

Louisiana Medicaid Enrollment	May 2020	June 2020	July 2020	August 2020	September 2020	October 2020	November 2020	December 2020	January 2021	February 2021	March 2021	April 2021
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	187	223	259	283	308	321	350	364	381	390	414	382
ACA Adult Expansion	516,116	527,124	538,114	550,576	562,374	572,485	586,031	599,463	607,757	617,709	626,415	629,876
ADHC Waiver Spend-down MNP	7	5	5	4	3	4	3	3	3	3	3	3
Adult Day Health Care (ADHC)	596	593	593	586	578	576	563	553	544	530	522	506
Breast and Cervical Cancer	340	338	334	335	334	338	341	344	349	346	350	353
Category F Medicaid	4,000	4,014	4,059	4,098	4,135	4,140	4,170	4,211	4,245	4,308	4,330	4,398
Category I Medicaid	8,914	8,931	8,959	8,970	9,017	9,049	9,103	9,134	9,192	9,234	9,288	9,357
Category O Medicaid	30	31	35	35	37	43	46	45	46	47	51	49
Category V Medicaid	333	338	345	349	351	365	374	375	378	379	388	385
CHAMP Child	475,246	477,380	479,597	481,727	484,187	485,435	486,975	488,683	488,919	485,356	483,581	482,040
CHAMP Pregnant Women	15,528	15,975	16,360	16,368	16,893	17,743	17,949	18,257	18,883	17,971	18,020	18,423
Childrens Choice Waiver (CCW)	2,225	2,256	2,277	2,290	2,304	2,323	2,312	2,307	2,310	2,321	2,345	2,344
Community Choices Waiver (CC)	4,533	4,551	4,527	4,506	4,462	4,418	4,395	4,365	4,369	4,344	4,384	4,396
Community Choices Waiver Spend-down MNP	25	20	21	22	23	25	24	24	25	24	28	25
Coordinated System of Care - Severely Emotionally Disturbed Waiver (CSoc-SED)	83	91	92	93	96	97	99	101	103	102	100	92
Deemed Eligible Child	44,229	46,582	48,985	51,112	52,896	54,694	56,356	58,795	60,339	60,753	62,690	62,863
Disabled Adult Children	2,971	2,988	2,998	3,018	3,033	3,040	3,037	3,040	3,051	2,779	2,766	2,671
Disabled Widows/Widowers and Divorced Spouses	25	22	20	18	16	19	19	18	19	8	7	5
Early Widows/Widowers	64	62	58	57	53	50	49	48	46	27	26	25
Express Lane Eligibility (ELE)	30,600	31,064	31,815	32,702	33,232	34,096	34,597	35,261	35,848	36,294	36,815	36,925
Emergency Services Only	58	132	177	357	439	522	580	650	728	836	930	1,029
Family Opportunity Act Buy-In	247	250	251	244	242	243	245	244	248	249	253	272
FITAP	9,981	10,044	10,064	10,083	10,014	9,992	10,105	10,184	10,335	10,204	10,264	10,364
Former Foster Care Children	1,195	1,218	1,224	1,223	1,214	1,201	1,213	1,228	1,252	1,252	1,259	1,257
Hospital Presumptive Eligibility-Take Charge Plus	0	40	129	185	256	266	310	383	420	445	462	452
LaCHIP	65,902	65,113	65,548	66,357	67,047	68,513	68,026	68,082	69,105	70,395	70,485	71,052
LaCHIP Affordable Plan	2,214	2,220	2,172	2,120	2,069	2,057	2,044	2,072	2,094	2,068	2,036	2,034
LaCHIP Phase 2 and 3	58,774	61,528	62,868	63,514	63,268	62,677	63,845	64,583	64,647	65,792	67,857	70,132
LaCHIP Phase IV - Prenatal Care	3,827	3,928	3,802	3,669	3,453	3,280	3,215	3,335	3,418	3,487	3,626	3,593
Long Term Care	23,974	23,513	23,355	23,153	23,039	22,794	22,730	22,715	22,539	22,208	22,331	22,352
Long Term Care Spend-Down	1,256	1,202	1,178	1,154	1,120	1,087	1,080	1,063	1,053	1,022	1,018	1,010
Low Income Subsidy	24	26	25	24	22	22	22	22	22	22	22	21
LTC Co-Insurance	3,277	3,558	3,291	3,319	3,133	2,848	2,720	2,650	2,736	2,656	2,517	2,186
LTC Co-Insurance Spend down	7	7	6	6	11	12	12	11	12	14	11	11
MAGI Spend-Down Medically Needy	104	117	121	139	160	176	189	217	229	248	264	267
Medicaid Purchase Plan	5,982	7,526	9,144	10,137	10,851	11,591	11,450	11,604	11,834	12,466	12,719	13,178
New Opportunities Waiver (NOW)	5,228	5,229	5,225	5,218	5,207	5,199	5,192	5,173	5,168	5,141	5,126	5,113
New Opportunities Waiver Spend-down MNP	8	8	7	7	7	7	7	7	8	6	6	4
New Opportunities Waiver-Fund	3,014	3,008	3,000	2,998	2,992	2,988	2,979	2,975	2,967	2,959	2,956	2,944
PACE	476	470	471	465	460	459	458	455	449	443	443	436
Parent/Caretaker Relative	58,965	60,059	61,054	61,986	62,678	62,364	62,541	62,562	61,607	59,471	58,767	57,748
Pickle	11,825	12,041	12,236	12,712	13,012	13,018	12,965	12,943	13,437	13,904	14,103	12,646
Provisional Medicaid	27,479	30,589	33,300	35,767	37,896	39,112	39,105	39,738	40,443	42,140	42,428	39,542
Qualified Disabled Working Individuals	868	813	797	800	765	747	716	708	690	662	620	546
Qualified Individuals	18,276	18,011	18,011	18,183	18,234	17,878	18,060	18,131	18,333	18,411	19,206	20,759
Qualified Medicare Beneficiary	153,458	155,112	156,324	157,498	158,939	161,287	161,866	162,520	163,386	164,297	160,497	161,129
Refugee Cash Assistance	0	0	0	0	0	0	0	0	0	0	0	0
Refugee Medical Assistance	0	0	0	0	0	0	0	0	0	0	0	0
Residential Options Waiver (ROW)	702	721	730	751	773	797	828	851	868	887	907	939
Residential Options Waiver Spend-down MNP	2	0	0	1	1	1	2	2	4	3	4	4
Specified Low-Income Medicare Beneficiary	37,684	37,314	37,166	36,980	37,061	36,658	36,671	36,729	37,098	36,823	40,776	40,940
State Retirees	1	1	1	1	1	1	1	1	1	1	1	1
Supplemental Security Income (SSI)	165,457	165,314	165,342	165,668	165,730	165,871	165,523	165,374	165,967	166,233	165,641	164,851
Supports Waiver (SW)	2,124	2,140	2,151	2,182	2,195	2,201	2,201	2,196	2,204	2,206	2,227	2,235
Supports Waiver Spend-down MNP	1	1	1	1	1	1	2	2	2	1	1	0
Take Charge Plus	100,322	99,378	99,007	98,838	98,686	97,230	97,457	97,625	97,016	97,016	97,348	106,375
Transitional Medicaid	17,527	17,247	16,649	15,204	14,106	13,199	13,202	13,361	13,558	14,528	15,184	15,135
Tuberculosis Infected Individuals	1	1	1	1	1	1	1	1	1	0	0	0
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	1,674,652	1,698,699	1,721,489	1,742,690	1,762,454	1,778,703	1,797,193	1,817,530	1,830,586	1,841,513	1,854,714	1,864,487

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 2018/19 Annual Report.
6. <https://dsh.ks.gov/assets/medicaid/AnnualReports/MedicaidAnnualReport2019.pdf>