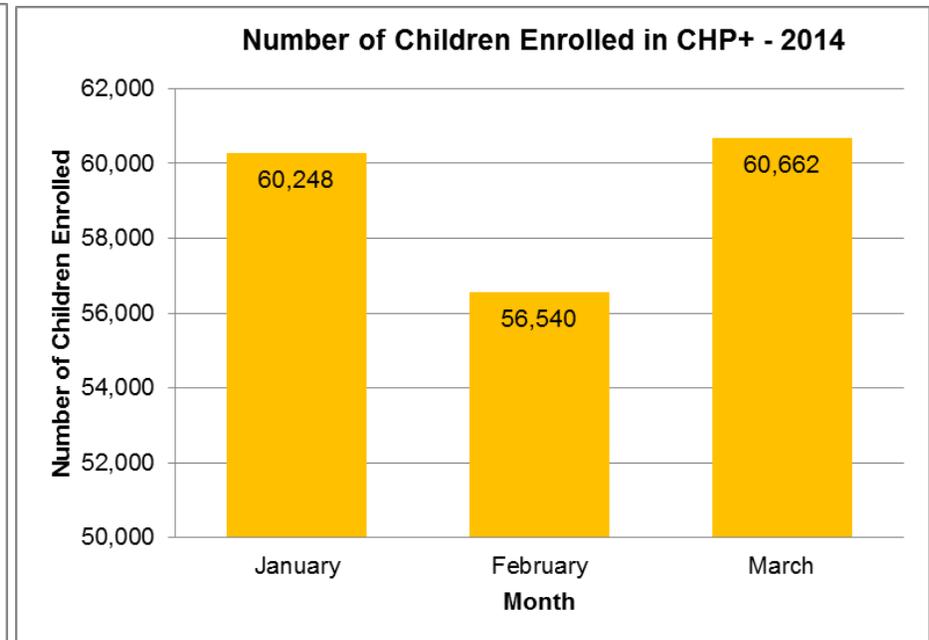
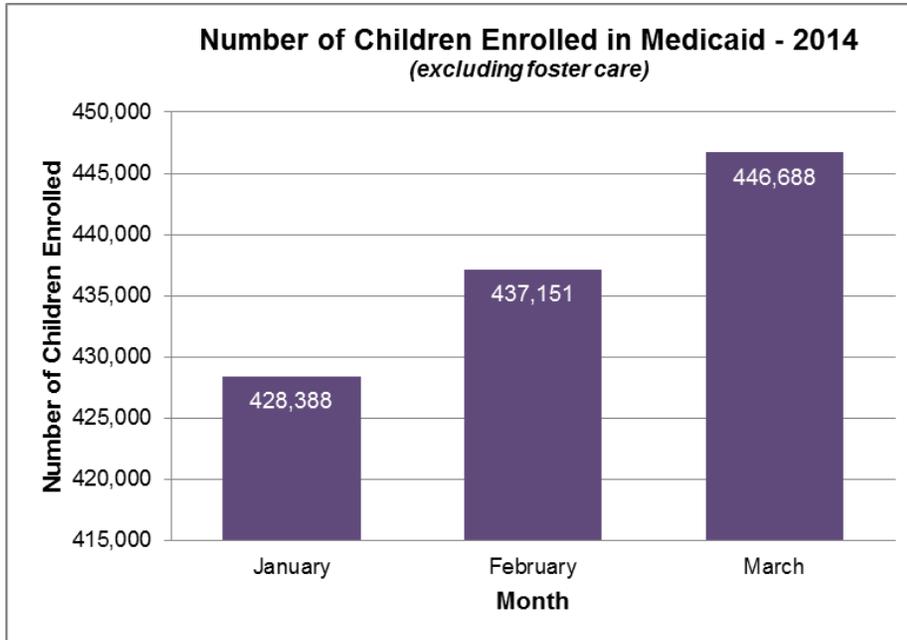


Colorado Children’s Medicaid and CHP+ Enrollment – 2014 Quarter One

The purpose of this report is to illustrate children’s enrollment changes in Colorado’s Medicaid and Child Health Plan *Plus* (CHP+) programs and identify corresponding legislation, rule changes, and other factors that may have contributed to an increase or decrease in enrollment. This brief report provides a snapshot of the first quarter (January, February, and March) of 2014. The enrollment data used for this report is from the Colorado Department of Health Care Policy and Financing (HCPF) Medical Services Premiums, Expenditures and Medicaid Caseload Reports.¹

2014 Quarter One

In the first quarter of 2014, Medical Assistance programs for children experienced an overall increase in caseload with approximately 3.8 percent growth over three months between January and March 2013. Both Medicaid and CHP+ programs experienced growth, however overall CHP+ growth was small (0.7 percent) while Medicaid caseload was more robust (4.3 percent). Medicaid caseload grew by 18,300 cases from January to March, and CHP+ caseload grew by 414 cases in the same time period. Notably, while CHP+ enrollment was steady overall in the first quarter, enrollment dropped by 3,700 cases in February and then rebounded in March.



¹ The Department of Health Care Policy and Financing. (2014). *Premiums, Expenditures and Caseload Reports*. Retrieved May 5, 2014, from <http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1209635766663>

What caused the overall increase in Medicaid and CHP+ enrollments?

Although exact causes for enrollment changes are difficult to discern with the data available, CKF hypothesizes that Medicaid and CHP+ enrollment may have been influenced by the following factors:

- **Private insurance open enrollment period:** The deadline for individuals to apply for private health insurance was March 31, 2014. It is likely that this deadline motivated people to apply in the first quarter of 2014. Although the deadline was for private insurance coverage, parents who applied for insurance through the state's health insurance marketplace would have received a Medicaid/CHP+ eligibility determination for the family as well. Through this process, it is likely that some children qualified for CHP+ or that the family found they all qualified for Medicaid.
- **Deadline to enroll in health coverage to avoid tax penalties:** The federal deadline to have health insurance in 2014 to avoid tax penalties was also March 31, 2014. Again, this deadline was likely a motivating factor for families to apply for health coverage, including CHP+ and Medicaid.
- **Outreach and enrollment efforts:** Community outreach to uninsured Coloradans was high at the end of 2013 and beginning of 2014 through federally qualified Community Health Centers, community based organizations, and Connect for Health Colorado's Health Coverage Guide sites. The increased community outreach, media, and advertising about health coverage options aimed at consumers likely motivated people to apply at high levels in the first quarter of 2014.
- **Supplemental Nutrition Assistance Program (SNAP) letters:** At the end of December, HCPF sent letters to 16,000 children enrolled in SNAP, formerly food stamps, but who were not yet enrolled in Medicaid or CHP+. The letters described the short steps families would need to take to enroll the child in Medicaid. HCPF has reported that about 4,500 children have enrolled in Medicaid as a result of these letters.²

What caused the February drop in CHP+ enrollments?

The cause of the drop in CHP+ caseload by 3,700 cases in February is unknown. Some contributing factors may include:

- **Colorado Benefits Management System (CBMS) updates:** A mass update to CBMS in March 2014 ran eligibility determinations on a large number of cases that had missing Income Rating Codes (codes used by CBMS and based on the client's household size and income). This update may have registered some children's cases in the system correctly as enrolled in CHP+ where before cases with missing Income Rating Codes may not have been reflected in reports.
- **Income and Eligibility Verification System (IEVS) data posted:** Electronic income data from the last quarter of 2013 would have been posted to CBMS at the end of January 2014 and applied to families' cases in February 2014. It is possible that this income check caused kids previously enrolled in CHP+ to move to Medicaid in February 2014.

Looking Forward

Medicaid enrollment is expected to increase at a slower pace after the March 31 deadline to enroll in health insurance has passed. CHP+ enrollment is expected to stay level or potentially decrease slightly as the Colorado economy begins to recover. With the implementation of continuous eligibility on March 1, 2014, CKF also expects that large fluctuations in enrollment corresponding with quarterly income checks through the IEVS interface should no longer occur.

For more information, contact Stephanie Brooks, CKF Policy Analyst, at sbrooks@cchn.org

² Covering Kids and Families. (2013) *Agency Partner Work Group Meeting Notes March 28, 2014*. Retrieved June 19, 2014 from <http://cchn.org/ckf/wp-content/uploads/2014/04/Agency-Partner-Notes-3.28.14.pdf>