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 (VII)) 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 January and Tennessee only provided determination data from their CHIP program.

				Applications		Determinations			
States Expanding Medicaid	Marketplace Type	New Applications Submitted to Medicaid and CHIP Agencies, February 2017 (Updated) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, February 2017 (Updated) (II)	Total Applications for Financial Assistance Submitted at State Level, February 2017 (Updated) (III)	Total Applications for Financial Assistance Submitted at State Level, January 2017 (Updated) (IV)	% Change January to February 2017 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, February 2017 (Updated) (VI)	Individuals Determined Eligible for CHIP at Application, February 2017 (Updated) (VII)	Total New Determinations, February 2017 (Updated) (VIII)
Alaska	FFM	3,289	N/A	3,289	3,729	-11.80%	3,923	-	3,923
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	-	N/A	-	-	-	-	-	-
California	SBM	182,096	-	182,096	232,993	-21.84%	174,942	14,966	189,908
Colorado	SBM	18,888	3,372	22,260	33,152	-32.85%	14,925	189	15,114
Connecticut	SBM	8,318	3,613	11,931	21,697	-45.01%	10,189	86	10,275
Delaware	Partnership	-	N/A	-	-	-	-	-	-
District of Columbia	SBM	2,371	1,892	4,263	5,082	-16.12%	5,094	-	5,094
Hawaii	SBM**	4,304		4,304	5,109	-15.76%	7,294		7,596
Illinois	Partnership	98,472		98,472	102,834	-4.24%	43,557	13,489	57,046
Indiana	FFM	91,141	N/A	91,141	94,204	-3.25%	38,719	3,073	41,792
lowa	Partnership	14,950		14,950	21,972	-31.96%	-	-	-
Kentucky	SBM	-	9,902	9,902	12,345	-19.79%	-	-	-
Louisiana	FFM	23,608		23,608	31,695	-25.52%	32,293	2,040	34,333
Maryland	SBM	6,881	67,877	74,758		-28.99%	21,392	2,083	23,475
Massachusetts	SBM	20,787		26,427	35,887	-26.36%	-	-	-
Michigan	Partnership	44,672		44,672	58,377	-23.48%	49,609	1,422	51,031
Minnesota	SBM	6,273		38,361	59,301	-35.31%	29,375		29,418
Montana	Plan Management	3,733		3,733	5,049	-26.06%	4,571	338	
Nevada	SBM**	18,739		18,739	24,052	-22.09%	13,092		·
New Hampshire	Partnership FFM	8,062 29,283		8,062 29,283	9,693 38,723	-16.83% -24.38%	5,300 16,584	603 6,832	5,903
New Jersey New Mexico	SBM**	8,851	N/A	8,851	10,329	-24.36% -14.31%			23,416 13,817
New York	SBM		75.4.040	754,968	962,657	-14.51% -21.57%	172,913		
North Dakota	FFM	- 1,675		1,675	2,377	-21.57 <i>%</i> -29.53%	·		
Ohio	Plan Management	49,688		49,688			47,952		
Oregon	SBM**	13,863		13,863	20,150		·		
Pennsylvania	FFM	79,148		79,148		-18.19%	54,150		
Rhode Island	SBM	4,592		4,592		-49.19%	3,504		
Vermont	SBM	3,160		4,355	6,991	-37.71%	4,106		
Washington	SBM	17,751		76,090	130,180	-41.55%			
West Virginia	Partnership	22,646		22,646			12,264		
Subtotal for All States Exp	Subtotal for All States Expanding Medicaid		938,886	1,726,127	2,227,569	-22.51%	841,283	76,239	917,522
Subtotal for All States wit	h Expansions in Effect								
and Providing Coverage in	Reporting Month	787,241	938,886	1,726,127	2,227,569	-22.51% Difference January to		76,239	917,522
Subtotal for States Expanding Medicaid that Reported in January and February 2017				1,726,127	2,227,569	February 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 January and February 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) 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), (VIII) Does not include data from all consortia.

California (VI) Reflects primarily newly-determined and likely eligible Medicaid applicants

alifornia 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) 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), (VIII), (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.

lowa (VI) Does not include MAGI determinations.

lowa (VI), (VII), (VIII) Data are incomplete; does not include all determinations.

lowa (I), (III), (IV), (VI), (VII) Includes renewals.

(I), (III), (IV)

lowa (I), (III), (IV) Includes SSI enrollees automatically enrolled in Medicaid without submitting an application.

Includes renewals.

Maryland (VI), (VII), (VIII) Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 02/I - 02/28.

(II), (III), (IV), (VI), (VII),
Maryland (VIII) Includes some renewals from the SBM.

Michigan (VII) Includes some renewals from the SBM.

Michigan (VI) Does not include MAGI determinations.

Michigan (VI) 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.

(II), (III), (IV), (VI), (VII),
New York (VIII)

Nevada

New York(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), (VIII), (VIII) Count is of households, not individuals.

Rhode Island (I), (III), (IV), (VI), (VII) Includes only applications received and determinations made through new MAGI system.

Vermont(III), (IV)Includes renewals.Vermont(VI)Includes renewals.

				Applications		Determinations			
States Not Expanding Medicaid	Marketplace Type	New Applications Submitted to Medicaid and CHIP Agencies, February 2017 (Updated) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, February 2017 (Updated) (II)	Total Applications for Financial Assistance Submitted at State Level, February 2017 (Updated) (III)	Total Applications for Financial Assistance Submitted at State Level, January 2017 (Updated) (IV)	% Change January to February 2017 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, February 2017 (Updated) (VI)	Individuals Determined Eligible for CHIP at Application, February 2017 (Updated) (VII)	Total New Determinations, February 2017 (Updated) (VIII)
Alabama	FFM	15,214	N/A	15,214	18,097	-15.93%	25,073	3,679	28,752
Florida	FFM	246,147	N/A	246,147	304,159	-19.07%	119,192	16,167	135,359
Georgia	FFM	63,558	N/A	63,558	76,017	-16.39%	73,049	1,297	74,346
Idaho	SBM	8,290	-	8,290	13,962	-40.62%	5,035	401	5,436
Kansas	Plan Management	-	N/A	-	-	-	-	-	-
Maine	Plan Management	1,351	N/A	1,351	1,711	-21.04%	8,160	349	8,509
Mississippi	FFM/SBM-SHOP	15,736	N/A	15,736	20,006	-21.34%	11,320	494	11,814
Missouri	FFM	17,318	N/A	17,318	20,663	-16.19%	10,183	-	10,183
Nebraska	Plan Management	5,923	N/A	5,923	7,344	-19.35%	6,294	962	7,256
North Carolina	FFM	21,198	N/A	21,198	25,850	-18.00%	32,001	3,863	35,864
Oklahoma	FFM	36,336	N/A	36,336	41,696	-12.85%	40,353	7,261	47,614
South Carolina	FFM	21,957	N/A	21,957	25,114	-12.57%	5,720	105	5,825
South Dakota	Plan Management	2,294	N/A	2,294	2,861	-19.82%	1,260	-	1,260
Tennessee	FFM	530	N/A	530	653	-18.84%	-	486	486
Texas	FFM	114,728	N/A	114,728	140,406	-18.29%	106,585	14,098	120,683
Utah	FFM/SBM-SHOP	20,252	N/A	20,252	28,396	-28.68%	50,577	-	50,577
Virginia	Plan Management	21,604	N/A	21,604	26,185	-17.49%	14,369	606	14,975
Wisconsin	FFM	22,984	N/A	22,984	28,941	-20.58%	20,041	1,215	21,256
Wyoming	FFM	-	N/A	-	-	-	-	-	-
Subtotal for All States Not	Expanding Medicaid	635,420	-	635,420	782,061		529,212	50,983	580,195
•	Subtotal for States Not Expanding Medicaid that					Difference January to February 2017			
Reported in January and Fe	ebruary 2017			635,420	782,061	-146,641			
Total Across All States		1,422,661	938,886	2,361,547	3,009,630	-21.53%	1,370,495	127,222	1,497,717
Total for States that Repor	ted in January and		,	<u> </u>	, ,	Difference January to February 2017		,	, ,
February 2017				2,361,547	3,009,630	-648,083			

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

Column V is calculated for only those states that reported January and February 2017 Applications data (subtotals exclude KS and WY; totals exclude AR, AZ, DE, KS, WY).

 $\label{partnership} \textbf{Partnership, Plan Management, FFM/SBM-SHOP} \ are \ all \ types \ of \ FFMs.$

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.

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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" January enrollment data is identical to previously published preliminary data: AR, AZ, CT, DC, DE, FL, IA, KS, KY, LA, MO, ND, NM, NV, OK, SC, SD, WI, WV, WY.
- For the following states in the table below the "updated" February enrollment data is identical to previously published preliminary data: AR, AZ, CO, CT, DC, DE, FL, IA, KS, KY, LA, MO, ND, NM, NV, OK, SC, SD, VA, WI, WV, WY.
- Because of improved system functionality, Maryland is able to more accurately account for its entire CHIP population in its CHIP enrollment data. The state updated prior months' enrollment figures.
- As part of ongoing data cleanup work in its systems, Ohio revised and resubmitted its prior months' enrollment data which more accurately account for its Medicaid enrollment.

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Table 1A: Medicaid and CHIP: January and February 2017 Monthly Enrollment Updated April 2017

		Enrollment							
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, January 2017 (Updated) (I)	Total Medicaid and CHIP Enrollment, February 2017 (Updated) (II)	% Change January to February 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July- Sept. 2013 (IV)	Net Change, July-Sept. 2013 to February 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to February 2017 (Columns (IV) and (II)) (VI)		
Alaska	FFM	181,723	184,392	1.47%	122,334	62,058	50.73%		
Arizona	FFM	1,743,472	1,741,558	-0.11%	1,201,770	539,788	44.92%		
Arkansas	Partnership	943,269	905,505	-4.00%	556,851	348,654	62.61%		
California	SBM	12,360,449	12,383,460	0.19%	7,755,381	4,628,079	59.68%		
Colorado	SBM	1,387,803	1,375,139	-0.91%	783,420	591,719	75.53%		
Connecticut	SBM	765,313	763,695	-0.21%	-	-	-		
Delaware	Partnership	243,340	244,076	0.30%	223,324	20,752	9.29%		
District of Columbia	SBM	267,538	268,695	0.43%	235,786	32,909	13.96%		
Hawaii	SBM**	346,995	348,474	0.43%	288,357	60,117	20.85%		
Illinois	Partnership	3,100,137	3,101,778	0.05%	2,626,943	474,835	18.08%		
Indiana	FFM	1,517,698	1,510,445	-0.48%	1,120,674	389,771	34.78%		
lowa	Partnership	637,203	633,084	-0.65%	493,515	139,569	28.28%		
Kentucky	SBM	1,240,321	1,244,711	0.35%	606,805	637,906	105.13%		
Louisiana	FFM	1,433,441	1,443,602	0.71%	1,019,787	423,815	41.56%		
Maryland	SBM	1,305,538	1,304,143	-0.11%	856,297	447,846	52.30%		
Massachusetts	SBM	1,652,107	1,642,646	-0.57%	1,296,359	346,287	26.71%		
Michigan	Partnership	2,351,919	2,359,421	0.32%	1,912,009	447,412	23.40%		
Minnesota	SBM	1,054,560	1,059,580	0.48%	873,040	186,540	21.37%		
Montana	Plan Management	250,145	255,884	2.29%	148,974	106,910	71.76%		
Nevada	SBM**	628,001	629,560	0.25%	332,560	297,000	89.31%		
New Hampshire	Partnership	191,389	190,739	-0.34%	127,082	63,657	50.09%		
New Jersey	FFM	1,799,021	1,802,976	0.22%	1,283,851	519,125	40.43%		
New Mexico	SBM**	779,082	783,390	0.55%	457,678	325,712	71.17%		
New York	SBM	6,445,028	6,439,670	-0.08%	5,678,417	761,253	13.41%		
North Dakota	FFM	94,332	92,658	-1.77%	69,980	22,678	32.41%		
Ohio	Plan Management	2,773,262	2,791,353	0.65%	2,161,785	629,568	29.12%		
Oregon	SBM**	980,520	978,847	-0.17%	626,356	352,491	56.28%		
Pennsylvania	FFM	2,940,839	2,949,697	0.30%	2,386,046	563,651	23.62%		
Rhode Island	SBM	303,347	303,750	0.13%	190,833	112,917	59.17%		
Vermont	SBM	168,513	169,924	0.84%	161,081	8,843	5.49%		
Washington	SBM	1,822,488	1,817,199	-0.29%	1,117,576	699,623	62.60%		
West Virginia	Partnership	567,168	565,974	-0.21%	354,544	211,430	59.63%		
Subtotal for All States Expanding Medicaid		52,275,961	52,286,025	0.02%	37,069,415	14,452,915	38.99%		
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		52,275,961	52,286,025	0.02%		14,452,915	38.99%		
Subtotal for States Expanding Medicaid that Reported in January and February 2017		52,275,961	52,286,025	Difference January to February 2017 10,064					

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Table 1A: Medicaid and CHIP: January and February 2017 Monthly Enrollment Updated April 2017

			Difference July-Sept 2013	
Subtotal for States Expanding Medicaid that			to February 2017	
Reported in February 2017 and July-Sept. 2013	51,522,330	37,069,415	14,452,915	

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**= 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.

Washington

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

(I), (II)

Column III is calculated for only those states that reported both January and February 2017 data.

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

The subtotals for states reporting data from both and February 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.
Maryland	(I), (II)	Corrected.
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.
Ohio	(I), (II)	Corrected.
Oregon	(IV)	Includes emergency Medicaid population.

Includes individuals enrolled at any point during the month.

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Table 1A: Medicaid and CHIP: January and February 2017 Monthly Enrollment Updated April 2017

				Eni	rollment		
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, January 2017 (Updated) (I)	Total Medicaid and CHIP Enrollment, February 2017 (Updated) (II)	% Change January to February 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July- Sept. 2013 (IV)	Net Change, July-Sept. 2013 to February 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to February 2017 (Columns (IV) and (II)) (VI)
Alabama	FFM	889,199	891,062	0.21%	799,176	91,886	11.50%
Florida	FFM	4,352,553	4,355,549	0.07%	3,695,306	660,243	17.87%
Georgia	FFM	1,757,498	1,761,533	0.23%	1,535,090	226,443	14.75%
Idaho	SBM	292,170	294,061	0.65%	238,150	55,911	23.48%
Kansas	Plan Management	398,728	390,219	-2.13%	378,160	12,059	3.19%
Maine	Plan Management	268,851	268,702	-0.06%	-	-	-
Mississippi	FFM/SBM-SHOP	684,721	685,516	0.12%	637,229	48,287	7.58%
Missouri	FFM	977,840	973,225	-0.47%	846,084	127,141	15.03%
Nebraska	Plan Management	243,968	244,711	0.30%	244,600	111	0.05%
North Carolina	FFM	2,089,739	2,094,908	0.25%	1,595,952	498,956	31.26%
Oklahoma	FFM	815,832	813,085	-0.34%	790,051	23,034	2.92%
South Carolina	FFM	1,032,717	1,002,882	-2.89%	889,744	113,138	12.72%
South Dakota	Plan Management	120,053	120,093	0.03%	115,501	4,592	3.98%
Tennessee	FFM	1,618,066	1,589,236	-1.78%	1,244,516	344,720	27.70%
Texas	FFM	4,807,102	4,790,248	-0.35%	4,441,605	348,643	7.85%
Utah	FFM/SBM-SHOP	311,587	311,651	0.02%	294,029	17,622	5.99%
Virginia	Plan Management	995,169	1,003,685	0.86%	935,434	68,251	7.30%
Wisconsin	FFM	1,039,857	1,042,495	0.25%	985,531	56,964	5.78%
Wyoming	FFM	61,635	61,437	-0.32%	67,518	-6,081	-9.01%
Subtotal for All States Not	Expanding Medicaid	22,757,285	22,694,298	-0.28%	19,733,676	2,691,920	13.64%
Subtotal for States Not Expanding Medicaid that Reported in January and February 2017		22,757,285	22,694,298	Difference January to February 2017 -62,987			
Subtotal for States Not Expanding Medicaid that Reported in February 2017 and July-Sept. 2013			22,425,596		19,733,676	Difference July-Sept 2013 to February 2017 2,691,920	

⁽⁻⁾⁼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 January and February 2017 data.

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

The subtotals for states reporting data from both and February 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.

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Table 1A: Medicaid and CHIP: January and February 2017 Monthly Enrollment Updated April 2017

		Total Enrollment							
All States	Total Medicaid and CHIP Enrollment, January 2017 (Updated) (I)	Total Medicaid and CHIP Enrollment, February 2017 (Updated) (II)	% Change January to February 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July- Sept. 2013 (IV)	Net Change, July-Sept. 2013 to February 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to February 2017 (Columns (IV) and (II)) (VI)			
Total Across All States	75,033,246	74,980,323	-0.07%	56,803,091	17,144,835	30.18%			
			Difference January to						
Total for States that Reported in January and			February 2017						
February 2017	75,033,246	74,980,323	-52,923						
					Difference July-Sept 2013				
Total for States that Reported in February 2017					to February 2017				
and July-Sept. 2013		73,947,926		56,803,091	17,144,835				

Column III is calculated for only those states that reported both January and February 2017 data.

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

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