

Table 1B: Medicaid and CHIP: April 2017 Monthly Applications and Eligibility Determinations Updated June 2017

Performance Indicator Information:

The Medicaid and CHIP performance indicators were developed in consultation with states, and are intended to assist in monitoring the eligibility and enrollment processes for Medicaid and CHIP programs in all states. A common set of definitions were developed for consistency in reporting the Medicaid and CHIP performance indicators. More detailed information about the performance indicators, including these standardized definitions can be found in the Methodology: About the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Report at <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights/index.html>.

The number of applications received by the Medicaid agency, a separate CHIP agency (if one exists in the state), or both during the reporting period (column (I)), includes applications received online, via mail, in person or phone. These figures do not include applications submitted to a State-Based Marketplace (SBM) or the Federally-Facilitated Marketplace (FFM). 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 are reported in column (II). Please note, 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).

Columns (VI) and (VII) include the total number of individuals determined eligible for Medicaid (under title XIX of the Social Security Act) (column (VI)) and CHIP (column (VII)) during the reporting period based on applications for coverage submitted to any state agency (Medicaid, CHIP or the SBM) or based on administrative determinations authorized under a targeted enrollment strategy approved by CMS. The unit of measurement is a count of individuals (as compared to the application numbers, which may include multiple people in one application). In states receiving account transfers from the FFM in the reporting period where the FFM makes an eligibility assessment (and the state then completes the Medicaid determination), these numbers include 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.

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 the data quality limitations sections below.

Data Context Notes:

- Because of reporting capability, some states included renewals, applications to SBMs, or transfers from the FFM in their Medicaid and CHIP agency application data. See the data quality limitation notes below for state-specific caveats.
- California did not report SBM application data in April and Tennessee only provided determination data from their CHIP program.

Table 1B: Medicaid and CHIP: April 2017 Monthly Applications and Eligibility Determinations Updated June 2017

States Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, April 2017 (Updated) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, April 2017 (Updated) (II)	Total Applications for Financial Assistance Submitted at State Level, April 2017 (Updated) (III)	Total Applications for Financial Assistance Submitted at State Level, March 2017 (Updated) (IV)	% Change March to April 2017 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, April 2017 (Updated) (VI)	Individuals Determined Eligible for CHIP at Application, April 2017 (Updated) (VII)	Total New Determinations, April 2017 (Updated) (VIII)
Alaska	FFM	3,268	N/A	3,268	3,809	-14.20%	3,620	-	3,620
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	-	N/A	-	-	-	-	-	-
California	SBM	155,604	-	155,604	186,986	-16.78%	158,261	12,563	170,824
Colorado	SBM	16,582	1,548	18,130	21,413	-15.33%	13,626	189	13,815
Connecticut	SBM	6,125	4,382	10,507	14,017	-25.04%	10,138	123	10,261
Delaware	Partnership	-	N/A	-	-	-	-	-	-
District of Columbia	SBM	2,672	1,821	4,493	5,389	-16.63%	5,040	-	5,040
Hawaii	SBM**	4,665	-	4,665	4,207	10.89%	6,863	350	7,213
Illinois	Partnership	67,396	N/A	67,396	69,594	-3.16%	42,795	13,435	56,230
Indiana	FFM	69,057	N/A	69,057	86,778	-20.42%	30,565	2,134	32,699
Iowa	Partnership	14,210	N/A	14,210	16,635	-14.58%	3,056	-	3,056
Kentucky	SBM	-	9,451	9,451	10,662	-11.36%	-	-	-
Louisiana	FFM	22,263	N/A	22,263	26,733	-16.72%	28,748	1,796	30,544
Maryland	SBM	7,650	70,639	78,289	82,965	-5.64%	22,741	3,266	26,007
Massachusetts	SBM	17,320	5,965	23,285	26,447	-11.96%	-	-	-
Michigan	Partnership	42,676	N/A	42,676	47,003	-9.21%	42,619	1,281	43,900
Minnesota	SBM	5,779	25,326	31,105	36,835	-15.56%	30,969	64	31,033
Montana	Plan Management	3,708	N/A	3,708	4,270	-13.16%	3,956	178	4,134
Nevada	SBM**	17,735	-	17,735	19,750	-10.20%	11,319	52	11,371
New Hampshire	Partnership	8,156	N/A	8,156	9,480	-13.97%	5,263	434	5,697
New Jersey	FFM	25,999	N/A	25,999	34,427	-24.48%	11,408	3,373	14,781
New Mexico	SBM**	8,220	N/A	8,220	9,231	-10.95%	10,781	1,378	12,159
New York	SBM	-	832,472	832,472	690,549	20.55%	136,838	10,910	147,748
North Dakota	FFM	1,605	N/A	1,605	1,977	-18.82%	1,993	54	2,047
Ohio	Plan Management	48,087	N/A	48,087	56,831	-15.39%	42,611	2,611	45,222
Oregon	SBM**	13,616	-	13,616	14,457	-5.82%	37,529	2,793	40,322
Pennsylvania	FFM	78,845	N/A	78,845	89,334	-11.74%	48,625	8,600	57,225
Rhode Island	SBM	5,206	-	5,206	4,820	8.01%	3,309	325	3,634
Vermont	SBM	2,886	1,321	4,207	4,816	-12.65%	4,584	164	4,748
Washington	SBM	17,596	54,831	72,427	86,118	-15.90%	32,946	816	33,762
West Virginia	Partnership	18,237	N/A	18,237	24,268	-24.85%	10,838	516	11,354
Subtotal for All States Expanding Medicaid		685,163	1,007,756	1,692,919	1,689,801	0.18%	761,041	67,405	828,446
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		685,163	1,007,756	1,692,919	1,689,801	0.18%	761,041	67,405	828,446
Subtotal for States Expanding Medicaid that Reported in March and April 2017				1,692,919	1,689,801	Difference March to April 2017 3,118			

Table 1B: Medicaid and CHIP: April 2017 Monthly Applications and Eligibility Determinations Updated June 2017

**= 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 report March and April 2017 Applications data (subtotals exclude AR, AZ, DE).

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

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

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	(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), (II), (III)	Only includes applications that have been entered into the Eligibility Management System; applications that were received during the month but are still waiting to be screened are excluded.
Connecticut	(I), (III)	May not include all Medicaid applications.
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.
Connecticut	(VI), (VII), (VIII)	May not include all Medicaid determinations.
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	(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 04/1 - 04/30.
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 agency determinations are not included.
New York	(II), (III), (IV), (VI), (VII), (VIII)	Includes renewals.
Ohio	(I), (III), (IV)	Includes renewals.
Ohio	(VI)	Includes CHIP.
Ohio	(VI), (VIII)	Includes renewals.
Oregon	(VI)	Count is of households, not individuals.
Oregon	(I), (III), (IV) (VI), (VIII)	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)	May include applications for qualified health plans.
Vermont	(III), (IV)	Includes renewals.
Vermont	(VI)	Includes renewals.

Table 1B: Medicaid and CHIP: April 2017 Monthly Applications and Eligibility Determinations Updated June 2017

States Not Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, April 2017 (Updated) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, April 2017 (Updated) (II)	Total Applications for Financial Assistance Submitted at State Level, April 2017 (Updated) (III)	Total Applications for Financial Assistance Submitted at State Level, March 2017 (Updated) (IV)	% Change March to April 2017 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, April 2017 (Updated) (VI)	Individuals Determined Eligible for CHIP at Application, April 2017 (Updated) (VII)	Total New Determinations, April 2017 (Updated) (VIII)
Alabama	FFM	15,022	N/A	15,022	17,440	-13.86%	24,542	2,998	27,540
Florida	FFM	251,051	N/A	251,051	269,030	-6.68%	124,727	16,445	141,172
Georgia	FFM	48,731	N/A	48,731	76,262	-36.10%	48,035	1,695	49,730
Idaho	SBM	7,010	-	7,010	7,813	-10.28%	4,653	274	4,927
Kansas	Plan Management	-	N/A	-	-	-	-	-	-
Maine	Plan Management	1,444	N/A	1,444	1,822	-20.75%	9,268	324	9,592
Mississippi	FFM/SBM-SHOP	14,628	N/A	14,628	18,516	-21.00%	10,081	388	10,469
Missouri	FFM	16,634	N/A	16,634	20,125	-17.35%	10,016	-	10,016
Nebraska	Plan Management	5,459	N/A	5,459	6,671	-18.17%	6,207	701	6,908
North Carolina	FFM	19,170	N/A	19,170	22,949	-16.47%	28,166	3,475	31,641
Oklahoma	FFM	36,072	N/A	36,072	38,753	-6.92%	29,382	4,389	33,771
South Carolina	FFM	20,829	N/A	20,829	24,694	-15.65%	8,015	219	8,234
South Dakota	Plan Management	2,192	N/A	2,192	2,856	-23.25%	1,326	-	1,326
Tennessee	FFM	520	N/A	520	611	-14.89%	-	439	439
Texas	FFM	119,902	N/A	119,902	131,534	-8.84%	106,080	12,992	119,072
Utah	FFM/SBM-SHOP	19,094	N/A	19,094	21,611	-11.65%	53,623	-	53,623
Virginia	Plan Management	21,643	N/A	21,643	25,661	-15.66%	14,142	616	14,758
Wisconsin	FFM	21,669	N/A	21,669	24,567	-11.80%	17,034	1,020	18,054
Wyoming	FFM	1,554	N/A	1,554	1,889	-17.73%	-	-	-
Subtotal for All States Not Expanding Medicaid		622,624	-	622,624	712,804	-12.65%	495,297	45,975	541,272
Subtotal for States Not Expanding Medicaid that Reported in March and April 2017				622,624	712,804	Difference March to April 2017 -90,180			
Total Across All States		1,307,787	1,007,756	2,315,543	2,402,605	-3.62%	1,256,338	113,380	1,369,718
Total for States that Reported in March and April 2017				2,315,543	2,402,605	Difference March to April 2017 -87,062			

Table 1B: Medicaid and CHIP: April 2017 Monthly Applications and Eligibility Determinations Updated June 2017

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

Column V is calculated for only those states that reported March and April 2017 Applications data (subtotals exclude KS; totals exclude AR, AZ, DE, 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 households.
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.

Table 1A: Medicaid and CHIP: March and April 2017 Monthly Enrollment Updated June 2017

Performance Indicator Information:

The Medicaid and CHIP performance indicators were developed in consultation with states, and are intended to assist in monitoring the eligibility and enrollment processes for Medicaid and CHIP programs in all states. A common set of definitions were developed for consistency in reporting the Medicaid and CHIP performance indicators. More detailed information about the performance indicators, including these standardized definitions can be found in the Methodology: About the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Report at <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights/index.html>.

Total enrollment figures represent 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. These figures are a point-in-time count of total program enrollment, and not solely a count of those newly enrolled during the reporting period. These figures include 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), except as indicated in the state-specific notes included with the tables. 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. 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. For purposes of this report, the term “states” includes the 50 states and the District of Columbia.

Some of the data contained in this table is designated as "preliminary" because it is reported soon after the close of the reporting month and contains few, if any, individuals who become eligible in current month after the close of the month due to retroactive eligibility under Medicaid or similar reasons. When applicable, states report “updated” data one month after the close of the reporting period to account for retroactive enrollment. Updated enrollment data for prior months is available on the Monthly Medicaid and CHIP Application, Eligibility Determination, and Enrollment Reports and Updated Data page at <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights/index.html>.

The figures in this table may differ from other published state and national enrollment figures because they include only individuals with comprehensive benefits, except as indicated in the state-specific notes included with the tables. For purposes of this report, the term “states” includes the 50 states and the District of Columbia.

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 the data quality limitations sections below.

Data Context Notes:

- For the following states in the table below the "updated" March enrollment data is identical to previously published preliminary data: AR, AZ, CT, DC, DE, FL, IA, KS, KY, LA, MO, MS, ND, NM, NV, OH, OK, SC, SD, WI, WV, WY.
- For the following states in the table below the "updated" April enrollment data is identical to previously published preliminary data: AR, AZ, CT, DC, DE, FL, IA, KS, KY, LA, MO, MS, ND, NM, NV, OH, OK, SC, SD, WI, WV, WY.

Table 1A: Medicaid and CHIP: March and April 2017 Monthly Enrollment Updated June 2017

		Enrollment					
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, March 2017 (Updated) (I)	Total Medicaid and CHIP Enrollment, April 2017 (Updated) (II)	% Change March to April 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to April 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to April 2017 (Columns (IV) and (II)) (VI)
Alaska	FFM	187,821	189,922	1.12%	122,334	67,588	55.25%
Arizona	FFM	1,741,301	1,746,566	0.30%	1,201,770	544,796	45.33%
Arkansas	Partnership	912,043	921,347	1.02%	556,851	364,496	65.46%
California	SBM	12,376,741	12,358,979	-0.14%	7,755,381	4,603,598	59.36%
Colorado	SBM	1,389,627	1,399,772	0.73%	783,420	616,352	78.67%
Connecticut	SBM	771,588	756,600	-1.94%	-	-	-
Delaware	Partnership	244,571	243,004	-0.64%	223,324	19,680	8.81%
District of Columbia	SBM	271,511	272,699	0.44%	235,786	36,913	15.66%
Hawaii	SBM**	348,596	346,180	-0.69%	288,357	57,823	20.05%
Illinois	Partnership	3,097,621	3,092,375	-0.17%	2,626,943	465,432	17.72%
Indiana	FFM	1,513,842	1,503,787	-0.66%	1,120,674	383,113	34.19%
Iowa	Partnership	632,571	629,295	-0.52%	493,515	135,780	27.51%
Kentucky	SBM	1,246,349	1,247,764	0.11%	606,805	640,959	105.63%
Louisiana	FFM	1,447,315	1,448,406	0.08%	1,019,787	428,619	42.03%
Maryland	SBM	1,303,082	1,303,343	0.02%	856,297	447,046	52.21%
Massachusetts	SBM	1,662,576	1,674,926	0.74%	1,296,359	378,567	29.20%
Michigan	Partnership	2,367,404	2,369,420	0.09%	1,912,009	457,411	23.92%
Minnesota	SBM	1,061,433	1,063,158	0.16%	873,040	190,118	21.78%
Montana	Plan Management	256,160	258,047	0.74%	148,974	109,073	73.22%
Nevada	SBM**	631,128	629,913	-0.19%	332,560	297,353	89.41%
New Hampshire	Partnership	190,250	189,524	-0.38%	127,082	62,442	49.14%
New Jersey	FFM	1,801,538	1,802,202	0.04%	1,283,851	518,351	40.37%
New Mexico	SBM**	787,110	784,403	-0.34%	457,678	326,725	71.39%
New York	SBM	6,443,857	6,434,699	-0.14%	5,678,417	756,282	13.32%
North Dakota	FFM	93,474	93,360	-0.12%	69,980	23,380	33.41%
Ohio	Plan Management	2,807,525	2,802,733	-0.17%	2,161,785	640,948	29.65%
Oregon	SBM**	998,972	1,006,582	0.76%	626,356	380,226	60.70%
Pennsylvania	FFM	2,951,646	2,946,725	-0.17%	2,386,046	560,679	23.50%
Rhode Island	SBM	308,343	310,083	0.56%	190,833	119,250	62.49%
Vermont	SBM	170,659	169,625	-0.61%	161,081	8,544	5.30%
Washington	SBM	1,814,997	1,813,055	-0.11%	1,117,576	695,479	62.23%
West Virginia	Partnership	564,408	562,183	-0.39%	354,544	207,639	58.57%
Subtotal for All States Expanding Medicaid		52,396,059	52,370,677	-0.05%	37,069,415	14,544,662	39.24%
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		52,396,059	52,370,677	-0.05%	37,069,415	14,544,662	39.24%
Subtotal for States Expanding Medicaid that Reported in March and April 2017		52,396,059	52,370,677	Difference March to April 2017 -25,382			
Subtotal for States Expanding Medicaid that Reported in April 2017 and July-Sept. 2013			51,614,077		37,069,415	Difference July-Sept 2013 to April 2017 14,544,662	

Table 1A: Medicaid and CHIP: March and April 2017 Monthly Enrollment Updated June 2017

****= 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 March and April 2017 data.

Columns V and VI are calculated for only those states that reported data from both and April 2017 and the July-Sept. 2013 period.

The subtotals for states reporting data from both and April 2017 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
California		Health Program section 1115 demonstration.
Connecticut	(I), (II)	May not include all enrollees.
District of Columbia	(I), (II), (IV)	Includes limited benefit dual eligible individuals and individuals enrolled in the locally funded DC Health Alliance.
Minnesota	(IV)	May include duplicates (unlike columns (I) and (II)).
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.

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		Enrollment					
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, March 2017 (Updated) (I)	Total Medicaid and CHIP Enrollment, April 2017 (Updated) (II)	% Change March to April 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to April 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to April 2017 (Columns (IV) and (II)) (VI)
Alabama	FFM	884,948	887,725	0.31%	799,176	88,549	11.08%
Florida	FFM	4,360,830	4,352,537	-0.19%	3,695,306	657,231	17.79%
Georgia	FFM	1,768,307	1,764,269	-0.23%	1,535,090	229,179	14.93%
Idaho	SBM	295,611	296,138	0.18%	238,150	57,988	24.35%
Kansas	Plan Management	393,881	387,934	-1.51%	378,160	9,774	2.58%
Maine	Plan Management	268,670	268,449	-0.08%	-	-	-
Mississippi	FFM/SBM-SHOP	683,557	679,257	-0.63%	637,229	42,028	6.60%
Missouri	FFM	977,708	978,080	0.04%	846,084	131,996	15.60%
Nebraska	Plan Management	245,306	244,711	-0.24%	244,600	111	0.05%
North Carolina	FFM	2,087,729	2,088,892	0.06%	1,595,952	492,940	30.89%
Oklahoma	FFM	810,816	819,316	1.05%	790,051	29,265	3.70%
South Carolina	FFM	1,035,789	1,011,597	-2.34%	889,744	121,853	13.70%
South Dakota	Plan Management	120,189	119,227	-0.80%	115,501	3,726	3.23%
Tennessee	FFM	1,557,370	1,544,352	-0.84%	1,244,516	299,836	24.09%
Texas	FFM	4,788,950	4,770,998	-0.37%	4,441,605	329,393	7.42%
Utah	FFM/SBM-SHOP	310,893	308,901	-0.64%	294,029	14,872	5.06%
Virginia	Plan Management	1,007,076	1,009,847	0.28%	935,434	74,413	7.95%
Wisconsin	FFM	1,046,217	1,041,182	-0.48%	985,531	55,651	5.65%
Wyoming	FFM	61,635	61,651	0.03%	67,518	-5,867	-8.69%
Subtotal for All States Not Expanding Medicaid		22,705,482	22,635,063	-0.31%	19,733,676	2,632,938	13.34%
Subtotal for States Not Expanding Medicaid that Reported in March and April 2017		22,705,482	22,635,063	Difference March to April 2017 -70,419			
Subtotal for States Not Expanding Medicaid that Reported in April 2017 and July-Sept. 2013			22,366,614		19,733,676	Difference July-Sept 2013 to April 2017 2,632,938	

Table 1A: Medicaid and CHIP: March and April 2017 Monthly Enrollment Updated June 2017

(-)=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 March and April 2017 data.

Columns V and VI are calculated for only those states that reported data from both and April 2017 and the July-Sept. 2013 period.

The subtotals for states reporting data from both and April 2017 and the July-Sept. 2013 period exclude ME.

Alabama	(IV)	Data is from September 2013 only.
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 1A: Medicaid and CHIP: March and April 2017 Monthly Enrollment Updated June 2017

All States	Total Enrollment					
	Total Medicaid and CHIP Enrollment, March 2017 (Updated) (I)	Total Medicaid and CHIP Enrollment, April 2017 (Updated) (II)	% Change March to April 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to April 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to April 2017 (Columns (IV) and (II)) (VI)
Total Across All States	75,101,541	75,005,740	-0.13%	56,803,091	17,177,600	30.24%
Total for States that Reported in March and April 2017	75,101,541	75,005,740	Difference March to April 2017 -95,801			
Total for States that Reported in April 2017 and July-Sept. 2013		73,980,691		56,803,091	Difference July-Sept 2013 to April 2017 17,177,600	

Column III is calculated for only those states that reported both March and April 2017 data.

Columns V and VI are calculated for only those states that reported data from both and April 2017 and the July-Sept. 2013 period.

Totals for states reporting data from both and April 2017 and the July-Sept. 2013 period exclude CT and ME.