blind, or Disabled | 4,662 | 4,696 |
| Affordable Care Act | 19,626 | 19,688 |
| Families and Children | 42,061 | 42,108 |
| MCHP | 4,416 | 4,408 |
| Other | 6,565 | 6,430 |
| Total | 77,330 | 77,330 |

*Data as of October 2023

Notes:

This metric presents individuals who were newly enrolled during the unwinding period. Participants included in the above tables have an eligibility span that started between May 2023 and October 2023. These individuals were not enrolled in April 2023. In addition, to be considered enrolled in the data, a participant must have been enrolled for at least three months. Examining the column, “Last Coverage Category,” indicates that only a small number of newly enrolled participants shifted coverage categories. A large percent of new participants are pregnant individuals and newborns in the Families and Children category.

JCR Metric 3: The number of individuals enrolled who received medical assistance and were subsequently disenrolled any time in the six months prior to reenrolling.

Table 1. Cumulative Percentage of Medicaid Participants who Reenroll in Medicaid Following Disenrollment by Disenrollment Month

| Disenrollment Month | Total Disenrolled | No Reenrollment | Total Reenrolled | % Reenrolled | | | | | |
|---------------------|-------------------|-----------------|------------------|--------------|-----------|-----------|-------------|----------------|--------------|
| | | | | May 2023 | June 2023 | July 2023 | August 2023 | September 2023 | October 2023 |
| May 2023 | 30,965 | 21,569 | 9,396 | 21.8% | 25.5% | 27.9% | 29.2% | 30.2% | 30.3% |
| Jun 2023 | 33,528 | 25,293 | 8,235 | | 18.1% | 21.9% | 23.6% | 24.5% | 24.6% |
| July 2023 | 44,770 | 33,230 | 11,540 | | | 20.7% | 24.1% | 25.7% | 25.8% |
| August 2023 | 27,560 | 21,697 | 5,863 | | | | 18.1% | 21.0% | 21.3% |
| September 2023 | 22,056 | 20,299 | 1,757 | | | | | 7.6% | 8.0% |
| October 2023 | 15,109 | 14,897 | 212 | | | | | | 1.4% |

*Data as of October 2023

Key

| Color | # of months |
|-------------|-------------|
| Yellow | 0 |
| Light Blue | 1 |
| Orange | 2 |
| Olive Green | 3 |
| Light Grey | 4 |
| Red | 5 |

Use the key to the left when interpreting Table 1. For example, 21.8% of the 30,965 participants disenrolled in May 2023, reenrolled in Medicaid the same month (0 months). 25.5% of the 30,965 had reenrolled in coverage as of June 2023 (2 months), 27.9% as of August 2023 (3 months) and so on.

Notes:

Medicaid implemented a 120-day reconsideration period in which a participant who is disenrolled for a procedural reason may return to their applicable enrollment system (Maryland Health Connection or myMDThink) and complete their renewal without needing to begin a new application. Eligible participants will be reenrolled automatically in the last coverage they had. The coverage begins 10 days from the date of the eligibility decision. Any services rendered during the period after disenrollment and prior to reenrollment are eligible for fee-for-service reimbursement.

For participants who were reenrolled without a gap in coverage (i.e., reenrollment in the same month as disenrollment), these participants may have been disenrolled and reapplied for coverage. The start date was retroactively applied to the date their case was closed. Alternatively, a participant may have been terminated for a non-procedural reason (e.g., aging out of HealthChoice) and were re-enrolled into a new type of coverage (e.g. dually eligible for Medicare and Medicaid).

30.2% of participants disenrolled in May have returned to coverage within 120 days. 24.6% of those disenrolled in June have returned to coverage within 120 days.

MDH has suppressed cell values less than 11 in compliance with the CMS Cell Suppression Policy.

JCR Metric 4: The number of individuals disenrolled along with the number disenrolled by reason for disenrollment, identifying disenrollments due to failure to apply for recertification, missing information/verifications, overscaled income, aging out of a Medicaid eligibility category, and other common reasons for disenrollment.

Table 1. Total Medicaid Disenrollment by Coverage Category and Reason Code, May 2023 to October 2023

| Eligibility Category | Total | Procedural | | | | Non-Procedural | | | |
|--------------------------|----------------|--------------------------|--------------------------------|-------------------|------------------|------------------------|-----------------|----------------------|----------------------|
| | | Failure to Respond (235) | Verification Outstanding (230) | Other Procedural* | Total Procedural | Overscale Income (301) | Age Limit (220) | Other Non-Procedural | Total Non-Procedural |
| Aged, Blind, or Disabled | 49,866 | 11,402 | 2,265 | 4,632 | 18,299 | 13,820 | 4,066 | 13,681 | 31,567 |
| Affordable Care Act | 9,748 | 11 | 124 | * | 1,702 | * | 40 | 6,658 | 8,046 |
| Families and Children | 79,696 | 19,534 | 9,233 | 7,302 | 36,069 | 15,029 | 1,081 | 27,517 | 43,627 |
| MCHP | 26,491 | 8,409 | 1,284 | 4,788 | 14,481 | 4,357 | 720 | 6,933 | 12,010 |
| Other | 8,187 | 5,633 | - | * | 5,775 | * | - | 2,407 | 2,412 |
| Total | 173,988 | 44,989 | 12,906 | 18,431 | 76,326 | 34,559 | 5,907 | 57,196 | 97,662 |

*Other procedural disenrollment reasons include if a participant was identified as procedurally disenrolled by the MHBE or the following: Mail for this individual was returned and a change of address was not reported as required by COMAR 10.09.24.12B (551); Rights and responsibilities - Did not agree to the assignment of interest in application (556); Medicaid coverage expired for non-MAGI only (339).

Notes:

MDH has suppressed cell values less than 11 in compliance with the CMS Cell Suppression Policy.

JCR Metric 5: Call center volume, average wait times, and any other data related to call center activities that are required to be submitted to the Center for Medicare and Medicaid Services.

Table 1: Aggregate Call Center Data, May-October 2023

| | |
|--|---------|
| Total Call Center Volume | 353,485 |
| Average Call Center Wait Time (H:MM:SS) | 0:05:55 |
| Average Call Center Abandonment Rate | 16.68% |

Notes:

Call center metrics are provided by the Maryland Health Benefit Exchange. Data at the eligibility group level is unable to be collected as it relates to the call center.

Monthly data is provided in Attachment 1: Medicaid Data Dashboard.

JCR Metric 6: Measures of application processing times and total numbers of applications processed for Modified Adjusted Gross Income eligibility groups and non-Modified Adjusted Gross Income eligibility groups shown separately.

Table 1: Total Applications Processed and Weighted Average Processing Time by Eligibility Category, May-October 2023

| Eligibility Category | Total Applications Processed | Average Application Processing Time in Days (weighted) |
|---------------------------------|-------------------------------------|---|
| Aged, Blind, or Disabled | 39,136 | 17.0 |
| Affordable Care Act | 269,275 | <24 hours |
| Families and Children | 656,855 | <24 hours |
| MCHP | 123,359 | 1.1 |
| Other | 11,741 | 5.6 |
| Total | 1,100,366 | 1.5 |

*Data as of October 2023

Notes:

Data provided by the Maryland Health Benefit Exchange (MAGI participants) and DHS (non-MAGI participants). This table depicts average processing time only and case by case scenarios may impact application processing time.

Please note that the average processing time is weighted based on the number of applications processed.