

## Medicaid & CHIP: June 2014 Monthly Applications, Eligibility Determinations and Enrollment Report August 8, 2014

#### **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 June 2014. The data included in this report were submitted to CMS from state Medicaid and CHIP agencies as part of the Medicaid and CHIP Performance Indicator process.

Through the Medicaid and CHIP Performance Indicator process, states report on a common set of indicators designed to provide information to support program management and policy-making. State Medicaid and CHIP programs submit data to CMS on a range of indicators related to application, eligibility and enrollment processes. It is important to note that states are still transitioning to the standardized data definitions described in Appendix A, which limits the conclusions that can be drawn from the data.

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

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

As with each monthly report, given that states are reporting monthly data to CMS soon after the close of the month, the June 2014 data presented in this report should be considered preliminary. We have also published updated data for May 2014 applications, eligibility determinations, and enrollment <u>on</u> <u>Medicaid.gov</u>, which includes a more complete data set than the preliminary May data reported last month.

Medicaid and CHIP are longstanding programs that serve many populations in addition to those that might be newly eligible for Medicaid under the new low-income adult group established by the Affordable Care Act. Therefore, this report, which measures eligibility and enrollment activity for the entire Medicaid and CHIP program, necessarily captures data beyond the newly eligible individuals in states that have expanded Medicaid coverage. In addition, this report includes data from all states, not just those that have adopted the new low-income adult group.<sup>1</sup> Changes in eligibility and enrollment processes ushered in by the Affordable Care Act, which are discussed below, are in effect in all states and are likely to promote coverage among previously eligible but uninsured adults and children. The data elements are explained more fully in Appendix A.

#### Medicaid and CHIP June 2014 Enrollment Data Highlights<sup>2</sup>

Across the 49 states (including the District of Columbia) that provided enrollment data for June 2014, states reported that approximately 66 million individuals were enrolled in Medicaid and CHIP.<sup>5</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. (Maine and North Dakota are not included in this count.)

<sup>5</sup> See footnote 3.

<sup>&</sup>lt;sup>1</sup> As of June 2014, twenty-five states and the District of Columbia have implemented the expansion of Medicaid coverage under the Affordable Care Act to adults under age 65 with incomes up to 133 percent of the Federal Poverty Level in 2014. (New Hampshire's expansion went into effect on July 1, 2014, with coverage becoming effective August 15, 2014.) There is no deadline for when a state must decide whether to expand and states are continuing to consider their options. The number of people impacted by the Medicaid expansion varies; some of these states had previously 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 non-disabled adults at all.

<sup>&</sup>lt;sup>2</sup> These enrollment data may differ from other published state and national enrollment figures because they only include 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 1115 demonstration populations with limited benefits) are excluded from this indicator in all reporting periods. See Appendix A for more information on this methodology.

<sup>&</sup>lt;sup>3</sup> See the notes in Table 1 for state-specific caveats regarding the reported data. Maine and North Dakota did not submit enrollment data for June 2014. 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. 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>&</sup>lt;sup>4</sup> This number is not directly comparable to prior months' numbers because the states reporting differ, and because some states made updates this month to better align their reporting with our data specifications. For example, Connecticut and Kentucky updated enrollment data to remove populations that do not receive a comprehensive benefit package.

- 602,210 additional people were enrolled in June 2014 as compared to May 2014 in the 49 states that reported both June and May data. (Maine and North Dakota are not included in this count.)<sup>6</sup>
- Looking at the additional enrollment since October when the Marketplace open enrollment began, among the 48 states reporting both June 2014 enrollment data and data from July-September of 2013, approximately 7.2 million additional individuals are enrolled in Medicaid and CHIP, a 12.4 percent increase over the average monthly enrollment for July through September of 2013.<sup>7</sup> (Connecticut, Maine, and North Dakota are not included in this count.)<sup>8</sup>
- Among states that adopted the Medicaid expansion and whose expansions were in effect in June 2014, Medicaid and CHIP enrollment rose by over 18.5 percent compared to the July-September 2013 baseline period, while states that have not, to date, expanded Medicaid reported an increase of approximately 4 percent over the same period.<sup>9</sup>
- Nine of the 24 states whose Medicaid expansions were in effect in June 2014 and that reported relevant data for both June and the pre-open enrollment baseline period experienced an enrollment increase of 30 percent or more.<sup>10</sup> Michigan's Medicaid expansion went into effect

<sup>&</sup>lt;sup>6</sup> See the notes in Table 1 for state-specific caveats regarding the reported data. Maine and North Dakota did not submit enrollment data for June 2014. Maine and North Dakota did not submit enrollment data for May 2014. <sup>7</sup> The 48 states reporting both June 2014 enrollment data and data from July-September 2013 report total enrollment in June of over 65 million individuals, and July-September 2013 average enrollment of 58 million. For June 2014, we are reporting growth of 7.2 million compared to July-September 2013, which is about 570,000 higher than the 6.65 million growth in enrollment, May 2014 to July-September 2013, that was included in the Medicaid and CHIP: May 2014 Applications, Eligibility Determinations, and Enrollment Report. This difference does not match the 602,201 figure reported above for May to June 2014 growth because a few states made updates this month to better align their reporting with our data specifications by removing limited benefit populations from their enrollment figures. This methodological change means that the summary statistics in the May 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, which is calculated including only the states that provided data for both periods. Because the pre-open enrollment period data may contain individuals with retroactive coverage, and the May and June 2014 data in this report is preliminary, the difference reported here between June and pre-open enrollment period is likely understated. The data is preliminary because it is reported soon after the close of the reporting month and contains few, if any, individuals who become eligible in June 2014 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>8</sup> Maine and North Dakota did not submit enrollment data for June 2014. Connecticut, Maine, and North Dakota did not submit enrollment data for the July-September 2013 baseline period.

<sup>&</sup>lt;sup>9</sup> Percentage calculations are based only on states reporting in both June 2014 and the July through September 2013 baseline period. New Hampshire is not included in these percentages because its Medicaid expansion was not implemented as of June 2014. These percentages are not directly comparable to the figures reported in previous months because some states made updates this month to better align their reporting with our data specifications. See footnote 7 for additional information.

<sup>&</sup>lt;sup>10</sup> Medicaid expansion states that reported data with a greater than 30 percent increase in enrollment are: Arkansas, Colorado, Maryland, Nevada, Oregon, Rhode Island, Vermont, Washington, and West Virginia (7 of these 9 states also run State-based Marketplaces). 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 increase than those who previously offered only coverage for very low-income parents. Additionally,

on April 1, 2014, and total enrollment grew more than 12.6 percent between March and June 2014.  $^{\rm 11}$ 

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.<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 Section 1115 demonstration 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 June 2014 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 not all states are reporting and the data are 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 June and whose application will be fully processed after June 30<sup>th</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 these preliminary data. Similarly, the preliminary data does not likely include individuals who had medical expenses in June, applied for Medicaid in a later month, and qualify for retroactive Medicaid coverage in June.<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 Eligibility Data tab <u>on the Medicaid Moving Forward page</u> on Medicaid.gov.<sup>15</sup>

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 (however, please note that this enrollment change may not be reflected in this enrollment data, as it excludes the limited benefit programs that some states used to serve individuals with incomes above 133 percent of the FPL). New Hampshire is not included because its Medicaid expansion was not implemented as of June 2014. Unlike in our last report, Kentucky is not listed above. This is due to a change in the state's reporting methodology intended to bring their reporting in line with CMS's specifications.

<sup>11</sup> Michigan reported 1,942,437 individuals enrolled in Medicaid and CHIP in March 2014.

<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).

<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 section 1115 demonstration authority. For more information about this "early option," please see <u>Medicaid and CHIP: March 2014 Monthly Applications, Eligibility</u> <u>Determinations, and Enrollment Report (May 1, 2014)</u>.

<sup>14</sup> See footnote 7 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**

Total Medicaid and CHIP child enrollment in the		
40 states reporting in June, 2014 <sup>16</sup>	26,865,165	

Similar to last month, we are also reporting separately on the total number of children enrolled in Medicaid and CHIP for those states that are reporting the relevant data for each month in 2014.<sup>17</sup> This data appears in Table 2.

- In the 40 states that reported relevant data for the month of June, approximately 27 million individuals are enrolled in CHIP or were children in the Medicaid program in those states.
- Based on the June 2014 data, children enrolled in the Medicaid program and CHIP make up about 55 percent of total Medicaid and CHIP program enrollment.<sup>18</sup>
- Most states reporting have seen growth in their CHIP and Medicaid child populations monthto-month during 2014, with an average monthly growth rate of approximately 0.6 percent across all states reporting for multiple months in 2014. All states had already expanded coverage for children in Medicaid and/or CHIP as part of the implementation of the CHIP program in 1997.<sup>19</sup>

<sup>&</sup>lt;sup>16</sup> This figure includes children enrolled in the Medicaid program and the total enrollment for the CHIP program, 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. Forty states reported such data for June 2014, as can be seen in Table 2: *Medicaid and CHIP: June 2014 Preliminary Monthly Medicaid CHIP Child Enrollment*. 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 may vary from state to state. See the notes on Table 2 for state-specific caveats regarding the reported data. 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>&</sup>lt;sup>17</sup> Children are included in the total number of individuals enrolled in Medicaid and CHIP in June 2014, as reported on page 3 and in Table 1. Total enrollment data for January 2014 through May 2014 is available on Medicaid.gov. <sup>18</sup> This percentage is not directly comparable to the percentage that was published in the *Medicaid and CHIP: May 2014 Applications, Eligibility Determinations, and Enrollment Report,* which was based on data from only 38 states.

<sup>&</sup>lt;sup>19</sup> Four million more children were insured in 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, <u>http://aspe.hhs.gov/health/reports/2014/CHIPRA\_5thAnniversary/ib\_CHIPRA5thanniversary.pdf</u>

	June 2014 Monthly in All States Reporting
Applications	
Total Applications for Financial Assistance Initially	
Received by State Medicaid and CHIP Agencies (note	
that more than one individual may be included on an	2,190,187 <sup>20</sup>
application and some states have included renewals	
and transfers from the FFM)	
Total Applications for Financial Assistance Initially	
Received by State Based Marketplaces (note that	525,215 <sup>21</sup>
more than one individual may be included on an	525,215
application)	
Eligibility Determinations	
Total Individuals Determined Eligible for Medicaid	
and CHIP by State Agencies (includes those newly	
eligible under the Affordable Care Act and those	2,233,567 <sup>22</sup>
eligible under prior law and, for some states,	
renewals)	

#### Medicaid and CHIP June 2014 Application and Eligibility Data Highlights

During the month of June 2014, more than 2.7 million applications for coverage and financial assistance (including Medicaid and CHIP coverage, tax credits and subsidies) were submitted at the state level (including more than 2.19 million received directly by state Medicaid and CHIP agencies and more than 525,000 received by SBMs).<sup>23</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 June 2014 as compared to the prior month (May). While the number of applications received in June decreased slightly in comparison to May, 20 states saw increases in applications in that period.<sup>24</sup> Note that these application numbers do not include applications received

<sup>&</sup>lt;sup>20</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 these data. Arkansas, Maine and Missouri did not provide June 2014 Medicaid and CHIP agency application data. Tennessee only

provided application data on their CHIP program. <sup>21</sup> See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability some states reported renewals in these data and included applications received by their SBMs in their Medicaid and CHIP agency application data. New York is reporting all applications through their SBM. Tennessee only provided applications data on their CHIP program.

<sup>&</sup>lt;sup>22</sup> See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability some states reported some renewals in these data. Arkansas, Massachusetts, Maine, and Missouri did not provide June 2014 determination data. Tennessee only provided determination data on their CHIP program.

<sup>&</sup>lt;sup>23</sup> The following states have included renewals in their June 2014 application data: Alaska, Nevada, New Mexico, Ohio, Oregon, Pennsylvania, and Virginia. The following states have included transfers from the FFM in their June 2014 application data: Illinois, Florida, and South Dakota. Subtotals do not sum to total due to rounding.

<sup>&</sup>lt;sup>24</sup> See table 3 for state specific details.

at the FFM and subsequently transferred to state Medicaid or CHIP agencies (see State-by-State Table notes for exceptions).<sup>25</sup>

States reported making more than 2.2 million eligibility determinations for Medicaid and CHIP in June 2014 for individuals applying for coverage: over 1.2 million determinations in states with Medicaid expansions in effect and approximately 1 million in other states. 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. This report also reflects the start of administrative transfers in New Jersey, discussed further below. 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.

See the <u>Eligibility Data</u> tab on Medicaid.gov for preliminary and updated data on applications and determinations for October 2013 through May 2014.

#### Administrative Transfers: Success in Six States

In response to CMS guidance provided on May 17, 2013, a number of states are employing a new tool for facilitating Medicaid enrollment to conduct an "administrative transfer" to Medicaid while they complete implementation of their eligibility and enrollment systems. This method uses Supplemental Nutritional Assistance Program (SNAP) income information that states already have to identify individuals who are likely eligible for Medicaid and CHIP. New Jersey, the most recent state to implement this strategy, began conducting administrative transfers at the end of May 2014. As of the end of June, 613,554 individuals have been determined eligible for Medicaid or CHIP as a result of this new authority in the six states that have implemented the strategy (including more than 3,000 in New Jersey).<sup>27</sup>

<sup>&</sup>lt;sup>25</sup> See footnote 19.

<sup>&</sup>lt;sup>26</sup> These states have included renewals in their June 2014 determination data: District of Columbia, Iowa, Maryland, Michigan, Nevada, New Mexico, Rhode Island, South Dakota, Texas, 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>&</sup>lt;sup>27</sup> The following states have implemented administrative transfers: Arkansas, California, Illinois, New Jersey, Oregon, and West Virginia. Michigan recently received approval to conduct administrative transfers but it has not yet implemented this targeted enrollment strategy.

#### 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 the specifications, we have noted that information in notes in the State-by-State table.

#### 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 June 2014. 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 June 2014. 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 June 1 - 30, 2014.

#### **Future Reports**

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

				Enrol	Iment		
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, May 2014 (Preliminary)	Total Medicaid and CHIP Enrollment, June 2014 (Preliminary)	% Change May to June (Columns (I) and (II))	Pre-Open Enrollment Monthly Average Medicaid and CHIP Enrollment (July-Sept 2013)	Net Change Pre-Open Enroliment to June (Columns (IV) and (II))	% Change Pre-Open Enrollment to June (Columns (IV) and (II))
		(I)	(II)	(111)	(IV)	( <b>V</b> )	(VI)
Arizona	FFM	1,385,940	1,427,080	2.97%	1,201,770	225,310	18.75%
Arkansas	Partnership	771,680	772,337	0.09%	556,851	215,486	38.70%
California	SBM	10,800,000	10,900,000	0.93%	9,157,000	1,743,000	19.03%
Colorado	SBM	1,053,153	1,077,464	2.31%	783,420	294,044	37.53%
Connecticut	SBM	724,926	735,767	1.50%	-	-	-
Delaware	Partnership	232,630	233,471	0.36%	223,324	10,147	4.54%
District of Columbia	SBM	243,771	246,413	1.08%	235,786	10,627	4.51%
Hawaii	SBM	307,944	310,822	0.93%	288,358	22,464	7.79%
Illinois	Partnership	2,951,982	2,931,871	-0.68%	2,626,943	304,928	11.61%
Iowa	Partnership	590,005	598,873	1.50%	493,515	105,358	21.35%
Kentucky	SBM	769,897	708,808	-7.93%	606,805	102,003	16.81%
Maryland	SBM	1,135,950	1,146,851	0.96%	856,297	290,554	33.93%
Massachusetts	SBM	1,447,332	1,461,702	0.99%	1,296,359	165,343	12.75%
Michigan	Partnership	2,145,241	2,188,716	2.03%	1,912,009	276,707	14.47%
Minnesota	SBM	1,023,429	1,039,357	1.56%	873,040	166,317	19.05%
Nevada	SBM	498,101	507,572	1.90%	332,559	175,013	52.63%
New Hampshire^	Partnership	136,627	137,163	0.39%	127,082	10,081	7.93%
New Jersey	FFM	1,479,707	1,534,404	3.70%	1,283,851	250,553	19.52%
New Mexico	Supported SBM	646,229	691,524	7.01%	572,111	119,413	20.87%
New York	SBM	6,105,239	6,119,037	0.23%	5,678,418	440,619	7.76%
North Dakota	FFM	-	-	-	-	-	-
Ohio	Plan Management	2,582,303	2,634,261	2.01%	2,341,482	292,779	12.50%
Oregon	SBM	951,458	971,620	2.12%	626,357	345,263	55.12%
Rhode Island	SBM	252,475	253,927	0.58%	190,833	63,094	33.06%
Vermont	SBM	173,986	188,422	8.30%	127,162	61,260	48.17%
Washington	SBM	1,505,250	1,520,502	1.01%	1,117,576	402,926	36.05%
West Virginia	Partnership	507,329	514,188	1.35%	354,544	159.644	45.03%
VV CSC VII gillia	r ar cher ship	307,327	511,100	1.5570	551,511	157,011	10.0076
Subtotal for All States Expanding Medicaid		40,422,584	40,852,152	1.06%	33,863,452	6,252,933	18.47%
Subtotal for All States w	vith Expansions in						
Effect in Reporting Mont	h^	40,285,957	40,714,989	1.06%	33,736,370	6,242,852	18.50%
Subtotal for States Expa	nding Medicaid			Difference May to June		Difference July-Sept	
who Reported in June an	-			2014		2013 to June 2014	
Period#		40,422,584	40,116,385	429,568	33,863,452	6,252,933	
		,	,	,		.,,	

^=New Hampshire Health Protection Program went into effect on July 1, 2014, and individuals in NH will begin to receive benefits under the expansion on August 15, 2014. (-)=state has not reported data.

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

Column III is calculated for only those states that reported both June data and May data (subtotals exclude ND).

Column V and VI is calculated for only those states that reported both monthly data and pre-Open Enrollment period data (subtotals exclude CT and ND).

#=Subtotal for columns I and III is for states submitting both May and June data. June subtotal for expansion states submitting May data is 40, I 16,385.

#=Subtotal for columns II, IV, V, and VI is for states submitting both June 2014 and July-September 2013 data.

Arkansas	(I), (II)	Includes Private Option enrollees.
California	(I), (II)	Data are preliminary.
California		Includes individuals transferred from the Low Income Health Program
California		section 1115 demonstration (also in pre-Open Enrollment Period data)
California		Includes estimated retroactive enrollment.
California		Includes applicants likely eligible for Medicaid or CHIP,
California		but whose applications are still pending verification.
California	(IV)	Includes individuals in the Low Income Health Program section 1115 demonstration.
Connecticut	(I)	Updated to exclude limited benefit populations.
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)).
Kentucky	(I)	Updated to exclude limited benefit populations.
Massachusetts	(I), (II)	Does not include individuals receiving temporary transitional coverage.
Nevada	(I), (II)	Data are preliminary.
Nevada	(I), (IV)	Includes partial benefit dual eligible individuals.
New Jersey	(I), (II), (IV)	Includes individuals eligible at any point in the month.
New York	(I), (II)	Includes estimated retroactive enrollment.
Rhode Island	(I), (II)	Includes only enrollments based on determinations through new MAGI system.

			Enrollment								
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, May 2014 (Preliminary)	Total Medicaid and CHIP Enrollment, June 2014 (Preliminary)	% Change May to June (Columns (I) and (II))	Pre-Open Enrollment Monthly Average Medicaid and CHIP Enrollment (July-Sept 2013)	Net Change Pre-Open Enrollment to June (Columns (IV) and (II))	% Change Pre-Open Enrollment to June (Columns (IV) and (II))				
		(I)	(II)	(III)	(IV)	(V)	(VI)				
Alabama	FFM	765,937	768,099	0.28%	799,176	-31,077	-3.89%				
Alaska	FFM	124,912	125,558	0.52%	I 20,946	4,612	3.81%				
Florida	FFM	3,321,856	3,327,915	0.18%	3,104,996	222,919	7.18%				
Georgia	FFM	1,701,583	1,781,028	4.67%	1,535,090	245,938	16.02%				
Idaho	Supported SBM	273,188	273,757	0.21%	251,926	21,831	8.67%				
Indiana	FFM	1,156,350	1,177,471	1.83%	1,120,674	56,797	5.07%				
Kansas	Plan Management	426,883	426,021	-0.20%	397,989	28,032	7.04%				
Louisiana	FFM	1,024,104	1,033,090	0.88%	1,019,787	13,303	1.30%				
Maine	Plan Management	-	-	-	-	-	-				
Mississippi	FFM/SBM-SHOP	672,891	679,078	0.92%	637,229	41,849	6.57%				
Missouri	FFM	802,135	808,824	0.83%	846,084	-37,260	-4.40%				
Montana	Plan Management	155,505	52,874	-1.69%	139,604	13,270	9.51%				
Nebraska	Plan Management	234,922	232,217	-1.15%	244,600	-12,383	-5.06%				
North Carolina	FFM	1,796,402	1,809,993	0.76%	1,744,160	65,833	3.77%				
Oklahoma	FFM	793,377	797,155	0.48%	790,051	7,104	0.90%				
Pennsylvania	FFM	2,415,249	2,403,735	-0.48%	2,386,046	17,689	0.74%				
South Carolina	FFM	830,285	840,753	1.26%	790,229	50,524	6.39%				
South Dakota	Plan Management	116.099	115,927	-0.15%	115,501	426	0.37%				
Tennessee	FFM	1,324,613	1,334,403	0.74%	1,244,516	89,887	7.22%				
Texas	FFM	4,522,040	4,535,706	0.30%	4,441,605		2.12%				
Utah	FFM/SBM-SHOP	330,828	332,542	0.52%	322,442		3.13%				
Virginia	Plan Management	1,053,151	1,058,517	0.51%	1,003,266	,	5.51%				
Wisconsin	FFM	1,176,778	1,178,405	0.14%	1,161,876		1.42%				
Wyoming	FFM	68,432	67,094	-1.96%	67,518	,	-0.63%				
Subtotal for All States	Not Expanding										
Medicaid		25,087,520	25,260,162	0.69%	24,285,311	974,851	4.01%				
Subtotal for States No	t Expanding			Difference May to June	,,	Difference July-Sept					
Medicaid who Reported in June and the				2014		2013 to June 2014					
Comparison Period#		25,087,520	25,260,162	172,642	24,285,311	974,851					
puilloon - 01.04//			,,		,•,• •						
Total Across All States	s	65,510,104	66,112,314	0.92%	58,148,763	7,258,861	12.43%				
Total for States who R	eported in June and			Difference May to June 2014		Difference July-Sept 2013 to June 2014					
the Comparison Period	#	65,510,104	65,376,547	602,210	58,148,763	7,227,784					

#### (-)=state has not reported data.

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

Column III is calculated for only those states that reported both June data and May data (subtotals exclude ME; totals exclude ME and ND).

Column V and VI is calculated for only those states that reported both monthly data and pre-Open Enrollment period data.

Column V and VI subtotals exclude ME; totals exclude CT, ME, and ND.

#=Subtotals and totals for columns I and III is for states submitting both May and June data.

#=June subtotal for non-expansion states submitting May data is 25,260,162.

#=Subtotals and totals for columns II, IV, V, and VI is for states submitting both June and July-September 2013 data.

Alabama	(I), (II)	Enrollment does not include MCHIP expansion enrollees.
Alabama	(IV)	Data is from September 2013 only.
Florida	(I), (II)	Does not include SSI recipients enrolled in Medicaid.
Indiana	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
Kansas	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
Maine	(I), (II), (IV)	Omitted because submitted data only includes individuals first enrolled in the month.
Mississippi	(IV)	Updated to exclude partial benefit populations.
Texas	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
Utah	(I), (II), (IV)	Includes service limited Medicare program beneficiaries (SLMBs).
Wisconsin	(I), (II), (IV)	Includes all Medicaid/BadgerCare Plus programs and subprograms,
Wisconsin		including partial benefit dual eligible individuals, and other limited benefit populations.

1					Enro	llment			
			Medicaid and CHIP	Child Enrollment			Average Month to Month Change	CHIP Enrollment	Medicaid and CHIP Child Enrollment as a % of Total Enrollment (Columns (VI) and (VIII))
State	January, 2014 (I)	February, 2014 (II)	March, 2014 (III)	April, 2014 (IV)	May, 2014 (V)	June 2014 (Preliminary) (VI)	January-June, 2014 (VII)	June, 2014 (Preliminary) (VIII)	June, 2014 (Preliminary) (IX)
Alabama	572,891	567,522	571,086	561,239	560,765	561,895	-0.38%	768,099	73.15%
Alaska	72,990	71,916	72,853	74,166	74,453	74,345	0.38%	125,558	59.21%
Arizona	-	-	-	-	-	-	-	1,427,080	57.2170
Arkansas								772,337	
California	-	-	-	-	-	-	-	10,900,000	-
Colorado	521,062	529,769	541,290	546,828	549,172	551,650	1.15%	1,077,464	51.20%
Connecticut	-	-	-	-	298,206	309,332	3.73%	735,767	42.04%
Delaware	100,714	101,431	102,192	102,215	101,445	101,729	0.20%	233,471	43.57%
District of Columbia	-		-	-			-	246,413	-
Florida	2,076,132	2,113,370	2,183,679	2,233,244	2,248,731	2,253,690	1.66%	3,327,915	67.72%
Georgia	-	1,143,673	1,179,741	1,272,754	1,233,020	1,279,497	2.92%	1,781,028	71.84%
Hawaii	143,899	145,758	147,101	141,979	137,562	138,956	-0.67%	310,822	44.71%
Idaho	181,082	183,520	186,204	187,351	188,421	188,511	0.81%	273,757	68.86%
Illinois	-	-	-	1,558,215	1,544,771	1,512,722	-1.47%	2,931,871	51.60%
Indiana	696,562	674,961	700,190	685,900	708,953	697,620	0.07%	1,177,471	59.25%
lowa	-	-	-	292,324	329,738	290,741	0.49%	598,873	48.55%
Kansas	-	-	-	-	-	-	-	426,021	-
Kentucky	-	-	-	-	-	265,942	-	708,808	37.52%
Louisiana	724,246	726,446	728,619	731,717	734,341	739,388	0.41%	1,033,090	71.57%
Maine		•		•			-		-
Maryland	567,867	578,164	589,893	590,93 I	599,057	601,851	1.17%	1,146,851	52.48%
Massachusetts	583,723	581,602	583,761	584,611	583,740	583,943	0.01%	1,461,702	39.95%
Michigan	1,024,050	1,030,715	1,041,543	1,053,194	1,061,866	1,064,300	0.77%	2,188,716	48.63%
Minnesota	427,164	452,379	445,330	452,703	456,951	456,998	1.39%	1,039,357	43.97%
Mississippi	428,745	432,827	451,945	458,118	463,138	462,885	1.56%	679,078	68.16%
Missouri	509,173	502,096	504,210	501,850	500,974	504,057	-0.20%	808,824	62.32%
Montana	108,019	108,752	109,112	108,047	106,588	103,749	-0.80% -0.62%	152,874 232,217	67.87% 66.00%
Nebraska	158,177	157,047	157,890	158,230	158,049	153,255	-0.62%		66.00%
Nevada New Hampshire	- 87,055	- 89,365	- 90,701	- 91,833	- 92,124	269,161 92,427	-	507,572  37,163	- 67.38%
New Jersey	744.535	751,493	757.066	766.502	771,438	781,640	0.98%	1,534,404	50.94%
New Mexico				- 100,302	//1,430	701,040	0.70%	691,524	30.74%
New York	2,320,379	2,322,657	2,363,567	2,346,594	2,368,432	2,381,675	0.53%	6,119,037	38.92%
North Carolina	1,126,665	1,096,013	1,098,630	1,089,239	1,103,822	1,118,773	-0.13%	1,809,933	61.81%
North Dakota	-	-	-	-	-	-	-	-	
Ohio	1,162,668	1,162,877	1,172,101	1,183,390	1,197,774	1,208,772	0.78%	2,634,261	45.89%
Oklahoma	507,824	515,027	522,646	501,218	502,688	506,175	-0.04%	797,155	63.50%
Oregon	399,782	413,470	421,810	425,536	430,206	427,789	1.37%	971,620	44.03%
Pennsylvania	1,264,811	1,267,629	1,284,539	1,280,233	1,271,292	1,266,100	0.02%	2,403,735	52.67%
Rhode Island	-	-	-	-	-	-	-	253,927	-
South Carolina	578,153	585,301	592,291	598,453	606,035	605,330	0.92%	840,753	72.00%
South Dakota	78,165	78,209	78,685	79,075	78,960	78,884	0.18%	115,927	68.05%
Tennessee	-	-	-	-	-	-	-	1,334,403	-
Texas	3,245,861	3,246,854	3,254,461	3,286,347	3,317,991	3,324,633	0.48%	4,535,706	73.30%
Utah	232,107	233,066	221,914	204,978	205,500	204,630	-2.43%	332,542	61.54%
Vermont	67,765		68,916	65,765	66,406	61,250	-3.79%	188,422	32.51%
Virginia	648,786	652,919	655,135	653,922	656,380	644,756	-0.12%	1,058,517	60.91%
Washington	738,337	742,798	745,233	743,874	745,665	741,771	0.09%	1,520,502	48.78%
West Virginia	203,216	205,974	208,856	211,699	209,187	209,888	0.65%	514,188	40.82%
Wisconsin	-	-	-	-	-	-	-	1,178,405	-
Wyoming	44,831	45,223	45,565	45,551	45,368	44,455	-0.16%	67,094	66.26%
Total For All States	22,347,436	23,510,823	23,878,755	25,869,825	26,309,209	26,865,165	0.58%	66,112,254	54.96%
Number of States Reporting	34	34	35	37	38	40	38	49	39

#### For general notes on enrollment data, see Table I: Medicaid and CHIP: May and June 2014 Preliminary Monthly Enrollment (-)=State has not reported data or data submitted was incomplete.

Alabama	(I)-(VI)	Enrollment does not include MCHIP expansion enrollees
Maryland	(I)-(VI)	Includes limited benefit dual eligible individuals (unlike column (VIII)). All data is preliminary.
New York	(I)-(VI)	Includes estimated retroactive enrollment.
Utah	(I)	Includes some duplicates.

				Applications				Determinations	
States Expanding Medicaid	Marketplace Type	New Applications Submitted to Medicaid and CHIP Agencies, June 2014 (Preliminary)	Applications for Financial Assistance Submitted to the State Based Marketplace, June 2014 (Preliminary)	Total Applications for Financial Assistance Submitted at State Level, June 2014 (Preliminary)	Total Applications for Financial Assistance Submitted at State Level, May 2014 (Preliminary)	% Change May 2014 to June 2014 (Columns (IV) and (III))	Individuals Determined Eligible for Medicaid at Application, June 2014 (Preliminary)	Individuals Determined Eligible for CHIP at Application, June 2014 (Preliminary)	Total New Determinations, June 2014 (Preliminary)
		(I)	(II)	(111)	(IV)	(V)	(VI)	(VII)	(VIII)
Arizona	FFM	152,296	N/A	152,296	-	-	88,664	-	88,664
Arkansas	Partnership	-	N/A	-	33,428	-	-	-	-
California	SBM	134,000	168,000	302,000	318,000	-5.03%	309,000	-	309,000
Colorado	SBM	23,896	-	23,896	25,189	-5.13%	23,849	1,164	25,013
Connecticut	SBM	12,113	12,856	24,969	33,676	-25.86%	9,196	1	9,197
Delaware	Partnership	2,853	N/A	2,853	2,905	-1.79%	1,701	58	١,759
District of Columbia	SBM	4,681	2,162	6,843	5,789	18.21%	5,311	-	5,311
Hawaii	SBM	5,748	-	5,748	5,379	6.86%	5,596	239	5,835
Illinois	Partnership	121,055	N/A	121,055	151,006	-19.83%	74,790	16,833	91,623
lowa	Partnership	21,646	N/A	21,646	20,246	6.91%	81,533	39,446	120,979
Kentucky	SBM	1,076	21,404	22,480	48,858	-53.99%	4,178	4,344	8,522
Maryland	SBM	25,517	7,543	33,060	34,103	-3.06%	45,250	9,335	54,585
Massachusetts	SBM	23,664	7,752	31,416	32,368	-2.94%	-	-	-
Michigan	Partnership	75,512	N/A	75,512	78,990	-4.40%	69,464	6,618	76,082
Minnesota	SBM	23,227	-	23,227	22,018	5.49%	18,101	-	18,101
Nevada	SBM	13,027	-	13,027	13,387	-2.69%	26,574	91	26,665
New Hampshire <sup>^</sup>	Partnership	3,342	N/A	3,342	3,489	-4.21%	2,497	-	2,497
New Jersey	FFM	29,628	N/A	29,628	27,714	6.91%	7,422	4,364	11,786
New Mexico	Supported SBM	42,802	N/A	42,802	-	-	20,691	-	20,691
New York	SBM	-	171,657	171,657	175,444	-2.16%	127,080	9,534	136,614
North Dakota	FFM	616	N/A	616	1,050	-41.33%	479	-	479
Ohio	Plan Management	210,283	N/A	210,283	201,875	4.16%	133,377	-	133,377
Oregon	SBM	670	13,565	14,235	28,309	-49.72%	21,814	-	21,814
Rhode Island	SBM	1,505	-	1,505	4,100	-63.29%	6,549	389	6,938
Vermont	SBM	12,300	5,810	18,110	17,964	0.81%	10,728	-	10,728
Washington	SBM	20,743	114,466	135,209	132,615	I. <b>9</b> 6%	50,811	3,136	53,947
West Virginia	Partnership	22,021	N/A	22,021	25,376	-13.22%	12,038	786	12,824
Subtotal for All States E	xpanding Medicaid	984,221	525,215	1,509,436	1,443,278	-6.77%	1,156,693	96,338	1,253,031
Subtotal for All States with Expansions in			, -	, , ,	, , ,		, , , , ,	.,	, , , , , ,
Effect in Reporting Mont	•	980,879	525,215	1,506,094	1,439,789	-6.78%	1,154,196	96,338	1,250,534
Subtotal for States Expa	nding Medicaid who					Difference May to			
Reported in May and June	e 2014			1,314,338	1,409,850	June 2014 -95,512			

\*=New Hampshire Health Protection Program went into effect on July 1, 2014, and individuals in NH will begin to receive benefits under the expansion on August 15, 2014.

(-)=state has not reported data.

Column V is calculated for only those states that reported May and June 2014 Applications data (subtotals exclude AZ, AR, and NM). Partnership, Plan Management, FFM/SBM-SHOP, Supported SBM are all types of FFMs.

Automaa	(VI)	Includes CHIP.
Arkansas California	. ,	
California California	(I)	Data are preliminary and will be not be fully reconciled until August 2014.
California		Reflects primarily newly-determined and likely eligible Medicaid applicants,
California	<b>(11)</b>	as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(11)	Data are preliminary and will be not be fully reconciled until August 2014.
California	(1)()	Includes applications to SBM that did not request financial assistance.
California	(IV)	Data are preliminary and will be not be fully reconciled until July 2014.
California		Reflects primarily newly-determined and likely eligible Medicaid applicants, as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(VI)	as well as some ongoing caseload activity conducted via the state's health exchange automation system. Data are preliminary and will be not be fully reconciled until August 2014.
California	(•)	Determinations 'at application' is derived by considering prior coverage.
California		Includes those determined eligible and 'contingently eligible.' Includes CHIP.
California		Includes 21,000 individuals eligible via targeted enrollment strategy.
California		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	(VII)	Data reflects only those determinations made by the separate CHIP agency and does not reflect all CHIP determinations.
Colorado	(1)	State Medicaid agency hosts SBM portal; number includes all applications for insurance affordability programs.
Connecticut	(I), (III), (IV)	Data may include some duplication of applications between Medicaid and CHIP.
Connecticut	(II)	SBM applications data not submitted as of date of publication.
Connecticut	(VI)	Count is of households, not individuals. Includes determinations of some non-title XIX programs made by the Medicaid agency.
Connecticut	(1)	(state funded medical cases, the AIDS Drug Assistance program and refugee cases).
Connecticut		Only includes determinations made by the Medicaid agency.
Connecticut		Excludes those determined Medicaid-eligible by the SBM.
District of Columbia	(VI)	Includes all determinations (e.g., renewals); includes CHIP.
Hawaii	(1)	State Medicaid agency hosts SBM portal; number includes all applications for insurance affordability programs.
Illinois	(I), (III), (IV)	Includes account transfers from the FFM.
lowa	(VI)	Includes renewals.
lowa	(VII)	Includes renewals.
Maryland	(11)	Includes State Medicaid Agency data and SBM data from 6/1 - 6/30.
Maryland	(II), (III), (IV)	Includes all applications not only those requesting financial assistance.
Maryland	(VI)	Includes renewals. Includes State Medicaid Agency data and SBM data from 6/1 - 6/30.
Maryland	(VII)	Includes renewals. Includes State Medicaid Agency data and SBM data from 6/I - 6/30.
Maryland	(VIII)	Includes renewals. Includes State Medicaid Agency data and SBM data from 6/1 - 6/30.
Massachusetts	(VI)	Data are preliminary and are derived.
Michigan	(VI)	Includes renewals.
Michigan	(VII)	Includes renewals.
Minnesota	(I), (III), (I¥)	Count is of persons applying, not applications. Does not include applications to the new eligibility and enrollment system.
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; includes CHIP.
New Jersey	(I), (III), (IV)	Includes applications received at county welfare agencies.
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 Mexico	(I), (III), (I¥)	Includes renewals.
New Mexico	(VI)	Includes all determinations (e.g., renewals); includes CHIP.
New York	(VI)	Data are preliminary.
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	(I), (II), (III), (IV)	Includes renewals
Oregon	(VI)	Count is of households, not individuals; includes CHIP.
Oregon		Includes 2,999 individuals determined eligible via Targeted Enrollment Strategy.
Oregon		Includes MAGI populations only.
Oregon	(VI), (VIII)	Includes MAGI populations only.
Rhode Island	(I)	Includes applications submitted to SBM.
Rhode Island	(I), (III), (IV)	Does not include applications in legacy system for certain non-MAGI populations.
Rhode Island	(VI)	Includes only determinations through new MAGI system. Includes renewals.
Rhode Island	(VII)	Includes only determinations through new MAGI system.
Vermont	(VI)	Includes renewals.

		Applications					Determinations		
States Not Expanding Medicaid	Marketplace Type	New Applications Submitted to Medicaid and CHIP Agencies, June 2014 (Preliminary) (1)	Applications for Financial Assistance Submitted to the State Based Marketplace, June 2014 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, June 2014 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, May 2014 (Preliminary) (IV)	% Change May 2014 to June 2014 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, June 2014 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, June 2014 (Preliminary) (VII)	Total New Determinations, June 2014 (Preliminary) (VIII)
Alabama	FFM	17,918	N/A	17,918	19,352	-7.41%	23,981	-	23,981
Alaska	FFM	5,448	N/A	5,448	6,419	-15.13%	4,275	-	4,275
Florida	FFM	365,486	N/A	365,486	339,656	7.60%	107,422	14,821	122,243
Georgia	FFM	94,604	N/A	94,604	79,865	18.45%	43,347	540	43,887
Idaho	Supported SBM	4,210	N/A	4,210	4,151	1.42%	6,569	302	6,871
Indiana	FFM	125,543	N/A	125,543	114,540	9.61%	57,685	3,650	61,335
Kansas	Plan Management	7,042	N/A	7,042	6,928	1.65%	7,036	547	7,583
Louisiana	FFM	25,853	N/A	25,853	25,724	0.50%	25,116	1,993	27,109
Maine	Plan Management	-	N/A	-	-	-	-	-	-
Mississippi	FFM/SBM-SHOP	19,111	N/A	19,111	20,942	-8.74%	22,721	459	23,180
Missouri	FFM	-	N/A	-	-	-	-	-	-
Montana	Plan Management	3.326	N/A	3,326	3,257	2.12%	3.570	327	3.897
Nebraska	Plan Management	6,688	N/A	6,688	6,346	5.39%	8.855	910	9,765
North Carolina	FFM	76,193	N/A	76,193	81,035	-5.98%	72,803	4,463	77,266
Oklahoma	FFM	44,210	N/A	44,210	48,493	-8.83%	38,593	5,634	44,227
Pennsylvania	FFM	186,989	N/A	186,989	227,119	-17.67%	59,956	8,647	68,603
South Carolina	FFM	32,103	N/A	32,103	21,993	45.97%	35,136	2,016	37,152
South Dakota	Plan Management	1.563	N/A	1,563	1,673	-6.58%	1.280	-	1,280
Tennessee	FFM	1,480	N/A	1,480	1,668	-11.27%	-	929	929
Texas	FFM	106,724	N/A	106,724	107,227	-0.47%	295,760	-	295,760
Utah	FFM/SBM-SHOP	26,326	N/A	26,326	21,008	25.31%	46,685	906	47,591
Virginia	Plan Management	26,161	N/A	26,161	25,479	2.68%	45,193	4,330	49,523
Wisconsin	FFM	28,136	N/A	28,136	27,495	2.33%	21,619	1,645	23,264
Wyoming	FFM	852	N/A	852	1,356	-37.17%	734	81	815
Subtotal for All States N	Not Expanding				,				
Medicaid#		1,205,966	N/A	1,205,966	1,191,726	1.21%	928,336	52,200	980,536
Subtotal for States Not Expanding Medicaid who Reported in May and June 2014				1,205,966		Difference May to June 2014 14,240			
Total Across All States#		2,190,187	525,215	2,715,402	2,635,004	-3.12%	2,085,029	148,538	2,233,567
Total for States who Reported in May and June 2014				2,520,304		Difference May to June 2014 -81,272			

#### (-)=state has not reported data.

Column V is calculated for only those states that reported May and June 2014 Applications data (subtotals exclude ME and MO; totals exclude AZ, AR, ME, MO, and NM). Partnership, Plan Management, FFM/SBM-SHOP, Supported SBM are all types of FFMs.

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

Alaska	(I), (III), (IV)	Includes renewals converting to MAGI methodology.
Alaska	(VI), (VIII)	Count is of households, not individuals; includes CHIP.
Alabama	(VII)	Data for Medicaid and CHIP applications processed in the E&E system is not available at this time.
Florida	(I), (III), (IV)	Includes account transfers from the FFM.
Kansas	(I), (III), (IV)	Includes MAGI populations only.
Kansas	(VI)	Includes MAGI populations only.
Montana	(IV)	Data updated in June.
Pennsylvania	(I), (III), (IV)	Includes renewals.
Pennsylvania	(VI), (VIII)	Includes renewals.
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	( <b>V</b> )	Excluded because data is only from CHIP agency.
Texas	(VI)	Includes renewals and CHIP.
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: May and June Preliminary Monthly Enrollment

### Total Medicaid and CHIP Enrollment, May 2014 (Preliminary) (I) Total Medicaid and CHIP Enrollment, June 2014 (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). Medicaid Section 1115 demonstration populations 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 June 2014 data was submitted in July and is considered preliminary.<sup>28</sup> The May 2014 data in this table was submitted in June and is also preliminary. May data that was updated in July (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 May to June (III)

The percentage change in **Total Medicaid and CHIP Enrollment, June 2014 (Preliminary) (II)** as compared to **Total Medicaid and CHIP Enrollment, May 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.

**Pre-Open Enrollment Monthly Average 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 include more retroactive enrollments than the June data, which makes change between the July through September period and the June preliminary data look smaller than it would be if

<sup>&</sup>lt;sup>28</sup> In Medicaid, individuals are potentially eligible for retroactive eligibility to cover incurred health care costs dating back 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 Pre-Open Enrollment (V) to June

The net change in **Total Medicaid and CHIP Enrollment, June 2014 (preliminary) (II)** as compared to **Pre-Open Enrollment Monthly Average 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 From Pre-Open Enrollment to June 2014 (VI)

The percentage change in **Total Medicaid and CHIP Enrollment, June 2014 (Preliminary) (II)** as compared to **Pre-Open Enrollment Monthly Average 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 May of 2014 is available on the <u>Eligibility Data</u> tab 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: June 2014 Preliminary Monthly Medicaid CHIP Child Enrollment

#### Medicaid and CHIP Child Enrollment, January - May, 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

<sup>&</sup>lt;sup>29</sup> See footnote 24.

<sup>&</sup>lt;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, June, 2014 (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 June 2014 data was submitted in July and is considered preliminary.<sup>32</sup>

#### Average Month to Month Change, January-June, 2014 (VI)

This column calculates the month to month change in Medicaid and CHIP enrollment for each month between January 2014 and June 2014 (columns (I)-(V)) and displays an average of those changes.

#### Total Medicaid and CHIP Enrollment, June 2014 (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). Medicaid Section 1115 demonstration populations 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 June 2014 data was submitted in July and is considered preliminary.<sup>33</sup> This data is this same as the data reported in column (II) in Table 1: Medicaid and CHIP: May and June Preliminary Monthly Enrollment.

### Medicaid and CHIP Child Enrollment as a % of Total Enrollment (VIII) Medicaid and CHIP Child Enrollment, June 2014 (Preliminary) (V) as a percentage of Total Medicaid and CHIP Enrollment, June 2014 (Preliminary) (VIII).

<sup>&</sup>lt;sup>31</sup> See footnote 26.

<sup>&</sup>lt;sup>32</sup> See footnote 24.

<sup>&</sup>lt;sup>33</sup> See footnote 24.

#### Table 3: Medicaid and CHIP: June 2014 Monthly Applications and Eligibility Determinations

#### **Application Data Elements**

#### New Applications Submitted to Medicaid and CHIP Agencies, June 2014 (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 June 2014 data was submitted in July and is considered preliminary.<sup>36</sup>

# Applications for Financial Assistance Submitted to the State-Based Marketplace, June 2014 (Preliminary) (II)

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 June 2014 data was submitted in June and is considered preliminary.<sup>37</sup>

# Total Applications for Financial Assistance Submitted at the State Level, June 2014 (Preliminary) (III)

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

For states with an SBM, the data reflect the total of **Applications Submitted to Medicaid and CHIP Agencies, June 2014 (Preliminary)** plus **Applications for Financial Assistance Submitted to the State-Based Marketplace, June 2014 (Preliminary)**. For FFM states, the data reflect **Applications Submitted to Medicaid and CHIP Agencies, June 2014 (Preliminary)**. For SBM states, the data include 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 June 2014 data was submitted in July and is considered preliminary. The May 2014 data in this table was submitted in June and is also preliminary. May data that was updated in July (which may include additional individuals who applied in May, but who were not captured in the preliminary data) is posted separately under the Eligibility Data tab on Medicaid.gov.

<sup>&</sup>lt;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>&</sup>lt;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>&</sup>lt;sup>36</sup> See footnote 24.

<sup>&</sup>lt;sup>37</sup> See footnote 24.

### Percentage Change May 2014 to June 2014 (V)

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

### **Eligibility Determination Data Elements**

### Individuals Determined Eligible for Medicaid at Application, June 2014 (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. For example, 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 <u>on Medicaid.gov</u>.

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 June 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

<sup>&</sup>lt;sup>38</sup> Information on targeted enrollment strategies and the states approved for these strategies is available here: <u>http://www.medicaid.gov/AffordableCareAct/Medicaid-Moving-Forward-2014/medicaid-moving-forward-2014.html</u>.

<sup>&</sup>lt;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.

FFM are included in the Total Enrolled indicators. For more information about the assessment and determination models in FFM states see <u>Medicaid.gov</u>.

#### Individuals Determined Eligible for CHIP at Application, June 2014 (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 June 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 <u>Medicaid.gov</u>.

#### Total New Determinations, June 2014 (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:** Federally-Facilitated Marketplaces (FFMs) can take several forms, including the State Partnership Marketplace (Partnership), States performing Plan Management functions (Plan Management), Supported SBMs, and the State-Based Small Business Health Options Program (SB-SHOP). These models are referenced in the state-by-state tables. All of these models are referred to as an "FFM" in this report.