

Louisiana Medicaid Enrollment	August 2020	September 2020	October 2020	November 2020	December 2020	January 2021	February 2021	March 2021	April 2021	May 2021	June 2021	July 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	283	308	321	350	364	381	390	414	382	387	405	407
ACA Adult Expansion	550,576	562,374	572,485	586,031	599,463	607,757	617,709	626,415	629,876	638,981	649,213	671,918
ADHC Waiver Spend-down MNP	4	3	4	3	3	3	3	3	3	3	4	4
Adult Day Health Care (ADHC)	586	578	576	563	553	544	530	522	506	498	489	484
Breast and Cervical Cancer	335	334	338	341	344	349	346	350	353	354	355	368
Category F Medicaid	4,098	4,135	4,140	4,170	4,211	4,245	4,308	4,330	4,398	4,452	4,495	4,532
Category I Medicaid	8,970	9,017	9,049	9,103	9,134	9,192	9,234	9,288	9,357	9,401	9,428	9,448
Category O Medicaid	35	37	43	46	45	46	47	51	49	52	54	52
Category V Medicaid	349	351	365	374	375	378	379	388	385	404	417	421
CHAMP Child	481,727	484,187	485,435	486,975	488,683	488,919	485,356	483,581	482,040	481,868	479,416	478,715
CHAMP Pregnant Women	16,368	16,893	17,743	17,949	18,257	18,883	17,971	18,020	18,423	19,125	19,526	20,367
Childrens Choice Waiver (CCW)	2,290	2,304	2,323	2,312	2,307	2,310	2,321	2,345	2,344	2,365	2,389	2,404
Community Choices Waiver (CC)	4,506	4,462	4,418	4,395	4,365	4,369	4,344	4,384	4,396	4,439	4,460	4,507
Community Choices Waiver Spend-down MNP	22	23	25	24	24	25	24	28	25	29	30	29
Coordinated System of Care - Severely Emotionally Disturbed Waiver (CSoc-SED)	93	96	97	99	101	103	102	100	92	88	91	94
Deemed Eligible Child	51,112	52,896	54,694	56,356	58,795	60,339	60,753	62,690	62,863	63,275	64,151	64,799
Disabled Adult Children	3,018	3,033	3,040	3,037	3,040	3,051	2,779	2,766	2,671	2,653	2,648	2,615
Disabled Widows/Widowers and Divorced Spouses	18	16	19	19	18	19	8	7	5	6	6	6
Early Widows/Widowers	57	53	50	49	48	46	27	26	25	21	20	19
Express Lane Eligibility (ELE)	32,702	33,232	34,096	34,597	35,261	35,848	36,294	36,815	36,925	36,923	37,143	37,708
Emergency Services Only	357	439	522	580	650	728	836	930	1,029	1,102	1,190	1,284
Family Opportunity Act Buy-In	244	242	243	245	244	242	278	253	247	277	283	291
FITAP	10,083	10,014	9,992	10,105	10,184	10,335	10,204	10,264	10,364	10,374	10,382	10,372
Former Foster Care Children	1,223	1,214	1,201	1,213	1,228	1,238	1,252	1,259	1,236	1,271	1,271	1,314
Hospital Presumptive Eligibility-Take Charge Plus	185	256	266	310	383	420	445	462	452	457	456	467
LaCHIP	66,357	67,047	68,513	68,026	68,082	69,105	70,395	70,485	71,052	70,578	70,181	70,426
LaCHIP Affordable Plan	2,120	2,069	2,057	2,044	2,072	2,094	2,068	2,036	2,034	2,007	1,993	1,963
LaCHIP Phase 2 and 3	63,154	63,268	62,677	63,485	64,583	64,647	65,792	67,857	70,132	71,704	74,286	75,538
LaCHIP Phase IV - Prenatal Care	3,669	3,453	3,280	3,215	3,335	3,418	3,487	3,626	3,594	3,594	3,697	3,711
Long Term Care	23,153	23,039	22,794	22,730	22,715	22,539	22,208	22,331	22,352	22,465	22,441	22,489
Long Term Care Spend-Down	1,154	1,120	1,087	1,080	1,063	1,053	1,022	1,018	1,010	1,009	1,017	1,027
Low Income Subsidy	24	22	22	22	22	22	22	22	21	21	22	24
LTC Co-Insurance	3,319	3,133	2,848	2,720	2,650	2,736	2,656	2,517	2,186	2,053	1,932	1,841
LTC Co-Insurance Spend down	6	11	12	12	11	12	14	11	11	12	13	14
MAGI Spend-Down Medically Needy	139	160	176	189	217	229	248	264	267	291	322	340
Medicaid Purchase Plan	10,137	10,851	11,591	11,450	11,604	11,834	12,466	12,719	13,178	12,095	11,556	5,833
New Opportunities Waiver (NOW)	5,218	5,207	5,199	5,192	5,173	5,168	5,141	5,126	5,113	5,102	5,093	5,086
New Opportunities Waiver Spend-down MNP	7	7	7	7	7	8	6	6	4	4	3	3
New Opportunities Waiver-Fund	2,998	2,992	2,988	2,979	2,975	2,967	2,959	2,956	2,944	2,941	2,934	2,921
PACE	465	460	459	458	455	449	443	443	436	432	433	427
Parent/Caretaker Relative	61,986	62,678	62,364	62,541	62,562	61,607	59,471	58,767	57,748	56,690	55,682	55,118
Pickle	12,712	13,012	13,018	12,965	12,943	13,437	13,904	14,103	12,646	12,634	12,504	12,460
Provisional Medicaid	35,767	37,896	39,112	39,105	39,738	40,443	42,140	42,428	39,542	37,914	37,239	27,435
Qualified Disabled Working Individuals	800	765	747	716	708	690	662	620	546	535	518	497
Qualified Individuals	18,183	18,234	17,878	18,060	18,131	18,333	18,411	19,206	20,759	21,052	21,368	21,757
Qualified Medicare Beneficiary	157,498	158,939	161,287	161,866	162,520	163,386	164,297	160,497	161,129	161,368	161,267	161,575
Refugee Cash Assistance	0	0	0	0	0	0	0	0	0	1	1	1
Refugee Medical Assistance	0	0	0	0	0	0	0	0	0	0	0	0
Residential Options Waiver (ROW)	751	773	797	828	851	868	887	907	939	958	982	996
Residential Options Waiver Spend-down MNP	1	1	1	2	2	4	3	4	4	3	3	3
Specified Low-Income Medicare Beneficiary	36,980	37,061	36,658	36,671	36,729	37,098	36,823	40,776	40,940	41,090	41,393	41,713
State Retirees	1	1	1	1	1	1	1	1	1	1	1	1
Supplemental Security Income (SSI)	165,668	165,730	165,871	165,523	165,374	165,967	166,233	165,641	164,851	165,275	163,120	163,060
Supports Waiver (SW)	2,182	2,195	2,201	2,201	2,196	2,204	2,206	2,227	2,235	2,257	2,267	2,270
Supports Waiver Spend-down MNP	1	1	1	2	2	2	1	1	0	0	1	1
Take Charge Plus	98,838	98,686	97,230	97,457	97,625	97,752	97,016	97,348	106,375	107,372	108,329	109,619
Transitional Medicaid	15,204	14,106	13,199	13,202	13,361	13,558	14,528	15,184	15,135	15,350	15,424	15,543
Tuberculosis Infected Individuals	1	1	1	1	1	1	0	0	0	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
<b>Total Unduplicated</b>	<b>1,742,690</b>	<b>1,762,454</b>	<b>1,778,703</b>	<b>1,797,193</b>	<b>1,817,530</b>	<b>1,830,586</b>	<b>1,841,513</b>	<b>1,854,714</b>	<b>1,864,487</b>	<b>1,873,294</b>	<b>1,882,486</b>	<b>1,893,310</b>

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.ls.gov/assets/medicaid/AnnualReports/MedicaidAnnualReport2019.pdf>