

Louisiana Medicaid Enrollment	November 2019	December 2019	January 2020	February 2020	March 2020	April 2020	May 2020	June 2020	July 2020	August 2020	September 2020	October 2020
Type of Assistance	Total Enrollees	Total Enrollees	Total Enrollees	Total Enrollees	Total Enrollees	Total Enrollees	Total Enrollees	Total Enrollees	Total Enrollees	Total Enrollees	Total Enrollees	Total Enrollees
ABD Spend-Down Medically Needy	79	72	83	94	110	154	187	223	259	283	308	321
ACA Adult Expansion	456,357	468,415	482,806	472,427	483,759	505,153	516,116	527,124	538,114	550,576	562,374	572,485
ADHC Waiver Spend-down MNP	3	6	5	8	7	8	7	5	5	4	3	4
Adult Day Health Care (ADHC)	580	568	568	566	593	618	596	593	593	586	578	576
Breast and Cervical Cancer	306	307	309	321	330	343	340	338	334	335	334	338
Category F Medicaid	4,070	4,053	4,057	3,993	4,018	4,008	4,000	4,014	4,059	4,098	4,135	4,140
Category I Medicaid	8,756	8,803	8,831	8,806	8,792	8,883	8,914	8,931	8,959	8,970	9,017	9,049
Category O Medicaid	20	23	24	24	26	30	30	31	35	35	37	43
Category V Medicaid	314	325	317	320	323	329	333	338	345	349	351	365
CHAMP Child	479,704	470,462	476,149	478,413	470,142	473,301	475,246	477,380	479,597	481,727	484,187	485,435
CHAMP Pregnant Women	13,827	13,867	13,956	14,042	14,195	14,911	15,528	15,975	16,360	16,368	16,893	17,743
Childrens Choice Waiver (CCW)	2,029	2,050	2,082	2,120	2,151	2,196	2,225	2,256	2,277	2,290	2,304	2,323
Community Choices Waiver (CC)	4,136	4,081	4,145	4,202	4,383	4,533	4,533	4,551	4,527	4,506	4,462	4,418
Community Choices Waiver Spend-down MNP	13	38	45	30	28	25	25	20	21	22	23	25
Coordinated System of Care - Severely Emotionally Disturbed Waiver (CSoc-SED)	68	68	67	70	82	86	83	91	92	93	96	97
Deemed Eligible Child	46,620	41,243	41,629	41,236	41,202	42,565	44,229	46,582	48,985	51,112	52,896	54,694
Disabled Adult Children	2,764	2,778	2,765	2,859	2,891	2,950	2,971	2,988	2,998	3,018	3,033	3,040
Disabled Widows/Widowers and Divorced Spouses	32	33	32	30	30	30	25	22	20	18	16	19
Early Widows/Widowers	74	72	71	69	65	66	64	62	58	57	53	50
Express Lane Eligibility (ELE)	28,364	26,001	26,745	27,055	27,876	29,220	30,600	31,064	31,815	32,702	33,232	34,096
Emergency Services Only	3	2	13	7	21	34	58	132	177	357	439	522
Family Opportunity Act Buy-In	252	235	237	243	244	255	247	250	251	244	242	243
FITAP	10,248	10,382	10,719	10,395	10,077	9,848	9,981	10,044	10,064	10,083	10,014	9,992
Former Foster Care Children	1,119	1,124	1,140	1,165	1,175	1,208	1,195	1,218	1,223	1,214	1,214	1,201
Hospital Presumptive Eligibility-Take Charge Plus	0	0	0	0	0	0	0	40	129	185	256	266
LaCHIP	59,466	57,122	59,291	62,309	64,052	65,423	65,902	65,113	65,548	66,357	67,047	68,513
LaCHIP Affordable Plan	1,947	1,842	1,975	2,056	2,045	2,199	2,214	2,220	2,172	2,120	2,069	2,057
LaCHIP Phase 2 and 3	53,088	51,319	51,582	51,248	54,206	56,083	58,774	61,528	62,868	63,154	63,268	62,677
LaCHIP Phase IV - Prenatal Care	3,438	3,478	3,690	3,697	3,737	4,038	3,827	3,928	3,802	3,659	3,453	3,280
Long Term Care	23,589	23,470	23,662	23,607	24,288	24,992	23,974	23,513	23,355	23,153	23,039	22,794
Long Term Care Spend-Down	1,170	1,189	1,207	1,240	1,264	1,272	1,264	1,202	1,178	1,154	1,120	1,087
Low Income Subsidy	7	7	15	23	23	23	24	26	25	24	22	22
LTC Co-Insurance	1,079	970	837	798	1,239	2,341	3,277	3,558	3,291	3,319	3,133	2,848
LTC Co-Insurance Spend down	0	0	0	0	0	1	7	7	6	6	11	12
MAGI Spend-Down Medically Needy	65	57	81	88	73	83	104	117	121	139	160	176
Medicaid Purchase Plan	3,638	3,750	3,936	4,065	4,239	4,623	5,982	7,526	9,144	10,137	10,851	11,591
New Opportunities Waiver (NOW)	5,294	5,260	5,262	5,250	5,243	5,246	5,228	5,229	5,225	5,218	5,207	5,199
New Opportunities Waiver Spend-down MNP	9	27	28	22	13	11	8	8	7	7	7	7
New Opportunities Waiver-Fund	3,044	3,019	3,025	3,025	3,026	3,021	3,014	3,008	3,000	2,998	2,992	2,988
PACE	495	494	489	480	484	483	476	470	471	465	460	459
Parent/Caretaker Relative	58,324	58,714	57,537	57,690	58,732	57,859	58,965	60,059	61,054	61,986	62,678	62,364
Pickle	9,916	9,909	10,900	10,616	11,017	11,452	11,825	12,041	12,236	12,712	13,012	13,018
Provisional Medicaid	19,939	20,280	20,833	21,517	22,508	24,505	27,479	30,589	33,300	35,767	37,896	39,112
Qualified Disabled Working Individuals	632	1,097	1,199	1,297	1,199	897	868	813	797	800	765	747
Qualified Individuals	15,749	16,290	16,225	17,258	18,061	18,357	18,276	18,011	18,011	18,183	18,234	17,878
Qualified Medicare Beneficiary	139,768	140,116	142,994	144,096	146,453	150,990	153,458	155,112	156,324	157,498	158,939	161,287
Refugee Cash Assistance	0	0	0	0	0	0	0	0	0	0	0	0
Refugee Medical Assistance	1	0	0	0	0	0	0	0	0	0	0	0
Residential Options Waiver (ROW)	596	599	602	621	660	689	702	721	730	751	773	797
Residential Options Waiver Spend-down MNP	3	4	4	4	3	2	2	0	0	1	1	1
Specified Low-Income Medicare Beneficiary	33,596	34,437	34,719	36,199	37,859	38,415	37,684	37,314	37,166	36,980	37,061	36,658
State Retirees	0	1	2	1	1	1	1	1	1	1	1	1
Supplemental Security Income (SSI)	166,301	166,238	166,754	166,399	165,514	165,934	165,457	165,314	165,342	165,668	165,730	165,871
Supports Waiver (SW)	2,069	2,060	2,070	2,073	2,092	2,110	2,124	2,140	2,151	2,182	2,195	2,201
Supports Waiver Spend-down MNP	0	0	1	2	2	1	1	1	1	1	1	1
Take Charge Plus	94,393	97,352	97,028	100,384	102,608	103,625	100,322	99,378	99,007	98,838	98,686	97,230
Transitional Medicaid	20,064	19,565	19,728	19,326	17,906	17,782	17,527	17,247	16,649	15,204	14,106	13,199
Tuberculosis Infected Individuals	1	1	1	1	1	1	1	1	1	1	1	1
Youth Aging Out of Foster Care	0	0	0	0	0	0	0	0	0	0	0	0
Other	36	36	36	36	36	36	36	36	36	36	36	36
Total Unduplicated	1,588,884	1,581,925	1,606,372	1,604,957	1,616,614	1,650,271	1,674,652	1,698,699	1,721,489	1,742,690	1,762,454	1,778,703

Notes:
1. Enrollment is calculated by counting anyone enrolled at any point in the month. Prior to November 2018 enrollment only counted someone who was enrolled at the date the report was generated.
2. All counts are unduplicated in their individual cell. One person may be counted multiple times if they changed Type of Assistance in the month.
3. Data for each month is as of the 1st of the subsequent month. For example, the May 2020 enrollment is as of 06/01/2020.
4. This report is a rolling 12 month period.
5. For description of Assistance Types, please see page 42 of SFY 2019/20 Annual Report.
6. <https://dsh.ks.gov/assets/medicaid/AnnualReports/MedicaidAnnualReport2019.pdf>