

Table 18: Medicaid and CHIP: January 2017 Monthly Applications and Eligibility Determinations Updated March 2017

Performance Indicator Information:

The Medicaid and CHIP performance indicators were developed in consultation with states, and are intended to assist in monitoring the eligibility and enrollment processes for Medicaid and CHIP programs in all states. A common set of definitions were developed for consistency in reporting the Medicaid and CHIP performance indicators. More detailed information about the performance indicators, including these standardized definitions can be found in the Methodology: About the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Report at <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights/index.html>.

The number of applications received by the Medicaid agency, a separate CHIP agency (if one exists in the state), or both during the reporting period (column (I)), includes applications received online, via mail, in person or phone. These figures do not include applications submitted to a State-Based Marketplace (SBM) or the Federally-Facilitated Marketplace (FFM). Applications requesting financial assistance (Medicaid, CHIP or the Advanced Premium Tax Credit and Cost-Sharing Reductions) that have been received by the SBM during the reporting period are reported in column (II). Please note, information on applications received by (and Medicaid and CHIP assessments and determinations made by) the Marketplaces during the Marketplace open enrollment period is included in the Health Insurance Marketplace's 2016 Open Enrollment Period: Final Enrollment Report (March 11, 2016).

Columns (VI) and (VII) include the total number of individuals determined eligible for Medicaid (under title XIX of the Social Security Act) (column (VI)) and CHIP (column (VII)) during the reporting period based on applications for coverage submitted to any state agency (Medicaid, CHIP or the SBM) or based on administrative determinations authorized under a targeted enrollment strategy approved by CMS. The unit of measurement is a count of individuals (as compared to the application numbers, which may include multiple people in one application). In states receiving account transfers from the FFM in the reporting period where the FFM makes an eligibility assessment (and the state then completes the Medicaid determination), these numbers include determinations made on accounts assessed as eligible and transferred from the FFM. In other states, where the state has delegated to the FFM the authority to make Medicaid eligibility determinations, the report does not include the FFM determinations because the Medicaid/CHIP agency is not performing the determinations.

States are at various points in the process of transitioning from their historic definitions to the updated standardized reporting specifications. Where states have provided data that vary from our specifications, we have included that information in the data quality limitations sections below.

Data Context Notes:

- Because of reporting capability, some states included renewals, applications to SBMs, or transfers from the FFM in their Medicaid and CHIP agency application data. See the data quality limitation notes below for state-specific caveats.
- California did not report SBM application data in January and Tennessee only provided determination data from their CHIP program.

Column1	Column2	Applications	Column3	Column4	Column5	Column6	Determinations	Column7	Column8
States Expanding Medicaid	Marketplace Type	New Applications Submitted to Medicaid and CHIP Agencies, January 2017 (Updated) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, January 2017 (Updated) (II)	Total Applications for Financial Assistance Submitted at State Level, January 2017 (Updated) (III)	Total Applications for Financial Assistance Submitted at State Level, December 2016 (Updated) (IV)	% Change December 2016 to January 2017 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, January 2017 (Updated) (VI)	Individuals Determined Eligible for CHIP at Application, January 2017 (Updated) (VII)	Total New Determinations, January 2017 (Updated) (VIII)
Alaska	FFM	3,729	N/A	3,729	3,350	11.31%	3,677	-	3,677
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	-	N/A	-	-	-	-	-	-
California	SBM	232,993	-	232,993	240,919	-3.29%	186,574	16,141	202,715
Colorado	SBM	25,193	7,959	33,152	46,225	-28.28%	19,876	250	20,126
Connecticut	SBM	10,462	11,235	21,697	23,095	-6.05%	16,608	282	16,890
Delaware	Partnership	-	N/A	-	-	-	-	-	-
District of Columbia	SBM	5,082	-	5,082	4,894	3.84%	5,615	-	5,615
Hawaii	SBM**	5,109	-	5,109	4,379	16.67%	8,488	411	8,899
Illinois	Partnership	102,834	N/A	102,834	114,619	-10.28%	48,858	14,872	63,730
Indiana	FFM	94,204	N/A	94,204	78,022	20.74%	37,230	2,802	40,032
Iowa	Partnership	21,972	N/A	21,972	19,834	10.78%	3,117	-	3,117
Kentucky	SBM	-	12,345	12,345	10,071	22.58%	-	-	-
Louisiana	FFM	31,695	N/A	31,695	26,912	17.77%	35,465	1,929	37,394
Maryland	SBM	7,640	97,640	105,280	113,279	-7.06%	30,709	3,267	33,976
Massachusetts	SBM	22,066	13,821	35,887	36,080	-0.53%	-	-	-
Michigan	Partnership	58,377	N/A	58,377	45,617	27.97%	62,503	1,804	64,307
Minnesota	SBM	6,760	52,541	59,301	54,188	9.44%	36,521	47	36,568
Montana	Plan Management	5,049	N/A	5,049	4,464	13.10%	5,309	450	5,759
Nevada	SBM**	24,052	-	24,052	24,809	-3.05%	14,575	74	14,649
New Hampshire	Partnership	9,693	N/A	9,693	7,957	21.82%	6,707	692	7,399
New Jersey	FFM	38,723	N/A	38,723	31,733	22.03%	13,929	4,695	18,624
New Mexico	SBM**	10,329	N/A	10,329	8,552	20.78%	12,619	1,449	14,068
New York	SBM	-	962,657	962,657	920,664	4.56%	138,729	13,065	151,794
North Dakota	FFM	2,377	N/A	2,377	2,374	0.13%	4,799	166	4,965
Ohio	Plan Management	72,621	N/A	72,621	70,186	3.47%	262,150	-	262,150
Oregon	SBM**	20,150	-	20,150	18,898	6.63%	28,058	2,315	30,373
Pennsylvania	FFM	96,751	N/A	96,751	83,982	15.20%	60,068	10,322	70,390
Rhode Island	SBM	9,038	-	9,038	-	-	7,880	975	8,855
Vermont	SBM	3,681	3,310	6,991	5,501	27.09%	5,779	133	5,912
Washington	SBM	23,156	107,024	130,180	173,059	-24.78%	51,680	1,521	53,201
West Virginia	Partnership	26,594	N/A	26,594	23,578	12.79%	11,169	729	11,898
Subtotal for All States Expanding Medicaid		970,330	1,268,532	2,238,862	2,197,241	1.48%	1,118,692	78,391	1,197,083
Expansions in Effect and Providing Coverage in		970,330	1,268,532	2,238,862	2,197,241	1.48%	1,118,692	78,391	1,197,083
Expanding Medicaid that Reported in December 2016 and January 2017				2,229,824	2,197,241	Difference December 2016 to January 2017 32,583			

Table 18: Medicaid and CHIP: January 2017 Monthly Applications and Eligibility Determinations Updated March 2017

**= The state's Marketplace uses the FFM's information technology platform for eligibility and enrollment functions (the FFM makes either assessments or determinations of Medicaid and CHIP eligibility).

(-)=state has not reported data except as noted below.

Column V is calculated for only those states that report December 2016 and January 2017 Applications data (subtotals exclude AR, AZ, DE, RI).

Partnership, Plan Management, FFM/SBM-SHOP are all types of FFMs.

† Reported value is less than 10, excluded from data set to ensure privacy.

Alaska	(I), (III), (IV), (VI), (VII)	Includes renewals converting to MAGI methodology.
Alaska	(VI), (VIII)	Includes CHIP.
California	(I),(IV)	Reflects primarily newly-determined and likely eligible Medicaid applicants,
California		as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(VI), (VII), (VIII)	Does not include data from all consortia.
California	(VI)	Reflects primarily newly-determined and likely eligible Medicaid applicants
California		as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(VI), (VII), (VIII)	Does not include all eligibility determinations.
Connecticut	(I), (III), (III)	Only includes applications that have been entered into the Eligibility Management System; applications that were received during the month but are still waiting to be screened are excluded.
Connecticut	(I), (III)	May not include all Medicaid applications.
Connecticut	(I), (III), (IV)	Data may include some duplication of applications between Medicaid and CHIP.
Connecticut	(II)	Data may contain duplicate applications.
Connecticut	(II), (VI), (VII), (VIII)	May include some change in circumstance updates that are not new applications for coverage.
Connecticut	(VI), (VII), (VIII)	May not include all Medicaid determinations.
District of Columbia	(I)	Includes SBM data.
District of Columbia	(III), (IV)	Includes renewals.
District of Columbia	(VI)	Includes all determinations (e.g., renewals). Includes CHIP.
Iowa	(VI)	Does not include MAGI determinations.
Iowa	(VI), (VII), (VIII)	Data are incomplete; does not include all determinations.
Iowa	(I), (III), (IV), (VI), (VII)	Includes renewals.
Iowa	(I), (III), (IV)	Includes SSI enrollees automatically enrolled in Medicaid without submitting an application.
Maryland	(VI), (VII), (VIII)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 01/1 - 01/31.
Maryland	(II), (III), (IV), (VI), (VII), (VIII)	Includes some renewals from the SBM.
Michigan	(VI)	Does not include MAGI determinations.
Michigan	(VI)	Includes renewals.
Nevada	(I), (III), (IV)	Includes renewals.
Nevada	(VI)	Count is of households, not individuals. Includes renewals.
New Jersey	(I), (III), (IV)	Includes applications received at county welfare agencies.
New Jersey	(VI), (VII), (VIII)	Does not include all eligibility determinations; county welfare agency determinations are not included.
New York	(II), (III), (IV), (VI), (VII), (VIII)	Includes renewals.
Ohio	(I), (III), (IV)	Includes renewals.
Ohio	(VI)	Includes CHIP.
Ohio	(VI), (VIII)	Includes renewals.
Oregon	(VI)	Count is of households, not individuals.
Oregon	(I), (III), (IV) (VI), (VIII)	Includes MAGI populations only.
Pennsylvania	(I), (III), (IV)	Includes renewals.
Pennsylvania	(VI), (VIII)	Includes renewals.
Pennsylvania	(VI), (VII), (VIII)	Count is of households, not individuals.
Rhode Island	(I), (III), (IV), (VI), (VII)	Includes only applications received and determinations made through new MAGI system.
Vermont	(III), (IV)	Includes renewals.
Vermont	(VI)	Includes renewals.

Table 18: Medicaid and CHIP: January 2017 Monthly Applications and Eligibility Determinations Updated March 2017

Column1	Column2	Applications	Column3	Column4	Column5	Column6	Determinations	Column7	Column8
States Not Expanding Medicaid	Marketplace Type	New Applications Submitted to Medicaid and CHIP Agencies, January 2017 (Updated) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, January 2017 (Updated) (II)	Total Applications for Financial Assistance Submitted at State Level, January 2017 (Updated) (III)	Total Applications for Financial Assistance Submitted at State Level, December 2016 (Updated) (IV)	% Change December 2016 to January 2017 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, January 2017 (Updated) (VI)	Individuals Determined Eligible for CHIP at Application, January 2017 (Updated) (VII)	Total New Determinations, January 2017 (Updated) (VIII)
Alabama	FFM	18,097	N/A	18,097	16,575	9.18%	28,374	4,678	33,052
Florida	FFM	304,159	N/A	304,159	257,593	18.08%	126,341	17,260	143,601
Georgia	FFM	76,017	N/A	76,017	87,214	-12.84%	36,158	1,495	37,653
Idaho	SBM	13,962	-	13,962	15,334	-8.95%	6,575	830	7,405
Kansas	Plan Management	-	N/A	-	-	-	-	-	-
Maine	Plan Management	1,711	N/A	1,711	1,521	12.49%	9,935	400	10,335
Mississippi	FFM/SBM-SHOP	20,006	N/A	20,006	17,406	14.94%	11,661	546	12,207
Missouri	FFM	20,663	N/A	20,663	17,498	18.09%	11,341	-	11,341
Nebraska	Plan Management	7,344	N/A	7,344	6,222	18.03%	6,880	1,002	7,882
North Carolina	FFM	25,850	N/A	25,850	20,606	25.45%	31,362	3,661	35,023
Oklahoma	FFM	41,696	N/A	41,696	35,472	17.55%	46,791	8,121	54,912
South Carolina	FFM	25,114	N/A	25,114	19,657	27.76%	6,912	146	7,058
South Dakota	Plan Management	2,861	N/A	2,861	2,945	-2.85%	1,584	-	1,584
Tennessee	FFM	653	N/A	653	549	18.94%	-	482	482
Texas	FFM	140,406	N/A	140,406	113,093	24.15%	108,742	13,653	122,395
Utah	FFM/SBM-SHOP	28,396	N/A	28,396	29,628	-4.16%	49,223	-	49,223
Virginia	Plan Management	26,185	N/A	26,185	23,263	12.56%	14,514	503	15,017
Wisconsin	FFM	28,941	N/A	28,941	24,738	16.99%	24,103	1,884	25,987
Wyoming	FFM	-	N/A	-	764	-	-	-	-
Subtotal for All States Not Expanding Medicaid		782,061	-	782,061	690,078	13.45%	520,496	54,661	575,157
Expanding Medicaid that Reported in December 2016 and January 2017				782,061	689,314	Difference December 2016 to January 2017 92,747			
Total Across All States		1,752,391	1,268,532	3,020,923	2,887,319	4.34%	1,639,188	133,052	1,772,240
Total for States that Reported in December 2016 and January 2017				3,011,885	2,886,555	Difference December 2016 to January 2017 125,330			

Table 18: Medicaid and CHIP: January 2017 Monthly Applications and Eligibility Determinations Updated March 2017

(-)=state has not reported data except as noted below.

Column V is calculated for only those states that reported December 2016 and January 2017 Applications data (subtotals exclude KS and WY; totals exclude AR, AZ, DE, KS, RI, WY).

Partnership, Plan Management, FFM/SBM-SHOP are all types of FFM.

Percent change figures in the subtotal of column V exclude TN, which only reports CHIP data.

† Reported value is less than 10, excluded from data set to ensure privacy.

Florida	(I), (III), (IV)	Includes account transfers from the FFM assessed for CHIP.
Florida	(I), (III), (IV)	Does not include applications for partial benefit programs.
Florida	(VI), (VIII)	Does not include determinations for partial benefit programs.
Georgia	(VI), (VII), (VIII)	Data reported at the case level.
Missouri	(VI)	Includes CHIP.
Missouri	(VI), (VIII), (VIII)	Count is of households, not individuals.
South Carolina	(VI), (VII), (VIII)	Includes only determinations made in legacy system, which include MAGI and/or CHIP cases that are in blended non-MAGI households or non-MAGI only households.
South Dakota	(I), (III), (IV)	Includes account transfers from the FFM.
South Dakota	(I), (III), (IV)	Number of applications is undercounted.
South Dakota	(I), (III), (IV)	Includes individuals who are administratively enrolled without submitting an application.
South Dakota	(VI)	Includes CHIP.
South Dakota	(VI), (VII), (VIII)	Count is of households, not individuals.
South Dakota	(VI), (VII), (VIII)	Includes renewals.
Tennessee	(I), (III)	Includes only unborn CHIP children.
Tennessee	(IV)	Data are from CHIP agency only. Medicaid reporting capability in development.
Tennessee	(VII), (VIII)	Includes only unborn CHIP children.
Tennessee	(VI)	Excluded because data is only from CHIP agency.
Utah	(I), (III), (IV)	Includes applications for non-health coverage programs.
Utah	(I), (III), (IV)	Includes account transfers from the FFM.
Utah	(VI)	Includes CHIP.
Virginia	(I), (III), (IV)	Includes renewals.
Virginia	(VI), (VII)	Includes renewals.
Wisconsin	(I), (III), (IV)	Excludes all partial benefit program applications except for family planning.
Wisconsin	(VI), (VII)	Count is of unique individuals receiving determinations, not unique determinations.
Wyoming	(I), (III), (IV)	Does not include applications received online.
Wyoming	(I), (III), (IV)	Includes SSI enrollees automatically enrolled in Medicaid without submitting an application.

Table 1A: Medicaid and CHIP: December 2016 and January 2017 Monthly Enrollment Updated March 2017

Performance Indicator Information:

The Medicaid and CHIP performance indicators were developed in consultation with states, and are intended to assist in monitoring the eligibility and enrollment processes for Medicaid and CHIP programs in all states. A common set of definitions were developed for consistency in reporting the Medicaid and CHIP performance indicators. More detailed information about the performance indicators, including these standardized definitions can be found in the Methodology: About the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Report at <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights/index.html>.

Total enrollment figures represent the total unduplicated number of individuals enrolled in Medicaid and CHIP as of the last day of the reporting period, including those with retroactive, conditional, and presumptive eligibility. These figures are a point-in-time count of total program enrollment, and not solely a count of those newly enrolled during the reporting period. These figures include only those individuals who are eligible for comprehensive benefits (e.g., emergency Medicaid, family planning-only coverage and limited benefit dual eligible individuals are excluded), except as indicated in the state-specific notes included with the tables. Individuals eligible under demonstration projects authorized by section 1115 of the Social Security Act are included as long as the benefits and networks are comprehensive. The enrollment impact of the Medicaid expansion varies; some states expanded coverage to parents and other adults at income levels above the level required under federal law before the Affordable Care Act. For purposes of this report, the term "states" includes the 50 states and the District of Columbia.

Some of the data contained in this table is designated as "preliminary" because it is reported soon after the close of the reporting month and contains few, if any, individuals who become eligible in current month after the close of the month due to retroactive eligibility under Medicaid or similar reasons. When applicable, states report "updated" data one month after the close of the reporting period to account for retroactive enrollment. Updated enrollment data for prior months is available on the Monthly Medicaid and CHIP Application, Eligibility Determination, and Enrollment Reports and Updated Data page at <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights/index.html>.

The figures in this table may differ from other published state and national enrollment figures because they include only individuals with comprehensive benefits, except as indicated in the state-specific notes included with the tables. For purposes of this report, the term "states" includes the 50 states and the District of Columbia.

States are at various points in the process of transitioning from their historic definitions to the updated standardized reporting specifications. Where states have provided data that vary from our specifications, we have included that information in the data quality limitations sections below.

Data Context Notes:

- For the following states in the table below the "updated" December enrollment data is identical to previously published preliminary data: AR, AZ, CT, DC, DE, FL, IA, KS, KY, LA, MO, NV, PA, OK, SC, SD, WI, WV, WY .
 - For the following states in the table below the "updated" January enrollment data is identical to previously published preliminary data: AR, AZ, CT, DC, DE, FL, IA, KS, KY, LA, MO, ND, NV, OK, SC, SD, WI, WV, WY.
 - Rhode Island identified an error in its recent months' enrollment figures and revised and re-reported all affected data.
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Table 1A: Medicaid and CHIP: December 2016 and January 2017 Monthly Enrollment Updated March 2017

Column1	Column2	Enrollment	Column3	Column4	Column5	Column6	Column7
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, December 2016 (Updated) (I)	Total Medicaid and CHIP Enrollment, January 2017 (Updated) (II)	% Change December 2016 to January 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to January 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to January 2017 (Columns (IV) and (II)) (VI)
Alaska	FFM	176,799	181,723	2.79%	122,334	59,389	48.55%
Arizona	FFM	1,739,041	1,743,472	0.25%	1,201,770	541,702	45.08%
Arkansas	Partnership	948,181	943,269	-0.52%	556,851	386,418	69.39%
California	SBM	12,405,352	12,360,449	-0.36%	7,755,381	4,605,068	59.38%
Colorado	SBM	1,387,165	1,387,803	0.05%	783,420	604,383	77.15%
Connecticut	SBM	761,310	765,313	0.53%	-	-	-
Delaware	Partnership	241,664	243,340	0.69%	223,324	20,016	8.96%
District of Columbia	SBM	264,849	267,538	1.02%	235,786	31,752	13.47%
Hawaii	SBM**	345,975	346,995	0.29%	288,357	58,638	20.34%
Illinois	Partnership	3,065,331	3,100,137	1.14%	2,626,943	473,194	18.01%
Indiana	FFM	1,508,219	1,517,698	0.63%	1,120,674	397,024	35.43%
Iowa	Partnership	622,071	637,203	2.43%	493,515	143,688	29.12%
Kentucky	SBM	1,230,475	1,240,321	0.80%	606,805	633,516	104.40%
Louisiana	FFM	1,415,385	1,433,441	1.28%	1,019,787	413,654	40.56%
Maryland	SBM	1,281,890	1,293,752	0.93%	856,297	437,455	51.09%
Massachusetts	SBM	1,655,529	1,652,107	-0.21%	1,296,359	355,748	27.44%
Michigan	Partnership	2,330,154	2,351,919	0.93%	1,912,009	439,910	23.01%
Minnesota	SBM	1,049,566	1,054,560	0.48%	873,040	181,520	20.79%
Montana	Plan Management	245,360	250,145	1.95%	148,974	101,171	67.91%
Nevada	SBM**	623,574	628,001	0.71%	332,560	295,441	88.84%
New Hampshire	Partnership	191,363	191,389	0.01%	127,082	64,307	50.60%
New Jersey	FFM	1,795,251	1,799,021	0.21%	1,283,851	515,170	40.13%
New Mexico	SBM**	775,020	779,082	0.52%	457,678	321,404	70.22%
New York	SBM	6,420,227	6,445,028	0.39%	5,678,417	766,611	13.50%
North Dakota	FFM	94,681	94,332	-0.37%	69,980	24,352	34.80%
Ohio	Plan Management	2,910,351	2,921,734	0.39%	2,161,785	759,949	35.15%
Oregon	SBM**	986,111	980,520	-0.57%	626,356	354,164	56.54%
Pennsylvania	FFM	2,918,260	2,940,839	0.77%	2,386,046	554,793	23.25%
Rhode Island	SBM	300,924	303,347	0.81%	190,833	112,514	58.96%
Vermont	SBM	169,092	168,513	-0.34%	161,081	7,432	4.61%
Washington	SBM	1,818,225	1,822,488	0.23%	1,117,576	704,912	63.08%
West Virginia	Partnership	567,064	567,168	0.02%	354,544	212,624	59.97%
Subtotal for All States Expanding Medicaid		52,244,459	52,412,647	0.32%	37,069,415	14,577,919	39.33%
Subtotal for All States with Expansions in Effect and Providing Coverage in		52,244,459	52,412,647	0.32%	37,069,415	14,577,919	39.33%
Expanding Medicaid that Reported in December 2016 and January 2017		52,244,459	52,412,647	Difference December 2016 to January 2017 168,188			

Table 1A: Medicaid and CHIP: December 2016 and January 2017 Monthly Enrollment Updated March 2017

Expanding Medicaid that Reported in January 2017 and July-Sept. 2013		51,647,334		37,069,415	Difference July-Sept 2013 to January 2017 14,577,919	
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Table 1A: Medicaid and CHIP: December 2016 and January 2017 Monthly Enrollment Updated March 2017

**= The state's Marketplace uses the FFM's information technology platform for eligibility and enrollment functions (the FFM makes either assessments or determinations of Medicaid and CHIP eligibility).

(-)=state has not reported data except as noted below.

Partnership, Plan Management, FFM/SBM-SHOP are all types of FFMs.

Column III is calculated for only those states that reported both December 2016 and January 2017 data.

Columns V and VI are calculated for only those states that reported data from both and January 2017 and the July-Sept. 2013 period.

The subtotals for states reporting data from both and January 2017 and the July-Sept. 2013 period exclude CT.

Arkansas	(I), (II)	Includes Private Option enrollees.
California	(IV)	Includes approximately 650,000 individuals transferred from the Low Income
California		Health Program section 1115 demonstration.
Connecticut	(I), (II)	May not include all enrollees.
District of Columbia	(I), (II), (IV)	Includes limited benefit dual eligible individuals and individuals enrolled in the locally funded DC Health Alliance.
Illinois	(IV)	Includes individuals who received retroactive coverage (unlike columns (I) and (II)).
Michigan	(I), (II)	Includes partial benefit program enrollees.
Minnesota	(IV)	May include duplicates (unlike columns (I) and (II)).
New York	(I), (II)	Includes estimated retroactive enrollment.
New York	(I), (II)	Includes partial benefit program enrollees.
North Dakota	(IV)	Data is from July 2013 only.
Oregon	(IV)	Includes emergency Medicaid population.
Washington	(I), (II)	Includes individuals enrolled at any point during the month.

Table 1A: Medicaid and CHIP: December 2016 and January 2017 Monthly Enrollment Updated March 2017

Column1	Column2	Enrollment	Column3	Column4	Column5	Column6	Column7
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, December 2016 (Updated) (I)	Total Medicaid and CHIP Enrollment, January 2017 (Updated) (II)	% Change December 2016 to January 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to January 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to January 2017 (Columns (IV) and (II)) (VI)
Alabama	FFM	892,753	889,199	-0.40%	799,176	90,023	11.26%
Florida	FFM	4,337,514	4,352,553	0.35%	3,695,306	657,247	17.79%
Georgia	FFM	1,755,450	1,757,498	0.12%	1,535,090	222,408	14.49%
Idaho	SBM	299,841	292,170	-2.56%	238,150	54,020	22.68%
Kansas	Plan Management	408,885	398,728	-2.48%	378,160	20,568	5.44%
Maine	Plan Management	269,428	268,851	-0.21%	-	-	-
Mississippi	FFM/SBM-SHOP	684,094	684,721	0.09%	637,229	47,492	7.45%
Missouri	FFM	976,256	977,840	0.16%	846,084	131,756	15.57%
Nebraska	Plan Management	243,657	243,968	0.13%	244,600	-632	-0.26%
North Carolina	FFM	2,084,900	2,089,739	0.23%	1,595,952	493,787	30.94%
Oklahoma	FFM	804,355	815,832	1.43%	790,051	25,781	3.26%
South Carolina	FFM	1,032,898	998,447	-3.34%	889,744	108,703	12.22%
South Dakota	Plan Management	119,956	120,053	0.08%	115,501	4,552	3.94%
Tennessee	FFM	1,636,770	1,618,066	-1.14%	1,244,516	373,550	30.02%
Texas	FFM	4,799,893	4,807,102	0.15%	4,441,605	365,497	8.23%
Utah	FFM/SBM-SHOP	311,117	311,587	0.15%	294,029	17,558	5.97%
Virginia	Plan Management	993,220	995,169	0.20%	935,434	59,735	6.39%
Wisconsin	FFM	1,037,863	1,039,857	0.19%	985,531	54,326	5.51%
Wyoming	FFM	61,925	61,635	-0.47%	67,518	-5,883	-8.71%
Subtotal for All States Not Expanding Medicaid		22,750,775	22,723,015	-0.12%	19,733,676	2,720,488	13.79%
Expanding Medicaid that Reported in December 2016 and January 2017		22,750,775	22,723,015	Difference December 2016 to January 2017 -27,760			
Expanding Medicaid that Reported in January 2017 and July-Sept. 2013			22,454,164		19,733,676	Difference July-Sept 2013 to January 2017 2,720,488	

Table 1A: Medicaid and CHIP: December 2016 and January 2017 Monthly Enrollment Updated March 2017

(-)=state has not reported data except as noted below.

Partnership, Plan Management, FFM/SBM-SHOP are all types of FFM.

Column III is calculated for only those states that reported both December 2016 and January 2017 data.

Columns V and VI are calculated for only those states that reported data from both and January 2017 and the July-Sept. 2013 period.

The subtotals for states reporting data from both and January 2017 and the July-Sept. 2013 period exclude ME.

Alabama	(IV)	Data is from September 2013 only.
Missouri	(I), (II)	Does not include all individuals funded under Title XXI or enrollees in a premium grace period.
Utah	(I), (II), (IV)	Includes service limited Medicare program beneficiaries (SLMBs).
Wisconsin	(IV)	Does not include retroactive enrollment.

Table 1A: Medicaid and CHIP: December 2016 and January 2017 Monthly Enrollment Updated March 2017

Column1	Column2	Total Enrollment	Column3	Column4	Column5	Column6	Column7
All States		Total Medicaid and CHIP Enrollment, December 2016 (Updated) (I)	Total Medicaid and CHIP Enrollment, January 2017 (Updated) (II)	% Change December 2016 to January 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to January 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to January 2017 (Columns (IV) and (II)) (VI)
Total Across All States		74,995,234	75,135,662	0.19%	56,803,091	17,298,407	30.45%
Total for States that Reported in December 2016 and January 2017		74,995,234	75,135,662	Difference December 2016 to January 2017 140,428			
Total for States that Reported in January 2017 and July-Sept. 2013			74,101,498		56,803,091	Difference July-Sept 2013 to January 2017 17,298,407	

Column III is calculated for only those states that reported both December 2016 and January 2017 data.

Columns V and VI are calculated for only those states that reported data from both and January 2017 and the July-Sept. 2013 period.

Totals for states reporting data from both and January 2017 and the July-Sept. 2013 period exclude CT and ME.