



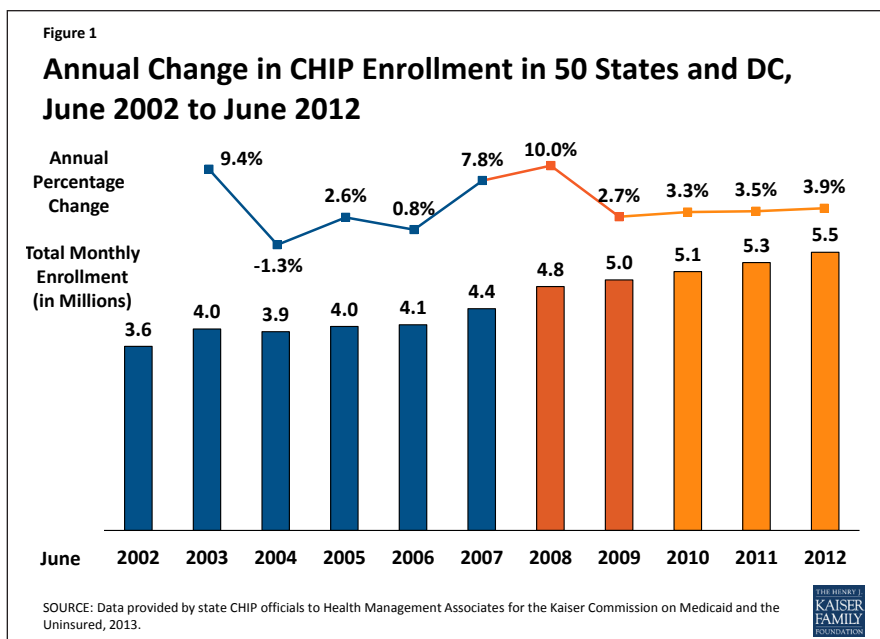
August 2013

## CHIP Enrollment: June 2012 Data Snapshot

In June 2012, the number of children enrolled in the Children’s Health Insurance Program (CHIP) reached 5.5 million. From June 2011 to June 2012, an additional 206,000 children enrolled in CHIP programs across the country, a rate of growth (3.9 percent), a slight uptick from the prior annual period (3.5%) but still well below the program’s recessionary peak of 10% growth from June 2007 to June 2008. (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 9.7 percent in 2011 despite a drop in the share of children with employer-sponsored coverage, due largely to more children gaining coverage through Medicaid and CHIP.<sup>1</sup> 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 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 through FFY 2013 for states that increase their enrollment of children who are eligible for Medicaid coverage but not enrolled and adopt enrollment simplifications. FFY 2012, nearly \$306 million in such bonuses were awarded to twenty-three states, 22 of which had previously been awarded bonuses. Additionally, 16 states received a tier 2 bonus, indicating they exceeded their enrollment targets by more than ten percent.<sup>2</sup>

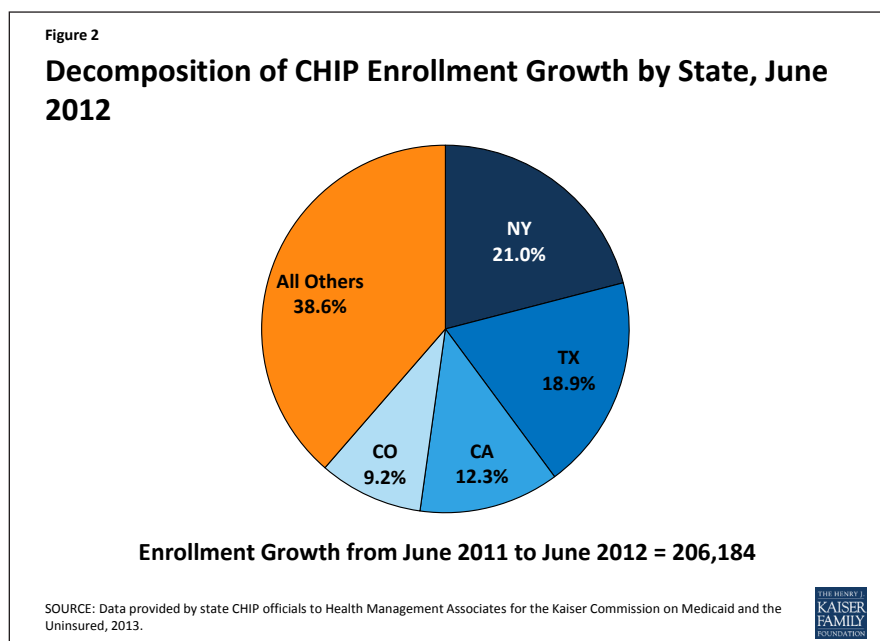
Additionally, the Affordable Care Act (ACA) included maintenance of effort (MOE) provisions which require states to maintain eligibility levels until 2019 for children. CHIP programs also face the same requirements in terms of enrollment simplifications, coordination with Medicaid and the new Marketplaces, as well as the use of Modified Adjust Gross Income beginning in 2014. Under CHIPRA, the CHIP program was reauthorized through 2015.

**Cross State Trends.** CHIP enrollment varied significantly across states. Enrollment in the program grew in 35 states from June 2011 to June 2012. Enrollment growth was attributed by state CHIP directors to the continuing impact of the economic downturn as well as outreach efforts and initiatives to streamline enrollment processes in some states. In fact, many of these states were among the twenty-three that qualified for CHIPRA performance bonuses in FFY 2012 by implementing selected measures to simplify enrollment procedures and meeting enrollment targets

for Medicaid. Six states (California, Colorado, Georgia, Indiana, New York, and Texas) had over 10,000 additional children enroll during this period; enrollment growth from just four of these states (California, Colorado, New York and Texas) accounted for over 60 percent of enrollment growth across the country during this period. (Figure 2)

Six states (Colorado, Nevada, Montana, Oklahoma, Iowa, and Indiana) had growth of 10 percent or more during this period. (Figure 3, Appendix Tables 1 and 2) In addition to economic conditions, some of these states also noted policy changes as factors for their enrollment growth. For example:

- » **Colorado** had the highest rate of growth (29.6%) during the period from June 2011 and June 2012. CHIP officials in Colorado cited the continuing effects of the Great Recession as well education and outreach efforts. In December 2012, Colorado also received the largest CHIPRA bonus award for FFY 2012 after implementing additional enrollment simplifications such as Express Lane Eligibility (ELE) and additional data matching to lessen the requirement for paper documentation.
- » **Georgia**, which saw over 13,000 additional children enroll in their program during this period, adopted the new option to cover otherwise eligible children of state employees in separate CHIP programs in 2011. The state also adopted ELE in 2011.



- » In **Montana**, which saw program enrollment growth of over 16% during this period, CHIP officials noted their Healthy Montana Kids Plan outreach effort as a factor contributing to enrollment growth, along with economic conditions. The state also noted the implementation of administrative renewal process during this period.
- » **New York**, which had an additional 43,000 children enroll in their CHIP program between June 2011 and June 2012, started moving children ages 6 - 19 with incomes between 100 and 133% FPL from their stand-alone CHIP to their Medicaid expansion CHIP program ahead of the ACA requirement to do so in 2014.<sup>3</sup>

Enrollment in CHIP programs declined in 16 states from June 2011 to June 2012. (Figure 3, Appendix 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 as well as a lack of funds for outreach.

The largest enrollment decline occurred in Arizona; enrollment in this state's CHIP program declined by nearly 34 percent (roughly 6,000 children) between June 2011 and June 2012. Officials attributed the decline to the enrollment freeze enacted by the state due to budget pressures in December 2009 before the MOE provisions under the ACA were in place.<sup>4</sup> The state has seen double digit enrollment declines among its CHIP children over the previous four annual periods. The enrollment decline in Arizona's CHIP children was mitigated by the implementation in May 2012 of KidsCare II, a new CHIP program created under a waiver related to uncompensated care funding. Enrollment into the program is limited to children between 100% and 175% FPL funded by political subdivisions. According to Arizona officials, nearly 2,000 children were enrolled in KidsCare II in June 2012.

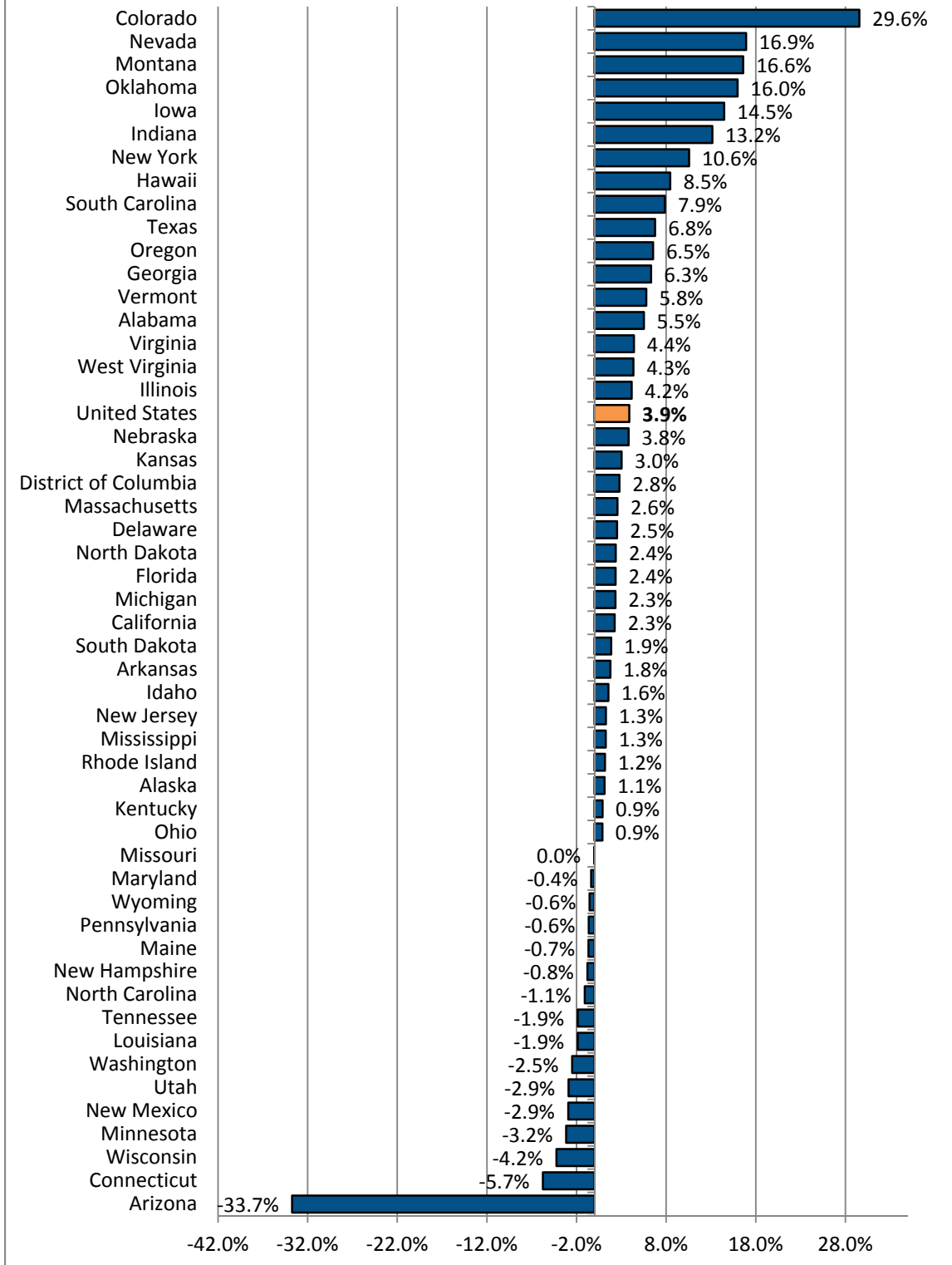
**Coverage for Pregnant Women.**<sup>5</sup> States have two options for providing coverage to pregnant women under CHIP – through a state plan amendment under the “Unborn Child” option or through a new state plan option made available as part of CHIPRA to cover pregnant women. In June 2012, 13 states reported covering nearly 139,000 pregnant women under the Unborn Child option. Additionally, three states (Hawaii, New Jersey and Rhode Island) reported implementing the new state plan option provided under CHIPRA during this period.

**Changes in CHIP Eligibility Policies.** There were two states<sup>6</sup> that reported eligibility expansions. In addition to the creation of KidsCare II in Arizona, West Virginia increased CHIP eligibility from 250 to 300% FPL effective July 2011. Also mentioned earlier, New York started moving children ages 6 - 19 with incomes between 100 and 133% FPL from their stand-alone CHIP to their Medicaid expansion CHIP program ahead of the ACA requirement to do so in 2014.

**Changes in CHIP Benefits and Cost-Sharing Policies.** Eight states reported benefit expansions during this period. The changes are detailed in Appendix Table 3; the most common change was to increase or add dental benefits. Additionally, two states (Arizona and Nevada) reported benefit restrictions for this period, also detailed in Appendix Table 3. Only one state (Idaho) reported adding cost-sharing to select services in their program during this period.

**Conclusion.** In June 2012, 5.5 million children were enrolled in CHIP programs across the country. CHIP continues to serve as an important source of health coverage for low-income children, particularly during the Great Recession and recovery period. Federal policies, such as the performance bonuses and the ACA MOE provisions, have helped states to maintain and in some instances increase the number of children covered under CHIP during this period. Looking ahead, CHIP officials in all states indicated they expected enrollment to either stay about the same (30 states) or increase (21 states). CHIP officials noted that this is a time of transition for CHIP programs as they work to implement the ACA, including implementing the same enrollment and income eligibility changes required of Medicaid as well as coordinating with Medicaid and the new Marketplaces.

**Figure 3: Percent change in CHIP Enrollment  
June 2011 to June 2012**



Source: Data provided by state officials to Health Management Associates for Kaiser Commission on Medicaid and the Uninsured, 2013.

**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 September 2011, December 2011, March 2012 and June 2012. 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 November 2012; responses were returned by April 2013. 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 2012 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 2011, i.e., federal fiscal year 2011, shows a total of 7,970,879 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 2011 per data provided by state officials for this report (not reported here) was 5,419,887 or 68.0 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.

## APPENDIX TABLE 1: TOTAL CHIP ENROLLMENT IN 50 STATES AND THE DISTRICT OF COLUMBIA JUNE 2000 TO JUNE 2012

State	Jun-00	Jun-01	Jun-02	Jun-03	Jun-04	Jun-05	Jun-06	Jun-07	Jun-08	Jun-09	Jun-10	Jun-11	Jun 12
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	85,615
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	11,040
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	12,238
Arkansas	-	-	-	45,982	54,273	62,141	67,170	69,349	67,832	64,213	68,017	70,372	71,621
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	1,152,476
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	82,856
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	12,872
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	6,401
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	6,514
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	258,414
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	220,778
Hawaii	-	5,545	8,146	10,071	12,261	14,108	15,569	17,226	18,787	20,763	24,359	25,257	27,392
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	25,222
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	219,252
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	94,476
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	65,280
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	47,078
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	67,631
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	121,696
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	15,838
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	97,063
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	119,014
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	45,072
Minnesota	9	15	23	19	1,982	2,122	2,229	2,458	2,368	2,226	2,156	2,148	2,080
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	70,550
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	70,828
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	28,844
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	30,516
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	24,717
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	8,868
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	168,337
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	7,926
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	452,462
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	190,766
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	4,818
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	163,473
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	70,017
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	72,557
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	190,279
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	15,209
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	66,809
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	13,158
Tennessee	15,146	10,069	2,074	-	-	-	-	31,619	53,064	67,980	73,741	78,883	77,407
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	615,017
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	36,605
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	3,936
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	113,333
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	30,873
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	25,114
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	90,468
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	5,566
<b>United States</b>	<b>2,239,409</b>	<b>3,066,481</b>	<b>3,649,131</b>	<b>3,993,508</b>	<b>3,941,608</b>	<b>4,043,863</b>	<b>4,078,163</b>	<b>4,397,495</b>	<b>4,835,639</b>	<b>4,966,030</b>	<b>5,132,082</b>	<b>5,310,188</b>	<b>5,516,372</b>

**NOTES:** The data reported here reflect the number of children, including individuals covered under the unborn child state plan option, enrolled in CHIP in each state at each point in time. States that reported data for pregnant women covered under the unborn child option include: AR, CA, IL, LA, MA, MI, MN, OK, OR, RI, TX, WA, and WI. Tennessee reported having adopted the unborn child option but did not provide data on the number of pregnant women covered under this option.

**SOURCE:** Data provided by state officials to Health Management Associates for the Kaiser Commission on Medicaid and the Uninsured, 2013

**APPENDIX TABLE 2: TOTAL CHIP ENROLLMENT IN 50 STATES AND THE DISTRICT OF COLUMBIA  
ANNUAL PERCENTAGE CHANGE, JUNE 2000 TO JUNE 2012**

State	2000 – 2001	2001 – 2002	2002 – 2003	2003 – 2004	2004 – 2005	2005 – 2006	2006 – 2007	2007 – 2008	2008 – 2009	2009 – 2010	2010 – 2011	2011 – 2012
Alabama	13.8%	27.2%	13.6%	-2.3%	9.0%	2.4%	2.8%	5.2%	-2.8%	8.5%	8.0%	5.5%
Alaska	23.7%	12.6%	-3.8%	15.9%	-20.2%	-15.7%	-18.7%	12.2%	-0.3%	16.4%	7.6%	1.1%
Arizona	48.0%	-6.2%	2.9%	0.7%	0.5%	17.0%	8.8%	2.1%	-18.9%	-39.7%	-42.7%	-33.7%
Arkansas	-	-	-	18.0%	14.5%	8.1%	3.2%	-2.2%	-5.3%	5.9%	3.5%	1.8%
California	48.8%	27.1%	17.7%	0.8%	13.4%	5.1%	14.6%	7.7%	6.2%	-5.8%	6.1%	2.3%
Colorado	38.4%	24.6%	21.6%	-30.2%	9.8%	32.4%	-3.6%	15.8%	7.4%	7.4%	-7.8%	29.6%
Connecticut	12.6%	26.0%	2.0%	11.0%	0.4%	-9.2%	20.7%	-10.3%	-8.4%	0.5%	-3.9%	-5.7%
Delaware	19.1%	17.8%	10.8%	-23.5%	26.0%	11.1%	4.6%	8.2%	11.1%	4.1%	-1.5%	2.5%
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%	2.8%
Florida	38.1%	11.2%	28.9%	4.4%	-38.5%	-5.1%	16.0%	3.0%	-2.7%	13.0%	-0.7%	2.4%
Georgia	54.7%	24.5%	11.3%	7.3%	16.2%	12.4%	7.5%	-18.5%	-11.8%	3.5%	0.8%	6.3%
Hawaii	-	46.9%	23.6%	21.7%	15.1%	10.4%	10.6%	9.1%	10.5%	17.3%	3.7%	8.5%
Idaho	64.0%	9.0%	-11.6%	10.0%	17.0%	3.6%	35.5%	38.5%	10.6%	-17.0%	0.9%	1.6%
Illinois	17.7%	14.4%	12.8%	48.8%	13.5%	11.2%	15.8%	6.3%	4.9%	4.7%	3.0%	4.2%
Indiana	19.1%	1.7%	17.7%	13.2%	7.0%	1.2%	-2.0%	4.2%	-1.1%	13.1%	4.7%	13.2%
Iowa	55.3%	21.9%	11.7%	10.7%	8.6%	3.9%	-7.9%	3.5%	26.7%	2.4%	27.1%	14.5%
Kansas	29.0%	20.0%	13.2%	10.0%	4.8%	8.7%	-6.0%	7.6%	1.8%	3.4%	14.0%	3.0%
Kentucky	28.2%	-3.6%	-3.4%	-5.2%	2.7%	1.7%	4.6%	1.9%	0.8%	11.1%	11.8%	0.9%
Louisiana	62.9%	36.9%	18.4%	14.5%	6.9%	-0.1%	0.0%	15.3%	1.9%	-1.8%	-0.3%	-1.9%
Maine	5.0%	32.5%	-2.7%	10.3%	0.2%	5.1%	-9.2%	3.7%	8.1%	3.5%	3.0%	-0.7%
Maryland	20.9%	14.4%	10.1%	-22.6%	8.9%	6.9%	3.3%	5.7%	-10.2%	-3.1%	1.0%	-0.4%
Massachusetts	-9.6%	-10.3%	12.3%	-0.1%	24.9%	6.9%	16.6%	20.1%	-1.4%	9.8%	2.0%	2.6%
Michigan	44.0%	-10.5%	15.6%	-1.1%	10.5%	-15.1%	-9.1%	-0.0%	6.8%	-16.8%	14.3%	2.3%
Minnesota	66.7%	53.3%	-17.4%	10331.6%	7.1%	5.0%	10.3%	-3.7%	-6.0%	-3.1%	-0.4%	-3.2%
Mississippi	110.4%	21.5%	8.1%	13.8%	5.5%	-11.2%	-0.6%	8.1%	3.3%	-0.2%	4.1%	1.3%
Missouri	20.9%	2.2%	13.0%	4.8%	5.4%	-34.8%	1.4%	-4.9%	10.5%	10.0%	-1.1%	-0.0%
Montana	66.5%	-3.6%	2.1%	14.3%	-0.1%	20.7%	0.9%	24.7%	12.4%	11.4%	19.2%	16.6%
Nebraska	11.6%	37.0%	111.1%	-1.9%	4.3%	0.3%	5.6%	3.7%	-6.5%	15.5%	7.2%	3.8%
Nevada	68.8%	28.2%	-3.4%	11.9%	10.5%	-3.4%	7.4%	-10.3%	-16.4%	-5.3%	-0.5%	16.9%
New Hampshire	31.9%	33.4%	20.2%	9.4%	7.5%	9.5%	-3.6%	8.0%	-1.3%	7.9%	4.8%	-0.8%
New Jersey	13.8%	23.9%	-3.5%	13.0%	10.6%	10.7%	-1.6%	-3.1%	10.1%	16.2%	6.9%	1.3%
New Mexico	56.0%	48.8%	8.5%	0.3%	-0.6%	-0.5%	-23.8%	20.2%	-10.9%	-0.4%	-5.2%	-2.9%
New York	-6.9%	13.2%	-12.7%	-8.7%	-2.8%	-8.9%	1.4%	-7.3%	4.8%	3.1%	3.7%	10.6%
North Carolina	-7.9%	40.6%	19.2%	15.1%	12.9%	-16.1%	3.8%	7.7%	6.2%	32.1%	12.3%	-1.1%
North Dakota	35.8%	14.7%	9.1%	12.6%	15.3%	7.7%	2.2%	27.1%	-19.7%	0.5%	0.9%	2.4%
Ohio	65.8%	9.8%	45.2%	3.1%	-4.7%	15.9%	-1.3%	3.2%	5.7%	3.2%	2.4%	0.9%
Oklahoma	8.6%	14.3%	8.9%	-1.5%	16.9%	7.9%	13.3%	-5.4%	4.3%	6.5%	-13.7%	16.0%
Oregon	10.4%	3.3%	3.4%	9.1%	22.4%	17.7%	34.5%	28.2%	-6.2%	19.7%	19.6%	6.5%
Pennsylvania	12.0%	8.6%	9.4%	2.1%	1.6%	5.1%	12.3%	7.1%	10.9%	1.7%	-1.7%	-0.6%
Rhode Island	22.7%	-4.7%	-9.4%	16.2%	2.6%	5.6%	1.6%	-2.1%	0.9%	15.3%	4.7%	1.2%
South Carolina	-2.0%	11.9%	-4.1%	3.0%	2.1%	-23.6%	-10.4%	25.9%	20.0%	4.1%	9.4%	7.9%
South Dakota	80.7%	23.5%	12.2%	5.2%	8.2%	6.7%	-1.7%	3.5%	3.2%	3.6%	4.7%	1.9%
Tennessee	-33.5%	-79.4%	-100.0%	-	-	-	-	67.8%	28.1%	8.5%	7.0%	-1.9%
Texas	827.8%	43.3%	-3.2%	-29.8%	-9.3%	-10.1%	11.3%	69.8%	-1.8%	5.5%	0.2%	6.8%
Utah	40.4%	-7.4%	8.4%	27.0%	-6.4%	26.4%	-29.8%	40.5%	17.6%	0.3%	-9.4%	-2.9%
Vermont	32.7%	12.1%	1.6%	-4.4%	3.3%	0.7%	-6.4%	14.0%	3.6%	4.4%	7.0%	5.8%
Virginia	33.7%	26.4%	23.7%	12.1%	24.7%	7.6%	5.1%	9.9%	5.8%	3.4%	9.2%	4.4%
Washington	173.4%	65.5%	6.3%	48.7%	94.7%	-11.1%	1.0%	10.4%	13.9%	23.7%	7.2%	-2.5%
West Virginia	78.9%	-4.2%	8.9%	8.1%	3.9%	1.3%	0.4%	-2.1%	0.6%	1.1%	-3.0%	4.3%
Wisconsin	19.1%	19.7%	12.3%	-2.3%	-19.9%	10.5%	1.3%	128.2%	0.8%	27.1%	3.0%	-4.2%
Wyoming	74.4%	7.0%	3.6%	5.4%	23.8%	27.7%	8.0%	6.2%	-8.4%	-1.8%	3.1%	-0.6%
<b>United States</b>	<b>36.9%</b>	<b>19.0%</b>	<b>9.4%</b>	<b>-1.3%</b>	<b>2.6%</b>	<b>0.8%</b>	<b>7.8%</b>	<b>10.0%</b>	<b>2.7%</b>	<b>3.3%</b>	<b>3.5%</b>	<b>3.9%</b>

**NOTES:** The data reported here reflect the number of children, including individuals covered under the unborn child state plan option, enrolled in CHIP in each state at each point in time. States that reported data for pregnant women covered under the unborn child option include: AR, CA, IL, LA, MA, MI, MN, OK, OR, RI, TX, WA, and WI. Tennessee reported having adopted the unborn child option but did not provide data on the number of pregnant women covered under this option.

**SOURCE:** Date provided by state officials to Health Management Associates for the Kaiser Commission on Medicaid and the Uninsured, 2013



**APPENDIX TABLE 3: CHIP BENEFIT CHANGES  
JUNE 2000 TO JUNE 2012**

<b>State</b>	<b>Benefit Change</b>
<b>Alabama</b>	Began covering HPV for males.
<b>Arizona</b>	Instituted a 25 day hospital inpatient limit for all programs, including CHIP, effective 10/1/11.
<b>Louisiana</b>	Added dental benefits for Separate CHIP children with income between 201 and 250% FPL effective 2/1/2012.
<b>Nevada</b>	Eliminated non-emergency transportation effective September 1, 2011 due to budgetary constraints.
<b>New York</b>	Began covering a very limited medical orthodontia benefit.
<b>Pennsylvania</b>	Began covering all the dental procedures covered by the Pennsylvania state employees' dental plan effective January 1, 2012. Also waived all deductibles, copayments or coinsurance for PA CHIP covered dental benefits; continued the "least expensive alternative treatment" policy; included coverage for composite/resin fillings without regard to a child's age and provided for Nitrous Oxide or non-intravenous conscious sedation when deemed medically necessary by a child's dentist for an anxious or otherwise unmanageable child without regard to age. Also, for CY 2012 only, provided extended dental benefits for a program total of up to \$1 million made available on a first come first served basis to be used for medically necessary general dental or orthodontia expenses exceeding the \$1,500 and \$5,200 limits, up to \$1,000 per child.
<b>Texas</b>	Added additional dental benefits, including periodontic and prosthodontic services effective March 1, 2012 in order to comply with CHIPRA requirements related to dental coverage. In addition, Texas eliminated its dental tiers, removed the coverage limits for preventive and therapeutic dental services, and now provides all CHIP members coverage up to \$564 per each 12-month enrollment period. Emergency dental services are not subject to the dental benefit limit and do not count toward a CHIP member's benefit limit.
<b>Vermont</b>	Added coverage of telemedicine services for mental health.
<b>Virginia</b>	Added coverage for early intervention case management.
<b>West Virginia</b>	Added applied behavior analysis therapy benefit to autistic children.
<b>Source:</b> Data provided by state CHIP officials to Health Management Associates for the Kaiser Commission on Medicaid and the Uninsured, 2013.	



# Endnotes

- <sup>1</sup> Kaiser Commission on Medicaid and the Uninsured, *The Uninsured: A Primer*, (Washington, DC: Kaiser Commission on Medicaid and the Uninsured, October 2012,) <http://kff.org/medicaid/issue-brief/the-uninsured-a-primer/>.
- <sup>2</sup> CHIPRA Performance Bonuses. InsureKidsNow.gov, Centers for Medicare and Medicaid Services (CMS), Accessed August 5, 2013. [http://www.insurekidsnow.gov/professionals/eligibility/performance\\_bonuses.html](http://www.insurekidsnow.gov/professionals/eligibility/performance_bonuses.html).
- <sup>3</sup> The ACA requires that Medicaid cover children with incomes up to 133 percent of the federal poverty level (FPL) (\$31,322 for a family of four in 2013) as of January 2014. Today, there are “stairstep” eligibility rules for children. States must cover children under the age of six in families with income of at least 133 percent of the FPL in Medicaid while older children and teens with incomes above 100 percent of the FPL may be covered in separate state Children’s Health Insurance Programs (CHIP). Due to the change in law, 21 states needed to transition some children from CHIP to Medicaid. States like New York implemented an early transition of children from stand-alone CHIP programs to Medicaid expansion CHIP programs. After the publication of this report, Colorado also implemented an early transition of children from CHIP to Medicaid. New Hampshire and California moved or are in the process of transitioning all CHIP kids to Medicaid.  
Wesley Prater and Joan Alker, *Aligning Family Eligibility for Children: Moving the “StairStep” Kids*, (Washington, DC: Kaiser Commission on Medicaid and the Uninsured, August 2013,) <http://www.kff.org/medicaid/issue-brief/aligning-eligibility-for-children-moving-the-stairstep-kids-to-medicaid/>
- <sup>4</sup> For more information on the effect of the enrollment freeze, see Martha Heberlein, Jocelyn Guyer, and Cathy Hope, *The Arizona KidsCare CHIP Enrollment Freeze: How Has it Impacted Enrollment and Families?* (Washington, DC: Kaiser Commission on Medicaid and the Uninsured, September 2011,) <http://www.kff.org/medicaid/issue-brief/the-arizona-kidscare-chip-enrollment-freeze-how/>.
- <sup>5</sup> 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.
- <sup>6</sup> Additionally, CHIP officials in Kansas reported that there was a legislative requirement resulted in a small reduction in eligibility from 238 to 232% FPL in early 2012. Kansas statute sets eligibility for CHIP at 250% of the 2008 Federal Poverty Level (FPL). This approximates to 232% of the 2012 FPL. Officials in Nevada also reported a small increase in income eligibility for their CHIP program; this change was an increase in the dollar amount but not a change in the %FPL.



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