

Medicaid, CHIP, and Marketplace Enrollments Enrollment Trends Update

December 18, 2023

Summary: Takeaways from the Data as of September 2023

Enrollment: Total enrollment in Medicaid and the Children's Health Insurance Program (CHIP) is 88.5 million and Marketplace enrollment is 16.9 million as of September 2023*

- Since March 2023, Medicaid and CHIP enrollment has declined by about 5.4 million people. Enrollment is over 17 million higher than February 2020 when nearly 71 million people were enrolled in Medicaid and CHIP

Medicaid and CHIP renewal outcomes: Of the approximately 34.5 million renewals due as of September, 17.4 million people have had coverage renewed in Medicaid and CHIP; 9.2 million people have been disenrolled from Medicaid/CHIP**

Coverage transitions: While full transition data is still to come, early indicators suggest many individuals are transitioning from Medicaid and CHIP to other forms of coverage

- From March 2023 to September 2023, Marketplace enrollment increased by 1.6 million people (1.5 million more individuals than during the same period in 2022)
- In HealthCare.gov states, nearly 90% of Marketplace enrollees during this timeframe have household incomes below 250% of the federal poverty level

Trends: There is variation across states with respect to Medicaid/CHIP renewal outcomes

- Outcomes vary across states for total retention at renewal, auto-renewals (i.e., *ex parte* renewals), and disenrollments
- State adoption of (e)(14) strategies and Medicaid expansion and the coverage gap have a significant impact; on average non-expansion states reported lower rates of successful renewals

Notes: *For reference, enrollment in February 2020, prior to the start of the continuous enrollment condition, was 70.9 enrolled in Medicaid/CHIP and 10.5 enrolled in Marketplace coverage. **Generally, disenrollments reported for a given month are reflected in total enrollment numbers for the following month (e.g., disenrollments reported in August are reflected in September enrollment data, and September disenrollments will be reflected in October enrollment data). Most disenrollments are effectuated at the start of the subsequent month.

Introduction and Data Notes (1/2)

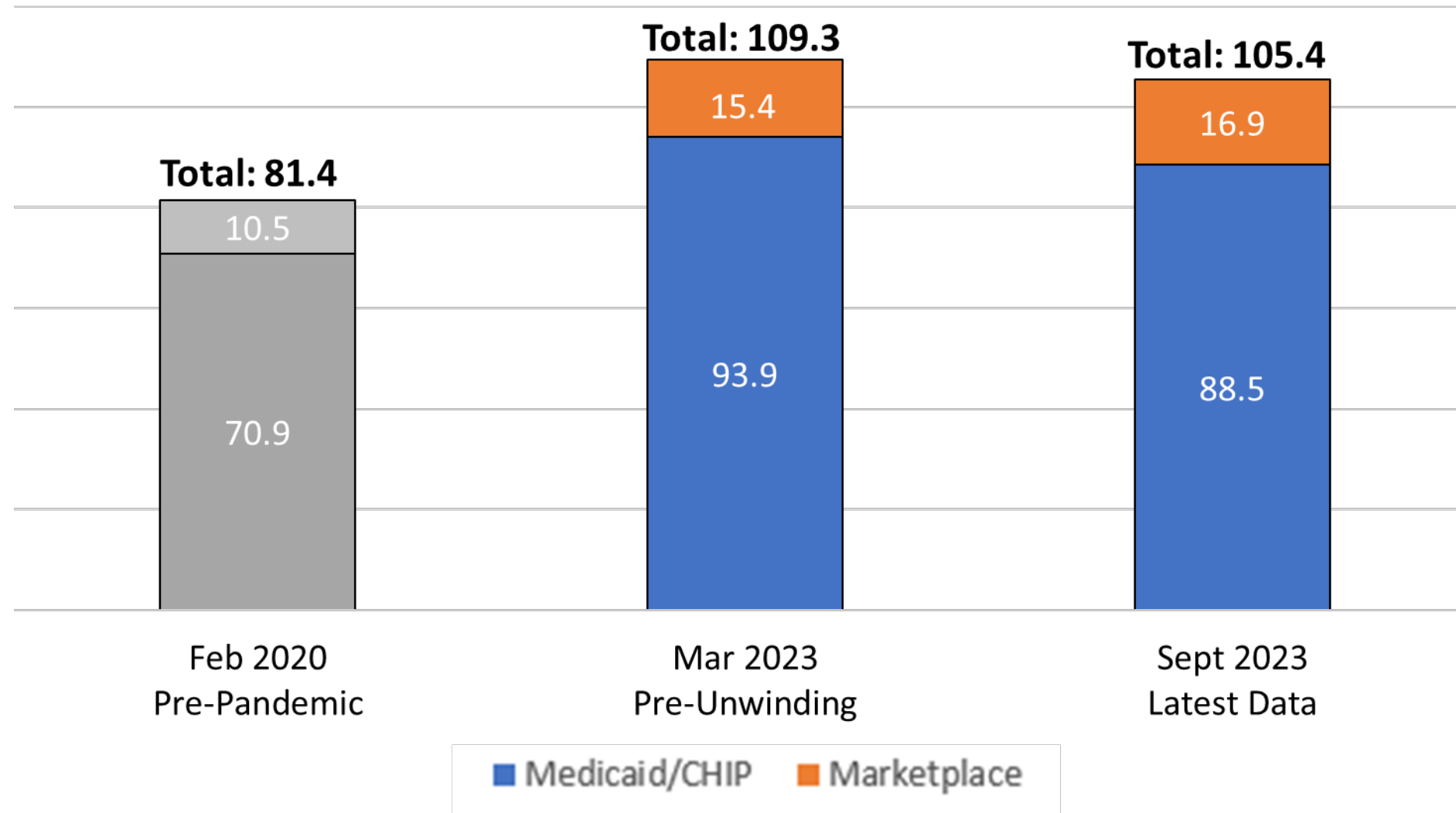
- Following the end of the Families First Coronavirus Response Act Medicaid continuous enrollment condition, to date, all states have begun to restore routine renewal processes for individuals' eligibility for Medicaid and the Children's Health Insurance Program (CHIP).
- During this process, the Centers for Medicare & Medicaid Services (CMS) is publishing monthly data releases that summarize state-reported data for metrics that provide insight into Medicaid and CHIP renewal operations. Please view the latest data at [Medicaid.gov/unwinding-data](https://www.medicare.gov/unwinding-data).
- This summary provides a preliminary overview of Medicaid and CHIP renewal outcomes based on seven months of data collected from March 2023 through September 2023. As part of this overview, the data in this summary also includes:
 - Preliminary state-reported data for total enrollment in Medicaid and CHIP as of September 2023. September 2023 data included in this summary are preliminary and have not yet been published as a part of CMS' regular monthly Medicaid & CHIP Applications, Eligibility, and Enrollment Data reports. As a result, data may vary based on the date that the enrollment data is pulled. CMS' regular monthly data reports are here: <https://www.medicare.gov/medicaid/national-medicare-chip-program-information/medicaid-chip-enrollment-data/monthly-medicare-chip-application-eligibility-determination-and-enrollment-reports-data/index.html>
 - Preliminary total Marketplace enrollment from March 2023 through September 2023, as compared with March 2022 through September 2022.

Introduction and Data Notes (2/2)

- Multiple factors, including state-adopted mitigation strategies, states' timing for resuming renewals, pauses in procedural disenrollments, states' distribution and prioritization of renewals, and states' eligibility and enrollment policies and procedures may influence renewal outcomes and enrollment in a given state.
- For more information on this data set as well as methodologies and limitations, see the Data Sources and Metrics Definitions Overview under the "[Understanding the Data](#)" tab at [Medicaid.gov/unwinding-data](https://www.Medicaid.gov/unwinding-data).
- State-specific notes for the data can be found in the [Medicaid and CHIP CAA Reporting Metrics](#) at [Medicaid.gov/unwinding-data](https://www.Medicaid.gov/unwinding-data).

Enrollment in Medicaid/CHIP and Marketplace Coverage

Changes in Enrollment in Medicaid/CHIP and the Marketplaces (Millions)



- As of September 2023, Medicaid/CHIP enrollment is about 88.5 million and Marketplace enrollment is about 16.9 million.
- Enrollment across these programs (Medicaid/CHIP and the Marketplaces) has declined by nearly 4 million (~-4%) from March 2023 to September 2023. This reflects a decrease by about 5.4 million for Medicaid/CHIP and increase by over 1.5 million for the Marketplaces.

Medicaid/CHIP Renewal Outcomes from March 2023 to September 2023

Based on preliminary data for September 2023 (State-submitted data for 50 states plus DC, reported as of 11/15/23)

	September 2023 Renewals (#)	September 2023 Renewals (%)	Renewals to Date (% and #)
Total Renewals Initiated	7.6M	-	48.3M (51.5% of total March 2023 enrollment)
Total Renewals Due	7.3M	-	34.5M (100% of total due)
Individuals Renewed in Medicaid or CHIP Coverage	3.9M	54%	17.4M (50% of total due)
Renewed on an auto-renewal (<i>ex parte</i>) basis	2.4M	34%	10.4M (30% of total due; 60% of total renewed)
Determined eligible based on renewal form	1.5M	20%	7.0M (20% of total due; 40% of total renewed)
Individuals Disenrolled from Medicaid or CHIP Coverage	1.7M	23%	9.2M (27% of total due)
Determined ineligible for Medicaid or CHIP based on the return of a renewal form	0.6M	8% (35% of total disenrolled)	2.6M (7% of total due; 28% of total disenrolled)
Disenrolled for procedural reasons (Individuals disenrolled can still reapply for Medicaid/CHIP or transition to other forms of coverage)*	1.1M	15% (65% of total disenrolled)	6.6M (19% of total due; 72% of total disenrolled)
Pending/Incomplete Renewals at the End of the Month	1.7M	23%	8.0M (23% of total due)

Notes:

*Individuals disenrolled from coverage for procedural reasons can still reapply for Medicaid/CHIP or transition to other forms of coverage, such as Marketplace coverage or employer coverage.

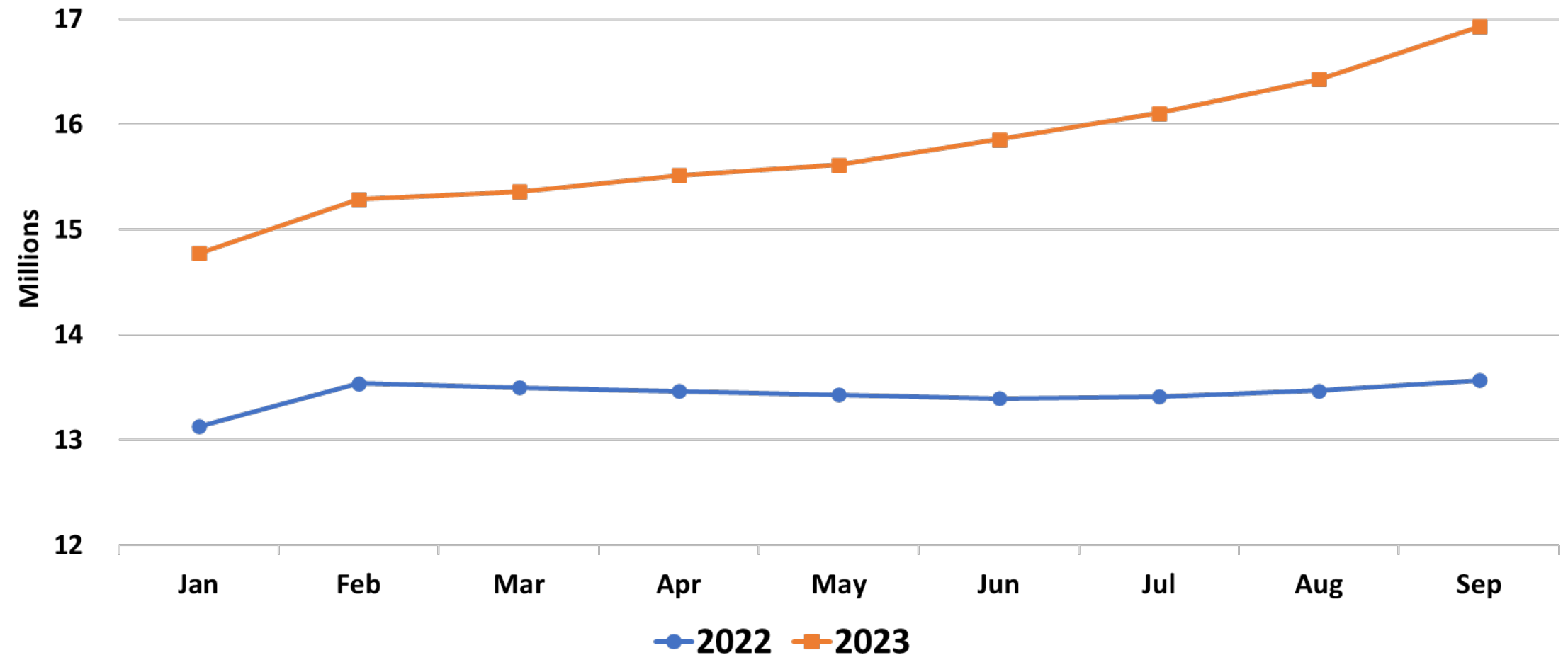
These data represent the outcome of renewals due in September 2023 (effective October 1, 2023) in all 50 states plus DC. Total renewals initiated to-date represents data from February-September 2023. Total renewals initiated as a percent of total enrollment is based on March 2023 enrollment. Except for renewals initiated, data for MA from May-July 2023 are excluded due to reporting issues. Numbers and percentages may not sum due to rounding.

Pending renewals to date reflect the sum of total pending renewals at the end of each reporting month and not the cumulative total of pending renewals as of the end of September. States may complete renewals pending in the month after the reporting month. Some states may have reinstated coverage for individuals who were terminated from Medicaid/CHIP in subsequent months. Those reinstatements are not reflected in the data.

Coverage Transitions: Marketplace Enrollment March 2023 to September 2023

- Overall Marketplace enrollment has increased by 1.6 million people from March 2023 to September 2023
- By comparison, enrollment from March-September 2022 was relatively flat
- In HealthCare.gov states, nearly 90% of Marketplace enrollees during this timeframe have household incomes below 250% of the federal poverty level

Monthly Effectuated Marketplace Enrollment (Healthcare.gov and State-based Marketplaces) by Month in 2023 Compared to 2022



Note: Marketplace plans must be effectuated (premiums paid), so changes in enrollment counts are expected to correct slightly downward for recent months of data in 2023

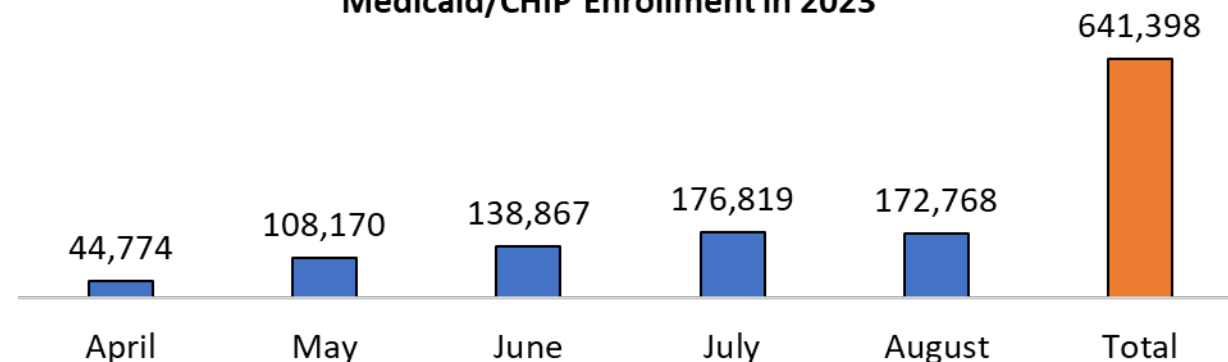
Coverage Transitions: Public Reporting on Marketplaces

A summary of the latest HealthCare.gov and State-Based Marketplace public reporting for Medicaid renewals is below (also available at data.medicaid.gov):

HealthCare.gov Reporting – Key Takeaways

- HealthCare.gov – the platform used by the Marketplaces for 33 states as of August 2023 – reports **641k new enrollees** with previous Medicaid/CHIP enrollment from April 2023 through August 2023
- Public reporting on coverage transitions to HealthCare.gov is **likely an undercount of transitions** due to the nature of matching administrative data sets across programs
- We are **seeing a higher rate of individuals coming to HealthCare.gov** after losing Medicaid/CHIP than before the COVID-19 public health emergency

HealthCare.gov Enrollment for Consumers with Previous Medicaid/CHIP Enrollment in 2023



Notes:

*New York and Minnesota operate a Basic Health Program which provides coverage to consumers with household incomes up to 200% FPL who are not eligible for Medicaid/CHIP and otherwise would be eligible for a QHP.

Given the use of exact record matching across administrative data sets, estimates are conservative.

State-Based Marketplace (SBM) Reporting – Key Takeaways

- SBMs report receiving account transfers/applications for approximately **1.5 million individuals** who were disenrolled from Medicaid or CHIP due to ineligibility from April 2023 through August 2023
- Approximately **181k consumers selected a Marketplace plan** and **120k enrolled in Basic Health Program*** coverage during the same period
 - On average, 12% of consumers on applications in integrated SBMs or on account transfers received by SBMs selected a Marketplace plan
- Some **SBMs are reporting higher percentages of consumers transitioning from Medicaid to Marketplace** (such as 22% in Massachusetts and 33% in Maryland) due to strategies such as auto plan assignments or auto eligibility determinations

Total Medicaid and CHIP Enrollment, by State, September 2023

State	Total Enrollment
AK	247,112
AL	1,140,780
AR	805,707
AZ	2,016,756
CA	14,103,833
CO	1,552,346
CT	961,063
DC	285,360
DE	297,267
FL	4,273,705
GA	2,309,061
HI	454,777
IA	738,630
ID	310,784
IL	3,781,953
IN	1,904,849
KS	493,565

State	Total Enrollment
KY	1,549,365
LA	1,820,190
MA	1,951,721
MD	1,667,298
ME	374,454
MI	2,982,684
MN	1,350,775
MO	1,442,969
MS	728,144
MT	262,898
NC	2,248,598
ND	118,263
NE	381,495
NH	184,454
NJ	2,202,361
NM	775,590
NV	886,413

State	Total Enrollment
NY	7,399,384
OH	3,183,112
OK	1,138,968
OR	1,456,942
PA	3,499,762
RI	368,219
SC	1,248,912
SD	116,220
TN	1,729,475
TX	5,133,532
UT	402,120
VA	2,000,709
VT	178,400
WA	1,959,556
WI	1,385,315
WV	569,293
WY	75,070

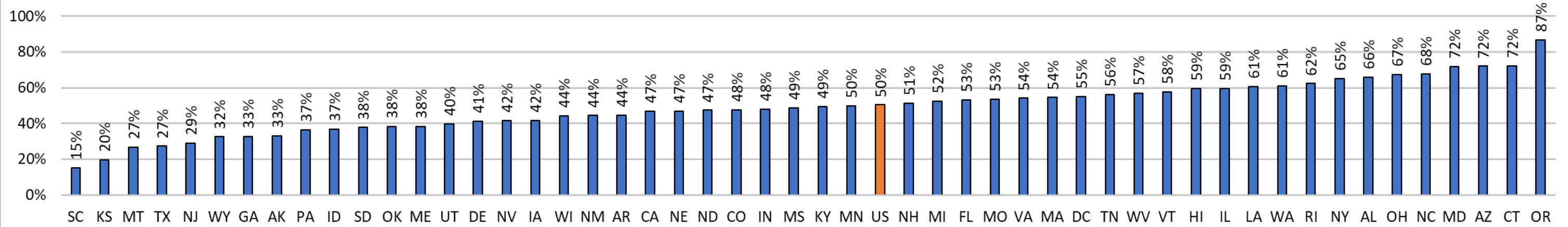
Total Enrollment: 88.5 Million

Source: Medicaid and CHIP Eligibility and Enrollment Performance Indicator Data, preliminary data submitted November 2023, with data through September 2023.

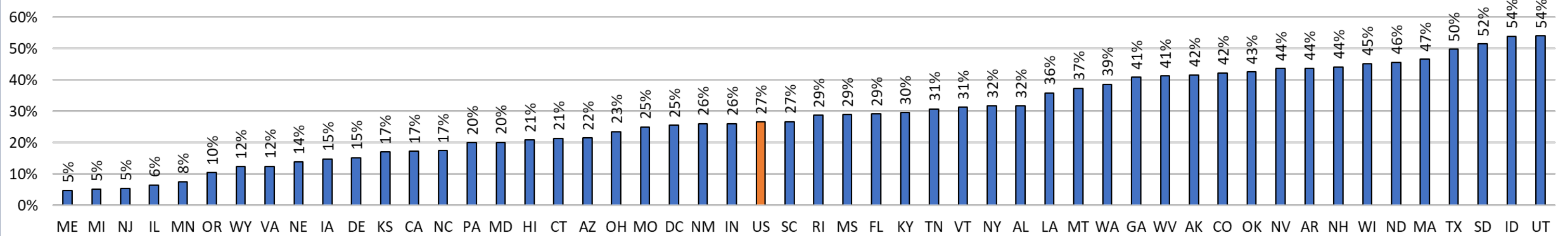
Notes: This analysis includes preliminary Performance Indicator data from 50 states and the District of Columbia. Data may vary based on the date that the enrollment data is pulled.

States Report Varying Outcomes for Medicaid/CHIP Renewals

Percentage of Renewals that Resulted in Renewals of Coverage in September 2023 (%)



Percentage of Renewals that Resulted in Disenrollment in September 2023 (%)



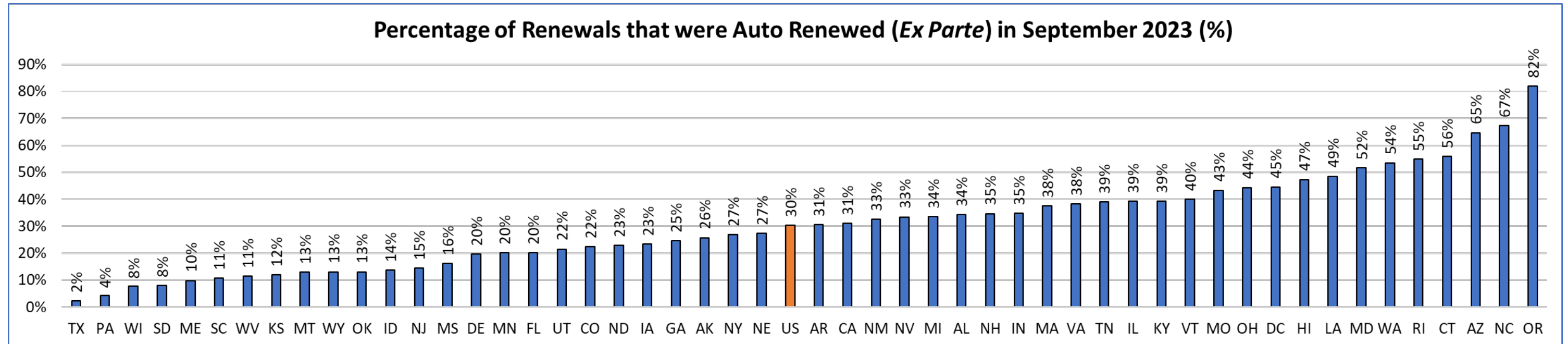
Notes:

These data represent cumulative renewal outcomes as of September 2023. Numbers and percentages may not sum due to rounding. Multiple additional factors may contribute to states' renewal outcomes and auto-renewal (*ex parte*) rates. The following states had concurrence to delay some or all procedural disenrollments for renewals due in September: CO, DE, DC, IL, KS, KY, ME, MI, NM, SC. Several other states may have also delayed procedural terminations.

Several states have CMS-approved mitigation plans that involve requiring the state to conduct a back-end *ex parte* renewal or implement other strategies to account for state system issues; in these states, the total number of individuals whose coverage was auto-renewed may not be reflected in the reported data.

States Report Varying Auto Renewal Rates

- Auto-renewals make it easier for people to renew their Medicaid and CHIP coverage, helping to make sure individuals are not disenrolled due to red tape
- Auto-renewal is the strongest tool that states have for keeping eligible people, especially children, enrolled in Medicaid or CHIP coverage
- States that want to prevent coverage losses among eligible children should prioritize improving auto-renewal rates



Notes:

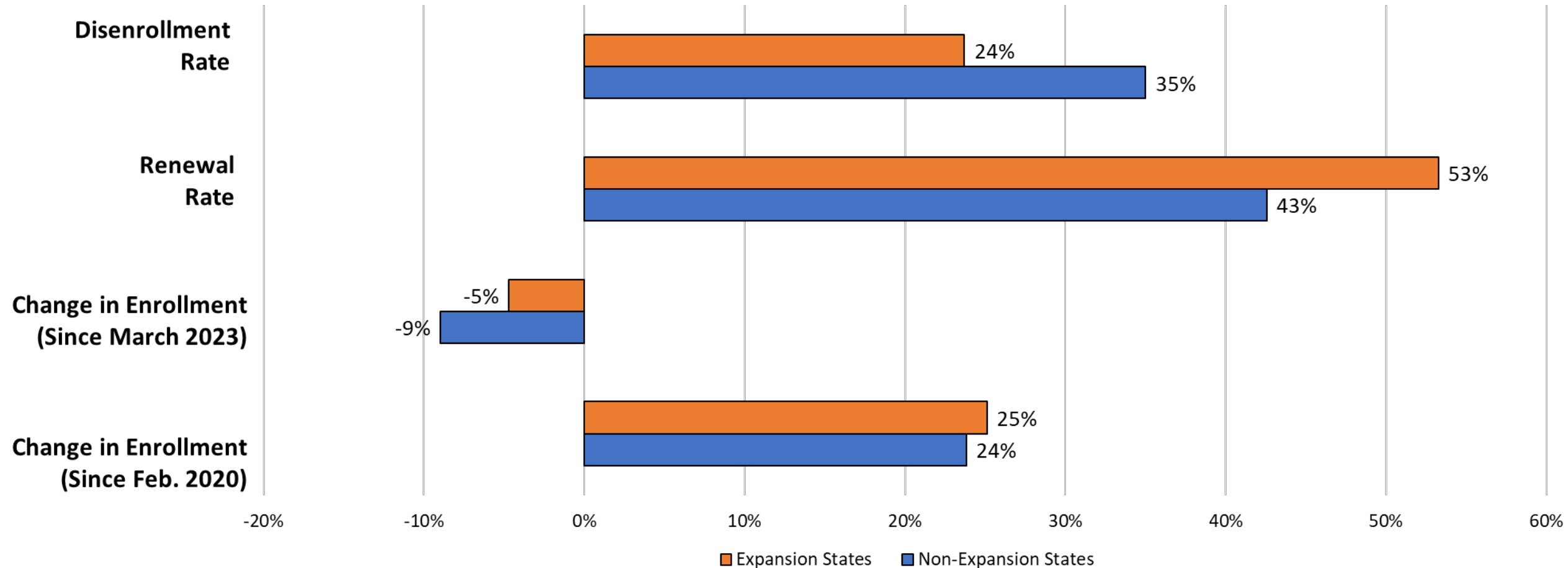
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Several states have CMS-approved mitigation plans that involve requiring the state to conduct a back-end *ex parte* renewal or implement other strategies to account for state system issues; in these states, the total number of individuals who were auto-renewed may not be reflected in the reported data.

Auto-Renewed is equivalent to an *ex parte* renewal

States that Have Expanded to Cover Low-Income Adults in Medicaid Have Higher Rates of Successful Renewals

Renewal Outcomes for States that Have and Have Not Expanded Medicaid, as a Share of Total Renewals Due (as of September 2023)



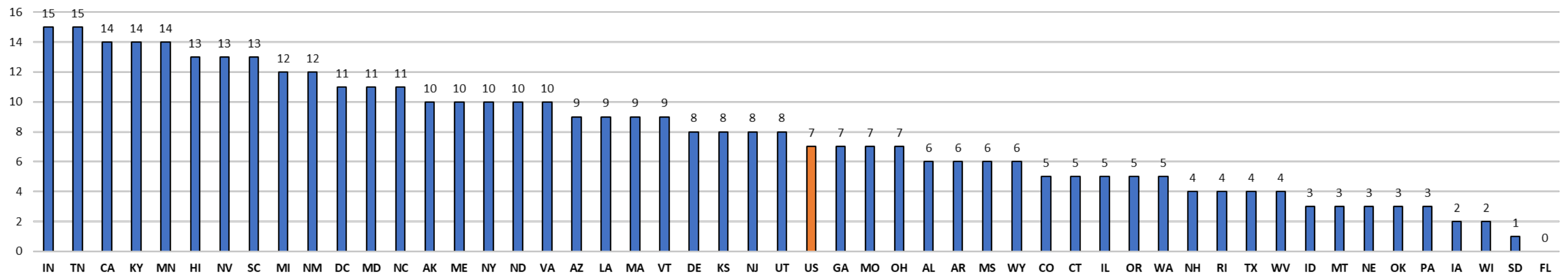
- Total enrollment in March 2023 was 71M for expansion states and 21M for non-expansion states
- Non-expansion states account for 24% (21M) of national caseload and 33% (2.5M) of total disenrollments

- There are ten states that still have chosen to not expand Medicaid: AL, FL, GA, KS, MS, SC, TN, TX, WI, WY.
- In states that have not expanded Medicaid, the only adults who are eligible for Medicaid are adults with disabilities, pregnant adults, postpartum adults, or adults who are parents/caregivers. See the full list of [eligibility levels across states](#).

States Should Adopt As Many Key Strategies As Possible to Protect Coverage

- CMS has put forward dozens of strategies and approved close to 400 flexibilities in states to make renewals easier for people
- These strategies include waivers under section 1902(e)(14)(A) of the Social Security Act (“(e)(14)” waivers). For example:
 - The SNAP (e)(14) strategy, which allows a state to enroll and/or renew individuals in Medicaid based on a person’s enrollment in the Supplemental Nutrition Assistance Program (SNAP)
 - The low- or no-income e(14) strategy, which allows a state to renew Medicaid eligibility for individuals with no or low-income on an auto renewal (*ex parte*) basis
- States can also adopt other strategies; for example, two states have extended the renewal period for children for up to 12 months to give families additional time to renew their children’s coverage
- States vary widely in the number of (e)(14) strategies they have adopted, ranging from 0 to 15 waivers (with an average of about 7 waivers nationally); CMS strongly encourages states to adopt as many waivers as possible to protect individuals’ coverage

(e)(14) Waivers Approved (#)



Closing: Action Steps for States

States have it in their power to strengthen their Medicaid and CHIP policies and processes and take up additional strategies to protect access to health coverage.

Here are the **top 5 actions** states can take to prevent eligible individuals from losing health coverage:

1. **Improve Auto-Renewal Rates**: Increasing the rate of auto-renewals is the #1 action a state can take to decrease procedural disenrollments and guard against people losing Medicaid or CHIP coverage for procedural reasons.
2. **Adopt Additional 1902(e)(14) Strategies**: CMS has approved almost 400 strategies to make it easier to conduct renewals and prevent people, especially children, from losing coverage for procedural reasons. States have adopted on average 7 strategies and should adopt as many strategies as possible to protect health coverage. Indiana and Tennessee have the most at 15 strategies. Florida is the only state in the country that has chosen to adopt zero strategies.*
3. **Partner with Managed Care Plans**: Over 70% of people with Medicaid are enrolled in a managed care plan. Plans play a direct role in helping people eligible for Medicaid use and keep their coverage. That is why it is so critical that states partner with managed care plans, share timely and accurate data, and leverage managed care plan relationships with Medicaid enrollees.
4. **Support Coverage Transitions**: States can help remind people who are no longer eligible for Medicaid coverage of other coverage options that may be available, including CHIP, Marketplace, and employment-based coverage, by including this information in messaging and outreach.
5. **Reduce Call Center Wait Times**: Call centers are a crucial source of support for Medicaid/CHIP enrollees navigating the renewal process. States can help eligible people avoid coverage loss by ensuring wait times for both English and Spanish language speakers are kept to a minimum.

*Learn more about e(14) strategies: <https://www.medicaid.gov/resources-for-states/coronavirus-disease-2019-covid-19/unwinding-and-returning-regular-operations-after-covid-19/covid-19-phe-unwinding-section-1902e14a-waiver-approvals/index.html>