



Colorado Children’s Medicaid and CHP+ Enrollment Report – 2014 Quarter Four and Year in Review

Colorado Covering Kids and Families’ (CKF) quarterly enrollment reports illustrate children’s enrollment changes in Colorado’s Medicaid and Child Health Plan Plus (CHP+) programs and identifies corresponding legislation, rule changes, and other factors that may have contributed to an increase or decrease in enrollment. The enrollment data used for this report is from the Colorado Department of Health Care Policy and Financing’s (HCPF) Medical Services Premiums, Expenditures, and Medicaid Caseload Reports.¹

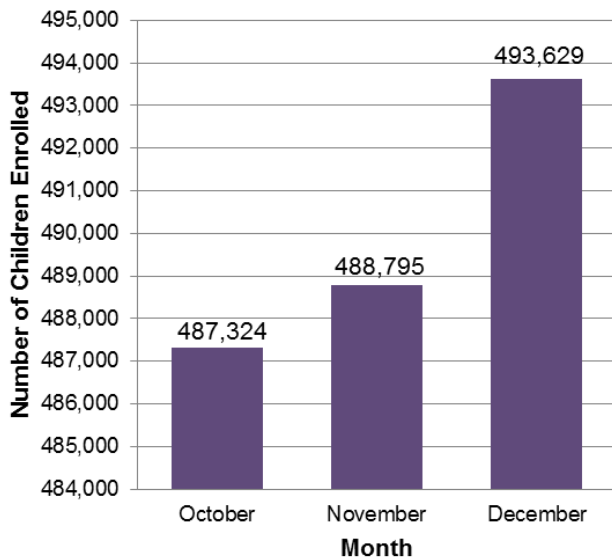
This report provides a snapshot of children’s Medicaid and CHP+ enrollment in the fourth quarter of 2014, and an overview of the entire year.

2014 Quarter Four Enrollment

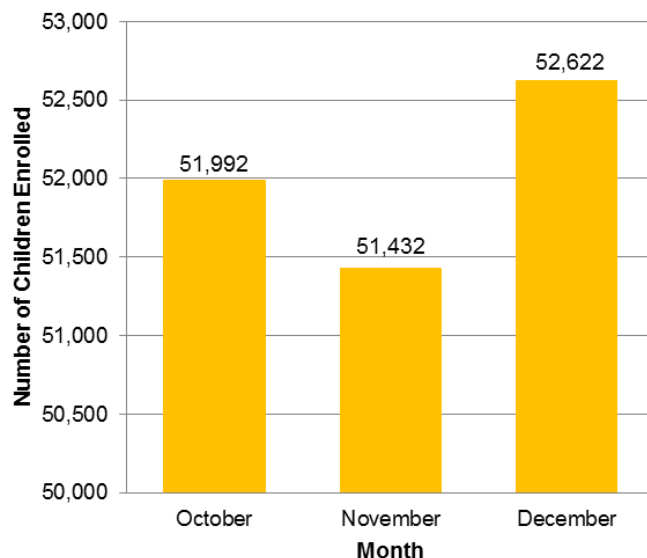
As in previous quarters of 2014, children’s combined enrollment in Medicaid and CHP+ continued to increase. Between October and December, overall caseload for children grew by 1.3 percent, or nearly 7,000 enrollments.

Medicaid enrollments made up the bulk of the increased caseload with a total of 6,305 additional children enrolled over the quarter. CHP+ enrollment also increased with 630 new enrollees over the quarter representing a 1.2 percent increase. CHP+ enrollment did not rise steadily, however. The number of children enrolled in CHP+ decreased by 560 between October and November, but increased by 1,190 between November and December.

Number of Children Enrolled in Medicaid
2014 Quarter 4



Number of Children Enrolled in CHP+
2014 Quarter 4



Overall Children’s Medicaid and CHP+ Enrollment in 2014

Throughout 2014, children’s enrollment in Medicaid increased by 15 percent with 65,241 new enrollments, while children’s enrollment in CHP+ decreased by a total of 7,626 enrollments, a 13 percent decrease.

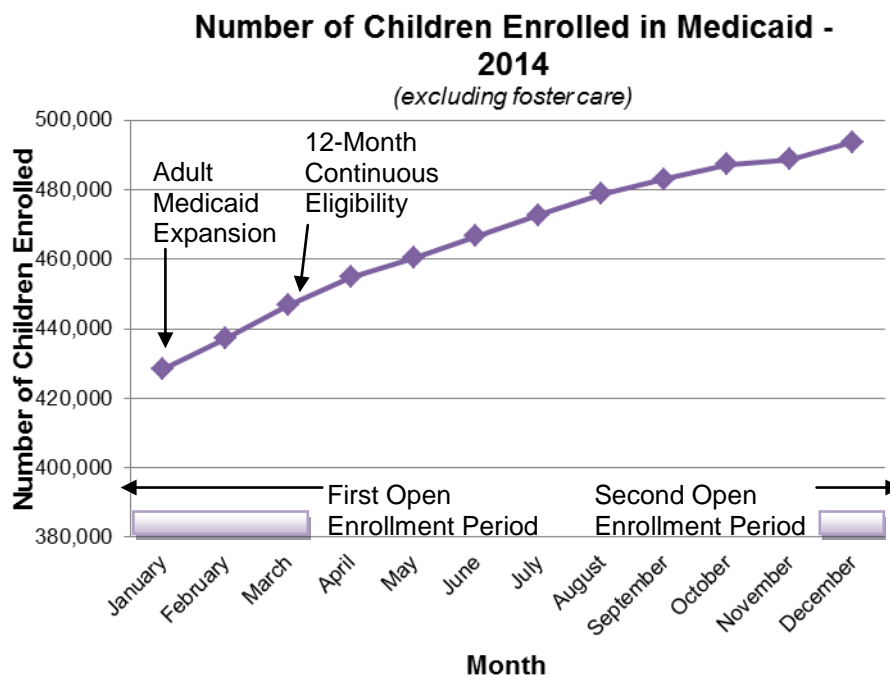
Children enrolled in Medicaid at a slightly higher rate in 2014 than in 2013 when children’s Medicaid enrollment grew by 14 percent. CHP+ lost members in 2014, but at a slower rate than in 2013 when

CHP+ membership declined by 25 percent over the course of the year (the change in 2013, however, was due in large part to an increase in children’s Medicaid eligibility, which transferred children from CHP+ coverage to Medicaid).

Increased Medicaid Enrollment

The following efforts and policies likely contributed to the increase in Medicaid enrollment in 2014:

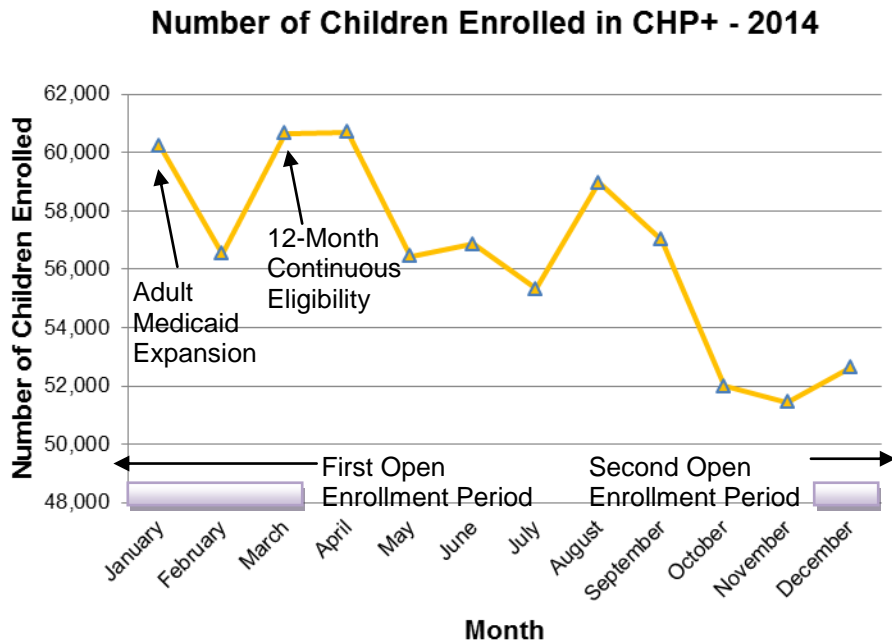
- **Outreach and enrollment efforts:** Community-based organizations, HCPF, and Connect for Health Colorado engaged in robust efforts to educate Coloradans about new health coverage options related to the Affordable Care Act (ACA). These efforts likely drove an increase in Medicaid enrollments for both children and adults.
- **New penalties for not having insurance:** The new individual shared responsibility provision in the ACA may have driven more people to sign up for insurance to avoid fines.
- **More parents eligible for Medicaid:** The eligibility level for adults increased to 133 percent of the Federal Poverty Level (FPL) on January 1, 2014, which may have encouraged more parents to apply for coverage for the whole family.
- **Twelve-month continuous eligibility:** Implemented in March 2014, children should now stay enrolled in Medicaid until their next annual renewal date regardless of changes in family income or size. As a result, fewer children should have lost Medicaid coverage throughout their coverage year and moved between programs after March 2014.



Decline in CHP+ Enrollment

While enrollment in CHP+ fell overall in 2014, the data show that enrollment declined at a higher rate for families above 200 percent FPL. Specifically, CHP+ enrollment for kids with family incomes above 200 percent FPL declined by 22 percent (nearly 5,000 children), while the rate of decline in enrollments for CHP+ kids at or below 200 percent FPL was only seven percent (nearly 2,700 children).

This is in contrast to overall CHP+ enrollment in 2013, when enrollment of kids above 200 percent FPL actually increased at a rate of 25 percent, while enrollment of kids at or below 200 percent FPL decreased drastically at 40 percent. The decline in 2013 was largely due to many CHP+ enrolled children under 133 percent FPL becoming eligible for Medicaid in January 2013, and moving to the program at their annual renewal date throughout the year.



The following may have impacted CHP+ caseload in 2014:

- Rising incomes:** Some children may have become ineligible for CHP+ at their annual renewal date because their family income increased. As Colorado's economy continues to recover from the recession, it is possible that more families are becoming ineligible for CHP+.
- Private insurance enrollment:** Connect for Health Colorado, the state's health insurance marketplace, opened for business in late 2013. Although families cannot receive premium tax credits for children who are CHP+ eligible, it is possible that families in the CHP+ income range are forgoing CHP+ and the cost benefits of the program in favor of enrolling the whole family in one private coverage option through Connect for Health Colorado, or outside of the marketplace.
- Systems Issues:** Technical issues with the state's eligibility and enrollment system may impact the numbers that HCPF reports in caseload reports. The apparent decrease in CHP+ enrollment could be due to a system error rather than an actual loss in coverage for kids. Alternately, systems errors may incorrectly terminate children's CHP+ coverage. With the implementation of 12-month continuous eligibility in March 2014, children's CHP+ eligibility should only be terminated at their annual renewal date if the child is determined ineligible at that time. However, the fluctuations in CHP+ enrollment each month exceed what would be expected for annual renewal fluctuations, so other systems issues (e.g. 12-month continuous eligibility not working as designed, or errors with renewals) may be responsible for the fluctuations.

CKF continues to work with HCPF to better understand the issues that are impacting CHP+ enrollment to ensure that children are not losing coverage incorrectly.

Looking Forward

Based on trends from 2014, and what we know about upcoming changes, CKF anticipates the following for 2015:

- **Slower Medicaid growth:** As more Colorado children, families, and individuals enroll in appropriate health coverage based on their income and eligibility, CKF expects to see some leveling of the rate of increase of children's Medicaid enrollment in 2015. In their latest update, the Colorado Health Institute (CHI) estimated that approximately 45,000 children were Medicaid eligible, but uninsured.² With an increase of more than 65,000 in children's Medicaid caseload in 2014, CKF expects that fewer children will be uninsured overall, and that growth in Medicaid enrollment will slow down in 2015.
- **Continued attention on enrollment for CHP+ eligible kids:** More analysis needs to be done to understand how kids who are within the income ranges for CHP+ are getting health coverage. CHI estimated that about 36,000 children were CHP+ eligible but uninsured in their latest update, but CHP+ caseload decreased rather than increased in 2014. CKF will continue to work with HCPF to understand issues related to CHP+ enrollment, and will conduct further analysis to understand more about kids' enrollment through Connect for Health Colorado.
- **Removal of the five-year bar:** The removal of the five-year bar for legally present immigrant children to qualify for Medicaid and CHP+ is slated for July 2015. This may result in more children enrolling in Medicaid and CHP+ after the policy is implemented. CKF plans to monitor this issue closely to ensure that legal immigrant children who are currently enrolled in marketplace coverage are able to easily move to Medicaid or CHP+.
- **Potential changes proposed in the HCPF budget:** Changes proposed in HCPF's budget could impact enrollment in Medicaid and CHP+. If approved, a 30-day grace period for families to pay the CHP+ enrollment fee may help children more easily enroll in CHP+. Additionally, a proposal to use annualized income rather than current or prior month's income for Medicaid and CHP+ determinations may also help children whose families are supported by seasonal income to enroll in Medicaid or CHP+ coverage.

Previous quarterly enrollment reports can be found on the CKF website at cchn.org/ckf/quarterly-enrollment-reports/. For more information, contact Stephanie Brooks, CKF Policy Analyst, at sbrooks@cchn.org.

¹ Colorado Department of Health Care Policy and Financing. (2015). *Premiums, Expenditures and Caseload Reports*. <https://www.colorado.gov/pacific/hcpf/premiums-expenditures-and-caseload-reports>

² Colorado Health Institute. (2014) *Colorado Children's Health Insurance Status*.

http://www.coloradohealthinstitute.org/uploads/downloads/EBNE_Kids_Data_Supplement_3_19_2014.pdf