

2022 Medicaid and CHIP Beneficiary Profile: Enrollment, Expenditures, Characteristics, Health Status, and Experience











Introduction

The Medicaid and Children's Health Insurance Program (CHIP) Beneficiary Profile provides an overview of Medicaid and CHIP enrollment and the expenditures, characteristics, health status, and experience of the beneficiaries served by Medicaid and CHIP. It is not intended as a comprehensive assessment of Medicaid and CHIP.

- The charts in the profile are based on the most recent data sources that allowed for meaningful comparative analysis. Most exhibits are based on publicly available, published data sources. Some exhibits are based on primary analyses of Centers for Medicare & Medicaid Services (CMS) claims and other administrative data.
- The data sources included in the profile vary in terms of the time frame available and the populations included. Please refer to the sidebar on each chart for notes (including populations excluded from the data), data sources, and links (where available). Please refer to the Appendix for more information on each data source.

More information about the Medicaid and CHIP programs, their beneficiaries, and the quality of care is available in the following additional resources:

- 2022 Medicaid and CHIP Beneficiaries at a Glance shows key highlights from the Medicaid and CHIP Beneficiary Profile. It is available at: https://www.medicaid.gov/medicaid/quality-of-care/index.html.
- CMS developed the Medicaid and CHIP Scorecard to increase public transparency and accountability about the programs' administration and outcomes. It is available at: https://www.medicaid.gov/state-overviews/scorecard/index.html.
- More information on the measurement of quality of care in Medicaid and CHIP, including the Child and Adult Core Sets of health care quality measures, is available at: https://www.medicaid.gov/medicaid/quality-of-care/index.html.

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ABOUT THE MEDICAID AND CHIP BENEFICIARY PROFILE



About the Medicaid and CHIP Beneficiary Profile

The Medicaid and CHIP Beneficiary Profile provides an overview of Medicaid and CHIP enrollment and the expenditures, characteristics, health status, and experience of the beneficiaries served by Medicaid and CHIP. This profile release also contains a special section devoted to the oral health status and utilization of children and adults covered by Medicaid and CHIP.

As the agency responsible for ensuring quality health care coverage for Medicaid and CHIP beneficiaries, CMS plays a key role in promoting quality health care for adults and children in Medicaid and CHIP.

The profile covers the following domains:

- Medicaid and CHIP Enrollment
- Beneficiary Expenditures
- Beneficiary Characteristics
- Beneficiary Health Status
- Beneficiary Experience
- Special Topic: Oral Health

Unless otherwise noted. charts include all Medicaid and CHIP beneficiaries. One notable exclusion from some charts is institutionalized individuals; surveys tend to exclude such individuals from their samples. Please refer to the sidebar on each chart for notes (including exclusions), data sources, and links (where available). Please refer to the **Appendix for more** information on data sources.



MEDICAID AND CHIP ENROLLMENT



Medicaid and CHIP Enrollment

Fast fact: As of February 2022, Medicaid and CHIP covered nearly 87.4 million individuals in the United States (slide 8).

This section of the profile provides context on Medicaid and CHIP enrollment.

The charts in this section include:

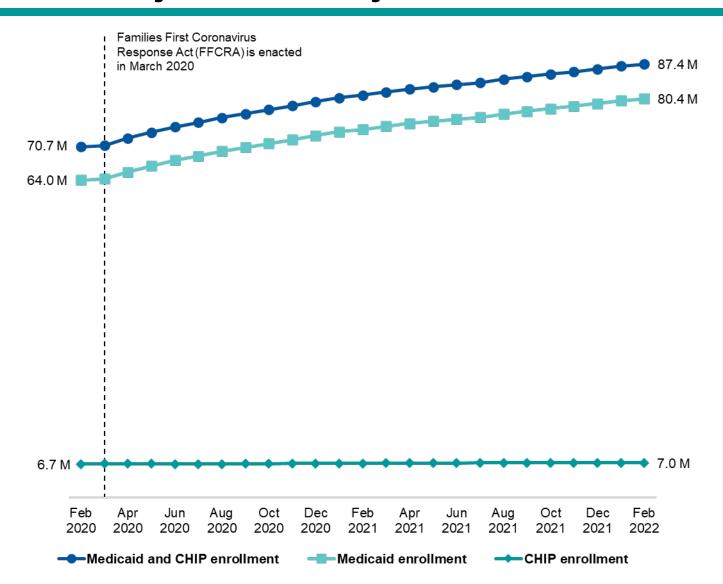
- National Medicaid and CHIP Enrollment Trends
- Percentage of Child and Adult Population Enrolled in Medicaid or CHIP, by State
- Percentage of Child Population Enrolled in Medicaid or CHIP, by State
- Percentage of Adult Population Enrolled in Medicaid or CHIP, by State
- Percentage of Medicaid Beneficiaries in Comprehensive Managed Care, by State
- Percentage of Medicaid and CHIP Beneficiaries Who Were Dually Eligible for Medicare and Medicaid

Note:

While newer enrollment data are available for some slides, some data points were calculated with 2020 data to align with the available Census data.



National Medicaid and CHIP Enrollment Trends, February 2020 – February 2022



From February 2020 to February 2022, national Medicaid and CHIP enrollment increased by 16.7 million individuals (23.6%).

Notes: This analysis includes preliminary enrollment data from 50 states and the District of Columbia. Enrollment totals represent the total unduplicated number of individuals enrolled in Medicaid and CHIP as of the last day of the reporting period. These figures are point-in-time counts of program enrollment and include only those individuals who are eligible for comprehensive benefits. The Families First Coronavirus Response Act (FFCRA) maintenance of effort requirement made available a temporary 6.2 percentage point increase to each state or territory's federal medical assistance percentage (FMAP) during the emergency. As a condition of receiving the FMAP increase, states must meet several requirements pertaining to eligibility and maintenance of enrollment.

Source: CMS. February 2022 Medicaid and CHIP Enrollment Trends Snapshot. Figure 1 and Appendix A.

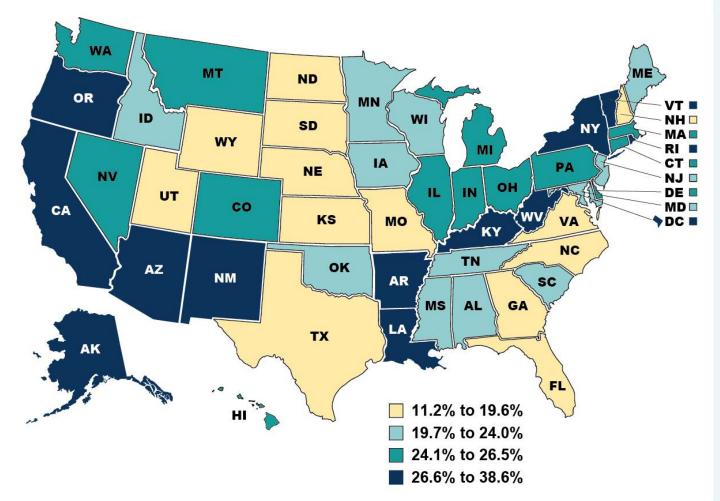
Available at:

https://www.medicaid.gov/medicaid/program
-information/medicaid-chip-enrollmentdata/medicaid-and-chip-enrollment-trendsnapshot/index.html



Percentage of Child and Adult Population Enrolled in Medicaid or CHIP, by State, December 2020

Population: Beneficiaries of all ages with full Medicaid or CHIP benefits



Notes:

Enrollment in Medicaid or CHIP represents individuals who are eligible for full Medicaid or CHIP benefits and excludes individuals who are eligible only for restricted benefits, such as Medicare cost-sharing, family planning only benefits, and emergency services due to alien status. The percentage of each state's population enrolled in Medicaid or CHIP was calculated by dividing administrative, monthly point-in-time counts of Medicaid and CHIP enrollment by annual estimates of each state's resident population. Results were rounded to one decimal place, and then states were assigned to quartiles.

Sources:

CMS. Updated December 2020 Applications, Eligibility, and Enrollment Data (as of November 10, 2021).

Available at:

https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/monthly-reports/index.html

U.S. Census Bureau. 2020 Census Redistricting Data (Public Law 94-171). Table P1.

Available at:

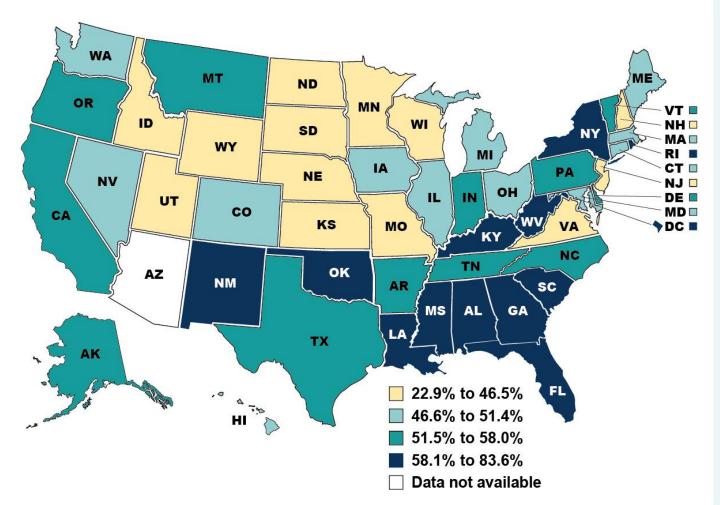
https://data.census.gov/cedsci/all?q=&y=20 20&d=DEC%20Redistricting%20Data%20% 28PL%2094-171%29

See Appendix for more information on each data source.



Percentage of Child Population Enrolled in Medicaid or CHIP, by State, December 2020

Population: Beneficiaries up to age 19 with full Medicaid or CHIP benefits



Notes:

Enrollment in Medicaid or CHIP represents individuals who are eligible for full Medicaid or CHIP benefits and excludes individuals who are eligible only for restricted benefits, such as Medicare cost-sharing, family planning only benefits, and emergency services due to alien status. The percentage of each state's population enrolled in Medicaid or CHIP was calculated by dividing administrative, monthly point-in-time counts of Medicaid and CHIP child enrollment by annual estimates of each state's resident population of children. Children enrolled in Medicaid or CHIP in each state include children and adolescents up to age 19. Estimates of each state's resident population include children under age 18. AZ did not report age-specific enrollment data to CMS or the data did not align with CMS's specifications. Results for all other states were rounded to one decimal place, and then states were assigned to quartiles.

Sources:

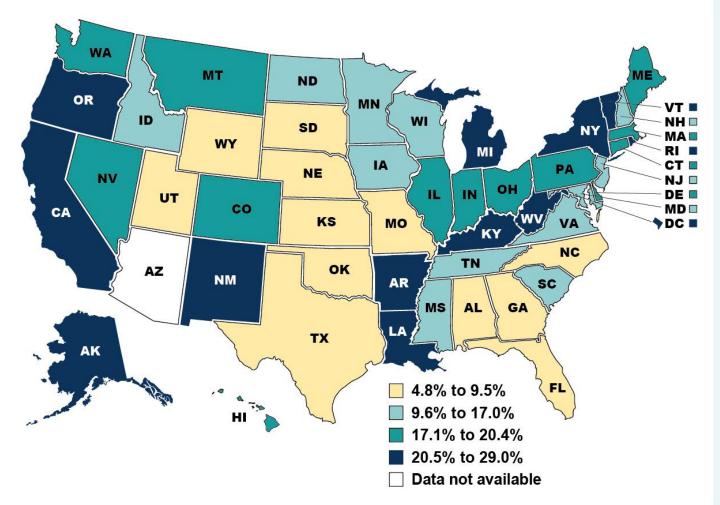
CMS. Updated December 2020
Applications, Eligibility, and Enrollment Data
(as of November 10, 2021). **Available at:**https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/monthly-reports/index.html

U.S. Census Bureau. 2020 Census Redistricting Data (Public Law 94-171). Tables P1 and P3. **Available at:** https://data.census.gov/cedsci/all?q=&y=20 20&d=DEC%20Redistricting%20Data%20% 28PL%2094-171%29



Percentage of Adult Population Enrolled in Medicaid or CHIP, by State, December 2020

Population: Beneficiaries age 19 and older with full Medicaid or CHIP benefits



Notes:

Enrollment in Medicaid or CHIP represents individuals who are eligible for full Medicaid or CHIP benefits and excludes individuals. who are eligible only for restricted benefits, such as Medicare cost-sharing, family planning only benefits, and emergency services due to alien status. The percentage of each state's population enrolled in Medicaid or CHIP was calculated by dividing administrative, monthly point-in-time counts of Medicaid and CHIP adult enrollment by annual estimates of each state's resident population of adults. Adults enrolled in Medicaid or CHIP in each state include adults and seniors age 19 and older. Estimates of each state's resident population include adults age 18 and over. AZ did not report age-specific enrollment data to CMS or the data did not align with CMS's specifications. Results for all other states were rounded to one decimal place, and then states were assigned to quartiles

Sources:

CMS. Updated December 2020
Applications, Eligibility, and Enrollment Data
(as of November 10, 2021). **Available at:**https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/monthly-reports/index.html

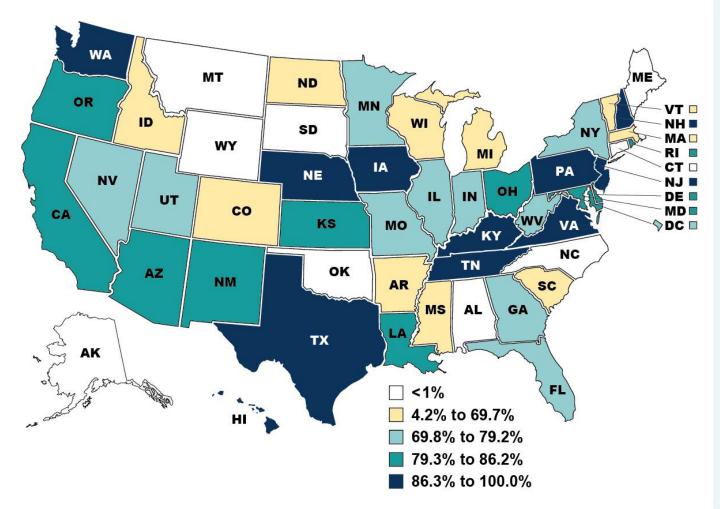
U.S. Census Bureau. 2020 Census Redistricting Data (Public Law 94-171). Table P3. **Available at:**

https://data.census.gov/cedsci/all?q=&y=20 20&d=DEC%20Redistricting%20Data%20% 28PL%2094-171%29



Percentage of Medicaid Beneficiaries in Comprehensive Managed Care, by State, 2019

Population: Beneficiaries of all ages with full Medicaid or CHIP benefits



Nationally, 69.5% of Medicaid beneficiaries were enrolled in a comprehensive managed care plan in 2019.

Notes:

Medicaid enrollment in Comprehensive Managed Care represents an unduplicated count of Medicaid beneficiaries enrolled in a managed care plan that provides comprehensive benefits (acute, primary care, specialty, and any other), as well as PACE programs. It excludes beneficiaries who are enrolled in a Financial Alignment Initiative Medicare-Medicaid Plan as their only form of managed care. Nine states have less than 1% of beneficiaries in comprehensive managed care. Results for remaining states were rounded to one decimal place, and then states were assigned to quartiles. Puerto Rico is excluded from the map and national calculations.

Source:

2019 CMS Managed Care Enrollment Report.

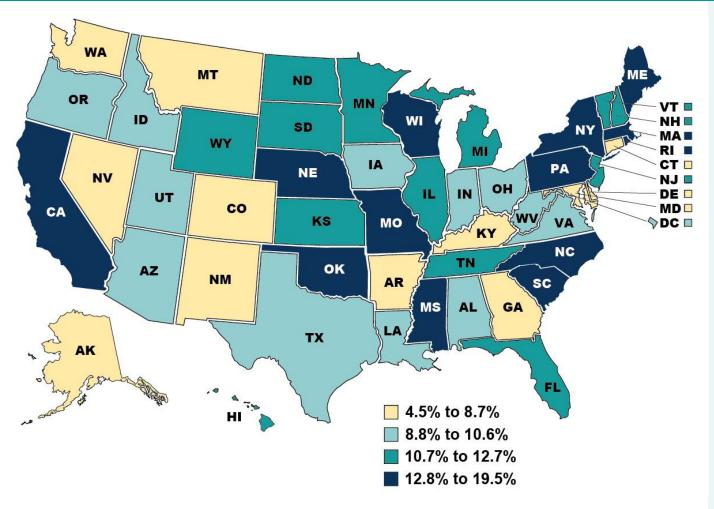
Available at:

https://www.medicaid.gov/medicaid/managed-care/enrollment-report/index.html



Percentage of Medicaid Beneficiaries Who Were Dually Eligible for Medicare and Medicaid, 2020

Population: Institutionalized and community-based beneficiaries with full Medicaid benefits



Nationally, 11.3% of Medicaid beneficiaries (8 million people) are dually eligible for Medicare and receive full Medicaid benefits.

Notes:

The percentage of the Medicaid population that is dually eligible by state was calculated by dividing total, full-benefit, dual-eligible enrollment by total Medicaid enrollment. Results were rounded to one decimal place, and then states were assigned to quartiles. The national percentage was calculated by dividing the sum of the state totals.

Sources:

CMS Medicare-Medicaid Coordination Office Quarterly Enrollment Snapshot (September 2020 data, as of July 15, 2021).

Available at:

https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Analytics

CMS. Updated September 2020 Applications, Eligibility Determinations, and Enrollment Data (as of December 21, 2021). **Available at:**

https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/monthly-reports/index.html



BENEFICIARY EXPENDITURES



Beneficiary Expenditures

Fast fact: In 2018-2019, people eligible for Medicaid on the basis of disability accounted for 12.8% of Medicaid beneficiaries (9.5 million) and 33.6% of expenditures (\$200.4 billion). Children (excluding those eligible for Medicaid on the basis of disability) accounted for 38.9% of beneficiaries (28.8 million) and 16.1% of expenditures (\$96.2 billion) (slide 17).

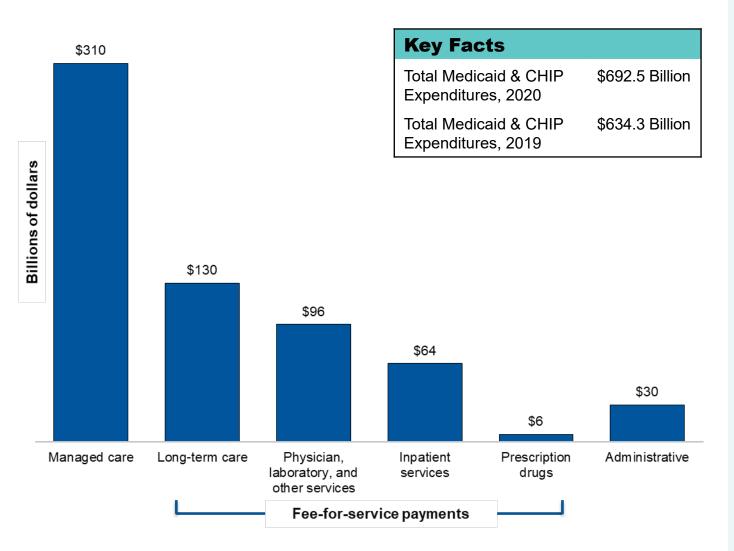
This section of the profile shows annual Medicaid expenditures by service category and by beneficiary category.

The charts in this section include:

- Annual Medicaid Expenditures by Service Category
- Medicaid Enrollment, Expenditures, and Average Cost, by Beneficiary Category



Annual Medicaid and CHIP Expenditures by Service Category (billions of dollars), 2019



Total Expenditures: Notes:

Total Medicaid & CHIP Expenditures include federal, state, and local expenditures. Data are for Federal Fiscal Years 2019 and 2020.

Source:

CMS National Health Expenditures Accounts (2019 and 2020 data, as of Feb 16, 2022).

Expenditures by Service Category: Notes:

Expenditures by service category do not sum to the total expenditures. Total expenditures also include Medicare payments for some beneficiaries and adjustments to prior year payments. Managed care expenditures cover the same services that are delivered via feefor-service. Data do not permit allocation of managed care expenditures to the different service categories. Data are for Federal Fiscal Year 2019.

Source:

CMS. 2021 Medicaid & CHIP Scorecard. Analysis of CMS-64 expenditure reports for FFY 2019 from the Medicaid Budget and Expenditure System/State Children's Health Insurance Program Budget and Expenditure System (MBES/CBES).

Full website links for each data source can be found in the Appendix.



Medicaid Enrollment, Expenditures, and Average Cost, by Beneficiary Category, 2018-2019

Population: Institutionalized and non-institutionalized Medicaid beneficiaries with full or partial Medicaid benefits

Total Enrollment Total Expenditures (\$597.2 B) (74.1 M) **Average Medicaid People with Disabilities Expenditures Per** 12.8% (9.5 M) **Beneficiary People with Disabilities** Aged 65+ 33.6% (\$200.4) \$21,176 People with 10.4% (7.7 M) **Disabilities** Adults: ACA Medicaid **Expansion** Ages 21-64 22.1% (16.4 M) Aged 65+ \$17,118 Aged 22.1% (\$132.1) Adults: Non-Expansion, Non-Disabled, Ages 21-64 15.8% (11.7 M) Adults: ACA Medicaid \$6.629 Adults: Expansion Ages 21-64 **ACA Medicaid Expansion** 18.2% (\$108.7) Adults: Non-Expansion, Children \$5,109 Adults: Non-Non-Disabled, Ages 21-64 Ages 0-20 **Expansion, Non-Disabled** 10.0% (\$59.8) 38.9% (28.8 M) Children Ages 0-20 \$3,341 Children 16.1% (\$96.2) Expenditures Enrollment

% of total

(expenditures in billions)

Notes

These national estimates include statereported data from the 50 states, D.C., Puerto Rico, and the U.S. Virgin Islands. They exclude all spending and enrollment through Medicaid-expansion CHIP and separate CHIP programs. CMS used Transformed Medicaid Statistical Information System (T-MSIS) data to determine the percentage of total Medicaid expenditures accounted for by each beneficiary category, then applied that percentage to the net total Medicaid expenditures (federal and state) states reported to the Medicaid Budget and Expenditure System (MBES) in form CMS-64. Total net expenditures exclude spending for administrative expenses and disproportionate share hospital payments. Enrollment totals represent the count of total beneficiary years in T-MSIS aggregated across five beneficiary categories. People with Disabilities includes beneficiaries of any age who are eligible for Medicaid on the basis of disability. Adults: ACA Medicaid Expansion includes adults made eligible for Medicaid under the Affordable Care Act beginning in 2014. Some adult eligibility groups may include a small number of individuals under age 21 and over age 64. Please visit the link below for state-level calculations and data quality assessments.

Source:

CMS calculations using calendar years 2018 and 2019 MBES expenditure data and T-MSIS data on enrollees and expenditures. Additional information available at: https://www.medicaid.gov/state-overviews/scorecard/how-much-states-spend-per-medicaid-enrollee/index.html



% of total (full-year equivalents, in millions)

BENEFICIARY CHARACTERISTICS



Beneficiary Characteristics

Fast fact: During 2020, 85.5 million individuals were enrolled in full Medicaid or CHIP benefits or the equivalent. Of the total, 19.6 million (or 23%) were female beneficiaries of reproductive age (ages 15 to 44).¹

This section of the profile shows the demographic characteristics of Medicaid and CHIP beneficiaries by age group and sex. It also shows estimates of births paid for by Medicaid, by state.

The charts in this section include:

- Demographics of Medicaid and CHIP Beneficiaries
- Percentage of Births Covered by Medicaid, by State

1. These counts include beneficiaries who were: (1) enrolled in Medicaid or CHIP for at least one day during 2020, and (2) were eligible for full benefits or the equivalent as of their latest enrollment in 2020. Full benefit beneficiaries were identified using the following restricted benefit codes in T-MSIS: 1. 4. 7. A. B. D. Beneficiaries eligible for family planning services only are excluded. Calculations also exclude beneficiaries in the U.S. territories and beneficiaries who had claims but no eligibility data for the year. See the Appendix for more information on the methodology used for these national calculations.

Source:

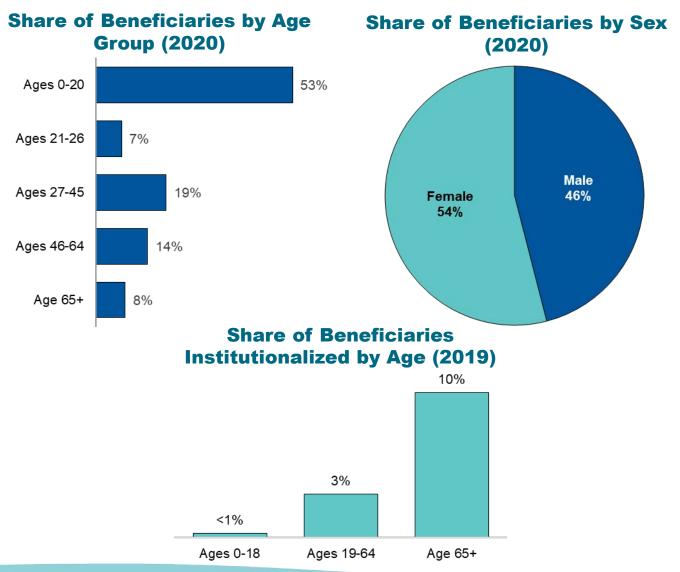
Mathematica analysis of calendar year 2020 T-MSIS Analytic Files (TAF), v 5.0.

Additional Information available at: https://www.medicaid.gov/medicaid/dat a-systems/macbis/medicaid-chip-research-files/transformed-medicaid-statistical-information-system-t-msis-analytic-files-taf/index.html



Demographics of Medicaid and CHIP Beneficiaries, 2019 & 2020

Population: Beneficiaries enrolled in Medicaid, CHIP, or another government health plan



Age Group and Sex Notes:

Data include beneficiaries who were enrolled in Medicaid or CHIP for at least one day in 2020 and eligible for full-scope benefits at their latest enrollment. This exhibit assigns beneficiaries to age categories using the age field in TAF, while the analysis on slide 17 also uses the eligibility category field. The eligibility category field includes additional information about the eligibility pathway (for example, whether the individual is eligible based on disability). This exhibit also differs from the exhibit on slide 17 in terms of the population included: this exhibit includes CHIP beneficiaries, excludes beneficiaries from U.S. territories, and is limited to beneficiaries with full-scope benefits. Totals may not sum to 100 due to rounding.

Source:

CMS. 2021 Medicaid & CHIP Scorecard. Analysis of calendar year 2020 T-MSIS Analytic Files, v 5.0.

Institutionalized Notes:

Data include individuals who self-report coverage through Medicaid, CHIP, or another government health plan. An institution is defined as a correctional facility, nursing home, or mental hospital.

Source:

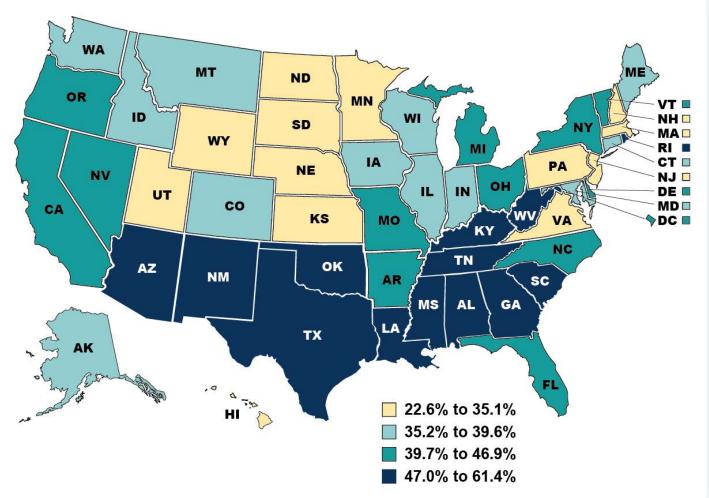
Mathematica analysis of U.S. Census Bureau, American Community Survey, 2019 PUMS data

Full website links for each data source can be found in the Appendix.



Percentage of Births Covered by Medicaid, by State, 2020

Population: All births with Medicaid as principal payer for the delivery



Nationally, 42.0% of births were covered by Medicaid in 2020.

Notes:

Births where Medicaid is the principal payer for the delivery are shown. Percentages were rounded to one decimal place, and then states were assigned to quartiles. Births with an unknown payer (<2% of births in each state) are excluded from calculations.

Source:

Centers for Disease Control and Prevention (CDC). 2020 Natality Public Use Data on CDC WONDER online database (as of November 2, 2021).

Available at:

https://wonder.cdc.gov/



BENEFICIARY HEALTH STATUS



Medicaid and CHIP Beneficiary Health Status

Fast fact: In 2020, 31 percent of children ages 3-17 had a current mental, emotional, developmental, or behavioral problem (based on parent-reported data), and 23 percent of adults ages 18-64 reported they regularly had feelings of worry, nervousness, or anxiety (slides <u>26</u> and <u>28</u>).

This section of the profile shows the parent-reported or self-reported health status of children and adults covered by Medicaid or CHIP (a parent or other adult familiar with the child's health reports on behalf of children ages 0 to 17). Information is presented on health conditions, current health status, and mental health status.

The charts in this section include:

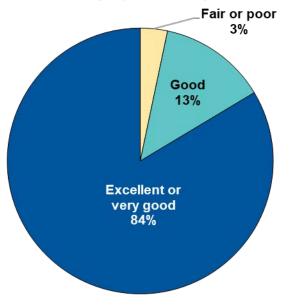
- Current Health Status of Children and Adults Enrolled in Medicaid or CHIP
- Common Conditions of Children Enrolled in Medicaid or CHIP
- Mental Health Status of Children Enrolled in Medicaid or CHIP
- Health Conditions of Adults Enrolled in Medicaid or CHIP
- Self-Reported Mental Health Status of Adults Enrolled in Medicaid or CHIP



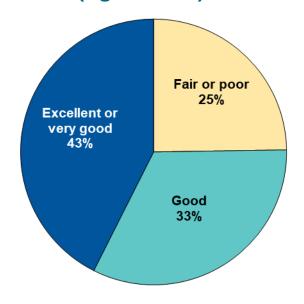
Current Health Status of Children and Adults Enrolled in Medicaid or CHIP, 2020

Population: Non-institutionalized beneficiaries ages 0 to 64 with any public insurance, or covered by Medicaid, CHIP, or other state-sponsored health plans

Parent-Reported Current Health Status of Children (Ages 0-17)



Self-Reported Current Health Status of Adults (Ages 18-64)



Children:

Notes:

Data include non-institutionalized children ages 0 to 17 covered by public insurance (alone or in combination with private insurance). Responses of missing in error (<1% responses) are excluded.

Source:

Mathematica analysis of National Survey of Children's Health, 2020 Public Use Data files

Available at:

https://www.census.gov/programssurveys/nsch.html.

Adults:

Notes:

Data include all non-institutionalized civilian adults ages 18 to 64 covered by Medicaid, CHIP, or other state-sponsored health plans. Responses of refused, not ascertained, and don't know (<1% of responses) are excluded. Totals may not sum to 100 due to rounding.

Source:

Mathematica analysis of National Center for Health Statistics, National Health Interview Survey, 2020.

Available at:

https://www.cdc.gov/nchs/nhis/dataquestionnaires-documentation.htm

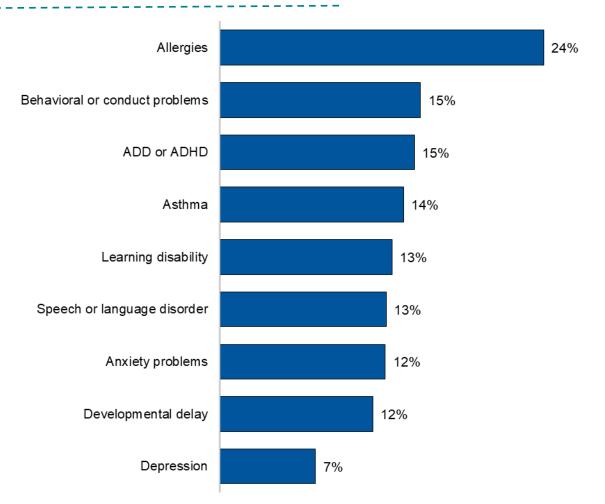
See Appendix for more information on each data source.



Common Conditions of Children Enrolled in Medicaid or CHIP, 2020

Population: Non-institutionalized children ages 0 to 17 with any public insurance

Parent has ever been told child has:



Note:

Data include non-institutionalized children covered by public insurance (alone or in combination with private insurance). The prevalence of allergies and asthma is among all children ages 0-17. All other conditions are limited to children ages 3-17. Allergies include food, drug, insect, and other allergies. The survey asks about each condition individually; conditions shown are not mutually exclusive or exhaustive. Responses of missing in error (≤1% of responses for each health condition) are excluded.

ADD or ADHD = Attention-Deficit Disorder or Attention Deficit/Hyperactivity Disorder

Source:

Mathematica analysis of National Survey of Children's Health, 2020 Public Use Data files.

Available at:

https://www.census.gov/programs-surveys/nsch.html.

See Appendix for more information on the data source.



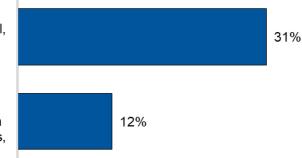
Mental Health Status of Children Enrolled in Medicaid or CHIP, 2020

Population: Non-institutionalized children ages 3 to 17 with any public insurance

Parent-Reported Current Mental Health Status of Children

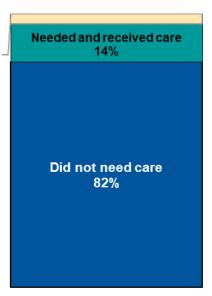
Currently has mental, emotional, developmental, or behavioral problem

Currently taking or has taken medication for attention-deficit disorder or attention deficit/hyperactivity disorder, autism or autism spectrum disorder, or difficulties with emotions, concentration, or behavior in past 12 months

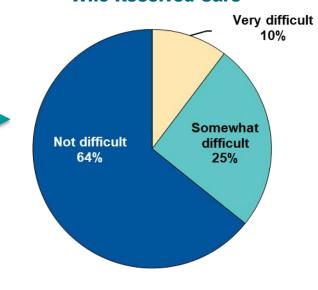


Children's Need for and Receipt of Mental Health Care Within Past 12 Months

Needed but did not receive care 4%



Difficulty Obtaining Mental Health Care Among Children Who Received Care



Notes:

Data include non-institutionalized children ages 3 to 17 covered by public insurance (alone or in combination with private insurance). All indicators are based on parent report. To qualify as having a mental, emotional, developmental or behavioral problem, the child must qualify on the Children with Special Health Care Needs (CSHCN) Screener ongoing emotional, developmental or behavioral conditions criteria and/or have any of 10 conditions currently (Tourette Syndrome, anxiety problems, depression, behavioral and conduct problem, developmental delay, intellectual disability, speech or other language disorder, learning disability, autism or ASD, ADD or ADHD). Receipt of mental health care is defined as receiving any treatment or counseling from a mental health professional. Level of difficulty obtaining care is among those who needed and received care. Totals do not sum to 100 as <1% of respondents indicated both that their child needed and received care and that it was not possible to obtain care. Responses of missing in error (≤2% of responses for each indicator) are excluded.

ADD = Attention-Deficit Disorder; ADHD = Attention Deficit/Hyperactivity Disorder; ASD = Autism Spectrum Disorder

Source:

Mathematica analysis of National Survey of Children's Health, 2020 Public Use Data files. **Available at:**

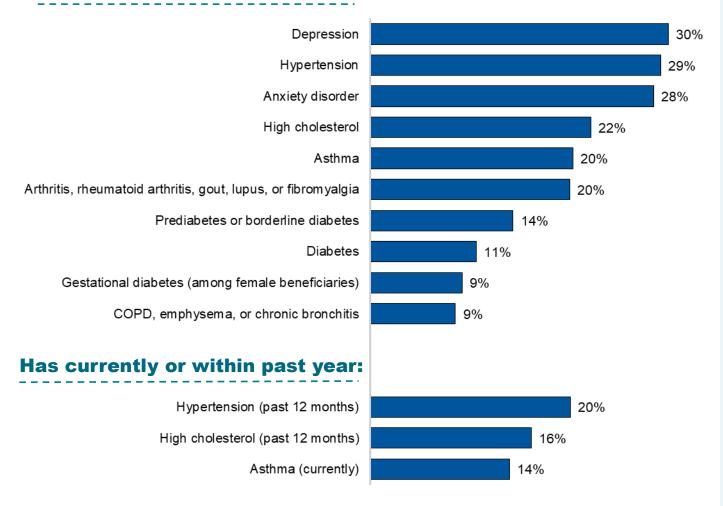
https://www.census.gov/programssurveys/nsch.html



Health Conditions of Adults Enrolled in Medicaid or CHIP, 2020

Population: Non-institutionalized beneficiaries ages 18 to 64 covered by Medicaid, CHIP, or other state-sponsored health plans

Has ever been told he/she has:



Notes:

Data include all non-institutionalized civilian adults ages 18 to 64 covered by Medicaid, CHIP, or other statesponsored health plans. All data on health conditions are based on self-report. Anxiety disorder includes generalized anxiety disorder, social anxiety disorder, panic disorder, post-traumatic stress disorder, obsessive-compulsive disorder, and phobias. Gestational diabetes is limited to female respondents. Responses of refused, not ascertained, and don't know (<2% of responses for each indicator) are excluded.

COPD = Chronic Obstructive Pulmonary Disease

Source:

Mathematica analysis of National Center for Health Statistics, National Health Interview Survey, 2020.

Available at:

https://www.cdc.gov/nchs/nhis/dataquestionnaires-documentation.htm

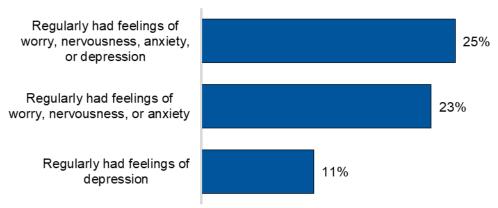
See Appendix for more information on the data source.



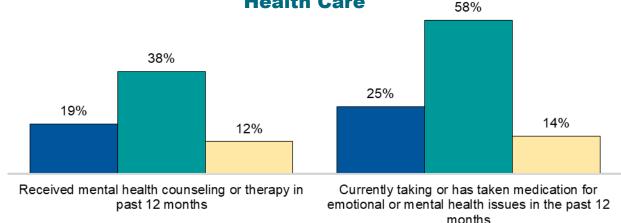
Self-Reported Mental Health Status of Adults Enrolled in Medicaid or CHIP, 2020

Population: Non-institutionalized beneficiaries ages 18 to 64 covered by Medicaid, CHIP, or other state-sponsored health plans

Percentage of Adults with Symptoms of Anxiety or Depression



Percentage of Adults Receiving Mental Health Care



- All adults
- Adults who regularly had feelings of worry, nervousness, anxiety, or depression
- Adults who did not regularly have feelings of worry, nervousness, anxiety, or depression

Notes:

Data include all non-institutionalized civilian adults ages 18 to 64 covered by Medicaid, CHIP, or other state-sponsored health plans. All indicators are based on beneficiary self-report. Regularly had feelings of worry, nervousness or anxiety is defined as: (1) feeling worried, nervous, or anxious daily and describing the level of those feelings as somewhere in between a little and a lot or a lot, OR (2) feeling worried, nervous, or anxious weekly and describing the level of those feelings as a lot. Regularly had feelings of depression is defined as: (1) feeling depressed daily and describing the level of those feelings as somewhere in between a little and a lot or a lot, OR (2) feeling depressed weekly and describing the level of those feelings as a lot. Regularly had feelings of worry, nervous, anxiety, or depression includes respondents who met either (or both) criteria. Responses of refused, not ascertained, and don't know (≤2% of responses for each indicator) are excluded

Source:

Mathematica analysis of National Center for Health Statistics, National Health Interview Survey, 2020.

Available at:

https://www.cdc.gov/nchs/nhis/dataquestionnaires-documentation.htm

See Appendix for more information on the data source.



BENEFICIARY EXPERIENCE



Beneficiary Experience

Fast fact: The Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey captures the experience of Medicaid and CHIP beneficiaries. In 2021, 63% of respondents to the Child Medicaid survey reported that their child always got needed care, and 73% reported that their child always got care quickly. Among Adult Medicaid survey respondents, 56% reported that they always got needed care, and 59% reported that they always got care quickly (slides 34 and 35).

This section of the profile shows data from the AHRQ CAHPS Database, including how the experiences of Medicaid children and adults vary overall and across key dimensions of getting needed care, getting care quickly, how well doctors communicate, and health plan information and customer service.

The charts in this section include:

- Percentage Distribution of Child Medicaid CAHPS Survey Respondents, by State
- Percentage Distribution of Adult Medicaid CAHPS Survey Respondents, by State
- Overall Ratings
- Getting Needed Care
- Getting Care Quickly
- How Well Doctors Communicate
- Health Plan Information and Customer Service

Notes:

The Agency for Healthcare Research and Quality (AHRQ) CAHPS Database includes data submitted directly by state Medicaid agencies or individual health plans. In states with fee-for-service or primary care case management delivery systems, health plan refers to the Medicaid program. The data are submitted voluntarily to the CAHPS Database and are not from a statistically representative sample of all plans. They are not representative of all plans, enrollees, or states. The results included in this Profile are based on data collected between July 2020 and July 2021. The Child Medicaid survey results include 86,597 respondents across 175 plans in 39 states. The Adult Medicaid survey results include 49,997 respondents across 162 plans in 40 states. The Child Medicaid results from six states account for 45% of responses and Adult Medicaid results from six states account for 48% of responses. Thus, the estimates may be biased, and it is not possible to compute precision estimates from the data. See the maps on the following pages for more information on the percentage distribution of survey respondents by state for the Child and Adult Medicaid surveys.

Source:

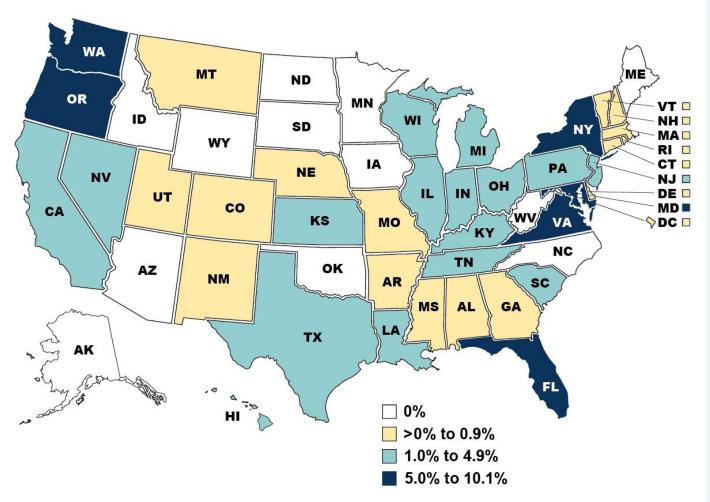
Agency for Healthcare Research and Quality, CAHPS Health Plan Survey Database 2021 Chartbook.

Available at:



Percentage Distribution of Child Medicaid CAHPS Survey Respondents, by State, 2021

Population: Beneficiaries enrolled in Medicaid who responded to the survey



Notes:

The Agency for Healthcare Research and Quality (AHRQ) CAHPS Database includes data submitted directly by state Medicaid agencies or individual health plans. In states with fee-forservice or primary care case management delivery systems, health plan refers to the Medicaid program. The data are submitted voluntarily to the CAHPS Database and are not from a statistically representative sample of all plans. They are not representative of all plans, enrollees, or states. These results are based on data collected between July 2020 and July 2021. The Child Medicaid survey results include 86,597 respondents across 175 plans in 39 states. Results from six states account for 45% of responses. States excluded from this analysis include those that did not conduct the Child Medicaid CAHPS survey or that did not submit data to the AHRQ CAHPS Database.

Source:

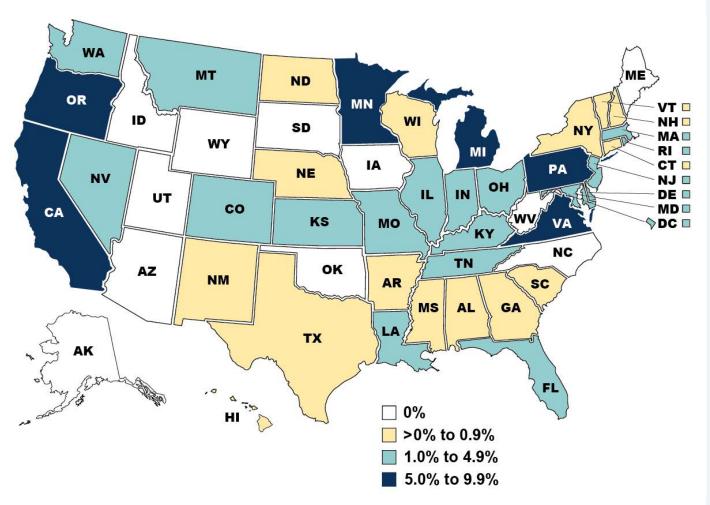
Agency for Healthcare Research and Quality, CAHPS Health Plan Survey Database 2021 Chartbook.

Available at:



Percentage Distribution of Adult Medicaid CAHPS Survey Respondents, by State, 2021

Population: Beneficiaries enrolled in Medicaid who responded to the survey



Notes:

The Agency for Healthcare Research and Quality (AHRQ) CAHPS Database includes data submitted directly by state Medicaid agencies or individual health plans. In states with fee-forservice or primary care case management delivery systems, health plan refers to the Medicaid program. The data are submitted voluntarily to the CAHPS Database and are not from a statistically representative sample of all plans. They are not representative of all plans, enrollees, or states. These results are based on data collected between July 2020 and July 2021. The Adult Medicaid survey results include 49,997 respondents across 162 plans in 40 states. Results from six states account for 48% of responses. States excluded from this analysis include those that did not conduct the Adult Medicaid CAHPS survey or that did not submit data to the AHRQ CAHPS Database.

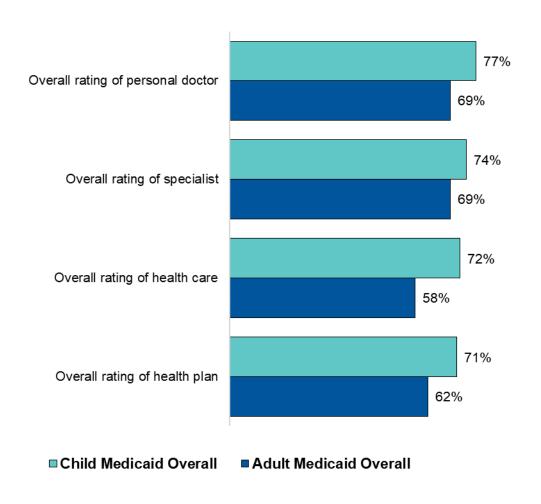
Source:

Agency for Healthcare Research and Quality, CAHPS Health Plan Survey Database 2021 Chartbook.

Available at:



Medicaid Beneficiaries Who Responded to the Survey and Gave a Rating of 9 or 10 for Overall Ratings, 2021 Population: Beneficiaries enrolled in Medicaid who responded to the survey



Notes:

The results from the AHRQ CAHPS Database are based on data collected between July 2020 and July 2021. The Child Medicaid survey results include 86.597 respondents across 175 plans in 39 states. The Adult Medicaid survey results include 49,997 respondents across 162 plans in 40 states. In states with fee-for-service or primary care case management delivery systems, plan refers to the Medicaid program. The Child Medicaid survey results from six states account for 45% of responses and Adult Medicaid survey results from six states account for 48% of responses. Values represent responses of 9 or 10 on a scale of 0 to 10. Child Medicaid excludes CHIP. Due to the variability in response rates from different states, the data presented in this exhibit are not nationally representative.

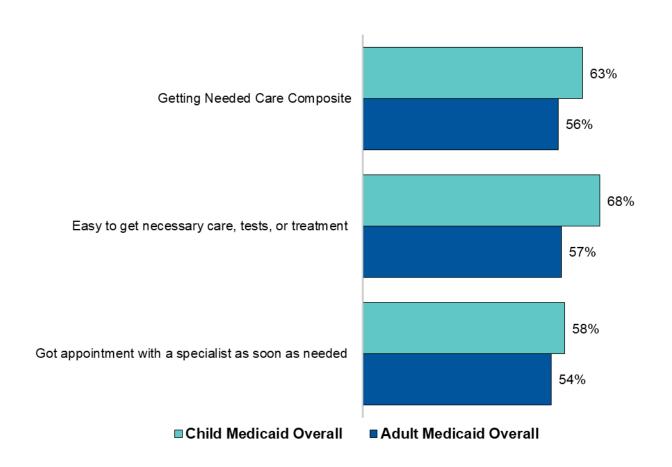
Source:

Agency for Healthcare Research and Quality, CAHPS Health Plan Survey Database 2021 Chartbook.

Available at:



Medicaid Beneficiaries Who Responded to the Survey and Selected 'Always' for Getting Needed Care, 2021 Population: Beneficiaries enrolled in Medicaid who responded to the survey



Notes:

The results from the AHRQ CAHPS Database are based on data collected between July 2020 and July 2021. The Child Medicaid results include 86,597 respondents across 175 plans in 39 states. The Adult Medicaid results include 49,997 respondents across 162 plans in 40 states. In states with fee-forservice or primary care case management delivery systems, plan refers to the Medicaid program. The Child Medicaid survey results from six states account for 45% of responses and Adult Medicaid survey results from six states account for 48% of responses. Values represent responses of Always. Child Medicaid excludes CHIP. Getting Needed Care Composite combines responses to the two individual questions. Due to the variability in response rates from different states, the data presented in this exhibit are not nationally representative.

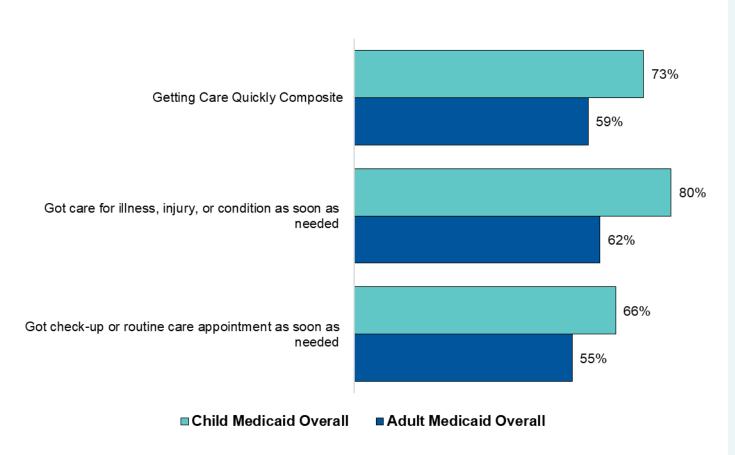
Source:

Agency for Healthcare Research and Quality, CAHPS Health Plan Survey Database 2021 Chartbook.

Available at:



Medicaid Beneficiaries Who Responded to the Survey and Selected 'Always' for Getting Care Quickly, 2021 Population: Beneficiaries enrolled in Medicaid who responded to the survey



Notes:

The results from the AHRQ CAHPS Database are based on data collected between July 2020 and July 2021. The Child Medicaid results include 86,597 respondents across 175 plans in 39 states. The Adult Medicaid results include 49,997 respondents across 162 plans in 40 states. In states with fee-forservice or primary care case management delivery systems, plan refers to the Medicaid program. The Child Medicaid survey results from six states account for 45% of responses and Adult Medicaid survey results from six states account for 48% of responses Values represent responses of Always. Child Medicaid excludes CHIP. Getting Care Quickly Composite combines responses to the two individual guestions. Due to the variability in response rates from different states, the data presented in this exhibit are not nationally representative.

Source:

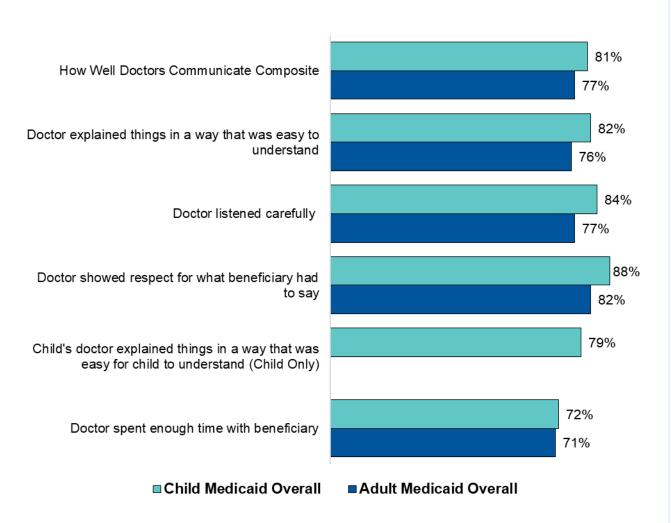
Agency for Healthcare Research and Quality, CAHPS Health Plan Survey Database 2021 Chartbook.

Available at:



Medicaid Beneficiaries Who Responded to the Survey and Selected 'Always' for How Well Doctors Communicate, 2021

Population: Beneficiaries enrolled in Medicaid who responded to the survey



Notes:

The results from the AHRQ CAHPS Database are based on data collected between July 2020 and July 2021. The Child Medicaid results include 86,597 respondents across 175 plans in 39 states. The Adult Medicaid results include 49,997 respondents across 162 plans in 40 states. In states with fee-forservice or primary care case management delivery systems, plan refers to the Medicaid program. The Child Medicaid survey results from six states account for 45% of responses and Adult Medicaid survey results from six states account for 48% of responses. Values represent responses of Always. Child Medicaid excludes CHIP. How Well Doctors Communicate Composite combines responses to the five individual questions for Child Medicaid and four individual questions for Adult Medicaid. Due to the variability in response rates from different states, the data presented in this exhibit are not nationally representative.

Source:

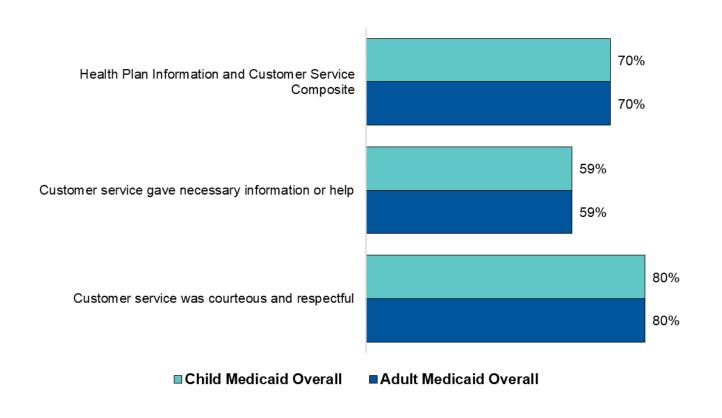
Agency for Healthcare Research and Quality, CAHPS Health Plan Survey Database 2021 Chartbook.

Available at:



Medicaid Beneficiaries Who Responded to the Survey and Selected 'Always' for Health Plan Information and Customer Service, 2021

Population: Beneficiaries enrolled in Medicaid who responded to the survey



Notes:

The results from the AHRQ CAHPS Database are based on data collected between July 2020 and July 2021. The Child Medicaid results include 86.597 respondents across 175 plans in 39 states. The Adult Medicaid results include 49,997 respondents across 162 plans in 40 states. In states with fee-forservice or primary care case management delivery systems, plan refers to the Medicaid program. The Child Medicaid survey results from six states account for 45% of responses and Adult Medicaid survey results from six states account for 48% of responses. Values represent responses of Always. Child Medicaid excludes CHIP. Health Plan Information and Customer Service Composite combines responses to the two individual questions. Due to the variability in response rates from different states, the data presented in this exhibit are not nationally representative.

Source:

Agency for Healthcare Research and Quality, CAHPS Health Plan Survey Database 2021 Chartbook

Available at:

https://cahpsdatabase.ahrq.gov/files/20 21CAHPSHealthPlanChartbook.pdf



SPECIAL TOPIC: ORAL HEALTH



Special Topic: Oral Health

Fast fact: A median of 41.5 percent of children ages 1 to 20 with Medicaid or Medicaid-expansion CHIP coverage received a preventive dental service between October 2019 and September 2020 (slide 40).

This section of the profile presents information on the oral health status and utilization of children and adults covered by Medicaid or CHIP.

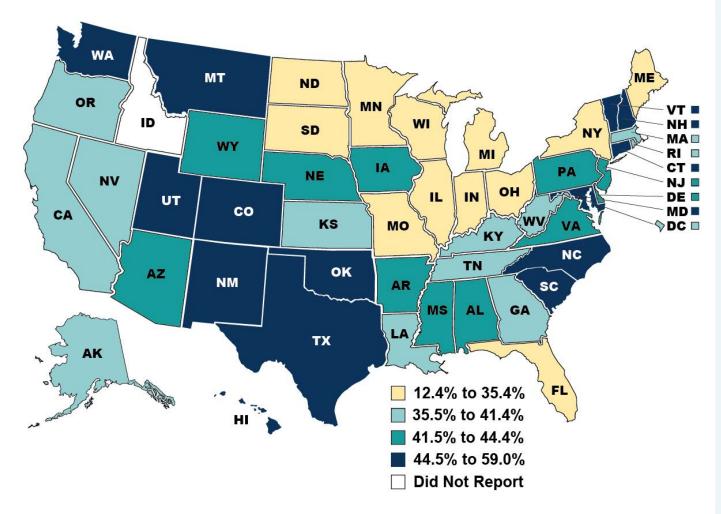
The charts in this section include:

- Percentage of Medicaid Beneficiaries Ages 1 to 20 Who Received Preventive Dental Services
- Emergency Department Visits for Non-Traumatic Dental Conditions per 100,000 Adult Beneficiaries, by State



Percentage of Medicaid Beneficiaries Ages 1 to 20 Who Received Preventive Dental Services, FFY 2020

Population: Beneficiaries ages 1 to 20 enrolled in Medicaid or Medicaid expansion CHIP programs for at least 90 continuous days and eligible for EPSDT services



Notes:

This measure shows the percentage of children ages 1 to 20 who are enrolled in Medicaid or Medicaid expansion CHIP programs for at least 90 continuous days, are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services, and who received at least one preventive dental service during the measurement period (October 2019 to September 2020).

Source:

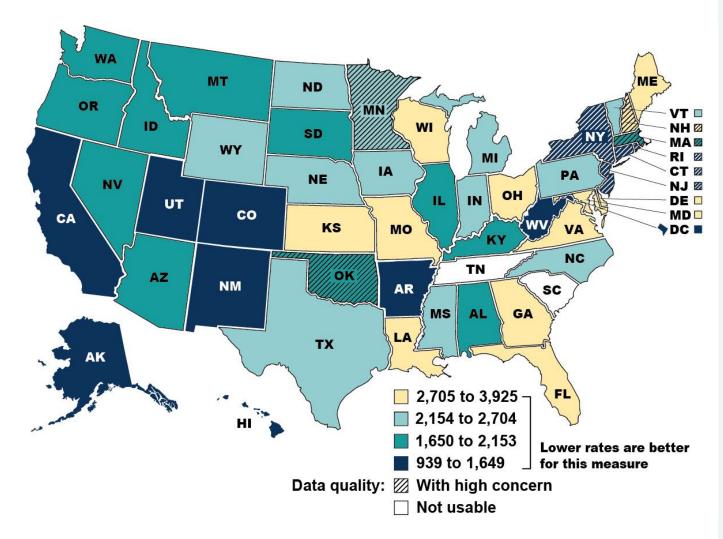
Mathematica analysis of Form CMS-416 reports (annual EPSDT report), Lines 1b and 12b, for the FFY 2020 reporting cycle as of July 2, 2021. Starting with FFY 2020, some states calculated and submitted their Form CMS-416 reports, while others chose to have CMS produce their Form CMS-416 reports using Transformed Medicaid Statistical Information System (T-MSIS) data. The FFY 2020 reporting cycle includes services provided between October 2019 and September 2020.

Additional information available at:

https://www.medicaid.gov/medicaid/qua lity-of-care/downloads/performancemeasurement/2021-child-chart-pack.pdf



Emergency Department Visits for Non-Traumatic Dental Conditions per 100,000 Adult Beneficiaries, by State, 2019 Population: Medicaid and CHIP beneficiaries ages 21 to 64 with full Medicaid or CHIP benefits and not dually eligible for Medicare



Notes:

Non-traumatic dental conditions (NTDCs) are dental conditions such as cavities or dental abscesses that might have been prevented with regular dental care. Emergency Department (ED) visits for NTDCs may indicate a lack of access to more appropriate sources of medical and dental care. CMS assessed state-level data quality in the 2019 TAF file using the following metrics: total enrollment, inpatient (IP) and other services (OT) claims volume; completeness of diagnosis code (IP file); completeness of procedure code (OT and IP files); and expected type of bill code (IP file). States with an unusable data quality assessment (TN, SC) are shown in white. Results for remaining states were rounded to whole numbers, and then states were assigned to quartiles. States with a high concern data quality assessment are shown with a hatched overlay. For additional information regarding state variability in data quality, please refer to the Medicaid DQ Atlas, available at: https://www.medicaid.gov/dq-atlas/welcome.

Source:

CMS analysis of calendar year 2019 T-MSIS Analytic Files, v 5.0.

Additional information available at:

https://www.medicaid.gov/medicaid/benefits/downloads/adult-non-trauma-dental-ed-visits.pdf and

https://www.medicaid.gov/medicaid/benefits/dental-care/index.html



APPENDIX: DATA SOURCES



Data Sources (in Order of First Appearance)

Source Pages	Link(s)	Comments
Centers for Medicare 8-13, 16, 17 & Medicaid Services 20, 40, 41 (CMS)		 CMS sponsored sites that provide data on Medicaid and CHIP programs for research purposes. The specific data tables and reports cited in this profile are: February 2022 Medicaid and CHIP Enrollment Trends Snapshot. Available at: https://www.medicaid.gov/medicaid/program-information/medicaid-chip-enrollment-data/medicaid-and-chip-enrollment-trend-snapshot/index.html Updated September 2020 Applications, Eligibility Determinations, and Enrollment Data (as of 12/21/2021); Updated December 2020 Applications, Eligibility Determinations, and Enrollment Data (as of 11/10/2021). Available at: https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/monthly-reports/index.html. 2019 Managed Care Enrollment Report. Available at: https://www.medicaid.gov/medicaid/managed-care/enrollment-report/index.html. CMS Medicare-Medicaid Coordination Office Quarterly Enrollment Snapshot (September 2020 data, as of 7/15/2021). Available at: https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Analytics. National Health Expenditures Accounts (2019 and 2020 data, as of 2/16/2022). Available at: https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/NationalHealthAccountsHistorical.html. 2021 Medicaid & CHIP Scorecard. Analysis of CMS-64 expenditure reports for FFY 2019 from the Medicaid Budget and Expenditure System (MBES/CBES). Available at: https://www.medicaid.gov/state-overviews/scorecard/annual-medicaid-chip-expenditures/index.html. Additional information available at: https://www.medicaid.gov/medicaid/financial-management/state-expenditure-reporting-for-medicaid-chip/expenditure-reports-mbescbes/index.html

		1.17	
Source	Pages	Link(s)	Comments
Centers for Medicare & Medicaid Services (CMS) (continued)		Vary by data source (see Comments for links)	 (continued) The specific data tables and reports cited in this profile are: CMS calculations using calendar years 2018 and 2019 MBES expenditure data and T-MSIS data on enrollees and expenditures. Additional information available at: https://www.medicaid.gov/state-overviews/scorecard/how-much-states-spend-per-medicaid-enrollee/index.html. 2021 Medicaid & CHIP Scorecard. Analysis of calendar year 2020 T-MSIS Analytic Files, v 5.0. Available at: https://www.medicaid/who-enrolls-medicaid-chip/index.html. Mathematica analysis of Form CMS-416 reports (annual EPSDT report) for the FFY 2020 reporting cycle as of July 2, 2021. Additional information available at: https://www.medicaid.gov/medicaid/quality-of-care/downloads/performance-measurement/2021-child-chart-pack.pdf. CMS analysis of calendar year 2019 T-MSIS Analytic Files, v 5.0. Additional information available at: https://www.medicaid.gov/medicaid/benefits/downloads/adult-non-trauma-dental-ed-visits.pdf.
U.S. Census Bureau, 2020 Census Redistricting Data (Public Law 94-171)	9-11	https://data.census.gov/ cedsci/all?q=&y=2020& d=DEC%20Redistricting %20Data%20%28PL% 2094-171%29	The Decennial Census Redistricting Data contain summary statistics on the U.S. population by race, age, housing (occupancy) status, and geographic location. All Redistricting Data included in this profile come from tables P1 and P3. For information on data collection, confidentiality protection, nonsampling error, and definitions, see the 2020 Census Redistricting Data (Public Law 94-171) Summary File Technical Documentation, available at: https://www2.census.gov/programs-surveys/decennial/2020/technical-documentation/complete-tech-docs/summary-file .

Source	Pages	Link(s)	Comments
Transformed Medicaid Statistical Information System (T-MSIS) Analytic Files (TAF)	19	https://www.medicaid.g ov/medicaid/data- systems/macbis/medica id-chip-research- files/transformed- medicaid-statistical- information-system-t- msis-analytic-files- taf/index.html For information regarding state variability in data quality within TAF, please see the Medicaid DQ Atlas, available at: https://www.medicaid.g ov/dq-atlas/welcome	Annual Demographic and Eligibility (DE) File. Analyses were conducted using SAS. The annual DE file contains demographic, eligibility, and enrollment information for all Medicaid- or CHIP-eligible beneficiaries, as submitted to T-MSIS by their respective state agencies, who were enrolled for at least one day during the calendar year. Mathematica's analysis included beneficiaries eligible for full benefits or the equivalent, who were identified using the following restricted benefit codes: 1: Individual is eligible for Medicaid or CHIP and entitled to the full scope of Medicaid or CHIP benefits.

Source	Pages	Link(s)	Comments
Transformed Medicaid Statistical Information System (T-MSIS) Analytic Files (TAF) (continued)	19	https://www.medicaid.g ov/medicaid/data- systems/macbis/medica id-chip-research- files/transformed- medicaid-statistical- information-system-t- msis-analytic-files- taf/index.html	(continued) Beneficiaries only eligible for family planning services were excluded. A total of 2.5 million individuals were only eligible for family planning services in 2020, ranging from <1% to 15% of all Medicaid and CHIP beneficiaries in each state. Mathematica's analysis also excluded beneficiaries in the U.S. territories and beneficiaries who had claims but no eligibility data for the year.
U.S. Census Bureau, American Community Survey (ACS)	20	programs-	The ACS is a national random, weighted survey of the U.S. population, including individuals in households and in group quarters (institutions, military barracks, university dorms, etc.). Survey respondents are asked if they are currently covered by "Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability." The Public Use Microdata Sample (PUMS) files contain a sample of the responses to the ACS and allow data users to create estimates for user-defined characteristics. PUMS files for an individual year contain data on approximately 1% of the U.S. population. Due to the impact of the COVID-19 pandemic on data collection and survey response rates, the Census Bureau did not release the standard ACS 1-year PUMS files for 2020. Therefore, all ACS data included in this profile come from Mathematica's primary analysis of the 2019 public use PUMS file. The specific data files used for analysis were the 2019 ACS 1-Year PUMS U.Swide Household file and the 2019 ACS 1-Year PUMS U.Swide Person file. Analyses were conducted in SUDAAN v. 11.0.1 to account for the complex sample design.

Source	Pages	Link(s)	Comments
Centers for Disease Control and Prevention (CDC), Natality Public Use File	21	https://wonder.cdc.gov/	The natality public use file contains records for all live births registered within the 52 U.S. reporting areas (50 states, New York City, and D.C.), during the reporting year. The 2020 state-level natality data included in this profile were generated using the CDC Wide-ranging ONline Data for Epidemiologic Research (CDC WONDER) data analysis system. Full citation: United States Department of Health and Human Services (US DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Division of Vital Statistics, Natality public-use data 2016-2020, on CDC WONDER Online Database, October 2021. Accessed at: http://wonder.cdc.gov/natality-expanded-current.html .
National Survey of Children's Health (NSCH)	24-26	https://www.census.gov/ programs- surveys/nsch.html	NSCH is sponsored by the Maternal and Child Health Bureau of the Health Resources and Services Administration. It is a nationally representative survey of all noninstitutionalized children ages 0 to 17 years in the U.S. (50 states and DC) who live in housing units. Questions are answered by an adult familiar with the child's health. Public insurance is defined in the survey as coverage through "Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability" at the time of the survey. Private insurance is defined as coverage through a current or former employer or union, insurance purchased directly from an insurance company, TRICARE or other military health care, or coverage through the Affordable Care Act at the time of the survey. Respondents can report more than one type of current insurance coverage. All NSCH data included in this profile come from Mathematica's primary analysis of the 2020 Topical Data public use file, which is available at: https://www.census.gov/programs-surveys/nsch/data.html . Analyses were conducted in SAS and employed SAS survey procedures to account for the complex sample design.

Source	Pages	Link(s)	Comments
	24, 27, 28	https://www.cdc.gov/nch s/nhis/index.htm	The NHIS is a nationally representative survey of the civilian noninstitutionalized population residing within the 50 states and the District of Columbia. The NHIS universe includes residents of households and noninstitutional group quarters (e.g., homeless shelters, rooming houses, and group homes). Basic demographic information is collected for all household members; more detailed health information is collected for one sample adult (age 18 or older) and one sample child (ages 0 to 17) per household. The Medicaid recode variable used for these analyses includes all individuals who report coverage through Medicaid or other state-sponsored health plans including CHIP at the time of the survey. Due to the COVID-19 pandemic, data collection procedures in 2020 were disrupted, and from April to June all interviews were conducted by telephone only, and from July to December interviews were attempted by telephone first with follow-ups to complete interviews by personal visit. Due to concerns about possible loss of coverage and lower response rates associated with telephone interviewing, approximately half of the original sample allocated for the last five months of 2020 was replaced with 2019 NHIS samples that resulted in a Sample Adult interview in 2019. The 2020 Sample Adult Interview file is composed of both the 2019 reinterview cases and the 2020 newly sampled cases. After developing the final adult weights, NCHS assessed bias in sociodemographic and health estimates due to nonresponse and coverage error. They concluded that the 2020 Sample Adult Interview file appears to have underrepresented adults living alone, those in the lowest income category, and those who only have cell phones, while overrepresenting adults living in households with four or more individuals or in households with landline and cell telephones.

Source	Pages	Link(s)	Comments
National Center for Health Statistics (NCHS), National Health Interview Survey (NHIS) (continued)	24, 27, 28	https://www.cdc.gov/nch s/nhis/index.htm	(continued) All NHIS data included in this profile come from Mathematica's primary analysis of the 2020 NHIS Sample Adult Interview public use file, available at: https://www.cdc.gov/nchs/nhis/2020nhis.htm . Analyses were conducted in SAS and employed SAS survey procedures to account for the complex sample design. All analyses and interpretations of data should be attributed to Mathematica and not to NCHS, which is responsible only for the initial data.
Agency for Healthcare Research and Quality, Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey Database	30-37	https://cahpsdatabase.a hrq.gov/files/2021CAHP SHealthPlanChartbook.p df	Based on data collected between July 2020 and July 2021 and submitted directly to the AHRQ CAHPS Database by state Medicaid/CHIP agencies or individual health plans. In states with fee-for-service or primary care case management delivery systems, health plan refers to the Medicaid program. The Child Medicaid results include 86,597 respondents across 175 plans in 39 states. The Adult Medicaid results include 49,997 respondents across 162 plans in 40 states. The data are submitted voluntarily to the AHRQ CAHPS Database and are not from a statistically representative sample of all plans. They are not representative of all plans, enrollees, or states. The Child Medicaid results from six states represent 45% of responses and six states in the Adult Medicaid results represent 48% of responses. Thus, the estimates may be biased and it is not possible to compute precision estimates from the data.