
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

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

just those that have adopted the new low-income adult group.¹ Changes in eligibility and enrollment processes ushered in by the Affordable Care Act, which are discussed below, are in effect in all states and are likely to promote coverage among previously eligible but uninsured adults and children. The data elements are explained more fully in Appendix A.

Medicaid and CHIP May 2014 Enrollment Data Highlights²

Total Individuals Enrolled in Medicaid and CHIP in May in All States Reporting May Data (includes all individuals enrolled in the program on the last day of the reporting period)³	65,922,768 ⁴
---	-------------------------

- Across the 49 states (including the District of Columbia) that provided enrollment data for May 2014, states reported that approximately 66 million individuals were enrolled in Medicaid and CHIP.⁵ 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. (Maine and North Dakota are not included in this count.)
- 920,628 additional people were enrolled in May as compared to April in the 48 states that reported both May and April data. (Connecticut, Maine, and North Dakota are not included in this count.)⁶

¹ As of May 2014, twenty-six states and the District of Columbia have expanded Medicaid coverage under the Affordable Care Act to adults under age 65 with incomes up to 133 percent of the Federal Poverty Level in 2014. Michigan implemented the expansion on April 1, and New Hampshire began enrolling under its expansion on July 1, 2014, with coverage effective August 1. The number of states implementing the Medicaid expansion is subject to change; there is no deadline for when a state must decide whether to expand and states are continuing to consider their options. The number of people impacted by the Medicaid expansion varies; some of these states had previously 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 non-disabled adults at all.

² These enrollment data may differ from other published state and national enrollment figures because they only include 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 1115 demonstration populations with limited benefits) are excluded from this indicator in all reporting periods. See Appendix A for more information on this methodology.

³ See the notes in Table 1 for state-specific caveats regarding the reported data. Maine and North Dakota did not submit enrollment data for May. 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. 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.

⁴ This number is not directly comparable to prior months' numbers because the states reporting differ. For example, Connecticut reported enrollment data for May but did not report data for April.

⁵ See footnote 3.

⁶ See the notes in Table 1 for state-specific caveats regarding the reported data. Maine and North Dakota did not submit enrollment data for May. Connecticut, Maine, and North Dakota did not submit enrollment data for April.

Medicaid & CHIP

May 2014 Monthly Applications, Eligibility Determinations, and Enrollment Report

- Looking at the additional enrollment since October when the Marketplace open enrollment began, among the 48 states reporting both May 2014 enrollment data and data from July-September of 2013, approximately 6.7 million additional individuals are enrolled in Medicaid and CHIP, an 11.4 percent increase over the average monthly enrollment for July through September of 2013.⁷ (Connecticut, Maine, and North Dakota are not included in this count.)⁸
- Among states that adopted the Medicaid expansion and whose expansions were in effect in May 2014, Medicaid and CHIP enrollment rose by over 17 percent compared to the July-September 2013 baseline period, while states that have not, to date, expanded Medicaid reported an increase of 3 percent over the same period.⁹
- Ten of the 24 states whose Medicaid expansions were in effect in May 2014 and that reported relevant data for both May and the pre-open enrollment baseline period experienced an enrollment increase of 30 percent or more.¹⁰ Michigan's Medicaid expansion went into effect on April 1, 2014, and total enrollment grew more than 10 percent between March and May 2014.¹¹

⁷ The 48 states reporting both May 2014 enrollment data and data from July-September 2013 report total enrollment in May of over 65 million individuals. See the notes in table 1 for state-specific caveats regarding the reported data, which is calculated including only the states that provided data for both periods.

⁸ Maine and North Dakota did not submit enrollment data for May. Connecticut, Maine, and North Dakota did not submit enrollment data for the July-September 2013 baseline period. Last month we reported an enrollment increase of 6 million over the pre-ACA baseline. This month we are reporting a 920,628 increase from April to May. The difference between last month's reported change in enrollment and this month's change in enrollment is related to differences in the state's submitting complete data in both months and adjustments that several states made to their data this month to remove populations eligible for limited benefits from their reported enrollment figures and correct reporting errors.

⁹ Percentage calculations are based only on states reporting in both May 2014 and the July through September, 2013 baseline period. New Hampshire is not included in these percentages because its expansion was not implemented as of May 2014. The 2.98 percent increase that we are reporting for non-expansion states is slightly lower than this 3.3 percent increase we reported last month, comparing April to the pre-open enrollment period. This difference is partly attributable to adjustments that several states made to their data to remove populations eligible for limited benefits from their reported enrollment figures and to correct other reporting errors. Please note that, between April and May, enrollment has increased in non-expansion states.

¹⁰ Medicaid expansion states that reported data with a greater than 30 percent increase in enrollment are: Arkansas, Colorado, Kentucky, Maryland, Nevada, Oregon, Rhode Island, Vermont, Washington, and West Virginia (8 of these 10 states also run State-based Marketplaces). Among expansion states, the percent change in the number of individuals enrolled varies based on the size of the coverage expansion that is occurring in 2014. States that previously offered comprehensive coverage to many adults with incomes under 133 percent of the federal poverty level will likely see a smaller 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 federal poverty level prior to 2014, those individuals are no longer eligible for or enrolled in Medicaid and instead may be eligible to purchase coverage in a for qualified health plan 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 (however, please note that this enrollment change may not be reflected in this enrollment data, as it excludes the limited benefit programs that some states used to serve individuals with incomes above 133 percent of the federal poverty level). New Hampshire is not included because its expansion is not implemented as of May 2014.

¹¹ Michigan reported 1,942,437 individuals enrolled in Medicaid and CHIP in March 2014.

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

- 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.¹² 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 Section 1115 demonstration building upon that authority.¹³

It is important to note that, as with previous reports, multiple factors contribute to the change in enrollment between May 2014 and the July-September 2013 baseline period, including but not limited to changes attributable to the Affordable Care Act. The May 2014 enrollment numbers understate total Medicaid and CHIP enrollment because not all states are reporting and the data are preliminary. In addition, Medicaid and CHIP eligible individuals who applied in May and whose application will be fully processed after May 30th will be enrolled effective back to at least the date of application or the first of the month; those enrollments are not reflected in these preliminary data.

Child Enrollment

Total Medicaid and CHIP child enrollment in the 38 states reporting in May, 2014¹⁴	26,364,955
--	------------

This month, for the first time, we are reporting separately on the total number of children enrolled in Medicaid and CHIP for those states that are reporting the relevant data for each month in 2014.¹⁵ This data appears in Table 2.

¹² 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).

¹³ Connecticut, the District of Columbia, Minnesota utilized state plan authority, while California, Colorado, New Jersey, and Washington provided the coverage through Section 1115 demonstration authority. For more information about this “early option,” please see [Medicaid and CHIP: March 2014 Monthly Applications, Eligibility Determinations, and Enrollment Report \(May 1, 2014\)](#).

¹⁴ This figure includes children enrolled in the Medicaid program and the total enrollment for the CHIP program, which is comprised mostly of children. However, several states also cover pregnant women through CHIP. As a result, some adults may be included in this figure. This figure was calculated for any state that reported data on Medicaid child enrollment through the performance indicator process. 38 states reported such data for May 2014, as can be seen in Table 2: Medicaid and CHIP: May 2014 Preliminary Monthly Medicaid CHIP Child Enrollment. 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 may vary from state to state. See the notes on Table 2 for state-specific caveats regarding the reported data. 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.

¹⁵ Children are included in the total number of individuals enrolled in Medicaid and CHIP in May, as reported on page 3 and in Table 1. Total enrollment data for January 2014 through April 2014 is available on [Medicaid.gov](http://www.Medicaid.gov).

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

- In the 38 states that reported relevant data for the month of May, approximately 26.4 million individuals are enrolled in CHIP or were children in the Medicaid program in those states.
- Based on the May data, children and individuals in the CHIP program make up about 56 percent of total Medicaid and CHIP program enrollment.
- Most states reporting have seen growth in their CHIP and Medicaid child populations month to month during 2014, with an average monthly growth of approximately 0.8 percent across all states reporting for multiple months in 2014. Most states had already expanded coverage for children after the implementation of the CHIP program in 1997, before the open enrollment period in the Marketplaces.¹⁶

See the Eligibility Data tab [on Medicaid.gov \(http://medicaid.gov/AffordableCareAct/Medicaid-Moving-Forward-2014/Medicaid-Moving-Forward-2014.html\)](http://medicaid.gov/AffordableCareAct/Medicaid-Moving-Forward-2014/Medicaid-Moving-Forward-2014.html) for enrollment data for January through April, 2014.

¹⁶ Four million more children were insured in 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

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

Medicaid and CHIP May 2014 Application and Eligibility Data Highlights

	May 2014 Monthly in All States Reporting
<i>Applications</i>	
Total 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 transfers from the FFM)	2,056,739 ¹⁷
Total Applications for Financial Assistance Initially Received by State Based Marketplaces (note that more than one individual may be included on an application)	583,206 ¹⁸
<i>Eligibility Determinations</i>	
Total Individuals Determined Eligible for Medicaid and CHIP by State Agencies (includes those newly eligible under the Affordable Care Act and those eligible under prior law and, for some states, renewals)	2,273,193 ¹⁹

During the month of May 2014, a total of more than 2 million applications for financial assistance (including Medicaid and CHIP coverage, tax credits and subsidies) were received directly by state Medicaid and CHIP agencies. When applications received by SBMs are included, more than 2.6 million applications for coverage and financial assistance were submitted at the state level (including more than 2 million received directly by state Medicaid and CHIP agencies and almost 600,000 received by SBMs).²⁰ 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 May as compared to the prior month (April). Most states experienced declines in applications between April and May 2014, which is expected, given the close of the Marketplace open enrollment period in

¹⁷ 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 these data. Arizona, Maine, Missouri, and New Mexico did not provide May 2014 Medicaid and CHIP agency application data. Tennessee only provided application data on their CHIP program.

¹⁸ See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability some states reported renewals in these data and included applications received by their SBMs in their Medicaid and CHIP agency application data. New York is reporting all applications through their SBM. Tennessee only provided applications data on their CHIP program.

¹⁹ See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability some states reported some renewals in these data. Arizona, Massachusetts, Maine, and Missouri did not provide May 2014 determination data. Tennessee only provided determination data on their CHIP program.

²⁰ The following states have included renewals in their May 2014 application data: Alaska, Nevada, New Mexico, Ohio, Oregon, Pennsylvania, and Virginia. The following states have included transfers from the FFM in their May 2014 application data: Illinois, Florida, and South Dakota. Subtotals do not sum to total due to rounding.

Medicaid & CHIP

May 2014 Monthly Applications, Eligibility Determinations, and Enrollment Report

March 2014.²¹ This decline is particularly noticeable in SBM states where applications for financial assistance in the Marketplace are included in the total number of applications.²² 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).²³

States reported making more than 2.27 million eligibility determinations for Medicaid and CHIP in May 2014 for individuals applying for coverage: over 1.27 million determinations in states with Medicaid expansions in effect and almost 1 million in other states. 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.²⁴ Additionally, the determination number does not represent unique individuals, as an individual may have more than one eligibility determination. This report also reflects the continuation of administrative transfers in Oregon and California, discussed further below. 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.

See the **Eligibility Data** tab on Medicaid.gov at <http://medicaid.gov/AffordableCareAct/Medicaid-Moving-Forward-2014/Medicaid-Moving-Forward-2014.html> for preliminary and updated data on applications and determinations for October 2013 through April 2014.

²¹ Illinois, Indiana, Nevada, Vermont, and Wyoming are the only states reporting in both April and May 2014 that had an increase in applications over that period. A special enrollment period in the Marketplaces, which allowed consumers who had started their applications by March 31 to finish those applications in April, ended in mid-April in the FFM. The end date for this special enrollment period in the SMBs varied. Special enrollment periods are available year-round for individuals who experience significant life events or meet other qualifying criteria. More information on special enrollment periods is available at <https://www.healthcare.gov/how-can-i-get-coverage-outside-of-open-enrollment/>

²² Nine of the 15 states with the largest percentage decreases in applications, comparing April to May of 2014, are SBM states.

²³ See footnote 19.

²⁴ These states have included renewals in their May 2014 determination data: District of Columbia, Iowa, Maryland, Michigan, Nevada, New Mexico, Rhode Island, South Dakota, Texas, 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.

Success in Application and Enrollment Simplification: State Highlights

All 50 states and the District of Columbia are in the process of implementing the Affordable Care Act simplifications to Medicaid and CHIP application and eligibility determination processes and making technology upgrades to transition to streamlined, data-driven eligibility determination systems. The states described below have been particularly successful in implementing these changes. The information included in this section was provided to CMS by state officials. Over time, we will continue to report on state implementation of Affordable Care Act simplifications that have significantly improved the application and enrollment process for individuals and families. Improvements highlighted in this month's report include:

- Real-time determinations of Medicaid and CHIP eligibility through on-line application systems that are connected to data sources for verifying information submitted by applicants;²⁵ and
- Immediate authorization of services through the use of hospital-based presumptive eligibility. Under the law, hospitals that meet certain requirements (including completing necessary training) can immediately enroll patients who are likely eligible under a state's Medicaid eligibility guidelines for a temporary period of time.

Alabama

With new system upgrades in place, Alabama is now able to make real-time eligibility determinations (meaning as soon as the individual completes the application) on almost all applications for MAGI-based Medicaid eligibility groups that are received through the state's online application portal. Applicants can receive their Medicaid identification number right away. The day after the eligibility file is sent to the state's enrollment system, providers can use the system to look up individuals and confirm their enrollment. In addition, the state will soon be moving from a weekly to a daily batch transfer of the Medicaid eligibility files to the state's enrollment system (CHIP accounts are already being transferred on a daily basis).

Colorado

Colorado reports that, in May 2014, the state was able to provide real-time eligibility determinations to 78 percent of its MAGI applicants. When the determinations are completed, the state's online application portal displays a results page that gives eligible applicants a Medicaid identification number that enables them to begin accessing medical services immediately. The state continues to make improvements to the process that will further increase the proportion of applicants that receive a real time determination.

²⁵ The Affordable Care Act and implementing regulations require states to adopt online applications for those whose eligibility is determined based on the new Modified Adjusted Gross Income (MAGI) rules. Most non-disabled children; pregnant women; parents and caretaker relatives; and other adults who are under age 65 and are eligible for Medicaid are eligible through MAGI-based eligibility groups. States may, but are not required to, provide online applications to other Medicaid applicants. Some states have taken that step while others are planning to extend this application channel in a later phase of their systems development.

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

Kentucky

Almost all applications to the Medicaid program in Kentucky are now processed in real time; representing a significant change for Kentucky residents. Most Medicaid applicants who are approved for Medicaid under MAGI-based eligibility groups are enrolled immediately into health plans and can begin accessing services within a day of applying for Medicaid. In addition, emergency processes are in place for individuals who need authorization to access services more urgently.

Kentucky is also using combined eligibility notices for families, so that families receive a single notice from the state describing their eligibility results, even if individual members of the family are eligible for different programs (i.e. Medicaid or CHIP).

Kentucky was also the first state to receive approval of its Medicaid state plan amendment to implement hospital presumptive eligibility. The state reports that, as of July 1, 2014, 69 hospitals in Kentucky have been trained and are conducting Medicaid presumptive eligibility determinations.

New York

New York reports that 87 percent of online applications submitted to the State Based Marketplace (including applications for Medicaid and CHIP) receive an immediate, real-time eligibility decision, with the total time for the application and eligibility determination averaging 30-45 minutes for most families. New York credits much of its success to applicants providing all the information needed to make an eligibility determination the first time and to the design of the dynamic on-line application. For each response to an application question, the next question is tailored accordingly. The state also reports that only one percent of total Marketplace applications submitted are in paper form.

Utah

Utah has a highly automated eligibility determination system that requires less work by eligibility workers and results in short processing times for most applications. The state tries to process all applications for MAGI-based Medicaid eligibility groups within 7 days, and some applications receive a final determination of eligibility within as little as two days. More complex and non-MAGI applications are often processed within 15 days, which is an improvement upon the review times under the prior eligibility system.

Utah has also implemented hospital presumptive eligibility. The state has trained and certified 31 hospitals to complete these determinations.

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

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 the specifications, we have noted that information in notes in the State-by-State table.

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 May 2014. 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 May 2014. 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 May 1 - 31, 2014.

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: April and May 2014 Preliminary Monthly Enrollment
Updated June 2014

States Expanding Medicaid	Marketplace Type	Enrollment					
		Total Medicaid and CHIP Enrollment, April 2014 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, May 2014 (Preliminary) (II)	% Change April to May (Columns (II) and (I)) (III)	Pre-Open Enrollment Monthly Average Medicaid and CHIP Enrollment (July-Sept 2013) (IV)	Net Change Pre-Open Enrollment to May (Columns (II) and (IV)) (V)	% Change Pre-Open Enrollment to May (Columns (II) and (IV)) (VI)
Arizona	FFM	1,345,403	1,385,940	3.01%	1,201,770	184,170	15.32%
Arkansas	Partnership	763,966	771,680	1.01%	556,851	214,829	38.58%
California	SBM	10,600,000	10,800,000	1.89%	9,157,000	1,643,000	17.94%
Colorado	SBM	1,046,872	1,053,153	0.60%	783,420	269,733	34.43%
Connecticut	SBM	-	808,565	-	-	-	-
Delaware	Partnership	234,105	232,630	-0.63%	223,324	9,306	4.17%
District of Columbia	SBM	245,021	243,771	-0.51%	235,786	7,985	3.39%
Hawaii	SBM	314,368	307,944	-2.04%	288,358	19,586	6.79%
Illinois	Partnership	2,849,420	2,951,982	3.60%	2,626,943	325,039	12.37%
Iowa	Partnership	583,819	590,005	1.06%	493,515	96,490	19.55%
Kentucky	SBM	1,106,017	1,098,922	-0.64%	840,926	257,996	30.68%
Maryland	SBM	1,110,476	1,135,950	2.29%	856,297	279,653	32.66%
Massachusetts	SBM	1,454,361	1,447,332	-0.48%	1,296,359	150,973	11.65%
Michigan	Partnership	2,073,421	2,145,241	3.46%	1,912,009	233,232	12.20%
Minnesota	SBM	1,004,643	1,023,429	1.87%	873,040	150,389	17.23%
Nevada	SBM	469,110	498,101	6.18%	332,559	165,542	49.78%
New Hampshire [^]	Partnership	136,196	136,627	0.32%	127,082	9,545	7.51%
New Jersey	FFM	1,435,827	1,479,707	3.06%	1,283,851	195,856	15.26%
New Mexico	Supported SBM	635,321	646,229	1.72%	572,111	74,118	12.96%
New York	SBM	6,003,065	6,105,239	1.70%	5,678,418	426,821	7.52%
North Dakota	FFM	-	-	-	-	-	-
Ohio	Plan Management	2,498,526	2,582,303	3.35%	2,341,482	240,821	10.28%
Oregon	SBM	935,932	951,458	1.66%	626,357	325,101	51.90%
Rhode Island	SBM	250,759	252,475	0.68%	190,833	61,642	32.30%
Vermont	SBM	174,587	173,986	-0.34%	127,162	46,824	36.82%
Washington	SBM	1,482,300	1,505,250	1.55%	1,117,576	387,674	34.69%
West Virginia	Partnership	508,496	507,329	-0.23%	354,544	152,785	43.09%
Subtotal for All States Expanding Medicaid		39,262,011	40,835,248	1.95%	34,097,573	5,929,110	17.39%
Subtotal for All States with Expansions in Effect in Reporting Month[^]		39,125,815	40,698,621	1.95%	33,970,491	5,919,565	17.43%
Subtotal for States Expanding Medicaid who Reported in May and the Comparison Period#		39,262,011	40,026,683	Difference April to May 2014 764,672	34,097,573	Difference July-Sept 2013 to May 2014 5,929,110	

[^]=New Hampshire's requested effective date for implementing the expansion is July 1, 2014 (subject to CMS approval).

(-)=state has not reported data.

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

Column III is calculated for only those states that reported both May data and April data (subtotals exclude CT and ND).

Column V and VI is calculated for only those states that reported both monthly data and pre-Open Enrollment period data (subtotals exclude CT and ND).

Table 1: Medicaid and CHIP: April and May 2014 Preliminary Monthly Enrollment
Updated June 2014

#=Subtotal for columns I and III is for states submitting both April and May data. May subtotal for expansion states submitting April data is 40,026,683.

#=Subtotal for columns II, IV, V, and VI is for states submitting both May 2014 and July-September, 2013 data.

Arkansas	(I), (II)	Includes Private Option enrollees.
Arkansas	(I), (IV)	Updated to exclude limited benefit populations
Arkansas	(II)	Does not include individuals with limited benefits, unlike columns (I) and (IV).
Arkansas	(V), (VI)	Excluded due to change in reporting methodology by state.
California	(I), (II)	Data are preliminary.
California		Includes individuals transferred from the Low Income Health Program
California		section 1115 demonstration (also in pre-Open Enrollment Period data)
California		Includes estimated retroactive enrollment.
California		Includes applicants likely eligible for Medicaid or CHIP,
California		but whose applications are still pending verification.
California	(IV)	Includes individuals in the Low Income Health Program section 1115 demonstration.
Connecticut	(II)	Includes limited benefit populations.
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)).
Kentucky	(I), (II), (IV)	Includes partial benefit dual eligible individuals, and other limited benefit populations.
Kentucky	(V), (VI)	Includes partial benefit dual eligible individuals, and other limited benefit populations.
Massachusetts	(I), (II)	Does not include individuals receiving temporary transitional coverage.
Nevada	(I), (II)	Data are preliminary.
Nevada	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
New Jersey	(I), (II), (IV)	Includes individuals eligible at any point in the month.
Ohio	(I)	Corrected.
Rhode Island	(I), (II)	Includes only enrollments based on determinations through new MAGI system.

Table 1: Medicaid and CHIP: April and May 2014 Preliminary Monthly Enrollment
Updated June 2014

States Not Expanding Medicaid	Marketplace Type	Enrollment					
		Total Medicaid and CHIP Enrollment, April 2014 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, May 2014 (Preliminary) (II)	% Change April to May (Columns (II) and (I)) (III)	Pre-Open Enrollment Monthly Average Medicaid and CHIP Enrollment (July-Sept 2013) (IV)	Net Change Pre-Open Enrollment to May (Columns (II) and (IV)) (V)	% Change Pre-Open Enrollment to May (Columns (II) and (IV)) (VI)
Alaska	FFM	123,212	124,912	1.38%	120,946	3,966	3.28%
Alabama	FFM	765,286	765,937	0.09%	799,176	-33,239	-4.16%
Florida	FFM	3,315,147	3,321,856	0.20%	3,104,996	216,860	6.98%
Georgia	FFM	1,605,459	1,701,583	5.99%	1,535,090	166,493	10.85%
Idaho	Supported SBM	272,166	273,188	0.38%	251,926	21,262	8.44%
Indiana	FFM	1,154,736	1,156,350	0.14%	1,120,674	35,676	3.18%
Kansas	Plan Management	426,360	426,883	0.12%	397,989	28,894	7.26%
Louisiana	FFM	1,019,672	1,024,104	0.43%	1,019,787	4,317	0.42%
Maine	Plan Management	-	-	-	-	-	-
Missouri	FFM	806,639	802,135	-0.56%	846,084	-43,949	-5.19%
Mississippi	FFM/SBM-SHOP	664,212	672,891	1.31%	714,055	-41,164	-5.76%
Montana	Plan Management	154,054	155,505	0.94%	139,604	15,901	11.39%
North Carolina	FFM	1,780,204	1,796,402	0.91%	1,744,160	52,242	3.00%
Nebraska	Plan Management	236,212	234,922	-0.55%	244,600	-9,678	-3.96%
Oklahoma	FFM	796,404	793,377	-0.38%	790,051	3,326	0.42%
Pennsylvania	FFM	2,428,688	2,415,249	-0.55%	2,386,046	29,203	1.22%
South Carolina	FFM	826,936	830,285	0.40%	790,229	40,056	5.07%
South Dakota	Plan Management	116,259	116,099	-0.14%	115,501	598	0.52%
Tennessee	FFM	1,333,669	1,324,613	-0.68%	1,244,516	80,097	6.44%
Texas	FFM	4,480,564	4,522,040	0.93%	4,441,605	80,435	1.81%
Utah	FFM/SBM-SHOP	334,986	330,828	-1.24%	322,442	8,386	2.60%
Virginia	Plan Management	1,048,244	1,053,151	0.47%	1,003,266	49,885	4.97%
Wisconsin	FFM	1,174,176	1,176,778	0.22%	1,161,876	14,902	1.28%
Wyoming	FFM	68,279	68,432	0.22%	67,518	914	1.35%
Subtotal for All States Not Expanding Medicaid		24,931,564	25,087,520	0.63%	24,362,137	725,383	2.98%
Subtotal for States Not Expanding Medicaid who Reported in May and the Comparison Period#		24,931,564	25,087,520	Difference April to May 2014 155,956	24,362,137	Difference July-Sept 2013 to May 2014 725,383	
Total Across All States		64,193,575	65,922,768	1.43%	58,459,710	6,654,493	11.38%
Total for States who Reported in May and the Comparison Period#		64,193,575	65,114,203	Difference April to May 2014 920,628	58,459,710	Difference July-Sept 2013 to May 2014 6,654,493	

(-)=state has not reported data.

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

Column III is calculated for only those states that reported both May data and April data (subtotals exclude ME; totals exclude CT, ME, and ND).

Table 1: Medicaid and CHIP: April and May 2014 Preliminary Monthly Enrollment
Updated June 2014

Column V and VI is calculated for only those states that reported both monthly data and pre-Open Enrollment period data.

Column V and VI subtotals exclude ME; totals exclude CT, ME, and ND.

#=Subtotals and totals for columns I and III is for states submitting both April and May data.

#=May subtotal for non-expansion states submitting April data is 25,087,520.

#=Subtotals and totals for columns II, IV, V, and VI is for states submitting both May and July-September, 2013 data.

Alabama	(I), (II)	Data is from legacy system only, does not include enrollment in new system.
Alabama	(IV)	Data is from September only.
Florida	(I), (II)	Does not include SSI recipients enrolled in Medicaid.
Florida	(I), (IV)	Updated to exclude limited benefit populations.
Georgia	(I), (IV)	Data updated in June to remove limited benefit dual eligible individuals.
Indiana	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
Kansas	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
Maine	(I), (II), (IV)	Omitted because submitted data only includes individuals first enrolled in the month.
Mississippi	(I)	Updated to exclude limited benefit populations.
Mississippi	(IV)	Includes partial benefit dual eligible individuals (unlike columns (I) and (II)).
Oklahoma	(I)	Corrected.
Pennsylvania	(I)	Corrected.
South Carolina	(I), (IV)	Updated to exclude limited benefit populations.
Texas	(I), (II), (IV)	Includes partial benefit dual eligible individuals.
Utah	(I), (II), (IV)	Includes service limited Medicare program beneficiaries (SLMBs).
Wisconsin	(I), (II), (IV)	Includes all Medicaid/BadgerCare Plus programs and subprograms,
Wisconsin		including partial benefit dual eligible individuals, and other limited benefit populations.

Table 2: Medicaid and CHIP: May 2014 Preliminary Monthly Medicaid and CHIP Child Enrollment
Updated June 2014

State	Enrollment							
	Medicaid and CHIP Child Enrollment					Average Month to Month Change	Total Medicaid and CHIP Enrollment	Medicaid and CHIP Child Enrollment as a % of Total Enrollment
	January, 2014 (I)	February, 2014 (II)	March, 2014 (III)	April, 2014 (IV)	May, 2014 (Preliminary) (V)	January-May, 2014 (VI)	May, 2014 (Preliminary) (VII)	May, 2014 (Preliminary) (VIII)
Alabama	572,891	567,522	571,086	561,239	560,765	-0.53%	765,937	73.21%
Alaska	72,990	71,916	72,853	74,166	74,453	0.51%	124,912	59.60%
Arizona	-	-	-	-	-	-	1,385,940	-
Arkansas	-	-	-	-	-	-	771,680	-
California	-	-	-	-	-	-	10,800,000	-
Colorado	521,062	529,769	541,290	546,828	546,176	1.19%	1,053,153	51.86%
Connecticut	-	-	-	-	298,206	-	808,565	36.88%
Delaware	100,714	101,431	102,192	102,215	101,445	0.18%	232,630	43.61%
District of Columbia	-	-	-	-	-	-	243,771	-
Florida	2,076,446	2,113,599	2,183,679	2,233,244	2,248,731	2.02%	3,321,856	67.70%
Georgia	-	1,143,673	1,179,741	1,272,754	1,370,210	6.23%	1,701,583	80.53%
Hawaii	143,899	145,758	147,101	141,979	137,562	-1.09%	307,944	44.67%
Idaho	181,082	183,520	186,204	187,351	187,721	0.91%	273,188	68.71%
Illinois	-	-	-	-	1,532,037	-	2,951,982	51.90%
Indiana	696,562	674,961	700,190	685,900	689,059	-0.24%	1,156,350	59.59%
Iowa	-	-	-	292,324	329,738	12.80%	590,005	55.89%
Kansas	-	-	-	-	-	-	426,883	-
Kentucky	-	-	-	-	-	-	1,098,922	-
Louisiana	724,246	726,446	728,619	731,717	734,341	0.35%	1,024,104	71.71%
Maine	-	-	-	-	-	-	-	-
Maryland	567,867	578,164	589,893	590,931	599,057	1.35%	1,135,950	52.74%
Massachusetts	583,723	581,602	583,761	584,611	576,514	-0.31%	1,447,332	39.83%
Michigan	1,024,050	1,030,715	1,041,543	1,053,194	1,056,813	0.79%	2,145,241	49.26%
Minnesota	427,164	452,379	441,219	452,703	456,503	1.72%	1,023,429	44.61%
Mississippi	428,745	432,827	451,945	451,057	458,016	1.68%	672,891	68.07%
Missouri	509,173	502,096	504,210	501,850	500,974	-0.40%	802,135	62.46%
Montana	108,019	108,752	109,112	108,047	105,888	-0.49%	155,505	68.09%
Nebraska	158,177	157,047	157,890	158,230	154,405	-0.59%	234,922	65.73%
Nevada	-	-	-	-	-	-	498,101	-
New Hampshire	87,055	89,365	90,701	91,833	92,124	1.43%	136,627	67.43%
New Jersey	744,535	751,493	757,066	766,502	771,438	0.89%	1,479,707	52.13%
New Mexico	-	-	-	-	-	-	646,229	-
New York	2,320,379	2,322,657	2,363,567	2,346,594	2,379,407	0.63%	6,105,239	38.97%
North Carolina	1,126,665	1,096,013	1,098,630	1,089,239	1,098,865	-0.61%	1,796,402	61.17%
North Dakota	-	-	-	-	-	-	-	-
Ohio	1,162,668	1,162,877	1,172,101	1,183,390	1,197,774	0.75%	2,582,303	46.38%
Oklahoma	507,824	515,027	522,646	501,218	502,688	-0.23%	793,377	63.36%
Oregon	399,782	413,470	421,810	425,536	423,031	1.43%	951,458	44.46%
Pennsylvania	1,264,811	1,267,629	1,284,539	1,280,233	1,271,292	0.13%	2,415,249	52.64%
Rhode Island	-	-	-	-	-	-	252,475	-
South Carolina	578,153	585,301	592,291	598,453	601,615	1.00%	830,285	72.46%
South Dakota	78,165	78,209	78,685	79,075	78,960	0.25%	116,099	68.01%
Tennessee	-	-	-	-	-	-	1,324,613	-
Texas	3,245,861	3,246,854	3,254,461	3,286,347	3,317,991	0.55%	4,522,040	73.37%
Utah	232,107	233,066	221,914	204,978	205,500	-2.94%	330,828	62.12%
Vermont	67,765	-	68,916	65,765	66,406	-1.80%	173,986	38.17%
Virginia	636,447	652,919	655,135	653,922	643,053	0.27%	1,053,151	61.06%
Washington	738,337	742,798	745,233	743,874	741,642	0.11%	1,505,250	49.27%
West Virginia	203,216	205,974	208,856	211,699	209,187	0.73%	507,329	41.23%
Wisconsin	-	-	-	-	-	-	1,176,778	-
Wyoming	44,831	45,223	45,565	45,551	45,368	0.30%	68,432	66.30%
Total For All States	22,335,411	23,511,052	23,874,644	24,304,549	26,364,955	0.81%	65,922,768	55.74%
Number of States Reporting	34	34	35	36	38	36	49	38

For general notes on enrollment data, see Table 1: Medicaid and CHIP: April and May 2014 Preliminary Monthly Enrollment

Table 2: Medicaid and CHIP: May 2014 Preliminary Monthly Medicaid and CHIP Child Enrollment
Updated June 2014

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

Alabama	(I)-(V)	Complete enrollment for Alabama Medicaid and CHIP are not available.
Kentucky	(I)-(V)	Does not include Medicaid children in MAGI eligibility groups.
Maryland	(I)-(V)	Includes limited benefit dual eligible individuals (unlike column (VII)). All data is preliminary.
Utah	(I)	Includes some duplicates.

Table 3: Medicaid and CHIP: May 2014 Monthly Applications and Eligibility Determinations
Updated June 2014

States Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, May 2014 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, May 2014 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, May 2014 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, April 2014 (Preliminary) (IV)	% Change April 2014 to May 2014 (V)	Individuals Determined Eligible for Medicaid at Application, May 2014 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, May 2014 (Preliminary) (VII)	Total New Determinations, May 2014 (Preliminary) (VIII)
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	33,428	N/A	33,428	39,928	-16.28%	19,531	-	19,531
California	SBM	131,000	187,000	318,000	586,000	-45.73%	325,000	-	325,000
Colorado	SBM	25,189	-	25,189	37,689	-33.17%	25,962	1,335	27,297
Connecticut	SBM	12,238	21,438	33,676	40,427	-16.70%	8,988	1	8,989
Delaware	Partnership	2,905	N/A	2,905	5,265	-44.82%	1,514	49	1,563
District of Columbia	SBM	4,365	1,424	5,789	8,048	-28.07%	4,997	-	4,997
Hawaii	SBM	5,379	-	5,379	6,466	-16.81%	5,101	176	5,277
Illinois	Partnership	151,006	N/A	151,006	97,540	54.81%	78,979	16,413	95,392
Iowa	Partnership	20,246	N/A	20,246	26,738	-24.28%	31,995	13,781	45,776
Kentucky	SBM	26,423	22,435	48,858	100,445	-51.36%	110,327	3,761	114,088
Maryland	SBM	26,620	7,483	34,103	49,675	-31.35%	26,696	5,288	31,984
Massachusetts	SBM	23,482	8,886	32,368	44,312	-26.95%	-	-	-
Michigan	Partnership	78,990	N/A	78,990	131,147	-39.77%	81,034	5,114	86,148
Minnesota	SBM	22,018	-	22,018	27,975	-21.29%	18,892	-	18,892
Nevada	SBM	13,387	-	13,387	11,790	13.55%	18,671	-	18,671
New Hampshire [^]	Partnership	3,489	N/A	3,489	3,572	-2.32%	3,475	-	3,475
New Jersey	FFM	32,655	N/A	32,655	37,707	-13.40%	6,346	5,369	11,715
New Mexico	Supported SBM	-	N/A	-	35,451	-	19,558	-	19,558
New York	SBM	-	175,444	175,444	334,873	-47.61%	135,647	9,890	145,537
North Dakota	FFM	1,050	N/A	1,050	3,297	-68.15%	537	-	537
Ohio	Plan Management	201,875	N/A	201,875	219,941	-8.21%	139,641	-	139,641
Oregon	SBM	612	27,697	28,309	58,121	-51.29%	33,746	-	33,746
Rhode Island	SBM	4,100	-	4,100	6,468	-36.61%	5,203	258	5,461
Vermont	SBM	34	17,930	17,964	13,323	34.83%	12,366	-	12,366
Washington	SBM	19,146	113,469	132,615	156,661	-15.35%	82,748	2,714	85,462
West Virginia	Partnership	25,376	N/A	25,376	35,017	-27.53%	14,082	974	15,056
Subtotal for All States Expanding Medicaid		865,013	583,206	1,448,219	2,117,876	-30.46%	1,211,036	65,123	1,276,159
Subtotal for All States with Expansions in Effect in Reporting Month[^]		861,524	583,206	1,444,730	2,114,304	-30.50%	1,207,561	65,123	1,272,684
Subtotal for States Expanding Medicaid who Reported in April and May 2014				1,448,219	2,082,425	Difference April to May 2014 -634,206			

[^]=New Hampshire's requested effective date for implementing the expansion is July 1, 2014 (subject to CMS approval).

(-)=state has not reported data.

Column V is calculated for only those states that reported April and May 2014 Applications data (subtotals exclude AZ and NM).

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

Table 3: Medicaid and CHIP: May 2014 Monthly Applications and Eligibility Determinations
Updated June 2014

Arkansas	(VI)	Includes CHIP.
California	(I)	Data are preliminary and will be not be fully reconciled until August 2014.
California		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)	Data are preliminary and will be not be fully reconciled until August 2014.
California		Includes applications to SBM that did not request financial assistance.
California	(IV)	Data are preliminary and will be not be fully reconciled until July 2014.
California		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)	Data are preliminary and will be not be fully reconciled until August 2014.
California		Determinations 'at application' is derived by considering prior coverage.
California		Includes those determined eligible and 'contingently eligible.' Includes CHIP.
California		Includes 27,000 individuals eligible via targeted enrollment strategy.
California		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	(VII)	Data reflects only those determinations made by the separate CHIP agency and does not reflect all CHIP determinations.
Colorado	(I)	State Medicaid agency hosts SBM portal; number includes all applications for insurance affordability programs.
Connecticut	(I), (III), (IV)	Data may include some duplication of applications between Medicaid and CHIP.
Connecticut	(II)	SBM applications data not submitted as of date of publication.
Connecticut	(VI)	Count is of households, not individuals. Includes determinations of some non-title XIX programs made by the Medicaid agency.
Connecticut		(state funded medical cases, the AIDS Drug Assistance program and refugee cases).
Connecticut		Only includes determinations made by the Medicaid agency.
Connecticut		Excludes those determined Medicaid-eligible by the SBM.
District of Columbia	(VI)	Includes all determinations (e.g., renewals); includes CHIP.
Hawaii	(I)	State Medicaid agency hosts SBM portal; number includes all applications for insurance affordability programs.
Illinois	(I), (III), (IV)	Includes account transfers from the FFM.
Iowa	(VI)	Includes renewals.
Iowa	(VII)	Includes renewals.
Maryland	(II)	Includes State Medicaid Agency data and SBM data from 5/1 - 5/31.
Maryland	(II), (III), (IV)	Includes all applications not only those requesting financial assistance.
Maryland	(VI)	Includes renewals. Includes State Medicaid Agency data and SBM data from 5/1 - 5/31.
Maryland	(VII)	Includes renewals. Includes State Medicaid Agency data and SBM data from 5/1 - 5/31.
Massachusetts	(VI)	Data are preliminary and are derived.
Michigan	(VI)	Includes renewals.
Michigan	(VII)	Includes renewals.
Minnesota	(I), (III), (IV)	Count is of persons applying, not applications. Does not include applications to the new eligibility and enrollment system.
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; includes CHIP.
New Jersey	(I), (III), (IV)	Includes applications received at county welfare agencies.
New Jersey	(VI)	Does not include all eligibility determinations; county welfare agencies determinations are not included in this data.
New Jersey	(VII)	Does not include all eligibility determinations; county welfare agencies determinations are not included in this data.
New Mexico	(I), (III), (IV)	Includes renewals.
New Mexico	(VI)	Includes all determinations (e.g., renewals); includes CHIP.
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	(I), (II), (III), (IV)	Includes renewals
Oregon	(VI)	Count is of households, not individuals; includes CHIP.

Table 3: Medicaid and CHIP: May 2014 Monthly Applications and Eligibility Determinations
 Updated June 2014

Oregon		Includes 510 individuals determined eligible via Targeted Enrollment Strategy.
Oregon		Includes MAGI populations only.
Oregon	(VI), (VIII)	Includes MAGI populations only.
Rhode Island	(I)	Includes applications submitted to SBM.
Rhode Island	(I), (III), (IV)	Does not include applications in legacy system for certain non-MAGI populations.
Rhode Island	(VI)	Includes only determinations through new MAGI system. Includes renewals.
Rhode Island	(VII)	Includes only determinations through new MAGI system.
Vermont	(VI)	Includes renewals.

Table 3: Medicaid and CHIP: May 2014 Monthly Applications and Eligibility Determinations
Updated June 2014

States Not Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, May 2014 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, May 2014 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, May 2014 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, April 2014 (Preliminary) (IV)	% Change April 2014 to May 2014 (V)	Individuals Determined Eligible for Medicaid at Application, May 2014 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, May 2014 (Preliminary) (VII)	Total New Determinations, May 2014 (Preliminary) (VIII)
Alaska	FFM	6,419	N/A	6,419	8,342	-23.05%	5,178	-	5,178
Alabama	FFM	19,352	N/A	19,352	19,616	-1.35%	26,522	-	26,522
Florida	FFM	339,656	N/A	339,656	410,926	-17.34%	104,275	15,454	119,729
Georgia	FFM	79,865	N/A	79,865	91,261	-12.49%	41,317	255	41,572
Idaho	Supported SBM	4,151	N/A	4,151	4,835	-14.15%	6,837	350	7,187
Indiana	FFM	114,540	N/A	114,540	105,350	8.72%	45,786	3,570	49,356
Kansas	Plan Management	6,928	N/A	6,928	8,126	-14.74%	5,880	599	6,479
Louisiana	FFM	25,724	N/A	25,724	27,240	-5.57%	18,532	956	19,488
Maine	Plan Management	-	N/A	-	-	-	-	-	-
Missouri	FFM	-	N/A	-	-	-	-	-	-
Mississippi	FFM/SBM-SHOP	20,942	N/A	20,942	25,273	-17.14%	15,762	813	16,575
Montana	Plan Management	3,257	N/A	3,257	3,429	-5.02%	2,954	306	3,260
North Carolina	FFM	81,035	N/A	81,035	101,230	-19.95%	75,612	5,969	81,581
Nebraska	Plan Management	6,346	N/A	6,346	7,402	-14.27%	7,449	815	8,264
Oklahoma	FFM	48,493	N/A	48,493	53,341	-9.09%	40,701	6,097	46,798
Pennsylvania	FFM	227,119	N/A	227,119	258,058	-11.99%	62,363	7,644	70,007
South Carolina	FFM	21,993	N/A	21,993	28,510	-22.86%	28,881	1,155	30,036
South Dakota	Plan Management	1,673	N/A	1,673	2,155	-22.37%	1,242	-	1,242
Tennessee	FFM	1,668	N/A	1,668	2,134	-21.84%	-	1,071	1,071
Texas	FFM	107,227	N/A	107,227	120,383	-10.93%	332,181	-	332,181
Utah	FFM/SBM-SHOP	21,008	N/A	21,008	22,786	-7.80%	51,604	1,569	53,173
Virginia	Plan Management	25,479	N/A	25,479	32,859	-22.46%	46,103	3,882	49,985
Wisconsin	FFM	27,495	N/A	27,495	33,339	-17.53%	24,305	2,161	26,466
Wyoming	FFM	1,356	N/A	1,356	1,151	17.81%	797	87	884
Subtotal for All States Not Expanding Medicaid#		1,191,726	N/A	1,191,726	1,367,746	-12.86%	944,281	52,753	997,034
Subtotal for States Not Expanding Medicaid who Reported in April and May 2014				1,191,726	1,367,746	Difference April to May 2014 -176,020			
Total Across All States#		2,056,739	583,206	2,639,945	3,485,622	-23.48%	2,155,317	117,876	2,273,193
Total for States who Reported in April and May 2014				2,639,945	3,450,171	Difference April to May 2014 -810,226			

(-)=state has not reported data.

Column V is calculated for only those states that reported April and May 2014 Applications data (subtotals exclude ME and MO; totals exclude AZ, ME, MO, and NM).

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

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

Table 3: Medicaid and CHIP: May 2014 Monthly Applications and Eligibility Determinations
Updated June 2014

Alaska	(I), (III), (IV)	Includes renewals converting to MAGI methodology.
Alaska	(VI), (VIII)	Count is of households, not individuals; includes CHIP .
Alabama	(VII)	CHIP data for this indicator is not available at this time.
Florida	(I), (III), (IV)	Includes account transfers from the FFM .
Kansas	(I), (III), (IV)	Includes MAGI populations only.
Kansas	(VI)	Includes MAGI populations only.
Montana	(IV)	Data updated in June.
Pennsylvania	(I), (III), (IV)	Includes renewals.
Pennsylvania	(IV)	Corrected.
Pennsylvania	(VI), (VIII)	Includes renewals.
Pennsylvania	(VII)	No CHIP data available.
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.
Texas	(VI)	Includes renewals and CHIP .
Utah	(I), (III), (IV)	Includes applications for non-health coverage programs.
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: 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.

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

retroactive enrollments were excluded from the data for the July-September, 2013 period.²⁷ Such exclusions were not possible.

Net Change Pre-Open Enrollment (V) to May

The net change in **Total Medicaid and CHIP Enrollment, May 2014 (preliminary) (II)** as compared to **Pre-Open Enrollment Monthly Average 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 From Pre-Open Enrollment to May 2014 (VI)

The percentage change in **Total Medicaid and CHIP Enrollment, May 2014 (Preliminary) (II)** as compared to **Pre-Open Enrollment Monthly Average 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 through April of 2014 is available on Eligibility Data tab [on Medicaid.gov \(http://medicaid.gov/AffordableCareAct/Medicaid-Moving-Forward-2014/Medicaid-Moving-Forward-2014.html\)](http://medicaid.gov/AffordableCareAct/Medicaid-Moving-Forward-2014/Medicaid-Moving-Forward-2014.html). 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: May 2014 Preliminary Monthly Medicaid CHIP Child Enrollment

Medicaid and CHIP Child Enrollment, January- April, 2014 ((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.²⁸ These figures may have been updated by

²⁷ See footnote 24.

²⁸ 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.

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

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, May, 2014 (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.²⁹ The May 2014 data was submitted in June and is considered preliminary.³⁰

Average Month to Month Change, January-May, 2014 (VI)

This column calculates the month to month change in Medicaid and CHIP enrollment for each month between January 2014 and May 2014 (columns (I)-(V)) and displays an average of those changes.

Total Medicaid and CHIP Enrollment, May 2014 (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). 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.³¹ This data is this same as the data reported in column (II) in Table 1: Medicaid and CHIP: April and May Preliminary Monthly Enrollment.

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

Medicaid and CHIP Child Enrollment, May, 2014 (Preliminary) (V) as a percentage of Total Medicaid and CHIP Enrollment, May 2014 (Preliminary) (VIII).

²⁹ See footnote 26.

³⁰ See footnote 24.

³¹ See footnote 24.

Table 3: Medicaid and CHIP: May 2014 Monthly Applications and Eligibility Determinations

Application Data Elements

New Applications Submitted to Medicaid and CHIP Agencies, May 2014 (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).³² 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.³³ The May 2014 data was submitted in June and is considered preliminary.³⁴

Applications for Financial Assistance Submitted to the State-Based Marketplace, May 2014 (Preliminary) (II)

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 May 2014 data was submitted in June and is considered preliminary.³⁵

Total Applications for Financial Assistance Submitted at the State Level, May 2014 (Preliminary) (III)

Total Applications for Financial Assistance Submitted at the State Level, April 2014 (Preliminary) (IV)

For states with an SBM, the data reflect the total of **Applications Submitted to Medicaid and CHIP Agencies, May 2014 (Preliminary)** plus **Applications for Financial Assistance Submitted to the State-Based Marketplace, May 2014 (Preliminary)**. For FFM states, the data reflect **Applications Submitted to Medicaid and CHIP Agencies, May 2014 (Preliminary)**. For SBM states, the data include 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 May 2014 data was submitted in June and is considered preliminary. 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 additional individuals who applied in April, but who were not captured in the preliminary data) is posted separately under the Eligibility Data tab on Medicaid.gov.

³² 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.

³³ 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.

³⁴ See footnote 24.

³⁵ See footnote 24.

Percentage Change April 2014 to May 2014 (V)

The percentage change in **Total Applications for Financial Assistance Submitted at the State Level, May 2014 (Preliminary) (III)** as compared to **Total Preliminary Applications Submitted at the State Level, April 2014 (Preliminary) (IV)** is calculated for states that provided data for both periods.

Eligibility Determination Data Elements

Individuals Determined Eligible for Medicaid at Application, May 2014 (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.³⁶ 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.³⁷ 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. For example, 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](#).

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 May 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](#).

³⁶ Information on targeted enrollment strategies and the states approved for these strategies is available here: <http://www.medicaid.gov/AffordableCareAct/Medicaid-Moving-Forward-2014/medicaid-moving-forward-2014.html>.

³⁷ 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.

Individuals Determined Eligible for CHIP at Application, May 2014 (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 May 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, May 2014 (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: Federally-Facilitated Marketplaces (FFMs) can take several forms, including the State Partnership Marketplace (Partnership), States performing Plan Management functions (Plan Management), Supported SBMs, and the State-Based Small Business Health Options Program (SB-SHOP). These models are referenced in the state-by-state tables. All of these models are referred to as an “FFM” in this report.