

Table 1B: Medicaid and CHIP: June 2017 Monthly Applications and Eligibility Determinations Updated August 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-methodology/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 June and Tennessee only provided determination data from their CHIP program.

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

States Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, June 2017 (Updated) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, June 2017 (Updated) (II)	Total Applications for Financial Assistance Submitted at State Level, June 2017 (Updated) (III)	Total Applications for Financial Assistance Submitted at State Level, May 2017 (Updated) (IV)	% Change May to June 2017 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, June 2017 (Updated) (VI)	Individuals Determined Eligible for CHIP at Application, June 2017 (Updated) (VII)	Total New Determinations, June 2017 (Updated) (VIII)
Alaska	FFM	3,069	N/A	3,069	3,390	-9.47%	3,422	-	3,422
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	-	N/A	-	-	-	-	-	-
California	SBM	163,743	-	163,743	166,380	-1.58%	162,289	12,486	174,775
Colorado	SBM	18,278	1,738	20,016	19,772	1.23%	15,926	217	16,143
Connecticut	SBM	4,793	4,452	9,245	11,534	-19.85%	9,405	88	9,493
Delaware	Partnership	-	N/A	-	-	-	-	-	-
District of Columbia	SBM	3,525	1,895	5,420	4,865	11.41%	5,602	-	5,602
Hawaii	SBM**	4,786	-	4,786	4,705	1.72%	7,923	383	8,306
Illinois	Partnership	68,813	N/A	68,813	69,051	-0.34%	43,628	13,251	56,879
Indiana	FFM	76,018	N/A	76,018	74,963	1.41%	34,151	2,323	36,474
Iowa	Partnership	15,102	N/A	15,102	16,006	-5.65%	3,013	-	3,013
Kentucky	SBM	-	10,611	10,611	11,327	-6.32%	-	-	-
Louisiana	FFM	24,126	N/A	24,126	24,292	-0.68%	30,792	1,941	32,733
Maryland	SBM	8,203	83,277	91,480	85,598	6.87%	24,087	3,427	27,514
Massachusetts	SBM	23,381	6,564	29,945	33,116	-9.58%	-	-	-
Michigan	Partnership	45,302	N/A	45,302	46,390	-2.35%	45,567	1,176	46,743
Minnesota	SBM	6,261	23,977	30,238	33,071	-8.57%	30,783	62	30,845
Montana	Plan Management	3,890	N/A	3,890	3,919	-0.74%	4,232	229	4,461
Nevada	SBM**	19,184	-	19,184	19,814	-3.18%	12,323	53	12,376
New Hampshire	Partnership	8,201	N/A	8,201	9,009	-8.97%	5,214	465	5,679
New Jersey	FFM	32,212	N/A	32,212	28,526	12.92%	12,827	4,057	16,884
New Mexico	SBM**	11,384	N/A	11,384	9,844	15.64%	15,458	2,088	17,546
New York	SBM	-	619,289	619,289	629,535	-1.63%	125,494	10,600	136,094
North Dakota	FFM	1,840	N/A	1,840	1,770	3.95%	2,030	62	2,092
Ohio	Plan Management	52,859	N/A	52,859	54,392	-2.82%	45,289	2,796	48,085
Oregon	SBM**	23,479	-	23,479	15,763	48.95%	42,186	3,407	45,593
Pennsylvania	FFM	85,493	N/A	85,493	84,918	0.68%	51,396	8,883	60,279
Rhode Island	SBM	-	4,613	4,613	4,774	-3.37%	5,023	627	5,650
Vermont	SBM	3,335	1,566	4,901	4,429	10.66%	4,079	98	4,177
Washington	SBM	18,937	64,739	83,676	82,458	1.48%	36,895	1,187	38,082
West Virginia	Partnership	21,630	N/A	21,630	21,630	-	10,682	461	11,143
<b>Subtotal for All States Expanding Medicaid</b>		<b>747,844</b>	<b>822,721</b>	<b>1,570,565</b>	<b>1,575,241</b>	<b>-0.30%</b>	<b>789,716</b>	<b>70,367</b>	<b>860,083</b>
<b>Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month</b>		<b>747,844</b>	<b>822,721</b>	<b>1,570,565</b>	<b>1,575,241</b>	<b>-0.30%</b>	<b>789,716</b>	<b>70,367</b>	<b>860,083</b>
<b>Subtotal for States Expanding Medicaid that Reported in May and June 2017</b>				<b>1,570,565</b>	<b>1,575,241</b>	<b>Difference May to June 2017 -4,676</b>			

Table 1B: Medicaid and CHIP: June 2017 Monthly Applications and Eligibility Determinations Updated August 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 May and June 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 06/1 - 06/30.
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: June 2017 Monthly Applications and Eligibility Determinations Updated August 2017

States Not Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, June 2017 (Updated) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, June 2017 (Updated) (II)	Total Applications for Financial Assistance Submitted at State Level, June 2017 (Updated) (III)	Total Applications for Financial Assistance Submitted at State Level, May 2017 (Updated) (IV)	% Change May to June 2017 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, June 2017 (Updated) (VI)	Individuals Determined Eligible for CHIP at Application, June 2017 (Updated) (VII)	Total New Determinations, June 2017 (Updated) (VIII)
Alabama	FFM	16,449	N/A	16,449	16,598	-0.90%	25,370	3,264	28,634
Florida	FFM	280,705	N/A	280,705	281,452	-0.27%	171,706	16,654	188,360
Georgia	FFM	44,689	N/A	44,689	64,490	-30.70%	30,972	875	31,847
Idaho	SBM	7,395	-	7,395	7,443	-0.64%	5,075	288	5,363
Kansas	Plan Management	-	N/A	-	-	-	-	-	-
Maine	Plan Management	1,508	N/A	1,508	1,783	-15.42%	10,213	325	10,538
Mississippi	FFM/SBM-SHOP	16,663	N/A	16,663	18,266	-8.78%	11,008	378	11,386
Missouri	FFM	18,674	N/A	18,674	18,279	2.16%	8,150	-	8,150
Nebraska	Plan Management	5,838	N/A	5,838	6,214	-6.05%	7,137	855	7,992
North Carolina	FFM	21,153	N/A	21,153	21,376	-1.04%	31,265	3,743	35,008
Oklahoma	FFM	43,977	N/A	43,977	42,220	4.16%	35,687	5,898	41,585
South Carolina	FFM	22,349	N/A	22,349	22,417	-0.30%	8,927	93	9,020
South Dakota	Plan Management	2,544	N/A	2,544	2,576	-1.24%	1,669	-	1,669
Tennessee	FFM	545	N/A	545	544	0.18%	-	454	454
Texas	FFM	129,944	N/A	129,944	130,609	-0.51%	105,639	15,519	121,158
Utah	FFM/SBM-SHOP	22,504	N/A	22,504	20,997	7.18%	44,305	-	44,305
Virginia	Plan Management	23,142	N/A	23,142	24,141	-4.14%	15,258	616	15,874
Wisconsin	FFM	23,804	N/A	23,804	24,044	-1.00%	18,231	976	19,207
Wyoming	FFM	1,402	N/A	1,402	1,558	-10.01%	-	-	-
<b>Subtotal for All States Not Expanding Medicaid</b>		<b>683,285</b>	<b>-</b>	<b>683,285</b>	<b>705,007</b>	<b>-3.08%</b>	<b>530,612</b>	<b>49,938</b>	<b>580,550</b>
<b>Subtotal for States Not Expanding Medicaid that Reported in May and June 2017</b>				<b>683,285</b>	<b>705,007</b>	<b>Difference May to June 2017 -21,722</b>			
<b>Total Across All States</b>		<b>1,431,129</b>	<b>822,721</b>	<b>2,253,850</b>	<b>2,280,248</b>	<b>-1.16%</b>	<b>1,320,328</b>	<b>120,305</b>	<b>1,440,633</b>
<b>Total for States that Reported in May and June 2017</b>				<b>2,253,850</b>	<b>2,280,248</b>	<b>Difference May to June 2017 -26,398</b>			

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

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

Column V is calculated for only those states that reported May and June 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), (VII), (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: May and June 2017 Monthly Enrollment Updated August 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-methodology/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/monthly-reports/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" May enrollment data is identical to previously published preliminary data: AR, AZ, CO, CT, DC, DE, FL, IA, KS, KY, LA, MO, ND, NV, NM, OH, OK, SD, WI, WV, WY.
- For the following states in the table below the "updated" June enrollment data is identical to previously published preliminary data: AR, AZ, CO, CT, DC, DE, FL, IA, KS, KY, LA, MO, ND, NM, NV, OH, OK, SC, SD, WI, WV, WY.

Table 1A: Medicaid and CHIP: May and June 2017 Monthly Enrollment Updated August 2017

		Enrollment					
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, May 2017 (Updated) (I)	Total Medicaid and CHIP Enrollment, June 2017 (Updated) (II)	% Change May to June 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to June 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to June 2017 (Columns (IV) and (II)) (VI)
Alaska	FFM	192,409	194,534	1.10%	122,334	72,200	59.02%
Arizona	FFM	1,745,077	1,744,617	-0.03%	1,201,770	542,847	45.17%
Arkansas	Partnership	921,075	912,920	-0.89%	556,851	356,069	63.94%
California	SBM	12,323,263	12,293,428	-0.24%	7,755,381	4,538,047	58.51%
Colorado	SBM	1,406,646	1,403,727	-0.21%	783,420	620,307	79.18%
Connecticut	SBM	758,997	792,885	4.46%	-	-	-
Delaware	Partnership	243,490	243,938	0.18%	223,324	20,614	9.23%
District of Columbia	SBM	273,454	275,719	0.83%	235,786	39,933	16.94%
Hawaii	SBM**	347,355	348,125	0.22%	288,357	59,768	20.73%
Illinois	Partnership	3,084,388	3,075,710	-0.28%	2,626,943	448,767	17.08%
Indiana	FFM	1,498,471	1,495,314	-0.21%	1,120,674	374,640	33.43%
Iowa	Partnership	630,792	627,461	-0.53%	493,515	133,946	27.14%
Kentucky	SBM	1,251,671	1,254,443	0.22%	606,805	647,638	106.73%
Louisiana	FFM	1,450,044	1,448,253	-0.12%	1,019,787	428,466	42.02%
Maryland	SBM	1,307,949	1,305,591	-0.18%	856,297	449,294	52.47%
Massachusetts	SBM	1,669,398	1,635,301	-2.04%	1,296,359	338,942	26.15%
Michigan	Partnership	2,376,257	2,378,157	0.08%	1,912,009	466,148	24.38%
Minnesota	SBM	1,064,783	1,061,615	-0.30%	873,040	188,575	21.60%
Montana	Plan Management	260,212	260,464	0.10%	148,974	111,490	74.84%
Nevada	SBM**	631,370	631,132	-0.04%	332,560	298,572	89.78%
New Hampshire	Partnership	188,736	188,296	-0.23%	127,082	61,214	48.17%
New Jersey	FFM	1,799,590	1,789,557	-0.56%	1,283,851	505,706	39.39%
New Mexico	SBM**	781,442	777,519	-0.50%	457,678	319,841	69.88%
New York	SBM	6,440,663	6,432,211	-0.13%	5,678,417	753,794	13.27%
North Dakota	FFM	93,874	93,804	-0.07%	69,980	23,824	34.04%
Ohio	Plan Management	2,801,893	2,806,415	0.16%	2,161,785	644,630	29.82%
Oregon	SBM**	1,005,522	1,006,080	0.06%	626,356	379,724	60.62%
Pennsylvania	FFM	2,952,315	2,949,330	-0.10%	2,386,046	563,284	23.61%
Rhode Island	SBM	313,001	314,845	0.59%	190,833	124,012	64.98%
Vermont	SBM	169,606	169,702	0.06%	161,081	8,621	5.35%
Washington	SBM	1,811,049	1,806,584	-0.25%	1,117,576	689,008	61.65%
West Virginia	Partnership	561,598	558,519	-0.55%	354,544	203,975	57.53%
<b>Subtotal for All States Expanding Medicaid</b>		<b>52,356,390</b>	<b>52,276,196</b>	<b>-0.15%</b>	<b>37,069,415</b>	<b>14,413,896</b>	<b>38.88%</b>
<b>Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month</b>		<b>52,356,390</b>	<b>52,276,196</b>	<b>-0.15%</b>	<b>37,069,415</b>	<b>14,413,896</b>	<b>38.88%</b>
<b>Subtotal for States Expanding Medicaid that Reported in May and June 2017</b>		<b>52,356,390</b>	<b>52,276,196</b>	<b>Difference May to June 2017 80,194</b>			
<b>Subtotal for States Expanding Medicaid that Reported in June 2017 and July-Sept. 2013</b>			<b>51,483,311</b>		<b>37,069,415</b>	<b>Difference July-Sept 2013 to June 2017 14,413,896</b>	

Table 1A: Medicaid and CHIP: May and June 2017 Monthly Enrollment Updated August 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 May and June 2017 data.**

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

**The subtotals for states reporting data from both and June 2017 and the July-Sept. 2013 period exclude CT.**

<b>Arkansas</b>	<b>(I), (II)</b>	<b>Includes Private Option enrollees.</b>
<b>California</b>	<b>(IV)</b>	<b>Includes approximately 650,000 individuals transferred from the Low Income</b>
<b>California</b>		<b>Health Program section 1115 demonstration.</b>
<b>Connecticut</b>	<b>(I), (II)</b>	<b>May not include all enrollees.; however, column (II) represents a more complete enrollment count than column (I).</b>
<b>District of Columbia</b>	<b>(I), (II), (IV)</b>	<b>Includes limited benefit dual eligible individuals and individuals enrolled in the locally funded DC Health Alliance.</b>
<b>Minnesota</b>	<b>(IV)</b>	<b>May include duplicates (unlike columns (I) and (II)).</b>
<b>New York</b>	<b>(I), (II)</b>	<b>Includes partial benefit program enrollees.</b>
<b>North Dakota</b>	<b>(IV)</b>	<b>Data is from July 2013 only.</b>
<b>Oregon</b>	<b>(IV)</b>	<b>Includes emergency Medicaid population.</b>
<b>Washington</b>	<b>(I), (II)</b>	<b>Includes individuals enrolled at any point during the month.</b>

Table 1A: Medicaid and CHIP: May and June 2017 Monthly Enrollment Updated August 2017

		<b>Enrollment</b>					
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, May 2017 (Updated) (I)	Total Medicaid and CHIP Enrollment, June 2017 (Updated) (II)	% Change May to June 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to June 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to June 2017 (Columns (IV) and (II)) (VI)
Alabama	FFM	893,778	891,332	-0.27%	799,176	92,156	11.53%
Florida	FFM	4,347,456	4,345,267	-0.05%	3,695,306	649,961	17.59%
Georgia	FFM	1,763,783	1,765,789	0.11%	1,535,090	230,699	15.03%
Idaho	SBM	293,696	294,792	0.37%	238,150	56,642	23.78%
Kansas	Plan Management	386,802	392,222	1.40%	378,160	14,062	3.72%
Maine	Plan Management	267,566	267,388	-0.07%	-	-	-
Mississippi	FFM/SBM-SHOP	683,505	682,130	-0.20%	637,229	44,901	7.05%
Missouri	FFM	975,125	964,912	-1.05%	846,084	118,828	14.04%
Nebraska	Plan Management	244,721	244,956	0.10%	244,600	356	0.15%
North Carolina	FFM	2,087,653	2,082,922	-0.23%	1,595,952	486,970	30.51%
Oklahoma	FFM	808,108	804,514	-0.44%	790,051	14,463	1.83%
South Carolina	FFM	1,030,565	1,008,200	-2.17%	889,744	118,456	13.31%
South Dakota	Plan Management	118,960	118,709	-0.21%	115,501	3,208	2.78%
Tennessee	FFM	1,534,203	1,498,146	-2.35%	1,244,516	253,630	20.38%
Texas	FFM	4,774,699	4,767,978	-0.14%	4,441,605	326,373	7.35%
Utah	FFM/SBM-SHOP	308,147	306,849	-0.42%	294,029	12,820	4.36%
Virginia	Plan Management	1,012,111	1,011,261	-0.08%	935,434	75,827	8.11%
Wisconsin	FFM	1,040,908	1,039,204	-0.16%	985,531	53,673	5.45%
Wyoming	FFM	61,874	60,822	-1.70%	67,518	-6,696	-9.92%
<b>Subtotal for All States Not Expanding Medicaid</b>		<b>22,633,660</b>	<b>22,547,393</b>	<b>-0.38%</b>	<b>19,733,676</b>	<b>2,546,329</b>	<b>12.90%</b>
<b>Subtotal for States Not Expanding Medicaid that Reported in May and June 2017</b>		<b>22,633,660</b>	<b>22,547,393</b>	<b>Difference May to June 2017 86,267</b>			
<b>Subtotal for States Not Expanding Medicaid that Reported in June 2017 and July-Sept. 2013</b>			<b>22,280,005</b>		<b>19,733,676</b>	<b>Difference July-Sept 2013 to June 2017 2,546,329</b>	

Table 1A: Medicaid and CHIP: May and June 2017 Monthly Enrollment Updated August 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 May and June 2017 data.

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

The subtotals for states reporting data from both and June 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: May and June 2017 Monthly Enrollment Updated August 2017

All States	Total Enrollment					
	Total Medicaid and CHIP Enrollment, May 2017 (Updated) (I)	Total Medicaid and CHIP Enrollment, June 2017 (Updated) (II)	% Change May to June 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to June 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to June 2017 (Columns (IV) and (II)) (VI)
<b>Total Across All States</b>	<b>74,990,050</b>	<b>74,823,589</b>	<b>-0.22%</b>	<b>56,803,091</b>	<b>16,960,225</b>	<b>29.86%</b>
<b>Total for States that Reported in May and June 2017</b>	<b>74,990,050</b>	<b>74,823,589</b>	<b>Difference May to June 2017 166,461</b>			
<b>Total for States that Reported in June 2017 and July-Sept. 2013</b>		<b>73,763,316</b>		<b>56,803,091</b>	<b>Difference July-Sept 2013 to June 2017 16,960,225</b>	

Column III is calculated for only those states that reported both May and June 2017 data.

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

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