

Louisiana Medicaid Enrollment	October 2021	November 2021	December 2021	January 2022	February 2022	March 2022	April 2022	May 2022	June 2022	July 2022	August 2022	September 2022
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	416	427	440	446	464	478	479	442	451	448	452	449
ACA Adult Expansion	696,096	705,943	713,056	718,477	722,842	727,501	732,243	735,480	739,173	742,897	747,200	750,340
ADHC Waiver Spend-down MNP	4	4	3	3	3	3	3	3	4	5	5	4
Adult Day Health Care (ADHC)	445	422	399	389	383	383	384	385	388	390	391	392
Breast and Cervical Cancer	374	375	375	373	375	372	372	371	368	369	374	367
Category F Medicaid	4,706	4,513	4,579	4,611	4,610	4,693	4,765	4,818	4,854	4,931	4,969	5,030
Category I Medicaid	9,528	9,382	9,427	9,506	9,530	9,562	9,631	9,655	9,722	9,769	9,831	9,891
Category O Medicaid	55	52	56	55	54	53	51	56	54	54	57	57
Category V Medicaid	434	394	404	411	413	421	433	453	472	482	500	514
CHAMP Child	471,708	472,597	470,578	467,674	463,563	459,623	455,482	452,319	449,236	446,895	444,072	441,641
CHAMP Pregnant Women	21,392	20,647	20,607	20,649	20,776	21,146	21,742	25,540	26,715	28,393	29,988	31,438
Childrens Choice Waiver (CCW)	2,454	2,425	2,436	2,446	2,471	2,467	2,472	2,457	2,450	2,455	2,443	2,443
Community Choices Waiver (CC)	4,574	4,598	4,610	4,622	4,608	4,630	4,686	4,640	4,713	4,772	4,846	4,881
Community Choices Waiver Spend-down MNP	30	30	31	29	29	29	29	31	33	37	41	42
Coordinated System of Care - Severely Emotionally Disturbed Waiver (CSoc-SED)	109	106	109	108	108	124	127	129	134	133	137	138
Deemed Eligible Child	67,338	66,977	68,568	70,895	72,653	74,663	76,510	77,417	79,110	81,254	83,735	85,946
Disabled Adult Children	2,569	2,561	2,552	2,579	2,576	2,567	2,565	2,522	2,522	2,508	2,504	2,497
Disabled Widows/Widowers and Divorced Spouses	2	2	2	2	3	3	4	4	3	3	3	3
Early Widows/Widowers	17	15	16	15	17	15	14	14	13	13	13	13
Express Lane Eligibility (ELE)	38,044	37,993	38,247	38,603	39,064	39,339	39,607	38,993	39,303	39,801	40,025	40,319
Emergency Services Only	1,534	1,633	1,743	1,885	1,988	2,078	2,150	2,223	2,295	2,359	2,448	2,542
Family Opportunity Act Buy-In	311	328	328	331	332	334	332	332	318	318	312	305
FITAP	10,182	10,039	10,185	10,264	10,418	10,770	10,960	11,167	11,403	11,850	12,292	12,788
Former Foster Care Children	1,307	1,325	1,316	1,323	1,309	1,305	1,303	1,245	1,239	1,210	1,210	1,215
Hospital Presumptive Eligibility-Take Charge Plus	611	623	636	691	688	686	695	721	731	760	785	791
LaCHIP	71,777	71,264	71,757	72,952	75,152	75,618	76,014	75,301	75,342	75,781	76,154	76,218
LaCHIP Affordable Plan	1,915	1,901	1,899	1,894	1,885	1,874	1,849	1,797	1,773	1,765	1,750	1,762
LaCHIP Phase 2 and 3	79,869	81,486	82,225	83,077	83,030	85,527	88,265	90,043	92,002	93,660	94,978	96,903
LaCHIP Phase IV - Prenatal Care	4,185	3,710	3,601	3,752	3,839	3,966	4,041	4,023	4,125	4,131	4,192	4,139
Long Term Care	22,641	22,642	22,707	22,764	22,591	22,829	23,178	20,994	20,978	20,944	20,923	20,779
Long Term Care Spend-Down	1,024	1,034	1,054	1,002	995	994	1,015	884	893	901	910	904
Low Income Subsidy	23	23	24	22	22	23	25	27	31	32	32	31
LTC Co-Insurance	2,118	1,983	1,855	2,064	2,634	2,468	1,941	1,830	1,876	1,970	2,275	2,049
LTC Co-Insurance Spend down	15	15	15	14	14	14	15	15	15	14	13	13
MAGI Spend-Down Medically Needy	349	355	379	391	397	421	439	417	421	417	430	436
Medicaid Purchase Plan	4,805	4,105	4,268	3,994	4,039	4,061	4,255	4,038	4,089	4,151	4,113	4,130
New Opportunities Waiver (NOW)	5,051	5,037	5,035	5,020	5,005	5,006	4,994	4,952	4,930	4,920	4,901	4,897
New Opportunities Waiver Spend-down MNP	3	3	3	3	3	3	3	3	3	3	3	3
New Opportunities Waiver-Fund	2,879	2,869	2,868	2,851	2,838	2,831	2,829	2,805	2,798	2,784	2,774	2,767
PACE	433	434	427	426	425	420	419	414	412	413	413	418
Parent/Caretaker Relative	52,626	52,611	52,085	51,793	50,724	49,746	48,952	45,346	44,703	44,070	43,694	43,127
Pickle	12,330	12,403	12,485	14,733	14,735	14,768	14,748	14,712	14,712	14,767	14,700	14,700
Provisional Medicaid	26,687	26,236	26,990	26,606	26,845	27,077	27,277	27,289	27,431	27,552	27,625	27,458
Qualified Disabled Working Individuals	425	413	403	393	386	380	377	370	365	356	345	339
Qualified Individuals	22,656	22,895	23,062	23,783	23,493	23,652	23,780	23,932	24,068	24,246	24,858	25,019
Qualified Medicare Beneficiary	162,777	163,006	164,118	163,501	164,175	164,345	164,681	165,037	165,522	165,522	165,835	166,175
Refugee Cash Assistance	1	1	1	1	1	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)	1,075	1,100	1,132	1,154	1,175	1,201	1,223	1,239	1,278	1,294	1,330	1,358
Residential Options Waiver Spend-down MNP	3	3	3	3	3	3	3	3	3	2	2	2
Specified Low-Income Medicare Beneficiary	41,977	42,314	42,579	43,475	43,669	43,750	43,870	43,837	43,922	43,922	43,958	44,023
State Retirees	1	1	1	1	1	1	1	1	1	1	1	1
Supplemental Security Income (SSI)	162,859	160,786	160,430	159,814	159,733	159,167	159,803	159,342	158,723	158,581	158,844	158,093
Supports Waiver (SW)	2,310	2,324	2,323	2,332	2,344	2,342	2,340	2,328	2,334	2,337	2,345	2,340
Supports Waiver Spend-down MNP	0	1	0	0	0	0	0	0	0	0	0	0
Take Charge Plus	112,443	113,146	113,914	108,507	108,669	109,709	110,286	110,781	111,485	111,682	114,144	114,694
Transitional Medicaid	16,050	16,206	16,313	16,410	16,725	17,048	17,148	17,160	17,247	17,363	17,243	17,154
Tuberculosis Infected Individuals	0	0	0	0	0	0	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	0	0	0	0	0
Total Unduplicated	1,919,714	1,927,833	1,937,265	1,946,322	1,951,143	1,958,037	1,965,265	1,968,349	1,974,812	1,982,593	1,991,308	1,998,519

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/MedicaidAnnualReport2018.pdf>