



Medicaid & CHIP: February 2015 Monthly Applications, Eligibility Determinations and Enrollment Report *May 1, 2015*

Background

This monthly report on state Medicaid and Children's Health Insurance Program (CHIP) data represents state Medicaid and CHIP agencies' eligibility activity for the calendar month of February 2015. Open enrollment in the Marketplace began November 15, 2014 and ended on February 15, 2015. Medicaid and CHIP are longstanding programs that serve many populations in addition to those that are newly eligible for Medicaid under the new low-income adult group established by the Affordable Care Act. This report measures eligibility and enrollment activity for the entire Medicaid and CHIP programs in all states¹, reflecting activity for all populations receiving comprehensive Medicaid and CHIP benefits in all states, including states that have not yet chosen to adopt the new low-income adult group.² This data is submitted to CMS by states using a common set of indicators designed to provide information to support program management and policy-making related to application, eligibility, and enrollment processes.³

As with previous reports, this month's report focuses on those indicators that relate to Medicaid and CHIP application and enrollment process:⁴

¹ For purposes of this report, the term "states" shall include the 50 states and the District of Columbia.

² As of February 2015, twenty-eight states and the District of Columbia had implemented the expansion of Medicaid under the Affordable Care Act to cover adults under age 65 with incomes up to 133 percent of the Federal Poverty Level. Pennsylvania implemented the Medicaid expansion on January 1, 2015 and Indiana implemented the Medicaid expansion on February 1, 2015. There is no deadline for when a state must decide whether to expand Medicaid and states are continuing to consider their options. The enrollment impact of the Medicaid expansion varies; some of these states had expanded coverage to parents and other adults at income levels above the level required under federal law before the Affordable Care Act. Many other states previously covered parents only at the minimum required income levels and often did not cover other adults without disabilities who are under age 65 at all.

³ See appendix A for the standardized data definitions for the data included in this report. States continue to work to transition to these standardized definitions. State-specific notes on the differences between state-reported data and the data definitions are included in the state-by-state tables in this report.

⁴ The Affordable Care Act's "no wrong door" policy means that individuals can apply for health insurance coverage through the Marketplace or the Medicaid or CHIP agency (if a separate agency) in their state and receive an eligibility determination for the health insurance program for which they are eligible. Information on applications received by (and Medicaid and CHIP assessments and determinations made by) the Marketplaces is included in the Health Insurance Marketplace 2015 Open Enrollment Period: March Enrollment Report (March 10, 2015). Because of the integrated nature of eligibility determination in State-Based Marketplace (SBM) states, some SBM data is reported in both the March 10 report and this report. However, the March 10 report includes data from November 15, 2014 through February 15, 2015, while this report includes data from February 1 - February 28, 2015.

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- The number of applications submitted directly to Medicaid and CHIP agencies, including those received through State-Based Marketplaces (SBMs);
- The number of eligibility determinations made by Medicaid and CHIP agencies on the applications described above, as well as applications to the Federally-Facilitated Marketplace (FFM) in states for which the FFM makes an eligibility assessment (and the state then completes the Medicaid or CHIP determination); and
- The total number of individuals enrolled in the Medicaid and CHIP programs who are receiving comprehensive benefits, including details on the total number of children enrolled in these programs.

As with each monthly report, given that states are reporting monthly data to CMS soon after the close of the month, the February 2015 data presented in this report should be considered preliminary. We have published updated data for January 2015 applications, eligibility determinations and enrollment on Medicaid.gov, which includes a more complete data set than the previously reported preliminary January 2015 data.

Medicaid and CHIP February 2015 Enrollment Data Highlights

Total Individuals Enrolled in Medicaid and CHIP in February 2015 in All States Reporting January Data (includes all individuals enrolled in the program on the last day of the reporting period).⁵	70,515,716 ⁶
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- Over 70.5 million individuals were enrolled in Medicaid and CHIP in February 2015.⁷ This enrollment count is point-in-time (on the last day of the month) and includes all enrollees in the Medicaid and CHIP programs who are receiving a comprehensive benefit package.

⁵ This enrollment data may differ from other published state and national enrollment figures because it only includes individuals with comprehensive benefits. Individuals who are only eligible for limited benefits under the Medicaid and CHIP programs (e.g., emergency Medicaid, family planning-only coverage, limited benefit dual eligible individuals, and Medicaid section 1115 demonstration populations with limited benefits) are excluded from this indicator in all reporting periods. See Appendix A for more information on this methodology. See the notes in Table 1 for state-specific caveats regarding the reported data. It is important to note that the enrollment measure is a total count of enrollment in Medicaid and CHIP, not solely a count of those newly enrolled during the reporting period.

⁶ This represents enrollment in the 50 states and the District of Columbia. This number is not directly comparable to prior months' numbers because several states changed their methodology in February to better match CMS's data specifications. The data contained in this report is preliminary because it is reported soon after the close of the reporting month and contains few, if any, individuals who become eligible in February 2015 after the close of the month due to retroactive eligibility under Medicaid or similar reasons. In Medicaid, individuals are potentially eligible for retroactive coverage for incurred health care costs dating back to 90 days prior to the date of application.

⁷ See footnote 5 and 6.

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- 561,609 additional people were enrolled in February 2015 as compared to January 2015 in the 51 states that reported comparable February and January 2015 data.⁸
- Looking at the additional enrollment since October 2013 when the initial Marketplace open enrollment period began, among the 49 states reporting both February 2015 enrollment data and data from July-September of 2013, over 11.7 million additional individuals are enrolled in Medicaid and CHIP as of February 2015, an approximately 20.3 percent increase over the average monthly enrollment for July through September of 2013.⁹ (Connecticut and Maine are not included in this count.)¹⁰
- Among states that had implemented the Medicaid expansion and were covering newly eligible adults in February 2015, Medicaid and CHIP enrollment rose by almost 27 percent compared to the July-September 2013 baseline period, while states that have not, to date, expanded Medicaid reported an increase of over 8 percent over the same period.¹¹
- Thirteen of the 29 states that had implemented the Medicaid expansion and were covering newly eligible adults in February 2015, and that reported relevant data for both January and the July-September 2013 baseline period, experienced an enrollment increase of 30 percent or more.¹²

⁸ See the notes in Table 1 for state-specific caveats regarding the reported data.

⁹ The net change in enrollment is based on data from the 49 states reporting both February 2015 enrollment data and data from July-September 2013 (the baseline period before the initial Marketplace open enrollment period) that contains comparable enrollment groups. These 49 states report total enrollment in February of more than 69.5 million individuals, and July-September 2013 average enrollment of nearly 57.8 million. For February 2015, we are reporting growth of 11,718,178 compared to July-September 2013. This figure exceeds the 11,151,468 in net enrollment growth that was included in the *Medicaid and CHIP: January 2015 Applications, Eligibility Determinations, and Enrollment Report* by nearly 567,000. This difference does not match the 561,609 increase reported above for the January to February 2015 period for several reasons. First, the 561,609 figure is based on 51 states, while the nearly 567,000 figure is based on only 49 states. In addition, some states updated their data this month to better align with CMS's data specifications. These changes mean that the summary statistics in the January 2015 report are not perfectly comparable to the figures in this report. See the notes in table 1 for state-specific caveats regarding the reported data. Because the July-September 2013 data may contain individuals with retroactive Medicaid coverage, and the January and February 2015 data included in this report is preliminary (see footnote 6), the difference reported here between February 2015 and July-September 2013 period is likely understated.

¹⁰ Connecticut and Maine did not submit enrollment data for the July-September 2013 baseline period.

¹¹ Percentage calculations are based only on states reporting in both February 2015 and the July through September 2013 baseline period. These percentages are not directly comparable to the figures reported in previous months because a few states made corrections to their data this month to bring their reporting in line with CMS's data definitions and because of differences in the number of states included in the calculation. See footnote 9 for additional information.

¹² Medicaid expansion states that reported data in both periods that showed a greater than 30 percent increase in enrollment are: Arkansas, California, Colorado, Kentucky, Maryland, Nevada, New Hampshire, New Jersey, New Mexico, Oregon, Rhode Island, Washington, and West Virginia (9 of these 12 states also run State-Based Marketplaces). In previous months, Minnesota and Vermont have been included on this list, but are not included this month. Minnesota transitioned approximately 90,000 individuals from its Medicaid program to its Basic Health Plan on January 1, 2015. Vermont updated its methodology in January 2015 to better align with CMS's data specifications, which caused a decline in its reported enrollment growth. Among expansion states, the percentage change in the number of individuals enrolled varies based on the size of the coverage expansion that is occurring in

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- These enrollment counts are in addition to the enrollment increases from the nearly 950,000 individuals who gained coverage as a result of the Affordable Care Act before open enrollment began.¹³ Seven states implemented an “early option” to expand Medicaid coverage to adults with incomes up to 133 percent of the FPL between April 1, 2010 and January 1, 2014, using new state plan authority provided by the Affordable Care Act or a demonstration under section 1115 of the Social Security Act building upon that authority.¹⁴

It is important to note that, as with previous reports, multiple factors contribute to the change in enrollment between February 2015 and the July-September 2013 baseline period, including but not limited to changes attributable to the Affordable Care Act. The enrollment numbers included in this report understate total Medicaid and CHIP enrollment because the data is preliminary. The preliminary data, which is submitted approximately a week after the close of the reporting period, generally does not include Medicaid and CHIP eligible individuals who applied in February and whose application will be fully processed after February 28th; these individuals will be enrolled effective back to at least the date of application or the first of the month and we note that those enrollments are not reflected in this preliminary data. Similarly, the preliminary data does not likely include individuals who had medical expenses in February 2015, applied for Medicaid in a later month, and qualify for retroactive Medicaid coverage in February 2015.¹⁵ Updated enrollment data for past months, which is updated one month after the close of the reporting period, is available on the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on [Medicaid.gov](http://www.Medicaid.gov).¹⁶

2014. States that previously offered comprehensive coverage to many adults with incomes under 133 percent of the FPL will likely see a smaller percent increase than those who previously offered only coverage for very low-income parents. Additionally, in most states that provided Medicaid coverage to adults with incomes above 133 percent of the FPL prior to 2014, those individuals are no longer eligible for or enrolled in Medicaid and instead may be eligible to purchase qualified health plan coverage through the Marketplace, and may be eligible for advanced payments of premium tax credits and cost-sharing reductions; this change will reduce their overall Medicaid enrollment.

¹³ Enrollment data for California, Colorado, the District of Columbia, Minnesota, and New Jersey was reported to CMS by the state and is from the end of 2013. Data for Connecticut and Washington is from 2012 (Source: Sommers, B. D., Arntson, E., Kenney, G. M., et al., “Lesson from Early Medicaid Expansions under Health Reform: Interviews with Medicaid Officials”, *Medicare & Medicaid Research Review*, 2013: Volume 3, number 4 (http://www.cms.gov/mmrr/Downloads/MMRR2013_003_04_a02.pdf).

¹⁴ Connecticut, the District of Columbia, Minnesota utilized state plan authority, while California, Colorado, New Jersey, and Washington provided the coverage through Medicaid demonstration authority under section 1115 of the Social Security Act. For more information about this “early option,” please see [Medicaid and CHIP: March 2014 Monthly Applications, Eligibility Determinations, and Enrollment Report \(May 1, 2014\)](#).

¹⁵ See footnote 6 for additional information on retroactive eligibility.

¹⁶ The updated data available on Medicaid.gov is not directly comparable to the preliminary data included in this report because it contains retroactive enrollment and individuals who applied during the reporting period but were determined eligible after the close of the reporting period.

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Child Enrollment

Total Medicaid and CHIP child enrollment in the 46 states reporting in February 2015¹⁷	29,245,526 ¹⁸
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We are also reporting separately on the total number of individuals enrolled in CHIP and children enrolled in Medicaid for those states that are reporting the relevant data for each month in the six-month period between September 2014 and February 2015.¹⁹ This data appears in Table 2.²⁰

- In the 46 states that reported relevant data for the month of February, more than 29.2 million individuals are enrolled in CHIP or are children enrolled in the Medicaid program.
- Based on the February 2015 data, children enrolled in the Medicaid program and individuals enrolled in CHIP make up approximately 54 percent of total Medicaid and CHIP program enrollment.

It is important to note that all states had already expanded coverage for children in Medicaid and/or CHIP prior to implementation of the Affordable Care Act.²¹

¹⁷ See the notes in Table 2 for state-specific caveats regarding the reported data. This figure includes children enrolled in the Medicaid program and the total enrollment for separate CHIP programs, which is comprised mostly of children. However, several states also cover pregnant women through CHIP. As a result, some adults are included in this figure. This figure was calculated for any state that reported data on Medicaid child enrollment through the performance indicator process, subject to CMS quality review of the data. States use the definition of "child" as included in the state's Medicaid or CHIP state plan in reporting performance indicator data to CMS. This definition varies from state to state. Individuals who are only eligible for limited benefits under the Medicaid and CHIP programs (e.g., emergency Medicaid, family planning-only coverage, limited benefit dual eligible individuals, and Medicaid 1115 demonstration populations with limited benefits) are excluded from this indicator in all reporting periods.

¹⁸ See the notes in table 2 for state-specific caveats.

¹⁹ In table 2, the reported February 2015 child enrollment figure appears to be lower than some of the figures reported in previous months. Prior months' total enrollment figures reported in the child enrollment table is from data that is reported more than a month after the close of the reporting period, and thus includes some children enrolled retroactively. The preliminary February 2015 data included in this report is collected in the month after the reporting period and includes very few (if any) children enrolled retroactively, and thus is lower. An updated February figure that includes more retroactively enrolled individuals will be included in the next report in this series.

²⁰ Children are included in the total number of individuals enrolled in Medicaid and CHIP in February 2015, as reported on page 2 and in Table 1. Total enrollment data for January 2014 through January 2015 is available on Medicaid.gov.

²¹ Four million more children were covered by Medicaid or CHIP in 2012, compared with 2008. Kenneth Finegold and Sophia Koontz, *ASPE Issue Brief: Children's Health Coverage on the 5th Anniversary of CHIPRA*, February 4, 2014, http://aspe.hhs.gov/health/reports/2014/CHIPRA_5thAnniversary/ib_CHIPRA5thanniversary.pdf

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Medicaid and CHIP February 2015 Application and Eligibility Data Highlights

	February 2015 Monthly in All States Reporting
<i>Applications</i>	
Applications for Financial Assistance Initially Received by State Medicaid and CHIP Agencies (note that more than one individual may be included on an application and some states have included renewals and account transfers from the FFM)	2,011,492 ²²
Applications for Financial Assistance Initially Received by State-Based Marketplaces (note that more than one individual may be included on an application)	886,373 ²³
<i>Eligibility Determinations</i>	
Individuals Determined Eligible for Medicaid and CHIP by State Agencies at Application (includes those newly eligible under the Affordable Care Act and those eligible under prior law)	2,564,058 ²⁴

During the month of February 2015, almost 2.9 million applications for coverage and financial assistance (including Medicaid and CHIP coverage, tax credits and subsidies) were submitted at the state level (including over 2 million received directly by state Medicaid and CHIP agencies and nearly 900,000 received by SBMs).²⁵ Table 3 includes a comparison of the total applications for financial assistance to state agencies (including applications for Medicaid, CHIP, and financial assistance in the Marketplace in SBM states) in February 2015 as compared to the prior month (January 2015). Note that these application numbers do not include applications received at the FFM and subsequently transferred to state Medicaid or CHIP agencies (see State-by-State Table notes for exceptions), including applications received by the FFM during the Marketplace open enrollment period that began on November 15th.²⁶

²² See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability, some states included some renewals, applications to SBMs, or transfers from the FFM in the data.

²³ See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability, some states reported renewals in the data and included applications received by their SBMs in their Medicaid and CHIP agency application data instead of reporting these applications separately. Note that California did not report application data from the SBM this month, unlike in prior months.

²⁴ See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability, some states reported some individuals determined eligible at renewal in the data. Tennessee only provided determination data on their CHIP program.

²⁵ The following states have included renewals in their February 2015 application data: Alaska, the District of Columbia, Nevada, New Jersey, New York, Ohio, Pennsylvania, and Virginia. South Dakota and Utah included transfers from the FFM in its February 2015 application data.

²⁶ See footnote 22.

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States reported making nearly 2.6 million eligibility determinations for Medicaid and CHIP in February 2015 for individuals applying for coverage. As described above and in prior reports, this figure includes all of state Medicaid and CHIP agencies' determinations for individuals eligible under prior law, as well as through coverage expansions under the Affordable Care Act; note that, due to limitations on the data some states are able to report, the number of determinations includes renewals in those states.²⁷ Additionally, the determination number does not represent unique individuals, as an individual may have more than one eligibility determination. It is important to keep in mind that differences in volume of administrative transfers and other types of one-time enrollment activities can affect month-to-month comparisons of eligibility data.²⁸

See the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on [Medicaid.gov](http://www.Medicaid.gov) for preliminary and updated data on applications and determinations for October 2013 through February 2015.

²⁷ The states that have included renewals in their February 2015 determination data are: District of Columbia, Iowa, Michigan, Nevada, New Jersey, Ohio, Pennsylvania, Rhode Island, South Dakota, Vermont and Virginia. Some of these renewals are conducted without the individual submitting a new application, using information already in the state's system that the individual is asked to verify.

²⁸ A number of states are employing a new tool for facilitating Medicaid enrollment to conduct an "administrative transfer" to Medicaid using income information from the Supplemental Nutritional Assistance Program (SNAP) or the CHIP program (for the parents of CHIP enrollees). The following states have implemented administrative transfers since this authority was made available: Arkansas, California, Illinois, New Jersey, Oregon, and West Virginia. California and Oregon conducted transfers in February 2015; however, California was not able to report how many individuals it transferred this month. As of the end of February, 726,592 individuals have been determined eligible for Medicaid or CHIP as a result of this transitional strategy in the six states that have implemented it. Michigan received approval to conduct administrative transfers but it has not yet implemented this targeted enrollment strategy.

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Data Limitations

CMS established a common set of definitions for consistency in reporting the Medicaid and CHIP performance indicators; these definitions appear in Appendix A. 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 notes in the State-by-State tables.

State-by-State Tables

Below are 3 tables with state-specific data. The first table contains data on the total number of people enrolled in state Medicaid and CHIP programs in February 2015. The second table contains data on children enrolled in Medicaid and CHIP. The third table contains data on Medicaid and CHIP applications and eligibility determinations for the month of February 2015. The description of each data element included in the table is available in Appendix A. Unless otherwise noted, the reporting period for all elements is February 1 - 28, 2015.

Future Reports

In future months, we will continue to expand the number of performance indicators that will be included in this report.

Table 1: Medicaid and CHIP: January and February 2015 Preliminary Monthly Enrollment

		Enrollment					
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, January 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (II)	% Change January to February 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to February 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to February 2015 (Columns (IV) and (II)) (VI)
Arizona	FFM	1,482,316	1,497,026	0.99%	1,201,770	295,256	24.57%
Arkansas	Partnership	824,529	831,643	0.86%	556,851	274,792	49.35%
California	SBM	12,170,138	12,189,535	0.16%	9,157,000	3,032,535	33.12%
Colorado	SBM	1,195,042	1,216,592	1.80%	783,420	433,172	55.29%
Connecticut	SBM	733,590	722,571	-1.50%	-	-	-
Delaware	Partnership	235,775	237,445	0.71%	223,324	14,121	6.32%
District of Columbia	SBM	256,383	256,751	0.14%	235,786	20,965	8.89%
Hawaii	SBM	314,503	319,078	1.45%	288,357	30,721	10.65%
Illinois	Partnership	3,101,946	3,124,202	0.72%	2,626,943	497,259	18.93%
Indiana	FFM	1,198,066	1,211,921	1.16%	1,120,674	91,247	8.14%
Iowa	Partnership	569,676	574,057	0.77%	493,515	80,542	16.32%
Kentucky	SBM	1,099,327	1,121,730	2.04%	606,805	514,925	84.86%
Maryland	SBM	1,152,248	1,176,350	2.09%	856,297	320,053	37.38%
Massachusetts	SBM	1,619,824	1,658,348	2.38%	1,296,359	361,989	27.92%
Michigan	Partnership	2,233,070	2,280,908	2.14%	1,912,009	368,899	19.29%
Minnesota	SBM	1,037,554	1,029,334	-0.79%	873,040	156,294	17.90%
Nevada	SBM **	541,334	556,008	2.71%	332,560	223,448	67.19%
New Hampshire	Partnership	169,747	173,286	2.08%	127,082	46,204	36.36%
New Jersey	FFM	1,667,815	1,692,754	1.50%	1,283,851	408,903	31.85%
New Mexico	SBM **	687,829	691,895	0.59%	457,678	234,217	51.18%
New York	SBM	6,247,440	6,376,105	2.06%	5,678,417	697,688	12.29%
North Dakota	FFM	86,220	87,956	2.01%	69,980	17,976	25.69%
Ohio	Plan Management	2,928,588	2,953,995	0.87%	2,341,481	612,514	26.16%
Oregon	SBM **	1,033,515	1,058,414	2.41%	626,356	432,058	68.98%
Pennsylvania	FFM	2,493,851	2,474,050	-0.79%	2,386,046	88,004	3.69%
Rhode Island	SBM	267,466	270,018	0.95%	190,833	79,185	41.49%
Vermont	SBM	179,514	181,072	0.87%	161,081	19,991	12.41%
Washington	SBM	1,645,727	1,674,671	1.76%	1,117,576	557,095	49.85%
West Virginia	Partnership	524,569	526,778	0.42%	354,544	172,234	48.58%
Subtotal for All States Expanding Medicaid		47,697,602	48,164,493	0.98%	37,359,635	10,082,287	26.99%
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		47,697,602	48,164,493	0.98%	37,359,635	10,082,287	26.99%
Subtotal for States Expanding Medicaid that Reported in January and February 2015		47,697,602	48,164,493	Difference January to February 2015 466,891			
Subtotal for States Expanding Medicaid that Reported in February 2015 and July-Sept. 2013			47,441,922		37,359,635	Difference July-Sept 2013 to February 2015 10,082,287	

Table 1: Medicaid and CHIP: January and February 2015 Preliminary Monthly Enrollment

^=Individuals in IN began to receive coverage under the expansion on February 1, 2015.

**= 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 January and February 2015 data.

Columns V and VI are calculated for only those states that reported data from both February 2015 and the July-Sept. 2013 period.

The subtotals for states reporting data from both February 2015 and the July-Sept. 2013 period exclude CT.

Arkansas	(I), (II)	Includes Private Option enrollees.
California	(I), (II)	Includes individuals transferred from the Low Income Health Program
California		section 1115 demonstration
California		Includes estimated retroactive enrollment.
California	(IV)	Includes approximately 650,000 individuals transferred from the Low Income
California		Health Program section 1115 demonstration.
District of Columbia	(I), (II), (IV)	Includes limited benefit dual eligible individuals and individuals enrolled in the locally funded DC Health Alliance.
Illinois	(IV)	Includes individuals who received retroactive coverage (unlike columns (I) and (II)).
Indiana	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
Iowa	(I)	Corrected.
Iowa	(I), (II)	Data are preliminary.
Massachusetts	(I), (II)	Does not include individuals receiving temporary transitional coverage.
Minnesota	(IV)	May include duplicates (unlike columns (I) and (II)).
Minnesota	(I)	90,000 individuals were transitioned into Minnesota's basic health plan in 1/1/15.
Nevada	(I), (II)	Data are preliminary.
New Jersey	(I), (II), (IV)	Includes individuals eligible at any point in the month.
New York	(I), (II)	Includes estimated retroactive enrollment.
North Dakota	(IV)	Data is from July 2013 only.
Oregon	(I)	Corrected.

Table 1: Medicaid and CHIP: January and February 2015 Preliminary Monthly Enrollment

		Enrollment					
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, January 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (II)	% Change January to February 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to February 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to February 2015 (Columns (IV) and (II)) (VI)
Alabama	FFM	843,250	827,523	-1.87%	799,176	28,347	3.55%
Alaska	FFM	121,867	121,074	-0.65%	122,334	-1,260	-1.03%
Florida	FFM	3,404,156	3,436,875	0.96%	3,104,996	331,879	10.69%
Georgia	FFM	1,724,033	1,721,203	-0.16%	1,535,090	186,113	12.12%
Idaho	SBM	273,329	274,555	0.45%	238,150	36,405	15.29%
Kansas	Plan Management	404,608	405,431	0.20%	378,160	27,271	7.21%
Louisiana	FFM	1,053,090	1,061,494	0.80%	1,019,787	41,707	4.09%
Maine	Plan Management	282,359	280,871	-0.53%	-	-	-
Mississippi	FFM/SBM-SHOP	711,782	711,984	0.03%	637,229	74,755	11.73%
Missouri	FFM	863,651	875,879	1.42%	846,084	29,795	3.52%
Montana	Plan Management	165,604	169,708	2.48%	148,974	20,734	13.92%
Nebraska	Plan Management	235,523	236,754	0.52%	244,600	-7,846	-3.21%
North Carolina	FFM	1,835,638	1,855,669	1.09%	1,595,952	259,717	16.27%
Oklahoma	FFM	808,807	811,378	0.32%	790,051	21,327	2.70%
South Carolina	FFM	983,275	979,282	-0.41%	889,744	89,538	10.06%
South Dakota	Plan Management	117,687	118,470	0.67%	115,501	2,969	2.57%
Tennessee	FFM	1,433,932	1,446,383	0.87%	1,244,516	201,867	16.22%
Texas	FFM	4,651,139	4,655,609	0.10%	4,441,605	214,004	4.82%
Utah	FFM/SBM-SHOP	293,359	296,278	1.00%	294,029	2,249	0.76%
Virginia	Plan Management	938,343	943,118	0.51%	935,434	7,684	0.82%
Wisconsin	FFM	1,042,496	1,053,400	1.05%	985,531	67,869	6.89%
Wyoming	FFM	68,577	68,285	-0.43%	67,518	767	1.14%
Subtotal for All States Not Expanding Medicaid		22,256,505	22,351,223	0.43%	20,434,461	1,635,891	8.01%
Subtotal for States Not Expanding Medicaid that Reported in January and February 2015		22,256,505	22,351,223	Difference January to February 2015 94,718			
Subtotal for States Not Expanding Medicaid that Reported in February 2015 and July-Sept. 2013			22,070,352		20,434,461	Difference July-Sept 2013 to February 2015 1,635,891	

Table 1: Medicaid and CHIP: January and February 2015 Preliminary Monthly Enrollment

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

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

Column III is calculated for only those states that reported both January and February 2015 data.

Columns V and VI are calculated for only those states that reported data from both February 2015 and the July-Sept. 2013 period.

The subtotals for states reporting data from both February 2015 and the July-Sept. 2013 period exclude ME.

Alabama	(I)	Corrected.
Alabama	(I), (II)	Includes estimated CHIP enrollment. Includes duplicates; however, updates to reporting methodology are ongoing and each successive month includes fewer duplicates.
Alabama	(IV)	Data is from September 2013 only.
Florida	(I), (II)	Does not include SSI recipients enrolled in Medicaid.
Idaho	(I), (IV)	Corrected.
Texas	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
Utah	(I), (II), (IV)	Includes service limited Medicare program beneficiaries (SLMBs).
Virginia	(I)	Corrected.
Wisconsin	(IV)	Does not include retroactive enrollment.

Table 1: Medicaid and CHIP: January and February 2015 Preliminary Monthly Enrollment

Total Enrollment						
All States	Total Medicaid and CHIP Enrollment, January 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (II)	% Change January to February 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to February 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to February 2015 (Columns (IV) and (II)) (VI)
Total Across All States	69,954,107	70,515,716	0.80%	57,794,096	11,718,178	20.28%
Total for States that Reported in January and February 2015	69,954,107	70,515,716	Difference January to February 2015 561,609			
Total for States that Reported in February 2015 and July-Sept. 2013		69,512,274		57,794,096	Difference July-Sept 2013 to February 2015 11,718,178	

Column III is calculated for only those states that reported both January and February 2015 data.

Columns V and VI are calculated for only those states that reported data from both February 2015 and the July-Sept. 2013 period.

Totals for states reporting data from both February 2015 and the July-Sept. 2013 period exclude CT and ME.

Table 2: Medicaid and CHIP: February 2015 Preliminary Monthly Medicaid and CHIP Child Enrollment

State	Enrollment							
	Medicaid and CHIP Child Enrollment						Total Medicaid and CHIP Enrollment	Medicaid and CHIP Child Enrollment as a % of Total Enrollment (Columns (VI) and (VII))
	September, 2014 (I)	October, 2014 (II)	November, 2014 (III)	December, 2014 (IV)	January, 2015 (V)	February, 2015 (Preliminary) (VI)	February, 2015 (Preliminary) (VII)	February, 2015 (Preliminary) (VIII)
Alabama	642,646	642,688	643,208	642,821	640,576	620,690	827,523	75.01%
Alaska	73,706	74,524	74,073	74,043	72,392	69,465	121,074	57.37%
Arizona	-	-	-	-	-	-	1,497,026	-
Arkansas	431,339	431,490	435,048	433,875	432,691	432,802	831,643	52.04%
California	-	-	-	-	-	-	12,189,535	-
Colorado	568,972	568,093	569,320	574,528	577,098	582,034	1,216,592	47.84%
Connecticut	319,564	320,127	316,325	312,639	300,570	293,091	722,571	40.56%
Delaware	101,688	102,304	103,176	104,105	104,358	104,574	237,445	44.04%
District of Columbia	-	-	-	-	-	-	256,751	-
Florida	2,281,978	2,279,731	2,269,590	2,277,678	2,292,762	2,311,929	3,436,875	67.27%
Georgia	1,250,161	1,244,512	1,245,101	1,245,982	1,240,722	1,209,599	1,721,203	70.28%
Hawaii	128,654	131,342	134,059	134,788	135,570	137,878	319,078	43.21%
Idaho	198,147	198,704	199,073	199,720	201,217	202,313	274,555	73.69%
Illinois	1,525,138	1,518,476	1,513,095	1,506,829	1,505,441	1,489,686	3,124,202	47.68%
Indiana	717,009	719,398	717,576	722,093	727,782	720,442	1,211,921	59.45%
Iowa	287,449	287,255	287,046	285,924	285,888	285,741	574,057	49.78%
Kansas	285,530	285,069	285,312	285,658	289,107	289,080	405,431	71.30%
Kentucky	455,689	460,921	457,422	466,254	475,918	481,963	1,121,730	42.97%
Louisiana	750,483	753,063	754,564	754,849	758,881	763,246	1,061,494	71.90%
Maine	122,451	122,143	120,993	120,778	121,079	118,225	280,871	42.09%
Maryland	603,330	570,909	574,748	584,867	591,294	591,118	1,176,350	50.25%
Massachusetts	593,800	597,093	608,120	624,329	640,733	645,362	1,658,348	38.92%
Michigan	1,004,973	984,534	1,001,051	988,640	985,787	976,873	2,280,908	42.83%
Minnesota	487,032	490,143	495,228	499,841	495,243	489,538	1,029,334	47.56%
Mississippi	479,218	482,092	484,959	488,502	491,042	487,279	711,984	68.44%
Missouri	520,779	533,716	540,063	541,683	545,594	554,306	875,879	63.29%
Montana	103,966	102,869	100,948	103,432	105,697	105,397	169,708	62.10%
Nebraska	161,008	160,854	159,470	159,779	160,586	158,162	236,754	66.80%
Nevada	283,081	285,364	276,856	272,289	265,496	264,873	556,008	47.64%
New Hampshire	91,944	91,942	91,731	92,472	92,289	92,189	173,286	53.20%
New Jersey	803,170	812,669	817,006	819,893	816,839	816,704	1,692,754	48.25%
New Mexico	-	-	-	-	-	-	691,895	-
New York	2,390,927	2,386,591	2,387,338	2,396,294	2,396,148	2,396,024	6,376,105	37.58%
North Carolina	1,209,053	1,199,317	1,235,442	1,251,499	1,256,336	1,260,808	1,855,669	67.94%
North Dakota	40,050	40,253	40,047	40,525	40,529	41,175	87,956	46.81%
Ohio	1,239,342	1,256,684	1,264,617	1,273,228	1,282,648	1,288,806	2,953,995	43.63%
Oklahoma	517,141	519,968	519,185	515,178	521,195	523,376	811,378	64.50%
Oregon	441,632	445,910	449,535	429,592	434,413	434,007	1,058,414	41.01%
Pennsylvania	1,287,139	1,289,774	1,284,541	1,281,125	1,294,067	1,301,118	2,474,050	52.59%
Rhode Island	105,240	105,304	108,783	107,292	110,321	109,564	270,018	40.58%
South Carolina	658,327	657,480	655,926	656,931	653,584	649,680	979,282	66.34%
South Dakota	78,708	78,903	79,054	79,616	80,097	80,703	118,470	68.12%
Tennessee	-	-	-	-	-	-	1,446,383	-
Texas	3,447,054	3,475,401	3,470,512	3,477,020	3,464,326	3,429,826	4,655,609	73.67%
Utah	204,271	210,620	208,306	209,252	211,592	207,957	296,278	70.19%
Vermont	66,295	-	-	69,312	69,497	69,391	181,072	38.32%
Virginia	634,163	640,670	651,943	651,609	656,917	644,602	943,118	68.35%
Washington	756,092	756,488	751,642	765,628	767,557	771,502	1,674,671	46.07%
West Virginia	209,920	208,552	207,646	203,283	207,363	205,933	526,778	39.09%
Wisconsin	491,362	491,325	488,148	487,464	488,890	491,576	1,053,400	46.67%
Wyoming	46,812	46,992	46,135	47,092	44,681	44,919	68,285	65.78%
Total For All States	29,096,433	29,062,257	29,123,961	29,260,231	29,332,813	29,245,526	70,515,716	53.73%
Number of States Reporting	46	45	45	46	46	46	51	46

Table 2: Medicaid and CHIP: February 2015 Preliminary Monthly Medicaid and CHIP Child Enrollment

For general notes on enrollment data, see Table 1: Medicaid and CHIP: January and February 2015 Preliminary Monthly Enrollment

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

Column VIII is calculated for only those states that reported both February 2015 child enrollment data and February 2015 Total Medicaid and CHIP enrollment data .

Alabama	(I) - (VII)	Includes duplicates; however, updates to reporting methodology are ongoing and each successive month includes fewer duplicates.
Alabama	(V), (VI)	Includes estimated CHIP enrollment.
Iowa	(I)-(VI)	Data are preliminary.
New York	(I)-(VII)	Includes estimated retroactive enrollment.

Table 3: Medicaid and CHIP: February 2015 Monthly Applications and Eligibility Determinations

States Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, February 2015 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, February 2015 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, February 2015 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, January 2015 (Preliminary) (IV)	% Change January to February 2015 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, February 2015 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, February 2015 (Preliminary) (VII)	Total New Determinations, February 2015 (Preliminary) (VIII)
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	21,432	N/A	21,432	26,031	-17.67%	12,946	485	13,431
California	SBM	88,233	-	88,233	66,471	32.74%	566,241	-	566,241
Colorado	SBM	25,816	17,543	43,359	36,316	19.39%	29,686	421	30,107
Connecticut	SBM	9,800	26,253	36,053	30,077	19.87%	22,668	†	22,668
Delaware	Partnership	4,605	N/A	4,605	4,549	1.23%	1,753	60	1,813
District of Columbia	SBM	9,066	3,173	12,239	8,657	41.38%	9,087	-	9,087
Hawaii	SBM	6,747	-	6,747	6,130	10.07%	5,225	254	5,479
Illinois	Partnership	121,652	N/A	121,652	110,888	9.71%	65,938	16,359	82,297
Indiana	FFM	123,027	N/A	123,027	99,664	23.44%	75,951	3,001	78,952
Iowa	Partnership	23,751	N/A	23,751	25,992	-8.62%	82,521	-	82,521
Kentucky	SBM	8,096	26,725	34,821	35,623	-2.25%	148,688	6,983	155,671
Maryland	SBM	14,355	84,120	98,475	67,319	46.28%	70,119	6,208	76,327
Massachusetts	SBM	35,760	49,352	85,112	93,887	-9.35%	-	-	-
Michigan	Partnership	94,126	N/A	94,126	94,044	0.09%	92,828	6,016	98,844
Minnesota	SBM	46,000	-	46,000	28,806	59.69%	28,491	-	28,491
Nevada	SBM **	20,389	-	20,389	18,733	8.84%	13,588	64	13,652
New Hampshire	Partnership	4,297	N/A	4,297	4,734	-9.23%	5,446	238	5,684
New Jersey	FFM	47,071	N/A	47,071	46,577	1.06%	16,537	4,720	21,257
New Mexico	SBM **	-	N/A	-	-	-	-	-	-
New York	SBM	-	526,076	526,076	544,163	-3.32%	133,729	9,779	143,508
North Dakota	FFM	-	N/A	-	-	-	6,579	174	6,753
Ohio	Plan Management	160,343	N/A	160,343	158,211	1.35%	161,863	-	161,863
Oregon	SBM **	225	18,765	18,990	31,127	-38.99%	33,665	-	33,665
Pennsylvania	FFM	286,218	N/A	286,218	407,809	-29.82%	107,041	5,647	112,688
Rhode Island	SBM	4,667	-	4,667	4,759	-1.93%	33,181	3,294	36,475
Vermont	SBM	1,954	7,533	9,487	7,177	32.19%	3,507	2,731	6,238
Washington	SBM	21,130	126,833	147,963	147,548	0.28%	-	-	-
West Virginia	Partnership	28,212	N/A	28,212	27,019	4.42%	15,587	769	16,356
Subtotal for All States Expanding Medicaid		1,206,972	886,373	2,093,345	2,132,311	-1.83%	1,742,865	67,203	1,810,068
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		1,206,972	886,373	2,093,345	2,132,311	-1.83%	1,742,865	67,203	1,810,068
Subtotal for States Expanding Medicaid that Reported in January to February 2015				2,093,345	2,132,311	Difference January to February 2015 -38,966			

^=Individuals in IN began to receive coverage under the expansion on February 1, 2015.

**= 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 reported January and February 2015 Applications data (subtotals exclude AZ, ND, NM).

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

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

Table 3: Medicaid and CHIP: February 2015 Monthly Applications and Eligibility Determinations

Arkansas	(VI)	Includes CHIP.
California	(I)	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	(II)	Includes applications to SBM that did not request financial assistance.
California	(I), (II)	Includes updates to reporting methodology to remove duplicates.
California	(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		Excludes applications to the SBM reported in January, as CA did not report SBM applications in column (II).
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.
Colorado	(I)	State Medicaid agency hosts SBM portal; number includes all applications for insurance affordability programs.
Connecticut	(I)	Data may include some duplication of applications between Medicaid and CHIP.
Connecticut	(II)	Data may contain duplicate applications, and may include some change in circumstance updates that are not new applications for coverage.
Connecticut	(III), (IV)	Data may include some duplication of applications between Medicaid and CHIP.
Connecticut	(VI)	Count is of households, not individuals.
District of Columbia	(III)	The count of applications received by the Medicaid agency and the state based marketplace may overlap; total may contain some duplicates.
District of Columbia	(VI)	Includes all determinations (e.g., renewals); includes CHIP.
District of Columbia	(III), (IV)	Includes renewals.
Hawaii	(I)	Number includes all applications for insurance affordability programs.
Iowa	(I), (III), (IV)	Data are preliminary.
Iowa	(IV)	Corrected.
Iowa	(VI)	Includes MAGI populations only.
Iowa	(VI), (VII), (VIII)	Data are preliminary.
Iowa	(VI),(VII)	Includes renewals.
Maryland	(II)	Includes State Medicaid Agency data and SBM data from 2/1 - 2/28.
Maryland	(II), (III), (IV)	Includes all applications not only those requesting financial assistance.
Maryland	(VI)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 2/1 - 2/28.
Maryland	(VII)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 2/1 - 2/28.
Maryland	(VIII)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 2/1 - 2/28.
Massachusetts	(II), (III), (IV)	Includes all applications not only those requesting financial assistance.
Michigan	(VI)	Includes renewals.
Michigan	(VII)	Includes renewals.
Minnesota	(VI)	Includes CHIP.
Nevada	(I), (III), (IV)	Includes renewals.
Nevada	(VI)	Count is of households, not individuals. Includes renewals.
New Hampshire	(VI)	Data is derived by considering prior coverage.
New Jersey	(I), (III), (IV)	Includes applications received at county welfare agencies. Includes renewals.
New Jersey	(VI), (VII), (VIII)	Does not include all eligibility determinations; county welfare agencies determinations are not included in this data.
New York	(III), (VI)	Includes renewals.

Table 3: Medicaid and CHIP: February 2015 Monthly Applications and Eligibility Determinations

New York	(VI)	Data are preliminary.
New York	(VII)	Data are preliminary.
New York	(VIII)	Data are preliminary.
Ohio	(I), (III), (IV)	Includes renewals. May include some applications only for other benefits, not for Medicaid and CHIP.
Ohio	(VI)	Includes CHIP.
Ohio	(VI), (VIII)	Includes renewals
Oregon	(VI)	Count is of households, not individuals; includes CHIP.
Oregon		Includes 8 individuals determined eligible via Targeted Enrollment Strategy.
Oregon		Includes MAGI populations only.
Oregon	(VI), (VIII)	Includes MAGI populations only.
Pennsylvania	(I), (III), (IV)	Includes renewals.
Pennsylvania	(VI), (VIII)	Includes renewals.
Rhode Island	(VI)	Includes only determinations through new MAGI system. Includes renewals.
Rhode Island	(VII)	Includes only determinations through new MAGI system. Includes renewals.
Vermont	(VI)	Includes renewals.

Table 3: Medicaid and CHIP: February 2015 Monthly Applications and Eligibility Determinations

States Not Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, February 2015 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, February 2015 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, February 2015 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, January 2015 (Preliminary) (IV)	% Change January to February 2015 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, February 2015 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, February 2015 (Preliminary) (VII)	Total New Determinations, February 2015 (Preliminary) (VIII)
Alabama	FFM	6,573	N/A	6,573	7,469	-12.00%	14,856	-	14,856
Alaska	FFM	3,485	N/A	3,485	4,158	-16.19%	5,725	-	5,725
Florida	FFM	289,146	N/A	289,146	338,282	-14.53%	182,346	17,147	199,493
Georgia	FFM	98,879	N/A	98,879	86,252	14.64%	42,515	597	43,112
Idaho	SBM	16,365	N/A	16,365	15,080	8.52%	5,849	702	6,551
Kansas	Plan Management	9,844	N/A	9,844	8,461	16.35%	6,345	789	7,134
Louisiana	FFM	25,167	N/A	25,167	27,985	-10.07%	24,649	1,099	25,748
Maine	Plan Management	742	N/A	742	540	37.41%	8,128	270	8,398
Mississippi	FFM/SBM-SHOP	22,556	N/A	22,556	20,685	9.05%	12,756	398	13,154
Missouri	FFM	23,886	N/A	23,886	28,570	-16.39%	17,880	-	17,880
Montana	Plan Management	2,924	N/A	2,924	3,246	-9.92%	2,403	360	2,763
Nebraska	Plan Management	7,143	N/A	7,143	7,705	-7.29%	7,748	977	8,725
North Carolina	FFM	66,795	N/A	66,795	68,986	-3.18%	127,299	5,474	132,773
Oklahoma	FFM	28,900	N/A	28,900	31,221	-7.43%	39,987	6,166	46,153
South Carolina	FFM	24,768	N/A	24,768	26,483	-6.48%	-	-	-
South Dakota	Plan Management	2,523	N/A	2,523	2,895	-12.85%	1,536	-	1,536
Tennessee	FFM	1,830	N/A	1,830	1,848	-0.97%	-	1,078	1,078
Texas	FFM	99,108	N/A	99,108	110,040	-9.93%	93,985	16,513	110,498
Utah	FFM/SBM-SHOP	21,761	N/A	21,761	19,911	9.29%	53,320	-	53,320
Virginia	Plan Management	24,749	N/A	24,749	30,559	-19.01%	24,009	2,297	26,306
Wisconsin	FFM	27,376	N/A	27,376	30,190	-9.32%	25,037	2,656	27,693
Wyoming	FFM	-	N/A	-	898	-	873	221	1,094
Subtotal for All States Not Expanding Medicaid		804,520	N/A	804,520	871,464	-7.60%	697,246	56,744	753,990
Subtotal for States Not Expanding Medicaid that Reported in January and February 2015				804,520	870,566	Difference January to February 2015 -66,046			
Total Across All States		2,011,492	886,373	2,897,865	3,003,775	-3.50%	2,440,111	123,947	2,564,058
Total for States that Reported in January to February 2015				2,897,865	3,002,877	Difference January to February 2015 -105,012			

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

Column V is calculated for only those states that reported January and February 2015 Applications data (totals exclude AZ, ND, NM, WY).

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

Percent change figures in the subtotal of column V exclude TN, which only reports CHIP data.

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

Table 3: Medicaid and CHIP: February 2015 Monthly Applications and Eligibility Determinations

Alabama	(I), (III), (IV)	Does not include applications from the joint eligibility and enrollment system, which includes CHIP data and some Medicaid data.
Alabama	(VIII)	Does not include determinations made by the joint eligibility and enrollment system, which includes CHIP data and some Medicaid data.
Alaska	(I), (III), (IV)	Includes renewals converting to MAGI methodology.
Alaska	(VI), (VIII)	Non-MAGI counts are of households, not individuals. MAGI determinations include CHIP.
Kansas	(I), (III), (IV)	Includes MAGI populations only.
Kansas	(VI)	Includes MAGI populations only.
Mississippi	(IV)	Corrected.
South Dakota	(I), (III), (IV)	Includes account transfers from the FFM.
South Dakota	(VI)	Includes all determinations (e.g., renewals); includes CHIP.
Tennessee	(I), (III), (IV)	Data are from CHIP agency only. Medicaid reporting capability in development.
Tennessee	(V)	Excluded because data is only from CHIP agency.
Utah	(I), (III), (IV)	Includes applications for non-health coverage programs.
Utah	(I), (III)	Includes account transfers from the FFM.
Virginia	(I), (III), (IV)	Includes renewals.
Virginia	(VI)	Includes renewals.
Virginia	(VII)	Includes renewals.
Wisconsin	(VI), (VII)	Count is of unique individuals receiving determinations, not unique determinations.

APPENDIX A: Description of Data Elements in Tables

Table 1: Medicaid and CHIP: January and February 2015 Preliminary Monthly Enrollment

Total Medicaid and CHIP Enrollment, January 2015 (Preliminary) (I)

Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (II)

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. This indicator is a point-in-time count of total program enrollment, and is not solely a count of those newly enrolled during the reporting period. This number includes 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). 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. CHIP children subject to a waiting period or premium lock-out period are considered eligible but not enrolled and are not included. The February 2015 data was submitted in March and is considered preliminary.²⁹ The January 2015 data in this table was submitted in February and is also preliminary. January data that was updated in March (which may include more individuals with retroactive eligibility) is posted separately under the Eligibility Data tab on Medicaid.gov. Other reporting on Medicaid and CHIP enrollment by states and researchers often may include some beneficiaries excluded in this data (because comprehensive coverage is not provided), or otherwise use a different methodology.

Percent Change January to February 2015 (III)

The percentage change in **Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (II)** as compared to **Total Medicaid and CHIP Enrollment, January 2015 (Preliminary) (II)** is calculated for states that provided data for both periods. In cases where there is a negative percentage change, this may be due to a number of factors. Changes in enrollment levels are driven by the number of newly enrolled individuals as well as by the number of individuals whose coverage has terminated.

Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)

The average number of individuals enrolled in Medicaid and CHIP for each month during the July-September 2013 period using an average of enrollment numbers submitted by the states for each month in this period. Not all states submitted three months of data; the average is calculated using any months of baseline data that were provided. The unit of measurement is individuals enrolled as of the last day of the reporting period (month). This baseline data includes more retroactive enrollments than the February 2015 data, which makes change between the baseline data and the January preliminary data look smaller than it would be if

²⁹ In Medicaid, individuals are potentially eligible for retroactive eligibility to cover incurred health care costs for up to 90 days prior to the date of application. Under the Performance Indicator process, states initially submit their monthly enrollment data just a week after the month closes, and then update their data one month later. Therefore, the Performance Indicator enrollment counts will always be slightly understated, as they will not include all individuals granted retroactive eligibility.

retroactive enrollments were excluded from the data for the July-September 2013 period.³⁰ Such exclusions were not possible.

Net Change, July-Sept. 2013 to February 2015 (V)

The net change in **Total Medicaid and CHIP Enrollment, February 2015 (preliminary) (II)** as compared to **Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)** is calculated for states that provided data for both periods and represents the difference in enrollment between these two periods. A negative net change may be due to a number of factors, including the preliminary nature of the monthly data (as described above) as compared to the finalized nature of the baseline data. Changes in enrollment levels are driven by the number of newly enrolled individuals as well as by the number of individuals whose coverage has terminated.

Percentage Change, July-Sept. 2013 to February 2015 (VI)

The percentage change in **Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (II)**, compared to **Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)**, is calculated for states that provided data for both periods. A negative percentage change may be due to a number of factors, including the preliminary nature of the monthly data (as described above) as compared to the finalized nature of the baseline data. Changes in enrollment levels are driven by the number of newly enrolled individuals as well as by the number of individuals whose coverage has terminated.

Note: Updated enrollment data for January 2014 through January 2015 is available on the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on Medicaid.gov. This data is updated more than 30 days after the close of the reporting period, to account for retroactive Medicaid eligibility and other updates to the preliminary data provided soon after the close of the reporting period, which forms the basis for this report.

Table 2: Medicaid and CHIP: February 2015 Preliminary Monthly Medicaid CHIP Child Enrollment

Medicaid and CHIP Child Enrollment, September 2014 - January, 2015 ((I)-(IV))

As of the last day of the calendar month—

- The total unduplicated number of individuals enrolled in CHIP (i.e. funded under title XXI of the Social Security Act); plus
- The total unduplicated number of individuals enrolled in Medicaid (i.e. funded under title XIX of the Social Security Act) who are children.

States use the definition of "child" as included in the state's Medicaid or CHIP state plan. This definition may vary from state to state. A few states cover pregnant women through CHIP, which means this figure may include some adults.³¹ These figures may have been updated by

³⁰ See footnote 29.

³¹ The states which provide complete coverage to pregnant women through CHIP are New Jersey, Rhode Island, and Colorado. In addition, the following states provide certain services to pregnant women through CHIP: Arkansas, California, Louisiana, Massachusetts, Michigan, Minnesota, Nebraska, Oklahoma, Oregon, Rhode Island, Tennessee, Texas, Washington, and Wisconsin. Benefits offered vary by state.

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states more than 30 days after the close to the reporting period to include enrollees with retroactive coverage and other updates.

Medicaid and CHIP Child Enrollment, February, 2015 (Preliminary) (V)

As of the last day of the calendar month—

- The total unduplicated number of individuals enrolled in CHIP (i.e. funded under title XXI of the Social Security Act); plus
- The total unduplicated number of individuals enrolled in Medicaid (i.e. funded under title XIX of the Social Security Act) who are children.

States use the definition of "child" as included in the state's Medicaid or CHIP state plan. This definition may vary from state to state. A few states cover pregnant women through CHIP, which means this figure may include some adults.³² The February 2015 data was submitted in February and is considered preliminary.³³

Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (VII)

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. This indicator is a point-in-time count of total program enrollment, and is not solely a count of those newly enrolled during the reporting period. This number includes 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). 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. CHIP children subject to a waiting period or premium lock-out period are considered eligible but not enrolled and are not included. The January data was submitted in February 2015 and is considered preliminary.³⁴ This data is the same as the data reported in column (II) in Table 1: Medicaid and CHIP: January and February 2015 Preliminary Monthly Enrollment.

Medicaid and CHIP Child Enrollment as a % of Total Enrollment (VIII)

Medicaid and CHIP Child Enrollment, February 2015 (Preliminary) (V) as a percentage of Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (VIII).

³² See footnote 31.

³³ See footnote 29.

³⁴ See footnote 29.

Table 3: Medicaid and CHIP: February 2015 Monthly Applications and Eligibility Determinations

Application Data Elements

New Applications Submitted to Medicaid and CHIP Agencies, February 2015 (Preliminary) (I)

Number of applications received by the Medicaid agency, a separate CHIP agency (if one exists in the state), or both during the reporting period. Includes applications received online, via mail, in person or phone. Does not include applications submitted to a State-Based Marketplace (SBM) or the Federally-Facilitated Marketplace (FFM) (the SBM number is reported in column IV).³⁵ It should be noted that data reflected in this performance indicator are not a count of individuals, as more than one person may be included on a single application. As states are transitioning to new systems, they may not be able to report applications received across all aspects of their programs or systems. See the state-specific notes in the table for further information about state limitations in this area.³⁶ The February 2015 data was submitted in March and is considered preliminary.³⁷

Applications for Financial Assistance Submitted to the State-Based Marketplace, February 2015 (Preliminary) (II)

This element is the number of 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. The February 2015 data was submitted in March and is considered preliminary.³⁸

Total Applications for Financial Assistance Submitted at the State Level, February 2015 (Preliminary) (III)

Total Applications for Financial Assistance Submitted at the State Level, January 2015 (Preliminary) (IV)

For states with an SBM, the data reflects the total of **Applications Submitted to Medicaid and CHIP Agencies, February 2015 (Preliminary)** plus **Applications for Financial Assistance Submitted to the State-Based Marketplace, February 2015 (Preliminary)**. For FFM states, the data reflects **Applications Submitted to Medicaid and CHIP Agencies, February 2015 (Preliminary)**. For SBM states, the data includes all applications for financial assistance; individuals on these applications will be determined eligible for Medicaid, CHIP or Advanced Premium Tax Credits and Cost-Sharing Reductions, or determined ineligible for financial assistance. The February 2015 data was submitted in March and is considered preliminary. The January 2015 data in this table was submitted in February 2015 and is also preliminary. January data that was updated in March (which may include additional individuals who applied in

³⁵ As described in the state-specific notes in the tables, some states included account transfers from the FFM in the total count of applications received by Medicaid and CHIP agencies.

³⁶ As described in the state-specific notes in the tables, some states included renewals in the total count of applications received by Medicaid and CHIP agencies.

³⁷ See footnote 29.

³⁸ See footnote 29.

January, but who were not captured in the preliminary data) is posted separately under the Eligibility Data tab on Medicaid.gov.

Percentage Change January to February 2015 (V)

The percentage change in **Total Applications for Financial Assistance Submitted at the State Level, February 2015 (Preliminary) (III)** as compared to **Total Preliminary Applications Submitted at the State Level, January 2015 (Preliminary) (IV)** is calculated for states that provided data for both periods.

Eligibility Determination Data Elements

Individuals Determined Eligible for Medicaid at Application, February 2015 (VI)

Total number of individuals determined eligible for Medicaid (under title XIX of the Social Security Act) during the reporting period based on applications for coverage submitted to any state agency (Medicaid, CHIP or the SBM) or based on an administrative determination authorized under a targeted enrollment strategy approved by CMS.³⁹ The unit of measurement is a count of individuals (as compared to the application numbers, which may include multiple people in one application). This number includes all determinations on applications made within the reporting period—some of those determinations are on applications reported in the **Applications** data, and some are on applications received prior to the reporting period. This does not include determinations made at a periodic redetermination or because of a change in circumstance for a current beneficiary.⁴⁰ The unit of measurement is people with determinations completed; this is not an unduplicated number of unique individuals because an individual may have more than one determination within the reporting period., individuals are first determined based on MAGI, and if needed, may request a subsequent determination based on non-MAGI factors. A list of which eligibility groups are MAGI and which are non-MAGI is available on [Medicaid.gov](http://www.Medicaid.gov).

As states are transitioning to their new systems, they may not be able to report determinations being made across all aspects of their programs or systems (i.e., the legacy systems they are winding down and the new eligibility systems they are implementing). See the notes in the table for further information about state limitations in this area.

In states receiving account transfers from the FFM in January where the FFM makes an eligibility assessment (and the state then completes the Medicaid determination), this number includes 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, and instead is accepting the

³⁹ Information on targeted enrollment strategies and the states approved for these strategies is available here: <http://www.medicaid.gov/medicaid-chip-program-information/program-information/targeted-enrollment-strategies/targeted-enrollment-strategies.html>.

⁴⁰ As described in the state-specific notes in the tables, some states, due to data limitations, could not provide data that met our specifications. Notes are provided in cases where the state included renewals in this data element.

account transfer and proceeding with enrollment steps. Individuals determined eligible by the FFM are included in the Total Enrolled indicators. For more information about the assessment and determination models in FFM states see Medicaid.gov.

Individuals Determined Eligible for CHIP at Application, February 2015 (VII)

Total number of individuals determined eligible for CHIP (under title XXI of the Social Security Act) during the reporting period that follows the applicant submitting an application for coverage to any state agency (Medicaid, CHIP, or the SBM). This number includes all determinations at application made within the reporting period—some of those determinations are on applications reported in the **Applications** data, and some are on applications received prior to the reporting period. As states are transitioning to their new systems, they may not be able to report determinations being made across all aspects of their programs or systems (i.e., the legacy systems they are winding down and the new eligibility systems they are implementing). See the footnotes in the table for further information about state limitations in this area. The unit of measurement is people with determinations completed; this is not an unduplicated number of unique individuals.

In states receiving account transfers from the FFM in February where the FFM makes an eligibility assessment (and the state then completes the CHIP determination), this number includes 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 a CHIP eligibility determination, the report does not include the FFM determinations, because the Medicaid/CHIP agency is not performing a determination, and instead is accepting the account transfer and proceeding with enrollment steps. Individuals determined eligible by the FFM are included in the Total Enrolled indicators. For more information about the assessment and determination models in FFM states see Medicaid.gov.

Total New Determinations, February 2015 (VIII)

The total of **Individuals Determined Eligible for Medicaid at Application** plus **Individuals Determined Eligible for CHIP at Application**.

A Note about Federally-Facilitated Marketplace Types: For the purposes of the report, we refer to State Partnership Marketplaces (Partnership), States performing Plan Management functions (Plan Management), and the State-Based Small Business Health Options Program (SB-SHOP) as Federally-Facilitated Marketplaces (FFMs). The state-by-state tables contain information on the specific marketplace type for each state.