

Table 1A: Medicaid and CHIP: July and August 2016 Monthly Enrollment Updated October 2016

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://staging.medicaid.gov/medicaid-chip-program-information/program-information/medicaid-and-chip-enrollment-data/about-the-medicaid-and-chip-application-eligibility-determination-and-enrollment-report.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://staging.medicaid.gov/medicaid-chip-program-information/program-information/medicaid-and-chip-enrollment-data/previous-monthly-medicaid-and-chip-application-eligibility-determination-and-enrollment-reports-and-updated-data.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:

- Montana updated its reporting methodology in September 2016 to more closely align with CMS's data specifications. The state subsequently revised its prior months' enrollment counts to reflect the updated methodology and to ensure comparability across these months.
- For the following states in the table below the "updated" August enrollment data is identical to previously published preliminary data: AR, AZ, CA, CT, DC, DE, FL, IA, KS, KY, LA, MO, ND, NM, NV, OH, OK, SC, SD, WI, WV, WY .
- For the following states in the table below the "updated" July enrollment data is identical to previously published preliminary data: AR, AZ, CT, DC, DE, FL, IA, KS, KY, LA, MO, ND, NM, NV, OK, SD, WI, WV, WY .

Table 1A: Medicaid and CHIP: July and August 2016 Monthly Enrollment Updated October 2016

		Enrollment					
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, July 2016 (Updated) (I)	Total Medicaid and CHIP Enrollment, August 2016 (Updated) (II)	% Change July to August 2016 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (VI)
Alaska	FFM	162,869	166,625	2.31%	122,334	44,291	36.20%
Arizona	FFM	1,699,635	1,716,198	0.97%	1,201,770	514,428	42.81%
Arkansas	Partnership	889,082	920,194	3.50%	556,851	363,343	65.25%
California	SBM	12,201,179	11,843,081	-2.93%	7,755,381	4,087,700	52.71%
Colorado	SBM	1,362,887	1,375,264	0.91%	783,420	591,844	75.55%
Connecticut	SBM	753,413	761,137	1.03%	-	-	-
Delaware	Partnership	236,248	236,702	0.19%	223,324	13,378	5.99%
District of Columbia	SBM	258,918	255,491	-1.32%	235,786	19,705	8.36%
Hawaii	SBM**	341,072	341,200	0.04%	288,357	52,843	18.33%
Illinois	Partnership	3,118,055	3,117,939	0.00%	2,626,943	490,996	18.69%
Indiana	FFM	1,481,425	1,489,805	0.57%	1,120,674	369,131	32.94%
Iowa	Partnership	613,386	619,055	0.92%	493,515	125,540	25.44%
Kentucky	SBM	1,223,869	1,220,788	-0.25%	606,805	613,983	101.18%
Louisiana^	FFM	1,308,428	1,328,708	1.55%	1,019,787	308,921	30.29%
Maryland	SBM	1,236,465	1,252,304	1.28%	856,297	396,007	46.25%
Massachusetts	SBM	1,677,180	1,684,328	0.43%	1,296,359	387,969	29.93%
Michigan	Partnership	2,304,480	2,300,958	-0.15%	1,912,009	388,949	20.34%
Minnesota	SBM	1,047,507	1,051,509	0.38%	873,040	178,469	20.44%
Montana	Plan Management	220,378	224,048	1.67%	148,974	75,074	50.39%
Nevada	SBM**	609,435	614,298	0.80%	332,560	281,738	84.72%
New Hampshire	Partnership	189,484	189,429	-0.03%	127,082	62,347	49.06%
New Jersey	FFM	1,782,594	1,784,529	0.11%	1,283,851	500,678	39.00%
New Mexico	SBM**	761,033	766,732	0.75%	457,678	309,054	67.53%
New York	SBM	6,417,388	6,431,165	0.21%	5,678,417	752,748	13.26%
North Dakota	FFM	89,460	89,763	0.34%	69,980	19,783	28.27%
Ohio	Plan Management	2,976,705	3,003,170	0.89%	2,341,481	661,689	28.26%
Oregon	SBM**	1,036,984	1,021,862	-1.46%	626,356	395,506	63.14%
Pennsylvania	FFM	2,861,112	2,883,114	0.77%	2,386,046	497,068	20.83%
Rhode Island	SBM	284,455	287,173	0.96%	190,833	96,340	50.48%
Vermont	SBM	179,421	175,597	-2.13%	161,081	14,516	9.01%
Washington	SBM	1,782,418	1,788,536	0.34%	1,117,576	670,960	60.04%
West Virginia	Partnership	572,107	575,645	0.62%	354,544	221,101	62.36%
Subtotal for All States Expanding Medicaid		51,679,072	51,516,347	-0.31%	37,249,111	13,506,099	36.26%
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		51,679,072	51,516,347	-0.31%	37,249,111	13,506,099	36.26%
Subtotal for States Expanding Medicaid that Reported in July and August 2016		51,679,072	51,516,347	Difference July to August 2016 -162,725			
Subtotal for States Expanding Medicaid that Reported in August 2016 and July-Sept. 2013			50,755,210		37,249,111	Difference July-Sept 2013 to August 2016 13,506,099	

Table 1A: Medicaid and CHIP: July and August 2016 Monthly Enrollment Updated October 2016

^=Louisiana's effective date for implementing the expansion is July 1, 2016.

**= 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 FFM's.

Column III is calculated for only those states that reported both July and August 2016 data.

Columns V and VI are calculated for only those states that reported data from both August 2016 and the July-Sept. 2013 period.

The subtotals for states reporting data from both August 2016 and the July-Sept. 2013 period exclude CT.

Data Quality Limitations:

Arkansas	(I), (II)	Includes Private Option enrollees.
California	(II)	Does not include retroactive enrollment (unlike column (I)).
California	(IV)	Includes approximately 650,000 individuals transferred from the Low Income Health Program section 1115 demonstration.
California		
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)).
Indiana	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
Michigan	(I), (II)	Includes partial benefit program enrollees.
Michigan	(I), (II)	Does not include share of cost and full benefit 1115 waiver enrollees.
Minnesota	(IV)	May include duplicates (unlike columns (I) and (II)).
Montana	(I), (II)	Corrected.
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: July and August 2016 Monthly Enrollment Updated October 2016

		Enrollment					
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, July 2016 (Updated) (I)	Total Medicaid and CHIP Enrollment, August 2016 (Updated) (II)	% Change July to August 2016 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (VI)
Alabama	FFM	896,741	910,775	1.57%	799,176	111,599	13.96%
Florida	FFM	3,620,085	3,644,673	0.68%	3,104,996	539,677	17.38%
Georgia	FFM	1,775,301	1,782,301	0.39%	1,535,090	247,211	16.10%
Idaho	SBM	291,057	293,905	0.98%	238,150	55,755	23.41%
Kansas	Plan Management	422,549	421,638	-0.22%	378,160	43,478	11.50%
Maine	Plan Management	273,367	273,160	-0.08%	-	-	-
Mississippi	FFM/SBM-SHOP	696,139	693,869	-0.33%	637,229	56,640	8.89%
Missouri	FFM	961,073	967,284	0.65%	846,084	121,200	14.32%
Nebraska	Plan Management	241,723	242,702	0.41%	244,600	-1,898	-0.78%
North Carolina	FFM	2,059,981	2,072,282	0.60%	1,595,952	476,330	29.85%
Oklahoma	FFM	787,331	788,544	0.15%	790,051	-1,507	-0.19%
South Carolina	FFM	1,021,192	994,804	-2.58%	889,744	105,060	11.81%
South Dakota	Plan Management	119,252	119,835	0.49%	115,501	4,334	3.75%
Tennessee	FFM	1,632,972	1,627,100	-0.36%	1,244,516	382,584	30.74%
Texas	FFM	4,744,278	4,770,229	0.55%	4,441,605	328,624	7.40%
Utah	FFM/SBM-SHOP	312,936	314,182	0.40%	294,029	20,153	6.85%
Virginia	Plan Management	984,787	988,821	0.41%	935,434	53,387	5.71%
Wisconsin	FFM	1,045,160	1,046,897	0.17%	985,531	61,366	6.23%
Wyoming	FFM	63,618	63,583	-0.06%	67,518	-3,935	-5.83%
Subtotal for All States Not Expanding Medicaid		21,949,542	22,016,584	0.31%	19,143,366	2,600,058	13.58%
Subtotal for States Not Expanding Medicaid that Reported in July and August 2016		21,949,542	22,016,584	Difference July to August 2016 67,042			
Subtotal for States Not Expanding Medicaid that Reported in August 2016 and July-Sept. 2013			21,743,424		19,143,366	Difference July-Sept 2013 to August 2016 2,600,058	

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(-)=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 July and August 2016 data.

Columns V and VI are calculated for only those states that reported data from both August 2016 and the July-Sept. 2013 period.

The subtotals for states reporting data from both August 2016 and the July-Sept. 2013 period exclude ME.

Data Quality Limitations:

Alabama	(IV)	Data is from September 2013 only.
Florida	(I), (II)	Does not include SSI recipients enrolled in Medicaid.
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.

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Total Enrollment						
All States	Total Medicaid and CHIP Enrollment, July 2016 (Updated) (I)	Total Medicaid and CHIP Enrollment, August 2016 (Updated) (II)	% Change July to August 2016 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (VI)
Total Across All States	73,628,614	73,532,931	-0.13%	56,392,477	16,106,157	28.56%
Total for States that Reported in July and August 2016	73,628,614	73,532,931	Difference July to August 2016 -95,683			
Total for States that Reported in August 2016 and July-Sept. 2013		72,498,634		56,392,477	Difference July-Sept 2013 to August 2016 16,106,157	

Column III is calculated for only those states that reported both July and August 2016 data.

Columns V and VI are calculated for only those states that reported data from both August 2016 and the July-Sept. 2013 period.

Totals for states reporting data from both August 2016 and the July-Sept. 2013 period exclude CT and ME.

Table 1B: Medicaid and CHIP: August 2016 Monthly Applications and Eligibility Determinations Updated October 2016

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://staging.medicaid.gov/medicaid-chip-program-information/program-information/medicaid-and-chip-enrollment-data/about-the-medicaid-and-chip-application-eligibility-determination-and-enrollment-report.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 August, and Tennessee only provided determination data from their CHIP program.

Table 1B: Medicaid and CHIP: August 2016 Monthly Applications and Eligibility Determinations Updated October 2016

States Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, August 2016 (Updated) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, August 2016 (Updated) (II)	Total Applications for Financial Assistance Submitted at State Level, August 2016 (Updated) (III)	Total Applications for Financial Assistance Submitted at State Level, July 2016 (Updated) (IV)	% Change July to August 2016 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, August 2016 (Updated) (VI)	Individuals Determined Eligible for CHIP at Application, August 2016 (Updated) (VII)	Total New Determinations, August 2016 (Updated) (VIII)
Alaska	FFM	3,927	N/A	3,927	2,809	39.80%	4,455	-	4,455
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	19,215	N/A	19,215	14,890	29.05%	21,200	1,522	22,722
California	SBM	49,340	-	49,340	54,429	-9.35%	108,494	8,967	117,461
Colorado	SBM	22,247	2,243	24,490	21,185	15.60%	20,801	266	21,067
Connecticut	SBM	11,241	5,198	16,439	14,500	13.37%	14,942	138	15,080
Delaware	Partnership	3,266	N/A	3,266	2,611	25.09%	681	29	710
District of Columbia	SBM	6,417	-	6,417	5,436	18.05%	7,189	-	7,189
Hawaii	SBM**	4,754	-	4,754	4,148	14.61%	6,030	287	6,317
Illinois	Partnership	86,653	N/A	86,653	70,438	23.02%	53,749	17,503	71,252
Indiana	FFM	93,679	N/A	93,679	78,861	18.79%	42,022	3,481	45,503
Iowa	Partnership	22,850	N/A	22,850	19,454	17.46%	3,127	-	3,127
Kentucky	SBM	-	14,994	14,994	12,954	15.75%	36,862	1,679	38,541
Louisiana ^A	FFM	40,032	N/A	40,032	42,825	-6.52%	50,354	2,033	52,387
Maryland	SBM	7,732	89,206	96,938	94,364	2.73%	25,209	2,231	27,440
Massachusetts	SBM	14,233	11,010	25,243	21,617	16.77%	-	-	-
Michigan	Partnership	61,943	N/A	61,943	60,249	2.81%	63,524	2,055	65,579
Minnesota	SBM	8,033	22,733	30,766	25,151	22.33%	25,848	73	25,921
Montana	Plan Management	5,170	N/A	5,170	3,829	35.02%	6,132	292	6,424
Nevada	SBM**	21,099	-	21,099	17,521	20.42%	13,666	64	13,730
New Hampshire	Partnership	8,657	N/A	8,657	7,340	17.94%	5,367	508	5,875
New Jersey	FFM	36,724	N/A	36,724	31,948	14.95%	14,554	5,591	20,145
New Mexico	SBM**	9,851	N/A	9,851	8,178	20.46%	-	-	-
New York	SBM	-	597,938	597,938	636,132	-6.00%	117,817	10,046	127,863
North Dakota	FFM	2,105	N/A	2,105	1,687	24.78%	2,697	84	2,781
Ohio	Plan Management	193,513	N/A	193,513	136,037	42.25%	55,166	3,285	58,451
Oregon	SBM**	37,453	-	37,453	35,948	4.19%	36,417	3,483	39,900
Pennsylvania	FFM	189,447	N/A	189,447	159,338	18.90%	58,724	9,543	68,267
Rhode Island	SBM	-	13,086	13,086	9,810	33.39%	12,388	1,801	14,189
Vermont	SBM	3,781	2,571	6,352	5,535	14.76%	4,829	61	4,890
Washington	SBM	21,443	61,351	82,794	74,451	11.21%	42,088	932	43,020
West Virginia	Partnership	25,453	N/A	25,453	26,287	-3.17%	13,960	692	14,652
Subtotal for All States Expanding Medicaid		1,010,258	820,330	1,830,588	1,699,962	7.68%	868,292	76,646	944,938
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		1,010,258	820,330	1,830,588	1,699,962	7.68%	868,292	76,646	944,938
Subtotal for States Expanding Medicaid that Reported in July and August 2016				1,830,588	1,699,962	Difference July to August 2016 130,626			

^A=Louisiana's effective date for implementing the expansion is July 1, 2016.

**= 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 reported July and August 2016 Applications data (subtotals exclude AZ).

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

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

Table 1B: Medicaid and CHIP: August 2016 Monthly Applications and Eligibility Determinations Updated October 2016

Data Quality Limitations:

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	(I), (III), (IV), (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), (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.
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 8/1 - 8/31.
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 agencies determinations are not included in this data.
New York	(II), (III), (IV), (VI), (VII), (VIII)	Includes renewals.
Ohio	(I), (III), (IV)	Includes renewals. May include some applications only for other benefits, not for Medicaid and CHIP.
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.
Pennsylvania	(I), (II), (III), (IV)	Count is a mix of applications and individual applicants.
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 1B: Medicaid and CHIP: August 2016 Monthly Applications and Eligibility Determinations Updated October 2016

		Applications					Determinations		
States Not Expanding Medicaid	Marketplace Type	New Applications Submitted to Medicaid and CHIP Agencies, August 2016 (Updated) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, August 2016 (Updated) (II)	Total Applications for Financial Assistance Submitted at State Level, August 2016 (Updated) (III)	Total Applications for Financial Assistance Submitted at State Level, July 2016 (Updated) (IV)	% Change July to August 2016 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, August 2016 (Updated) (VI)	Individuals Determined Eligible for CHIP at Application, August 2016 (Updated) (VII)	Total New Determinations, August 2016 (Updated) (VIII)
Alabama	FFM	17,921	N/A	17,921	14,866	20.55%	26,749	3,411	30,160
Florida	FFM	331,767	N/A	331,767	288,999	14.80%	150,406	18,867	169,273
Georgia	FFM	85,120	N/A	85,120	71,882	18.42%	44,045	2,293	46,338
Idaho	SBM	8,506	-	8,506	7,073	20.26%	6,124	343	6,467
Kansas	Plan Management	-	N/A	-	-	-	-	-	-
Maine	Plan Management	1,856	N/A	1,856	1,431	29.70%	11,555	379	11,934
Mississippi	FFM/SBM-SHOP	19,488	N/A	19,488	16,403	18.81%	12,455	499	12,954
Missouri	FFM	22,733	N/A	22,733	18,772	21.10%	10,360	-	10,360
Nebraska	Plan Management	7,761	N/A	7,761	6,251	24.16%	7,510	855	8,365
North Carolina	FFM	24,611	N/A	24,611	22,127	11.23%	41,294	4,854	46,148
Oklahoma	FFM	45,108	N/A	45,108	38,353	17.61%	46,599	7,332	53,931
South Carolina	FFM	26,003	N/A	26,003	22,034	18.01%	6,150	148	6,298
South Dakota	Plan Management	2,899	N/A	2,899	2,411	20.24%	1,834	-	1,834
Tennessee	FFM	564	N/A	564	462	22.08%	-	422	422
Texas	FFM	136,482	N/A	136,482	112,227	21.61%	117,910	18,433	136,343
Utah	FFM/SBM-SHOP	25,610	N/A	25,610	20,691	23.77%	49,596	-	49,596
Virginia	Plan Management	27,333	N/A	27,333	23,759	15.04%	18,329	690	19,019
Wisconsin	FFM	26,964	N/A	26,964	22,638	19.11%	18,438	1,732	20,170
Wyoming	FFM	1,695	N/A	1,695	1,252	35.38%	813	114	927
Subtotal for All States Not Expanding Medicaid		812,421	-	812,421	691,631	17.46%	570,167	60,372	630,539
Subtotal for States Not Expanding Medicaid that Reported in July and August 2016				812,421	691,631	Difference July to August 2016 120,790			
Total Across All States		1,822,679	820,330	2,643,009	2,391,593	10.51%	1,438,459	137,018	1,575,477
Total for States that Reported in July and August 2016				2,643,009	2,391,593	Difference July to August 2016 251,416			

Table 1B: Medicaid and CHIP: August 2016 Monthly Applications and Eligibility Determinations Updated October 2016

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

Column V is calculated for only those states that reported July and August 2016 Applications data (subtotals exclude KS; totals exclude AZ and KS).

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.

Data Quality Limitations:

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.
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 household.
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.