
Medicaid & CHIP: May 2014 Monthly Applications, Eligibility Determinations and Enrollment Report

July 11, 2014

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 May 2014. The data included in this report were submitted to CMS from state Medicaid and CHIP agencies as part of the Medicaid and CHIP Performance Indicator process.

Through the Medicaid and CHIP Performance Indicator process, states report on a common set of indicators designed to provide information to support program management and policy-making. State Medicaid and CHIP programs submit data to CMS on a range of indicators related to application, eligibility and enrollment processes. States are still transitioning to the standardized data definitions described in Appendix A, which limits the conclusions that can be drawn from the data.

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

- 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.

This month, for the first time, we are providing some additional information about the number of children enrolled in the Medicaid and CHIP programs. Also included are highlights from states on successful enrollment strategies.

As with each monthly report, given that states are reporting monthly data to CMS soon after the close of the month, the May 2014 data presented in this report should be considered preliminary. We have also published updated data for April 2014 applications, eligibility determinations, and enrollment [on Medicaid.gov](#), which includes a more complete data set than the preliminary April data reported last month.

Medicaid and CHIP are longstanding programs that serve many populations in addition to those that might be newly eligible for Medicaid under the new low-income adult group established by the Affordable Care Act. Therefore, this report, which measures eligibility and enrollment activity for the entire Medicaid and CHIP programs, necessarily captures data beyond the newly eligible individuals in states that have expanded Medicaid coverage. In addition, this report includes data from all states, not

APPENDIX A: Description of Data Elements in Tables

Table 1: Medicaid and CHIP: April and May Preliminary Monthly Enrollment

Total Medicaid and CHIP Enrollment, April 2014 (Preliminary) (I)

Total Medicaid and CHIP Enrollment, May 2014 (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). Medicaid Section 1115 demonstration populations 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 2014 data was submitted in June and is considered preliminary.²⁶ The April 2014 data in this table was submitted in May and is also preliminary. April data that was updated in June (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 April to May (III)

The percentage change in **Total Medicaid and CHIP Enrollment, May 2014 (Preliminary) (II)** as compared to **Total Medicaid and CHIP Enrollment, April 2014 (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.

Pre-Open Enrollment Monthly Average 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 include more retroactive enrollments than the May data, which makes change between the July through September period and the May preliminary data look smaller than it would be if

²⁶ In Medicaid, individuals are potentially eligible for retroactive eligibility to cover incurred health care costs dating back 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.

