DEPARTMENT OF HEALTH & HUMAN SERVICES

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Medicaid & CHIP: May 2016 Monthly Applications, Eligibility Determinations and Enrollment Report July 28, 2016

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 2016. This report measures eligibility and enrollment activity for the entire Medicaid and CHIP programs in all states¹, reflecting activity for all populations receiving comprehensive Medicaid and CHIP benefits in all states, including states that have not yet chosen to adopt the new low-income adult group established by the Affordable Care Act.² This data is submitted to CMS by states using a common set of indicators designed to provide information to support program management and policy-making related to application, eligibility, and enrollment processes.³

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

- 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

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

² As of May 2016, thirty-one 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 states expanded coverage to parents and other adults at income levels above the level required under federal law before the Affordable Care Act. Many other states previously covered parents only at the minimum required income levels and often did not cover other adults without disabilities who are under age 65 at all.

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

⁴ The Affordable Care Act's "no wrong door" policy means that individuals can apply for health insurance coverage through the Marketplace or the Medicaid or CHIP agency (if a separate agency) in their state and receive an eligibility determination for the health insurance program for which they are eligible. Information on applications received by (and Medicaid and CHIP assessments and determinations made by) the Marketplaces during the Marketplace open enrollment period is included in the Health Insurance Marketplace's 2016 Open Enrollment Period: Final Enrollment Report (March 11, 2016).

 The total number of individuals enrolled in the Medicaid and CHIP programs who are receiving comprehensive benefits, including details on the total number of children enrolled in these programs.

As with each monthly report, given that states are reporting monthly data to CMS soon after the close of the month, the May 2016 data presented in this report should be considered preliminary. We have published updated data for April 2016 applications, eligibility determinations and enrollment on Medicaid.gov, which includes a more complete data set than the previously reported preliminary April 2016 data.

Medicaid and CHIP May 2016 Enrollment Data Highlights

Total Individuals Enrolled in Medicaid and CHIP in May 2016 in All States Reporting May Data (includes all individuals enrolled in the program on the last day of the reporting period) ⁵	72,531,285 ⁶
Additional enrollment since October 2013 when the initial Marketplace open enrollment period began, among the 49 states reporting both May 2016 enrollment data and data from July-September of 2013 ⁷	15,093,251

Over 72.5 million individuals were enrolled in Medicaid and CHIP in May 2016.⁸
 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.

retroactive coverage for incurred health care costs dating back to 90 days prior to the date of application.

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

⁶ 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 May 2016 after the close of the month due to retroactive eligibility under Medicaid or similar reasons. In Medicaid, individuals are potentially eligible for

⁷ Connecticut and Maine did not submit enrollment data for the July-September 2013 baseline period.

⁸ See footnote 5 and 6.

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- 151,705 additional individuals were enrolled in May 2016 as compared to April 2016 in the 51 states that reported comparable April and May 2016 data.⁹
- Looking at the additional enrollment since October 2013 when the initial
 Marketplace open enrollment period began, among the 49 states reporting both
 May 2016 enrollment data and data from July-September of 2013, nearly 15.1
 million additional individuals are enrolled in Medicaid and CHIP as of May 2016,
 almost a 26.8 percent increase over the average monthly enrollment for July
 through September of 2013.¹⁰ (Connecticut and Maine are not included in this
 count because they did not submit enrollment data for the July-September 2013
 baseline period.)
- Among states that had implemented the Medicaid expansion and were covering newly eligible adults in May 2016, Medicaid and CHIP enrollment rose by over 35.3 percent compared to the July-September 2013 baseline period, while states that have not, to date, expanded Medicaid reported an increase of 11.8 percent over the same period.¹¹
- 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

⁹ See the notes in Table 1 for state-specific caveats regarding the reported data.

¹⁰ The net change in enrollment is based on data from the 49 states reporting both May 2016 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 May of nearly 71.5 million individuals, and July-September 2013 average enrollment of approximately 56.4 million. For May 2016, we are reporting growth of 15,093,251 compared to July-September 2013. This figure is greater than the 14,956,042 in net enrollment growth that was included in the *Medicaid and CHIP: April 2016 Applications, Eligibility Determinations, and Enrollment Report* by over 137,000. This difference does not match the 151,705 increase reported above for the April to May 2016 period because the 151,705 figure is based on 51 states, while the 137,000 figure is based on only 49 states. Further, one state adjusted its April enrollment data to correct a reporting error. Please note, the July-September 2013 data may contain individuals with retroactive Medicaid coverage, and the May 2016 data included in this report is preliminary (see footnote 6), the difference reported here between May 2016 and July-September 2013 period is likely understated.

¹¹ Percentage calculations are based only on states reporting in both May 2016 and the July through September 2013 baseline period. See footnote 9 for additional information. Among expansion states, the enrollment increases 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.

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:

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.¹³

As with previous reports, multiple factors contribute to the change in enrollment between May 2016 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 May and whose application will be fully processed after May 31st; 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 May 2016, applied for Medicaid in a later month, and qualify for retroactive Medicaid coverage in May 2016. 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. 15

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 Medicaid demonstration authority under section 1115 of the Social Security Act. For more information about this "early option," please see <u>Medicaid and CHIP: March 2014</u> <u>Monthly Applications, Eligibility Determinations, and Enrollment Report (May 1, 2014)</u>.

¹⁴ See footnote 6 for additional information on retroactive eligibility.

¹⁵ 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.

Child Enrollment

Total Medicaid child and CHIP	
enrollment in the 47 states reporting	34,938,129 ¹⁷
in May 2016 ¹⁶	

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 December 2015 and May 2016.¹⁸ This data appears in Table 2.¹⁹

- In the 47 states that reported relevant data for the month of May, nearly 35 million individuals are enrolled in CHIP or are children enrolled in the Medicaid program. Similar to the three prior months (February, March and April 2016), California reported child enrollment in May 2016; therefore, the child enrollment figures reported in the February, March, April and May 2016 reports are not comparable to the corresponding statistics in earlier reports where California did not report child enrollment data.
- In the 47 states that reported both May 2016 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 over 51.2 percent of total Medicaid and CHIP program enrollment.

¹⁶ 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, which 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. Arizona, the District of Columbia, New Mexico, and Tennessee did not submit child enrollment data for May 2016.

¹⁷ See the notes in Table 2 for state-specific caveats.

¹⁸ In Table 2, the reported May 2016 child enrollment figure appears to be larger than the total enrollment figures from December 2015 and January 2016 because 46 states submitted child enrollment data in these earlier months, as compared to the 47 in February, March, April and May 2016. Also, please note, 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 May 2016 data included in this report is collected in the month after the reporting period and includes very few (if any) children enrolled retroactively. An updated May figure that includes more retroactively enrolled individuals will be included in the next report in this series.

¹⁹ Children are included in the total number of individuals enrolled in Medicaid and CHIP in May 2016, as reported on page 2 and in Table 1. Total enrollment data for January 2014 through April 2016 is available on Medicaid.gov.

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 then.²⁰

Medicaid and CHIP May 2016 Application and Eligibility Data Highlights

	May 2016 Monthly in All States Reporting
Applications	
Applications for Financial Assistance Initially Received by State Medicaid and CHIP Agencies (note that more than one individual may be included on an application and some states have included renewals and account transfers from the FFM)	1,512,389 ²¹
Applications for Financial Assistance Initially Received by State-Based Marketplaces (note that more than one individual may be included on an application)	692,657 ²²
Eligibility Determinations	
Individuals Determined Eligible for Medicaid and CHIP by State Agencies at Application (includes those newly eligible under the Affordable Care Act and those eligible under prior law)	1,608,109 ²³

During the month of May 2016, over 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 more than 1.5 million received directly by state

²⁰ Four million more children were covered by Medicaid or CHIP in 2012, compared with 2008. Kenneth Finegold and Sophia Koontz, *ASPE Issue Brief: Children's Health Coverage on the 5th Anniversary of CHIPRA*, February 4, 2014, http://aspe.hhs.gov/health/reports/2014/CHIPRA 5thAnniversary/ib CHIPRA5thanniversary.pdf

²¹ 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.

²² 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.

²³ 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.

Medicaid and CHIP agencies and nearly 700,000 received by SBMs).²⁴ 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 2016 as compared to the prior month (April 2016). 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).²⁵

States reported making over 1.6 million eligibility determinations for Medicaid and CHIP in May 2016 for individuals applying for coverage. As described above and in prior reports, this figure includes all of state Medicaid and CHIP agencies' determinations for individuals eligible under prior law, as well as through coverage expansions under the Affordable Care Act; note that, due to limitations on the data some states are able to report, the number of determinations includes renewals in those states. 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.

See the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on Medicaid.gov for preliminary and updated data on applications and determinations for October 2013 through April 2016.

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

²⁴ The following states have included renewals in their May 2016 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 May 2016 application data.

²⁵ See footnote 21.

²⁶ The states that have included renewals in their May 2016 determination data are: District of Columbia, Iowa, Michigan, Nevada, Ohio, Pennsylvania, 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.

²⁷ 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 May 2016. 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.

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 May 2016. 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 2016. 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, 2016.

Table 1: Medicaid and CHIP: April and May 2016 Preliminary Monthly Enrollment

		Enrollment							
States Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, April 2016 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, May 2016 (Preliminary) (II)	% Change April to May 2016 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July- Sept. 2013 (IV)	Net Change, July-Sept. 2013 to May 2016 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to May 2016 (Columns (IV) and (II)) (VI)		
Alaska	FFM	151,265	153,741	1.64%	122,334	31,407	25.67%		
Arizona	FFM	1,668,030	1,682,202	0.85%	1,201,770	480,432	39.98%		
Arkansas	Partnership	826,082	843,941	2.16%	556,851	287,090	51.56%		
California	SBM	11,887,524	11,905,332	0.15%	7,755,381	4,149,951	53.51%		
Colorado	SBM	1,349,202	1,351,261	0.15%	783,420	567,841	72.48%		
Connecticut	SBM	770,176	770,880	0.09%	-	-	-		
Delaware	Partnership	237,729	235,154	-1.08%	223,324	11,830	5.30%		
District of Columbia	SBM	263,765	264,605	0.32%	235,786	28,819	12.22%		
Hawaii	SBM **	343,181	344,432	0.36%	288,357	56,075	19.45%		
Illinois	Partnership	3,106,573	3,097,016	-0.31%	2,626,943	470,073	17.89%		
Indiana	FFM	1,468,845	1,467,926	-0.06%	1,120,674	347,252	30.99%		
Iowa	Partnership	617,029	619,961	0.48%	493,515	126,446	25.62%		
Kentucky	SBM	1,215,463	1,213,629	-0.15%	606,805	606,824	100.00%		
Louisiana^	FFM	1,061,125	1,057,073	-0.38%	1,019,787	37,286	3.66%		
Maryland	SBM	1,199,600	1,204,630	0.42%	856,297	348,333	40.68%		
Massachusetts	SBM	1,635,269	1,656,780	1.32%	1,296,359	360,421	27.80%		
Michigan	Partnership	2,297,880	2,303,659	0.25%	1,912,009	391,650	20.48%		
Minnesota	SBM	1,018,137	1,025,345	0.71%	873,040	152,305	17.45%		
Montana	Plan Management	229,945	233,652	1.61%	148,974	84,678	56.84%		
Nevada	SBM **	607,790	609,004	0.20%	332,560	276,444	83.13%		
New Hampshire	Partnership	187,353	186,767	-0.31%	127,082	59,685	46.97%		
New Jersey	FFM	1,739,148	1,742,422	0.19%	1,283,851	458,571	35.72%		
New Mexico	SBM **	750,868	753,726	0.38%	457,678	296,048	64.68%		
New York	SBM	6,391,830	6,403,030	0.18%	5,678,417	724,613	12.76%		
North Dakota	FFM	85,983	89,839	4.48%	69,980	19,859	28.38%		
Ohio	Plan Management	2,957,226	2,953,740	-0.12%	2,341,481	612,259	26.15%		
Oregon	SBM **	1,053,540	1,046,370	-0.68%	626,356		67.06%		
Pennsylvania	FFM	2,807,901	2,829,011	0.75%	2,386,046		18.56%		
Rhode Island	SBM	280,257	281,500	0.44%	190,833	90,667	47.51%		
Vermont	SBM	192,397	188,560	-1.99%	161,081	27,479	17.06%		
Washington	SBM	1,772,802	1,772,887	0.00%	1,117,576		58.64%		
West Virginia	Partnership	568,478	565,849	-0.46%	354,544	211,305	59.60%		
Subtotal for All States Expanding Medicaid		50,742,393	50,853,924	0.22%	37,249,111	12,833,933	34.45%		
Subtotal for All States with Providing Coverage in Rep	•	49,681,268	49,796,851	0.23%	36,229,324	12,796,647	35.32%		
Subtotal for States Expanding Medicaid that Reported in April and May 2016		50,742,393	50,853,924	Difference April to May 2016 111,531					
Subtotal for States Expand Reported in May 2016 and	~		50,083,044		37,249,111	Difference July-Sept 2013 to May 2016 12,833,933			

(-)=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 April and May 2016 data.

Columns V and VI are calculated for only those states that reported data from both May 2016 and the July-Sept. 2013 period.

The subtotals for states reporting data from both May 2016 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	(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.
Minnesota	(IV)	May include duplicates (unlike columns (I) and (II)).
New Jersey	(I), (II), (IV)	Includes individuals eligible at any point in the month.
New Mexico	(I)	Corrected.
New York	(I), (II)	Includes estimated retroactive enrollment.
North Dakota	(IV)	Data is from July 2013 only.
Oregon	(IV)	Includes emergency Medicaid population.

^{^=}Louisiana's effective date for implementing the expansion is July I, 2016. LA is not included in the "Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month."

^{**=} 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).

Table 1: Medicaid and CHIP: April and May 2016 Preliminary Monthly Enrollment

		Enrollment							
States Not Expanding Medicaid	Marketplace Type	Total Medicaid and CHIP Enrollment, April 2016 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, May 2016 (Preliminary) (II)	% Change April to May 2016 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July- Sept. 2013 (IV)	Net Change, July-Sept. 2013 to May 2016 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to May 2016 (Columns (IV) and (II)) (VI)		
Alabama	FFM	887,052	888,641	0.18%	799,176	89,465	11.19%		
Florida	FFM	3,591,512	3,600,889	0.26%	3,104,996	495,893	15.97%		
Georgia	FFM	1,764,614	1,756,974	-0.43%	1,535,090	221,884	14.45%		
Idaho	SBM	285,706	286,836	0.40%	238,150	48,686	20.44%		
Kansas	Plan Management	411,106	414,947	0.93%	378,160	36,787	9.73%		
Maine	Plan Management	275,580	274,677	-0.33%	-	-	-		
Mississippi	FFM/SBM-SHOP	695,427	693,980	-0.21%	637,229	56,751	8.91%		
Missouri	FFM	961,286	963,241	0.20%	846,084	117,157	13.85%		
Nebraska	Plan Management	235,516	234,550	-0.41%	244,600	-10,050	-4.11%		
North Carolina	FFM	1,980,948	1,987,921	0.35%	1,595,952	391,969	24.56%		
Oklahoma	FFM	779,411	775,604	-0.49%	790,051	-14,447	-1.83%		
South Carolina	FFM	966,546	972,098	0.57%	889,744	82,354	9.26%		
South Dakota	Plan Management	119,053	119,189	0.11%	115,501	3,688	3.19%		
Tennessee	FFM	1,607,218	1,616,888	0.60%	1,244,516	372,372	29.92%		
Texas	FFM	4,686,247	4,700,879	0.31%	4,441,605	259,274	5.84%		
Utah	FFM/SBM-SHOP	309,812	309,628	-0.06%	294,029	15,599	5.31%		
Virginia	Plan Management	966,634	967,338	0.07%	935,434	31,904	3.41%		
Wisconsin	FFM	1,049,851	1,049,374	-0.05%	985,531	63,843	6.48%		
Wyoming	FFM	63,668	63,707	0.06%	67,518	-3,811	-5.64%		
Subtotal for All States Not Expanding Medicaid		21,637,187	21,677,361	0.19%	19,143,366	2,259,318	11.80%		
	Subtotal for States Not Expanding Medicaid that Reported in April and May 2016		21,677,361	Difference April to May 2016 40,174					
Subtotal for States Not Exp Reported in May 2016 and Ju	•		21,402,684		19,143,366	Difference July-Sept 2013 to May 2016 2,259,318			

(-)=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 April and May 2016 data.

Columns V and VI are calculated for only those states that reported data from both May 2016 and the July-Sept. 2013 period.

The subtotals for states reporting data from both May 2016 and the July-Sept. 2013 period exclude ME.

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: April and May 2016 Preliminary Monthly Enrollment

		Total Enrollment							
All States	Total Medicaid and CHIP Enrollment, April 2016 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, May 2016 (Preliminary) (II)	% Change April to May 2016 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July- Sept. 2013 (IV)	Net Change, July-Sept. 2013 to May 2016 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to May 2016 (Columns (IV) and (II)) (VI)			
Total Across All States	72,379,580 72,531,285		0.21% 56,392,477		15,093,251	26.76%			
Total for States that Reported in April and May 2016	72,379,580	72,531,285	Difference April to May 2016 151,705						
Total for States that Reported in May 2016 and July-Sept. 2013		71,485,728		56,392,477	Difference July-Sept 2013 to May 2016 15,093,251				

Column III is calculated for only those states that reported both April and May 2016 data.

Columns V and VI are calculated for only those states that reported data from both May 2016 and the July-Sept. 2013 period.

Totals for states reporting data from both May 2016 and the July-Sept. 2013 period exclude CT and ME.

	Medicaid and CHIP Child Enrollment						Total Medicaid and CHIP Enrollment	Medicaid and CHIP Child Enrollment as a % of Total Enrollment (Columns (VI) and (VII))
State	December, 2015 (I)	January, 2016 (II)	February, 2016 (III)	March, 2016 (IV)	April, 2016 (V)	May, 2016 (Preliminary) (VI)	May, 2016 (Preliminary) (VII)	May, 2016 (Preliminary) (VIII)
Alabama	630,702	635,947	635,749	637,234	638,975	631,863	888,641	71.10%
Alaska	72,472	73,901	74,962	77,113	78,075	76,750	153,741	49.92%
Arizona	-	-		-	-	-	1,682,202	-
Arkansas	413,086	417,029	388,829	392,649	374,740	385,362	843,941	45.66%
California			5,241,680	5,104,737	5,225,309	5,085,773	11,905,332	42.72%
Colorado	612,030	615,352	616,766	619,491	621,630	620,339	1,351,261	45.91%
Connecticut	296,564	300,855	303,564	304,473	306,895	306,947	770,880	39.82%
Delaware	105,494	105,651	106,992	108,306	102,741	102,787	235,154	43.71%
District of Columbia	-	-		-			264,605	-
Florida	2,408,021	2,412,144	2,425,220	2,426,661	2,425,669	2,429,872	3,600,889	67.48%
Georgia	1,248,989	1,254,494	1,257,799	1,260,367	1,263,285	1,239,776	1,756,974	70.56%
Hawaii 	145,018	145,223	145,737	144,026	144,561	144,327	344,432	41.90%
Idaho	208,519	208,491	209,573	210,905	211,642	211,348	286,836	73.68%
Illinois	1,473,489	1,473,411	1,471,678	1,473,568	1,465,478	1,451,889	3,097,016	46.88%
Indiana	772,237	772,006	778,009	782,990	780,839	767,090	1,467,926	52.26%
lowa	297,119	295,156	298,136	303,590	300,517	301,411	619,961	48.62%
Kansas	286,783	281,829	282,415	288,023	292,445	295,328	414,947	71.17%
Kentucky	541,958	542,026	543,906	541,465	553,840	553,947	1,213,629	45.64%
Louisiana	773,282	772,337	771,147	768,945	762,091	758,863	1,057,073	71.79%
Maine	117,445	117,657	116,061	117,524	117,121	115,746	274,677	42.14%
Maryland	557,853	561,385	566,359	574,432	576,522	573,429	1,204,630	47.60%
Massachusetts	655,220	657,542	659,816	652,995	656,753	658,966	1,656,780	39.77%
Michigan	969,945	981,323	980,178	980,866	981,248	968,523	2,303,659	42.04%
Minnesota	514,470	520,729	507,433	510,198	513,030	504,222	1,025,345	49.18%
Mississippi	472,671	476,078	477,551	478,201	477,961	473,101	693,980	68.17%
Missouri	607,821	611,852	616,610	611,810	618,132	620,323	963,241	64.40%
Montana	113,700	113,423	117,054	117,629	118,086	117,459	233,652	50.27%
Nebraska	159,256	159,075	159,459	160,516	160,532	156,064	234,550	66.54%
Nevada	286,876	288,047	290,383	290,282	290,861	292,025	609,004	47.95%
New Hampshire	96,072	96,499	96,281	96,155	95,863	94,223	186,767	50.45%
New Jersey	835,366	837,199	840,688	841,958	843,031	830,375	1,742,422	47.66%
New Mexico	-	-		-	-	-	753,726	-
New York	2,444,247	2,431,933	2,437,584	2,444,592	2,447,833	2,445,348	6,403,030	38.19%
North Carolina	1,374,805	1,386,915	1,401,875	1,406,941	1,410,923	1,375,389	1,987,921	69.19%
North Dakota	41,632	41,852	39,667	38,425	39,713	41,883	89,839	46.62%
Ohio	1,239,392	1,234,760	1,262,049	1,266,425	1,262,703	1,248,479	2,953,740	42.27%
Oklahoma	503,867	508,695	507,633	503,660	502,680	501,349	775,604	64.64%
Oregon	420,563	429,580	434,938	440,202	426,368	419,122	1,046,370	40.05%
Pennsylvania	1,346,833	1,347,634	1,352,454	1,363,699	1,362,517	1,360,180	2,829,011	48.08%
Rhode Island	112,156	112,521	113,061	113,500	113,692	113,933	281,500	40.47%
South Carolina	618,384	620,264	626,398	609,923	615,060	617,824	972,098	63.56%
South Dakota	80,990	81,239	81,610	81,649	81,668	81,865	119,189	68.69%
Tennessee	-	-	-	-	-	-	1,616,888	-
Texas	3,487,094	3,489,666	3,496,767	3,496,330	3,478,334	3,457,807	4,700,879	73.56%
Utah	219,185	221,332	222,301	223,372	222,698	218,601	309,628	70.60%
Vermont	68,902	68,159	68,549	68,653	68,871	67,195	188,560	35.64%
Virginia	641,398	654,793	658,691	660,638	646,898	647,708	967,338	66.96%
Washington	824,956	827,256	828,168	829,139	828,309	824,571	1,772,887	46.51%
West Virginia	208,829	210,088	210,450	212,835	225,731	214,001	565,849	37.82%
Wisconsin	490,360	491,186	493,110	495,267	493,692	494,362	1,049,374	47.11%
Wyoming	41,336	40,801	40,463	40,371	40,404	40,384	63,707	63.39%
Total For All States	29,837,387	29,925,335	35,255,803	35,172,730	35,265,966	34,938,129	72,531,285	51.22%
Number of States Reporting	46	46	47	47	47	47	51	47

For general notes on enrollment data, see Table I: Medicaid and CHIP: April and May 2016 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, VA, WA, WI.

Column VIII is calculated for only those states that reported both May 2016 child enrollment data and May 2016 Total Medicaid and CHIP enrollment data .

New York (I) - (VII) Includes estimated retroactive enrollment.

West Virginia (I) - (IV) Excludes foster care children.

Table 3: Medicaid and CHIP: May 2016 Monthly Applications and Eligibility Determinations

Marketplace Type	New Applications Submitted to Medicaid and	Applications for Financial Assistance Submitted to	Total Applications for					
	CHIP Agencies, May 2016 (Preliminary) (I)	the State Based Marketplace, May 2016 (Preliminary) (II)	Financial Assistance Submitted at State Level, May 2016 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, April 2016 (Preliminary) (IV)	% Change April to May 2016 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, May 2016 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, May 2016 (Preliminary) (VII)	Total New Determinations, May 2016 (Preliminary) (VIII)
	3,025	N/A	3,025	3,389	-10.74%	3,976		3,976
	-	N/A	-	-	-	-	-	-
ership	16,620	N/A	16,620	19,639	-15.37%	20,117	911	21,028
	64,440	-	64,440	74,727	-13.77%	34,857	1,908	36,765
	18,718	2,027	20,745	21,059	-1.49%	16,639	236	16,875
	11,911	4,637	16,548	13,584	21.82%	14,055	110	14,165
ership	2,773	N/A	2,773	2,826	-1.88%	473	15	488
	5,675	-	5,675	5,627	0.85%	6,084	-	6,084
oķ.	3,607	-	3,607	3,718	-2.99%	3,222	135	3,357
ership	68,713	N/A	68,713	72,184	-4.81%	46,252	13,076	59,328
	80,587	N/A	80,587	85,661	-5.92%	35,367	2,576	37,943
ership	5,940	N/A	5,940	19,362	-69.32%	-	-	-
	-	-	-	-	-	75,293	2,669	77,962
	21,584	N/A	21,584	20,430	5.65%	29,172	1,856	31,028
	7,170	85,931	93,101	83,441	11.58%	29,869	2,948	32,817
	13,319	10,039	23,358	22,951	1.77%	-	-	-
ership	60,151	N/A	60,151	63,618	-5.45%	66,177	-	66,177
	7,570	19,011	26,581	23,488	13.17%	19,853	60	19,913
1anagement	3,964	N/A	3,964	4,981	-20.42%	5,692	275	5,967
ok	18,136	-	18,136	18,822	-3.64%	11,516	35	11,551
ership	7,481	N/A	7,481	7,647	-2.17%	4,846	468	5,314
	31,660	N/A	31,660	32,561	-2.77%	12,605	5,228	17,833
ok	8,119	N/A	8,119	8,530	-4.82%		-	-
	-	516,933	516,933	622,589	-16.97%	120,100	11,178	131,278
	1,670	N/A	1,670	1,750	-4.57%	2,540	70	2,610
1anagement	141,357	N/A	141,357	148,750	-4.97%	250,289	-	250,289
ok	29,958		29,958	30,266	-1.02%	26,236	1,937	28,173
	143,406	N/A	143,406	152,775	-6.13%	51,275	8,717	59,992
	2,648		2,648	1,556	70.18%	13,206	2,162	15,368
	3,502	3,623	7,125	7,615	-6.43%	2,695	24	2,719
	18,947	50,456	69,403	72,523	-4.30%	36,525	768	37,293
ership	19,856	N/A	19,856	19,727	0.65%	11,354	592	11,946
Medicaid	822,507	692,657	1,515,164	1,665,796	-9.04%	950,285	57,954	1,008,239
sions in Effect and								
Month	800,923	692,657	1,493,580	1,645,366		921,113	56,098	977,211
dicaid that			1 515 144	1 665 704	May 2016			
Medicaid sions in E Month dicaid tha	iffect and	822,507 Effect and 800,923	822,507 692,657 iffect and 800,923 692,657	822,507 692,657 1,515,164 Effect and 800,923 692,657 1,493,580 at 1,515,164	822,507 692,657 1,515,164 1,665,796 Effect and 800,923 692,657 1,493,580 1,645,366 It 1,515,164 1,665,796	822,507 692,657 1,515,164 1,665,796 -9.04% Iffect and 800,923 692,657 1,493,580 1,645,366 -9.23% Difference April to May 2016	822,507 692,657 1,515,164 1,665,796 -9.04% 950,285 Effect and 800,923 692,657 1,493,580 1,645,366 -9.23% 921,113 Difference April to May 2016 -150,632	822,507 692,657 1,515,164 1,665,796 -9.04% 950,285 57,954 iffect and 800,923 692,657 1,493,580 1,645,366 -9.23% 921,113 56,098 Difference April to May 2016 1,515,164 1,665,796 -150,632

^{^=}Louisiana's effective date for implementing the expansion is July I, 2016. LA is not included in the "Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month."

^{**=} 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 April and May 2016 Applications data (subtotals exclude AZ, KY).

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

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

Alaska (I), (III), (IV) Includes renewals converting to MAGI methodology.

Alaska (VI), (VIII) Includes CHIP

California (I), (IV) Reflects primarily newly-determined and likely eligible Medicaid applicants,

California

as well as some ongoing caseload activity conducted via the state's health exchange automation system.

California (I), (III), (IV) Does not include data from all consortia.

California (VI) Reflects primarily newly-determined and likely eligible Medicaid applicants

California

as well as some ongoing caseload activity conducted via the state's health exchange automation system.

California (VI), (VII), (VIII) Does not include all eligibility determinations.

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) Data may contain duplicate applications, and may include some change in circumstance updates that are not new applications for coverage.

Connecticut (VI) Count is of households, not individuals.

District of Columbia (I) Includes SBM data.

District of Columbia (III), (IV) Includes renewals.

District of Columbia (VI) Includes all determinations (e.g., renewals); includes CHIP.

Hawaii (I) Number includes all applications for insurance affordability programs.

Iowa (VI) Does not include MAGI determinations.

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

Iowa (VI), (VII) Includes renewals

Maryland (VI), (VII), (VIII) Count is of households, not individuals. Includes State Medicaid Agency data and SBM data from 5/1 - 5/31.

Michigan (VI) Does not include MAGI determinations.

 Michigan
 (VI)
 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.

Ohio (I), (III), (IV) Includes renewals. May include some applications only for other benefits, not for Medicaid and CHIP.

Ohio (VI) Includes CHIP.
Ohio (VI), (VIII) Includes renewals.

Oregon (VI) Count is of households, not individuals.

Oregon (VI), (VIII) Includes MAGI populations only.

Pennsylvania (I), (III), (IV) Includes renewals.
Pennsylvania (VI), (VIII) Includes renewals.

Rhode Island (VI), (VII) Includes only determinations through new MAGI system.

Vermont (VI) Includes renewals.

Table 3: Medicaid and CHIP: May 2016 Monthly Applications and Eligibility Determinations

				Applications			Determinations		
States Not Expanding Medicaid	Marketplace Type	New Applications Submitted to Medicaid and CHIP Agencies, May 2016 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplace, May 2016 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, May 2016 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, April 2016 (Preliminary) (IV)	% Change April to May 2016 (Columns (IV) and (III)) (V)	Individuals Determined Eligible for Medicaid at Application, May 2016 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, May 2016 (Preliminary) (VII)	Total New Determinations, May 2016 (Preliminary) (VIII)
Alabama	FFM	15,466	N/A	15,466	15,654	-1.20%	24,388	2,913	27,301
Florida	FFM	289,600	N/A	289,600	321,250	-9.85%	177,490	14,122	191,612
Georgia	FFM	73,538	N/A	73,538	74,546	-1.35%	40,540	1,858	42,398
Idaho	SBM	7,392	-	7,392	7,661	-3.51%	4,864	295	5,159
Kansas	Plan Management	-	N/A	-		-	-	-	-
Maine	Plan Management	1,669	N/A	1,669	1,686	-1.01%	10,490	342	10,832
Mississippi	FFM/SBM-SHOP	16,176	N/A	16,176	16,150	0.16%	10,135	361	10,496
Missouri	FFM	17,673	N/A	17,673	19,019	-7.08%	8,404		8,404
Nebraska	Plan Management	6,483	N/A	6,483	6,233	4.01%	5,737	693	6,430
North Carolina	FFM	21,308	N/A	21,308	22,799	-6.54%	42,753	5,028	47,781
Oklahoma	FFM	40,485	N/A	40,485	43,410	-6.74%	34,112	5,218	39,330
South Carolina	FFM	18,407	N/A	18,407	20,780	-11.42%	5,292	89	5,381
South Dakota	Plan Management	2,446	N/A	2,446	2,426	0.82%	1,532		1,532
Tennessee	FFM	522	N/A	522	491	6.31%		368	368
Texas	FFM	107,997	N/A	107,997	109,805	-1.65%	102,162	16,469	118,631
Utah	FFM/SBM-SHOP	20,876	N/A	20,876	19,492	7.10%	49,458		49,458
Virginia	Plan Management	26,023	N/A	26,023	27,306	-4.70%	15,239	706	15,945
Wisconsin	FFM	22,379	N/A	22,379	19,353	15.64%	16,247	1,516	17,763
Wyoming	FFM	1,442	N/A	1,442	1,518	-5.01%	985	64	1,049
Subtotal for All States Not I	Expanding Medicaid	689,882	-	689,882	729,579	-5.45%	549,828	50,042	599,870
Subtotal for States Not Exp. Reported in April and May 2	•			689,882	729,579	Difference April to May 2016 -39,697			
Total Across All States		1,512,389	692,657	2,205,046	2,395,375	-7.95%	1,500,113	107,996	1,608,109
Total for States that Report	ed in April and May 2016			2,205,046	2,395,375	Difference April to May 2016 -190,329			

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

Column V is calculated for only those states that reported April and May 2016 Applications data (subtotals exclude KS; totals exclude AZ, KS, KY).

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

 $\mbox{\# Percent change figures in the subtotal of column V exclude TN, which only reports CHIP data. } \\$

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

F	lorida	(I), (III), (IV)	Includes account transfers from the FFM assessed for CHIP.
S	outh Dakota	(I), (III), (IV)	Includes account transfers from the FFM.
s	outh Dakota	(VI)	Includes CHIP.
Т	ennessee	(I), (III)	Includes only unborn CHIP children.
Т	ennessee	(IV)	Data are from CHIP agency only. Medicaid reporting capability in development.
Т	ennessee	(VII), (VIII)	Includes only unborn CHIP children.
Т	ennessee	(VI)	Excluded because data is only from CHIP agency.
u	Jtah	(I), (III), (IV)	Includes applications for non-health coverage programs.
U	Jtah	(I), (III), (IV)	Includes account transfers from the FFM.
٧	'irginia	(I), (III), (IV)	Includes renewals.
٧	'irginia	(VI), (VII)	Includes renewals.
٧	Visconsin	(VI), (VII)	Count is of unique individuals receiving determinations, not unique determinations.
٧	Vyoming	(I), (III), (IV)	Does not include applications received online.
٧	Vyoming	(IV)	Corrected.

APPENDIX A: Description of Data Elements in Tables

Table 1: Medicaid and CHIP: April and May 2016 Preliminary Monthly Enrollment

Total Medicaid and CHIP Enrollment, April 2016 (Preliminary) (I) Total Medicaid and CHIP Enrollment, May 2016 (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 May 2016 data was submitted in June and is considered preliminary.²⁸ The April 2016 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 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 March 2016 to May 2016 (III)

The percentage change in **Total Medicaid and CHIP Enrollment**, **May 2016** (**Preliminary**) (**II**) as compared to **Total Medicaid and CHIP Enrollment**, **April 2016** (**Preliminary**) (**I**) 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

²⁸ 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.

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 May 2016 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.²⁹ Such exclusions were not possible.

Net Change, July-Sept. 2013 to May 2016 (V)

The net change in **Total Medicaid and CHIP Enrollment, May 2016** (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 May 2016 (VI)

The percentage change in **Total Medicaid and CHIP Enrollment**, **May 2016** (**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 April 2016 is available on the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on Medicaid.gov. This data is updated more than 30 days after the close of the reporting period, to account for retroactive Medicaid eligibility and other updates to the preliminary data provided soon after the close of the reporting period, which forms the basis for this report.

<u>Table 2: Medicaid and CHIP: May 2016 Preliminary Monthly Medicaid Child and CHIP Enrollment</u>

Medicaid Child and CHIP Enrollment, December 2015 - April 2016 ((I)-(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

-

²⁹ See footnote 28.

 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.³⁰ 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.

Medicaid Child and CHIP Enrollment, May 2016 (Preliminary) (VI) As of the last day of the calendar month—

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

States use the definition of "child" as included in the state's Medicaid or CHIP state plan. This definition may vary from state to state. A few states cover pregnant women through CHIP, which means this figure may include some adults.³¹ The May 2016 data was submitted in June and is considered preliminary.³²

Total Medicaid and CHIP Enrollment, May 2016 (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 2016 data was submitted in June and is considered preliminary.³³ This data is

³⁰ 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, Virginia, Washington, and Wisconsin. Benefits offered vary by state.

³¹ See footnote 30.

³² See footnote 28.

³³ See footnote 28.

the same as the data reported in column (II) in Table 1: Medicaid and CHIP: April 2016 and May 2016 Preliminary Monthly Enrollment.

Medicaid and CHIP Child Enrollment as a % of Total Enrollment (VIII) Medicaid and CHIP Child Enrollment, May 2016 (Preliminary) (VI) as a percentage of Total Medicaid and CHIP Enrollment, May 2016 (Preliminary) (VII).

<u>Table 3: Medicaid and CHIP: May 2016 Monthly Applications and Eligibility</u> **Determinations**

Application Data Elements

New Applications Submitted to Medicaid and CHIP Agencies, May 2016 (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). 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. The May 2016 data was submitted in June and is considered preliminary.

Applications for Financial Assistance Submitted to the State-Based Marketplace, May 2016 (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 May 2016 data was submitted in June and is considered preliminary.³⁷

Total Applications for Financial Assistance Submitted at the State Level, May 2016 (Preliminary) (III)

³⁴ 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.

³⁵ 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.

³⁶ See footnote 28.

³⁷ See footnote 28.

Total Applications for Financial Assistance Submitted at the State Level, March 2016 (Preliminary) (IV)

For states with an SBM, the data reflects the total of Applications Submitted to Medicaid and CHIP Agencies, May 2016 (Preliminary) plus Applications for Financial Assistance Submitted to the State-Based Marketplace, May 2016 (Preliminary). For FFM states, the data reflects Applications Submitted to Medicaid and CHIP Agencies, May 2016 (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 May 2016 data was submitted in June and is considered preliminary. The April 2016 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 on Medicaid.gov.

Percentage Change March 2016 to May 2016 (V)

The percentage change in **Total Applications for Financial Assistance Submitted at the State Level, May 2016 (Preliminary) (III)** as compared to **Total Preliminary Applications Submitted at the State Level, March 2016 (Preliminary) (IV)** is calculated for states that provided data for both periods.

Eligibility Determination Data Elements

Individuals Determined Eligible for Medicaid at Application, May 2016 (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.³⁸ 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 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.³⁹ 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

³⁸ 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.html.

³⁹ As described in the state-specific notes in the tables, some states could not provide data that met our specifications. Notes are provided in cases where the state included renewals in this data element.

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.

Individuals Determined Eligible for CHIP at Application, May 2016 (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 2016 (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.