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

*March 20, 2015*

### **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 January 2015. Open enrollment in the Marketplace began November 15, 2014 and ended on February 15, 2015. Medicaid and CHIP are longstanding programs that serve many populations in addition to those that are newly eligible for Medicaid under the new low-income adult group established by the Affordable Care Act. This report measures eligibility and enrollment activity for the entire Medicaid and CHIP programs in all states, 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.<sup>1</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>2</sup>

As with previous reports, this month’s report focuses on those indicators that relate to Medicaid and CHIP application and enrollment process:<sup>3</sup>

- The number of applications submitted directly to Medicaid and CHIP agencies, including those received through State-Based Marketplaces (SBMs);

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<sup>1</sup> As of January 2015, twenty-seven states and the District of Columbia 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. Pennsylvania implemented the Medicaid expansion on January 1, 2015 and Indiana the implemented Medicaid expansion on February 1, 2015. There is no deadline for when a state must decide whether to expand Medicaid and states are continuing to consider their options. The enrollment impact of the Medicaid expansion varies; some of these states had 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>2</sup> See appendix A for the standardized data definitions for the data included in this report. States continue to work to transition to these standardized definitions. State-specific notes on the differences between state-reported data and the data definitions are included in the state-by-state tables in this report.

<sup>3</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 is included in the Health Insurance Marketplace 2015 Open Enrollment Period: March Enrollment Report (March 10, 2015). Because of the integrated nature of eligibility determination in State-Based Marketplace (SBM) states, some SBM data is reported in both the March 10 report and this report. However, the March 10 report includes data from November 15, 2014 through February 15, 2015, while this report includes data from January 1 - January 31, 2015.

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- 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.

As with each monthly report, given that states are reporting monthly data to CMS soon after the close of the month, the January 2015 data presented in this report should be considered preliminary. We have published updated data for December 2014 applications, eligibility determinations and enrollment on [Medicaid.gov](http://www.Medicaid.gov), which includes a more complete data set than the previously reported preliminary December 2014 data.

**Medicaid and CHIP January 2015 Enrollment Data Highlights**

<b>Total Individuals Enrolled in Medicaid and CHIP in January 2015 in All States Reporting January Data (includes all individuals enrolled in the program on the last day of the reporting period).<sup>4</sup></b>	69,975,289 <sup>5</sup>
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- The 51 states (including the District of Columbia) that provided enrollment data for January 2015 reported nearly 70 million individuals were enrolled in Medicaid and CHIP.<sup>6</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.
- 394,023 additional people were enrolled in January 2015 as compared to December 2014 in the 51 states that reported comparable January 2015 and December 2014 data.<sup>7</sup>

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<sup>4</sup> 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. It is important to note that 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>5</sup> This number is not directly comparable to prior months' numbers because several states changed their methodology in January to better match CMS's data specifications. 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 January 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.

<sup>6</sup> See footnote 4 and 5.

<sup>7</sup> See the notes in Table 1 for state-specific caveats regarding the reported data.

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- Looking at the additional enrollment since October 2013 when the initial Marketplace open enrollment period began, among the 49 states reporting both January 2015 enrollment data and data from July-September of 2013, approximately 11.2 million additional individuals are enrolled in Medicaid and CHIP as of January 2015, nearly a 19.3 percent increase over the average monthly enrollment for July through September of 2013.<sup>8</sup> (Connecticut and Maine are not included in this count.)<sup>9</sup>
- Among states that had implemented the Medicaid expansion and were covering newly eligible adults in January 2015, Medicaid and CHIP enrollment rose by over 26.1 percent compared to the July-September 2013 baseline period, while states that have not, to date, expanded Medicaid reported an increase of over 7.8 percent over the same period.<sup>10</sup>
- Twelve of the 27 states that had implemented the Medicaid expansion and were covering newly eligible adults in January 2015, and that reported relevant data for both January and the July-September 2013 baseline period, experienced an enrollment increase of 30 percent or more.<sup>11</sup>

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<sup>8</sup> The net change in enrollment is based on data from the 49 states reporting both January 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 January of nearly 69 million individuals, and July-September 2013 average enrollment of over 57.8 million. For January 2015, we are reporting growth of 11,151,468 compared to July-September 2013. This figure exceeds the 10,751,820 in net enrollment growth that was included in the *Medicaid and CHIP: December 2014 Applications, Eligibility Determinations, and Enrollment Report* by approximately 400,000. This difference does not match the 394,023 increase reported above for the December 2014 to January 2015 period because the 394,023 figure is based on 51 states, while the approximately 400,000 figure is based on only 49 states. In addition, some states updated their data this month to better align with CMS's data specifications. These changes mean that the summary statistics in the December 2014 report are not perfectly comparable to the figures 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 2014 and January 2015 data included in this report is preliminary (see footnote 5), the difference reported here between January 2015 and July-September 2013 period is likely understated.

<sup>9</sup> Connecticut and Maine did not submit enrollment data for the July-September 2013 baseline period.

<sup>10</sup> Percentage calculations are based only on states reporting in both January 2015 and the July through September 2013 baseline period. Indiana is not included in these percentages because its expansion was not yet implemented as of January 2015. These percentages are not directly comparable to the figures reported in previous months because a few states made corrections to their data this month to bring their reporting in line with CMS's data definitions and because of differences in the number of states included in the calculation. See footnote 8 for additional information. The percentage change figure for expansion states is lower than the figure previously reported for December 2014 for a number of additional reasons. For example, beginning this month, Pennsylvania is included in the states with expansions in effect, and Pennsylvania's enrollment growth is relatively small compared to states that expanded on January 1, 2014. In addition, Minnesota's enrollment decreased due to the state transferring over 90,000 individuals from Medicaid to the newly available Basic Health Plan (more information about the Basic Health Plan is available here: <http://www.medicaid.gov/basic-health-program/basic-health-program.html>).

<sup>11</sup> Medicaid expansion states that reported data in both periods that showed a greater than 30 percent increase in enrollment are: Arkansas, California, Colorado, Kentucky, Maryland, Nevada, New Hampshire, New Mexico, Oregon, Rhode Island, Washington, and West Virginia (9 of these 12 states also run State-Based Marketplaces). In previous months, Minnesota, New Jersey, and Vermont have been included on this list, but are not include this month. Minnesota transitioned approximately 90,000 individuals from its Medicaid program to its Basic Health

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- 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 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>

It is important to note that, as with previous reports, multiple factors contribute to the change in enrollment between January 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 January and whose application will be fully processed after January 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 January 2015, applied for Medicaid in a later month, and qualify for retroactive Medicaid coverage in January 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://www.Medicaid.gov).<sup>15</sup>

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Plan on January 1, 2015. New Jersey had a slight decrease in enrollment, but is still very close to 30 percent enrollment growth. Vermont updated its methodology this month to better align with CMS’s data specifications, which caused a decline in its reported enrollment growth. Among expansion states, the percent change in the number of individuals enrolled varies based on the size of the coverage expansion that is occurring in 2014. States that previously offered comprehensive coverage to many adults with incomes under 133 percent of the FPL will likely see a smaller percent increase 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 advanced payments of premium tax credits and cost-sharing reductions; this change will reduce their overall Medicaid enrollment. Indiana is not included in the count of expansion states because its Medicaid expansion was not yet implemented as of January 2015.

<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)).

<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 5 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.

**Child Enrollment**

<b>Total Medicaid and CHIP child enrollment in the 46 states reporting in January 2015<sup>16</sup></b>	29,073,489 <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 August 2014 and January 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 January, more than 29 million individuals are enrolled in CHIP or are children enrolled in the Medicaid program.
- Based on the January 2015 data, children enrolled in the Medicaid program and individuals enrolled in CHIP make up approximately 54 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.<sup>20</sup>

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<sup>16</sup> See the notes in Table 2 for state-specific caveats regarding the reported data. 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 may be 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. This definition 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.

<sup>18</sup> In table 2, the reported January 2015 child enrollment figure appears to be lower than the figures reported in previous months. Prior months' total enrollment figures reported in the child enrollment table is from data that is reported more than a month after the close of the reporting period, and thus includes some children enrolled retroactively. The preliminary January 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 January 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 January 2015, as reported on page 2 and in Table 1. Total enrollment data for January 2014 through December 2014 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 January 2015 Application and Eligibility Data Highlights**

	<b>January 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)	2,126,385 <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)	1,074,974 <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)	2,337,347 <sup>23</sup>

During the month of January 2015, over 3.2 million applications for coverage and financial assistance (including Medicaid and CHIP coverage, tax credits and subsidies) were submitted at the state level (including over 2.1 million received directly by state Medicaid and CHIP agencies and approximately 1.1 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 January 2015 as compared to the prior month (December 2014). 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.

<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 January 2015 application data: Alaska, Nevada, New Jersey, New York, Ohio, Pennsylvania, and Virginia. South Dakota included transfers from the FFM in its January 2015 application data.

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

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States reported making over 2.3 million eligibility determinations for Medicaid and CHIP in January 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 January 2015.

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<sup>26</sup> The states that have included renewals in their January 2015 determination data are: District of Columbia, Iowa, Michigan, Nevada, New Jersey, Ohio, Pennsylvania, Rhode Island, South Dakota, 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. California and Oregon conducted transfers in January 2015. As of the end of January, 726,584 individuals have been determined eligible for Medicaid or CHIP as a result of this transitional strategy in the six states that have implemented it. Michigan received approval to conduct administrative transfers but it has not yet implemented this targeted enrollment strategy.

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**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 January 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 January 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 January 1 - 31, 2015.

**Future Reports**

In future months, we will continue to expand the number of performance indicators that will be included in this report.



Table 1: Medicaid and CHIP: December 2014 and January 2015 Preliminary Monthly Enrollment

		Enrollment					
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, December 2014 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, January 2015 (Preliminary) (II)	% Change December 2014 to January 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to January 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to January 2015 (Columns (IV) and (II)) (VI)
Arizona	FFM	1,496,616	1,482,316	-0.96%	1,201,770	280,546	23.34%
Arkansas	Partnership	824,682	824,529	-0.02%	556,851	267,678	48.07%
California	SBM	11,919,314	12,170,138	2.10%	9,157,000	3,013,138	32.91%
Colorado	SBM	1,176,347	1,195,042	1.59%	783,420	411,622	52.54%
Connecticut	SBM	760,584	733,590	-3.55%	-	-	-
Delaware	Partnership	235,047	235,775	0.31%	223,324	12,451	5.58%
District of Columbia	SBM	256,282	256,383	0.04%	235,786	20,597	8.74%
Hawaii	SBM	303,567	314,503	3.60%	288,357	26,146	9.07%
Illinois	Partnership	3,082,060	3,101,946	0.65%	2,626,943	475,003	18.08%
Indiana^	FFM	1,189,949	1,198,066	0.68%	1,120,674	77,392	6.91%
Iowa	Partnership	572,104	512,533	-10.41%	493,515	19,018	3.85%
Kentucky	SBM	1,073,384	1,099,327	2.42%	606,805	492,522	81.17%
Maryland	SBM	1,125,271	1,152,248	2.40%	856,297	295,951	34.56%
Massachusetts	SBM	1,571,990	1,619,824	3.04%	1,296,359	323,465	24.95%
Michigan	Partnership	2,215,447	2,233,070	0.80%	1,912,009	321,061	16.79%
Minnesota	SBM	1,189,343	1,037,554	-12.76%	873,040	164,514	18.84%
Nevada	SBM **	548,377	541,334	-1.28%	332,560	208,774	62.78%
New Hampshire	Partnership	167,330	169,747	1.44%	127,082	42,665	33.57%
New Jersey	FFM	1,672,822	1,667,815	-0.30%	1,283,851	383,964	29.91%
New Mexico	SBM **	687,942	687,829	-0.02%	457,678	230,151	50.29%
New York	SBM	6,254,072	6,247,440	-0.11%	5,678,417	569,023	10.02%
North Dakota	FFM	86,120	86,220	0.12%	69,980	16,240	23.21%
Ohio	Plan Management	2,900,815	2,928,588	0.96%	2,341,481	587,107	25.07%
Oregon	SBM **	1,030,940	1,036,190	0.51%	626,356	409,834	65.43%
Pennsylvania*	FFM	2,403,656	2,493,851	3.75%	2,386,046	107,805	4.52%
Rhode Island	SBM	263,426	267,466	1.53%	190,833	76,633	40.16%
Vermont	SBM	177,819	179,514	0.95%	161,081	18,433	11.44%
Washington	SBM	1,636,334	1,645,727	0.57%	1,117,576	528,151	47.26%
West Virginia	Partnership	522,491	524,569	0.40%	354,544	170,025	47.96%
<b>Subtotal for All States Expanding Medicaid</b>		<b>47,344,131</b>	<b>47,643,134</b>	<b>0.63%</b>	<b>37,359,635</b>	<b>9,549,909</b>	<b>25.56%</b>
<b>Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month^</b>		<b>46,154,182</b>	<b>46,445,068</b>	<b>0.63%</b>	<b>36,238,961</b>	<b>9,472,517</b>	<b>26.14%</b>
<b>Subtotal for States Expanding Medicaid that Reported in December 2014 and January 2015</b>		<b>47,344,131</b>	<b>47,643,134</b>	<b>Difference December 2014 to January 2015 299,003</b>			
<b>Subtotal for States Expanding Medicaid that Reported in January 2015 and July-Sept. 2013</b>			<b>46,909,544</b>		<b>37,359,635</b>	<b>Difference July-Sept 2013 to January 2015 9,549,909</b>	

Table 1: Medicaid and CHIP: December 2014 and January 2015 Preliminary Monthly Enrollment

<sup>^</sup>=Indiana's effective date for implementing the expansion is February 1, 2015. IN is not included in the "Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month" because its expansion is not implemented as of January 2015.

\*=Individuals in PA began to receive coverage under the expansion on January 1, 2015.

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

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

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

Column III is calculated for only those states that reported both December 2014 and January 2015 data.

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

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

Arkansas	(I), (II)	Includes Private Option enrollees.
California	(I), (II)	Includes individuals transferred from the Low Income Health Program
California		section 1115 demonstration
California		Includes estimated retroactive enrollment.
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.
Iowa	(I), (II)	Data are preliminary.
Massachusetts	(I), (II)	Does not include individuals receiving temporary transitional coverage.
Minnesota	(I), (IV)	May include duplicates (unlike column (II)).
Minnesota	(II)	90,000 individuals were transitioned into Minnesota's basic health plan in 1/1/15.
Nevada	(I), (II)	Data are preliminary.
New Jersey	(I), (II), (IV)	Includes individuals eligible at any point in the month.
New Mexico	(I)	Corrected. May include retroactive enrollment.
New Mexico	(IV)	Corrected
New York	(I), (II)	Includes estimated retroactive enrollment.
North Dakota	(IV)	Data is from July 2013 only.
Vermont	(I), (IV)	Corrected.

Table 1: Medicaid and CHIP: December 2014 and January 2015 Preliminary Monthly Enrollment

		<b>Enrollment</b>					
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, December 2014 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, January 2015 (Preliminary) (II)	% Change December 2014 to January 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to January 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to January 2015 (Columns (IV) and (II)) (VI)
Alabama	FFM	867,302	873,954	0.77%	799,176	74,778	9.36%
Alaska	FFM	124,789	121,867	-2.34%	122,334	-467	-0.38%
Florida	FFM	3,373,853	3,404,156	0.90%	3,104,996	299,160	9.63%
Georgia	FFM	1,738,810	1,724,033	-0.85%	1,535,090	188,943	12.31%
Idaho	SBM	287,932	288,402	0.16%	251,926	36,476	14.48%
Kansas	Plan Management	400,885	404,608	0.93%	378,160	26,448	6.99%
Louisiana	FFM	1,044,151	1,053,090	0.86%	1,019,787	33,303	3.27%
Maine	Plan Management	287,807	282,359	-1.89%	-	-	-
Mississippi	FFM/SBM-SHOP	705,537	711,782	0.89%	637,229	74,553	11.70%
Missouri	FFM	855,487	863,651	0.95%	846,084	17,567	2.08%
Montana	Plan Management	164,339	165,604	0.77%	148,974	16,630	11.16%
Nebraska	Plan Management	235,185	235,523	0.14%	244,600	-9,077	-3.71%
North Carolina	FFM	1,821,489	1,835,638	0.78%	1,595,952	239,686	15.02%
Oklahoma	FFM	799,478	808,807	1.17%	790,051	18,756	2.37%
South Carolina	FFM	995,296	983,275	-1.21%	889,744	93,531	10.51%
South Dakota	Plan Management	116,878	117,687	0.69%	115,501	2,186	1.89%
Tennessee	FFM	1,417,954	1,433,932	1.13%	1,244,516	189,416	15.22%
Texas	FFM	4,664,624	4,651,139	-0.29%	4,441,605	209,534	4.72%
Utah	FFM/SBM-SHOP	291,889	293,359	0.50%	294,029	670	-0.23%
Virginia	Plan Management	937,016	968,216	3.33%	935,434	32,782	3.50%
Wisconsin	FFM	1,034,899	1,042,496	0.73%	985,531	56,965	5.78%
Wyoming	FFM	71,535	68,577	-4.14%	67,518	1,059	1.57%
<b>Subtotal for All States Not Expanding Medicaid</b>		<b>22,237,135</b>	<b>22,332,155</b>	<b>0.43%</b>	<b>20,448,237</b>	<b>1,601,559</b>	<b>7.83%</b>
<b>Subtotal for States Not Expanding Medicaid that Reported in December 2014 and January 2015</b>		<b>22,237,135</b>	<b>22,332,155</b>	<b>Difference December 2014 to January 2015 95,020</b>			
<b>Subtotal for States Not Expanding Medicaid that Reported in January 2015 and July-Sept. 2013</b>			<b>22,049,796</b>		<b>20,448,237</b>	<b>Difference July-Sept 2013 to January 2015 1,601,559</b>	

Table 1: Medicaid and CHIP: December 2014 and January 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 December 2014 and January 2015 data.

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

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

Alabama	(II)	Includes estimated CHIP enrollment.
Alabama	(IV)	Data is from September 2013 only.
Florida	(I), (II)	Does not include SSI recipients enrolled in Medicaid.
Texas	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
Utah	(I), (II), (IV)	Includes service limited Medicare program beneficiaries (SLMBs).
Wisconsin	(IV)	Does not include retroactive enrollment.

Table 1: Medicaid and CHIP: December 2014 and January 2015 Preliminary Monthly Enrollment

<b>Total Enrollment</b>						
All States	Total Medicaid and CHIP Enrollment, December 2014 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, January 2015 (Preliminary) (II)	% Change December 2014 to January 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to January 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to January 2015 (Columns (IV) and (II)) (VI)
<b>Total Across All States</b>	<b>69,581,266</b>	<b>69,975,289</b>	<b>0.57%</b>	<b>57,807,872</b>	<b>11,151,468</b>	<b>19.29%</b>
<b>Total for States that Reported in December 2014 and January 2015</b>	<b>69,581,266</b>	<b>69,975,289</b>	<b>Difference December 2014 to January 2015 394,023</b>			
<b>Total for States that Reported in January 2015 and July-Sept. 2013</b>		<b>68,959,340</b>		<b>57,807,872</b>	<b>Difference July-Sept 2013 to January 2015 11,151,468</b>	

Column III is calculated for only those states that reported both December 2014 and January 2015 data.

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

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

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

State	Enrollment							
	Medicaid and CHIP Child Enrollment						Total Medicaid and CHIP Enrollment	Medicaid and CHIP Child Enrollment as a % of Total Enrollment (Columns (VI) and (VII))
	August, 2014 (I)	September, 2014 (II)	October, 2014 (III)	November, 2014 (IV)	December, 2014 (V)	January, 2015 (Preliminary) (VI)	January, 2015 (Preliminary) (VII)	January, 2015 (Preliminary) (VIII)
Alabama	647,625	642,646	642,688	643,208	642,821	640,576	873,954	73.30%
Alaska	74,251	73,706	74,524	74,073	74,043	70,241	121,867	57.64%
Arizona	-	-	-	-	-	-	1,482,316	-
Arkansas	-	431,339	431,490	435,048	433,875	432,691	824,529	52.48%
California	-	-	-	-	-	-	12,170,138	-
Colorado	567,484	568,972	568,093	569,320	574,528	577,887	1,195,042	48.36%
Connecticut	317,887	319,564	320,127	316,325	312,639	300,570	733,590	40.97%
Delaware	101,696	101,688	102,304	103,176	104,105	104,358	235,775	44.26%
District of Columbia	-	-	-	-	-	-	256,383	-
Florida	2,267,848	2,281,978	2,279,731	2,269,590	2,277,678	2,292,762	3,404,156	67.35%
Georgia	1,251,603	1,250,161	1,244,512	1,245,101	1,245,982	1,211,139	1,724,033	70.25%
Hawaii	133,176	128,654	131,342	134,059	134,788	136,205	314,503	43.31%
Idaho	193,877	198,147	198,704	199,073	199,720	200,356	288,402	69.47%
Illinois	1,535,988	1,525,138	1,518,476	1,513,095	1,506,829	1,488,571	3,101,946	47.99%
Indiana	714,082	717,009	719,398	717,576	722,093	712,412	1,198,066	59.46%
Iowa	285,489	287,449	287,255	287,046	285,924	228,745	512,533	44.63%
Kansas	287,792	285,530	285,069	285,312	285,658	289,107	404,608	71.45%
Kentucky	447,179	455,689	460,921	457,422	466,254	475,918	1,099,327	43.29%
Louisiana	748,219	750,483	753,063	754,564	754,849	758,881	1,053,090	72.06%
Maine	122,648	122,451	122,143	120,993	120,778	118,871	282,359	42.10%
Maryland	598,935	603,330	570,909	574,748	584,867	585,518	1,152,248	50.82%
Massachusetts	591,415	593,800	597,093	608,120	624,329	633,077	1,619,824	39.08%
Michigan	1,017,455	1,004,973	984,534	1,001,051	988,640	967,146	2,233,070	43.31%
Minnesota	483,250	487,032	490,143	495,228	499,841	485,015	1,037,554	46.75%
Mississippi	475,354	479,218	482,092	484,959	488,502	487,818	711,782	68.53%
Missouri	511,724	520,779	533,716	540,063	541,683	545,594	863,651	63.17%
Montana	105,370	103,966	102,869	100,948	103,432	102,923	165,604	62.15%
Nebraska	160,165	161,008	160,854	159,470	159,779	157,129	235,523	66.71%
Nevada	281,614	283,081	285,364	276,856	272,289	265,496	541,334	49.04%
New Hampshire	91,866	91,944	91,942	91,731	92,472	92,289	169,747	54.37%
New Jersey	798,719	803,170	812,669	817,006	819,893	816,839	1,667,815	48.98%
New Mexico	-	-	-	-	-	-	687,829	-
New York	2,387,386	2,390,927	2,386,591	2,387,338	2,396,294	2,366,899	6,247,440	37.89%
North Carolina	1,179,363	1,209,053	1,199,317	1,235,442	1,251,499	1,256,336	1,835,638	68.44%
North Dakota	40,134	40,050	40,253	40,047	40,525	39,900	86,220	46.28%
Ohio	1,230,096	1,239,342	1,256,684	1,264,617	1,273,228	1,282,648	2,928,588	43.80%
Oklahoma	515,794	517,141	519,968	519,185	515,178	521,195	808,807	64.44%
Oregon	438,143	441,632	445,910	449,535	429,592	427,667	1,036,190	41.27%
Pennsylvania	1,275,437	1,287,139	1,289,774	1,284,541	1,281,125	1,282,627	2,493,851	51.43%
Rhode Island	106,484	105,240	105,304	108,783	107,292	110,321	267,466	41.25%
South Carolina	653,345	658,327	657,480	655,926	656,931	653,584	983,275	66.47%
South Dakota	78,821	78,708	78,903	79,054	79,616	80,097	117,687	68.06%
Tennessee	-	-	-	-	-	-	1,433,932	-
Texas	3,384,078	3,447,054	3,475,401	3,470,512	3,477,020	3,429,655	4,651,139	73.74%
Utah	210,702	204,271	210,620	208,306	209,252	205,744	293,359	70.13%
Vermont	68,863	67,159	-	-	69,312	69,355	179,514	38.63%
Virginia	637,902	634,163	640,670	651,943	651,609	660,836	968,216	68.25%
Washington	748,198	756,092	756,488	751,642	765,628	767,557	1,645,727	46.64%
West Virginia	212,589	209,920	208,552	207,646	203,283	207,363	524,569	39.53%
Wisconsin	-	491,362	491,325	488,148	487,464	488,890	1,042,496	46.90%
Wyoming	44,528	46,812	46,992	46,135	47,092	44,681	68,577	65.15%
<b>Total For All States</b>	<b>28,024,574</b>	<b>29,097,297</b>	<b>29,062,257</b>	<b>29,123,961</b>	<b>29,260,231</b>	<b>29,073,489</b>	<b>69,975,289</b>	<b>53.89%</b>
<b>Number of States Reporting</b>	<b>44</b>	<b>46</b>	<b>45</b>	<b>45</b>	<b>46</b>	<b>46</b>	<b>51</b>	<b>46</b>

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

For general notes on enrollment data, see Table 1: Medicaid and CHIP: December 2014 and January 2015 Preliminary Monthly Enrollment

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

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

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

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

States Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, January 2015 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, January 2015 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, January 2015 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, December 2014 (Preliminary) (IV)	% Change December 2014 to January 2015 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, January 2015 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, January 2015 (Preliminary) (VII)	Total New Determinations, January 2015 (Preliminary) (VIII)
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	26,031	N/A	26,031	24,787	5.02%	13,612	589	14,201
California	SBM	66,471	205,095	271,566	368,683	-26.34%	429,474	-	429,474
Colorado	SBM	25,906	10,410	36,316	47,107	-22.91%	25,662	332	25,994
Connecticut	SBM	10,201	19,876	30,077	44,345	-32.17%	17,849	10	17,859
Delaware	Partnership	4,549	N/A	4,549	4,865	-6.50%	1,989	73	2,062
District of Columbia	SBM	5,908	2,749	8,657	8,081	7.13%	6,114	-	6,114
Hawaii	SBM	6,130	-	6,130	8,057	-23.92%	2,015	86	2,101
Illinois	Partnership	110,888	N/A	110,888	110,347	0.49%	62,437	16,001	78,438
Indiana <sup>^</sup>	FFM	99,664	N/A	99,664	70,634	41.10%	25,375	2,907	28,282
Iowa	Partnership	18,473	N/A	18,473	15,893	16.23%	33,128	-	33,128
Kentucky	SBM	9,431	26,192	35,623	40,840	-12.77%	206,589	9,197	215,786
Maryland	SBM	18,092	49,227	67,319	162,391	-58.55%	44,767	1,023	45,790
Massachusetts	SBM	37,774	56,113	93,887	158,267	-40.68%	-	-	-
Michigan	Partnership	94,044	N/A	94,044	99,644	-5.62%	100,500	6,986	107,486
Minnesota	SBM	28,806	-	28,806	34,178	-15.72%	18,298	-	18,298
Nevada	SBM **	18,733	-	18,733	20,811	-9.99%	13,762	61	13,823
New Hampshire	Partnership	4,734	N/A	4,734	5,063	-6.50%	5,178	197	5,375
New Jersey	FFM	46,577	N/A	46,577	47,701	-2.36%	7,553	3,206	10,759
New Mexico	SBM **	-	N/A	-	-	-	-	-	-
New York	SBM	-	544,163	544,163	528,561	2.95%	105,084	14,139	119,223
North Dakota	FFM	-	N/A	-	-	-	5,619	173	5,792
Ohio	Plan Management	158,211	N/A	158,211	185,529	-14.72%	136,274	-	136,274
Oregon	SBM **	229	30,898	31,127	30,164	3.19%	52,815	-	52,815
Pennsylvania*	FFM	407,809	N/A	407,809	361,264	12.88%	129,996	5,768	135,764
Rhode Island	SBM	4,759	-	4,759	-	-	27,724	2,939	30,663
Vermont	SBM	1,490	5,687	7,177	4,490	59.84%	2,848	1,970	4,818
Washington	SBM	22,984	124,564	147,548	202,747	-27.23%	-	-	-
West Virginia	Partnership	27,019	N/A	27,019	26,536	1.82%	16,692	770	17,462
<b>Subtotal for All States Expanding Medicaid</b>		<b>1,254,913</b>	<b>1,074,974</b>	<b>2,329,887</b>	<b>2,610,985</b>	<b>-10.95%</b>	<b>1,491,354</b>	<b>66,427</b>	<b>1,557,781</b>
<b>Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month<sup>^</sup></b>		<b>1,155,249</b>	<b>1,074,974</b>	<b>2,230,223</b>	<b>2,540,351</b>	<b>-12.40%</b>	<b>1,465,979</b>	<b>63,520</b>	<b>1,529,499</b>
<b>Subtotal for States Expanding Medicaid that Reported in December 2014 and Jan 2015</b>				<b>2,325,128</b>	<b>2,610,985</b>	<b>Difference December 2014 to January 2015 -285,857</b>			

<sup>^</sup>=Indiana's effective date for implementing the expansion is February 1, 2015. IN is not included in the "Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month"

because its expansion is not implemented as of January 2015.

\*\*=Individuals in PA began to receive coverage under the expansion on January 1, 2015.

\*\*= 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 December 2014 and January 2015 Applications data (subtotals exclude AZ, ND, NM, RI).

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

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



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

Arkansas	(VI)	Includes CHIP.
California	(I)	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	(II)	Includes applications to SBM that did not request financial assistance.
California	(IV)	Reflects primarily newly-determined and likely eligible Medicaid applicants,
California		as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(VI)	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.
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	(VI)	Count is of households, not individuals.
District of Columbia	(III)	The count of applications received by the Medicaid agency and the state based marketplace may overlap; total may contain some duplicates.
District of Columbia	(VI)	Includes all determinations (e.g., renewals); includes CHIP.
Hawaii	(I)	Number includes all applications for insurance affordability programs.
Iowa	(I), (III), (IV)	Data are preliminary.
Iowa	(VI)	Includes MAGI populations only.
Iowa	(VI), (VII), (VIII)	Data are preliminary.
Iowa	(VI),(VII)	Includes renewals.
Maryland	(II)	Includes State Medicaid Agency data and SBM data from 1/1 - 1/31.
Maryland	(II), (III), (IV)	Includes all applications not only those requesting financial assistance.
Maryland	(VI)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 1/1 - 1/31.
Maryland	(VII)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 1/1 - 1/31.
Maryland	(VIII)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 1/1 - 1/31.
Massachusetts	(II), (III), (IV)	Includes all applications not only those requesting financial assistance.
Michigan	(VI)	Includes renewals.
Michigan	(VII)	Includes renewals.
Minnesota	(I), (III), (IV)	Count is of persons applying, not applications.
Minnesota	(IV)	Does not include applications to the new eligibility and enrollment system (unlike columns (I) and (III)).
Minnesota	(VI)	Includes CHIP.
Nevada	(I), (III), (IV)	Includes renewals.
Nevada	(VI)	Count is of households, not individuals. Includes renewals.
New Hampshire	(VI)	Data is derived by considering prior coverage.
New Jersey	(I), (III), (IV)	Includes applications received at county welfare agencies. Includes renewals.
New Jersey	(IV)	Corrected.
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.
New York	(VI)	Data are preliminary.

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

New York	(VII)	Data are preliminary.
New York	(VIII)	Data are preliminary.
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		Includes 90 individuals determined eligible via Targeted Enrollment Strategy.
Oregon		Includes MAGI populations only.
Oregon	(VI), (VIII)	Includes MAGI populations only.
Pennsylvania	(I), (III), (IV)	Includes renewals.
Pennsylvania	(VI), (VIII)	Includes renewals.
Rhode Island	(VI)	Includes only determinations through new MAGI system. Includes renewals.
Rhode Island	(VII)	Includes only determinations through new MAGI system. Includes renewals.
Vermont	(I), (II), (III)	Includes updates to reporting methodology.
Vermont	(VI)	Includes renewals.
Vermont	(VI), (VII), (VIII)	Includes updates to reporting methodology.

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

States Not Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, January 2015 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, January 2015 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, January 2015 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, December 2014 (Preliminary) (IV)	% Change December 2014 to January 2015 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, January 2015 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, January 2015 (Preliminary) (VII)	Total New Determinations, January 2015 (Preliminary) (VIII)
Alabama	FFM	7,469	N/A	7,469	18,292	-59.17%	16,760	-	16,760
Alaska	FFM	4,158	N/A	4,158	4,612	-9.84%	7,489	-	7,489
Florida	FFM	338,282	N/A	338,282	322,319	4.95%	182,484	15,121	197,605
Georgia	FFM	86,252	N/A	86,252	100,817	-14.45%	43,044	651	43,695
Idaho	SBM	15,080	N/A	15,080	12,150	24.12%	6,709	658	7,367
Kansas	Plan Management	8,461	N/A	8,461	8,839	-4.28%	6,734	809	7,543
Louisiana	FFM	27,985	N/A	27,985	26,872	4.14%	31,918	1,378	33,296
Maine	Plan Management	540	N/A	540	1,380	-60.87%	9,437	266	9,703
Mississippi	FFM/SBM-SHOP	20,693	N/A	20,693	18,783	10.17%	13,070	408	13,478
Missouri	FFM	28,570	N/A	28,570	27,824	2.68%	19,124	-	19,124
Montana	Plan Management	3,246	N/A	3,246	3,273	-0.82%	2,455	308	2,763
Nebraska	Plan Management	7,705	N/A	7,705	7,223	6.67%	7,621	858	8,479
North Carolina	FFM	68,986	N/A	68,986	74,222	-7.05%	133,030	5,344	138,374
Oklahoma	FFM	31,221	N/A	31,221	38,848	-19.63%	42,290	6,358	48,648
South Carolina	FFM	26,483	N/A	26,483	22,343	18.53%	-	-	-
South Dakota	Plan Management	2,895	N/A	2,895	2,939	-1.50%	1,667	-	1,667
Tennessee	FFM	1,848	N/A	1,848	1,794	3.01%	-	1,008	1,008
Texas	FFM	110,040	N/A	110,040	89,356	23.15%	87,531	12,479	100,010
Utah	FFM/SBM-SHOP	19,911	N/A	19,911	18,199	9.41%	63,007	-	63,007
Virginia	Plan Management	30,559	N/A	30,559	25,420	20.22%	26,062	2,546	28,608
Wisconsin	FFM	30,190	N/A	30,190	29,294	3.06%	26,653	3,157	29,810
Wyoming	FFM	898	N/A	898	692	29.77%	982	150	1,132
<b>Subtotal for All States Not Expanding Medicaid</b>		<b>871,472</b>	<b>N/A</b>	<b>871,472</b>	<b>855,491</b>	<b>1.87%</b>	<b>728,067</b>	<b>51,499</b>	<b>779,566</b>
<b>Subtotal for States Not Expanding Medicaid that Reported in December 2014 and January 2015</b>				<b>871,472</b>	<b>855,491</b>	<b>Difference December 2014 to January 2015 15,981</b>			
<b>Total Across All States</b>		<b>2,126,385</b>	<b>1,074,974</b>	<b>3,201,359</b>	<b>3,466,476</b>	<b>-7.79%</b>	<b>2,219,421</b>	<b>117,926</b>	<b>2,337,347</b>
<b>Total for States that Reported in December 2014 and January 2015</b>				<b>3,196,600</b>	<b>3,466,476</b>	<b>Difference December 2014 to January 2015 -269,876</b>			

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

Column V is calculated for only those states that reported December 2014 and January 2015 Applications data (totals exclude AZ, ND, NM, RI).

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.

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

Alabama	(I), (III)	Does not include applications from the joint eligibility and enrollment system, which includes CHIP data and some Medicaid data (unlike columns (IV)).
Alabama	(VIII)	Does not include determinations made by the joint eligibility and enrollment system, which includes CHIP data and some Medicaid data.
Alaska	(I), (III), (IV)	Includes renewals converting to MAGI methodology.
Alaska	(VI), (VIII)	Non-MAGI counts are of households, not individuals. MAGI determinations include CHIP.
Kansas	(I), (III), (IV)	Includes MAGI populations only.
Kansas	(VI)	Includes MAGI populations only.
North Carolina	(IV)	Corrected.
South Dakota	(I), (III), (IV)	Includes account transfers from the FFM.
South Dakota	(VI)	Includes all determinations (e.g., renewals); 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.
Virginia	(I), (III), (IV)	Includes renewals.
Virginia	(VI)	Includes renewals.
Virginia	(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: December 2014 and January 2015 Preliminary Monthly Enrollment**

**Total Medicaid and CHIP Enrollment, December 2014 (Preliminary) (I)**

**Total Medicaid and CHIP Enrollment, January 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 January 2015 data was submitted in February and is considered preliminary.<sup>28</sup> The December 2014 data in this table was submitted in January and is also preliminary. December data that was updated in February (which may include more individuals with retroactive eligibility) is posted separately under the Eligibility Data tab 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 December 2014 to January 2015 (III)**

The percentage change in **Total Medicaid and CHIP Enrollment, January 2015 (Preliminary) (II)** as compared to **Total Medicaid and CHIP Enrollment, December 2014 (Preliminary) (II)** 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 January 2015 data, which makes change between the baseline data and the January preliminary data look smaller than it would be if

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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.

retroactive enrollments were excluded from the data for the July-September 2013 period.<sup>29</sup> Such exclusions were not possible.

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

The net change in **Total Medicaid and CHIP Enrollment, January 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 January 2014 (VI)**

The percentage change in **Total Medicaid and CHIP Enrollment, January 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 through December of 2014 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: January 2015 Preliminary Monthly Medicaid CHIP Child Enrollment**

**Medicaid and CHIP Child Enrollment, August - December, 2014 ((I)-(IV))**

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

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

<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, Washington, and Wisconsin. Benefits offered vary by state.

states more than 30 days after the close to the reporting period to include enrollees with retroactive coverage and other updates.

**Medicaid and CHIP Child Enrollment, January, 2015 (Preliminary) (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>31</sup> The January 2015 data was submitted in February and is considered preliminary.<sup>32</sup>

**Total Medicaid and CHIP Enrollment, January 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 2014 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: December and November Preliminary Monthly Enrollment.

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

**Medicaid and CHIP Child Enrollment, January 2015 (Preliminary) (V) as a percentage of Total Medicaid and CHIP Enrollment, January 2015 (Preliminary) (VIII).**

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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: January 2015 Monthly Applications and Eligibility Determinations**

**Application Data Elements**

**New Applications Submitted to Medicaid and CHIP Agencies, January 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 January 2015 data was submitted in February and is considered preliminary.<sup>36</sup>

**Applications for Financial Assistance Submitted to the State-Based Marketplace, January 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 January 2015 data was submitted in January and is considered preliminary.<sup>37</sup>

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

**Total Applications for Financial Assistance Submitted at the State Level, December 2014 (Preliminary) (IV)**

For states with an SBM, the data reflects the total of **Applications Submitted to Medicaid and CHIP Agencies, January 2015 (Preliminary)** plus **Applications for Financial Assistance Submitted to the State-Based Marketplace, January 2015 (Preliminary)**. For FFM states, the data reflects **Applications Submitted to Medicaid and CHIP Agencies, January 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 January 2015 data was submitted in February and is considered preliminary. The December 2014 data in this table was submitted in January 2015 and is also preliminary. December data that was updated in February (which may include additional individuals who applied in December, but who were

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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.



not captured in the preliminary data) is posted separately under the Eligibility Data tab on Medicaid.gov.

**Percentage Change December 2014 to January 2015 (V)**

The percentage change in **Total Applications for Financial Assistance Submitted at the State Level, January 2015 (Preliminary) (III)** as compared to **Total Preliminary Applications Submitted at the State Level, December 2014 (Preliminary) (IV)** is calculated for states that provided data for both periods.

**Eligibility Determination Data Elements**

**Individuals Determined Eligible for Medicaid at Application, January 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 January 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

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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, due to data limitations, 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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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).

#### **Individuals Determined Eligible for CHIP at Application, January 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 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 January 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, January 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.