

ID #	Name	Type	Goal	What it measures
<b>ELEMENT 1 - DATA</b>				
2b	Accurate MDR data in ICIS-Air	File, Goal	100%	<p>Percentage of files reviewed where substantive MDR data are accurately reflected in ICIS-AIR.</p> <p>Numerator: number of files reviewed where file data and ICIS-AIR data are the same for substantive MDRs;</p> <p>Denominator: the number of files reviewed.</p>
3a2	Timely-reporting of HPV determinations into ICIS-Air	Data, Goal	100%	<p>Percentage of HPVs determinations entered within 60 days based on the Case File "Date Created" in ICIS-AIR.</p> <p><u>Numerator</u>: number of HPVs reported within 60 days of HPV determination within the review year;</p> <p><u>Denominator</u>: number of Case Files with HPVs that were reported during the review year.</p>
3b1	Timely reporting of compliance monitoring MDRs	Data, Goal	100%	<p>Percentage of compliance monitoring-related MDR actions achieved during the review year that were reported within 60 days of the date achieved.</p> <p><u>Numerator</u>: number of compliance monitoring-related MDR actions achieved during the review year and within 60-days of the date achieved.</p> <p><u>Denominator</u>: number of compliance monitoring-related MDR actions achieved during the review year at federally reportable facilities.</p>
3b2	Timely reporting of stack test and results	Data, Goal	100%	<p>Percentage of stack tests achieved during the review year that were reported to ICIS-Air within 120 days of the stack test.</p> <p><u>Numerator</u>: number of stack tests that occurred at CAA majors, synthetic minors, and Part 61 NESHAP minors during the review year and were reported and reviewed within 120 days.</p> <p><u>Denominator</u>: majors, synthetic minors, and Part 61 NESHAP minors with a stack test achieved during the review year.</p>

ID #	Name	Type	Goal	What it measures
3b3	Timely reporting of enforcement MDRs	Data, Goal	100%	<p>Percentage of enforcement actions achieved during the review year that were reported to ICIS-AIR within 60 days.</p> <p><u>Numerator:</u> number of enforcement actions achieved during the review year that were reported within 60 days;</p> <p><u>Denominator:</u> number of enforcement actions achieved during the review year.</p>
<b>ELEMENT 2 - INSPECTIONS</b>				
5a	FCE coverage: majors and mega-sites	Data, Goal	100% of commitment	<p>Percentage of CMS majors and mega-sites that received an FCE within a negotiated frequency or recommended minimum frequency.</p> <p><u>Numerator:</u> the number of CMS major sources and mega-sites where an FCE was completed by the end of the review year;</p> <p><u>Denominator:</u> the number of CMS major sources and mega-sites where an FCE was completed, plus those planned but not completed by the end of the review year.</p>
5b	FCE coverage: SM-80s	Data, Goal	100% of commitment	<p>Percentage of CMS SM-80s that received an FCE within a negotiated frequency or recommended frequency.</p> <p><u>Numerator:</u> number of CMS SM-80 sources where an FCE was completed by the end of the review year;</p> <p><u>Denominator:</u> number of CMS SM-80 sources where an FCE was completed, plus those planned but not completed by the end of the review year.</p>
5c	FCE coverage: minors and synthetic minors (non-SM 80s) that are part of an alternative CMS Plan	Data, Goal	100% of commitment	<p>Percentage of minors and synthetic minors (SMs), not including SM-80s, included on a CMS plan that received an FCE within the review year.</p> <p><u>Numerator:</u> number of CMS minor and synthetic minor (non-SM80) sources where an FCE was completed by the end of the review year.</p> <p><u>Denominator:</u> number of CMS minor and synthetic minor (non-SM80) sources where an FCE was completed, plus those planned but not completed by the end of the review year.</p>

ID #	Name	Type	Goal	What it measures
5e	Reviews of Title V annual compliance certifications completed	Data, Goal	100%	<p>Percentage of the active Title V universe (regardless of classification) for which the agency has reviewed a Title V annual compliance certification (ACCs) during the review year. Active refers to an operating status of either operating (O), temporarily closed (T), or seasonal (I).</p> <p><u>Numerator:</u> number of active Title V sources with a Title VACC reviewed by the agency for the review year;</p> <p><u>Denominator:</u> active Title V universe with an ACC due in the review year..</p>
6a	Documentation of FCE elements	File, Goal	100%	<p>Percentage of FCEs in the files reviewed that meet the definition of a FCE per the CMS policy.</p> <p><u>Numerator:</u> number of files with FCE documentation that ensures that a source's compliance status has been evaluated per Section V of the CMS;</p> <p><u>Denominator:</u> number of files reviewed with FCEs.</p>
6b	Compliance monitoring reports (CMRs) or facility files reviewed that provide sufficient documentation to determine compliance of the facility	File, Goal	100%	<p>Percentage of CMRs or source files reviewed that provide sufficient documentation to determine source compliance.</p> <p><u>Numerator:</u> number of CMRs or facility files containing all elements listed in the CMS, Section IX;</p> <p><u>Denominator:</u> number of files reviewed for CMR elements.</p>
<b>ELEMENT 3 - VIOLATIONS</b>				
7a	Accurate compliance determinations	File, Goal	100%	<p>Percentage of Compliance Monitoring Reports (CMR) or source files reviewed that led to accurate compliance determinations (i.e. FRVs). (This differs from metric 6b which focuses on whether there is sufficient documentation in the files. Metric 7a examines whether the compliance determination was accurate.)</p> <p><u>Numerator:</u> number of CMRs or source files with accurately reported compliance determinations (i.e. FRVs);</p> <p><u>Denominator:</u> the number of CMRs or source files reviewed.</p>

ID #	Name	Type	Goal	What it measures
7a1	FRV 'discovery rate' based on evaluations at active CMS sources	Data, Support Indicator for 7a	N/A	<p>FRV "discovery rate" based on evaluations at active CMS sources. Percentage of FRVs reported into ICIS-Air at CMS sources active during the review year.</p> <p><u>Numerator</u>: number of facilities with an FRV determination date during the review year at active CMS sources.</p> <p><u>Denominator</u>: universe of active CMS sources during the review year.</p>
8c	Accuracy of HPV determinations	File, Goal	100%	<p>Percentage of federally reportable violations (FRVs) reviewed for which an accurate HPV determination (HPV or no HPV) was made.</p> <p><u>Numerator</u>: number of FRVs reviewed for which an accurate HPV/non-HPV determination was made;</p> <p><u>Denominator</u>: Total number of FRVs reviewed.</p>
8a	HPV discovery rate at majors	Data, Support Indicator for 8c	N/A	<p>FRV "discovery rate" based on active major sources.</p> <p><u>Numerator</u>: the universe of active major sources with an HPV during the review year.</p> <p><u>Denominator</u>: the universe of active major sources.</p>
13	Timeliness of HPV Identification	Data, Goal	100%	<p>Within 90-days after the compliance monitoring activity or discovery action that first provides reasonable information indicating a violation of federally-enforceable requirements, an HPV classification should be made.</p> <p><u>Numerator</u>: number of case files with HPVs that were reported in the review year that were determined within 90-days of the discovery action.</p> <p><u>Denominator</u>: number of case files with earliest HPV Day Zero date in the review year.</p>

**ELEMENT 4 - ENFORCEMENT**

ID #	Name	Type	Goal	What it measures
9a	Formal enforcement responses that include required corrective action that will return the facility to compliance in a specified time frame or the facility fixed the problem without a compliance schedule.	File, Goal	100%	<p>Percentage of formal enforcement responses reviewed that include required corrective actions that will return the source to compliance in a specified time frame or the facility fixed the problem without a compliance schedule. This encompasses HPVs and non-HPVs.</p> <p><u>Numerator:</u> number of formal enforcement actions reviewed that either include a schedule to return to compliance or the facility fixed the problem without a compliance schedule;</p> <p><u>Denominator:</u> total number of formal enforcement actions reviewed.</p>
10a	Timeliness of addressing HPVs or alternatively having a case development and resolution timeline in place.	File, Goal	100%	<p>Percentage of HPVs reviewed that were either a) addressed within 180 days of Day Zero or b) not addressed within 180 days of Day Zero, but had a case development and resolution timeline in place within 225 days of Day Zero.</p> <p><u>Numerator:</u> Number of HPVs reviewed that were either: a) addressed within 180 days of Day Zero; or, b) not addressed within 180 days of Day Zero, but had a case development and resolution timeline in place within 225 days of Day Zero.</p> <p><u>Denominator:</u> Number of HPVs reviewed.</p>
10a1	Rate of Addressing HPVs within 180 days	Data, Support Indicator for 10a	N/A	<p>Percentage of HPV's addressed that were addressed within 180 days of Day Zero.</p> <p><u>Numerator:</u> number of case files with HPV's addressed during the review year that were addressed within 180-days of Day Zero.</p> <p><u>Denominator:</u> number of case files with HPVs addressed during the review year.</p>
10b	Percent of HPVs that have been have been addressed or removed consistent with the HPV Policy.	File, Goal	100%	<p>Percent of HPVs that have been addressed or removed (via a no further action determination, lead change, or another removal mechanism) consistent with HPV Policy.</p> <p><u>Numerator:</u> the number of HPV's reviewed that were addressed or removed consistent with the HPV policy.</p> <p><u>Denominator:</u> the number of HPV's reviewed that were addressed or removed.</p>

ID #	Name	Type	Goal	What it measures
10b1	Rate of Managing HPV's to Completion without a Formal Enforcement Action	Data, Support Indicator for 10b	N/A	<p>Percentage of HPVs managed to completion w/o a formal enforcement action.</p> <p><u>Numerator:</u> Number of case files with HPVs managed to completion during the review year via "removal," a determination of no further action, lead change, or another mechanism, but not via a formal enforcement action.</p> <p><u>Denominator:</u> Number of case files with HPVs managed to completion during the review year via any mechanism (removal, no further action lead change, another mechanism, or a formal enforcement action).</p>
14	HPV Case Development and Resolution Timeline In Place When Required that Contains Required Policy Elements	File, Goal	100%	<p>HPVs not addressed or otherwise concluded within 180 days of Day Zero have a case development and resolution (CD&amp;R) timeline in place, and the CD&amp;R meets the requirements of the HPV Policy.</p> <p><u>Numerator:</u> number of HPVs reviewed that require a CD&amp;R plan (are 225 days old and were not addressed or otherwise concluded) that have a CD&amp;R plan that meets the requirements of the HPV policy.</p> <p><u>Denominator:</u> number of HPVs reviewed that required a CD&amp;R plan (are 225 days old and were not addressed or otherwise concluded).</p>
<b>ELEMENT 5 - PENALTIES</b>				
11a	Penalty calculations reviewed that document gravity and economic benefit	File, Goal	100%	<p>Percentage of penalty calculations reviewed that document and include, where appropriate, gravity and economic benefit.</p> <p><u>Numerator:</u> Number of penalties reviewed where the penalty was appropriately calculated and documented;</p> <p><u>Denominator:</u> Total number of penalties reviewed.</p>
12a	Documentation of rationale for difference between initial penalty calculation and final penalty	File, Goal	100%	<p>Percentage of penalties reviewed that document the rationale for the final value assessed when it is lower than the initial calculated value.</p> <p><u>Numerator:</u> Total number of penalties reviewed that document the rationale for the final value assessed compared to the initial value calculated; Also, includes those penalty calculations reviewed where there is no difference between the initial and final penalty.</p> <p><u>Denominator:</u> Total number of penalties calculations reviewed. .</p>

ID #	Name	Type	Goal	What it measures
12b	Penalties collected	File, Goal	100%	<p>Percentage of penalty files reviewed that document collection of penalty.</p> <p><u>Numerator</u>: Number of assessed penalties with documentation of collection, or documentation of measures to collect a delinquent penalty;</p> <p><u>Denominator</u>: Number of assessed penalties reviewed.</p>