

Table 8
Online and Telephone Medicaid Applications
January 2016

State	Applications Can be Submitted Online at the State Level ¹	Online Application for Medicaid Allows Individuals to:		Separate Online Portal for Application Assistants ²	Online Multi-Benefit Application for MAGI-Based Medicaid and Non-Health Programs ³	Telephone Applications at the State Level ⁴
		Start, Stop, and Return to an Application	Scan and Upload Documentation			
Total	50	49	33	24	24	49
Alabama	Y	Y				Y
Alaska	Y	Y				Y
Arizona	Y	Y	Y	Y	Y	Y
Arkansas ⁵	Y	Y				Y
California	Y	Y	Y	Y	Y	Y
Colorado	Y	Y	Y		Y	Y
Connecticut	Y	Y	Y			Y
Delaware ⁶	Y	Y		Y	Y	Y
District of Columbia	Y	Y	Y	Y		Y
Florida ⁵	Y	Y	Y	Y	Y	Y
Georgia ⁷	Y	Y	Y		Y	Y
Hawaii ⁷	Y	Y	Y	Y		Y
Idaho ⁷	Y	Y	Y	Y		Y
Illinois	Y	Y	Y	Y	Y	Y
Indiana	Y	Y				Y
Iowa	Y	Y				Y
Kansas ⁷	Y	Y	Y			Y
Kentucky	Y	Y	Y	Y		Y
Louisiana	Y	Y		Y		Y
Maine	Y	Y			Y	Y
Maryland	Y	Y	Y		Y	Y
Massachusetts	Y	Y				Y
Michigan	Y	Y	Y		Y	Y
Minnesota	Y	Y		Y		
Mississippi	Y		Y			Y
Missouri	Y	Y				Y
Montana	Y	Y	Y		Y	Y
Nebraska ⁸	Y	Y	Y			Y
Nevada	Y	Y	Y		Y	Y
New Hampshire	Y	Y	Y		Y	Y
New Jersey ⁹	Y	Y				Y
New Mexico	Y	Y	Y	Y	Y	Y
New York	Y	Y	Y	Y		Y
North Carolina	Y	Y			Y	Y
North Dakota	Y	Y	Y	Y	Y	Y
Ohio	Y	Y	Y	Y		Y
Oklahoma	Y	Y	Y	Y		Y
Oregon ^{7,9}	Y	Y	Y	Y		Y
Pennsylvania	Y	Y	Y	Y	Y	Y
Rhode Island	Y	Y	Y	Y	Y	Y
South Carolina	Y	Y				Y
South Dakota	Y	Y	Y		Y	Y
Tennessee						
Texas	Y	Y	Y	Y	Y	Y
Utah	Y	Y			Y	Y
Vermont	Y	Y		Y		Y
Virginia	Y	Y	Y		Y	Y
Washington	Y	Y	Y	Y		Y
West Virginia	Y	Y		Y	Y	Y
Wisconsin	Y	Y	Y	Y	Y	Y
Wyoming	Y	Y	Y			Y

SOURCE: Based on a national survey conducted by the Kaiser Commission on Medicaid and the Uninsured with the Georgetown University Center for Children and Families, 2016.

Table presents rules in effect as of January 1, 2016.

TABLE 8 NOTES

1. This column indicates whether individuals can complete and submit an online application for Medicaid through a state-level portal. For State-based Marketplace (SBM) states, such a portal may be either exclusive to Medicaid or integrated with the Marketplace. For Federally-facilitated Marketplace (FFM) and Partnership Marketplace states, state Medicaid agency portals are indicated.
2. This column indicates whether the MAGI-based Medicaid eligibility system provides either a separate online portal for application assisters or a secure log-in for assisters to submit facilitated applications. Some states are able to identify and collect information about assister-facilitated applications although they do not have a separate portal or secure log-in for assisters to submit facilitated applications.
3. In these states, a combined online multi-benefit application is available that allows applicants to apply for MAGI-based Medicaid and one or more non-health programs, such as SNAP (food stamps) or cash assistance.
4. This column indicates whether individuals can complete MAGI-based Medicaid applications over the telephone at the state level, either through the Medicaid agency or the State-based Marketplace.
5. Arkansas and Florida began accepting telephone applications in 2015.
6. In Delaware, families can call an eligibility worker to complete a Medicaid application; the application is then mailed to the applicant for signature.
7. Georgia, Hawaii, Idaho, Kansas, and Oregon added functionality to allow scan and upload of documentation through the online application during 2015.
8. In Nebraska, applicants can return to and restart an application for 30 days only.
9. New Jersey and Oregon added the ability to start, stop, and return to an application during 2015.

Table 9
Online Account Capabilities for Medicaid
January 2016

State	Online Medicaid Account ¹	Online Account Allows Individuals to:							
		Report Changes	Review Application Status	Renew Coverage	View Notices	Authorize Third-Party Access	Upload Verification Documentation	Go Paperless and Receive Notices Electronically	Pay Premiums
Total	39	37	36	35	31	30	29	25	6
Alabama	Y	Y	Y	Y		Y			
Alaska									N/A
Arizona	Y	Y	Y	Y	Y	Y	Y	Y	Y
Arkansas									
California	Y	Y	Y	Y	Y	Y	Y		
Colorado	Y	Y	Y	Y	Y	Y	Y	Y	Y
Connecticut	Y	Y	Y	Y	Y	Y	Y	Y	
Delaware ²	Y	Y	Y	Y	Y	Y			
District of Columbia	Y	Y	Y		Y	Y	Y	Y	N/A
Florida	Y	Y	Y	Y	Y		Y	Y	N/A
Georgia ³	Y	Y	Y	Y	Y	Y	Y		Y
Hawaii ^{2,3,4,5,6}	Y	Y	Y	Y	Y	Y	Y	Y	N/A
Idaho ^{3,4,5}	Y	Y	Y	Y	Y	Y	Y		
Illinois									
Indiana ⁷	Y	Y	Y			Y			
Iowa									
Kansas									
Kentucky	Y	Y	Y	Y	Y	Y	Y	Y	N/A
Louisiana ⁴	Y	Y		Y					
Maine	Y	Y	Y	Y	Y			Y	
Maryland	Y	Y	Y	Y	Y	Y	Y	Y	
Massachusetts ⁴	Y	Y	Y	Y	Y				
Michigan	Y	Y	Y	Y	Y	Y	Y		
Minnesota									N/A
Mississippi									N/A
Missouri									
Montana	Y	Y	Y	Y	Y	Y	Y	Y	
Nebraska	Y	Y	Y	Y	Y	Y	Y	Y	N/A
Nevada									
New Hampshire	Y	Y	Y	Y	Y	Y	Y	Y	N/A
New Jersey									
New Mexico	Y	Y	Y	Y			Y		N/A
New York	Y	Y	Y	Y	Y	Y	Y	Y	
North Carolina									
North Dakota ^{2,3,4,5,6,8}	Y	Y	Y	Y	Y	Y	Y	Y	N/A
Ohio	Y	Y	Y	Y	Y	Y	Y	Y	N/A
Oklahoma	Y	Y	Y	Y	Y	Y	Y	Y	N/A
Oregon	Y	Y	Y	Y	Y	Y	Y	Y	N/A
Pennsylvania	Y	Y	Y	Y	Y		Y	Y	
Rhode Island	Y	Y	Y	Y	Y	Y	Y	Y	N/A
South Carolina ^{6,8}	Y		Y						N/A
South Dakota ^{3,4,8}	Y	Y		Y			Y		N/A
Tennessee									N/A
Texas ⁹	Y	Y	Y	Y		Y	Y	Y	Y
Utah	Y	Y	Y	Y	Y	Y		Y	Y
Vermont ⁴	Y	Y	Y		Y	Y			Y
Virginia	Y	Y	Y	Y		Y	Y		N/A
Washington ^{2,3,4}	Y	Y	Y	Y	Y	Y	Y	Y	
West Virginia	Y		Y	Y	Y			Y	
Wisconsin ^{2,5}	Y	Y	Y	Y	Y	Y	Y	Y	
Wyoming	Y	Y		Y	Y	Y	Y	Y	N/A

SOURCE: Based on a national survey conducted by the Kaiser Commission on Medicaid and the Uninsured with the Georgetown University Center for Children and Families, 2016.

Table presents rules in effect as of January 1, 2016.

TABLE 9 NOTES

1. This column indicates whether individuals can create an online account for ongoing management of their MAGI-based Medicaid coverage at the state level, either through the Medicaid agency or a case management system that is integrated with the SBM.
2. Delaware, Hawaii, North Dakota, Washington, and Wisconsin added functionality to allow enrollees to authorize third party access to their account during 2015.
3. Georgia, Hawaii, Idaho, North Dakota, South Dakota, and Washington added functionality to allow enrollees to upload verification documents if needed during 2015.
4. Hawaii, Idaho, Louisiana, Massachusetts, North Dakota, South Dakota, Vermont, and Washington added functionality to allow enrollees to report changes through their online account during 2015.
5. Hawaii, Idaho, North Dakota, and Wisconsin added functionality to allow enrollees to view notices during 2015.
6. Hawaii, North Dakota, and South Carolina added functionality to allow applicants to review their application status during 2015.
7. In Indiana, individuals can manage their case online, but there is no account to set up.
8. North Dakota, South Carolina, and South Dakota implemented online accounts during 2015 or as of January 1, 2016.
9. In Texas, only certain notices can be viewed from a client's online account if the client does not elect to receive electronic notices.

Table 12
Use of Selected Options to Facilitate Enrollment in Medicaid and CHIP
January 2016

	Hospital-based Presumptive Eligibility ¹	Broader Presumptive Eligibility Using Qualified Entities ²						Express Lane Eligibility ³		Use of SNAP Data to Facilitate Enrollment ⁴
		Children		Pregnant Women		Parents	Adults (Total = 32)	Medicaid Children	CHIP Children (Total = 36)	
Total	45	Medicaid 18	CHIP (Total =36) 10	Medicaid 29	CHIP (Total = 5) 2					7
Alabama	Y				N/A		N/A	Y		
Alaska	Y		N/A (M-CHIP)		N/A				N/A (M-CHIP)	
Arizona ⁵	Y				N/A					
Arkansas					N/A					Y
California ⁶	Y	Y	N/A (M-CHIP)	Y	N/A				N/A (M-CHIP)	Y
Colorado ⁷	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Connecticut	Y	Y	Y	Y	N/A					
Delaware ⁵	Y				N/A					
District of Columbia	Y		N/A (M-CHIP)	Y					N/A (M-CHIP)	
Florida	Y			Y	N/A		N/A			
Georgia	Y			Y	N/A		N/A	Y	Y	
Hawaii			N/A (M-CHIP)		N/A				N/A (M-CHIP)	
Idaho	Y	Y	Y	Y	N/A	Y	N/A			
Illinois ⁸		Y	Y	Y	N/A					
Indiana ⁹	Y	Y	Y	Y	N/A	Y	Y			
Iowa ¹⁰	Y	Y	Y	Y	N/A			Y	Y	
Kansas ¹¹	Y	Y	Y	Y	N/A		N/A			
Kentucky	Y			Y	N/A					
Louisiana	Y				N/A		N/A	Y		
Maine	Y			Y	N/A		N/A			
Maryland	Y		N/A (M-CHIP)		N/A				N/A (M-CHIP)	
Massachusetts	Y				N/A					
Michigan	Y	Y	N/A (M-CHIP)	Y	N/A				N/A (M-CHIP)	
Minnesota	Y		N/A (M-CHIP)		N/A				N/A (M-CHIP)	
Mississippi	Y				N/A		N/A			
Missouri	Y	Y		Y	N/A		N/A			
Montana ¹²	Y	Y	Y	Y	N/A	Y	Y			
Nebraska	Y		N/A (M-CHIP)	Y	N/A		N/A		N/A (M-CHIP)	
Nevada	Y				N/A					
New Hampshire	Y	Y	N/A (M-CHIP)	Y	N/A	Y	Y		N/A (M-CHIP)	
New Jersey ⁵	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
New Mexico ¹³	Y	Y	N/A (M-CHIP)	Y	N/A				N/A (M-CHIP)	
New York ¹⁴		Y	Y	Y	N/A			Y		
North Carolina	Y			Y	N/A		N/A			
North Dakota	Y				N/A					
Ohio	Y	Y	N/A (M-CHIP)	Y	N/A	Y	Y		N/A (M-CHIP)	
Oklahoma	Y		N/A (M-CHIP)		N/A		N/A		N/A (M-CHIP)	
Oregon ¹⁵	Y				N/A					Y
Pennsylvania ¹⁶	Y			Y	N/A				Y	
Rhode Island	Y		N/A (M-CHIP)						N/A (M-CHIP)	
South Carolina	Y		N/A (M-CHIP)		N/A		N/A	Y	N/A (M-CHIP)	
South Dakota ⁵	Y				N/A		N/A			Y
Tennessee		Y		Y	N/A		N/A			
Texas	Y			Y	N/A		N/A			
Utah	Y			Y	N/A		N/A			
Vermont			N/A (M-CHIP)		N/A				N/A (M-CHIP)	
Virginia	Y						N/A			
Washington	Y				N/A					
West Virginia ⁸	Y				N/A					
Wisconsin	Y	Y		Y	N/A					
Wyoming	Y			Y	N/A		N/A			

SOURCE: Based on a national survey conducted by the Kaiser Commission on Medicaid and the Uninsured with the Georgetown University Center for Children and Families, 2016.

Table presents rules in effect as of January 1, 2016.

TABLE 12 NOTES

1. This column indicates whether a state has implemented the hospital-based presumptive eligibility process required by the ACA. This process allows hospitals to conduct presumptive eligibility determinations to expedite access to Medicaid coverage, regardless of whether a state has otherwise adopted presumptive eligibility.
2. These columns indicate whether a state has elected to implement the broader presumptive eligibility option, under which a state can authorize qualified entities such as hospitals, community health centers, and schools to make presumptive eligibility determinations for Medicaid and/or CHIP and extend coverage to individuals temporarily until a full eligibility determination is made.
3. The Express Lane Eligibility (ELE) option allows states to use data and eligibility findings from other public benefit programs to determine children eligible for Medicaid and CHIP at application or renewal. States are designated as having ELE if they have an approved and implemented State Plan Amendment from CMS.
4. In May 2013 guidance, CMS offered states several temporary targeted enrollment strategies, including the ability to use to SNAP data to facilitate enrollment of eligible individuals (see SHO #13-003, May 17, 2013). In August 2015, CMS issued new guidance allowing states to adopt the SNAP targeted strategy at enrollment and renewal as a state plan option, or to continue using the strategy under temporary waiver authority. For details, see V. Wachino, Director of Centers for Medicaid and CHIP Services, letter to State Health Officials and State Medicaid Directors (SHO #15-001/ACA #34, August 31, 2015). States are designated as adopting a strategy if they have a CMS-approved waiver or are in the process of applying for a SPA to use this the strategy.
5. In Arizona, Delaware, New Jersey, and South Dakota, the SPA for hospital presumptive eligibility is approved but no hospitals have implemented.
6. California is evaluating whether to seek a temporary waiver or submit a state plan amendment to continue using SNAP as a targeted enrollment strategy.
7. Colorado implemented presumptive eligibility for parents and adults in 2015.
8. Illinois and West Virginia will no longer use the SNAP facilitated enrollment strategy in Medicaid as of January 2016.
9. Indiana implemented presumptive eligibility for children, parents, and expansion adults in 2015.
10. Iowa implemented Express Lane Eligibility for CHIP children in 2015.
11. Kansas implemented presumptive eligibility for pregnant women in 2015.
12. Montana implemented presumptive eligibility for expansion adults effective January 2016.
13. New Mexico has presumptive eligibility for parents and other adults in Medicaid, but it is limited to those in correctional facilities (state prisons/county jails) and health facilities operated by the Indian Health Service, a Tribe or Tribal organization, or an Urban Indian Organization.
14. New York uses Express Lane Eligibility to enroll parents in Medicaid (based on enrollment in TANF).
15. Oregon has temporarily discontinued use of Express Lane Eligibility for children in Medicaid and CHIP, but intends to reinstate in the future.
16. Pennsylvania uses Express Lane Eligibility to transition children between Medicaid and CHIP.

Table 13
Renewal Processes for MAGI-Based Medicaid Groups
January 2016

State	Processing Ex Parte Renewals ¹	Percentage of Renewals Completed via Ex Parte ¹				Prepopulated Renewal Form ²	Populate Form with Updated Data ²	Telephone Renewals at State Level ³	Up-to-Date on Renewals ⁴	
		<25%	25%-50%	50%-75%	75%+				Medicaid	CHIP (Total = 36)
Total	34	5	11	7	3	41	14	41	47	34
Alabama						Y		Y	Y	Y
Alaska ⁵						Y			Y	N/A (M-CHIP)
Arizona	Y		Y			Y	Y	Y	Y	Y
Arkansas	Y	Y							Y	Y
California	Y			Y		Y	Y	Y	Y	N/A (M-CHIP)
Colorado	Y				Y	Y	Y	Y	Y	Y
Connecticut	Y			Y		Y		Y	Y	Y
Delaware	Y	Y				Y	Y	Y	Y	Y
District of Columbia						Y	Y	Y	Y	N/A (M-CHIP)
Florida ⁶	Y		Y					Y	Y	Y
Georgia ⁷						Y		Y	Y	Y
Hawaii	Y		Not Reported			Y	Y	Y	Y	N/A (M-CHIP)
Idaho	Y			Y		Y	Y	Y	Y	Y
Illinois						Y			Y	Y
Indiana	Y		Y			Y		Y	Y	Y
Iowa						Y	Y	Y	Y	Y
Kansas ⁸	Y		Y			Y	Y		Y	Y
Kentucky	Y			Y				Y	Y	Y
Louisiana ⁹	Y		Y					Y	Y	Y
Maine						Y		Y	Y	Y
Maryland	Y			Y		Y		Y	Y	N/A (M-CHIP)
Massachusetts								Y	Y	Y
Michigan ¹⁰									Y	N/A (M-CHIP)
Minnesota	Y		Y			Y	Y		Y	N/A (M-CHIP)
Mississippi						Y		Y	Y	Y
Missouri	Y		Not Reported			Y	Y	Y	Y	Y
Montana						Y		Y	Y	Y
Nebraska	Y		Not Reported			Y		Y	Y	N/A (M-CHIP)
Nevada						Y		Y	Y	Y
New Hampshire	Y	Y				Y	Y	Y	Y	N/A (M-CHIP)
New Jersey	Y		Not Reported			Y		Y	Y	Y
New Mexico						Y		Y	Y	N/A (M-CHIP)
New York	Y		Y			Y		Y	Y	Y
North Carolina	Y				Y				Y	Y
North Dakota	Y		Not Reported			Y		Y	Y	Y
Ohio	Y				Y			Y	Y	N/A (M-CHIP)
Oklahoma	Y		Y					Y	Y	N/A (M-CHIP)
Oregon	Y		Not Reported			Y		Y	Y	Y
Pennsylvania	Y	Y				Y		Y	Y	Y
Rhode Island	Y			Y		Y	Y	Y	Y	N/A (M-CHIP)
South Carolina	Y		Y			Y				N/A (M-CHIP)
South Dakota	Y		Y			Y		Y	Y	Y
Tennessee										
Texas	Y		Not Reported			Y	Y		Y	Y
Utah ⁸	Y		Y			Y		Y	Y	Y
Vermont ¹¹								Y		N/A (M-CHIP)
Virginia	Y	Y				Y		Y		
Washington	Y			Y		Y		Y	Y	Y
West Virginia	Y		Not Reported			Y		Y	Y	Y
Wisconsin						Y		Y	Y	Y
Wyoming						Y		Y	Y	Y

SOURCE: Based on a national survey conducted by the Kaiser Commission on Medicaid and the Uninsured with the Georgetown University Center for Children and Families, 2016.

Table presents rules in effect as of January 1, 2016.

Table 13 Notes

1. Under the ACA, states must seek to re-determine eligibility at renewal using electronic data matches with reliable sources of data, a process known as ex parte, prior to requiring enrollees to complete a renewal form. These columns reflect whether the state system is able to make ex parte re-determinations and reports the share of MAGI-based renewals that are successfully completed via ex parte.
2. Under the ACA, when a state is unable to determine ongoing eligibility at renewal via ex parte, it is expected to send the enrollee a renewal notice or form pre-populated with data on file. These columns indicate if a state is able to produce prepopulated renewal forms and whether the pre-populated information is updated with information accessed from electronic sources of data.
3. This column indicates whether enrollees are able to complete a MAGI-based Medicaid renewal over the phone at the state level, either through the Medicaid agency or a SBM call center.
4. These columns indicate whether states report any delays in processing 2015 renewals.
5. In Alaska, the state conducts ex parte review before closing a case after a non-response to renewal.
6. Florida's online renewal application is prepopulated when the enrollee completes an online renewal, but the state does not mail prepopulated forms.
7. Georgia has not implemented its new MAGI-based eligibility system but is sending pre-populated renewal forms through its older system.
8. In Kansas and Utah, families may report changes by phone but still need to sign and return the pre-populated renewal form.
9. Louisiana is procuring a new MAGI-based system, but conducts ex parte renewals through its existing system, which has been modified to be MAGI-enabled.
10. In Michigan, there may be some delays in renewals for children transitioning from separate CHIP to Medicaid expansion coverage as of January 2016.
11. Vermont has an approved renewal plan that allows delays of renewals until November 2016. Vermont began using a pre-populated renewal form as of January 2016 that includes name, address, phone number, and active Medicaid members due for renewal.

Table 14
Targeted Strategies to Streamline Renewals
January 2016

State	12-Month Continuous Eligibility for Children ¹		Express Lane Eligibility for Children at Renewal ²		SNAP Data Used at Renewal ³
	Medicaid	CHIP (Total = 36)	Medicaid	CHIP (Total = 36)	
Total	24	26	7	3	7
Alabama	Y	Y	Y		
Alaska	Y	N/A (M-CHIP)		N/A (M-CHIP)	Y
Arizona					
Arkansas ⁴		Y			Y
California	Y	N/A (M-CHIP)		N/A (M-CHIP)	
Colorado ⁵	Y	Y	Y	Y	
Connecticut					
Delaware		Y			
District of Columbia		N/A (M-CHIP)		N/A (M-CHIP)	
Florida ⁶		Y			
Georgia					
Hawaii		N/A (M-CHIP)		N/A (M-CHIP)	
Idaho	Y	Y			
Illinois	Y	Y			
Indiana ⁷					
Iowa	Y	Y	Y		
Kansas	Y	Y			
Kentucky					
Louisiana	Y	Y	Y		
Maine	Y	Y			
Maryland ⁸		N/A (M-CHIP)		N/A (M-CHIP)	
Massachusetts ⁹			Y	Y	
Michigan	Y	N/A (M-CHIP)		N/A (M-CHIP)	
Minnesota		N/A (M-CHIP)		N/A (M-CHIP)	
Mississippi	Y	Y			
Missouri					
Montana ¹⁰	Y	Y			
Nebraska		N/A (M-CHIP)		N/A (M-CHIP)	
Nevada		Y			
New Hampshire		N/A (M-CHIP)		N/A (M-CHIP)	
New Jersey	Y	Y			Y
New Mexico	Y	N/A (M-CHIP)		N/A (M-CHIP)	
New York ¹¹	Y	Y	Y		
North Carolina	Y	Y			
North Dakota	Y	Y			
Ohio	Y	N/A (M-CHIP)		N/A (M-CHIP)	
Oklahoma		N/A (M-CHIP)		N/A (M-CHIP)	
Oregon	Y	Y			Y
Pennsylvania		Y		Y	
Rhode Island		N/A (M-CHIP)		N/A (M-CHIP)	
South Carolina	Y	N/A (M-CHIP)	Y	N/A (M-CHIP)	
South Dakota					Y
Tennessee		Y			Y
Texas ¹²		Y			
Utah		Y			
Vermont		N/A (M-CHIP)		N/A (M-CHIP)	
Virginia					Y
Washington	Y	Y			
West Virginia	Y	Y			
Wisconsin					
Wyoming	Y	Y			

SOURCE: Based on a national survey conducted by the Kaiser Commission on Medicaid and the Uninsured with the Georgetown University Center for Children and Families, 2016.

Table presents rules in effect as of January 1, 2016.

TABLE 14 NOTES

1. Under state option, states may provide 12-month continuous eligibility for children, allowing them to remain enrolled regardless of changes in income or household size. States must obtain a waiver to provide 12-month continuous eligibility to adults.
2. The Express Lane Eligibility (ELE) option allows states to use data and eligibility findings from other public benefit programs to determine children eligible for Medicaid and CHIP at enrollment or renewal. States are designated as having ELE at renewal if they have an approved and implemented State Plan Amendment from CMS.
3. In August 2015, CMS issued new guidance allowing states to adopt the SNAP targeted strategy at enrollment and renewal as a state plan option or under temporary waiver authority. For details, see V. Wachino, Director of Centers for Medicaid and CHIP Services, letter to State Health Officials and State Medicaid Directors (SHO #15-001/ACA #34, August 31, 2015). States are designated as adopting a strategy if they have a CMS-approved waiver or are in the process of applying for a SPA to use this the strategy.
4. Arkansas adopted 12-month continuous eligibility in CHIP when it transitioned its CHIP-funded Medicaid expansion to a separate CHIP program in 2015.
5. Colorado implemented Express Lane Eligibility for renewals in CHIP in 2015.
6. In Florida, children younger than age five receive 12-month continuous eligibility and children ages five and older receive 6 months of continuous eligibility.
7. In Indiana, continuous eligibility is only provided to children under age 3.
8. In Maryland, newborns are provided 12-month continuous eligibility.
9. Massachusetts extends ELE to pregnant women, childless adults, and parents through a Section 1115 waiver.
10. Montana adopted 12-month continuous eligibility for parents and other adults as of January 2016.
11. New York implemented 12-month continuous eligibility for adults in 2015.
12. In Texas, a child in CHIP with income at or above 185% FPL receives 12 months of continuous eligibility unless there is an indication of a change at a six-month income check that would make the child ineligible for CHIP.