

Medicaid & CHIP: August 2016 Monthly Applications, Eligibility Determinations and Enrollment Report

November 3, 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 August 2016. This report measures eligibility and enrollment activity for the entire Medicaid and CHIP programs in all states¹, 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.² 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.³

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

- 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

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

² As of August 2016, thirty-two 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. Louisiana implemented its new Medicaid expansion, Healthy Louisiana, on July 1, 2016. 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 or adults without dependent children who are under age 65 at all.

³ 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.

⁴ 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: Final Enrollment Report (March 11, 2016).

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- 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 August 2016 data presented in this report should be considered preliminary. We have published updated data for July 2016 applications, eligibility determinations and enrollment on Medicaid.gov, which includes a more complete data set than the previously reported preliminary July 2016 data.

Medicaid and CHIP August 2016 Enrollment Data Highlights

Total Individuals Enrolled in Medicaid and CHIP in August 2016 in All States Reporting August Data (includes all individuals enrolled in the program on the last day of the reporting period)⁵	73,137,154 ⁶
Additional enrollment since October 2013 when the initial Marketplace open enrollment period began, among the 49 states reporting both August 2016 enrollment data and data from July-September of 2013⁷	15,712,869

- Over 73.1 million individuals were enrolled in Medicaid and CHIP in August 2016.⁸ This enrollment count is a 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.
- 326,887 additional individuals were enrolled in August 2016 as compared to July 2016 in the 51 states that reported comparable July and August 2016 data.⁹
- Looking at the additional enrollment since October 2013 when the initial Marketplace open enrollment period began, among the 49 states reporting both August 2016 enrollment data and data from July-September of 2013, over 15.7 million additional individuals are enrolled in

⁵ 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.

⁶ 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 August 2016 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.

⁷ Connecticut and Maine did not submit enrollment data for the July-September 2013 baseline period.

⁸ See footnote 5 and 6.

⁹ See the notes in Table 1 for state-specific caveats regarding the reported data.

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Medicaid and CHIP as of August 2016, almost a 27.9 percent increase over the average monthly enrollment for July through September of 2013.¹⁰ (Connecticut and Maine are not included in this count because they did not submit enrollment data for the July-September 2013 baseline period).

- Among states that had implemented the Medicaid expansion and were covering newly eligible adults in August 2016, Medicaid and CHIP enrollment rose by nearly 36 percent compared to the July-September 2013 baseline period, while states that have not, to date, expanded Medicaid reported an increase of over 12.5 percent over the same period.¹¹
- 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.¹² Seven states implemented an “early option” to expand Medicaid coverage to adults with incomes up to 133 percent of the Federal Poverty Line (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.¹³

¹⁰ The net change in enrollment is based on data from the 49 states reporting both August 2016 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 August of over 72.1 million individuals, and July-September 2013 average enrollment of approximately 56.4 million. For August 2016, we are reporting growth of 15,712,869 compared to July-September 2013. This figure is greater than the 15,393,550 in net enrollment growth that was included in the *Medicaid and CHIP: July 2016 Applications, Eligibility Determinations, and Enrollment Report* by over 319,000. This difference does not match the 326,887 increase reported above for the July to August 2016 period because the 326,887 figure is based on 51 states, while the 319,000 figure is based on only 49 states. Please note, the July-September 2013 data may contain individuals with retroactive Medicaid coverage, and the August 2016 data included in this report is preliminary (see footnote 6), thus, the difference reported here between August 2016 and July-September 2013 period is likely understated.

¹¹ Percentage calculations are based only on states reporting in both August 2016 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.

¹² 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).

¹³ 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 \(May 1, 2014\)](#).

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As with previous reports, multiple factors contributed to the change in enrollment between August 2016 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 August and whose application will be fully processed after August 31st; 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 August 2016, applied for Medicaid in a later month, and qualify for retroactive Medicaid coverage in August 2016.¹⁴ 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.¹⁵

¹⁴ See footnote 6 for additional information on retroactive eligibility.

¹⁵ 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

Total Medicaid child and CHIP enrollment in the 48 states reporting in August 2016¹⁶	35,518,821¹⁷
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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 March and August 2016.¹⁸ This data appears in Table 2.¹⁹

- In the 48 states that reported relevant data for the month of August, more than 35.5 million individuals are enrolled in CHIP or are children enrolled in the Medicaid program. Similar to the two prior months (June and July 2016), New Mexico reported child enrollment in August 2016; therefore, the child enrollment figures reported in the June, July and August 2016 reports are not comparable to the corresponding statistics in earlier reports where New Mexico did not report child enrollment data.
- In the 48 states that reported both August 2016 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 51.1 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 states have continued to expand coverage since then.²⁰

¹⁶ This figure includes children enrolled in the Medicaid program and the total enrollment for separate CHIP programs, which is composed 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. Arizona, the District of Columbia, and Tennessee did not submit child enrollment data for August 2016.

¹⁷ See the notes in Table 2 for state-specific caveats.

¹⁸ In Table 2, the reported August 2016 child enrollment figure appears to be larger than the total enrollment figures from March through May 2016 because only 47 states submitted child enrollment data in these earlier months, as compared to the 48 in June, July and August 2016. Also, please note, 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 August 2016 data included in this report is collected in the month after the reporting period and includes very few (if any) children enrolled retroactively. An updated August figure that includes more retroactively enrolled individuals will be included in the next report in this series.

¹⁹ Children are included in the total number of individuals enrolled in Medicaid and CHIP in August 2016, as reported on page 2 and in Table 1. Total enrollment data for January 2014 through July 2016 is available on Medicaid.gov.

²⁰ 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 5th Anniversary of CHIPRA*, February 4, 2014, http://aspe.hhs.gov/health/reports/2014/CHIPRA_5thAnniversary/ib_CHIPRA5thanniversary.pdf

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Medicaid and CHIP August 2016 Application and Eligibility Data Highlights

	August 2016 Monthly in All States Reporting
<i>Applications</i>	
Applications for Financial Assistance Initially Received by State Medicaid and CHIP Agencies (note that more than one individual may be included on an application and some states have included renewals and account transfers from the FFM)	1,759,317 ²¹
Applications for Financial Assistance Initially Received by State-Based Marketplaces (note that more than one individual may be included on an application)	814,789 ²²
<i>Eligibility Determinations</i>	
Individuals Determined Eligible for Medicaid and CHIP by State Agencies at Application (includes those newly eligible under the Affordable Care Act and those eligible under prior law)	1,567,436 ²³

During the month of August 2016, approximately 2.6 million applications for coverage and financial assistance (including Medicaid and CHIP coverage, tax credits and subsidies) were submitted at the state level (including almost 1.8 million received directly by state Medicaid and CHIP agencies and over 800,000 received by SBMs).²⁴ 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 August 2016 as compared to the prior month (July 2016). 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).²⁵

States reported making nearly 1.6 million eligibility determinations for Medicaid and CHIP in August 2016 for individuals applying for coverage. As described above and in prior reports, this figure includes

²¹ 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.

²² 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.

²³ 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.

²⁴ The following states have included renewals in their August 2016 application data: Alaska, the District of Columbia, Nevada, New York, Ohio, Pennsylvania, Vermont, and Virginia. South Dakota and Utah included transfers from the FFM in its August 2016 application data.

²⁵ See footnote 21.

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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.²⁶ 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.²⁷

See the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on Medicaid.gov for preliminary and updated data on applications and determinations for October 2013 through July 2016.

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 August 2016. The second table contains data on children enrolled in state Medicaid and CHIP programs in August 2016. The third table contains data on Medicaid and CHIP applications and eligibility determinations for the month of August 2016. 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 August 1 – 31, 2016.

²⁶ The states that have included renewals in their August 2016 determination data are: District of Columbia, Iowa, Michigan, Nevada, 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.

²⁷ 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 August 2016. 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: July and August 2016 Preliminary Monthly Enrollment

		Enrollment					
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, July 2016 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, August 2016 (Preliminary) (II)	% Change July to August 2016 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (VI)
Alaska	FFM	158,453	162,366	2.47%	122,334	40,032	32.72%
Arizona	FFM	1,699,635	1,716,198	0.97%	1,201,770	514,428	42.81%
Arkansas	Partnership	889,082	920,194	3.50%	556,851	363,343	65.25%
California	SBM	11,902,445	11,843,081	-0.50%	7,755,381	4,087,700	52.71%
Colorado	SBM	1,353,757	1,362,329	0.63%	783,420	578,909	73.90%
Connecticut	SBM	753,413	761,137	1.03%	-	-	-
Delaware	Partnership	236,248	236,702	0.19%	223,324	13,378	5.99%
District of Columbia	SBM	258,918	255,491	-1.32%	235,786	19,705	8.36%
Hawaii	SBM**	340,829	340,946	0.03%	288,357	52,589	18.24%
Illinois	Partnership	3,088,044	3,114,000	0.84%	2,626,943	487,057	18.54%
Indiana	FFM	1,473,414	1,481,869	0.57%	1,120,674	361,195	32.23%
Iowa	Partnership	613,386	619,055	0.92%	493,515	125,540	25.44%
Kentucky	SBM	1,223,869	1,220,788	-0.25%	606,805	613,983	101.18%
Louisiana^	FFM	1,308,428	1,328,708	1.55%	1,019,787	308,921	30.29%
Maryland	SBM	1,226,309	1,240,791	1.18%	856,297	384,494	44.90%
Massachusetts	SBM	1,660,518	1,666,706	0.37%	1,296,359	370,347	28.57%
Michigan	Partnership	2,273,394	2,273,867	0.02%	1,912,009	361,858	18.93%
Minnesota	SBM	1,026,023	1,035,656	0.94%	873,040	162,616	18.63%
Montana	Plan Management	239,250	241,016	0.74%	148,974	92,042	61.78%
Nevada	SBM**	609,435	614,298	0.80%	332,560	281,738	84.72%
New Hampshire	Partnership	185,735	185,767	0.02%	127,082	58,685	46.18%
New Jersey	FFM	1,749,400	1,757,341	0.45%	1,283,851	473,490	36.88%
New Mexico	SBM**	761,033	766,732	0.75%	457,678	309,054	67.53%
New York	SBM	6,372,384	6,412,390	0.63%	5,678,417	733,973	12.93%
North Dakota	FFM	89,460	89,763	0.34%	69,980	19,783	28.27%
Ohio	Plan Management	2,941,236	3,003,170	2.11%	2,341,481	661,689	28.26%
Oregon	SBM**	1,019,340	1,005,360	-1.37%	626,356	379,004	60.51%
Pennsylvania	FFM	2,834,129	2,854,944	0.73%	2,386,046	468,898	19.65%
Rhode Island	SBM	283,838	287,021	1.12%	190,833	96,188	50.40%
Vermont	SBM	178,142	173,875	-2.40%	161,081	12,794	7.94%
Washington	SBM	1,775,882	1,781,499	0.32%	1,117,576	663,923	59.41%
West Virginia	Partnership	572,107	575,645	0.62%	354,544	221,101	62.36%
Subtotal for All States Expanding Medicaid		51,097,536	51,328,705	0.45%	37,249,111	13,318,457	35.76%
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		51,097,536	51,328,705	0.45%	37,249,111	13,318,457	35.76%
Subtotal for States Expanding Medicaid that Reported in July and August 2016		51,097,536	51,328,705	Difference July to August 2016 231,169			
Subtotal for States Expanding Medicaid that Reported in August 2016 and July-Sept. 2013			50,567,568		37,249,111	Difference July-Sept 2013 to August 2016 13,318,457	

Table 1: Medicaid and CHIP: July and August 2016 Preliminary Monthly Enrollment

**= 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 July and August 2016 data.

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

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

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

Table 1: Medicaid and CHIP: July and August 2016 Preliminary Monthly Enrollment

		Enrollment					
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, July 2016 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, August 2016 (Preliminary) (II)	% Change July to August 2016 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (VI)
Alabama	FFM	885,046	889,441	0.50%	799,176	90,265	11.29%
Florida	FFM	3,620,085	3,644,673	0.68%	3,104,996	539,677	17.38%
Georgia	FFM	1,744,095	1,749,462	0.31%	1,535,090	214,372	13.96%
Idaho	SBM	289,858	293,034	1.10%	238,150	54,884	23.05%
Kansas	Plan Management	422,549	421,638	-0.22%	378,160	43,478	11.50%
Maine	Plan Management	270,827	270,671	-0.06%	-	-	-
Mississippi	FFM/SBM-SHOP	687,219	684,022	-0.47%	637,229	46,793	7.34%
Missouri	FFM	961,073	967,284	0.65%	846,084	121,200	14.32%
Nebraska	Plan Management	234,836	236,148	0.56%	244,600	-8,452	-3.46%
North Carolina	FFM	1,984,599	2,004,486	1.00%	1,595,952	408,534	25.60%
Oklahoma	FFM	787,331	788,544	0.15%	790,051	-1,507	-0.19%
South Carolina	FFM	987,147	994,804	0.78%	889,744	105,060	11.81%
South Dakota	Plan Management	119,252	119,835	0.49%	115,501	4,334	3.75%
Tennessee	FFM	1,628,196	1,624,284	-0.24%	1,244,516	379,768	30.52%
Texas	FFM	4,708,051	4,730,940	0.49%	4,441,605	289,335	6.51%
Utah	FFM/SBM-SHOP	306,857	308,265	0.46%	294,029	14,236	4.84%
Virginia	Plan Management	966,932	970,438	0.36%	935,434	35,004	3.74%
Wisconsin	FFM	1,045,160	1,046,897	0.17%	985,531	61,366	6.23%
Wyoming	FFM	63,618	63,583	-0.06%	67,518	-3,935	-5.83%
Subtotal for All States Not Expanding Medicaid		21,712,731	21,808,449	0.44%	19,143,366	2,394,412	12.51%
Subtotal for States Not Expanding Medicaid that Reported in July and August 2016		21,712,731	21,808,449	Difference July to August 2016 95,718			
Subtotal for States Not Expanding Medicaid that Reported in August 2016 and July-Sept. 2013			21,537,778		19,143,366	Difference July-Sept 2013 to August 2016 2,394,412	

Table 1: Medicaid and CHIP: July and August 2016 Preliminary Monthly Enrollment

(-)=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 July and August 2016 data.

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

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

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

Table 1: Medicaid and CHIP: July and August 2016 Preliminary Monthly Enrollment

Total Enrollment						
All States	Total Medicaid and CHIP Enrollment, July 2016 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, August 2016 (Preliminary) (II)	% Change July to August 2016 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to August 2016 (Columns (IV) and (II)) (VI)
Total Across All States	72,810,267	73,137,154	0.45%	56,392,477	15,712,869	27.86%
Total for States that Reported in July and August 2016	72,810,267	73,137,154	Difference July to August 2016 326,887			
Total for States that Reported in August 2016 and July-Sept. 2013		72,105,346		56,392,477	Difference July-Sept 2013 to August 2016 15,712,869	

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

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

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

Table 2: Medicaid and CHIP: August 2016 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))
	March, 2016 (I)	April, 2016 (II)	May, 2016 (III)	June, 2016 (IV)	July, 2016 (V)	August, 2016 (Preliminary) (VI)	August, 2016 (Preliminary) (VII)	August, 2016 (Preliminary) (VIII)
Alabama	637,234	638,975	636,871	635,498	635,474	630,391	889,441	70.87%
Alaska	77,113	78,075	78,560	79,098	79,820	79,289	1,623,666	48.83%
Arizona	-	-	-	-	-	-	1,716,198	-
Arkansas	392,649	374,740	385,362	394,352	416,522	436,815	920,194	47.47%
California	5,104,737	5,225,309	5,196,125	5,323,854	5,272,422	5,102,963	11,843,081	43.09%
Colorado	619,491	621,630	622,329	623,755	625,547	626,071	1,362,329	45.96%
Connecticut	304,473	306,895	306,947	306,934	302,790	306,614	761,137	40.28%
Delaware	108,306	102,741	102,787	103,185	103,483	103,587	236,702	43.76%
District of Columbia	-	-	-	-	-	-	255,491	-
Florida	2,426,661	2,425,669	2,429,872	2,435,202	2,447,125	2,462,518	3,644,673	67.56%
Georgia	1,260,367	1,263,285	1,258,561	1,256,036	1,249,207	1,230,671	1,749,462	70.35%
Hawaii	144,026	144,561	144,544	144,905	144,953	144,641	340,946	42.42%
Idaho	210,905	211,642	211,755	212,737	213,536	214,837	293,034	73.31%
Illinois	1,473,568	1,465,478	1,464,251	1,459,641	1,457,438	1,449,515	3,114,000	46.55%
Indiana	782,990	780,839	777,897	778,700	779,476	768,771	1,481,869	51.88%
Iowa	303,590	300,517	301,411	301,153	296,546	300,017	619,055	48.46%
Kansas	288,023	292,445	295,328	299,333	300,675	298,723	421,638	70.85%
Kentucky	541,465	553,840	553,947	560,376	556,611	555,243	1,220,788	45.48%
Louisiana ^A	768,945	762,091	758,863	758,463	758,186	758,432	1,328,708	57.08%
Maine	117,524	117,121	116,411	115,707	115,297	113,974	270,671	42.11%
Maryland	574,432	576,522	579,993	583,842	586,851	587,231	1,240,791	47.33%
Massachusetts	652,995	656,753	664,351	663,057	667,912	664,870	1,666,706	39.89%
Michigan	980,866	981,248	978,169	977,327	975,907	957,415	2,273,867	42.11%
Minnesota	510,198	513,030	515,162	517,377	516,492	510,579	1,035,656	49.30%
Mississippi	478,201	477,961	476,884	475,345	473,143	465,016	684,022	67.98%
Missouri	611,810	618,132	620,323	620,557	619,592	624,612	967,284	64.57%
Montana	117,629	118,086	118,710	118,965	118,365	119,572	241,016	49.61%
Nebraska	160,516	160,532	160,128	160,032	160,434	156,700	236,148	66.36%
Nevada	290,282	290,861	292,025	292,404	293,183	295,720	614,298	48.14%
New Hampshire	96,155	95,863	95,470	95,324	94,878	93,280	185,767	50.21%
New Jersey	841,958	843,031	845,968	845,855	847,398	836,802	1,757,341	47.62%
New Mexico	-	-	-	355,611	356,573	358,107	766,732	46.71%
New York	2,444,592	2,447,833	2,457,391	2,454,668	2,459,451	2,457,842	6,412,390	38.33%
North Carolina	1,406,941	1,410,923	1,416,126	1,414,083	1,421,816	1,387,590	2,004,486	69.22%
North Dakota	38,425	39,713	41,883	42,005	41,769	41,959	89,763	46.74%
Ohio	1,266,425	1,262,703	1,261,881	1,258,439	1,256,056	1,260,252	3,003,170	41.96%
Oklahoma	503,660	502,680	501,349	505,667	510,043	512,059	788,544	64.94%
Oregon	440,202	426,368	426,103	423,080	419,835	408,614	1,005,360	40.64%
Pennsylvania	1,363,699	1,362,517	1,366,499	1,368,280	1,367,123	1,364,884	2,854,944	47.81%
Rhode Island	113,500	113,692	113,891	114,894	114,938	115,247	287,021	40.15%
South Carolina	630,961	635,881	638,595	642,536	625,920	630,610	994,804	63.39%
South Dakota	81,649	81,668	81,865	81,971	82,015	82,431	119,835	68.79%
Tennessee	-	-	-	-	-	-	1,624,284	-
Texas	3,496,330	3,478,334	3,484,991	3,491,429	3,492,205	3,483,347	4,730,940	73.63%
Utah	223,372	222,698	222,188	221,327	220,801	217,712	308,265	70.62%
Vermont	68,653	68,871	67,628	66,844	65,294	63,739	173,875	36.66%
Virginia	660,638	659,612	659,649	658,628	659,323	648,371	970,438	66.81%
Washington	829,139	828,309	828,273	829,165	829,519	828,754	1,781,499	46.52%
West Virginia	212,835	225,731	214,001	227,083	226,886	228,688	575,645	39.73%
Wisconsin	495,267	493,692	494,362	493,726	493,137	493,942	1,046,897	47.18%
Wyoming	40,371	40,404	40,384	40,420	39,914	39,804	63,583	62.60%
Total For All States	35,193,768	35,299,501	35,306,063	35,828,870	35,791,881	35,518,821	73,137,154	51.08%
Number of States Reporting	47	47	47	48	48	48	51	48

Table 2: Medicaid and CHIP: August 2016 Preliminary Monthly Medicaid and CHIP Child Enrollment

For general notes on enrollment data, see Table 1: Medicaid and CHIP: July and August 2016 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 CO, MO, NJ, RI, VA.

Column VIII is calculated for only those states that reported both August 2016 child enrollment data and August 2016 Total Medicaid and CHIP enrollment data.

Michigan	(I) - (VII)	Does not include share of cost and full benefit 1115 waiver enrollees.
Missouri	(I) - (VII)	Does not include all individuals funded under Title XXI or enrollees in a premium grace period.
New York	(I) - (VII)	Includes estimated retroactive enrollment.
Washington	(I) - (VII)	Includes individuals enrolled at any point during the month.
West Virginia	(I)	Excludes foster care children.

Table 3: Medicaid and CHIP: August 2016 Monthly Applications and Eligibility Determinations

States Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, August 2016 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, August 2016 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, August 2016 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, July 2016 (Preliminary) (IV)	% Change July to August 2016 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, August 2016 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, August 2016 (Preliminary) (VII)	Total New Determinations, August 2016 (Preliminary) (VIII)
Alaska	FFM	3,612	N/A	3,612	2,383	51.57%	4,455	-	4,455
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	19,215	N/A	19,215	14,890	29.05%	21,200	1,522	22,722
California	SBM	49,340	-	49,340	54,429	-9.35%	108,494	8,967	117,461
Colorado	SBM	22,247	2,243	24,490	21,185	15.60%	20,801	266	21,067
Connecticut	SBM	11,241	5,198	16,439	14,500	13.37%	14,942	138	15,080
Delaware	Partnership	3,266	N/A	3,266	2,611	25.09%	679	29	708
District of Columbia	SBM	6,417	-	6,417	5,436	18.05%	7,189	-	7,189
Hawaii	SBM**	4,401	-	4,401	3,896	12.96%	6,030	287	6,317
Illinois	Partnership	86,653	N/A	86,653	70,438	23.02%	53,749	17,503	71,252
Indiana	FFM	93,679	N/A	93,679	78,861	18.79%	42,022	3,481	45,503
Iowa	Partnership	22,850	N/A	22,850	19,454	17.46%	3,127	-	3,127
Kentucky	SBM	-	14,994	14,994	12,954	15.75%	36,862	1,679	38,541
Louisiana^	FFM	40,032	N/A	40,032	42,825	-6.52%	50,354	2,033	52,387
Maryland	SBM	7,160	89,206	96,366	93,828	2.70%	25,209	2,231	27,440
Massachusetts	SBM	12,230	9,116	21,346	20,553	3.86%	-	-	-
Michigan	Partnership	69,438	N/A	69,438	60,249	15.25%	76,603	-	76,603
Minnesota	SBM	6,305	20,550	26,855	21,337	25.86%	25,848	73	25,921
Montana	Plan Management	4,924	N/A	4,924	3,829	28.60%	6,132	292	6,424
Nevada	SBM**	21,099	-	21,099	17,521	20.42%	13,666	64	13,730
New Hampshire	Partnership	8,657	N/A	8,657	7,340	17.94%	5,367	508	5,875
New Jersey	FFM	36,724	N/A	36,724	31,948	14.95%	14,554	5,591	20,145
New Mexico	SBM**	9,851	N/A	9,851	8,178	20.46%	-	-	-
New York	SBM	-	597,938	597,938	636,132	-6.00%	112,657	3,687	116,344
North Dakota	FFM	2,105	N/A	2,105	1,687	24.78%	2,697	84	2,781
Ohio	Plan Management	193,513	N/A	193,513	136,037	42.25%	55,166	3,285	58,451
Oregon	SBM**	27,810	-	27,810	30,577	-9.05%	38,895	3,832	42,727
Pennsylvania	FFM	145,672	N/A	145,672	141,588	2.88%	50,918	9,543	60,461
Rhode Island	SBM	-	13,086	13,086	11,368	15.11%	12,388	1,801	14,189
Vermont	SBM	3,781	2,568	6,349	5,531	14.79%	3,216	29	3,245
Washington	SBM	19,312	59,890	79,202	71,889	10.17%	42,090	934	43,024
West Virginia	Partnership	25,453	N/A	25,453	26,287	-3.17%	13,960	692	14,652
Subtotal for All States Expanding Medicaid		956,987	814,789	1,771,776	1,669,741	6.11%	869,270	68,551	937,821
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		956,987	814,789	1,771,776	1,669,741	6.11%	869,270	68,551	937,821
Subtotal for States Expanding Medicaid that Reported in July and August 2016				1,771,776	1,669,741	Difference July to August 2016 102,035			

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

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

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

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

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

Table 3: Medicaid and CHIP: August 2016 Monthly Applications and Eligibility Determinations

Alaska	(I), (III), (IV), (VI), (VII)	Includes renewals converting to MAGI methodology.
Alaska	(VI), (VIII)	Includes CHIP.
California	(I),(IV)	Reflects primarily newly-determined and likely eligible Medicaid applicants,
California		as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(I), (III), (IV), (VI), (VII), (VIII)	Does not include data from all consortia.
California	(VI)	Reflects primarily newly-determined and likely eligible Medicaid applicants
California		as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(VI), (VII), (VIII)	Does not include all eligibility determinations.
Connecticut	(I), (III), (IV)	Data may include some duplication of applications between Medicaid and CHIP.
Connecticut	(II)	Data may contain duplicate applications.
Connecticut	(II), (VI), (VII), (VIII)	May include some change in circumstance updates that are not new applications for coverage.
District of Columbia	(I)	Includes SBM data.
District of Columbia	(III), (IV)	Includes renewals.
District of Columbia	(VI)	Includes all determinations (e.g., renewals); includes CHIP.
Iowa	(IV)	Corrected.
Iowa	(VI)	Does not include MAGI determinations.
Iowa	(VI), (VII), (VIII)	Data are incomplete; does not include all determinations.
Iowa	(I), (III), (IV), (VI), (VII)	Includes renewals.
Iowa	(I), (III), (IV)	Includes SSI enrollees automatically enrolled in Medicaid without submitting an application.
Maryland	(VI), (VII), (VIII)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 8/1 - 8/31.
Maryland	(II), (III), (IV), (VI), (VII), (VIII)	Includes some renewals from the SBM.
Michigan	(VI)	Does not include MAGI determinations.
Michigan	(VI)	Includes renewals.
Nevada	(I), (III), (IV)	Includes renewals.
Nevada	(VI)	Count is of households, not individuals. Includes renewals.
New Jersey	(I), (III), (IV)	Includes applications received at county welfare agencies.
New Jersey	(VI), (VII), (VIII)	Does not include all eligibility determinations; county welfare agencies determinations are not included in this data.
New York	(II), (III), (IV), (VI), (VII), (VIII)	Includes renewals.
Ohio	(I), (III), (IV)	Includes renewals. May include some applications only for other benefits, not for Medicaid and CHIP.
Ohio	(VI)	Includes CHIP.
Ohio	(VI), (VIII)	Includes renewals.
Oregon	(VI)	Count is of households, not individuals.
Oregon	(I), (III), (IV)	Includes MAGI populations only.
Pennsylvania	(I), (III), (IV)	Includes renewals.
Pennsylvania	(VI), (VIII)	Includes renewals.
Pennsylvania	(VI), (VII), (VIII)	Count is of households, not individuals.
Rhode Island	(I), (III), (IV), (VI), (VII)	Includes only applications received and determinations made through new MAGI system.
Vermont	(III), (IV)	Includes renewals.
Vermont	(VI)	Includes renewals.

Table 3: Medicaid and CHIP: August 2016 Monthly Applications and Eligibility Determinations

States Not Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, August 2016 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, August 2016 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, August 2016 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, July 2016 (Preliminary) (IV)	% Change July to August 2016 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, August 2016 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, August 2016 (Preliminary) (VII)	Total New Determinations, August 2016 (Preliminary) (VIII)
Alabama	FFM	17,921	N/A	17,921	14,866	20.55%	26,749	3,411	30,160
Florida	FFM	331,767	N/A	331,767	288,999	14.80%	150,406	18,867	169,273
Georgia	FFM	85,120	N/A	85,120	71,882	18.42%	44,045	2,293	46,338
Idaho	SBM	8,548	-	8,548	7,127	19.94%	6,112	343	6,455
Kansas	Plan Management	-	N/A	-	-	-	-	-	-
Maine	Plan Management	1,856	N/A	1,856	1,431	29.70%	11,555	379	11,934
Mississippi	FFM/SBM-SHOP	19,488	N/A	19,488	16,403	18.81%	12,469	499	12,968
Missouri	FFM	22,733	N/A	22,733	18,772	21.10%	10,360	-	10,360
Nebraska	Plan Management	7,761	N/A	7,761	6,251	24.16%	7,510	855	8,365
North Carolina	FFM	24,611	N/A	24,611	22,127	11.23%	41,294	4,854	46,148
Oklahoma	FFM	45,108	N/A	45,108	38,353	17.61%	46,599	7,332	53,931
South Carolina	FFM	26,003	N/A	26,003	22,034	18.01%	6,150	148	6,298
South Dakota	Plan Management	2,899	N/A	2,899	2,411	20.24%	1,834	-	1,834
Tennessee	FFM	564	N/A	564	462	22.08%	-	422	422
Texas	FFM	129,041	N/A	129,041	107,089	20.50%	117,910	18,433	136,343
Utah	FFM/SBM-SHOP	23,948	N/A	23,948	18,819	27.25%	49,596	-	49,596
Virginia	Plan Management	26,612	N/A	26,612	22,759	16.93%	18,323	697	19,020
Wisconsin	FFM	26,655	N/A	26,655	22,208	20.02%	18,438	1,732	20,170
Wyoming	FFM	1,695	N/A	1,695	1,252	35.38%	-	-	-
Subtotal for All States Not Expanding Medicaid		802,330	-	802,330	683,245	17.43%	569,350	60,265	629,615
Subtotal for States Not Expanding Medicaid that Reported in July and August 2016				802,330	683,245	Difference July to August 2016 119,085			
Total Across All States		1,759,317	814,789	2,574,106	2,352,986	9.39%	1,438,620	128,816	1,567,436
Total for States that Reported in July and August 2016				2,574,106	2,352,986	Difference July to August 2016 221,120			

Table 3: Medicaid and CHIP: August 2016 Monthly Applications and Eligibility Determinations

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

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

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

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

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

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

APPENDIX A: Description of Data Elements in Tables

Table 1: Medicaid and CHIP: July and August 2016 Preliminary Monthly Enrollment

Total Medicaid and CHIP Enrollment, July 2016 (Preliminary) (I)

Total Medicaid and CHIP Enrollment, August 2016 (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 August 2016 data was submitted in September and is considered preliminary.²⁸ The July 2016 data in this table was submitted in August and is also preliminary. July data that was updated in September (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 July 2016 to August 2016 (III)

The percentage change in **Total Medicaid and CHIP Enrollment, August 2016 (Preliminary) (II)** as compared to **Total Medicaid and CHIP Enrollment, July 2016 (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 August 2016 data, which makes change between the baseline data and the August preliminary data look smaller than it would be if retroactive enrollments were excluded from the data for the July-September 2013 period.²⁹ Such exclusions were not possible.

²⁸ 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.

²⁹ See footnote 28.

Net Change, July-Sept. 2013 to August 2016 (V)

The net change in **Total Medicaid and CHIP Enrollment, August 2016 (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 August 2016 (VI)

The percentage change in **Total Medicaid and CHIP Enrollment, August 2016 (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 July 2016 is available on the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on 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: August 2016 Preliminary Monthly Medicaid Child and CHIP Enrollment

Medicaid Child and CHIP Enrollment, March - July 2016 ((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.³⁰ 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, August 2016 (Preliminary) (VI)

As of the last day of the calendar month—

³⁰ 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.

- 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.³¹ The August 2016 data was submitted in September and is considered preliminary.³²

Total Medicaid and CHIP Enrollment, August 2016 (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 August 2016 data was submitted in September and is considered preliminary.³³ This data is the same as the data reported in column (II) in Table 1: Medicaid and CHIP: July 2016 and August 2016 Preliminary Monthly Enrollment.

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

Medicaid and CHIP Child Enrollment, August 2016 (Preliminary) (VI) as a percentage of Total Medicaid and CHIP Enrollment, August 2016 (Preliminary) (VII).

³¹ See footnote 30.

³² See footnote 28.

³³ See footnote 28.

Table 3: Medicaid and CHIP: August 2016 Monthly Applications and Eligibility Determinations

Application Data Elements

New Applications Submitted to Medicaid and CHIP Agencies, August 2016 (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).³⁴ 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.³⁵ The August 2016 data was submitted in September and is considered preliminary.³⁶

Applications for Financial Assistance Submitted to the State-Based Marketplace, August 2016 (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 August 2016 data was submitted in September and is considered preliminary.³⁷

Total Applications for Financial Assistance Submitted at the State Level, August 2016 (Preliminary) (III)

Total Applications for Financial Assistance Submitted at the State Level, July 2016 (Preliminary) (IV)

For states with an SBM, the data reflects the total of **Applications Submitted to Medicaid and CHIP Agencies, August 2016 (Preliminary)** plus **Applications for Financial Assistance Submitted to the State-Based Marketplace, August 2016 (Preliminary)**. For FFM states, the data reflects **Applications Submitted to Medicaid and CHIP Agencies, August 2016 (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 August 2016 data was submitted in September and is considered preliminary. The July 2016 data in this table was submitted in August and is also preliminary. July data that was updated in September (which may include additional individuals who applied in July, but who were not captured in the preliminary data) is posted separately on Medicaid.gov.

Percentage Change July 2016 to August 2016 (V)

³⁴ 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.

³⁵ 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.

³⁶ See footnote 28.

³⁷ See footnote 28.

The percentage change in **Total Applications for Financial Assistance Submitted at the State Level, August 2016 (Preliminary) (III)** as compared to **Total Preliminary Applications Submitted at the State Level, July 2016 (Preliminary) (IV)** is calculated for states that provided data for both periods.

Eligibility Determination Data Elements

Individuals Determined Eligible for Medicaid at Application, August 2016 (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.³⁸ 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.³⁹ 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 modified adjusted gross income (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 August 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, August 2016 (VII)

³⁸ 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>.

³⁹ 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.

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 August 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.

Total New Determinations, August 2016 (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.