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## **Medicaid & CHIP: December 2015 Monthly Applications, Eligibility Determinations and Enrollment Report**

*February 29, 2016*

### **Background**

This monthly report on state Medicaid and Children's Health Insurance Program (CHIP) data represents state Medicaid and CHIP agencies' eligibility activity for the calendar month of December 2015. This report measures eligibility and enrollment activity for the entire Medicaid and CHIP programs in all states<sup>1</sup>, reflecting activity for all populations receiving comprehensive Medicaid and CHIP benefits in all states, including states that have not yet chosen to adopt the new low-income adult group established by the Affordable Care Act.<sup>2</sup> This data is submitted to CMS by states using a common set of indicators designed to provide information to support program management and policy-making related to application, eligibility, and enrollment processes.<sup>3</sup>

As with previous reports, this month's report focuses on those indicators that relate to the Medicaid and CHIP application and enrollment process:<sup>4</sup>

- The number of applications submitted directly to Medicaid and CHIP agencies, including those received through State-Based Marketplaces (SBMs);
- The number of eligibility determinations made by Medicaid and CHIP agencies on the applications described above, as well as applications to the Federally-Facilitated Marketplace (FFM) in states for which the FFM makes an eligibility assessment (and the state then completes the Medicaid or CHIP determination); and
- The total number of individuals enrolled in the Medicaid and CHIP programs who are receiving comprehensive benefits, including details on the total number of children enrolled in these programs.

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<sup>1</sup> For purposes of this report, the term "states" include the 50 states and the District of Columbia.

<sup>2</sup> As of November 2015, thirty states had implemented the expansion of Medicaid under the Affordable Care Act to cover adults under age 65 with incomes up to 133 percent of the Federal Poverty Level. 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. Many other states previously covered parents only at the minimum required income levels and often did not cover other adults without disabilities who are under age 65 at all.

<sup>3</sup> See Appendix A for the standardized data definitions for the data included in this report. States continue to transition to these standardized definitions. State-specific notes on the differences between state-reported data and the data definitions are included in the tables in this report.

<sup>4</sup> The Affordable Care Act's "no wrong door" policy means that individuals can apply for health insurance coverage through the Marketplace or the Medicaid or CHIP agency (if a separate agency) in their state and receive an eligibility determination for the health insurance program for which they are eligible. 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: January Enrollment Report (January 7, 2016).

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As with each monthly report, given that states are reporting monthly data to CMS soon after the close of the month, the December 2015 data presented in this report should be considered preliminary. We have published updated data for November 2015 applications, eligibility determinations and enrollment on [Medicaid.gov](http://www.Medicaid.gov), which includes a more complete data set than the previously reported preliminary November 2015 data.

#### **Medicaid and CHIP December 2015 Enrollment Data Highlights**

<b>Total Individuals Enrolled in Medicaid and CHIP in December 2015 in All States Reporting December Data (includes all individuals enrolled in the program on the last day of the reporting period).<sup>5</sup></b>	71,777,758 <sup>6</sup>
<b>Additional enrollment since October 2013 when the initial Marketplace open enrollment period began, among the 49 states reporting both December 2015 enrollment data and data from July-September of 2013</b>	14.5 million

- Nearly 72 million individuals were enrolled in Medicaid and CHIP in December 2015.<sup>7</sup> This enrollment count is point-in-time (on the last day of the month) and includes all enrollees in the Medicaid and CHIP programs who are receiving a comprehensive benefit package.

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<sup>5</sup> This figure is not comparable to the figure included in last month's report (nearly 71 million). Arkansas did not report enrollment data for the September, October and November 2015 reports, meaning the enrollment counts in these months' reports are not comparable to the December 2015 enrollment figure and those from prior months which include Arkansas's enrollment data. Arkansas subsequently reported enrollment data for September, October and November 2015. Also, this enrollment data may differ from other published state and national enrollment figures because it only includes individuals with comprehensive benefits. Individuals who are only eligible for limited benefits under the Medicaid and CHIP programs (e.g., emergency Medicaid, family planning-only coverage, limited benefit dual eligible individuals, and Medicaid section 1115 demonstration populations with limited benefits) are excluded from this indicator in all reporting periods. See Appendix A for more information on this methodology. See the notes in Table 1 for state-specific caveats regarding the reported data. The enrollment measure is a total count of enrollment in Medicaid and CHIP, not solely a count of those newly enrolled during the reporting period.

<sup>6</sup> The data contained in this report is preliminary because it is reported soon after the close of the reporting month and contains few, if any, individuals who become eligible in December 2015 after the close of the month due to retroactive eligibility under Medicaid or similar reasons. In Medicaid, individuals are potentially eligible for retroactive coverage for incurred health care costs dating back to 90 days prior to the date of application. Please note, California updated its data in November 2015 to more closely align with CMS's data specifications, which resulted in a downward adjustment to its total enrollment of more than 1 million. The state subsequently revised all prior months' enrollment counts to reflect the updated methodology and to ensure comparability across months.

<sup>7</sup> See footnote 5 and 6.

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- 134,531 additional people were enrolled in December 2015 as compared to November 2015 in the 51 states that reported comparable November and December 2015 data.<sup>8</sup>
- Looking at the additional enrollment since October 2013 when the initial Marketplace open enrollment period began, among the 49 states reporting both December 2015 enrollment data and data from July-September of 2013, nearly 14.5 million additional individuals are enrolled in Medicaid and CHIP as of December 2015, over a 25.7 percent increase over the average monthly enrollment for July through September of 2013.<sup>9</sup> (Connecticut and Maine are not included in this count.)<sup>10</sup>
- Among states that had implemented Medicaid expansion and were covering newly eligible adults in December 2015, Medicaid and CHIP enrollment rose by over 34.4 percent compared to the July-September 2013 baseline period, while states that have not, to date, expanded Medicaid reported an increase of nearly 10.3 percent over the same period.<sup>11</sup>
- These enrollment counts are in addition to the enrollment increases from the nearly 950,000 individuals who gained coverage as a result of the Affordable Care Act before open enrollment began.<sup>12</sup> Seven states implemented an “early option” to expand Medicaid coverage to adults with incomes up to 133 percent of the FPL between April 1, 2010 and January 1, 2014, using

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<sup>8</sup> See the notes in Table 1 for state-specific caveats regarding the reported data.

<sup>9</sup> The net change in enrollment is based on data from the 49 states reporting both December 2015 enrollment data and data from July-September 2013 (the baseline period before the initial Marketplace open enrollment period) that contains comparable enrollment groups. These 49 states report total enrollment in December of nearly 70.8 million individuals, and July-September 2013 average enrollment of approximately 56.3 million. For December 2015, we are reporting growth of 14,478,342 compared to July-September 2013. This figure is not comparable to the 14,090,872 in net enrollment growth that was included in the *Medicaid and CHIP: November 2015 Applications, Eligibility Determinations, and Enrollment Report* because the November 2015 report did not include enrollment data for Arkansas. The state has subsequently submitted enrollment data for November 2015, which is included in this report. See the notes in table 1 for state-specific caveats regarding the reported data. Because the July-September 2013 data may contain individuals with retroactive Medicaid coverage, and the December 2015 data included in this report is preliminary (see footnote 6), the difference reported here between December 2015 and July-September 2013 period is likely understated.

<sup>10</sup> Connecticut and Maine did not submit enrollment data for the July-September 2013 baseline period.

<sup>11</sup> Percentage calculations are based only on states reporting in both December 2015 and the July through September 2013 baseline period. See footnote 9 for additional information. Among expansion states, the enrollment increases vary based on the size of the coverage expansions that occurred. States that previously offered comprehensive coverage to many adults with incomes under 133 percent of the FPL will likely see smaller increases than those who previously offered only coverage for very low-income parents. Additionally, in most states that provided Medicaid coverage to adults with incomes above 133 percent of the FPL prior to 2014, those individuals are no longer eligible for or enrolled in Medicaid and instead may be eligible to purchase qualified health plan coverage through the Marketplace, and may be eligible for the premium tax credit and cost-sharing reduction portion of the advance payments; this change will reduce the overall Medicaid enrollment in those states. Enrollment changes may also be impacted by other state specific policy and operational issues related to applications and renewals.

<sup>12</sup> Enrollment data for California, Colorado, the District of Columbia, Minnesota, and New Jersey was reported to CMS by the state and is from the end of 2013. Data for Connecticut and Washington is from 2012 (Source: Sommers, B. D., Arntson, E., Kenney, G. M., et al., “Lesson from Early Medicaid Expansions under Health Reform: Interviews with Medicaid Officials”, *Medicare & Medicaid Research Review*, 2013: Volume 3, number 4 ([http://www.cms.gov/mmrr/Downloads/MMRR2013\\_003\\_04\\_a02.pdf](http://www.cms.gov/mmrr/Downloads/MMRR2013_003_04_a02.pdf)).

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new state plan authority provided by the Affordable Care Act or a demonstration under section 1115 of the Social Security Act building upon that authority.<sup>13</sup>

As with previous reports, multiple factors contribute to the change in enrollment between December 2015 and the July-September 2013 baseline period, including but not limited to changes attributable to the Affordable Care Act. The enrollment numbers included in this report understate total Medicaid and CHIP enrollment because the data is preliminary. The preliminary data, which is submitted approximately a week after the close of the reporting period, generally does not include Medicaid and CHIP eligible individuals who applied in December and whose application will be fully processed after December 31<sup>st</sup>; these individuals will be enrolled effective back to at least the date of application or the first of the month and we note that those enrollments are not reflected in this preliminary data. Similarly, the preliminary data does not likely include individuals who had medical expenses in December 2015, applied for Medicaid in a later month, and qualify for retroactive Medicaid coverage in December 2015.<sup>14</sup> Updated enrollment data for past months, which is updated one month after the close of the reporting period, is available on the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on [Medicaid.gov](http://Medicaid.gov).<sup>15</sup>

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<sup>13</sup> Connecticut, the District of Columbia, Minnesota utilized state plan authority, while California, Colorado, New Jersey, and Washington provided the coverage through Medicaid demonstration authority under section 1115 of the Social Security Act. For more information about this “early option,” please see [Medicaid and CHIP: March 2014 Monthly Applications, Eligibility Determinations, and Enrollment Report \(May 1, 2014\)](#).

<sup>14</sup> See footnote 6 for additional information on retroactive eligibility.

<sup>15</sup> The updated data available on Medicaid.gov is not directly comparable to the preliminary data included in this report because it contains retroactive enrollment and individuals who applied during the reporting period but were determined eligible after the close of the reporting period.

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#### Child Enrollment

<b>Total Medicaid child and CHIP enrollment in the 46 states reporting in December 2015<sup>16</sup></b>	29,582,991 <sup>17</sup>
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We are also reporting separately on the total number of individuals enrolled in CHIP and children enrolled in Medicaid for those states that are reporting the relevant data for each month in the six-month period between June and December 2015.<sup>18</sup> This data appears in Table 2.<sup>19</sup>

- In the 46 states that reported relevant data for the month of December, approximately 29.6 million individuals are enrolled in CHIP or are children enrolled in the Medicaid program.
- In the 46 states that reported both December 2015 total Medicaid child and CHIP enrollment and total Medicaid and CHIP enrollment data, children enrolled in the Medicaid program and individuals enrolled in CHIP make up nearly 53 percent of total Medicaid and CHIP program enrollment.

It is important to note that all states had already expanded coverage for children in Medicaid and/or CHIP prior to implementation of the Affordable Care Act, although that trend has continued since then.<sup>20</sup>

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<sup>16</sup> This figure includes children enrolled in the Medicaid program and the total enrollment for separate CHIP programs, which is comprised mostly of children. However, several states also cover pregnant women through CHIP. As a result, some adults are included in this figure. This figure was calculated for any state that reported data on Medicaid child enrollment through the performance indicator process, subject to CMS quality review of the data. States use the definition of "child" as included in the state's Medicaid or CHIP state plan in reporting performance indicator data to CMS, which varies from state to state. Individuals who are only eligible for limited benefits under the Medicaid and CHIP programs (e.g., emergency Medicaid, family planning-only coverage, limited benefit dual eligible individuals, and Medicaid 1115 demonstration populations with limited benefits) are excluded from this indicator in all reporting periods.

<sup>17</sup> See the notes in table 2 for state-specific caveats. This figure is not comparable to the Medicaid child and CHIP enrollment count included in last month's report (November 2015) because only 45 states submitted child enrollment data in November 2015, compared to 46 states in December. Arkansas was not able to report child enrollment data for the September, October and November 2015 reports; however, the state has subsequently reported child enrollment data for these months, which is included in this report.

<sup>18</sup> In table 2, the reported December 2015 child enrollment figure appears to be lower than the prior month's total enrollment figure because the prior month's total child enrollment figure includes data that is reported more than a month after the close of the reporting period, and thus includes some children enrolled retroactively. The preliminary December 2015 data included in this report is collected in the month after the reporting period and includes very few (if any) children enrolled retroactively, and thus is lower. An updated December figure that includes more retroactively enrolled individuals will be included in the next report in this series.

<sup>19</sup> Children are included in the total number of individuals enrolled in Medicaid and CHIP in December 2015, as reported on page 2 and in Table 1. Total enrollment data for January 2014 through November 2015 is available on Medicaid.gov.

<sup>20</sup> Four million more children were covered by Medicaid or CHIP in 2012, compared with 2008. Kenneth Finegold and Sophia Koontz, *ASPE Issue Brief: Children's Health Coverage on the 5<sup>th</sup> Anniversary of CHIPRA*, February 4, 2014, [http://aspe.hhs.gov/health/reports/2014/CHIPRA\\_5thAnniversary/ib\\_CHIPRA5thanniversary.pdf](http://aspe.hhs.gov/health/reports/2014/CHIPRA_5thAnniversary/ib_CHIPRA5thanniversary.pdf)

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#### Medicaid and CHIP December 2015 Application and Eligibility Data Highlights

	<b>December 2015 Monthly in All States Reporting</b>
<b><i>Applications</i></b>	
<b>Applications for Financial Assistance Initially Received by State Medicaid and CHIP Agencies</b> (note that more than one individual may be included on an application and some states have included renewals and account transfers from the FFM)	1,712,158 <sup>21</sup>
<b>Applications for Financial Assistance Initially Received by State-Based Marketplaces</b> (note that more than one individual may be included on an application)	1,275,888 <sup>22</sup>
<b><i>Eligibility Determinations</i></b>	
<b>Individuals Determined Eligible for Medicaid and CHIP by State Agencies at Application</b> (includes those newly eligible under the Affordable Care Act and those eligible under prior law)	1,978,035 <sup>23</sup>

During the month of December 2015, nearly 3 million applications for coverage and financial assistance (including Medicaid and CHIP coverage, tax credits and subsidies) were submitted at the state level (including over 1.7 million received directly by state Medicaid and CHIP agencies and approximately 1.3 million received by SBMs).<sup>24</sup> Table 3 includes a comparison of the total applications for financial assistance to state agencies (including applications for Medicaid, CHIP, and financial assistance in the Marketplace in SBM states) in December 2015 as compared to the prior month (November 2015). Note that these application numbers do not include applications received at the FFM and subsequently transferred to state Medicaid or CHIP agencies (see State-by-State Table notes for exceptions), including applications received by the FFM during the Marketplace open enrollment period that began on November 15th.<sup>25</sup>

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<sup>21</sup> See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability, some states included some renewals, applications to SBMs, or transfers from the FFM in the data.

<sup>22</sup> See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability, some states reported renewals in the data and included applications received by their SBMs in their Medicaid and CHIP agency application data instead of reporting these applications separately. Note that California did not report SBM application data this month.

<sup>23</sup> See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability, some states reported some individuals determined eligible at renewal in the data. Tennessee only provided determination data on their CHIP program.

<sup>24</sup> The following states have included renewals in their December 2015 application data: Alaska, Arkansas, the District of Columbia, New York, Ohio, Pennsylvania, and Virginia. South Dakota and Utah included transfers from the FFM in its December 2015 application data.

<sup>25</sup> See footnote 21.

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States reported making nearly 2 million eligibility determinations for Medicaid and CHIP in December 2015 for individuals applying for coverage. As described above and in prior reports, this figure includes all of state Medicaid and CHIP agencies' determinations for individuals eligible under prior law, as well as through coverage expansions under the Affordable Care Act; note that, due to limitations on the data some states are able to report, the number of determinations includes renewals in those states.<sup>26</sup> Additionally, the determination number does not represent unique individuals, as an individual may have more than one eligibility determination. It is important to keep in mind that differences in volume of administrative transfers and other types of one-time enrollment activities can affect month-to-month comparisons of eligibility data.<sup>27</sup>

See the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on [Medicaid.gov](http://Medicaid.gov) for preliminary and updated data on applications and determinations for October 2013 through November 2015.

#### **Data Limitations**

CMS established a common set of definitions for consistency in reporting the Medicaid and CHIP performance indicators; these definitions appear in Appendix A. 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 notes in the State-by-State tables.

#### **State-by-State Tables**

Below are 3 tables with state-specific data. The first table contains data on the total number of people enrolled in state Medicaid and CHIP programs in December 2015. The second table contains data on children enrolled in Medicaid and CHIP. The third table contains data on Medicaid and CHIP applications and eligibility determinations for the month of December 2015. The description of each data element included in the table is available in Appendix A. Unless otherwise noted, the reporting period for all elements is December 1 – 31, 2015.

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<sup>26</sup> The states that have included renewals in their December 2015 determination data are: District of Columbia, Iowa, Michigan, Nevada, New Jersey, Ohio, Pennsylvania, Vermont and Virginia. Some of these renewals are conducted without the individual submitting a new application, using information already in the state's system that the individual is asked to verify.

<sup>27</sup> A number of states are employing a new tool for facilitating Medicaid enrollment to conduct an "administrative transfer" to Medicaid using income information from the Supplemental Nutritional Assistance Program (SNAP) or the CHIP program (for the parents of CHIP enrollees). The following states have implemented administrative transfers since this authority was made available: Arkansas, California, Illinois, New Jersey, Oregon, and West Virginia. No states reported conducting administrative transfers in November 2015. As of the end of April 2015, 726,597 individuals have been determined eligible for Medicaid or CHIP as a result of this transitional strategy in the six states that have implemented it and reported appropriate data. Michigan received approval to conduct administrative transfers but it has not implemented this targeted enrollment strategy.

Table 1: Medicaid and CHIP: November and December 2015 Preliminary Monthly Enrollment

		Enrollment					
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, November 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, December 2015 (Preliminary) (II)	% Change November to December 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to December 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to December 2015 (Columns (IV) and (II)) (VI)
Alaska	FFM	126,684	131,334	3.67%	122,334	9,000	7.36%
Arizona	FFM	1,683,439	1,681,587	-0.11%	1,201,770	479,817	39.93%
Arkansas	Partnership	848,509	839,277	-1.09%	556,851	282,426	50.72%
California	SBM	11,676,767	11,670,308	-0.06%	7,637,273	4,033,035	52.81%
Colorado	SBM	1,297,304	1,315,144	1.38%	783,420	531,724	67.87%
Connecticut	SBM	735,208	746,047	1.47%	-	-	-
Delaware	Partnership	240,708	241,704	0.41%	223,324	18,380	8.23%
District of Columbia	SBM	261,237	263,296	0.79%	235,786	27,510	11.67%
Hawaii	SBM **	334,820	338,656	1.15%	288,357	50,299	17.44%
Illinois	Partnership	3,102,058	3,083,179	-0.61%	2,626,943	456,236	17.37%
Indiana	FFM	1,425,511	1,427,492	0.14%	1,120,674	306,818	27.38%
Iowa	Partnership	609,589	608,837	-0.12%	493,515	115,322	23.37%
Kentucky	SBM	1,173,882	1,179,314	0.46%	606,805	572,509	94.35%
Maryland	SBM	1,144,286	1,139,441	-0.42%	856,297	283,144	33.07%
Massachusetts	SBM	1,631,904	1,668,206	2.22%	1,296,359	371,847	28.68%
Michigan	Partnership	2,288,248	2,281,977	-0.27%	1,912,009	369,968	19.35%
Minnesota	SBM	1,034,321	1,047,832	1.31%	873,040	174,792	20.02%
Montana <sup>A</sup>	Plan Management	181,074	182,132	0.58%	148,974	33,158	22.26%
Nevada	SBM **	590,363	596,516	1.04%	332,560	263,956	79.37%
New Hampshire	Partnership	182,902	185,958	1.67%	127,082	58,876	46.33%
New Jersey	FFM	1,714,434	1,710,928	-0.20%	1,283,851	427,077	33.27%
New Mexico	SBM **	732,196	738,231	0.82%	457,678	280,553	61.30%
New York	SBM	6,591,498	6,598,700	0.11%	5,678,417	920,283	16.21%
North Dakota	FFM	88,955	89,240	0.32%	69,980	19,260	27.52%
Ohio	Plan Management	2,943,443	2,932,001	-0.39%	2,341,481	590,520	25.22%
Oregon	SBM **	1,022,434	1,033,518	1.08%	626,356	407,162	65.00%
Pennsylvania	FFM	2,721,509	2,744,031	0.83%	2,386,046	357,985	15.00%
Rhode Island	SBM	275,996	279,321	1.20%	190,833	88,488	46.37%
Vermont	SBM	189,577	190,398	0.43%	161,081	29,317	18.20%
Washington	SBM	1,752,591	1,773,000	1.16%	1,117,576	655,424	58.65%
West Virginia	Partnership	546,848	548,380	0.28%	354,544	193,836	54.67%
<b>Subtotal for All States Expanding Medicaid</b>		<b>49,148,295</b>	<b>49,265,985</b>	<b>0.24%</b>	<b>36,111,216</b>	<b>12,408,722</b>	<b>34.36%</b>
<b>Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month</b>		<b>48,967,221</b>	<b>49,083,853</b>	<b>0.24%</b>	<b>35,962,242</b>	<b>12,375,564</b>	<b>34.41%</b>
<b>Subtotal for States Expanding Medicaid that Reported in November and December 2015</b>		<b>49,148,295</b>	<b>49,265,985</b>	<b>Difference November to December 2015 117,690</b>			
<b>Subtotal for States Expanding Medicaid that Reported in December 2015 and July-Sept. 2013</b>			<b>48,519,938</b>		<b>36,111,216</b>	<b>Difference July-Sept 2013 to December 2015 12,408,722</b>	



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<sup>a</sup>=Montana's effective date for implementing the expansion is January 1, 2016. MT is not included in the "Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month."

<sup>\*\*</sup>= 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 November and December 2015 data.

Columns V and VI are calculated for only those states that reported data from both December 2015 and the July-Sept. 2013 period.

The subtotals for states reporting data from both December 2015 and the July-Sept. 2013 period exclude CT.

Arkansas	(I)	May include retroactive enrollment.
Arkansas	(I), (II)	Includes Private Option enrollees.
California	(I)	Corrected.
California	(I), (II)	Includes retroactive enrollment.
California	(I), (II)	Includes individuals transferred from the Low Income Health Program
California		section 1115 demonstration.
California	(IV)	Includes approximately 650,000 individuals transferred from the Low Income
California		Health Program section 1115 demonstration.
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.
Minnesota	(IV)	May include duplicates (unlike columns (I) and (II)).
New Jersey	(I), (II), (IV)	Includes individuals eligible at any point in the month.
New York	(I)	Corrected.
New York	(I), (II)	Includes estimated retroactive enrollment.
North Dakota	(IV)	Data is from July 2013 only.
Oregon	(IV)	Includes emergency Medicaid population.

Table 1: Medicaid and CHIP: November and December 2015 Preliminary Monthly Enrollment

		<b>Enrollment</b>					
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, November 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, December 2015 (Preliminary) (II)	% Change November to December 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to December 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to December 2015 (Columns (IV) and (II)) (VI)
Alabama	FFM	883,458	881,836	-0.18%	799,176	82,660	10.34%
Florida	FFM	3,580,569	3,576,023	-0.13%	3,104,996	471,027	15.17%
Georgia	FFM	1,741,241	1,749,136	0.45%	1,535,090	214,046	13.94%
Idaho	SBM	280,061	281,309	0.45%	238,150	43,159	18.12%
Kansas	Plan Management	400,146	402,055	0.48%	378,160	23,895	6.32%
Louisiana	FFM	1,079,805	1,077,109	-0.25%	1,019,787	57,322	5.62%
Maine	Plan Management	280,083	279,000	-0.39%	-	-	-
Mississippi	FFM/SBM-SHOP	691,818	691,293	-0.08%	637,229	54,064	8.48%
Missouri	FFM	939,669	948,576	0.95%	846,084	102,492	12.11%
Nebraska	Plan Management	231,344	231,596	0.11%	244,600	-13,004	-5.32%
North Carolina	FFM	1,928,216	1,941,561	0.69%	1,595,952	345,609	21.66%
Oklahoma	FFM	796,544	781,927	-1.84%	790,051	-8,124	-1.03%
South Carolina	FFM	937,533	936,141	-0.15%	889,744	46,397	5.21%
South Dakota	Plan Management	118,046	118,295	0.21%	115,501	2,794	2.42%
Tennessee	FFM	1,552,133	1,561,146	0.58%	1,244,516	316,630	25.44%
Texas	FFM	4,687,531	4,685,926	-0.03%	4,441,605	244,321	5.50%
Utah	FFM/SBM-SHOP	301,975	303,990	0.67%	294,029	9,961	3.39%
Virginia	Plan Management	956,600	955,868	-0.08%	935,434	20,434	2.18%
Wisconsin	FFM	1,043,555	1,044,478	0.09%	985,531	58,947	5.98%
Wyoming	FFM	64,605	64,508	-0.15%	67,518	-3,010	-4.46%
<b>Subtotal for All States Not Expanding Medicaid</b>		<b>22,494,932</b>	<b>22,511,773</b>	<b>0.07%</b>	<b>20,163,153</b>	<b>2,069,620</b>	<b>10.26%</b>
<b>Subtotal for States Not Expanding Medicaid that Reported in November and December 2015</b>		<b>22,494,932</b>	<b>22,511,773</b>	<b>Difference November to December 2015 16,841</b>			
<b>Subtotal for States Not Expanding Medicaid that Reported in December 2015 and July-Sept. 2013</b>			<b>22,232,773</b>		<b>20,163,153</b>	<b>Difference July-Sept 2013 to December 2015 2,069,620</b>	

Table 1: Medicaid and CHIP: November and December 2015 Preliminary Monthly Enrollment

(-)=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 November and December 2015 data.

Columns V and VI are calculated for only those states that reported data from both December 2015 and the July-Sept. 2013 period.

The subtotals for states reporting data from both December 2015 and the July-Sept. 2013 period exclude ME.

Alabama	(IV)	Data is from September 2013 only.
Florida	(I), (II)	Does not include SSI recipients enrolled in Medicaid.
Missouri	(I)	Corrected.
Utah	(I), (II), (IV)	Includes service limited Medicare program beneficiaries (SLMBs).
Wisconsin	(IV)	Does not include retroactive enrollment.

Table 1: Medicaid and CHIP: November and December 2015 Preliminary Monthly Enrollment

<b>Total Enrollment</b>						
All States	Total Medicaid and CHIP Enrollment, November 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, December 2015 (Preliminary) (II)	% Change November to December 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to December 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to December 2015 (Columns (IV) and (II)) (VI)
<b>Total Across All States</b>	<b>71,643,227</b>	<b>71,777,758</b>	<b>0.19%</b>	<b>56,274,369</b>	<b>14,478,342</b>	<b>25.73%</b>
<b>Total for States that Reported in November and December 2015</b>	<b>71,643,227</b>	<b>71,777,758</b>	<b>Difference November to December 2015 134,531</b>			
<b>Total for States that Reported in December 2015 and July-Sept. 2013</b>		<b>70,752,711</b>		<b>56,274,369</b>	<b>Difference July-Sept 2013 to December 2015 14,478,342</b>	

Column III is calculated for only those states that reported both November and December 2015 data.

Columns V and VI are calculated for only those states that reported data from both December 2015 and the July-Sept. 2013 period.

Totals for states reporting data from both December 2015 and the July-Sept. 2013 period exclude CT and ME.

Table 2: Medicaid and CHIP: December 2015 Preliminary Monthly Medicaid and CHIP Child Enrollment

Enrollment								
State	Medicaid and CHIP Child Enrollment						Total Medicaid and CHIP Enrollment	Medicaid and CHIP Child Enrollment as a % of Total Enrollment (Columns (VI) and (VII))
	July, 2015 (I)	August, 2015 (II)	September, 2015 (III)	October, 2015 (IV)	November, 2015 (V)	December, 2015 (Preliminary) (VI)	December, 2015 (Preliminary) (VII)	December, 2015 (Preliminary) (VIII)
Alabama	631,880	633,982	633,005	626,816	631,772	624,495	881,836	70.82%
Alaska	72,528	72,947	72,778	72,032	70,815	69,971	131,334	53.28%
Arizona	-	-	-	-	-	-	1,681,587	-
Arkansas	434,362	421,997	443,260	432,242	423,393	413,086	839,277	49.22%
California	-	-	-	-	-	-	11,670,308	-
Colorado	597,780	601,432	603,965	605,620	607,574	609,576	1,315,144	46.35%
Connecticut	293,733	283,634	279,853	291,832	292,396	296,564	746,047	39.75%
Delaware	105,559	105,953	105,540	105,780	105,358	105,494	241,704	43.65%
District of Columbia	-	-	-	-	-	-	263,296	-
Florida	2,391,150	2,405,590	2,408,626	2,407,910	2,406,679	2,408,021	3,576,023	67.34%
Georgia	1,249,976	1,252,127	1,246,408	1,241,366	1,246,393	1,225,530	1,749,136	70.06%
Hawaii	143,635	144,842	145,126	142,127	144,087	144,689	338,656	42.72%
Idaho	205,186	206,424	207,367	207,374	207,790	207,815	281,309	73.87%
Illinois	1,487,746	1,485,437	1,485,641	1,483,364	1,478,108	1,455,937	3,083,179	47.22%
Indiana	772,633	777,521	781,031	773,437	770,467	754,577	1,427,492	52.86%
Iowa	293,559	295,354	295,057	297,398	298,403	297,119	608,837	48.80%
Kansas	282,257	285,662	283,678	286,863	288,396	284,288	402,055	70.71%
Kentucky	523,181	530,870	535,515	537,869	541,852	541,958	1,179,314	45.96%
Louisiana	775,438	777,848	779,248	779,133	775,066	773,282	1,077,109	71.79%
Maine	117,954	118,258	118,219	119,165	117,871	117,445	279,000	42.09%
Maryland	572,644	570,142	561,376	571,419	558,993	547,747	1,139,441	48.07%
Massachusetts	656,892	665,344	670,614	678,135	651,785	654,202	1,668,206	39.22%
Michigan	1,009,894	1,002,210	993,127	981,526	979,347	955,602	2,281,977	41.88%
Minnesota	493,824	498,651	499,831	504,016	511,251	503,090	1,047,832	48.01%
Mississippi	481,599	481,177	479,336	476,709	475,637	471,455	691,293	68.20%
Missouri	591,552	587,908	588,581	595,679	599,414	607,821	948,576	64.08%
Montana^	110,293	110,693	111,308	111,795	112,037	111,663	182,132	61.31%
Nebraska	158,815	159,306	159,585	159,231	159,044	154,988	231,596	66.92%
Nevada	276,479	280,391	281,779	284,873	285,502	286,878	596,516	48.09%
New Hampshire	95,033	95,076	95,416	95,141	95,576	94,765	185,958	50.96%
New Jersey	839,872	839,201	837,593	837,921	837,042	824,476	1,710,928	48.19%
New Mexico	-	-	-	-	-	-	738,231	-
New York	2,440,385	2,442,913	2,443,197	2,444,053	2,444,573	2,433,758	6,598,700	36.88%
North Carolina	1,364,647	1,360,402	1,362,924	1,362,143	1,369,727	1,338,012	1,941,561	68.91%
North Dakota	41,476	41,376	41,383	41,676	41,480	41,632	89,240	46.65%
Ohio	1,275,188	1,291,942	1,262,788	1,253,418	1,244,020	1,239,392	2,932,001	42.27%
Oklahoma	529,385	525,577	521,521	517,743	513,499	503,867	781,927	64.44%
Oregon	431,771	437,378	434,094	433,017	414,592	415,791	1,033,518	40.23%
Pennsylvania	1,329,938	1,333,359	1,338,424	1,340,944	1,340,154	1,339,048	2,744,031	48.80%
Rhode Island	109,835	112,331	110,968	111,206	111,495	111,608	279,321	39.96%
South Carolina	662,329	649,953	633,286	608,527	596,337	595,432	936,141	63.60%
South Dakota	80,863	80,593	80,698	80,722	80,714	80,990	118,295	68.46%
Tennessee	-	-	-	-	-	-	1,561,146	-
Texas	3,430,098	3,448,311	3,466,456	3,478,340	3,486,765	3,455,813	4,685,926	73.75%
Utah	218,176	218,609	218,606	218,606	218,270	218,032	303,990	70.51%
Vermont	67,885	68,018	68,327	68,527	68,583	68,432	190,398	35.94%
Virginia	663,036	661,979	661,808	659,550	657,493	641,398	955,868	67.10%
Washington	802,614	807,418	812,128	817,126	821,104	821,175	1,773,000	46.32%
West Virginia	209,836	210,902	210,428	209,673	209,222	208,829	548,380	38.08%
Wisconsin	492,247	491,699	491,699	491,047	490,424	490,360	1,044,478	46.95%
Wyoming	40,301	40,348	40,477	41,146	40,830	40,580	64,508	62.91%
<b>Total For All States</b>	<b>29,855,464</b>	<b>29,913,085</b>	<b>29,901,423</b>	<b>29,883,961</b>	<b>29,821,092</b>	<b>29,582,991</b>	<b>71,777,758</b>	<b>52.96%</b>
<b>Number of States Reporting</b>	<b>46</b>	<b>46</b>	<b>46</b>	<b>46</b>	<b>46</b>	<b>46</b>	<b>51</b>	<b>46</b>

Table 2: Medicaid and CHIP: December 2015 Preliminary Monthly Medicaid and CHIP Child Enrollment

For general notes on enrollment data, see Table 1: Medicaid and CHIP: November and December 2015 Preliminary Monthly Enrollment

(-)=State has not reported data or data submitted was incomplete.

States that provide coverage to pregnant women through CHIP and whose child enrollment figures include pregnant women are NJ, RI, CO, AR, CA, LA, MA, MI, MN, NE, OK, OR, TN, VA, WA, WI.

Column VIII is calculated for only those states that reported both December 2015 child enrollment data and December 2015 Total Medicaid and CHIP enrollment data.

Iowa	(I) - (VI)	Data are preliminary.
New York	(I) - (VII)	Includes estimated retroactive enrollment.

Table 3: Medicaid and CHIP: December 2015 Monthly Applications and Eligibility Determinations

States Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, December 2015 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, December 2015 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, December 2015 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, November 2015 (Preliminary) (IV)	% Change November to December 2015 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, December 2015 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, December 2015 (Preliminary) (VII)	Total New Determinations, December 2015 (Preliminary) (VIII)
Alaska	FFM	4,101	N/A	4,101	3,911	4.86%	6,551	-	6,551
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	20,206	N/A	20,206	9,281	117.71%	3,579	-	3,579
California	SBM	66,180	-	66,180	60,844	8.77%	277,591	-	277,591
Colorado	SBM	30,553	21,244	51,797	38,611	34.15%	27,952	475	28,427
Connecticut	SBM	11,507	13,272	24,779	24,487	1.19%	18,788	392	19,180
Delaware	Partnership	2,490	N/A	2,490	2,996	-16.89%	508	18	526
District of Columbia	SBM	2,215	4,839	7,054	8,001	-11.84%	8,751	-	8,751
Hawaii	SBM **	4,218	-	4,218	3,945	6.92%	4,297	249	4,546
Illinois	Partnership	119,770	N/A	119,770	86,712	38.12%	50,862	14,190	65,052
Indiana	FFM	88,260	N/A	88,260	77,834	13.40%	38,911	2,955	41,866
Iowa	Partnership	20,171	N/A	20,171	20,829	-3.16%	2,778	-	2,778
Kentucky	SBM	9,132	17,918	27,050	24,964	8.36%	18,265	1,082	19,347
Maryland	SBM	6,742	283,989	290,731	201,231	44.48%	47,371	7,119	54,490
Massachusetts	SBM	16,776	15,439	32,215	28,851	11.66%	-	-	-
Michigan	Partnership	86,161	N/A	86,161	67,821	27.04%	82,801	-	82,801
Minnesota	SBM	5,406	47,703	53,109	44,595	19.09%	22,743	52	22,795
Montana <sup>†</sup>	Plan Management	5,180	N/A	5,180	3,837	35.00%	76,695	392	77,087
Nevada	SBM **	23,411	-	23,411	21,582	8.47%	13,840	62	13,902
New Hampshire	Partnership	8,253	N/A	8,253	7,129	15.77%	6,911	585	7,496
New Jersey	FFM	37,704	N/A	37,704	34,434	9.50%	13,519	4,924	18,443
New Mexico	SBM **	10,787	N/A	10,787	9,033	19.42%	-	-	-
New York	SBM	-	741,852	741,852	363,710	103.97%	125,421	8,774	134,195
North Dakota	FFM	-	N/A	-	-	-	6,928	247	7,175
Ohio	Plan Management	168,688	N/A	168,688	145,614	15.85%	236,909	-	236,909
Oregon	SBM **	8,237	-	8,237	23,038	-64.25%	12,787	238	13,025
Pennsylvania	FFM	140,834	N/A	140,834	152,989	-7.95%	53,585	7,441	61,026
Rhode Island	SBM	3,327	-	3,327	2,457	35.41%	45,458	3,033	48,491
Vermont	SBM	2,841	2,658	5,499	4,730	16.26%	1,963	11	1,974
Washington	SBM	21,632	126,974	148,606	144,190	3.06%	51,333	1,599	52,932
West Virginia	Partnership	25,954	N/A	25,954	20,263	28.09%	14,369	658	15,027
<b>Subtotal for All States Expanding Medicaid</b>		<b>950,736</b>	<b>1,275,888</b>	<b>2,226,624</b>	<b>1,637,919</b>	<b>35.94%</b>	<b>1,271,466</b>	<b>54,496</b>	<b>1,325,962</b>
<b>Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month</b>		<b>945,556</b>	<b>1,275,888</b>	<b>2,221,444</b>	<b>1,634,082</b>	<b>35.94%</b>	<b>1,194,771</b>	<b>54,104</b>	<b>1,248,875</b>
<b>Subtotal for States Expanding Medicaid that Reported in November and December 2015</b>				<b>2,226,624</b>	<b>1,637,919</b>	<b>588,705</b>			

<sup>†</sup>=Montana's effective date for implementing the expansion is January 1, 2016. MT is not included in the "Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month."

\*\*= 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 November and December 2015 Applications data (subtotals exclude AZ and ND).

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 3: Medicaid and CHIP: December 2015 Monthly Applications and Eligibility Determinations

Alaska	(I), (III), (IV)	Includes renewals converting to MAGI methodology.
Alaska	(VI), (VIII)	MAGI determinations include CHIP.
Arkansas	(I), (III), (IV)	Includes renewals.
Arkansas	(VI)	Includes CHIP.
Arkansas	(VI)	Does not include MAGI determinations.
California	(I)	Reflects primarily newly-determined and likely eligible Medicaid applicants, as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(IV)	Reflects primarily newly-determined and likely eligible Medicaid applicants, as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(VI)	Reflects primarily newly-determined and likely eligible Medicaid applicants as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(VI)	Reflects primarily newly-determined and likely eligible Medicaid applicants as well as some ongoing caseload activity conducted via the state's health exchange automation system.
Colorado	(I)	State Medicaid agency hosts SBM portal; number includes all applications for insurance affordability programs.
Connecticut	(I), (III), (IV)	Data may include some duplication of applications between Medicaid and CHIP.
Connecticut	(II)	Data may contain duplicate applications, and may include some change in circumstance updates that are not new applications for coverage.
Connecticut	(VI)	Count is of households, not individuals.
District of Columbia	(VI)	Includes all determinations (e.g., renewals); includes CHIP.
District of Columbia	(III), (IV)	Includes renewals.
Hawaii	(I)	Number includes all applications for insurance affordability programs.
Iowa	(VI)	Includes non-MAGI populations only.
Iowa	(VI), (VII), (VIII)	Data are incomplete; does not include all determinations.
Iowa	(VI), (VII)	Includes renewals.
Maryland	(VI), (VII), (VIII)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 12/1 - 12/31.
Michigan	(VI)	Does not include MAGI determinations.
Michigan	(VI)	Includes renewals.
Minnesota	(VI)	Includes CHIP.
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	(III), (VI)	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; includes CHIP.
Oregon	(VI), (VIII)	Includes MAGI populations only.
Pennsylvania	(I), (III), (IV)	Includes renewals.
Pennsylvania	(VI), (VIII)	Includes renewals.
Rhode Island	(VI), (VII)	Includes only determinations through new MAGI system.
Vermont	(VI)	Includes renewals.



Table 3: Medicaid and CHIP: December 2015 Monthly Applications and Eligibility Determinations

States Not Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, December 2015 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, December 2015 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, December 2015 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, November 2015 (Preliminary) (IV)	% Change November to December 2015 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, December 2015 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, December 2015 (Preliminary) (VII)	Total New Determinations, December 2015 (Preliminary) (VIII)
Alabama	FFM	17,800	N/A	17,800	16,641	6.96%	25,656	3,885	29,541
Florida	FFM	293,045	N/A	293,045	279,069	5.01%	165,219	17,011	182,230
Georgia	FFM	86,618	N/A	86,618	82,849	4.55%	44,745	808	45,553
Idaho	SBM	18,159	-	18,159	12,518	45.06%	3,138	336	3,474
Kansas	Plan Management	-	N/A	-	-	-	-	-	-
Louisiana	FFM	24,973	N/A	24,973	22,290	12.04%	25,951	1,645	27,596
Maine	Plan Management	1,901	N/A	1,901	1,458	30.38%	11,395	372	11,767
Mississippi	FFM/SBM-SHOP	19,178	N/A	19,178	17,034	12.59%	11,519	457	11,976
Missouri	FFM	23,018	N/A	23,018	19,112	20.44%	10,489	-	10,489
Nebraska	Plan Management	7,008	N/A	7,008	6,506	7.72%	6,455	1,060	7,515
North Carolina	FFM	22,982	N/A	22,982	19,887	15.56%	58,937	6,561	65,498
Oklahoma	FFM	45,414	N/A	45,414	39,127	16.07%	35,400	6,230	41,630
South Carolina	FFM	29,468	N/A	29,468	25,460	15.74%	5,762	107	5,869
South Dakota	Plan Management	3,030	N/A	3,030	2,914	3.98%	1,652	-	1,652
Tennessee	FFM	1,424	N/A	1,424	1,310	8.70%	-	1,190	1,190
Texas	FFM	91,242	N/A	91,242	90,964	0.31%	95,807	17,340	113,147
Utah	FFM/SBM-SHOP	26,490	N/A	26,490	23,835	11.14%	49,994	-	49,994
Virginia	Plan Management	26,924	N/A	26,924	22,042	22.15%	17,285	903	18,188
Wisconsin	FFM	21,189	N/A	21,189	20,339	4.18%	20,430	2,796	23,226
Wyoming	FFM	1,559	N/A	1,559	1,432	8.87%	1,365	173	1,538
<b>Subtotal for All States Not Expanding Medicaid</b>		<b>761,422</b>	<b>-</b>	<b>761,422</b>	<b>704,787</b>	<b>8.03%</b>	<b>591,199</b>	<b>60,874</b>	<b>652,073</b>
<b>Subtotal for States Not Expanding Medicaid that Reported in November and December 2015</b>				<b>761,422</b>	<b>704,787</b>	<b>Difference November to December 2015 56.635%</b>			
<b>Total Across All States</b>		<b>1,712,158</b>	<b>1,275,888</b>	<b>2,988,046</b>	<b>2,342,706</b>	<b>27.56%</b>	<b>1,862,665</b>	<b>115,370</b>	<b>1,978,035</b>
<b>Total for States that Reported in November and December 2015</b>				<b>2,988,046</b>	<b>2,342,706</b>	<b>Difference November to December 2015 645,340</b>			

Table 3: Medicaid and CHIP: December 2015 Monthly Applications and Eligibility Determinations

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

Column V is calculated for only those states that reported November and December 2015 Applications data (subtotals exclude KS; totals exclude AZ, KS and ND).

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.

South Dakota	(I), (III), (IV)	Includes account transfers from the FFM.
South Dakota	(IV)	Corrected.
South Dakota	(VI)	Includes CHIP.
Tennessee	(I), (III), (IV)	Data are from CHIP agency only. Medicaid reporting capability in development.
Tennessee	(V)	Excluded because data is only from CHIP agency.
Utah	(I), (III), (IV)	Includes applications for non-health coverage programs.
Utah	(I), (III)	Includes account transfers from the FFM.
Virginia	(I), (III), (IV)	Includes renewals.
Virginia	(VI), (VII)	Includes renewals.
Wisconsin	(VI), (VII)	Count is of unique individuals receiving determinations, not unique determinations.

APPENDIX A: Description of Data Elements in Tables

**Table 1: Medicaid and CHIP: November and December 2015 Preliminary Monthly Enrollment**

**Total Medicaid and CHIP Enrollment, November 2015 (Preliminary) (I)**

**Total Medicaid and CHIP Enrollment, December 2015 (Preliminary) (II)**

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. This indicator is a point-in-time count of total program enrollment, and is not solely a count of those newly enrolled during the reporting period. This number includes 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). 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. CHIP children subject to a waiting period or premium lock-out period are considered eligible but not enrolled and are not included. The December 2015 data was submitted in January and is considered preliminary.<sup>28</sup> The November 2015 data in this table was submitted in December and is also preliminary. November data that was updated in January (which may include more individuals with retroactive eligibility) is posted separately on Medicaid.gov. Other reporting on Medicaid and CHIP enrollment by states and researchers often may include some beneficiaries excluded in this data (because comprehensive coverage is not provided), or otherwise use a different methodology.

**Percent Change November to December 2015 (III)**

The percentage change in **Total Medicaid and CHIP Enrollment, December 2015 (Preliminary) (II)** as compared to **Total Medicaid and CHIP Enrollment, November 2015 (Preliminary) (I)** is calculated for states that provided data for both periods. In cases where there is a negative percentage change, this may be due to a number of factors. Changes in enrollment levels are driven by the number of newly enrolled individuals as well as by the number of individuals whose coverage has terminated.

**Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)**

The average number of individuals enrolled in Medicaid and CHIP for each month during the July-September 2013 period using an average of enrollment numbers submitted by the states for each month in this period. Not all states submitted three months of data; the average is calculated using any months of baseline data that were provided. The unit of measurement is individuals enrolled as of the last day of the reporting period (month). This baseline data includes more retroactive enrollments than the December 2015 data, which makes change between the baseline data and the December preliminary data look smaller than it would be if retroactive enrollments were excluded from the data for the July-September 2013 period.<sup>29</sup> Such exclusions were not possible.

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<sup>28</sup> In Medicaid, individuals are potentially eligible for retroactive eligibility to cover incurred health care costs for up to 90 days prior to the date of application. Under the Performance Indicator process, states initially submit their monthly enrollment data just a week after the month closes, and then update their data one month later. Therefore, the Performance Indicator enrollment counts will always be slightly understated, as they will not include all individuals granted retroactive eligibility.

<sup>29</sup> See footnote 28.

**Net Change, July-Sept. 2013 to December 2015 (V)**

The net change in **Total Medicaid and CHIP Enrollment, December 2015 (preliminary) (II)** as compared to **Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)** is calculated for states that provided data for both periods and represents the difference in enrollment between these two periods. A negative net change may be due to a number of factors, including the preliminary nature of the monthly data (as described above) as compared to the finalized nature of the baseline data. Changes in enrollment levels are driven by the number of newly enrolled individuals as well as by the number of individuals whose coverage has terminated.

**Percentage Change, July-Sept. 2013 to December 2015 (VI)**

The percentage change in **Total Medicaid and CHIP Enrollment, December 2015 (Preliminary) (II)**, compared to **Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)**, is calculated for states that provided data for both periods. A negative percentage change may be due to a number of factors, including the preliminary nature of the monthly data (as described above) as compared to the finalized nature of the baseline data. Changes in enrollment levels are driven by the number of newly enrolled individuals as well as by the number of individuals whose coverage has terminated.

**Note:** Updated enrollment data for January 2014 through November 2015 is available on the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on [Medicaid.gov](http://Medicaid.gov). This data is updated more than 30 days after the close of the reporting period, to account for retroactive Medicaid eligibility and other updates to the preliminary data provided soon after the close of the reporting period, which forms the basis for this report.

**Table 2: Medicaid and CHIP: December 2015 Preliminary Monthly Medicaid Child and CHIP Enrollment**

**Medicaid Child and CHIP Enrollment, July - November 2015 ((I)-(V))**

As of the last day of the calendar month—

- The total unduplicated number of individuals enrolled in CHIP (i.e. funded under title XXI of the Social Security Act); plus
- The total unduplicated number of individuals enrolled in Medicaid (i.e. funded under title XIX of the Social Security Act) who are children.

States use the definition of "child" as included in the state's Medicaid or CHIP state plan. This definition may vary from state to state. A few states cover pregnant women through CHIP, which means this figure may include some adults.<sup>30</sup> These figures may have been updated by states more than 30 days after the close to the reporting period to include enrollees with retroactive coverage and other updates.

**Medicaid Child and CHIP Enrollment, December 2015 (Preliminary) (VI)**

As of the last day of the calendar month—

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<sup>30</sup> The states which provide complete coverage to pregnant women through CHIP are New Jersey, Rhode Island, and Colorado. In addition, the following states provide certain services to pregnant women through CHIP: Arkansas, California, Louisiana, Massachusetts, Michigan, Minnesota, Nebraska, Oklahoma, Oregon, Rhode Island, Tennessee, Texas, Virginia, Washington, and Wisconsin. Benefits offered vary by state.

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- The total unduplicated number of individuals enrolled in CHIP (i.e. funded under title XXI of the Social Security Act); plus
- The total unduplicated number of individuals enrolled in Medicaid (i.e. funded under title XIX of the Social Security Act) who are children.

States use the definition of "child" as included in the state's Medicaid or CHIP state plan. This definition may vary from state to state. A few states cover pregnant women through CHIP, which means this figure may include some adults.<sup>31</sup> The December 2015 data was submitted in December and is considered preliminary.<sup>32</sup>

#### **Total Medicaid and CHIP Enrollment, December 2015 (Preliminary) (VII)**

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. This indicator is a point-in-time count of total program enrollment, and is not solely a count of those newly enrolled during the reporting period. This number includes 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). 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. CHIP children subject to a waiting period or premium lock-out period are considered eligible but not enrolled and are not included. The December data was submitted in January 2015 and is considered preliminary.<sup>33</sup> This data is the same as the data reported in column (II) in Table 1: Medicaid and CHIP: November and December 2015 Preliminary Monthly Enrollment.

#### **Medicaid and CHIP Child Enrollment as a % of Total Enrollment (VIII)**

**Medicaid and CHIP Child Enrollment, December 2015 (Preliminary) (VI) as a percentage of Total Medicaid and CHIP Enrollment, December 2015 (Preliminary) (VII).**

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<sup>31</sup> See footnote 30.

<sup>32</sup> See footnote 28.

<sup>33</sup> See footnote 28.

**Table 3: Medicaid and CHIP: December 2015 Monthly Applications and Eligibility Determinations**

**Application Data Elements**

**New Applications Submitted to Medicaid and CHIP Agencies, December 2015 (Preliminary) (I)**

Number of applications received by the Medicaid agency, a separate CHIP agency (if one exists in the state), or both during the reporting period. Includes applications received online, via mail, in person or phone. Does not include applications submitted to a State-Based Marketplace (SBM) or the Federally-Facilitated Marketplace (FFM) (the SBM number is reported in column IV).<sup>34</sup> It should be noted that data reflected in this performance indicator are not a count of individuals, as more than one person may be included on a single application. As states are transitioning to new systems, they may not be able to report applications received across all aspects of their programs or systems. See the state-specific notes in the table for further information about state limitations in this area.<sup>35</sup> The December 2015 data was submitted in January and is considered preliminary.<sup>36</sup>

**Applications for Financial Assistance Submitted to the State-Based Marketplace, December 2015 (Preliminary) (II)**

This element is the number of 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. The December 2015 data was submitted in January and is considered preliminary.<sup>37</sup>

**Total Applications for Financial Assistance Submitted at the State Level, December 2015 (Preliminary) (III)**

**Total Applications for Financial Assistance Submitted at the State Level, November 2015 (Preliminary) (IV)**

For states with an SBM, the data reflects the total of **Applications Submitted to Medicaid and CHIP Agencies, December 2015 (Preliminary)** plus **Applications for Financial Assistance Submitted to the State-Based Marketplace, December 2015 (Preliminary)**. For FFM states, the data reflects **Applications Submitted to Medicaid and CHIP Agencies, December 2015 (Preliminary)**. For SBM states, the data includes all applications for financial assistance; individuals on these applications will be determined eligible for Medicaid, CHIP or Advanced Premium Tax Credits and Cost-Sharing Reductions, or determined ineligible for financial assistance. The December 2015 data was submitted in January and is considered preliminary. The November 2015 data in this table was submitted in December 2015 and is also preliminary. November data that was updated in January (which may include additional individuals who applied in November, but who were not captured in the preliminary data) is posted separately on Medicaid.gov.

**Percentage Change November to December 2015 (V)**

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<sup>34</sup> As described in the state-specific notes in the tables, some states included account transfers from the FFM in the total count of applications received by Medicaid and CHIP agencies.

<sup>35</sup> As described in the state-specific notes in the tables, some states included renewals in the total count of applications received by Medicaid and CHIP agencies.

<sup>36</sup> See footnote 28.

<sup>37</sup> See footnote 28.

The percentage change in **Total Applications for Financial Assistance Submitted at the State Level, December 2015 (Preliminary) (III)** as compared to **Total Preliminary Applications Submitted at the State Level, November 2015 (Preliminary) (IV)** is calculated for states that provided data for both periods.

### **Eligibility Determination Data Elements**

#### **Individuals Determined Eligible for Medicaid at Application, December 2015 (VI)**

Total number of individuals determined eligible for Medicaid (under title XIX of the Social Security Act) during the reporting period based on applications for coverage submitted to any state agency (Medicaid, CHIP or the SBM) or based on an administrative determination authorized under a targeted enrollment strategy approved by CMS.<sup>38</sup> The unit of measurement is a count of individuals (as compared to the application numbers, which may include multiple people in one application). This number includes all determinations on applications made within the reporting period—some of those determinations are on applications reported in the **Applications** data, and some are on applications received prior to the reporting period. This does not include determinations made at a periodic redetermination or because of a change in circumstance for a current beneficiary.<sup>39</sup> The unit of measurement is people with determinations completed; this is not an unduplicated number of unique individuals because an individual may have more than one determination within the reporting period., individuals are first determined based on MAGI, and if needed, may request a subsequent determination based on non-MAGI factors. A list of which eligibility groups are MAGI and which are non-MAGI is available on [Medicaid.gov](http://www.Medicaid.gov).

As states are transitioning to their new systems, they may not be able to report determinations being made across all aspects of their programs or systems (i.e., the legacy systems they are winding down and the new eligibility systems they are implementing). See the notes in the table for further information about state limitations in this area.

In states receiving account transfers from the FFM in December where the FFM makes an eligibility assessment (and the state then completes the Medicaid determination), this number includes 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, and instead is accepting the account transfer and proceeding with enrollment steps. Individuals determined eligible by the FFM are included in the Total Enrolled indicators. For more information about the assessment and determination models in FFM states see [Medicaid.gov](http://www.Medicaid.gov).

#### **Individuals Determined Eligible for CHIP at Application, December 2015 (VII)**

Total number of individuals determined eligible for CHIP (under title XXI of the Social Security Act) during the reporting period that follows the applicant submitting an application for

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<sup>38</sup> Information on targeted enrollment strategies and the states approved for these strategies is available here: <http://www.medicaid.gov/medicaid-chip-program-information/program-information/targeted-enrollment-strategies/targeted-enrollment-strategies.html>.

<sup>39</sup> As described in the state-specific notes in the tables, some states could not provide data that met our specifications. Notes are provided in cases where the state included renewals in this data element.

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coverage to any state agency (Medicaid, CHIP, or the SBM). This number includes all determinations at application made within the reporting period—some of those determinations are on applications reported in the **Applications** data, and some are on applications received prior to the reporting period. As states are transitioning to their new systems, they may not be able to report determinations being made across all aspects of their programs or systems (i.e., the legacy systems they are winding down and the new eligibility systems they are implementing). See the footnotes in the table for further information about state limitations in this area. The unit of measurement is people with determinations completed; this is not an unduplicated number of unique individuals.

In states receiving account transfers from the FFM in December where the FFM makes an eligibility assessment (and the state then completes the CHIP determination), this number includes 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 a CHIP eligibility determination, the report does not include the FFM determinations, because the Medicaid/CHIP agency is not performing a determination, and instead is accepting the account transfer and proceeding with enrollment steps. Individuals determined eligible by the FFM are included in the Total Enrolled indicators. For more information about the assessment and determination models in FFM states see [Medicaid.gov](http://Medicaid.gov).

#### **Total New Determinations, December 2015 (VIII)**

The total of **Individuals Determined Eligible for Medicaid at Application** plus **Individuals Determined Eligible for CHIP at Application**.

**A Note about Federally-Facilitated Marketplace Types:** For the purposes of the report, we refer to State Partnership Marketplaces (Partnership), States performing Plan Management functions (Plan Management), and the State-Based Small Business Health Options Program (SB-SHOP) as Federally-Facilitated Marketplaces (FFMs). The state-by-state tables contain information on the specific marketplace type for each state.