

**FY 2014 UNDUPLICATED NUMBER OF CHILDREN EVER ENROLLED IN MEDICAID AND CHIP**

State and Program Type	Unduplicated Number of Children Ever Enrolled						Percent Growth over FY 2013
	CHIP		Medicaid		CHIP and Medicaid		
	FY 2013	FY 2014	FY 2013	FY 2014	FY 2013	FY 2014	
Alabama	113,490	105,491	598,045	637,750	711,535	743,241	4.5%
Alaska	16,566	9,661	86,926	86,571	103,492	96,232	-7.0%
Arizona <sup>1</sup>	80,238	54,361	913,271	952,532	993,509	1,006,893	1.3%
Arkansas	109,301	100,112	407,121	406,178	516,422	506,290	-2.0%
California <sup>2</sup>	1,913,793	1,874,939	4,462,514	4,602,270	5,705,404	5,904,347	3.5%
Colorado	90,397	125,471	446,943	467,969	537,340	593,440	10.4%
Connecticut	18,999	19,927	325,414	332,699	344,413	352,626	2.4%
Delaware	13,180	18,650	96,916	100,944	110,096	119,594	8.6%
District of Columbia	9,057	7,085	91,712	91,149	100,769	98,234	-2.5%
Florida	472,471	423,351	2,119,324	2,286,649	2,591,795	2,710,000	4.6%
Georgia <sup>3</sup>	269,906	231,270	1,162,529	1,241,254	1,432,435	1,472,524	2.8%
Hawaii	30,979	30,505	138,258	143,557	169,237	174,062	2.9%
Idaho	30,958	30,615	176,727	189,768	207,685	220,383	6.1%
Illinois	306,781	295,844	1,623,674	1,616,633	1,930,455	1,912,477	-0.9%
Indiana	152,415	153,523	701,804	715,033	854,219	868,556	1.7%
Iowa	83,670	83,411	318,377	320,595	402,047	404,006	0.5%
Kansas	76,164	73,574	237,026	232,761	313,190	306,335	-2.2%
Kentucky <sup>4</sup>	84,069	61,473	485,286	535,233	569,355	596,706	4.8%
Louisiana	149,968	136,263	670,729	663,291	820,697	799,554	-2.6%
Maine	29,712	27,461	175,128	179,170	204,840	206,631	0.9%
Maryland	135,454	137,192	490,009	514,576	625,463	651,768	4.2%
Massachusetts <sup>5</sup>	148,719	126,384	524,333	546,806	673,052	673,190	0.0%
Michigan	89,670	104,127	1,195,649	1,174,170	1,285,319	1,278,297	-0.5%
Minnesota	3,835	3,590	505,264	538,792	509,099	542,382	6.5%
Mississippi	93,120	80,575	467,918	452,565	561,038	533,140	-5.0%
Missouri	92,918	86,828	559,265	545,906	652,183	632,734	-3.0%
Montana	44,661	49,671	83,447	89,932	128,108	139,603	9.0%
Nebraska	55,783	56,476	165,038	158,162	220,821	214,638	-2.8%
Nevada	28,626	45,870	256,109	297,738	284,735	343,608	20.7%
New Hampshire	18,392	16,523	81,815	94,153	100,207	110,676	10.4%
New Jersey	206,761	211,371	662,198	709,144	868,959	920,515	5.9%
New Mexico	9,368	16,037	380,290	384,924	389,658	400,961	2.9%
New York	671,707	604,566	2,143,167	2,193,421	2,814,874	2,797,987	-0.6%
North Carolina	260,964	236,893	1,162,098	1,167,377	1,423,062	1,404,270	-1.3%
North Dakota	11,281	5,032	50,957	54,076	62,238	59,108	-5.0%
Ohio <sup>6</sup>	194,013	136,169	1,209,817	1,250,655	1,403,830	1,386,824	-1.2%
Oklahoma	147,911	164,831	558,262	533,859	706,173	698,690	-1.1%
Oregon <sup>7</sup>	128,061	109,085	401,721	431,109	529,782	540,194	2.0%
Pennsylvania <sup>8</sup>	267,073	258,455	1,309,862	1,313,820	1,576,935	1,572,275	-0.3%
Rhode Island <sup>9</sup>	26,577	22,136	112,002	98,689	138,579	120,825	-12.8%
South Carolina	76,191	79,740	582,293	608,415	658,484	688,155	4.5%
South Dakota <sup>10</sup>	17,632	15,870	46,948	66,401	64,580	82,271	27.4%
Tennessee	106,473	112,826	790,923	775,480	897,396	888,306	-1.0%
Texas	1,034,613	1,041,482	3,504,386	3,679,975	4,538,999	4,721,457	4.0%
Utah	63,001	76,533	283,213	304,229	346,214	380,762	10.0%
Vermont	7,393	5,953	72,512	73,537	79,905	79,490	-0.5%
Virginia	196,911	186,513	648,173	656,094	845,084	842,607	-0.3%
Washington	44,073	42,637	768,387	719,814	812,460	762,451	-6.2%
West Virginia <sup>11</sup>	37,065	40,864	260,326	290,037	297,391	330,901	11.3%
Wisconsin	175,152	183,115	542,731	551,807	717,883	734,922	2.4%
Wyoming	8,815	9,095	58,644	55,591	67,459	64,686	-4.1%
<b>TOTALS</b>	<b>8,454,327</b>	<b>8,129,426</b>	<b>35,115,481</b>	<b>36,133,260</b>	<b>42,898,905</b>	<b>43,689,824</b>	<b>1.8%</b>

Data Source: Statistical Enrollment Data System (SEDS) forms CMS-21E, CMS-64.21E, CMS-64.EC (05/13/2015)

Notes: Data are reported by individual states and are representative of the unduplicated number of children ever-enrolled in Medicaid and CHIP as of May 13, 2015  
States may subsequently revise their current and/or historical data.

1 In both fiscal years, children who transitioned between CHIP and Medicaid are reported in both programs, rather than the program in which they were last enrolled. Therefore, enrollment totals are artificially high.

2 The combined "CHIP and Medicaid" column data for FY 2013 and FY 2014 are accurate; however, the data reported for each program contain duplicates between programs and are artificially high for both fiscal years.

3 Due to eligibility and enrollment system challenges, some Title XXI funded Medicaid enrollees are included in Medicaid enrollment counts, rather than in CHIP for FY 2014.

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5 Due to eligibility and enrollment system challenges, certain members who should have been assigned to CHIP were assigned to the Title XIX Medicaid Program beginning in the second quarter of 2014. Therefore, the CHIP data are artificially low for FY 2014.

6 Due to eligibility and enrollment system challenges, certain members who should have been assigned to CHIP were assigned to the Title XIX Medicaid program instead for FY 2014. The FY 2013 enrollment numbers are artificially high.

7 Due to eligibility and enrollment system challenges, Title XXI funded Medicaid enrollees are included in Medicaid enrollment counts, rather than in CHIP for FY 2014.

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9 In FY 2013, children who transitioned between CHIP and Medicaid are reported in both programs, rather than the program in which they were last enrolled. Therefore, FY 2013 enrollment totals are artificially high.

10 FY 2013 and FY 2014 data are artificially low, due to exclusion of certain Medicaid enrollees in reporting. The effect of this reporting issue is greater for 2013 than for 2014, as a portion of the excluded Medicaid population shifted into the included Medicaid enrollees in FY 2014.

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## **Important Considerations for FY 2014 Statistical Enrollment Data System (SEDS)**

**Reporting:** In FY 2014, states experienced systems-related challenges that have resulted in both increases and decreases in reported enrollment. Most of these changes are an artifact of data or systems-related challenges rather than of actual enrollment trends. In particular, in 2014, states reengineered their business practices to implement new application, eligibility, and verification requirements as they also stood up new or modified existing eligibility systems. Many states experienced delays in deployment of their entire eligibility system or key components of functionality, and even with mitigation strategies, there were some delays in timely processing of applications.

These system changes also led to two common SEDS reporting challenges: duplication of enrollment counts of children between Medicaid and CHIP, and the incorrect reporting of children enrolled in Title XXI-funded Medicaid programs. Some states have indicated that both FY 2013 and FY 2014 data contain duplicates between Medicaid and CHIP, which artificially increased enrollment in the affected data. Due to systems-related challenges, some states were able to de-duplicate FY 2014 data, but not FY 2013, which led to an artificial decline in states' enrollment data between the two fiscal years. Additionally, some states reported difficulty in determining the number of children enrolled in Title XXI-funded Medicaid in FY 2014. Instead of reporting these children in CHIP, they reported these children in Medicaid, which caused these states to show a decrease in CHIP enrollment.

Many provisions within the Affordable Care Act took effect on January 1, 2014 and improved and simplified the way states determined eligibility for CHIP and Medicaid. States that previously covered children ages 6-18 in families with income below 133 percent of the federal poverty level in a separate CHIP transitioned these children to Medicaid. Some states that also expanded Medicaid to adult populations reported large increases in children's enrollment due to a "welcome mat" effect.

**Key Findings for FY 2014 SEDS Reporting:** In reviewing the companion FY 2014 SEDS annual enrollment table, it is important to keep these data or systems-related challenges in mind. It is also important to note that the FY 2014 enrollment data may be underreported, and because states may revise their reported enrollment data at any time, the reported trend in enrollment is subject to change. Key findings include:

- Combined CHIP and Medicaid enrollment increased by an additional 790,919 children in FY 2014.
- Between FY 2013 and FY 2014, reported CHIP enrollment declined by 324,901 children, while Medicaid enrollment increased by 1,017,779 children.
- When compared to the FY 2013 enrollment total reported at this time last year, CHIP enrollment reported for FY 2014 increased by 35,399 children.

State-specific notes can be found at the bottom of the table.