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:

- Arkansas, Iowa and West Virginia revised their July preliminary enrollment data after identifying minor errors in the prior submitted data.
- For August 2017, CMS is reporting growth of 16,436,349 compared to July-September 2013. This figure is more than the 16,432,539 in net enrollment growth that was included in the Medicaid and CHIP: July 2017 Applications, Eligibility Determinations, and Enrollment Report by nearly 4,000. This difference does not match the 37,413 decrease in the full report for the July to August 2017 period because Arkansas, lowa and West Virginia slightly revised their July preliminary enrollment figures.

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Table 1: Medicaid and CHIP: July and August 2017 Preliminary Monthly Enrollment

		Enrollment									
States Expanding Medicaid Marketplace Type		Total Medicaid and CHIP Enrollment, July 2017 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, August 2017 (Preliminary) (II)	% Change July to August 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July- Sept. 2013 (IV)	Net Change, July-Sept. 2013 to August 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to August 2017 (Columns (IV) and (II)) (VI)				
Alaska	FFM	193,019	194,909	0.98%	122,334	72,575	59.33%				
Arizona	FFM	1,745,097	1,742,701	-0.14%	1,201,770	540,931	45.01%				
Arkansas	Partnership	909,062	906,235	-0.31%	556,851	349,384	62.74%				
California	SBM	12,182,095	12,233,859	0.42%	7,755,381	4,478,478	57.75%				
Colorado	SBM	1,399,170	1,405,915	0.48%	783,420	622,495	79.46%				
Connecticut	SBM	799,837	801,870	0.25%	-	-	-				
Delaware	Partnership	244,960	246,313	0.55%	223,324	22,989	10.29%				
District of Columbia	SBM	277,408	279,881	0.89%	235,786	44,095	18.70%				
Hawaii	SBM**	346,198	346,340	0.04%	288,357	57,983	20.11%				
Illinois	Partnership	3,040,025	3,022,660	-0.57%	2,626,943	395,717	15.06%				
Indiana	FFM	1,481,073	1,479,911	-0.08%	1,120,674	359,237	32.06%				
Iowa	Partnership	666,420	657,421	-1.35%	493,515	163,906	33.21%				
Kentucky	SBM	1,256,677	1,259,245	0.20%	606,805	652,440	107.52%				
Louisiana	FFM	1,449,244	1,444,529	-0.33%	1,019,787	424,742	41.65%				
Maryland	SBM	1,290,980	1,296,833	0.45%	856,297	440,536	51.45%				
Massachusetts	SBM	1,621,297	1,570,299	-3.15%	1,296,359	273,940	21.13%				
Michigan	Partnership	2,358,312	2,358,347	0.00%	1,912,009	446,338	23.34%				
Minnesota	SBM	1,044,472	1,051,344	0.66%	873,040	178,304	20.42%				
Montana	Plan Management	260,931	260,992	0.02%	148,974	112,018	75.19%				
Nevada	SBM**	633,019	636,002	0.47%	332,560	303,442	91.24%				
New Hampshire	Partnership	184,252	184,887	0.34%	127,082	57,805	45.49%				
New Jersey	FFM	1,750,123	1,745,598	-0.26%	1,283,851	461,747	35.97%				
New Mexico	SBM**	781,857	760,288	-2.76%	457,678	302,610	66.12%				
New York	SBM	6,416,899	6,395,407	-0.33%	5,678,417	716,990	12.63%				
North Dakota	FFM	93,148	93,319	0.18%							
Ohio	Plan Management	2,788,908	2,809,244	0.73%	2,161,785		29.95%				
Oregon	SBM**	980,606	964,897	-1.60%			54.05%				
Pennsylvania	FFM	2,942,548		0.15%							
Rhode Island	SBM	313,103	313,546	0.14%			64.30%				
Vermont	SBM	167,599	165,370	-1.33%	161,081	4,289	2.66%				
Washington	SBM	1,781,312	1,776,259	-0.28%	·		58.94%				
West Virginia	Partnership	559,886		0.36%							
Subtotal for All States Expanding Medicaid		51,959,537	51,913,296	-0.09%	37,069,415	14,042,011	37.88%				
Subtotal for All States with Expansions in Effect											
and Providing Coverage in Reporting Month		51,959,537	51,913,296	-0.09%	37,069,415	14,042,011	37.88%				
Subtotal for States Expanding Medicaid that				Difference July to August 2017							
Reported in July and August 2017		51,959,537	51,913,296	-46,241							
Subtotal for States Expanding Medicaid that						Difference July-Sept 2013 to August 2017					
Reported in August 2017 a	nd July-Sept. 2013		51,111,426		37,069,415	14,042,011					

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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.

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

Column III is calculated for only those states that reported both July and August 2017 data.

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

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

Arkansas	(1)	Corrected.
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.
lowa	(I)	Corrected. May include some retroactive enrollment.
Illinois	(IV)	Includes individuals who received retroactive coverage (unlike columns (I) and (II)).
Minnesota	(IV)	May include duplicates (unlike columns (I) and (II)).
New York	(I), (II)	Includes partial benefit program enrollees.
New York	(I), (II)	Includes estimated retroactive enrollment.
North Dakota	(IV)	Data is from July 2013 only.
Oregon	(IV)	Includes emergency Medicaid population.
Washington	(I), (II)	Includes individuals enrolled at any point during the month.
West Virginia	(I)	Corrected.

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Table 1: Medicaid and CHIP: July and August 2017 Preliminary Monthly Enrollment

		Enrollment								
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, July 2017 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, August 2017 (Preliminary) (II)	% Change July to August 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July- Sept. 2013 (IV)	Net Change, July-Sept. 2013 to August 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to August 2017 (Columns (IV) and (II)) (VI)			
Alabama	FFM	883,695	886,245	0.29%	799,176	87,069	10.89%			
Florida	FFM	4,357,190	4,319,939	-0.85%	3,695,306	624,633	16.90%			
Georgia	FFM	1,718,560	1,727,015	0.49%	1,535,090	191,925	12.50%			
Idaho	SBM	293,207	295,186	0.67%	238,150	57,036	23.95%			
Kansas	Plan Management	403,231	394,141	-2.25%	378,160	15,981	4.23%			
Maine	Plan Management	264,831	263,966	-0.33%	-	-	-			
Mississippi	FFM/SBM-SHOP	672,073	672,845	0.11%	637,229	35,616	5.59%			
Missouri	FFM	967,477	967,216	-0.03%	846,084	121,132	14.32%			
Nebraska	Plan Management	238,855	240,376	0.64%	244,600	-4,224	-1.73%			
North Carolina	FFM	2,030,268	2,033,708	0.17%	1,595,952	437,756	27.43%			
Oklahoma	FFM	802,957	794,158	-1.10%	790,051	4,107	0.52%			
South Carolina	FFM	1,007,192	1,008,737	0.15%	889,744	118,993	13.37%			
South Dakota	Plan Management	118,132	118,610	0.40%	115,501	3,109	2.69%			
Tennessee	FFM	1,474,763	1,496,472	1.47%	1,244,516	251,956	20.25%			
Texas	FFM	4,749,590	4,760,976	0.24%	4,441,605	319,371	7.19%			
Utah	FFM/SBM-SHOP	304,670	306,271	0.53%	294,029	12,242	4.16%			
Virginia	Plan Management	998,690	1,008,235	0.96%	935,434	72,801	7.78%			
Wisconsin	FFM	1,037,696	1,037,812	0.01%	985,531	52,281	5.30%			
Wyoming	FFM	60,075	60,072	0.00%	67,518	-7,446	-11.03%			
Subtotal for All States Not Expanding Medicaid		22,383,152	22,391,980	0.04%	19,733,676	2,394,338	12.13%			
Subtotal for States Not Expanding Medicaid that Reported in July and August 2017		22,383,152	22,391,980	Difference July to August 2017 8,828						
Subtotal for States Not Expanding Medicaid that Reported in August 2017 and July-Sept. 2013			22,128,014		19,733,676	Difference July-Sept 2013 to August 2017 2,394,338				

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

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

Column III is calculated for only those states that reported both July and August 2017 data.

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

The subtotals for states reporting data from both and August 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 1: Medicaid and CHIP: July and August 2017 Preliminary Monthly Enrollment

		Total Enrollment									
All States	Total Medicaid and CHIP Enrollment, July 2017 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, August 2017 (Preliminary) (II)	% Change July to August 2017 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July- Sept. 2013 (IV)	Net Change, July-Sept. 2013 to August 2017 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to August 2017 (Columns (IV) and (II)) (VI)					
Total Across All States	74,342,689	74,305,276	-0.05%	56,803,091	16,436,349	28.94%					
Total for States that Reported in July and August 2017	74,342,689	74,305,276	Difference July to August 2017 -37,413								
Total for States that Reported in August 2017 and July-Sept. 2013		73,239,440		56,803,091	Difference July-Sept 2013 to August 2017 16,436,349						

Column III is calculated for only those states that reported both July and August 2017 data.

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

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

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.

Child enrollment figures represent the children enrolled in the Medicaid program and the total enrollment for separate CHIP programs 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 counts 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). States use the definition of "child" as included in the state's Medicaid or CHIP state plan in reporting performance indicator data to CMS, which varies from state to state.

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:

• Prior months' total child enrollment figures include data that is reported more than a month after the close of the reporting period, and thus include some children enrolled retroactively. The preliminary August 2017 data included in this report is collected in the month after the reporting period and includes very few (if any) children enrolled retroactively. An updated August figure that includes more retroactively enrolled individuals will be included in the next report in this series.

	Enrollment									
		Total Medicaid and CHIP Enrollment	Medicaid and CHIP Child Enrollment as a % of Total Enrollment (Columns (VI) and (VII))							
State	March, 2017 (I)	April, 2017 (II)	May, 2017 (III)	June, 2017 (IV)	July, 2017 (V)	August, 2017 (Preliminary) (VI)	August, 2017 (Preliminary) (VII)	August, 2017 (Preliminary) (VIII)		
Alabama	627,341	628,113	632,405	630,877	632,055	626,681	886,245	70.71%		
Alaska	87,966	88,481	89,264	90,081	90,562	90,085	194,909	46.22%		
Arizona	-	-	-	-	-	-	1,742,701	-		
Arkansas	418,449	426,133	430,527	431,726	428,473	428,314	906,235	47.26%		
California	5,230,923	5,217,676	5,197,169	5,181,237	5,170,276	5,156,201	12,233,859	42.15%		
Colorado	629,937	634,114	637,369	632,269	626,771	628,117	1,405,915	44.68%		
Connecticut	302,885	311,561	312,334	314,797	318,734	318,533	801,870	39.72%		
Delaware	105,596	104,604	104,813	104,944	105,423	105,946	246,313	43.01%		
District of Columbia	-	-	-		-	-	279,881	-		
Florida	2,606,127	2,604,622	2,596,686	2,596,107	2,600,220	2,571,059	4,319,939			
Georgia	1,240,947	1,238,216	1,237,830	1,239,691	1,229,982	1,209,345	1,727,015			
Hawaii	146,032	145,170	145,459	145,515	144,928	144,081	346,340			
Idaho	213,162	213,903	212,885	213,554	213,399	214,142	295,186			
Illinois	1,438,391	1,437,442	1,437,199	1,436,185	1,431,681	1,409,119				
Indiana	803,792	800,114	799,844	799,715	800,044	787,096				
lowa	308,187	307,016	307,312	306,164	324,640	321,517	657,421			
Kansas	272,541	267,860	269,696	268,658	274,618	270,418		68.61%		
Kentucky	567,772	568,157	569,790		571,129	572,748				
Louisiana	760,949	757,013	756,671	754,525	753,321	746,518				
Maine	112,937	112,790	112,301	112,083	111,689	110,449				
Maryland	609,678	609,800	610,895	609,109	608,867	603,449				
Massachusetts	657,796	665,472	664,904	657,393	648,065	642,625				
Michigan	953,097	954,241	956,316	957,724	959,107	949,234	2,358,347	40.25%		
Minnesota	522,670	523,663	524,253	522,394	523,949	516,398				
Mississippi	461,482	460,565	460,682		459,584	453,765				
Missouri	635,297	634,305	631,214	624,308	625,497	625,199	967,216			
Montana	126,613	126,604	126,455	126,327	126,202	125,887	260,992			
Nebraska	162,279	161,715	161,895	162,294	162,998	159,336	240,376			
Nevada	300,783	300,527	301,475	301,025	301,958	303,403	636,002			
New Hampshire	94,002	93,755	93,390		93,045	91,789	184,887	49.65%		
New Jersey	851,538	851,706	850,636	846,873	844,690	830,494				
New Mexico	361,893	360,311	358,929	356,970	355,085	349,511	760,288	45.97%		
New York	2,475,417	2,472,709	2,474,478	2,475,153	2,472,253	2,465,452	6,395,407			
North Carolina	1,444,866	1,444,501	1,442,234		1,448,110	1,415,965	2,033,708			
North Dakota	43,675	43,868	44,103	43,991	43,670	43,774	93,319			
Ohio	1,157,727	1,155,805	1,153,100	1,152,976	1,144,448	1,152,955	2,809,244			
Oklahoma	531,029	535,756	527,312	524,293	521,338	515,701	794,158			
Oregon	423,543	426,844	426,723	427,575	421,828	412,310		42.73%		
Pennsylvania	1,392,260	1,389,522	1,391,926	1,391,039	1,389,565	1,390,089				
Rhode Island	120,383	120,839	121,407	121,821	121,328	122,070				
South Carolina	648,609	647,603	646,087	646,903	634,195	635,378				
South Dakota	82,843	82,107	81,957	81,672	81,141	81,505	118,610			
Tennessee	-	-	-		-	-	1,496,472			
Texas	3,531,919	3,512,381	3,510,837	3,504,930	3,503,949	3,494,104	4,760,976			
Utah	219,089	217,634	217,169	216,282	215,400	214,918		70.17%		
Vermont	65,427	64,906	64,968	65,075	64,810	64,074	165,370			
Virginia	668,717	669,400	669,659	667,796	670,411	665,265	1,008,235			
Washington	845,820	845,519	845,572	845,089	842,023	839,304	1,776,259			
West Virginia	227,815	226,873	226,604		225,335	225,188				
Wisconsin	493,287	490,743	491,033	490,939	490,151	489,894	1,037,812	47.20%		
Wyoming	38,203	38,218	38,258	37,493	37,003	36,924	60,072	61.47%		
Total For All States	36,021,691	35,990,877	35,964,025	35,906,249	35,863,950	35,626,329	74,305,276	50.33%		
Number of States					-					
Reporting	48	48	48	48	48	48	51	48		

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For general notes on enrollment data, see Table I: Medicaid and CHIP: July and August 2017 Preliminary Monthly Enrollment.

(-)=State has not reported data or data submitted was incomplete.

States that provide coverage to pregnant women through CHIP and whose child enrollment figures include pregnant women are CO, MO, NJ, RI, VA.

Column VIII is calculated for only those states that reported both and August 2017 child enrollment data and August 2017 Total Medicaid and CHIP enrollment data.

Missouri (I) - (VII) Does not include all individuals funded under Title XXI or enrollees in a premium grace period New York (I) - (VII) Includes estimated retroactive enrollment. Washington (I) - (VII) Includes individuals enrolled at any point during the month.	Michigan	(I) - (VII)	Does not include share of cost and full benefit 1115 waiver enrollees.
() () includes estimated retribution of minimum	Missouri	(I) - (VII)	Does not include all individuals funded under Title XXI or enrollees in a premium grace period.
Washington (I) - (VII) Includes individuals enrolled at any point during the month.	New York	(I) - (VII)	Includes estimated retroactive enrollment.
	Washington	(I) - (VII)	Includes individuals enrolled at any point during the month.

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 August, and Tennessee only provided determination data from their CHIP program.

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Table 3: Medicaid and CHIP: August 2017 Monthly Applications and Eligibility Determinations

				Determinations					
States Expanding Medicaid	Marketplace Type	New Applications Submitted to Medicaid and CHIP Agencies, August 2017 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, August 2017 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, August 2017 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, July 2017 (Preliminary) (IV)	% Change July to August 2017 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, August 2017 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, August 2017 (Preliminary) (VII)	Total New Determinations, August 2017 (Preliminary) (VIII)
Alaska	FFM	3,911	N/A	3,911	3,187	22.72%	3,187	-	3,187
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership		N/A	-	-	-	-	-	-
California	SBM	180,390	-	180,390	148,595	21.40%	164,568	12,561	177,129
Colorado	SBM	21,298	1,754	23,052	19,098	20.70%	19,010	320	19,330
Connecticut	SBM	3,133	4,998	8,131	8,231	-1.21%	9,282	121	9,403
Delaware	Partnership		N/A	-	-	-	-	-	
District of Columbia	SBM	3,936		5,984	4,871	22.85%	6,139	-	6,139
Hawaii	SBM**	5,157	-	5,157	4,649	10.93%			8,772
Illinois	Partnership	78,681	N/A	78,681	67,016				62,367
Indiana	FFM	86,257	N/A	86,257	74,080	16.44%			42,956
lowa	Partnership	18,347		18,347	16,281	12.69%	3,295		2 205
Kentucky	SBM		11.470	11,679	9,644	21.10%			
Louisiana	FFM	26,863		26,863	23,628				38,133
Maryland	SBM	7,364	88,055	95,419	92,264	3.42%			33,044
Massachusetts	SBM	21,737		27,641	25,481	8.48%	-		-
Michigan	Partnership	50,959		50,959	43,214	17.92%			52,077
Minnesota	SBM	5,084	22,883	27,967	23,832	17.35%	32,764		32,817
Montana	Plan Management	3,981	N/A	3,981	3,481	14.36%			4,333
Nevada	SBM**	22,018		22.010	17,959				13,837
New Hampshire	Partnership	8,913		8,913	7,835	13.76%			6,065
•	FFM	31,246		31,246	29,836				17,320
New Jersey	SBM**	14,151	N/A						
New Mexico New York		14,131	509,597		11,490				
	SBM	2 201		509,597	720,386		·		115,694
North Dakota	FFM	2,201	N/A	2,201	1,753	25.56%			2,430
Ohio	Plan Management	60,709							55,456
Oregon	SBM**	25,086		25,086		7.75%			47,094
Pennsylvania	FFM	76,719							54,935
Rhode Island	SBM	3,889		3,889	3,889		5,775		
Vermont	SBM	3,392					·		3,276
Washington	SBM	17,852		89,886					46,397
West Virginia	Partnership	24,847	N/A	24,847	20,807	19.42%	13,061	682	13,743
Subtotal for All States Exp	anding Medicaid	808,121	720,570	1,528,691	1,615,328	-5.36%	818,610	79,129	897,739
Subtotal for All States with Providing Coverage in Rep	•	808,121	720,570	1,528,691	1,615,328	-5.36%	818,610	79,129	897,739
Subtotal for States Expand Reported in July and Augus				1,528,691	1,615,328	Difference July to August 2017 -86,637			

**= 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 July and August 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), (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.

lowa (VI) Does not include MAGI determinations.

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

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

lowa (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 08/I - 08/31.

Maryland (II), (III), (IV), (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), (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 3: Medicaid and CHIP: August 2017 Monthly Applications and Eligibility Determinations

				Applications	Determinations				
States Not Expanding Medicaid	Marketplace Type	New Applications Submitted to Medicaid and CHIP Agencies, August 2017 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, August 2017 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, August 2017 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, July 2017 (Preliminary) (IV)	% Change July to August 2017 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, August 2017 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, August 2017 (Preliminary) (VII)	Total New Determinations, August 2017 (Preliminary) (VIII)
Alabama	FFM	20,055	N/A	20,055	17,118	17.16%	30,256	4,205	34,461
Florida	FFM	311,323	N/A	311,323	286,222	8.77%	150,768	22,554	173,322
Georgia	FFM	55,319	N/A	55,319	55,987	-1.19%	26,420	1,251	27,671
Idaho	SBM	7,907	-	7,907	6,556	20.61%	5,992	367	6,359
Kansas	Plan Management	-	N/A	-	-	-	-	-	-
Maine	Plan Management	1,523	N/A	1,523	1,438	5.91%	10,202	347	10,549
Mississippi	FFM/SBM-SHOP	20,645	N/A	20,645	16,488	25.21%	14,846	548	15,394
Missouri	FFM	21,301	N/A	21,301	18,407	15.72%	10,180	-	10,180
Nebraska	Plan Management	6,814	N/A	6,814	5,877	15.94%	8,525	991	9,516
North Carolina	FFM	22,824	N/A	22,824	20,267	12.62%	35,607	3,798	39,405
Oklahoma	FFM	54,266	N/A	54,266	46,350	17.08%	48,313	9,380	57,693
South Carolina	FFM	22,883	N/A	22,883	20,802	10.00%	9,708	171	9,879
South Dakota	Plan Management	2,950	N/A	2,950	2,528	16.69%	1,818	-	1,818
Tennessee	FFM	630	N/A	630	528	19.32%	-	522	522
Texas	FFM	133,927	N/A	133,927	124,823	7.29%	100,106	16,031	116,137
Utah	FFM/SBM-SHOP	27,943	N/A	27,943	20,057	39.32%	48,486	-	48,486
Virginia	Plan Management	24,768	N/A	24,768	21,110	17.33%	16,059	627	16,686
Wisconsin	FFM	26,159	N/A	26,159	22,674	15.37%	20,199	1,179	21,378
Wyoming	FFM	1,712	N/A	1,712	1,325	29.21%	-		-
Subtotal for All States Not E	Expanding Medicaid	762,949	-	762,949	688,557	10.80%	537,485	61,971	599,456
Subtotal for States Not Expanding Medicaid that Reported in July and August 2017				762,949	688,557	Difference July to August 2017 74,392			
Total Across All States		1,571,070	720,570	2,291,640	2,303,885	-0.54%	1,356,095	141,100	1,497,195
Total for States that Report	ed in July and August	1,371,070	720,370	2,291,640	2,303,885	Difference July to August 2017		141,100	.,477,173

•

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

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

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. (VI), (VII), (VIII) Missouri 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. (I), (III), (IV) South Dakota 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.