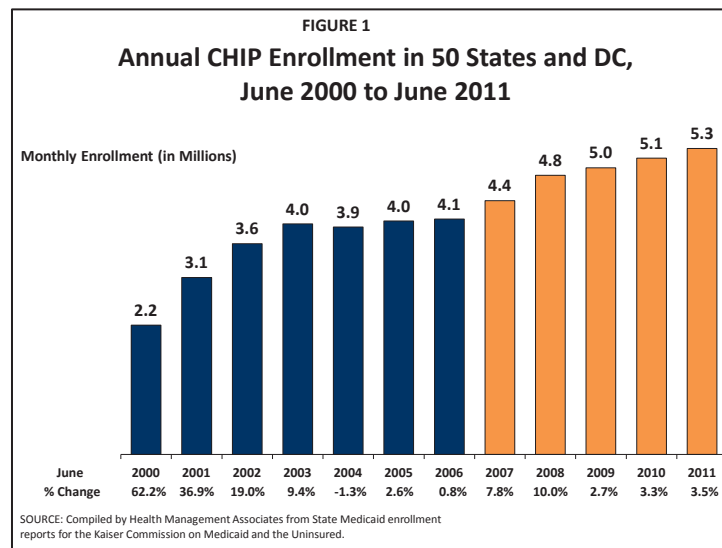


June 2012

CHIP Enrollment: June 2011 Data Snapshot

In June 2011, the number of children enrolled in the Children's Health Insurance Program (CHIP) reached 5.3 million. While enrollment continues to grow, enrollment growth in the program appears to have moderated since the start of the recession. From June 2010 to June 2011, an additional 178,000 children enrolled in CHIP programs across the country, a rate of growth (3.5 percent) similar to the prior annual period (3.3 percent). (Figure 1)



CHIP and Medicaid provide a crucial safety net of coverage for low-income children, particularly during economic downturns. During the most recent recession, the percentage of uninsured children declined from 10.9 percent in 2007 to 10.0 percent in 2010, due largely to more children gaining coverage through Medicaid and CHIP. CHIP offers coverage to low-income children in families who do not have access to affordable coverage but whose incomes are above Medicaid eligibility levels; therefore, economic pressures have provided both upward and downward pressure on enrollment. During the economic downturn, many Americans have lost jobs, incomes, and access to affordable coverage, making children in such families eligible for CHIP. However, as family income continues to fall, children move from CHIP to Medicaid.

Actions at the federal level have also affected CHIP enrollment. As part of the Children's Health Insurance Program Reauthorization Act (CHIPRA), Congress provided performance bonuses for states that increase their enrollment of children who are eligible for Medicaid coverage but not enrolled and adopt enrollment simplifications; such bonuses were awarded to twenty-three states in 2011. The Affordable Care Act (ACA), which authorized CHIP through 2015, also included maintenance of effort (MOE) requirements which require states to maintain eligibility levels and enrollment procedures in advance of the ACA coverage expansions in 2014. These MOE requirements will remain in effect until 2019 for children. Arizona experienced the largest drop in enrollment between June 2010 and 2011 (nearly 14,000 children or 43 percent) which state officials attribute to an enrollment freeze enacted prior to these MOE requirements.

Cross State Trends. CHIP enrollment varied significantly across states. Enrollment in the program grew in 37 states from June 2010 to June 2011. Enrollment growth was attributed by state CHIP directors to the continuing impact of the economic downturn as well as specific outreach efforts and initiatives to streamline enrollment processes. In fact, many of these states were among the twenty-three that qualified for CHIPRA performance bonuses in FY 2011 by implementing selected measures to simplify enrollment procedures and meeting enrollment targets for Medicaid.¹ Six states (California, North Carolina, New York, Iowa, Oregon, and New Jersey) had over 10,000 additional children enroll during this period.

Seven states (Iowa, Oregon, Montana, Michigan, Kansas², North Carolina, and Kentucky) had growth of 10 percent or more during this period. (Figure 2, Tables 1 and 2) A number of states with significant increases in enrollment or enrollment growth cited increased outreach and enrollment simplifications as key factors in their growth, some of which are listed below:

- **Iowa** has adopted several enrollment simplifications since 2009, including presumptive eligibility, express lane eligibility, and 12-month continuous eligibility for children.³
- **Oregon** has implemented numerous eligibility and enrollment simplifications in its program since 2009. The state also awards grants to community-based organizations to conduct outreach and serve as local application sites.⁴
- **Montana** officials noted that there was an on-going enrollment outreach effort along with a media campaign that concluded in December 2010. The state also received a CHIPRA outreach grant with a focus on enrollment.
- **North Carolina** implemented ex-parte renewals.

Enrollment in CHIP programs declined in 14 states from June 2010 to June 2011; five of these states (Arizona, Oklahoma⁵, Utah, Colorado, and New Mexico) had enrollment decreases of five percent or more. (Figure 2, Tables 1 and 2) Across states with enrollment declines, officials largely attributed the declines to increasing numbers of children qualifying for Medicaid due to drops in family income; a few states also indicated that there was a lack of funds for outreach due to budget shortfalls. The largest enrollment decline occurred in Arizona; enrollment in this state's CHIP program declined by 43 percent between June 2010 and June 2011, representing nearly 14,000 children. Officials attributed the decline to the enrollment freeze enacted by the state due to budget pressures in December 2009 before the MOE requirements under the ACA were in place; it is the only state to have an enrollment freeze in its CHIP program currently.⁶

¹ The twenty-three states awarded bonuses were Alabama (2009, 2010, and 2011), Alaska (2009, 2010, and 2011), Colorado (2010 and 2011), Connecticut (2011), Georgia (2011), Idaho (2010 and 2011), Illinois (2009, 2010, and 2011), Iowa (2010 and 2011), Kansas (2009, 2010, and 2011), Louisiana (2009, 2010, and 2011), Maryland (2010 and 2011), Michigan (2009, 2010 and 2011), Montana (2011), New Jersey (2009, 2010, and 2011), New Mexico (2009, 2010, and 2011), North Carolina (2011), North Dakota (2011), Ohio (2010 and 2011), Oregon (2009, 2010 and 2011), South Carolina (2011), Virginia (2011), Washington (2009, 2010 and 2011) and Wisconsin (2010 and 2011). For more information: http://www.insurekidsnow.gov/professionals/eligibility/performance_bonuses.html.

² Kansas reported that the state had worked through a significant backlog of Family Medicaid and CHIP applications during this period. "KHPA Announces Elimination of the HealthWave Clearinghouse Backlog." Press release, Kansas Health Policy Authority, March 31, 2011.

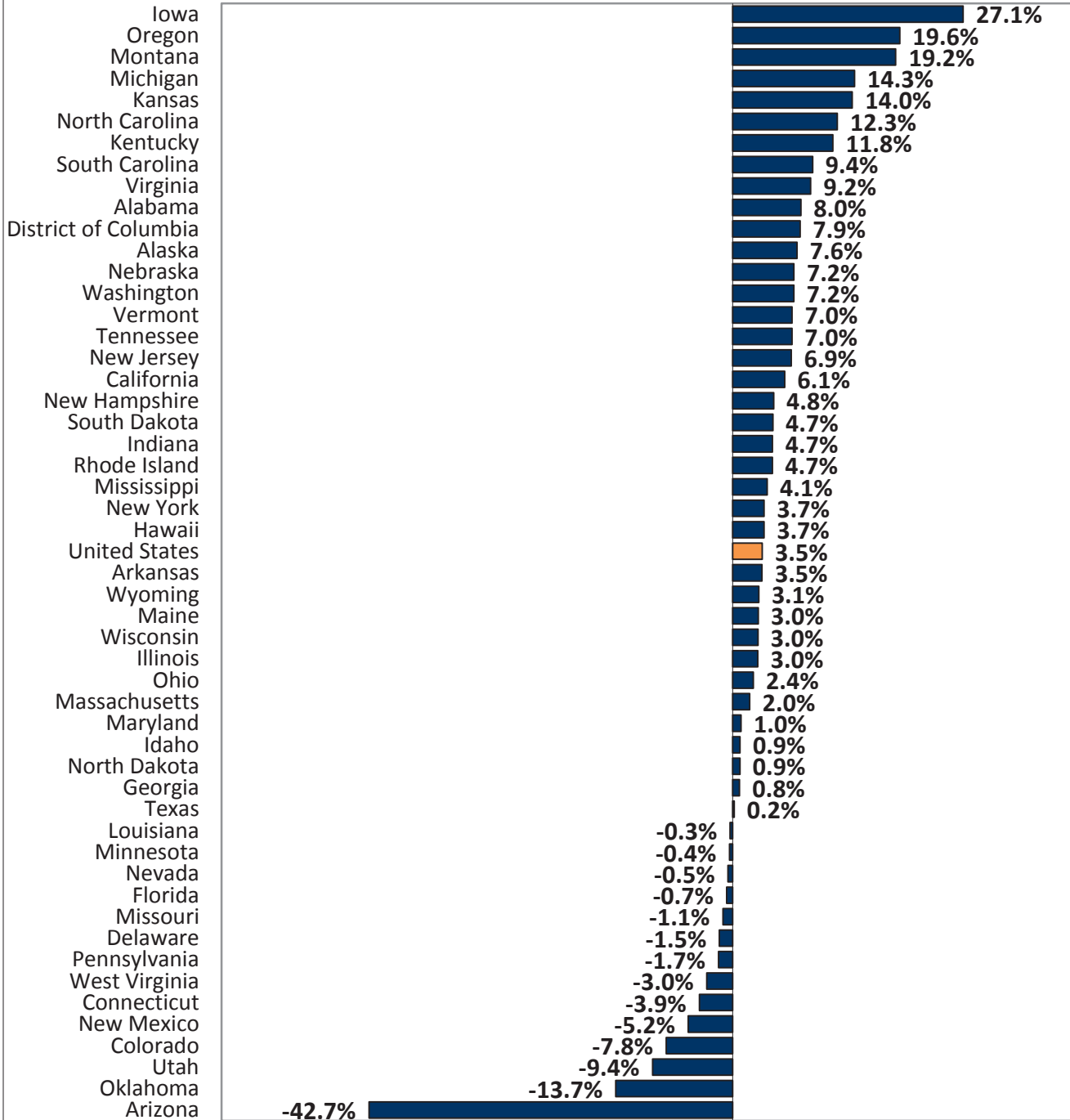
³ Secrets of Success: An Analysis of Four States at the Forefront of the Nation's Gains in Children's Health Coverage. KCMU, January 2012. <http://www.kff.org/medicaid/8273.cfm>.

⁴ Ibid.

⁵ Oklahoma, which had the second largest drop in enrollment (13.7 percent or 9,594 children) indicated that a new online enrollment system had erroneously enrolled some individuals into Medicaid instead of CHIP; the state believes that this error in their eligibility rule engine has led to an artificial enrollment decline in their CHIP program.

⁶ For more information on the effect of the enrollment freeze, see *The Arizona KidsCare CHIP Enrollment Freeze: How Has it Impacted Enrollment and Families?* KCMU, September 2011. <http://www.kff.org/medicaid/8232.cfm>. In May 2012, the state began enrolling children on

Figure 2
Percent Change in CHIP Enrollment
June 2010 to June 2011



Source: Data provided by state officials to Health Management Associates for Kaiser Commission on Medicaid and the Uninsured, 2011.

the waiting list for KidsCare into a new CHIP program, KidsCare II. KidsCare II will extend coverage to 20,000 children with incomes between 100 and 175 percent of poverty. The program will be funded from part of the savings under the Safety Net Care Pool and will end December 31, 2013. <http://www.azahcccs.gov/applicants/KidsCareII.aspx>.

Coverage for Pregnant Women.⁷ States have traditionally had two options for providing coverage to pregnant women under CHIP – through a state plan amendment under the “Unborn Child” option or through a waiver. As part of CHIPRA, states now have the option of covering pregnant women in CHIP programs through a new state plan amendment option. In June 2011, 14 states reported that they used the Unborn Child option to provide coverage for over 138,000 individuals, an annual decrease of over 23,000 from June 2010.⁸ During this same period, over 3,200 pregnant women were covered under CHIP program waivers in three states (Colorado, Nevada, and Virginia); a decrease of approximately 200 over the annual period. Two states (New Jersey and Rhode Island) reported covering 250 pregnant women over the same annual period through the new state plan option. Enrollment for pregnant women in these states remained fairly constant from June 2010 to June 2011.

Coverage of Children of State Employees. Under the ACA, states that operate separate CHIP programs now have the option to extend CHIP eligibility to the dependents of state employees, providing they meet the other CHIP eligibility criteria. States can adopt this option if they have maintained their contribution levels for health coverage for employees with dependent coverage or can demonstrate that state employees’ out-of-pocket health care costs exceed five percent of family income. During the time period covered in this report, 5 states reported adopting this option (AL, KY, MT, PA and TX).⁹ Three additional states reported providing coverage to dependents of state employees who met other program requirements outside of this new option. Arkansas has provided coverage for such children under its ARKids B waiver separate from the new CHIPRA option, while dependents of state employees in Mississippi and North Carolina have always been eligible for CHIP coverage provided they meet the other program requirements because the state does not contribute to dependent coverage.¹⁰

Changes in CHIP Benefits and Cost-Sharing. With state fiscal years running from July to June in most states, few changes were reported by states in terms of benefits or eligibility and enrollment procedures between December 2010 and June 2011. No states reported changes to eligibility levels during this time period, though Montana did report implementing presumptive eligibility for children in both CHIP and Medicaid effective January 2011. Two states reported benefit changes effective January 2011 – Alabama added an obesity treatment benefit which included medical nutrition therapy and Pennsylvania expanded dental coverage and added coverage of orthodontia services.

⁷ This report follows CMS policy to count individuals covered under the “Unborn Child” option as children; therefore, these individuals are included in overall enrollment numbers. However, other adults and pregnant women covered by CHIP outside of the unborn child option are not included in overall enrollment numbers. States using the “Unborn Child” option are denoted in Tables 1 and 2 with asterisks.

⁸ Tennessee reports that they use this option and that pregnant women covered under this option are included in their overall CHIP enrollment numbers reported in Tables 1 and 2; however, they did not report the number of pregnant women covered under this option separately.

⁹ Georgia adopted this option beginning October 1, 2011, after the period of this report.

<http://www.peachcare.org/FaqView.aspx?displayFaqlid=107>.

¹⁰ *Performing Under Pressure: Annual Findings of a 50-State Survey*. KCMU, January 2012. <http://www.kff.org/medicaid/8272.cfm>.

Conclusion. In June 2011, the number of children enrolled in CHIP reached 5.3 million. While enrollment continues to grow, enrollment growth in the program appears to have moderated since the start of the economic downturn. While the economic downturn has led to an increased number of children qualifying for CHIP as more families lose income and access to employer sponsored coverage, children are also transitioning to Medicaid coverage instead of CHIP as family income continues to drop. At the same time, federal policies, such as the performance bonuses and MOE requirements, have helped states to maintain and in some instances increase the number of children covered under CHIP during this period, though a lack of funding for outreach efforts has led to declines in CHIP enrollment in some states. Arizona experienced the largest drop in enrollment between June 2010 and 2011 (nearly 14,000 children or 43 percent) which state officials attribute to an enrollment freeze enacted prior to the MOE requirements. Looking ahead to June 2012, CHIP officials in half of states expect enrollment to drop or stay the same. While enrollment growth appears to be moderating, the ongoing effects of the economic downturn on state budgets and enrollment as well as continued efforts across states to simplify and streamline enrollment processes to increase coverage for low-income uninsured children who are eligible but not enrolled will continue to affect CHIP programs.

Methodology. The data in this report reflect the number of children, including individuals covered under the unborn child option, enrolled in CHIP programs in each state. Adult coverage under CHIP is not included in the total CHIP enrollment counts of this report. State CHIP officials provided data specifically for the months of March and June 2011. States also were asked to review data in previous reports in this series and to update data as might be appropriate for previous periods. The data for this report were requested in January 2012; responses were returned by March 2012. Data for specific states in reports issued by CMS may differ from data in this report. Beyond the “point-in-time” versus “ever-enrolled” counts described below, differences occur when states provide data for this report for a point-in-time other than the final day of a quarter, when states update enrollment counts, e.g., for retroactive eligibility of a Medicaid-expansion CHIP program, or when a state provides final counts to CMS beyond response deadline.

The data in this report are “point-in-time,” which means the number of individuals enrolled in a specific month, such as June 2011 for this report. A “point-in-time” count of enrollees is distinct from the “ever-enrolled” count, which is provided in reports issued by the Centers for Medicare and Medicaid Services (CMS). The annual count of children ever-enrolled will always exceed the number enrolled at any point-in-time, as long as new enrollments and departures occur during the year. For example, the CMS CHIP annual report for the year ending in September 2010, i.e., federal fiscal year 2010, shows a total of 7,705,723 children enrolled at any point in time and for any length of time during that year. In contrast, the number of children enrolled in the month of September 2010 per data provided by state officials for this report (not reported here) was 5,200,854 or 67.5 percent remained enrolled in September. Recent experience shows that one-third of CHIP enrollees enrolled at any time during the year were not enrolled at the end of the year.

This Data Snapshot was prepared by Vernon Smith at Health Management Associates and Laura Snyder and Robin Rudowitz at the Kaiser Commission on Medicaid and the Uninsured.

Table 1
Total CHIP Enrollment in 50 States and the District of Columbia
June 2000 to June 2011

Monthly Enrollment												
	Jun-00	Jun-01	Jun-02	Jun-03	Jun-04	Jun-05	Jun-06	Jun-07	Jun-08	Jun-09	Jun-10	Jun-11
United States	2,239,409	3,066,481	3,649,131	3,993,508	3,941,608	4,043,863	4,078,163	4,397,495	4,835,639	4,966,030	5,132,082	5,310,188
Alabama	36,709	41,785	53,135	60,383	59,019	64,342	65,875	67,715	71,251	69,252	75,112	81,136
Alaska	9,176	11,349	12,780	12,290	14,243	11,366	9,582	7,793	8,743	8,721	10,148	10,917
Arizona	35,034	51,838	48,599	50,019	50,373	50,638	59,250	64,453	65,837	53,408	32,221	18,469
Arkansas*	-	-	-	45,982	54,273	62,141	67,170	69,349	67,832	64,213	68,017	70,372
California*	321,927	478,930	608,903	716,550	722,089	819,032	860,888	986,311	1,062,303	1,127,673	1,062,126	1,127,027
Colorado	25,337	35,059	43,679	53,118	37,069	40,696	53,894	51,939	60,166	64,598	69,369	63,956
Connecticut	9,740	10,967	13,816	14,092	15,639	15,696	14,251	17,200	15,432	14,136	14,212	13,657
Delaware	2,909	3,466	4,082	4,524	3,461	4,360	4,844	5,069	5,484	6,090	6,342	6,244
District of Columbia	3,225	2,077	3,284	3,854	4,391	4,573	4,750	5,146	6,720	6,307	5,871	6,337
Florida	160,542	221,679	246,432	317,683	331,716	203,983	193,639	224,575	231,226	225,028	254,217	252,447
Georgia	85,625	132,498	164,896	183,565	196,934	228,801	257,212	276,551	225,497	198,951	205,990	207,653
Hawaii	-	5,545	8,146	10,071	12,261	14,108	15,569	17,226	18,787	20,763	24,359	25,257
Idaho	6,775	11,113	12,113	10,706	11,780	13,787	14,287	19,352	26,811	29,652	24,622	24,837
Illinois*	53,049	62,420	71,407	80,563	119,857	135,984	151,253	175,145	186,107	195,233	204,448	210,512
Indiana	39,914	47,539	48,342	56,880	64,403	68,939	69,787	68,394	71,253	70,496	79,757	83,494
Iowa	13,738	21,337	26,010	29,057	32,157	34,913	36,286	33,412	34,580	43,830	44,870	57,023
Kansas	17,140	22,108	26,525	30,023	33,024	34,611	37,631	35,374	38,047	38,731	40,065	45,694
Kentucky	42,440	54,429	52,492	50,719	48,102	49,377	50,225	52,536	53,555	53,991	59,962	67,023
Louisiana*	33,363	54,343	74,407	88,129	100,925	107,914	107,777	107,828	124,310	126,657	124,373	124,018
Maine	9,353	9,816	13,010	12,663	13,967	13,989	14,705	13,346	13,839	14,955	15,479	15,945
Maryland	74,036	89,488	102,408	112,758	87,258	95,018	101,552	104,870	110,877	99,582	96,470	97,418
Massachusetts*	61,837	55,876	50,094	56,261	56,208	70,198	75,019	87,492	105,094	103,605	113,760	116,043
Michigan*	34,524	49,712	44,477	51,424	50,876	56,195	47,710	43,375	43,354	46,308	38,525	44,043
Minnesota*	9	15	23	19	1,982	2,122	2,229	2,458	2,368	2,226	2,156	2,148
Mississippi	20,530	43,187	52,456	56,690	64,516	68,068	60,457	60,122	64,978	67,097	66,953	69,669
Missouri	60,771	73,494	75,078	84,824	88,893	93,730	61,097	61,936	58,923	65,133	71,663	70,853
Montana	5,827	9,700	9,350	9,550	10,914	10,908	13,165	13,289	16,576	18,639	20,761	24,739
Nebraska	7,002	7,817	10,712	22,611	22,188	23,132	23,194	24,491	25,397	23,744	27,421	29,396
Nevada	11,152	18,823	24,138	23,323	26,100	28,836	27,848	29,899	26,832	22,444	21,255	21,139
New Hampshire	2,822	3,723	4,966	5,971	6,532	7,022	7,688	7,415	8,009	7,905	8,527	8,938
New Jersey	67,710	77,049	95,468	92,170	104,165	115,222	127,525	125,494	121,581	133,878	155,512	166,218
New Mexico	4,236	6,610	9,838	10,675	10,706	10,647	10,598	8,072	9,706	8,647	8,615	8,165
New York	522,058	486,194	550,402	480,606	438,892	426,529	388,689	394,164	365,311	382,803	394,692	409,252
North Carolina	65,129	59,968	84,286	100,436	115,571	130,467	109,466	113,667	122,379	129,973	171,730	192,855
North Dakota	1,875	2,546	2,920	3,186	3,586	4,136	4,454	4,553	5,785	4,644	4,666	4,706
Ohio	47,287	78,420	86,106	125,026	128,877	122,796	142,374	140,547	145,049	153,335	158,194	162,041
Oklahoma*	35,000	38,000	43,423	47,295	46,576	54,427	58,731	66,570	62,955	65,679	69,968	60,374
Oregon*	15,900	17,551	18,133	18,741	20,443	25,014	29,430	39,586	50,736	47,575	56,930	68,102
Pennsylvania	99,008	110,890	120,408	131,695	134,426	136,511	143,501	161,166	172,662	191,497	194,721	191,508
Rhode Island*	9,317	11,432	10,890	9,865	11,459	11,756	12,412	12,612	12,348	12,454	14,361	15,032
South Carolina	47,532	46,581	52,112	49,994	51,479	52,561	40,161	36,001	45,332	54,406	56,618	61,940
South Dakota	3,724	6,729	8,307	9,324	9,805	10,610	11,323	11,136	11,531	11,900	12,334	12,917
Tennessee*	15,146	10,069	2,074	-	-	-	-	31,619	53,064	67,980	73,741	78,883
Texas*	39,872	369,946	529,980	512,986	359,967	326,473	293,342	326,635	554,642	544,815	574,902	576,025
Utah	16,868	23,690	21,931	23,777	30,192	28,268	35,724	25,095	35,248	41,468	41,608	37,696
Vermont	2,004	2,659	2,982	3,029	2,897	2,992	3,012	2,820	3,215	3,330	3,478	3,721
Virginia	25,033	33,466	42,293	52,327	58,676	73,187	78,745	82,731	90,907	96,163	99,433	108,553
Washington*	1,518	4,150	6,869	7,305	10,862	21,146	18,790	18,975	20,953	23,875	29,537	31,660
West Virginia	11,697	20,923	20,043	21,828	23,594	24,515	24,835	24,939	24,418	24,555	24,824	24,069
Wisconsin*	22,357	26,628	31,861	35,785	34,957	28,006	30,954	31,368	71,590	72,153	91,737	94,470
Wyoming	1,632	2,847	3,045	3,156	3,328	4,121	5,263	5,684	6,039	5,532	5,430	5,597

Note: * indicates that the state reported using the Unborn Child option.

Source: Data provided by state officials to Health Management Associates for the Kaiser Commission on Medicaid and the Uninsured, 2011.

Table 2
Total CHIP Enrollment in 50 States and the District of Columbia
June 2000 to June 2011

	Percent Change										
	Jun 00 to Jun 01	Jun 01 to Jun 02	Jun 02 to Jun 03	Jun 03 to Jun 04	Jun 04 to Jun 05	Jun 05 to Jun 06	Jun 06 to Jun 07	Jun 07 to Jun 08	Jun 08 to Jun 09	Jun 09 to Jun 10	Jun 10 to Jun 11
United States	36.9%	19.0%	9.4%	-1.3%	2.6%	0.8%	7.8%	10.0%	2.7%	3.3%	3.5%
Alabama	13.8%	27.2%	13.6%	-2.3%	9.0%	2.4%	2.8%	5.2%	-2.8%	8.5%	8.0%
Alaska	23.7%	12.6%	-3.8%	15.9%	-20.2%	-15.7%	-18.7%	12.2%	-0.3%	16.4%	7.6%
Arizona	48.0%	-6.2%	2.9%	0.7%	0.5%	17.0%	8.8%	2.1%	-18.9%	-39.7%	-42.7%
Arkansas*	-	-	-	18.0%	14.5%	8.1%	3.2%	-2.2%	-5.3%	5.9%	3.5%
California*	48.8%	27.1%	17.7%	0.8%	13.4%	5.1%	14.6%	7.7%	6.2%	-5.8%	6.1%
Colorado	38.4%	24.6%	21.6%	-30.2%	9.8%	32.4%	-3.6%	15.8%	7.4%	7.4%	-7.8%
Connecticut	12.6%	26.0%	2.0%	11.0%	0.4%	-9.2%	20.7%	-10.3%	-8.4%	0.5%	-3.9%
Delaware	19.1%	17.8%	10.8%	-23.5%	26.0%	11.1%	4.6%	8.2%	11.1%	4.1%	-1.5%
District of Columbia	-35.6%	58.1%	17.4%	13.9%	4.1%	3.9%	8.3%	30.6%	-6.1%	-6.9%	7.9%
Florida	38.1%	11.2%	28.9%	4.4%	-38.5%	-5.1%	16.0%	3.0%	-2.7%	13.0%	-0.7%
Georgia	54.7%	24.5%	11.3%	7.3%	16.2%	12.4%	7.5%	-18.5%	-11.8%	3.5%	0.8%
Hawaii	-	46.9%	23.6%	21.7%	15.1%	10.4%	10.6%	9.1%	10.5%	17.3%	3.7%
Idaho	64.0%	9.0%	-11.6%	10.0%	17.0%	3.6%	35.5%	38.5%	10.6%	-17.0%	0.9%
Illinois*	17.7%	14.4%	12.8%	48.8%	13.5%	11.2%	15.8%	6.3%	4.9%	4.7%	3.0%
Indiana	19.1%	1.7%	17.7%	13.2%	7.0%	1.2%	-2.0%	4.2%	-1.1%	13.1%	4.7%
Iowa	55.3%	21.9%	11.7%	10.7%	8.6%	3.9%	-7.9%	3.5%	26.7%	2.4%	27.1%
Kansas	29.0%	20.0%	13.2%	10.0%	4.8%	8.7%	-6.0%	7.6%	1.8%	3.4%	14.0%
Kentucky	28.2%	-3.6%	-3.4%	-5.2%	2.7%	1.7%	4.6%	1.9%	0.8%	11.1%	11.8%
Louisiana*	62.9%	36.9%	18.4%	14.5%	6.9%	-0.1%	0.0%	15.3%	1.9%	-1.8%	-0.3%
Maine	5.0%	32.5%	-2.7%	10.3%	0.2%	5.1%	-9.2%	3.7%	8.1%	3.5%	3.0%
Maryland	20.9%	14.4%	10.1%	-22.6%	8.9%	6.9%	3.3%	5.7%	-10.2%	-3.1%	1.0%
Massachusetts*	-9.6%	-10.3%	12.3%	-0.1%	24.9%	6.9%	16.6%	20.1%	-1.4%	9.8%	2.0%
Michigan*	44.0%	-10.5%	15.6%	-1.1%	10.5%	-15.1%	-9.1%	0.0%	6.8%	-16.8%	14.3%
Minnesota*	66.7%	53.3%	-17.4%	10331.6%	7.1%	5.0%	10.3%	-3.7%	-6.0%	-3.1%	-0.4%
Mississippi	110.4%	21.5%	8.1%	13.8%	5.5%	-11.2%	-0.6%	8.1%	3.3%	-0.2%	4.1%
Missouri	20.9%	2.2%	13.0%	4.8%	5.4%	-34.8%	1.4%	-4.9%	10.5%	10.0%	-1.1%
Montana	66.5%	-3.6%	2.1%	14.3%	-0.1%	20.7%	0.9%	24.7%	12.4%	11.4%	19.2%
Nebraska	11.6%	37.0%	111.1%	-1.9%	4.3%	0.3%	5.6%	3.7%	-6.5%	15.5%	7.2%
Nevada	68.8%	28.2%	-3.4%	11.9%	10.5%	-3.4%	7.4%	-10.3%	-16.4%	-5.3%	-0.5%
New Hampshire	31.9%	33.4%	20.2%	9.4%	7.5%	9.5%	-3.6%	8.0%	-1.3%	7.9%	4.8%
New Jersey	13.8%	23.9%	-3.5%	13.0%	10.6%	10.7%	-1.6%	-3.1%	10.1%	16.2%	6.9%
New Mexico	56.0%	48.8%	8.5%	0.3%	-0.6%	-0.5%	-23.8%	20.2%	-10.9%	-0.4%	-5.2%
New York	-6.9%	13.2%	-12.7%	-8.7%	-2.8%	-8.9%	1.4%	-7.3%	4.8%	3.1%	3.7%
North Carolina	-7.9%	40.6%	19.2%	15.1%	12.9%	-16.1%	3.8%	7.7%	6.2%	32.1%	12.3%
North Dakota	35.8%	14.7%	9.1%	12.6%	15.3%	7.7%	2.2%	27.1%	-19.7%	0.5%	0.9%
Ohio	65.8%	9.8%	45.2%	3.1%	-4.7%	15.9%	-1.3%	3.2%	5.7%	3.2%	2.4%
Oklahoma*	8.6%	14.3%	8.9%	-1.5%	16.9%	7.9%	13.3%	-5.4%	4.3%	6.5%	-13.7%
Oregon*	10.4%	3.3%	3.4%	9.1%	22.4%	17.7%	34.5%	28.2%	-6.2%	19.7%	19.6%
Pennsylvania	12.0%	8.6%	9.4%	2.1%	1.6%	5.1%	12.3%	7.1%	10.9%	1.7%	-1.7%
Rhode Island*	22.7%	-4.7%	-9.4%	16.2%	2.6%	5.6%	1.6%	-2.1%	0.9%	15.3%	4.7%
South Carolina	-2.0%	11.9%	-4.1%	3.0%	2.1%	-23.6%	-10.4%	25.9%	20.0%	4.1%	9.4%
South Dakota	80.7%	23.5%	12.2%	5.2%	8.2%	6.7%	-1.7%	3.5%	3.2%	3.6%	4.7%
Tennessee*	-33.5%	-79.4%	-100.0%	-	-	-	-	67.8%	28.1%	8.5%	7.0%
Texas*	827.8%	43.3%	-3.2%	-29.8%	-9.3%	-10.1%	11.3%	69.8%	-1.8%	5.5%	0.2%
Utah	40.4%	-7.4%	8.4%	27.0%	-6.4%	26.4%	-29.8%	40.5%	17.6%	0.3%	-9.4%
Vermont	32.7%	12.1%	1.6%	-4.4%	3.3%	0.7%	-6.4%	14.0%	3.6%	4.4%	7.0%
Virginia	33.7%	26.4%	23.7%	12.1%	24.7%	7.6%	5.1%	9.9%	5.8%	3.4%	9.2%
Washington*	173.4%	65.5%	6.3%	48.7%	94.7%	-11.1%	1.0%	10.4%	13.9%	23.7%	7.2%
West Virginia	78.9%	-4.2%	8.9%	8.1%	3.9%	1.3%	0.4%	-2.1%	0.6%	1.1%	-3.0%
Wisconsin*	19.1%	19.7%	12.3%	-2.3%	-19.9%	10.5%	1.3%	128.2%	0.8%	27.1%	3.0%
Wyoming	74.4%	7.0%	3.6%	5.4%	23.8%	27.7%	8.0%	6.2%	-8.4%	-1.8%	3.1%

Note: * indicates that the state reported using the Unborn Child option.

Source: Data provided by state officials to Health Management Associates for the Kaiser Commission on Medicaid and the Uninsured, 2011.

This publication (#7642-07) is available on the Kaiser Family Foundation's website at www.kff.org.