

Louisiana Medicaid Enrollment	August 2024	September 2024	October 2024	November 2024	December 2024	January 2025	February 2025	March 2025	April 2025	May 2025	June 2025	July 2025
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	59	47	54	50	58	51	49	45	34	38	32	31
ACA Adult Expansion	543,337	542,496	529,875	530,053	545,976	540,225	542,265	535,885	526,356	517,760	506,568	493,685
Act 421 Childrens Medicaid Option (TEFRA)	2,132	2,203	2,247	2,294	2,332	2,390	2,443	2,486	2,520	2,533	2,595	2,633
Acute Care Hospital	0	0	0	0	0	0	0	0	0	1	0	0
ADHC Waiver Spend-down MNP	3	3	3	3	3	3	3	2	2	3	3	2
Adult Day Health Care (ADHC)	331	333	332	320	312	312	311	314	319	317	312	313
Breast and Cervical Cancer	160	150	158	156	156	152	150	153	150	148	146	147
Category C Medicaid	42	42	44	43	45	50	50	54	54	64	69	71
Category F Medicaid	4,694	4,633	4,601	4,545	4,526	4,568	4,576	4,543	4,537	4,445	4,390	4,324
Category I Medicaid	9,758	9,821	9,817	9,861	9,900	9,897	9,951	9,987	10,018	10,058	10,091	10,055
Category O Medicaid	40	41	42	42	42	41	44	39	37	44	41	38
Category V Medicaid	399	397	394	382	377	377	392	398	412	391	413	399
CHAMP Child	435,498	435,161	436,037	435,889	435,395	434,245	434,418	434,570	433,717	432,743	431,506	428,995
CHAMP Pregnant Women	32,372	31,755	31,721	31,167	30,784	30,750	30,662	30,466	30,307	30,274	30,468	30,494
Childrens Choice Waiver (CCW)	3,081	3,081	3,094	3,109	3,120	3,111	3,136	3,141	3,165	3,195	3,222	3,230
Community Choices Waiver (CC)	5,898	5,931	6,028	6,021	6,059	6,081	6,123	6,151	6,234	6,337	6,433	6,520
Community Choices Waiver Spend-down MNP	57	57	53	52	54	57	58	56	64	71	72	79
Coordinated System of Care - Severely Emotionally Disturbed Waiver (CSoc-SED)	115	111	113	106	106	104	103	105	106	106	104	106
Deemed Eligible Child	38,572	38,119	38,156	37,628	37,452	37,448	37,155	36,901	36,588	36,330	36,197	36,431
Disabled Adult Children	1,891	1,886	1,879	1,855	1,857	1,853	1,835	1,811	1,809	1,785	1,758	1,744
Disabled Widows/Widowers and Divorced Spouses	0	0	0	0	0	0	1	2	2	2	2	2
Early Widows/Widowers	8	7	7	5	3	2	2	2	2	2	3	3
Express Lane Eligibility (ELE)	43,466	43,972	43,977	43,722	43,763	43,215	43,619	43,881	44,094	44,685	44,850	45,071
Emergency Services Only	655	625	440	419	408	404	352	372	364	347	335	346
Family Opportunity Act Buy-In	91	82	82	78	77	73	73	62	69	76	84	79
FITAP	8	0	0	0	0	7	0	0	0	0	0	0
Former Foster Care Children	549	548	548	549	571	566	565	573	573	580	575	581
Hospital Presumptive Eligibility-Take Charge Plus	5	0	0	0	0	0	0	0	0	0	0	0
LaCHIP	72,745	72,458	72,638	72,356	73,298	71,050	71,065	69,681	69,887	68,364	66,739	66,630
LaCHIP Affordable Plan	3,754	3,789	3,818	3,901	3,983	4,016	4,127	4,121	3,965	3,997	3,993	3,947
LaCHIP Phase 2 and 3	66,872	66,729	67,012	66,644	66,237	67,644	67,702	67,866	67,785	67,625	67,347	66,736
LaCHIP Phase IV - Prenatal Care	4,056	3,913	3,969	3,823	3,728	3,761	3,829	3,833	3,802	3,782	3,744	3,743
Long Term Care	21,703	21,627	21,738	21,545	21,503	21,493	21,476	21,528	21,517	21,560	21,500	21,493
Long Term Care Spend-Down	868	876	888	898	894	873	866	882	950	1,014	1,041	1,050
Low Income Subsidy	28	27	27	1	1	1	3	4	5	7	7	7
LTC Co-Insurance	1,167	1,072	1,072	1,022	991	1,005	1,002	1,013	1,025	1,014	947	949
LTC Co-Insurance Spend down	0	1	0	1	1	1	1	2	0	1	0	1
MAGI Spend-Down Medically Needy	42	34	39	39	75	82	81	60	50	23	30	34
Medicaid Purchase Plan	3,086	3,030	3,004	2,908	2,870	2,715	2,661	2,610	2,532	2,425	2,311	2,395
New Opportunities Waiver (NOW)	4,620	4,605	4,593	4,581	4,578	4,557	4,547	4,547	4,539	4,524	4,516	4,502
New Opportunities Waiver Spend-down MNP	12	12	11	11	11	10	9	6	8	9	8	7
New Opportunities Waiver-Fund	2,582	2,570	2,564	2,556	2,553	2,534	2,527	2,521	2,513	2,504	2,493	2,488
PACE	467	470	473	474	478	476	478	486	491	496	501	504
Parent/Caretaker Relative	36,016	36,562	34,990	35,530	36,431	36,043	36,798	37,406	36,527	36,625	36,480	35,423
Pickle	14,652	14,518	14,429	14,153	14,056	14,479	14,328	14,247	14,179	14,068	13,890	13,723
Provisional Medicaid	16,682	16,499	16,579	16,308	16,413	16,310	16,128	16,122	15,854	15,566	15,383	15,201
Qualified Disabled Working Individuals	4	3	3	2	2	2	2	3	3	3	3	3
Qualified Individuals	23,873	23,770	23,711	23,192	23,108	23,172	23,015	23,411	23,535	23,097	22,688	22,487
Qualified Medicare Beneficiary	150,524	150,570	151,882	151,344	152,625	152,038	152,108	152,815	152,390	152,221	151,870	151,731
Refugee Cash Assistance	1	1	1	1	0	1	1	1	0	0	0	0
Refugee Medical Assistance	1	1	1	1	0	0	0	0	0	0	0	0
Residential Options Waiver (ROW)	1,981	2,010	2,026	2,043	2,055	2,079	2,103	2,118	2,129	2,152	2,163	2,186
Residential Options Waiver Spend-down MNP	6	5	5	5	5	5	6	6	5	6	6	6
Specified Low-Income Medicare Beneficiary	45,059	44,960	44,918	43,929	43,729	44,103	44,085	44,328	44,077	43,850	43,348	43,081
State Retirees	1	1	1	1	1	0	0	0	0	0	0	0
Supplemental Security Income (SSI)	146,643	146,226	146,475	145,316	144,981	143,228	143,214	143,128	142,754	143,006	142,781	142,620
Supports Waiver (SW)	2,596	2,595	2,610	2,611	2,623	2,626	2,640	2,639	2,674	2,690	2,700	2,709
Supports Waiver Spend-down MNP	4	5	6	4	5	5	3	5	4	5	6	5
Take Charge Plus	114,997	114,986	115,808	114,386	115,047	112,660	112,804	113,717	113,510	112,972	112,035	111,671
Transitional Medicaid	5,999	5,912	6,032	5,573	5,302	5,102	4,838	4,697	4,859	4,625	4,421	4,299
Tuberculosis Infected Individuals	1	1	1	1	2	1	2	2	3	3	1	0
Youth Aging Out of Foster Care	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0
Total Unduplicated	1,651,609	1,649,422	1,636,813	1,632,586	1,648,889	1,637,855	1,640,774	1,634,380	1,622,060	1,610,066	1,594,002	1,576,099

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 each individual type of assistance category per month. One person may be counted multiple times if they changed Type of Assistance in the month; therefore the number of enrollees by type of assistance will not equal the Total Unduplicated count for 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 Louisiana Medicaid Eligibility Manual (MEM): <https://doh.la.gov/pages/medicaid-eligibility-manual>