

## **Medicaid & CHIP: June 2015 Monthly Applications, Eligibility Determinations and Enrollment Report**

August 31, 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 June 2015. This report measures eligibility and enrollment activity for the entire Medicaid and CHIP programs in all states<sup>1</sup>, 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 established by the Affordable Care Act.<sup>2</sup> 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.<sup>3</sup>

As with previous reports, this month’s report focuses on those indicators that relate to the Medicaid and CHIP application and enrollment process:<sup>4</sup>

- 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.

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<sup>1</sup> For purposes of this report, the term “states” include the 50 states and the District of Columbia.

<sup>2</sup> As of June 2015, twenty-nine states 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. 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.

<sup>3</sup> 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.

<sup>4</sup> 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 during the second Marketplace open enrollment period is included in the Health Insurance Marketplace 2015 Open Enrollment Period: March Enrollment Report (March 10, 2015).

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

#### Medicaid and CHIP June 2015 Enrollment Data Highlights

<b>Total Individuals Enrolled in Medicaid and CHIP in June 2015 in All States Reporting June Data (includes all individuals enrolled in the program on the last day of the reporting period).<sup>5</sup></b>	71,929,750 <sup>6</sup>
<b>Additional enrollment since October 2013 when the initial Marketplace open enrollment period began, among the 49 states reporting both June 2015 enrollment data and data from July-September of 2013</b>	13.1 million

- Nearly 72 million individuals were enrolled in Medicaid and CHIP in June 2015.<sup>7</sup> 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.
- 292,112 additional people were enrolled in June 2015 as compared to May 2015 in the 51 states that reported comparable June and May 2015 data.<sup>8</sup>
- Looking at the additional enrollment since October 2013 when the initial Marketplace open enrollment period began, among the 49 states reporting both June 2015 enrollment data and data from July-September of 2013, nearly 13.1 million additional individuals are enrolled in

<sup>5</sup> 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.

<sup>6</sup> 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 June 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.

<sup>7</sup> See footnote 5 and 6.

<sup>8</sup> See the notes in Table 1 for state-specific caveats regarding the reported data. Multiple states conducted large volumes of renewals and redeterminations at the end of June 2015 which likely resulted in declines in their enrollments in June 2015, as compared to May 2015.

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Medicaid and CHIP as of June 2015, almost a 22.7 percent increase over the average monthly enrollment for July through September of 2013.<sup>9</sup> (Connecticut and Maine are not included in this count.)<sup>10</sup>

- Among states that had implemented the Medicaid expansion and were covering newly eligible adults in June 2015, Medicaid and CHIP enrollment rose by approximately 29.7 percent compared to the July-September 2013 baseline period, while states that have not, to date, expanded Medicaid reported an increase of over 9.8 percent over the same period.<sup>11</sup>
- 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.<sup>12</sup> 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.<sup>13</sup>

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<sup>9</sup> The net change in enrollment is based on data from the 49 states reporting both June 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 June of nearly 70.9 million individuals, and July-September 2013 average enrollment of almost 57.8 million. For June 2015, we are reporting growth of 13,094,471 compared to July-September 2013. This figure exceeds the 12,820,582 in net enrollment growth that was included in the *Medicaid and CHIP: May 2015 Applications, Eligibility Determinations, and Enrollment Report* by approximately 274,000. This difference does not match the 292,112 increase reported above for the May to June 2015 period because the 292,112 figure is based on 51 states, while the 274,000 figure is based on only 49 states. 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 May and June 2015 data included in this report is preliminary (see footnote 6), the difference reported here between June 2015 and July-September 2013 period is likely understated.

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

<sup>11</sup> Percentage calculations are based only on states reporting in both June 2015 and the July through September 2013 baseline period. See footnote 9 for additional information. Among expansion states, the increases in the number of individuals enrolled vary based on the size of the coverage expansions that occurred. States that previously offered comprehensive coverage to many adults with incomes under 133 percent of the FPL will likely see smaller increases 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 the premium tax credit and cost-sharing reduction portion of the advance payments; this change will reduce the overall Medicaid enrollment in those states. Enrollment changes may also be impacted by other state specific policy and operational issues related to applications and renewals.

<sup>12</sup> 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](http://www.cms.gov/mmrr/Downloads/MMRR2013_003_04_a02.pdf)).

<sup>13</sup> 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

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It is important to note that, as with previous reports, multiple factors contribute to the change in enrollment between June 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 June and whose application will be fully processed after June 30<sup>th</sup>; 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 June 2015, applied for Medicaid in a later month, and qualify for retroactive Medicaid coverage in June 2015.<sup>14</sup> 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://Medicaid.gov).<sup>15</sup>

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Social Security Act. For more information about this “early option,” please see [Medicaid and CHIP: March 2014 Monthly Applications, Eligibility Determinations, and Enrollment Report \(May 1, 2014\)](#).

<sup>14</sup> See footnote 6 for additional information on retroactive eligibility.

<sup>15</sup> 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**

<b>Total Medicaid child and CHIP enrollment in the 46 states reporting in June 2015<sup>16</sup></b>	29,564,893 <sup>17</sup>
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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 June 2015.<sup>18</sup> This data appears in Table 2.<sup>19</sup>

- In the 46 states that reported relevant data for the month of June, approximately 29.6 million individuals are enrolled in CHIP or are children enrolled in the Medicaid program.
- In the 46 states that reported both June 2015 total Medicaid child and CHIP enrollment and total Medicaid and CHIP enrollment data, children enrolled in the Medicaid program and individuals enrolled in CHIP make up almost 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, although that trend has continued since that time.<sup>20</sup>

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<sup>16</sup> 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.

<sup>17</sup> See the notes in table 2 for state-specific caveats.

<sup>18</sup> In table 2, the reported June 2015 child enrollment figure appears to be lower than the prior month's total enrollment figure because the prior month's total child enrollment figure includes data that is reported more than a month after the close of the reporting period, and thus includes some children enrolled retroactively. The preliminary June 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 June figure that includes more retroactively enrolled individuals will be included in the next report in this series.

<sup>19</sup> Children are included in the total number of individuals enrolled in Medicaid and CHIP in June 2015, as reported on page 2 and in Table 1. Total enrollment data for January 2014 through May 2015 is available on Medicaid.gov.

<sup>20</sup> 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 5<sup>th</sup> Anniversary of CHIPRA*, February 4, 2014, [http://aspe.hhs.gov/health/reports/2014/CHIPRA\\_5thAnniversary/ib\\_CHIPRA5thanniversary.pdf](http://aspe.hhs.gov/health/reports/2014/CHIPRA_5thAnniversary/ib_CHIPRA5thanniversary.pdf)

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#### Medicaid and CHIP June 2015 Application and Eligibility Data Highlights

	June 2015 Monthly in All States Reporting
<b><i>Applications</i></b>	
<b>Applications for Financial Assistance Initially Received by State Medicaid and CHIP Agencies</b> (note that more than one individual may be included on an application and some states have included renewals and account transfers from the FFM)	1,645,204 <sup>21</sup>
<b>Applications for Financial Assistance Initially Received by State-Based Marketplaces</b> (note that more than one individual may be included on an application)	525,649 <sup>22</sup>
<b><i>Eligibility Determinations</i></b>	
<b>Individuals Determined Eligible for Medicaid and CHIP by State Agencies at Application</b> (includes those newly eligible under the Affordable Care Act and those eligible under prior law)	2,127,060 <sup>23</sup>

During the month of June 2015, nearly 2.2 million applications for coverage and financial assistance (including Medicaid and CHIP coverage, tax credits and subsidies) were submitted at the state level (including almost 1.65 million received directly by state Medicaid and CHIP agencies and nearly 530,000 received by SBMs).<sup>24</sup> 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 June 2015 as compared to the prior month (May 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.<sup>25</sup>

States reported making over 2.1 million eligibility determinations for Medicaid and CHIP in June 2015 for individuals applying for coverage. As described above and in prior reports, this figure includes all of

<sup>21</sup> 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. Note that Nevada did not report application data this month, unlike in prior months.

<sup>22</sup> 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 SBM application data this month.

<sup>23</sup> 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.

<sup>24</sup> The following states have included renewals in their June 2015 application data: Alaska, the District of Columbia, Nevada, New York, Ohio, Pennsylvania, and Virginia. South Dakota and Utah included transfers from the FFM in its June 2015 application data.

<sup>25</sup> See footnote 21.

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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.<sup>26</sup> 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.<sup>27</sup>

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

#### 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 June 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 June 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 June 1 - 30, 2015.

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<sup>26</sup> The states that have included renewals in their June 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.

<sup>27</sup> 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. No states reported conducting administrative transfers in June 2015. As of the end of April 2015, 726,597 individuals have been determined eligible for Medicaid or CHIP as a result of this transitional strategy in the six states that have implemented it and reported appropriate data. Michigan received approval to conduct administrative transfers but it has not implemented this targeted enrollment strategy.

Table 1: Medicaid and CHIP: May and June 2015 Preliminary Monthly Enrollment

		Enrollment					
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, May 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, June 2015 (Preliminary) (II)	% Change May to June 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to June 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to June 2015 (Columns (IV) and (II)) (VI)
Arizona	FFM	1,557,193	1,589,457	2.07%	1,201,770	387,687	32.26%
Arkansas	Partnership	832,510	820,769	-1.41%	556,851	263,918	47.39%
California	SBM	12,549,540	12,627,234	0.62%	9,157,000	3,470,234	37.90%
Colorado	SBM	1,253,040	1,261,062	0.64%	783,420	477,642	60.97%
Connecticut	SBM	741,517	760,758	2.59%	-	-	-
Delaware	Partnership	239,426	240,302	0.37%	223,324	16,978	7.60%
District of Columbia	SBM	255,268	255,352	0.03%	235,786	19,566	8.30%
Hawaii	SBM	326,579	328,197	0.50%	288,357	39,840	13.82%
Illinois	Partnership	3,156,171	3,131,846	-0.77%	2,626,943	504,903	19.22%
Indiana	FFM	1,304,480	1,315,406	0.84%	1,120,674	194,732	17.38%
Iowa	Partnership	593,885	597,300	0.58%	493,515	103,785	21.03%
Kentucky	SBM	1,126,049	1,117,207	-0.79%	606,805	510,402	84.11%
Maryland	SBM	1,113,338	1,101,355	-1.08%	856,297	245,058	28.62%
Massachusetts	SBM	1,583,830	1,625,669	2.64%	1,296,359	329,310	25.40%
Michigan	Partnership	2,308,799	2,308,258	-0.02%	1,912,009	396,249	20.72%
Minnesota	SBM	1,015,896	1,008,993	-0.68%	873,040	135,953	15.57%
Nevada	SBM **	559,165	563,484	0.77%	332,560	230,924	69.44%
New Hampshire	Partnership	176,108	181,243	2.92%	127,082	54,161	42.62%
New Jersey	FFM	1,756,019	1,757,606	0.09%	1,283,851	473,755	36.90%
New Mexico	SBM **	705,730	711,541	0.82%	457,678	253,863	55.47%
New York	SBM	6,434,993	6,441,902	0.11%	5,678,417	763,485	13.45%
North Dakota	FFM	89,001	88,820	-0.20%	69,980	18,840	26.92%
Ohio	Plan Management	2,902,768	2,988,691	2.96%	2,341,481	647,210	27.64%
Oregon	SBM **	1,098,508	1,051,967	-4.24%	626,356	425,611	67.95%
Pennsylvania	FFM	2,609,873	2,622,491	0.48%	2,386,046	236,445	9.91%
Rhode Island	SBM	270,607	273,901	1.22%	190,833	83,068	43.53%
Vermont	SBM	186,413	184,289	-1.14%	161,081	23,208	14.41%
Washington	SBM	1,710,356	1,717,320	0.41%	1,117,576	599,744	53.66%
West Virginia	Partnership	533,191	538,601	1.01%	354,544	184,057	51.91%
<b>Subtotal for All States Expanding Medicaid</b>		<b>48,990,253</b>	<b>49,211,021</b>	<b>0.45%</b>	<b>37,359,635</b>	<b>11,090,628</b>	<b>29.69%</b>
<b>Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month</b>		<b>48,990,253</b>	<b>49,211,021</b>	<b>0.45%</b>	<b>37,359,635</b>	<b>11,090,628</b>	<b>29.69%</b>
<b>Subtotal for States Expanding Medicaid that Reported in May and June 2015</b>		<b>48,990,253</b>	<b>49,211,021</b>	<b>Difference May to June 2015 220,768</b>			
<b>Subtotal for States Expanding Medicaid that Reported in June 2015 and July-Sept. 2013</b>			<b>48,450,263</b>		<b>37,359,635</b>	<b>Difference July-Sept 2013 to June 2015 11,090,628</b>	

Table 1: Medicaid and CHIP: May and June 2015 Preliminary Monthly Enrollment

\*\*= The state's Marketplace uses the FFM's information technology platform for eligibility and enrollment functions (the FFM makes either assessments or determinations of Medicaid and CHIP eligibility).

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

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

Column III is calculated for only those states that reported both May and June 2015 data.

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

The subtotals for states reporting data from both June 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), (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)).
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), (II), (IV)	Includes emergency Medicaid population.

Table 1: Medicaid and CHIP: May and June 2015 Preliminary Monthly Enrollment

		Enrollment					
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, May 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, June 2015 (Preliminary) (II)	% Change May to June 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to June 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to June 2015 (Columns (IV) and (II)) (VI)
Alabama	FFM	853,432	870,026	1.94%	799,176	70,850	8.87%
Alaska	FFM	121,780	122,521	0.61%	122,334	187	0.15%
Florida	FFM	3,496,934	3,523,843	0.77%	3,104,996	418,847	13.49%
Georgia	FFM	1,746,310	1,752,620	0.36%	1,535,090	217,530	14.17%
Idaho	SBM	277,272	276,608	-0.24%	238,150	38,458	16.15%
Kansas	Plan Management	407,900	405,663	-0.55%	378,160	27,503	7.27%
Louisiana	FFM	1,069,712	1,072,982	0.31%	1,019,787	53,195	5.22%
Maine	Plan Management	281,443	280,425	-0.36%	-	-	-
Mississippi	FFM/SBM-SHOP	709,340	706,538	-0.40%	637,229	69,309	10.88%
Missouri	FFM	918,825	926,289	0.81%	846,084	80,205	9.48%
Montana*	Plan Management	174,313	175,195	0.51%	148,974	26,221	17.60%
Nebraska	Plan Management	233,112	232,359	-0.32%	244,600	-12,241	-5.00%
North Carolina	FFM	1,942,767	1,933,831	-0.46%	1,595,952	337,879	21.17%
Oklahoma	FFM	819,194	815,810	-0.41%	790,051	25,759	3.26%
South Carolina	FFM	997,996	1,009,201	1.12%	889,744	119,457	13.43%
South Dakota	Plan Management	118,581	118,429	-0.13%	115,501	2,928	2.54%
Tennessee	FFM	1,480,430	1,493,723	0.90%	1,244,516	249,207	20.02%
Texas	FFM	4,618,527	4,626,194	0.17%	4,441,605	184,589	4.16%
Utah	FFM/SBM-SHOP	303,062	302,805	-0.08%	294,029	8,776	2.98%
Virginia	Plan Management	956,296	960,591	0.45%	935,434	25,157	2.69%
Wisconsin	FFM	1,052,820	1,047,631	-0.49%	985,531	62,100	6.30%
Wyoming	FFM	67,339	65,445	-2.81%	67,518	-2,073	-3.07%
<b>Subtotal for All States Not Expanding Medicaid</b>		<b>22,647,385</b>	<b>22,718,729</b>	<b>0.32%</b>	<b>20,434,461</b>	<b>2,003,843</b>	<b>9.81%</b>
<b>Subtotal for States Not Expanding Medicaid that Reported in May and June 2015</b>		<b>22,647,385</b>	<b>22,718,729</b>	<b>Difference May to June 2015 71,344</b>			
<b>Subtotal for States Not Expanding Medicaid that Reported in June 2015 and July-Sept. 2013</b>			<b>22,438,304</b>		<b>20,434,461</b>	<b>Difference July-Sept 2013 to June 2015 2,003,843</b>	

Table 1: Medicaid and CHIP: May and June 2015 Preliminary Monthly Enrollment

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

\* = Montana has indicated its intention to expand its Medicaid coverage. CMS is committed to supporting state flexibility and is currently working with the state on solutions that ensure affordability and access.

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

Column III is calculated for only those states that reported both May and June 2015 data.

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

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

Alabama	(I)	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.
Utah	(I), (II), (IV)	Includes service limited Medicare program beneficiaries (SLMBs).
Wisconsin	(IV)	Does not include retroactive enrollment.

Table 1: Medicaid and CHIP: May and June 2015 Preliminary Monthly Enrollment

Total Enrollment						
All States	Total Medicaid and CHIP Enrollment, May 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, June 2015 (Preliminary) (II)	% Change May to June 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to June 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to June 2015 (Columns (IV) and (II)) (VI)
<b>Total Across All States</b>	<b>71,637,638</b>	<b>71,929,750</b>	<b>0.41%</b>	<b>57,794,096</b>	<b>13,094,471</b>	<b>22.66%</b>
<b>Total for States that Reported in May and June 2015</b>	<b>71,637,638</b>	<b>71,929,750</b>	<b>Difference May to June 2015 292,112</b>			
<b>Total for States that Reported in June 2015 and July-Sept. 2013</b>		<b>70,888,567</b>		<b>57,794,096</b>	<b>Difference July-Sept 2013 to June 2015 13,094,471</b>	

Column III is calculated for only those states that reported both May and June 2015 data.

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

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

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

Enrollment								
State	Medicaid and CHIP Child Enrollment						Total Medicaid and CHIP Enrollment	Medicaid and CHIP Child Enrollment as a % of Total Enrollment (Columns (VI) and (VII))
	January, 2015 (I)	February, 2015 (II)	March, 2015 (III)	April, 2015 (IV)	May, 2015 (V)	June, 2015 (Preliminary) (VI)	June, 2015 (Preliminary) (VII)	June, 2015 (Preliminary) (VIII)
Alabama	640,576	626,391	627,541	630,017	631,798	616,036	870,026	70.81%
Alaska	72,392	72,329	72,638	72,298	72,331	69,585	122,521	56.79%
Arizona	-	-	-	-	-	-	1,589,457	-
Arkansas	432,691	432,802	441,568	444,030	441,058	430,402	820,769	52.44%
California	-	-	-	-	-	-	12,627,234	-
Colorado	577,098	584,026	589,305	592,815	594,537	594,447	1,261,062	47.14%
Connecticut	300,570	293,091	292,114	292,133	292,595	299,633	760,758	39.39%
Delaware	104,358	104,574	104,840	104,750	104,731	105,062	240,302	43.72%
District of Columbia	-	-	-	-	-	-	255,352	-
Florida	2,292,762	2,311,929	2,338,392	2,342,175	2,354,600	2,371,021	3,523,843	67.29%
Georgia	1,240,722	1,238,476	1,242,692	1,250,826	1,254,338	1,230,569	1,752,620	70.21%
Hawaii	136,483	138,174	139,457	141,777	142,611	142,401	328,197	43.39%
Idaho	201,217	203,014	204,478	205,387	205,139	204,143	276,608	73.80%
Illinois	1,505,441	1,511,955	1,774,978	1,501,299	1,493,267	1,474,767	3,131,846	47.09%
Indiana	727,782	735,405	738,869	741,669	731,899	731,390	1,315,406	55.60%
Iowa	285,888	285,741	292,087	294,648	293,987	293,483	597,300	49.13%
Kansas	287,022	289,033	289,406	290,264	289,711	288,634	405,663	71.15%
Kentucky	475,918	481,963	489,540	526,640	523,448	522,615	1,117,207	46.78%
Louisiana	758,881	763,246	767,865	769,815	772,086	774,235	1,072,982	72.16%
Maine	121,079	121,200	120,018	119,937	118,423	118,002	280,425	42.08%
Maryland	591,294	595,044	597,050	590,422	585,190	575,622	1,101,355	52.26%
Massachusetts	640,733	654,166	664,714	631,992	645,950	650,469	1,625,669	40.01%
Michigan	985,787	993,979	998,680	1,000,191	1,065,075	991,034	2,308,258	42.93%
Minnesota	495,243	499,833	502,125	499,149	495,694	482,683	1,008,993	47.84%
Mississippi	491,042	491,630	490,647	489,732	486,793	481,406	706,538	68.14%
Missouri	545,594	554,306	564,692	575,284	583,292	587,924	926,289	63.47%
Montana	105,697	107,233	108,306	108,859	108,970	108,316	175,195	61.83%
Nebraska	160,586	161,502	162,558	160,943	160,852	155,427	232,359	66.89%
Nevada	265,496	264,873	265,454	265,986	269,470	273,306	563,484	48.50%
New Hampshire	92,289	92,189	91,948	91,954	91,091	93,609	181,243	51.65%
New Jersey	816,839	816,704	816,948	838,825	840,880	829,495	1,757,606	47.19%
New Mexico	-	-	-	-	-	-	711,541	-
New York	2,396,148	2,411,958	2,420,589	2,427,097	2,428,638	2,419,401	6,441,902	37.56%
North Carolina	1,256,336	1,260,808	1,259,624	1,250,493	1,346,752	1,337,220	1,933,831	69.15%
North Dakota	40,529	41,175	41,907	42,380	41,883	41,713	88,820	46.96%
Ohio	1,282,648	1,288,806	1,280,816	1,253,213	1,256,335	1,281,927	2,988,691	42.89%
Oklahoma	521,195	523,376	522,032	526,589	528,288	526,924	815,810	64.59%
Oregon	434,413	442,648	452,577	455,230	454,927	430,786	1,051,967	40.95%
Pennsylvania	1,294,067	1,301,118	1,311,813	1,317,336	1,319,845	1,319,289	2,622,491	50.31%
Rhode Island	110,321	110,688	106,718	106,719	107,884	108,508	273,901	39.62%
South Carolina	653,584	649,680	648,493	648,174	655,668	661,041	1,009,201	65.50%
South Dakota	80,097	80,703	80,804	80,708	80,604	80,571	118,429	68.03%
Tennessee	-	-	-	-	-	-	1,493,723	-
Texas	3,464,326	3,466,406	3,463,214	3,437,788	3,421,574	3,392,514	4,626,194	73.33%
Utah	211,592	214,122	216,239	217,605	217,362	213,266	302,805	70.43%
Vermont	69,497	69,878	73,273	70,505	70,242	67,479	184,289	36.62%
Virginia	656,917	657,736	656,729	661,351	660,211	649,908	960,591	67.66%
Washington	767,557	781,775	785,817	794,558	797,206	796,070	1,717,320	46.36%
West Virginia	207,363	205,933	206,477	208,333	207,582	209,002	538,601	38.80%
Wisconsin	488,890	491,576	495,029	493,138	492,809	492,565	1,047,631	47.02%
Wyoming	44,681	44,919	45,424	45,704	42,793	40,993	65,445	62.64%
<b>Total For All States</b>	<b>29,331,641</b>	<b>29,468,113</b>	<b>29,856,485</b>	<b>29,610,738</b>	<b>29,780,419</b>	<b>29,564,893</b>	<b>71,929,750</b>	<b>53.51%</b>
Number of States Reporting	46	46	46	46	46	46	51	46

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

For general notes on enrollment data, see Table 1: Medicaid and CHIP: May and June 2015 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 NJ, RI, CO, AR, CA, LA, MA, MI, MN, NE, OK, OR, TN, WA, WI.

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

Alabama	(I) - (V)	Includes duplicates; however, updates to reporting methodology are ongoing and each successive month includes fewer duplicates.
Alabama	(I)	Includes estimated CHIP enrollment.
Iowa	(I)-(VI)	Data are preliminary.
New York	(I)-(VII)	Includes estimated retroactive enrollment.
Rhode Island	(I) - (III)	May not include all child enrollees (unlike column (IV)-(VI)).

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

States Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, June 2015 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, June 2015 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, June 2015 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, May 2015 (Preliminary) (IV)	% Change May to June 2015 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, June 2015 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, June 2015 (Preliminary) (VII)	Total New Determinations, June 2015 (Preliminary) (VIII)
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	17,382	N/A	17,382	15,706	10.67%	-	-	-
California	SBM	62,389	-	62,389	53,709	16.16%	262,989	-	262,989
Colorado	SBM	16,982	2,250	19,232	18,278	5.22%	17,053	218	17,271
Connecticut	SBM	11,738	8,229	19,967	21,571	-7.44%	22,667	488	23,155
Delaware	Partnership	1,527	N/A	1,527	1,346	13.45%	1,500	71	1,571
District of Columbia	SBM	13,086	3,165	16,251	10,661	52.43%	14,104	-	14,104
Hawaii	SBM	4,034	-	4,034	3,871	4.21%	2,838	109	2,947
Illinois	Partnership	72,720	N/A	72,720	71,334	1.94%	49,026	15,071	64,097
Indiana	FFM	83,557	N/A	83,557	95,762	-12.75%	41,241	2,337	43,578
Iowa	Partnership	22,060	N/A	22,060	21,816	1.12%	3,068	-	3,068
Kentucky	SBM	8,927	15,795	24,722	27,161	-8.98%	26,665	1,085	27,750
Maryland	SBM	8,155	44,709	52,864	42,549	24.24%	69,649	9,932	79,581
Massachusetts	SBM	21,114	39,671	60,785	57,303	6.08%	-	-	-
Michigan	Partnership	70,817	N/A	70,817	62,482	13.34%	72,923	3,125	76,048
Minnesota	SBM	6,459	13,649	20,108	20,409	-1.47%	14,785	52	14,837
Nevada	SBM **	19,411	-	19,411	16,849	15.21%	14,489	54	14,543
New Hampshire	Partnership	6,880	N/A	6,880	3,275	110.08%	4,125	460	4,585
New Jersey	FFM	35,721	N/A	35,721	25,202	41.74%	11,939	4,661	16,600
New Mexico	SBM **	-	N/A	-	-	-	-	-	-
New York	SBM	-	346,880	346,880	437,001	-20.62%	90,401	27,677	118,078
North Dakota	FFM	-	N/A	-	-	-	6,501	212	6,713
Ohio	Plan Management	153,796	N/A	153,796	143,215	7.39%	361,499	-	361,499
Oregon	SBM **	32,817	-	32,817	20,521	59.92%	59,896	-	59,896
Pennsylvania	FFM	155,645	N/A	155,645	176,326	-11.73%	55,062	7,523	62,585
Rhode Island	SBM	2,135	-	2,135	2,548	-16.21%	27,618	2,661	30,279
Vermont	SBM	2,828	1,509	4,337	4,961	-12.58%	1,987	18	2,005
Washington	SBM	19,565	49,792	69,357	71,212	-2.60%	39,440	664	40,104
West Virginia	Partnership	20,261	N/A	20,261	18,362	10.34%	11,595	1,918	13,513
<b>Subtotal for All States Expanding Medicaid</b>		<b>870,006</b>	<b>525,649</b>	<b>1,395,655</b>	<b>1,443,430</b>	<b>-3.31%</b>	<b>1,283,060</b>	<b>78,336</b>	<b>1,361,396</b>
<b>Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month</b>		<b>870,006</b>	<b>525,649</b>	<b>1,395,655</b>	<b>1,443,430</b>	<b>-3.31%</b>	<b>1,283,060</b>	<b>78,336</b>	<b>1,361,396</b>
<b>Subtotal for States Expanding Medicaid that Reported in May to June 2015</b>				<b>1,395,655</b>	<b>1,443,430</b>	<b>Difference May to June 2015 -47,775</b>			

\*\*= 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 May and June 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: June 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	(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	(VI)	Includes MAGI populations only.
Iowa	(VI), (VII), (VIII)	Data are incomplete; does not include all determinations.
Iowa	(VI),(VII)	Includes renewals.
Maryland	(II)	Includes State Medicaid Agency data and SBM data from 6/1 - 6/30.
Maryland	(VI)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 6/1 - 6/30.
Maryland	(VII)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 6/1 - 6/30.
Maryland	(VIII)	Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 6/1 - 6/30.
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 Jersey	(I), (III), (IV)	Includes applications received at county welfare agencies.
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.
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.

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

Ohio	(VI), (VIII)	Includes renewals
Oregon	(VI)	Count is of households, not individuals; includes CHIP.
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: June 2015 Monthly Applications and Eligibility Determinations

States Not Expanding Medicaid	Marketplace Type	Applications				Determinations			
		New Applications Submitted to Medicaid and CHIP Agencies, June 2015 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, June 2015 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, June 2015 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, May 2015 (Preliminary) (IV)	% Change May to June 2015 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, June 2015 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, June 2015 (Preliminary) (VII)	Total New Determinations, June 2015 (Preliminary) (VIII)
Alabama	FFM	16,415	N/A	16,415	15,210	7.92%	25,046	2,997	28,043
Alaska	FFM	3,093	N/A	3,093	3,168	-2.37%	6,886	-	6,886
Florida	FFM	322,066	N/A	322,066	264,209	21.90%	170,636	12,149	182,785
Georgia	FFM	90,600	N/A	90,600	81,183	11.60%	43,314	1,401	44,715
Idaho	SBM	8,033	-	8,033	7,592	5.81%	5,776	349	6,125
Kansas	Plan Management	6,329	N/A	6,329	9,609	-34.13%	5,279	578	5,857
Louisiana	FFM	22,577	N/A	22,577	21,294	6.03%	25,560	1,167	26,727
Maine	Plan Management	1,595	N/A	1,595	1,303	22.41%	10,007	256	10,263
Mississippi	FFM/SBM-SHOP	16,187	N/A	16,187	14,219	13.84%	10,309	351	10,660
Missouri	FFM	19,953	N/A	19,953	18,429	8.27%	11,124	-	11,124
Montana*	Plan Management	2,988	N/A	2,988	2,619	14.09%	2,500	221	2,721
Nebraska	Plan Management	6,514	N/A	6,514	6,147	5.97%	7,328	748	8,076
North Carolina	FFM	26,440	N/A	26,440	25,693	2.91%	143,960	18,438	162,398
Oklahoma	FFM	33,598	N/A	33,598	27,829	20.73%	28,161	3,800	31,961
South Carolina	FFM	23,864	N/A	23,864	19,574	21.92%	9,637	165	9,802
South Dakota	Plan Management	2,516	N/A	2,516	2,467	1.99%	1,566	-	1,566
Tennessee	FFM	1,328	N/A	1,328	1,290	2.95%	-	921	921
Texas	FFM	104,952	N/A	104,952	99,825	5.14%	108,158	18,598	126,756
Utah	FFM/SBM-SHOP	18,941	N/A	18,941	17,191	10.18%	48,336	-	48,336
Virginia	Plan Management	23,077	N/A	23,077	23,113	-0.16%	17,413	873	18,286
Wisconsin	FFM	24,132	N/A	24,132	21,139	14.16%	18,767	1,853	20,620
Wyoming	FFM	-	N/A	-	3,036	-	838	198	1,036
<b>Subtotal for All States Not Expanding Medicaid</b>		<b>775,198</b>	<b>-</b>	<b>775,198</b>	<b>686,139</b>	<b>13.50%</b>	<b>700,601</b>	<b>65,063</b>	<b>765,664</b>
<b>Subtotal for States Not Expanding Medicaid that Reported in May and June 2015</b>				<b>775,198</b>	<b>683,103</b>	<b>Difference May to June 2015 92,095</b>			
<b>Total Across All States</b>		<b>1,645,204</b>	<b>525,649</b>	<b>2,170,853</b>	<b>2,129,569</b>	<b>2.08%</b>	<b>1,983,661</b>	<b>143,399</b>	<b>2,127,060</b>
<b>Total for States that Reported in May to June 2015</b>				<b>2,170,853</b>	<b>2,126,533</b>	<b>Difference May to June 2015 44,320</b>			

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

\* = Montana has indicated its intention to expand its Medicaid coverage. CMS is committed to supporting state flexibility and is currently working with the state on solutions that ensure affordability and access.

Column V is calculated for only those states that reported May and June 2015 Applications data (subtotals exclude WY; 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: June 2015 Monthly Applications and Eligibility Determinations

Alabama	(I), (III)	Reporting capacity in joint eligibility and enrollment system increased in June. Includes some applications from joint eligibility and enrollment system.
Alabama	(VIII)	Reporting capacity in joint eligibility and enrollment system increased in June.
Alaska	(I), (III), (IV)	Includes renewals converting to MAGI methodology.
Alaska	(VI), (VIII)	MAGI determinations include CHIP.
Kansas	(I), (III), (IV)	Includes MAGI populations only.
Kansas	(VI)	Includes MAGI populations only.
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),(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: May and June 2015 Preliminary Monthly Enrollment**

**Total Medicaid and CHIP Enrollment, May 2015 (Preliminary) (I)**

**Total Medicaid and CHIP Enrollment, June 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 June 2015 data was submitted in July and is considered preliminary.<sup>28</sup> The May 2015 data in this table was submitted in June and is also preliminary. May data that was updated in July (which may include more individuals with retroactive eligibility) is posted separately 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 May to June 2015 (III)**

The percentage change in **Total Medicaid and CHIP Enrollment, June 2015 (Preliminary) (II)** as compared to **Total Medicaid and CHIP Enrollment, May 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 June 2015 data, which makes change between the baseline data and the May preliminary data look smaller than it would be if retroactive enrollments were excluded from the data for the July-September 2013 period.<sup>29</sup> Such exclusions were not possible.

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<sup>28</sup> 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.

<sup>29</sup> See footnote 28.

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#### **Net Change, July-Sept. 2013 to June 2015 (V)**

The net change in **Total Medicaid and CHIP Enrollment, June 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 June 2015 (VI)**

The percentage change in **Total Medicaid and CHIP Enrollment, June 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 May 2015 is available on the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on [Medicaid.gov](http://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: June 2015 Preliminary Monthly Medicaid Child and CHIP Enrollment**

##### **Medicaid Child and CHIP Enrollment, December 2014 - May, 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.<sup>30</sup> These figures may have been updated by states more than 30 days after the close to the reporting period to include enrollees with retroactive coverage and other updates.

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<sup>30</sup> 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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#### **Medicaid Child and CHIP Enrollment, June 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.<sup>31</sup> The June 2015 data was submitted in July and is considered preliminary.<sup>32</sup>

#### **Total Medicaid and CHIP Enrollment, June 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 May data was submitted in June 2015 and is considered preliminary.<sup>33</sup> This data is the same as the data reported in column (II) in Table 1: Medicaid and CHIP: May and June 2015 Preliminary Monthly Enrollment.

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

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

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<sup>31</sup> See footnote 30.

<sup>32</sup> See footnote 28.

<sup>33</sup> See footnote 28.

**Table 3: Medicaid and CHIP: June 2015 Monthly Applications and Eligibility Determinations**

**Application Data Elements**

**New Applications Submitted to Medicaid and CHIP Agencies, June 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).<sup>34</sup> 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.<sup>35</sup> The June 2015 data was submitted in July and is considered preliminary.<sup>36</sup>

**Applications for Financial Assistance Submitted to the State-Based Marketplace, June 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 June 2015 data was submitted in July and is considered preliminary.<sup>37</sup>

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

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

For states with an SBM, the data reflects the total of **Applications Submitted to Medicaid and CHIP Agencies, June 2015 (Preliminary)** plus **Applications for Financial Assistance Submitted to the State-Based Marketplace, June 2015 (Preliminary)**. For FFM states, the data reflects **Applications Submitted to Medicaid and CHIP Agencies, June 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 June 2015 data was submitted in July and is considered preliminary. The May 2015 data in this table was submitted in June 2015 and is also preliminary. May data that was updated in July (which may include additional individuals who applied in May, but who were not captured in the preliminary data) is posted separately on Medicaid.gov.

**Percentage Change May to June 2015 (V)**

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<sup>34</sup> 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.

<sup>35</sup> 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.

<sup>36</sup> See footnote 28.

<sup>37</sup> See footnote 28.

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

### Eligibility Determination Data Elements

#### **Individuals Determined Eligible for Medicaid at Application, June 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.<sup>38</sup> 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.<sup>39</sup> 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 June 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 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](http://www.Medicaid.gov).

#### **Individuals Determined Eligible for CHIP at Application, June 2015 (VII)**

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<sup>38</sup> 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>.

<sup>39</sup> 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.

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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 June 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](http://Medicaid.gov).

#### **Total New Determinations, June 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.