

Public Use Files: Definitions

PLATFORM	METRIC	DEFINITION
HC.gov and SBE	State	State postal abbreviation associated with the plan selection used for state-level stratification of data.
HC.gov	County	County FIPS code associated with the plan selection used for county-level stratification of data.
HC.gov	ZIP Code	5-digit ZIP code associated with the plan selection used for ZIP-level stratification of data.
HC.gov	Number of Submitted Applications	Count of 2018 submitted applications as of December 23, 2017. This includes applications that were created through the automatic re-enrollment process.
SBE	Number of Submitted Applications	<p>Count of submitted electronic and paper applications as of the end of an SBE’s Open Enrollment, with sufficient information to begin performing eligibility determinations for coverage. This includes applications that were created through the automatic re-enrollment process.</p> <ul style="list-style-type: none"> • (CA) California, (CT) Connecticut, (MA) Massachusetts and (VT) Vermont also include applications that were created through their monthly MAGI Medicaid/CHIP redetermination process. • (NY) New York includes applications for all Exchange programs, including Medicaid, CHIP, the Essential Plan (BHP), and QHPs. • (CO) Colorado, (ID) Idaho and (MD) Maryland exclude applications for individuals applying only to Medicaid/CHIP but include applications for consumers applying for QHPs and later determined eligible for MAGI Medicaid/CHIP. • (MN) Minnesota excludes applications for renewals, where the consumer does not submit a new application.
HC.gov	People Applying for Coverage on Submitted Applications	Count of individuals who were requesting coverage on a 2018 submitted application as of December 23, 2017. This includes applications that were created through the automatic re-enrollment process.
SBE	People Applying for Coverage on Submitted Applications	<p>Count of individuals who were requesting coverage on all submitted 2018 applications as of the end of an SBE’s Open Enrollment. This includes applications that were created through the automatic re-enrollment process.</p> <ul style="list-style-type: none"> • (CA) California, (CT) Connecticut, (MA) Massachusetts, and (VT) Vermont also include consumers on applications that were created through their monthly MAGI Medicaid/CHIP redetermination process.

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		<ul style="list-style-type: none"> • (NY) New York includes consumers applying for all Exchange programs, including Medicaid, CHIP, the Essential Plan (BHP), and QHPs. • (CO) Colorado, (ID) Idaho and (MD) Maryland exclude individuals applying only to Medicaid/CHIP but include consumers applying for QHPs and later determined eligible for Medicaid/CHIP. • (MN) Minnesota excludes applications for renewals, where the consumer does not submit a new application.
HC.gov	People Determined Eligible to Enroll in an Exchange Plan	Individuals on 2018 submitted applications as of December 23, 2017, who were determined eligible to make a QHP plan selection.
SBE	People Determined Eligible to Enroll in an Exchange Plan	Individuals on 2018 submitted applications as of the end of an SBE’s Open Enrollment, who were determined eligible to make a QHP plan selection. <ul style="list-style-type: none"> • (MN) Minnesota excludes applications for renewals, where the consumer does not submit a new application. • (VT) Vermont includes consumers eligible for automatic monthly MAGI Medicaid/CHIP redeterminations as also eligible for a QHP without financial assistance. • (WA) Washington’s count of consumers eligible to enroll in an Exchange plan is lower than the count of consumers who selected an Exchange plan due to data anomalies.
HC.gov	People Determined Eligible to Enroll, with Financial Assistance	Individuals on 2018 submitted applications as of December 23, 2017, who were determined eligible to make a QHP plan selection and eligible to receive APTC and/or CSRs.
HC.gov	People Determined or Assessed Eligible for Medicaid / CHIP by the Exchange	Individuals on 2018 submitted applications as of December 23, 2017 who were determined or assessed eligible for their state's Medicaid or CHIP program regardless of the state Medicaid or CHIP agency’s final eligibility determination.
SBE	People Determined or Assessed Eligible for Medicaid / CHIP by the Exchange	Individuals on 2018 submitted applications as of the end of an SBE’s Open Enrollment, who were determined or assessed eligible for their state’s Medicaid or CHIP program. <ul style="list-style-type: none"> • (MD) Maryland and (WA) Washington include their automatic monthly MAGI Medicaid/CHIP redeterminations. • (MN) Minnesota also includes individuals determined eligible for the Basic Health Plan (BHP).

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HC.gov	Total Number of Consumers Who Have Selected an Exchange Plan	Count of unique consumers who selected a 2018 plan, were automatically re-enrolled into a 2018 plan, or were placed into a suggested alternate 2018 QHP (regardless of whether the consumer paid the premium) as of December 23, 2017.
SBE	Total Number of Consumers Who Have Selected an Exchange Plan	Count of unique consumers who selected or were automatically re-enrolled into a 2018 QHP (regardless of whether the consumer paid the premium) as of the end of an SBE's Open Enrollment. Count does not include plans that were canceled or terminated during the reference period. <ul style="list-style-type: none"> • (MA) Massachusetts includes consumers who have selected a plan whose coverage begins up to two months from the time of enrollment, rather than a plan whose coverage begins January 1 or at the beginning of the following month. • (VT) Vermont's new enrollee and re-enrolling metrics do not sum to total plan selections due to administrative errors in processing a limited number of plan cancellations/terminations.
HC.gov	New Consumers	Count of unique consumers with a 2018 non-canceled medical plan selection and who did not have 2017 coverage through December 31, 2017. Consumers whose plan selection is the result of automatic reenrollment or an automatic placement into a suggested alternate plan are not included in this count.
SBE	New Consumers	Count of unique consumers with a 2018 non-canceled medical plan selection, and who did not have 2017 Exchange coverage as of the beginning of Open Enrollment.
HC.gov	Total Re-enrollees	Count of unique consumers who had a 2018 non-canceled medical plan selection and who had 2017 coverage through December 31, 2017 or have a plan selection that is the result of automatic re-enrollment or an automatic placement into a suggested alternate plan.
SBE	Total Re-enrollees	Count of unique consumers who had 2017 non-canceled Exchange coverage as of the beginning of Open Enrollment, and who either returned to the Exchange and actively selected a 2018 non-canceled medical plan or were automatically re-enrolled into a 2018 non-canceled medical plan as of the end of an SBE's Open Enrollment. <ul style="list-style-type: none"> • (WA) Washington defines a re-enrollee as a consumer who was enrolled in a 2018 QHP as well as in a 2017 QHP in December, rather than as of the beginning of Open Enrollment. • (NY) New York does not report on active and automatic renewing consumer breakouts.
HC.gov	Active Re-enrollees	Count of unique consumers who had a 2018 non-canceled medical plan selection and who had 2017 coverage through December 31, 2017; these are the subset of Total Re-enrollees who returned to the Exchange to actively select a 2018 medical plan.

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SBE	Active Re-enrollees	Count of unique consumers who had non-canceled 2017 Exchange coverage as of the beginning of Open Enrollment, and who returned to the Exchange to actively select a non-canceled 2018 medical plan.
HC.gov	Automatic Re-enrollees	Count of unique consumers who had a 2018 non-canceled medical plan selection and who had 2017 coverage at the through December 31, 2017; these are the subset of Total Re-enrollees who were automatically re-enrolled into a plan with their 2017 issuer as well as those who were placed in a suggested alternate plan with a different issuer because they did not have an Exchange plan offered by their 2017 issuer available to them for 2018.
SBE	Automatic Re-enrollees	Count of unique consumers who had non-canceled 2017 Exchange coverage as of the beginning of Open Enrollment, and who were automatically re-enrolled into a non-canceled 2018 medical plan.
HC.gov	Active Re-enrollees who Switched Plans	Count of active re-enrollees who did not select their crosswalked plan for 2018. See the FAQs for more details on crosswalked plans.
HC.gov	Active Re-enrollees who Remained in the Same Plan or a Crosswalked Plan	Count of active re-enrollees who remained in their crosswalked plan for 2018. See the FAQs for more details on crosswalked plans.
HC.gov	Average Premium	The average monthly premium per person for all consumers, before the application of APTC.
SBE	Average Premium	The average monthly per person premium for all consumers, before the application of APTC.
HC.gov	Average Premium after APTC	The average of the difference between an individual's premium and the individual's allocated APTC. This measure includes all consumers, even those who did not receive APTC.
SBE	Average Premium after APTC	The average per person monthly premium for all consumers, after the application of APTC.
HC.gov	Number of Consumers with APTC and/or CSR	Count of consumers with plan selections that have an APTC amount greater than \$0 and/or that include CSRs. This includes consumers with APTC and CSRs, consumers with only APTC, and consumers with only CSRs
SBE	Number of Consumers with APTC and/or CSR	Count of consumers with a non-canceled 2018 Exchange medical plan selection, where the consumer has elected to receive APTC in an amount greater than \$0 and/or receives CSR. This count includes consumers with APTC and CSRs, consumers with only APTC, and consumers with only CSRs. <ul style="list-style-type: none"> • (NY) New York's count of consumers with APTC include individuals who elect to receive APTC in an amount of \$0 or greater.
HC.gov	Consumers with CSR	Count of plan selections that include CSRs. See the FAQs for additional details on who is eligible for CSRs.

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SBE	Consumers with CSR	Count of consumers with a non-canceled 2018 Exchange medical plan selection, where the consumer receives CSR in an amount greater than \$0.
HC.gov	Consumers with 73% Actuarial Value	Consumers who selected a silver plan with an actuarial value of 73% (+/-1%).
HC.gov	Consumers with 87% Actuarial Value	Consumers who selected a silver plan with an actuarial value of 87% (+/-1%).
HC.gov	Consumers with 94% Actuarial Value	Consumers who selected a silver plan with an actuarial value of 94% (+/-1%).
HC.gov	CSRs Reserved for Members of Federally Recognized Tribes and Alaska Native Claims Settlement Act Shareholders	Consumers who selected a plan with CSRs reserved for members of federally recognized tribes and Alaska Native Claims Settlement Act shareholders.
HC.gov	Number of Consumers with APTC	Count of consumers with an APTC amount greater than \$0. See the FAQs for more details.
SBE	Number of Consumers with APTC	Count of consumers with a non-canceled 2018 Exchange medical plan selection, where the consumer has elected to receive APTC in an amount greater than \$0. <ul style="list-style-type: none"> • (NY) New York's count of consumers with APTC include individuals who elect to receive APTC in an amount of \$0 or greater.
HC.gov	Average APTC for Consumers Receiving APTC	The average APTC allocated to each individual for consumers with an allocated APTC amount greater than \$0. See the FAQs for more details.
SBE	Average APTC for Consumers Receiving APTC	The average per person monthly APTC for all consumers with a non-canceled 2018 Exchange medical plan selection, who have elected to receive APTC in an amount greater than \$0. <ul style="list-style-type: none"> • (NY) New York's count of consumers with APTC include individuals who elect to receive APTC in an amount of \$0 or greater.
HC.gov	Average Premium after APTC for Consumers Receiving APTC	The average of the difference between an individual's premium and the individual's allocated APTC for consumers with allocated APTC amounts greater than \$0. See the FAQs for more details.

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SBE	Average Premium after APTC for Consumers Receiving APTC	<p>Average per person monthly premium for consumers with plan selections that have APTC, after the application of APTC.</p> <ul style="list-style-type: none"> • (NY) New York's count of consumers with APTC include individuals who elect to receive APTC in an amount of \$0 or greater.
HC.gov	Age	Age is measured as the difference between January 1, 2018 and the consumer's date of birth.
SBE	Age	<p>Age represents the recorded age as of the policy effective coverage date.</p> <ul style="list-style-type: none"> • The breakouts by age provided by (CO) Colorado and (MN) Minnesota differ slightly from the states' reported total number of plan selections due to data anomalies. • The breakouts by age provided by (VT) Vermont do not sum to the state's reported total number of plan selections due to administrative errors in processing a limited number of plan cancellations/terminations. • The breakouts reported by (MA) Massachusetts do not sum to the state's reported total due to cases where individuals experience birthdays that move them into a different age bracket in a future coverage month. • (ID) Idaho reports plan selections by different age breakouts than CMS is able to report. • The breakouts by age provided by (CA) California does not sum to the reported total number of plan selections because the state reports some individuals as 'unknown.'
HC.gov	Gender	Count of male and female consumers, according to the selected policy.
SBE	Gender	Count of male and female consumers, according to the selected policy. Note, some states may not add up to the total due to unknown or missing gender.
SBE	Race/Ethnicity	<p>States using their own platforms report race/ethnicity as a single variable.</p> <ul style="list-style-type: none"> • The breakouts by race/ethnicity provided by (NY) New York do not sum to the state's reported total number of plan selections because consumers may select multiple race/ethnicity categories. • The breakouts by race/ethnicity provided by (VT) Vermont do not sum to the state's reported total number of plan selections due to the structure of Vermont's application.
HC.gov	American Indian / Alaska Native	Count of consumers who indicated they were American Indian or Alaska Native.
SBE	American Indian / Alaska Native	Count of consumers who indicated they were American Indian or Alaska Native on their application.
HC.gov	Asian	Count of consumers who indicated they were Asian Indian, Chinese, Filipino, Korean, Vietnamese, Japanese, or Other Asian.

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SBE	Asian	Count of consumers who indicated they were Asian Indian, Chinese, Filipino, Korean, Vietnamese, Japanese, or "other Asian" on their application.
HC.gov	Native Hawaiian / Pacific Islander	Count of consumers who indicated they were Guamanian or Chamorro, Native Hawaiian, Samoan, or Other Pacific Islander.
SBE	Native Hawaiian / Pacific Islander	Count of consumers who indicated they were Guamanian or Chamorro, Native Hawaiian, Samoan, or Other Pacific Islander on their application.
HC.gov	African American	Count of consumers who indicated they were black or African American.
SBE	African American	Count of consumers who indicated they were black or African American on their application.
HC.gov	White	Count of consumers who indicated they were white.
SBE	White	Count of consumers who indicated they were white on their application.
HC.gov	Other Race	Count of consumers who indicated Other Race.
HC.gov	Multiracial	Count of consumers who indicated more than one distinct racial group as defined above: American Indian / Alaska Native, Asian, Native Hawaiian / Pacific Islander, African-American, Other Race, and White.
SBE	Multiracial	Count of consumers who indicated more than one distinct racial group: American Indian / Alaska Native, Asian, Native Hawaiian / Pacific Islander, African-American, and White, on their application.
HC.gov	Unknown Race	Count of consumers who did not indicate a race.
SBE	Unknown Race	Count of consumers who did not indicate a race on their application.
HC.gov	Hispanic or Latino	Count of consumers who indicated they were Hispanic/Latino.
SBE	Hispanic or Latino	Count of consumers who indicated they were Mexican, Mexican American or Chicano/a, Puerto Rican, Cuban, or "other ethnicity" on their application.
HC.gov	Not Hispanic or Latino	Count of consumers who indicated they were not Hispanic/Latino.
HC.gov	Unknown Ethnicity	Count of consumers who did not indicate an ethnicity.
HC.gov	Rural / Non-Rural	Count of plan selections in rural or non-rural locations based on zip code, as defined by HRSA.
HC.gov	Metal Level	Count of consumers on Catastrophic, Bronze, Silver, Gold, and Platinum plans. Some states do not have Catastrophic and/or Platinum plans.
SBE	Metal Level	Count of consumers on Catastrophic, Bronze, Silver, Gold, and Platinum plans. Some states do not have Catastrophic and/or Platinum plans. <ul style="list-style-type: none"> The breakouts by metal level provided by (CO) Colorado, and (NY) New York differ slightly from the states' reported total number of plan selections due to data anomalies.

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		<ul style="list-style-type: none"> The breakouts by metal level provided by (VT) Vermont do not sum to the state's reported total number of plan selections due to administrative errors in processing a limited number of plan cancellations/terminations. The breakouts by metal level provided by (MA) Massachusetts do not sum to the state's reported total number of plan selections due to instances in which consumers selected a plan type for a future coverage month that differs from their current month's plan type.
HC.gov	Not Requesting Financial Assistance	The count of consumers who did not request financial assistance on their application and therefore do not submit financial information.
HC.gov	FPL (Federal Poverty Level)	The income reported is the household income attested by the applicant. FPL is calculated for the contiguous states and separately for Alaska and Hawaii as per federal guidelines from the household income reported.
SBE	FPL (Federal Poverty Level)	<ul style="list-style-type: none"> Breakouts for (CO) Colorado do not sum to total plan selections due to data anomalies. Breakouts for (VT) Vermont do not sum to total plan selections due to administrative errors in processing a limited number of cancellations/terminations.
HC.gov	Other FPL	Includes attested household incomes below 100% FPL, attested incomes above 400% FPL, and a small number of cases where the applicant is requesting financial assistance but income is missing. CMS does not report household incomes below 100% FPL or above 400% FPL for consumer protection.
SBE	Other/Unknown FPL	Includes consumers in the following categories: 1) Consumers with a plan selection and income less than 100% FPL, 2) Consumers with a plan selection and income more than 400% FPL, and 3) Consumers with a plan selection whose income is unknown. CMS does not report household incomes below 100% FPL or above 400% FPL for consumer protection.
HC.gov	Individuals Who Have Selected a Standalone Dental Exchange Plan	Count of unique consumers who selected or were automatically re-enrolled into a 2018 Exchange dental plan (regardless of whether the consumer paid the premium).
SBE	Individuals Who Have Selected a Standalone Dental Exchange Plan	<p>Count of unique consumers who selected a 2018 Exchange stand-alone dental plan as of the end of an SBE's Open Enrollment.</p> <ul style="list-style-type: none"> (CO) Colorado's Stand-Alone Dental Plan (SADP) plan selection breakouts by age do not sum to total reported number of SADP plan selections due to a data anomaly. The breakouts reported by (MA) Massachusetts do not sum to the state's reported total due to cases where individuals experience birthdays that move them into a different age bracket in a future coverage month.
HC.gov	High Coverage	Count of dental plan selections with a high level of coverage.

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HC.gov	Low Coverage	Count of dental plan selections with a low level of coverage.
SBEs	Total Number of Basic Health Program Plan Enrollments	Count of active, new, and renewing individuals participating in the Basic Health Program (BHP) in (NY) New York and (MN) Minnesota as of the end of the SBE's Open Enrollment. Minnesota includes active enrollments and eligibility determinations conducted for new and renewing enrollees in its count. Consumers can enroll in BHP year-round.