IOWA DEPARTMENT OF HUMAN SERVICES
COLLECTION AND REPORTING SYSTEM
PERFORMANCE MEASURES AND REPORT FOR _____
MEDICAL PROCESS



| | CURRENT ASSISTANCE | FORMER ASSISTANCE | NEVER ASSISTANCE | ALL ASSISTANCE |
|---|---|---|---|---|
| CASES OPEN / END-OF FISCAL YEAR | | | | |
| MEDICAID ONLY / END OF FISCAL YEAR | | | | |
| CASES OPEN / END OF FISCAL YEAR / SUPPORT ORDER ESTABLISHED | | | | |
| MEDICAID ONLY W/ORDERS / END OF FISCAL YEAR | | | | |
| CASES OPEN / END OF FISCAL YEAR / MEDICAL SUPPORT ORDERED | | | | |
| CASES OPEN / END OF FISCAL YEAR / HEALTH INSURANCE ORDERED | | | | |
| CASES OPEN / END OF FISCAL YEAR / HEALTH INSURANCE PROVIDED | | | | |

| | "10" | "11" | "12" | "13" | "14" | "15" | "16" | "17" | "18" | "19" | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| ACTIVE CASES W/HEALTH INSURANCE | | | | | | | | | | | |
| HEALTH INSURANCE - PROVIDER/PAYOR | | | | | | | | | | | |
| HEALTH INSURANCE - PROVIDER/PAYEE | | | | | | | | | | | |
| HEALTH INSURANCE - PROVIDER/PRIVATE | | | | | | | | | | | |
| TOTAL CHILDREN ENROLLED | | | | | | | | | | | |
| PARTY ORDERED TO PROVIDE HEALTH INS | | | | | | | | | | | |
| PAYOR | | | | | | | | | | | |
| PAYEE | | | | | | | | | | | |
| BOTH | | | | | | | | | | | |
| SHARE | | | | | | | | | | | |
| -NUMBER OF CASES- | | | | | | | | | | | |
| HEALTH INSURANCE POTENTIAL = A | | | | | | | | | | | |
| HEALTH INSURANCE POTENTIAL = 1 | | | | | | | | | | | |
| HEALTH INSURANCE POTENTIAL = 2 | | | | | | | | | | | |
| NOT SELECTED / HEALTH INSURANCE POT = 2 | | | | | | | | | | | |
| HEALTH INSURANCE POTENTIAL = 3 | | | | | | | | | | | |
| HEALTH INSURANCE POTENTIAL = 4 | | | | | | | | | | | |
| NO INFO RECEIVED AFTER 30 DAYS | | | | | | | | | | | |
| NO INFO RECEIVED AFTER 60 DAYS | | | | | | | | | | | |
| SECOND EMPLOYER VERIFIED | | | | | | | | | | | |
| MEDICAL FORMS REPRINTED | | | | | | | | | | | |
| REQUIRING CORRECTIVE ACTION | | | | | | | | | | | |
| WORKER MADE MANUAL ENTRY BEFORE BATCH | | | | | | | | | | | |
| ENROLL STATUS = "P" | | | | | | | | | | | |
| ENROLL STATUS = "E" | | | | | | | | | | | |
| ENROLL STATUS = "N" | | | | | | | | | | | |
| ENROLL STATUS = "X" | | | | | | | | | | | |
| ENROLL STATUS = "W" | | | | | | | | | | | |
| ENROLL STATUS = "A" | | | | | | | | | | | |
| ENROLL STATUS = "I" + FORM STATUS = 0 | | | | | | | | | | | |
| ENROLL STATUS = "I" + FORM STATUS = 5 | | | | | | | | | | | |
| MOTION TO QUASH | | | | | | | | | | | |
| REQUEST FOR INFORMAL CONFERENCE | | | | | | | | | | | |
| INFORMAL CONFERENCES HELD | | | | | | | | | | | |
| MTQ FILED OR SERVED | | | | | | | | | | | |
| MTQ GRANTED | | | | | | | | | | | |
| EMPLOYER DOES NOT OFFER HI-CASE BYPASSED | | | | | | | | | | | |
| NMSN - NO INSTRUCTIONS | | | | | | | | | | | |