
Medicaid & CHIP: March 2015 Monthly Applications, Eligibility Determinations and Enrollment Report

June 4, 2015

Background

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

As with previous reports, this month’s report focuses on those indicators that relate to 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

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

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

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

⁴ The Affordable Care Act’s “no wrong door” policy means that individuals can apply for health insurance coverage through the Marketplace or the Medicaid or CHIP agency (if a separate agency) in their state and receive an eligibility determination for the health insurance program for which they are eligible. Information on applications received by (and Medicaid and CHIP assessments and determinations made by) the Marketplaces is included in the Health Insurance Marketplace 2015 Open Enrollment Period: March Enrollment Report (March 10, 2015). Because of the integrated nature of eligibility determination in State-Based Marketplace (SBM) states, some SBM data is reported in both the March 10 report and this report. However, the March 10 report includes data from November 15, 2014 through February 15, 2015, while this report includes data from March 1 - March 31, 2015.

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(FFM) in states for which the FFM makes an eligibility assessment (and the state then completes the Medicaid or CHIP determination); and

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

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

Medicaid and CHIP March 2015 Enrollment Data Highlights

Total Individuals Enrolled in Medicaid and CHIP in March 2015 in All States Reporting March Data (includes all individuals enrolled in the program on the last day of the reporting period).⁵	71,050,561 ⁶
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- Nearly 71.1 million individuals were enrolled in Medicaid and CHIP in March 2015.⁷ This enrollment count is point-in-time (on the last day of the month) and includes all enrollees in the Medicaid and CHIP programs who are receiving a comprehensive benefit package.
- 534,845 additional people were enrolled in March 2015 as compared to February 2015 in the 51 states that reported comparable March and February 2015 data.⁸
- Looking at the additional enrollment since October 2013 when the initial Marketplace open enrollment period began, among the 49 states reporting both March 2015 enrollment data and data from July-September of 2013, over 12.2 million additional individuals are enrolled in Medicaid and CHIP as of March 2015, an approximately 21.2 percent increase over the average

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

⁶ This represents enrollment in all 51 states. 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 March 2015 after the close of the month due to retroactive eligibility under Medicaid or similar reasons. In Medicaid, individuals are potentially eligible for retroactive coverage for incurred health care costs dating back to 90 days prior to the date of application.

⁷ See footnote 5 and 6.

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

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monthly enrollment for July through September of 2013.⁹ (Connecticut and Maine are not included in this count.)¹⁰

- Among states that had implemented the Medicaid expansion and were covering newly eligible adults in March 2015, Medicaid and CHIP enrollment rose by approximately 28.1 percent compared to the July-September 2013 baseline period, while states that have not, to date, expanded Medicaid reported an increase of nearly 8.6 percent over the same period.¹¹
- Half of the 28 states that had implemented the Medicaid expansion and were covering newly eligible adults in March 2015, and that reported relevant data for both March and the July-September 2013 baseline period, experienced an enrollment increase of 30 percent or more.¹²
- These enrollment counts are in addition to the enrollment increases from the nearly 950,000 individuals who gained coverage as a result of the Affordable Care Act before open enrollment began.¹³ Seven states implemented an “early option” to expand Medicaid coverage to adults

⁹ The net change in enrollment is based on data from the 49 states reporting both March 2015 enrollment data and data from July-September 2013 (the baseline period before the initial Marketplace open enrollment period) that contains comparable enrollment groups. These 49 states report total enrollment in March of more than 70 million individuals, and July-September 2013 average enrollment of nearly 57.8 million. For March 2015, we are reporting growth of 12,246,006 compared to July-September 2013. This figure exceeds the 11,718,178 in net enrollment growth that was included in the *Medicaid and CHIP: February 2015 Applications, Eligibility Determinations, and Enrollment Report* by nearly 528,000. This difference does not match the 534,845 increase reported above for the February to March 2015 period because the 534,845 figure is based on 51 states, while the nearly 528,000 figure is based on only 49 states. This means that the summary statistics in the February 2015 report are not perfectly comparable to the figures in this report. See the notes in table 1 for state-specific caveats regarding the reported data. Because the July-September 2013 data may contain individuals with retroactive Medicaid coverage, and the February and March 2015 data included in this report is preliminary (see footnote 6), the difference reported here between March 2015 and July-September 2013 period is likely understated.

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

¹¹ Percentage calculations are based only on states reporting in both March 2015 and the July through September 2013 baseline period. See footnote 9 for additional information.

¹² Medicaid expansion states that reported data in both periods that showed a greater than 30 percent increase in enrollment are: Arkansas, California, Colorado, Kentucky, Maryland, Massachusetts, Nevada, New Hampshire, New Jersey, New Mexico, Oregon, Rhode Island, Washington, and West Virginia (10 of these 14 states also run State-Based Marketplaces). In prior months, Minnesota and Vermont have been included on this list, but are not included this month. Minnesota transitioned approximately 90,000 individuals from its Medicaid program to its Basic Health Program on January 1, 2015. Vermont updated its methodology in January 2015 to better align with CMS’s data specifications, which caused a decline in its reported enrollment growth. Among expansion states, the percentage change in the number of individuals enrolled varies based on the size of the coverage expansion that is occurring in 2014. States that previously offered comprehensive coverage to many adults with incomes under 133 percent of the FPL will likely see a smaller percent increase than those who previously offered only coverage for very low-income parents. Additionally, in most states that provided Medicaid coverage to adults with incomes above 133 percent of the FPL prior to 2014, those individuals are no longer eligible for or enrolled in Medicaid and instead may be eligible to purchase qualified health plan coverage through the Marketplace, and may be eligible for advanced payments of premium tax credits and cost-sharing reductions; this change will reduce their overall Medicaid enrollment.

¹³ Enrollment data for California, Colorado, the District of Columbia, Minnesota, and New Jersey was reported to CMS by the state and is from the end of 2013. Data for Connecticut and Washington is from 2012 (Source: Sommers, B. D., Arntson, E., Kenney, G. M., et al., “Lesson from Early Medicaid Expansions under Health Reform:

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with incomes up to 133 percent of the FPL between April 1, 2010 and January 1, 2014, using new state plan authority provided by the Affordable Care Act or a demonstration under section 1115 of the Social Security Act building upon that authority.¹⁴

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

Interviews with Medicaid Officials”, *Medicare & Medicaid Research Review*, 2013: Volume 3, number 4 (http://www.cms.gov/mmrr/Downloads/MMRR2013_003_04_a02.pdf).

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

¹⁵ See footnote 6 for additional information on retroactive eligibility.

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

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Child Enrollment

Total Medicaid child and CHIP enrollment in the 46 states reporting in March 2015¹⁷	29,401,734 ¹⁸
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We are also reporting separately on the total number of individuals enrolled in CHIP and children enrolled in Medicaid for those states that are reporting the relevant data for each month in the six-month period between September 2014 and March 2015.¹⁹ This data appears in Table 2.²⁰

- In the 46 states that reported relevant data for the month of March, over 29.4 million individuals are enrolled in CHIP or are children enrolled in the Medicaid program.
- In the 46 states that reported both March 2015 total Medicaid child and CHIP enrollment and total Medicaid and CHIP enrollment data, children enrolled in the Medicaid program and individuals enrolled in CHIP make up approximately 54 percent of total Medicaid and CHIP program enrollment.

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

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

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

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

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

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

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Medicaid and CHIP March 2015 Application and Eligibility Data Highlights

	March 2015 Monthly in All States Reporting
<i>Applications</i>	
Applications for Financial Assistance Initially Received by State Medicaid and CHIP Agencies (note that more than one individual may be included on an application and some states have included renewals and account transfers from the FFM)	1,926,371 ²²
Applications for Financial Assistance Initially Received by State-Based Marketplaces (note that more than one individual may be included on an application)	496,785 ²³
<i>Eligibility Determinations</i>	
Individuals Determined Eligible for Medicaid and CHIP by State Agencies at Application (includes those newly eligible under the Affordable Care Act and those eligible under prior law)	2,494,924 ²⁴

During the month of March 2015, over 2.4 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 1.9 million received directly by state Medicaid and CHIP agencies and almost 500,000 received by SBMs).²⁵ Table 3 includes a comparison of the total applications for financial assistance to state agencies (including applications for Medicaid, CHIP, and financial assistance in the Marketplace in SBM states) in March 2015 as compared to the prior month (February 2015). Note that these application numbers do not include applications received at the FFM and subsequently transferred to state Medicaid or CHIP agencies (see State-by-State Table notes for exceptions), including

²² See the notes in table 3 for state-specific caveats regarding the reported data; because of reporting capability, some states included some renewals, applications to SBMs, or transfers from the FFM in the data. Note that Washington did not report application data this month, unlike in prior months.

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

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

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

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applications received by the FFM during the Marketplace open enrollment period that began on November 15th.²⁶

States reported making nearly 2.5 million eligibility determinations for Medicaid and CHIP in March 2015 for individuals applying for coverage. As described above and in prior reports, this figure includes all of state Medicaid and CHIP agencies' determinations for individuals eligible under prior law, as well as through coverage expansions under the Affordable Care Act; note that, due to limitations on the data some states are able to report, the number of determinations includes renewals in those states.²⁷ Additionally, the determination number does not represent unique individuals, as an individual may have more than one eligibility determination. It is important to keep in mind that differences in volume of administrative transfers and other types of one-time enrollment activities can affect month-to-month comparisons of eligibility data.²⁸

See the Medicaid and CHIP Application, Eligibility Determination, and Enrollment Data page on Medicaid.gov for preliminary and updated data on applications and determinations for October 2013 through March 2015.

Data Limitations

CMS established a common set of definitions for consistency in reporting the Medicaid and CHIP performance indicators; these definitions appear in Appendix A. States are at various points in the process of transitioning from their historic definitions to the updated standardized reporting specifications. Where states have provided data that vary from our specifications, we have included that information in notes in the State-by-State tables.

State-by-State Tables

Below are 3 tables with state-specific data. The first table contains data on the total number of people enrolled in state Medicaid and CHIP programs in March 2015. The second table contains data on children enrolled in Medicaid and CHIP. The third table contains data on Medicaid and CHIP applications and eligibility determinations for the month of March 2015. The description of each data element

²⁶ See footnote 22.

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

²⁸ A number of states are employing a new tool for facilitating Medicaid enrollment to conduct an "administrative transfer" to Medicaid using income information from the Supplemental Nutritional Assistance Program (SNAP) or the CHIP program (for the parents of CHIP enrollees). The following states have implemented administrative transfers since this authority was made available: Arkansas, California, Illinois, New Jersey, Oregon, and West Virginia. California and Oregon conducted transfers in March 2015; however, California was not able to report how many individuals it transferred this month. As of the end of March 2015, 726,596 individuals have been determined eligible for Medicaid or CHIP as a result of this transitional strategy in the six states that have implemented it. Michigan received approval to conduct administrative transfers but it has not yet implemented this targeted enrollment strategy.

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included in the table is available in Appendix A. Unless otherwise noted, the reporting period for all elements is March 1 - 31, 2015.

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

States Expanding Medicaid	Marketplace Type	Enrollment					
		Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, March 2015 (Preliminary) (II)	% Change February to March 2015 (Columns I) and (II) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to March 2015 (Columns IV) and (II) (V)	% Change, July-Sept. 2013 to March 2015 (Columns V) and (II) (VI)
Arizona	FFM	1,497,026	1,516,700	1.31%	1,201,770	314,930	26.21%
Arkansas	Partnership	831,643	831,098	-0.07%	556,851	274,247	49.25%
California	SBM	12,189,535	12,248,555	0.48%	9,157,000	3,091,555	33.76%
Colorado	SBM	1,216,592	1,232,504	1.31%	783,420	449,084	57.32%
Connecticut	SBM	722,571	726,253	0.51%	-	-	-
Delaware	Partnership	237,445	238,621	0.50%	223,324	15,297	6.85%
District of Columbia	SBM	256,751	255,519	-0.48%	235,786	19,733	8.37%
Hawaii	SBM	319,078	320,483	0.44%	288,357	32,126	11.14%
Illinois	Partnership	3,124,202	3,168,789	1.43%	2,626,943	541,846	20.63%
Indiana ^A	FFM	1,211,921	1,238,519	2.19%	1,120,674	117,845	10.52%
Iowa	Partnership	574,057	585,276	1.95%	493,515	91,761	18.59%
Kentucky	SBM	1,121,730	1,140,261	1.65%	606,805	533,456	87.91%
Maryland	SBM	1,176,350	1,182,067	0.49%	856,297	325,770	38.04%
Massachusetts	SBM	1,658,348	1,692,477	2.06%	1,296,359	396,118	30.56%
Michigan	Partnership	2,280,908	2,311,660	1.35%	1,912,009	399,651	20.90%
Minnesota	SBM	1,029,334	1,033,526	0.41%	873,040	160,486	18.38%
Nevada	SBM ^{**}	556,008	550,816	-0.93%	332,560	218,256	65.63%
New Hampshire	Partnership	173,286	174,908	0.94%	127,082	47,826	37.63%
New Jersey	FFM	1,692,754	1,699,114	0.38%	1,283,851	415,263	32.35%
New Mexico	SBM ^{**}	691,895	697,425	0.80%	457,678	239,747	52.38%
New York	SBM	6,376,105	6,398,893	0.36%	5,678,417	720,476	12.69%
North Dakota	FFM	87,956	89,143	1.35%	69,980	19,163	27.38%
Ohio	Plan Management	2,953,995	2,951,420	-0.09%	2,341,481	609,939	26.05%
Oregon	SBM ^{**}	1,058,414	1,083,930	2.41%	626,356	457,574	73.05%
Pennsylvania	FFM	2,474,050	2,539,514	2.65%	2,386,046	153,468	6.43%
Rhode Island	SBM	270,018	271,524	0.56%	190,833	80,691	42.28%
Vermont	SBM	181,072	183,618	1.41%	161,081	22,537	13.99%
Washington	SBM	1,674,671	1,685,329	0.64%	1,117,576	567,753	50.80%
West Virginia	Partnership	526,778	527,957	0.22%	354,544	173,413	48.91%
Subtotal for All States Expanding Medicaid		48,164,493	48,575,899	0.85%	37,359,635	10,490,011	28.08%
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		48,164,493	48,575,899	0.85%	37,359,635	10,490,011	28.08%
Subtotal for States Expanding Medicaid that Reported in February and March 2015		48,164,493	48,575,899	Difference February to March 2015 411,406			
Subtotal for States Expanding Medicaid that Reported in March 2015 and July-Sept. 2013			47,849,646		37,359,635	Difference July-Sept 2013 to March 2015 10,490,011	

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

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

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

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

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

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

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

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

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

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

States Not Expanding Medicaid	Marketplace Type	Enrollment					
		Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, March 2015 (Preliminary) (II)	% Change February to March 2015 (Columns I) and (II) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to March 2015 (Columns IV) and (II) (V)	% Change, July-Sept. 2013 to March 2015 (Columns V) and (II) (VI)
Alabama	FFM	827,523	827,114	-0.05%	799,176	27,938	3.50%
Alaska	FFM	121,074	121,955	0.73%	122,334	-379	-0.31%
Florida	FFM	3,436,875	3,482,379	1.32%	3,104,996	377,383	12.15%
Georgia	FFM	1,721,203	1,728,540	0.43%	1,535,090	193,450	12.60%
Idaho	SBM	274,555	276,235	0.61%	238,150	38,085	15.99%
Kansas	Plan Management	405,431	406,312	0.22%	378,160	28,152	7.44%
Louisiana	FFM	1,061,494	1,071,413	0.93%	1,019,787	51,626	5.06%
Maine	Plan Management	280,871	284,206	1.19%	-	-	-
Mississippi	FFM/SBM-SHOP	711,984	712,313	0.05%	637,229	75,084	11.78%
Missouri	FFM	875,879	893,452	2.01%	846,084	47,368	5.60%
Montana*	Plan Management	169,708	171,778	1.22%	148,974	22,804	15.31%
Nebraska	Plan Management	236,754	238,380	0.69%	244,600	-6,220	-2.54%
North Carolina	FFM	1,855,669	1,847,722	-0.43%	1,595,952	251,770	15.78%
Oklahoma	FFM	811,378	808,307	-0.38%	790,051	18,256	2.31%
South Carolina	FFM	979,282	983,208	0.40%	889,744	93,464	10.50%
South Dakota	Plan Management	118,470	118,794	0.27%	115,501	3,293	2.85%
Tennessee	FFM	1,446,383	1,460,106	0.95%	1,244,516	215,590	17.32%
Texas	FFM	4,655,609	4,655,372	-0.01%	4,441,605	213,767	4.81%
Utah	FFM/SBM-SHOP	296,278	301,200	1.66%	294,029	7,171	2.44%
Virginia	Plan Management	943,118	952,536	1.00%	935,434	17,102	1.83%
Wisconsin	FFM	1,053,400	1,063,425	0.95%	985,531	77,894	7.90%
Wyoming	FFM	68,285	69,915	2.39%	67,518	2,397	3.55%
Subtotal for All States Not Expanding Medicaid		22,351,223	22,474,662	0.55%	20,434,461	1,755,995	8.59%
Subtotal for States Not Expanding Medicaid that Reported in February and March 2015		22,351,223	22,474,662	Difference February to March 2015 123,439		Difference July-Sept 2013 to March 2015 1,755,995	
Subtotal for States Not Expanding Medicaid that Reported in March 2015 and July-Sept. 2013			22,190,456		20,434,461		

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

* = Montana has indicated its intention to expand Medicaid coverage. CMS is committed to supporting state flexibility and is currently working with the state on solutions that ensure affordability and access. Partnership, Plan Management, FFM/SBM-SHOP are all types of FFMs.

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

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

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

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

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

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

Total Enrollment						
	Total Medicaid and CHIP Enrollment, February 2015 (Preliminary) (I)	Total Medicaid and CHIP Enrollment, March 2015 (Preliminary) (II)	% Change February to March 2015 (Columns (I) and (II)) (III)	Average Monthly Medicaid and CHIP Enrollment, July-Sept. 2013 (IV)	Net Change, July-Sept. 2013 to March 2015 (Columns (IV) and (II)) (V)	% Change, July-Sept. 2013 to March 2015 (Columns (V) and (II)) (VI)
All States	70,515,716	71,050,561	0.76%	57,794,096	12,246,006	21.19%
Total Across All States			Difference February to March 2015			
Total for States that Reported in February and March 2015	70,515,716	71,050,561	534,845			
Total for States that Reported in March 2015 and July-Sept. 2013		70,040,102		57,794,096	12,246,006	

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

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

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

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

State	Medicaid Child and CHIP Enrollment										Total Medicaid and CHIP Enrollment (VII)	March 2015 (Preliminary) (VII)	Medicaid Child and CHIP Enrollment as a % of Total Enrollment (Columns (VI) and (VII))
	October, 2014 (I)	November, 2014 (II)	December, 2014 (III)	January, 2015 (IV)	February, 2015 (V)	March 2015 (Preliminary) (VI)	March 2015 (Preliminary) (VI)	March 2015 (Preliminary) (VII)	March 2015 (Preliminary) (VII)				
Alabama	642,688	643,208	642,821	640,576	620,690	620,038	620,038	827,114	74.96%				
Alaska	74,524	74,073	74,043	72,392	72,329	69,908	69,908	121,955	57.32%				
Arizona	-	-	-	-	-	-	-	1,516,700	-				
Arkansas	431,490	435,048	433,875	432,691	432,802	441,568	441,568	831,098	53.13%				
California	-	-	-	-	-	-	-	12,248,555	-				
Colorado	568,093	569,320	574,528	577,098	584,026	586,939	586,939	1,232,504	47.62%				
Connecticut	320,127	316,325	300,570	293,091	292,114	292,114	292,114	276,253	40.22%				
Delaware	102,304	103,176	104,105	104,358	104,574	104,840	104,840	238,621	43.94%				
District of Columbia	-	-	-	-	-	-	-	355,519	-				
Florida	2,279,731	2,269,590	2,277,678	2,292,762	2,311,929	2,338,392	2,338,392	3,482,379	67.15%				
Georgia	1,244,512	1,245,101	1,245,982	1,240,722	1,238,476	1,214,894	1,214,894	1,728,540	70.28%				
Hawaii	131,342	134,059	134,788	136,483	138,174	139,347	139,347	320,483	43.48%				
Idaho	198,704	199,073	200,128	201,217	203,014	203,487	203,487	276,235	73.66%				
Illinois	1,318,476	1,313,095	1,306,829	1,305,441	1,311,955	1,492,468	1,492,468	3,166,789	47.10%				
Indiana	719,398	717,576	722,093	727,782	735,405	726,957	726,957	1,238,519	58.70%				
Iowa	287,255	287,046	285,924	285,888	285,741	290,737	290,737	585,276	49.68%				
Kansas	285,069	285,312	285,658	289,107	289,080	289,763	289,763	406,312	71.32%				
Kentucky	460,921	457,422	466,254	475,918	481,963	489,540	489,540	1,140,261	42.93%				
Louisiana	753,063	754,564	754,849	758,881	763,246	767,885	767,885	1,071,413	71.67%				
Maine	122,143	120,993	120,778	121,079	121,200	120,018	120,018	284,206	42.23%				
Maryland	570,909	574,748	584,867	591,294	595,044	592,886	592,886	1,182,067	50.11%				
Massachusetts	577,093	608,120	624,329	640,733	654,166	658,049	658,049	1,674,477	38.88%				
Michigan	984,534	1,001,051	988,640	993,979	984,941	984,941	984,941	2,311,660	42.61%				
Minnesota	490,143	495,228	495,243	499,833	499,833	491,835	491,835	1,033,526	47.59%				
Mississippi	482,092	484,959	488,502	491,042	491,630	487,340	487,340	712,313	68.42%				
Missouri	533,716	541,063	541,683	545,594	554,306	564,672	564,672	893,452	63.20%				
Montana	102,869	100,948	103,432	105,697	106,990	106,990	106,990	171,778	62.28%				
Nebraska	160,854	159,470	160,586	161,502	159,448	165,454	165,454	238,380	66.89%				
Nevada	285,364	276,856	272,289	265,496	264,873	265,454	265,454	550,816	48.19%				
New Hampshire	91,942	91,731	92,472	92,289	92,189	91,948	91,948	174,908	52.57%				
New Jersey	812,669	817,006	819,893	816,704	816,704	816,948	816,948	1,699,114	48.08%				
New Mexico	-	-	-	-	-	-	-	697,425	-				
New York	2,386,591	2,387,338	2,396,294	2,396,148	2,411,958	2,412,155	2,412,155	6,398,893	37.70%				
North Carolina	1,193,317	1,235,442	1,251,499	1,256,336	1,260,808	1,259,624	1,259,624	1,847,722	68.17%				
North Dakota	40,253	40,047	40,525	40,529	41,175	41,907	41,907	89,143	47.01%				
Ohio	1,256,684	1,264,617	1,273,228	1,282,648	1,288,806	1,280,816	1,280,816	2,951,420	43.40%				
Oklahoma	519,968	519,185	515,178	521,195	523,376	522,032	522,032	808,307	64.58%				
Oregon	445,910	449,535	429,592	434,413	442,648	442,978	442,978	1,083,930	40.87%				
Pennsylvania	1,289,774	1,284,591	1,281,125	1,294,067	1,301,118	1,311,813	1,311,813	2,539,514	51.66%				
Rhode Island	105,304	106,783	107,292	110,321	110,688	106,597	106,597	271,524	39.26%				
South Carolina	657,480	655,926	656,931	649,680	649,680	648,931	648,931	983,208	65.96%				
South Dakota	78,903	79,054	79,616	80,097	80,703	80,804	80,804	118,794	68.02%				
Tennessee	-	-	-	-	-	-	-	1,460,106	-				
Texas	3,475,401	3,470,512	3,477,020	3,464,326	3,466,406	3,430,233	3,430,233	4,655,372	73.68%				
Utah	208,620	208,306	209,252	211,592	214,122	211,629	211,629	301,200	70.26%				
Vermont	-	69,306	69,312	69,497	69,878	69,796	69,796	183,618	38.01%				
Virginia	640,670	651,943	651,609	656,917	657,736	645,829	645,829	952,536	67.80%				
Washington	756,488	751,642	765,628	767,557	781,775	781,303	781,303	1,685,329	46.36%				
West Virginia	208,552	207,646	203,283	207,363	206,933	206,477	206,477	527,957	39.11%				
Wisconsin	491,325	488,148	487,464	488,890	491,576	495,079	495,079	1,063,425	46.55%				
Wyoming	46,992	46,135	47,092	44,681	44,919	45,424	45,424	69,915	64.97%				
Total For All States	29,062,257	29,193,267	29,240,639	29,333,776	29,452,459	29,440,734	29,440,734	71,050,561	53.58%				
Number of States Reporting	45	46	46	46	46	46	46	51	46				

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

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

States that provide coverage to pregnant women through CHIP and whose child enrollment figures include pregnant women are NJ, RI, CO, AR, CA, LA, MA, MI, MN, NE, OK, OR, TN, WA, WI. Column VIII is calculated for only those states that reported both March 2015 child enrollment data and March 2015 Total Medicaid and CHIP enrollment data.

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

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

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

States Expanding Medicaid	Marketplace Type	Applications					Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, March 2015 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplaces, March 2015 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, March 2015 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, February 2015 (Preliminary) (IV)	% Change February to March 2015 (Columns IV) and (III) (V)	Individuals Determined Eligible for Medicaid at Application, March 2015 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, March 2015 (Preliminary) (VII)	Total New Determinations, March 2015 (Preliminary) (VIII)
Arizona	FFM	-	N/A	-	-	-	-	-	-
Arkansas	Partnership	18,861	N/A	18,861	21,432	-12.00%	11,576	428	12,004
California	SBM	56,744	-	56,744	88,233	-35.69%	410,684	-	410,684
Colorado	SBM	20,326	2,398	22,724	43,359	-47.59%	20,325	215	20,540
Connecticut	SBM	13,075	11,529	24,604	36,053	-31.76%	30,641	841	31,482
Delaware	Partnership	1,413	N/A	1,413	4,605	-69.32%	1,552	55	1,607
District of Columbia	SBM	9,464	3,048	12,512	12,239	2.23%	10,212	-	10,212
Hawaii	SBM	4,325	-	4,325	6,747	-35.90%	3,289	168	3,457
Illinois	Partnership	77,512	N/A	77,512	121,652	-36.28%	81,941	21,668	103,609
Indiana ^a	FFM	127,282	N/A	127,282	123,027	3.46%	95,884	4,061	99,945
Iowa	Partnership	16,311	N/A	16,311	23,751	-31.32%	14,595	-	14,595
Kentucky	SBM	9,733	14,891	24,624	34,821	-29.28%	14,207	5,232	14,707
Maryland	SBM	16,432	41,445	57,877	98,475	-41.23%	47,210	5,014	52,224
Massachusetts	SBM	36,717	37,852	74,569	85,112	-12.39%	-	-	-
Michigan	Partnership	74,412	N/A	74,412	94,126	-20.94%	87,316	5,792	93,108
Minnesota	SBM	25,629	-	25,629	46,000	-44.28%	19,904	-	19,904
Nevada	SBM**	17,356	-	17,356	20,389	-14.88%	16,229	78	16,307
New Hampshire	Partnership	4,256	N/A	4,256	4,297	-0.95%	4,500	203	4,703
New Jersey	FFM	64,948	N/A	64,948	47,110	37.86%	15,906	4,503	20,409
New Mexico	SBM**	-	N/A	-	-	-	-	-	-
New York	SBM	-	380,956	380,956	526,076	-27.59%	108,067	10,375	118,442
North Dakota	FFM	-	N/A	-	-	-	6,913	193	7,106
Ohio	Plan Management	176,354	N/A	176,354	160,343	9.99%	269,069	-	269,069
Oregon	SBM**	20,508	-	20,508	18,990	7.99%	35,008	-	35,008
Pennsylvania	FFM	250,352	N/A	250,352	286,218	-12.53%	110,201	5,874	116,075
Rhode Island	SBM	4,189	-	4,189	4,667	-10.24%	22,432	2,228	24,660
Vermont	SBM	2,821	4,666	7,487	9,487	-21.08%	2,055	-	2,055
Washington	SBM	-	-	-	147,963	-	-	-	-
West Virginia	Partnership	28,042	N/A	28,042	28,212	-0.60%	15,380	797	16,177
Subtotal for All States Expanding Medicaid		1,077,062	496,785	1,573,847	2,093,384	-19.10%	1,582,964	67,725	1,650,689
Subtotal for All States with Expansions in Effect and Providing Coverage in Reporting Month		1,077,062	496,785	1,573,847	2,093,384	-19.10%	1,582,964	67,725	1,650,689
Subtotal for States Expanding Medicaid that Reported in February to March 2015				1,573,847	1,945,421	Difference February to March 2015			-371,574

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

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

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

Column V is calculated for only those states that reported February and March 2015 Applications data (subtotals exclude AZ, ND, NM, WA).

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

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

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

Arkansas	(VI)	Includes CHIP.
California	(I)	Reflects primarily newly-determined and likely eligible Medicaid applicants, as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(II)	Includes applications to SBM that did not request financial assistance.
California	(I), (II)	Includes updates to reporting methodology to remove duplicates.
California	(IV)	Reflects primarily newly-determined and likely eligible Medicaid applicants, as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(VI)	Reflects primarily newly-determined and likely eligible Medicaid applicants as well as some ongoing caseload activity conducted via the state's health exchange automation system.
California	(I)	State Medicaid agency hosts SBM portal; number includes all applications for insurance affordability programs.
Colorado	(I)	Data may include some duplication of applications between Medicaid and CHIP.
Connecticut	(II)	Data may contain duplicate applications, and may include some change in circumstance updates that are not new applications for coverage.
Connecticut	(III), (IV)	Data may include some duplication of applications between Medicaid and CHIP.
Connecticut	(VI)	Count is of households, not individuals.
District of Columbia	(III)	The count of applications received by the Medicaid agency and the state based marketplace may overlap; total may contain some duplicates.
District of Columbia	(VI)	Includes all determinations (e.g., renewals); includes CHIP.
District of Columbia	(III), (IV)	Includes renewals.
Hawaii	(I)	Number includes all applications for insurance affordability programs.
Iowa	(I), (III), (IV)	Data are preliminary.
Iowa	(I), (III)	Does not include all applications.
Iowa	(VI)	Includes MAGI populations only.
Iowa	(VI), (VII), (VIII)	Data are preliminary; does not include all determinations.
Iowa	(VI), (VII)	Includes renewals.
Maryland	(II)	Includes state Medicaid agency data and SBM data from 3/1 - 3/31.
Maryland	(II), (III), (IV)	Includes all applications not only those requesting financial assistance.
Maryland	(VI)	Count is of households, not individuals. Includes state Medicaid agency data and SBM data from 3/1 - 3/31.
Maryland	(VII)	Count is of households, not individuals. Includes state Medicaid agency data and SBM data from 3/1 - 3/31.
Maryland	(VIII)	Count is of households, not individuals. Includes state Medicaid agency data and SBM data from 3/1 - 3/31.
Maryland	(II), (III), (IV)	Count is of households, not individuals. Includes state Medicaid agency data and SBM data from 3/1 - 3/31.
Massachusetts	(IV)	Includes renewals.
Michigan	(VII)	Includes renewals.
Michigan	(VI)	Includes CHIP.
Minnesota	(VI)	Includes renewals.
Nevada	(I), (III), (IV)	Count is of households, not individuals. Includes renewals.
Nevada	(VI)	Data is derived by considering prior coverage.
New Hampshire	(VI)	Includes applications received at county welfare agencies. Includes renewals.
New Jersey	(I), (III), (IV)	Corrected.
New Jersey	(IV)	Does not include all eligibility determinations; county welfare agencies determinations are not included in this data.
New Jersey	(VI), (VII), (VIII)	Includes renewals.
New York	(III), (VI)	Data are preliminary.
New York	(VI)	Data are preliminary.
New York	(VII)	Data are preliminary.
New York	(VII)	Data are preliminary.
New York	(I), (III), (IV)	Includes renewals. May include some applications only for other benefits, not for Medicaid and CHIP.
Ohio	(VI)	Includes CHIP.
Ohio	(VI), (VII)	Includes renewals.
Ohio	(VI)	Count is of households, not individuals; includes CHIP.
Oregon	(VI)	Includes 4 individuals determined eligible via Targeted Enrollment Strategy.
Oregon	(VI)	Includes MAGI populations only.
Oregon	(VI), (VII)	Includes MAGI populations only.
Oregon	(I), (III), (IV)	Includes renewals.
Pennsylvania	(VI), (VII)	Includes renewals.
Pennsylvania	(VI), (VII)	Includes only determinations through new MAGI system. Includes renewals.
Rhode Island	(VI)	Includes only determinations through new MAGI system. Includes renewals.
Rhode Island	(VI)	Includes renewals.
Vermont	(VI)	Includes renewals.

Table 3 - Medicaid and CHIP: March 2015 Monthly Applications and Eligibility Determinations

States Not Expanding Medicaid	Marketplace Type	Applications						Determinations		
		New Applications Submitted to Medicaid and CHIP Agencies, March 2015 (Preliminary) (I)	Applications for Financial Assistance Submitted to the State Based Marketplaces, March 2015 (Preliminary) (II)	Total Applications for Financial Assistance Submitted at State Level, March 2015 (Preliminary) (III)	Total Applications for Financial Assistance Submitted at State Level, February 2015 (Preliminary) (IV)	% Change February to March 2015 (Columns IV) and (III) (V)	Individuals Determined Eligible for Medicaid at Application, March 2015 (Preliminary) (VI)	Individuals Determined Eligible for CHIP at Application, March 2015 (Preliminary) (VII)	Total New Determinations, March 2015 (Preliminary) (VIII)	
Alabama	FFM	16,958	N/A	16,958	6,573	157.99%	25,424	656	26,080	
Alaska	FFM	3,795	N/A	3,795	3,485	8.90%	7,621	-	7,621	
Florida	FFM	290,342	N/A	290,342	289,146	0.41%	175,756	11,239	186,995	
Georgia	FFM	106,079	N/A	106,079	98,879	7.28%	46,041	998	47,039	
Idaho	SBM	20,812	N/A	20,812	16,365	27.17%	5,411	245	5,656	
Kansas	Plan Management	13,227	N/A	13,227	9,844	34.37%	6,785	1,066	7,851	
Louisiana	FFM	25,569	N/A	25,569	25,167	1.60%	30,133	1,565	31,698	
Maine	Plan Management	1,538	N/A	1,538	1,653	-6.96%	13,107	362	13,469	
Mississippi	FFM/SBM-SHOP	21,581	N/A	21,581	22,556	-4.32%	12,363	458	12,821	
Missouri	FFM	25,538	N/A	25,538	23,886	6.92%	18,582	-	18,582	
Montana*	Plan Management	2,807	N/A	2,807	2,924	-4.00%	2,693	350	3,043	
Nebraska	Plan Management	6,603	N/A	6,603	7,143	-7.56%	9,011	1,015	10,026	
North Carolina	FFM	63,541	N/A	63,541	66,795	-4.87%	182,583	8,720	191,303	
Oklahoma	FFM	32,326	N/A	32,326	28,900	11.85%	41,888	6,667	48,555	
South Carolina	FFM	26,468	N/A	26,468	24,768	6.86%	-	-	-	
South Dakota	Plan Management	2,579	N/A	2,579	2,523	2.22%	1,598	-	1,598	
Tennessee	FFM	1,629	N/A	1,629	1,830	-10.98%	-	979	979	
Texas	FFM	115,209	N/A	115,209	99,108	16.25%	106,872	16,513	123,385	
Utah	FFM/SBM-SHOP	19,323	N/A	19,323	21,761	-11.20%	53,107	-	53,107	
Virginia	Plan Management	29,015	N/A	29,015	24,749	17.24%	27,516	2,498	30,014	
Wisconsin	FFM	24,370	N/A	24,370	27,376	-10.98%	22,052	2,361	24,413	
Wyoming	FFM	-	N/A	-	-	-	-	-	-	
Subtotal for All States Not Expanding Medicaid		849,309	N/A	849,309	805,431	5.49%	788,543	55,692	844,235	
Subtotal for States Not Expanding Medicaid that Reported in February and March 2015				849,309	805,431	Difference February to March 2015				
Total Across All States		1,926,371	496,785	2,423,156	2,898,815	-11.91%	2,371,507	123,417	2,494,924	
Total for States that Reported in February to March 2015				2,423,156	2,750,852	Difference February to March 2015				

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

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

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

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

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

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

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

APPENDIX A: Description of Data Elements in Tables

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

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

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

The total unduplicated number of individuals enrolled in Medicaid and CHIP as of the last day of the reporting period, including those with retroactive, conditional, and presumptive eligibility. This indicator is a point-in-time count of total program enrollment, and is not solely a count of those newly enrolled during the reporting period. This number includes only those individuals who are eligible for comprehensive benefits (e.g., emergency Medicaid, family planning-only coverage and limited benefit dual eligible individuals are excluded). Individuals eligible under demonstration projects authorized by section 1115 of the Social Security Act are included as long as the benefits and networks are comprehensive. CHIP children subject to a waiting period or premium lock-out period are considered eligible but not enrolled and are not included. The March 2015 data was submitted in April and is considered preliminary.²⁹ The February 2015 data in this table was submitted in March and is also preliminary. February data that was updated in April (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 February to March 2015 (III)

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

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

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

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

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

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

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

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

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

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

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

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

As of the last day of the calendar month—

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

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

³⁰ See footnote 29.

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

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, March, 2015 (Preliminary) (V)

As of the last day of the calendar month—

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

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

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

The total unduplicated number of individuals enrolled in Medicaid and CHIP as of the last day of the reporting period, including those with retroactive, conditional, and presumptive eligibility. This indicator is a point-in-time count of total program enrollment, and is not solely a count of those newly enrolled during the reporting period. This number includes only those individuals who are eligible for comprehensive benefits (e.g., emergency Medicaid, family planning-only coverage and limited benefit dual eligible individuals are excluded). Individuals eligible under demonstration projects authorized by section 1115 of the Social Security Act are included as long as the benefits and networks are comprehensive. CHIP children subject to a waiting period or premium lock-out period are considered eligible but not enrolled and are not included. The February data was submitted in March 2015 and is considered preliminary.³⁴ This data is the same as the data reported in column (II) in Table 1: Medicaid and CHIP: February and March 2015 Preliminary Monthly Enrollment.

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

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

³² See footnote 31.

³³ See footnote 29.

³⁴ See footnote 29.

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

Application Data Elements

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

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

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

This element is the number of applications requesting financial assistance (Medicaid, CHIP or the Advanced Premium Tax Credit and Cost-Sharing Reductions) that have been received by the SBM during the reporting period. The March 2015 data was submitted in April and is considered preliminary.³⁸

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

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

For states with an SBM, the data reflects the total of **Applications Submitted to Medicaid and CHIP Agencies, March 2015 (Preliminary)** plus **Applications for Financial Assistance Submitted to the State-Based Marketplace, March 2015 (Preliminary)**. For FFM states, the data reflects **Applications Submitted to Medicaid and CHIP Agencies, March 2015 (Preliminary)**. For SBM states, the data includes all applications for financial assistance; individuals on these applications will be determined eligible for Medicaid, CHIP or Advanced Premium Tax Credits and Cost-Sharing Reductions, or determined ineligible for financial assistance. The March 2015 data was submitted in April and is considered preliminary. The February 2015 data in this table was submitted in March 2015 and is also preliminary. February data that was updated in April (which may include additional individuals who applied in February, but who were not captured in the preliminary data) is posted separately under the Eligibility Data tab on Medicaid.gov.

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

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

³⁷ See footnote 29.

³⁸ See footnote 29.

Percentage Change February to March 2015 (V)

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

Eligibility Determination Data Elements

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

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

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

In states receiving account transfers from the FFM in March 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

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

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

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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, March 2015 (VII)

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

In states receiving account transfers from the FFM in March 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, March 2015 (VIII)

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

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