

Measuring Marketplace Enrollment Relative to Projections

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AT A GLANCE:

- As of March 1, 2014, the Affordable Care Act's (ACA) Health Insurance Marketplaces had enrolled 61 percent of 2014 projected nationwide enrollment of subsidized and unsubsidized individuals, as derived from the Urban Institute's Health Insurance Policy Simulation Model. On March 27, the Department of Health and Human Services announced that enrollment had surpassed 6 million nationally, more than 86 percent of projections for the year. Our estimates rely upon the March 1 enrollment numbers, however, the most recent to include state specific figures.
- State-Based Marketplaces (SBMs) have been more successful in reaching projected enrollment levels than have the Federally Facilitated Marketplaces (FFMs): by March 1, SBMs had enrolled 76 percent of the enrollment projected to occur by December 31, 2014, compared to 54 percent for FFMs.
- Within SBM and FFM categories, enrollment relative to projections varies tremendously.
- Similarly, Marketplaces had enrolled 63 percent of the subsidized population expected to enroll in 2014; again, SBMs had significantly higher enrollment rates than FFMs (82 percent versus 55 percent).
- As of March 1, Marketplaces had enrolled 24 percent of projected 2016 enrollment and 13 percent of their target population (pre-reform nongroup insurance enrollees and uninsured individuals ineligible for public insurance or affordable employer-based coverage). All states will likely see substantial increases in enrollment in the coming years.

INTRODUCTION

As the first open-enrollment period for the new Health Insurance Marketplaces (HIMs) draws to a close, it is important to measure each state's progress. In this brief we compare the enrollment numbers as of March 1, 2014 (the most recent release to include state specific figures), to projected enrollment in 2014 and 2016 and estimates of the number of people eligible for HIM subsidies.¹ The comparisons to projected enrollment complement recently released comparisons to eligibility from the Kaiser Family Foundation by adjusting for expectations about the share of eligibles who would enroll.² The enrollment projections reflect the fact that different members of the potential HIM population (those with pre-ACA nongroup insurance and the uninsured without access to public insurance or affordable employer-based insurance) are likely to enroll at different rates. For example, those with health problems and those eligible for more financial assistance are more likely to enroll than the healthy and those eligible for little or no subsidies.

We also separate those eligible for subsidized coverage in the Marketplaces and compute their enrollment rates by state. Those eligible for subsidies will make up most HIM enrollees, and subsidies are available only with the purchase of a Marketplace plan. Enrollment of those receiving subsidies as a share of all those eligible for subsidies is an important measure of Marketplace success, since

similar unsubsidized plans are also available outside the Marketplace for higher-income purchasers.³

The end of the first open-enrollment period on March 31 was not the end of 2014 Marketplace enrollment. Some states as well as the federal government have expanded enrollment periods to accommodate those reporting difficulties using the new online enrollment systems. In addition, many people will experience a qualifying event—such as the birth of a child, divorce, significant change in income, or the loss of insurance through an employer—during the course of the year and will therefore be allowed a special open-enrollment period. Thus, HIM enrollment numbers are likely to continue to increase throughout the year. Therefore, we will regularly update and compare actual enrollment numbers with our projected 2014 and 2016 enrollment estimates, as well as our estimates of the subsidy eligible population.

The brief relies upon analysis of the Health Insurance Policy Simulation Model-American Community Survey version (HIPSM-ACS). The model is based upon ACS data from 2009, 2010, and 2011 to obtain representative samples of state populations and their pre-ACA implementation insurance coverage. We identify the target population for Marketplace enrollment—the population that the Marketplaces are designed to cover—as (1) those who

would be covered by a nongroup plan even in the absence of the ACA; and (2) those who would be uninsured in the absence of the ACA, are not eligible for public coverage, and do not have affordable access to coverage through their own or a family member's employer. Undocumented immigrants are excluded from the target population as the ACA prohibits their enrollment in Marketplace coverage.

HIPSM simulates individual and family health insurance enrollment under the ACA based upon eligibility for programs and subsidies, health insurance coverage and options in the family, health status, socio-demographic characteristics, any applicable penalties for remaining uninsured, and other factors.⁴ Subsidy eligibility is determined taking into account state decisions to expand Medicaid under the law and access to employer-based coverage. State-level estimates of target populations, subsidy-eligible individuals, and projected enrollment result from aggregated individual- and family-level estimates for those residing in each state.

In the results described below, we compare the latest state specific enrollment data released by the US Department of Health and Human Services with HIPSM-ACS projected enrollment for 2014 and 2016 as well as estimates of the target population. We also compare federal data on enrollment of

individuals (not available for all states) to HIPSM-ACS estimates of the number eligible for subsidies in each state. The 2016 estimates represent expected levels of enrollment once the Marketplaces have been operational for three years and all early enrollment problems have been overcome, and once knowledge and understanding of the law's coverage options and financial assistance have spread more widely than can be expected at the start of a new program.

We project 2014 enrollment by scaling down the 2016 estimates by the same proportional amount for each state, reaching a total Marketplace enrollment of 7 million, consistent with the initial estimate released by the Congressional Budget Office (CBO). While CBO subsequently revised its projection of 2014 enrollment downward after problems with the launch of the Marketplaces, our aggregate 2014 projections remain at 7 million; so, our estimates of state progress in actual enrollment relative to expected enrollment reflect their differential challenges with the new IT systems. Had we scaled back the 2016 projected enrollment levels to 6 million, as CBO did, the progress toward 2014 expected enrollment would have been greater nationally and in each state. Preliminary indications on March 31 suggest that the original estimate of 7 million may have been reached by the end of the open enrollment period, although an official tally was unavailable at the time of this brief's production.

WHAT WE FOUND

As of March 1, 2014, the ACA's Health Insurance Marketplaces had enrolled 61 percent of projected 2014 nationwide enrollment of subsidized and unsubsidized individuals, as derived from the Urban Institute's Health Insurance Policy Simulation Model (Table 1). On March 27, the Department of Health and Human Services announced that enrollment had surpassed 6 million nationally, more than 86 percent of projections for the year. Our estimates rely upon the March 1 enrollment numbers, however, the most recent to include state specific figures. Projected enrollment for 2014 is about one-third of projected equilibrium enrollment levels, which are anticipated to be achieved by the end of 2016. The most recent state-specific data indicate that 4.2 million people had chosen Marketplace-based plans by March 1, 2014. However, some of these individuals will not pay their premiums and, as such, will not be covered by Marketplace plans during 2014.⁵ Enrollment numbers have increased markedly through the end of March and will still increase throughout the year because of special enrollment periods.

State-Based Marketplaces have been more successful in reaching projected enrollment levels than have the Federally Facilitated Marketplaces: by March 1, SBMs had enrolled 76 percent of enrollment projected to occur by December 31, 2014, compared to 54 percent for FFMs. The 17 states that developed their own Marketplaces have together enrolled 1.7 million people in their plans. Another 2.6 million people have enrolled in federally run Marketplaces. New Mexico and Idaho are administering their own Marketplaces but are currently relying on the federal IT system for eligibility determination and enrollment.

Within SBM and FFM categories, enrollment relative to projections varies tremendously. Three of the 17 SBMs—Vermont, Connecticut, and the District of Columbia—have already exceeded projected 2014 enrollment figures; Rhode Island and California have reached 98 and 96 percent, respectively, of their projected first-year enrollment. Other SBMs have had slower enrollment starts; Hawaii and Massachusetts, for example, have enrolled 25 percent or

less of their first-year projections because of significant IT system challenges. However, these two states have the lowest shares of uninsured nonelderly residents in the country, owing to state implemented reforms before the ACA, and they will rely on their prior systems to maintain high levels of coverage during their challenging transitions to ACA-compliant IT environments.

In contrast, none of the 34 FFM states had met 2014 enrollment projections by March 1, and only four had enrolled more than 70 percent of the state-specific projections (North Carolina, Michigan, Florida, and Maine). Twenty FFMs had enrollment rates below 50 percent of projections.

Similarly, Marketplaces had enrolled 63 percent of the subsidized population expected to enroll in 2014; again, SBMs had significantly higher enrollment rates than FFMs (82 percent versus 55 percent). Vermont, California, Rhode Island, and Connecticut all enrolled more than the projected 2014 enrollment of subsidized individuals by March 1, 2014 (Table 2). Among FFMs, subsidized enrollment relative to expectations for 2014 have been highest thus far in North Carolina, Michigan, Florida, Maine,

and Wisconsin, all of which have enrolled upwards of 70 percent of first year projections.

As of March 1, Marketplaces had enrolled 24 percent of projected 2016 enrollment and 13 percent of their target population (pre-reform nongroup insurance enrollees and uninsured individuals ineligible for public insurance or affordable employer-based coverage). All states will likely see substantial increases in enrollment in the coming years. In 2016—by which knowledge of the ACA, its requirements, and coverage options is expected to be similar to the long-run equilibrium situation—projected Marketplace enrollment was estimated to be 2.5 times that in 2014. Vermont has already enrolled 70 percent of its projected 2016 enrollment, the leader among all the Marketplaces by a wide margin. Vermont also leads the states in Marketplace enrollment of subsidized individuals, having enrolled more than 65 percent of the subsidized population projected to enroll by the end of 2016. The vast majority of the states, including 12 of the 17 SBMs and all the FFMs, have yet to enroll one-third of their projected 2016 numbers, providing considerable evidence for the ongoing need for continued education, outreach, and enrollment assistance efforts over the coming years.

ENDNOTES

1. This brief does not address Medicaid enrollment.
2. Levitt L, G Claxton and A Damico, "How Much Financial Assistance Are People Receiving Under the Affordable Care Act?" KaiserFamily Foundation, March 2014, <http://kaiserfamilyfoundation.files.wordpress.com/2014/03/8569-how-much-financial-assistance-are-people-receiving-under-the-affordable-care-act1.pdf>
3. Vermont and the District of Columbia are exceptions since their Marketplaces will be the exclusive markets for nongroup insurance there.
4. See "The Urban Institute's Health Microsimulation Capabilities," available at <http://www.urban.org/publications/412154.html> for an overview of HIPSM. For a more detailed description of the model, see "Health Insurance Policy Simulation Model (HIPSM) Methodology Documentation: 2011 National Version," available at <http://www.urban.org/publications/412471.html>.
5. Secretary of Health and Human Services Kathleen Sebelius has been quoted indicating that insurers report that 80 to 90 percent of enrollees are paying their first month's premiums. See Robert Pear, "Health Care Signups Reach Frenzy in Final Day to Enroll," *New York Times*, March 31, 2014.

Table 1: Marketplace Enrollment Progress, by Marketplace Type

Enrollment as of March 1, 2014 in State Based Marketplaces							
State	(1) Projected 2014 Marketplace Enrollment	(2) Total Marketplace Target Population for 2016	(3) Projected 2016 Marketplace Enrollment	(4) March 1, 2014 Marketplace Enrollment Data	(5 = 4/1) March 1, 2014 Enrollment as a Percent of Projected 2014 Enrollment	(6 = 4/2) March 1, 2014 Enrollment as a Percent of the Total Target Population	(7 = 4/3) March 1, 2014 Enrollment as a Percent of Projected 2016 Enrollment
Vermont	14,000	52,000	35,000	24,326	178.9%	47.0%	70.2%
District of Columbia	6,000	31,000	19,000	6,249	108.8%	20.0%	33.1%
Connecticut	57,000	241,000	162,000	57,465	101.0%	23.8%	35.5%
Rhode Island	19,000	75,000	48,000	18,902	97.9%	25.3%	39.1%
California	906,000	3,332,000	2,357,000	868,936	95.9%	26.1%	36.9%
Idaho	57,000	267,000	142,000	43,861	77.3%	16.5%	31.0%
New York	321,000	1,295,000	811,000	244,618	76.3%	18.9%	30.2%
Washington	147,000	572,000	373,000	107,262	73.1%	18.8%	28.7%
Kentucky	81,000	307,000	196,000	54,945	68.0%	17.9%	28.1%
Colorado	130,000	497,000	351,000	83,469	64.2%	16.8%	23.8%
Nevada	65,000	242,000	156,000	28,353	43.8%	11.7%	18.2%
Minnesota	75,000	331,000	223,000	32,030	42.6%	9.7%	14.4%
Maryland	91,000	397,000	250,000	38,070	41.8%	9.6%	15.3%
Oregon	94,000	350,000	232,000	38,806	41.5%	11.1%	16.7%
New Mexico	46,000	171,000	112,000	15,012	32.7%	8.8%	13.4%
Hawaii	19,000	86,000	47,000	4,661	25.1%	5.4%	9.9%
Massachusetts	88,000	396,000	255,000	12,965	14.8%	3.3%	5.1%
<i>Total SBM</i>	<i>2,213,000</i>	<i>8,640,000</i>	<i>5,769,000</i>	<i>1,680,000</i>	<i>75.9%</i>	<i>19.4%</i>	<i>29.1%</i>

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Table 1: Marketplace Enrollment Progress, by Marketplace Type *continued*

Enrollment as of March 1, 2014 in Federally Facilitated Marketplaces							
State	(1) Projected 2014 Marketplace Enrollment	(2) Total Marketplace Target Population for 2016	(3) Projected 2016 Marketplace Enrollment	(4) March 1, 2014 Marketplace Enrollment Data	(5 = 4/1) March 1, 2014 Enrollment as a Percent of Projected 2014 Enrollment	(6 = 4/2) March 1, 2014 Enrollment as a Percent of the Total Target Population	(7 = 4/3) March 1, 2014 Enrollment as a Percent of Projected 2016 Enrollment
North Carolina	246,000	1,304,000	615,000	200,546	81.5%	15.4%	32.6%
Michigan	189,000	781,000	467,000	144,587	76.7%	18.5%	31.0%
Florida	594,000	3,177,000	1,437,000	442,087	74.5%	13.9%	30.8%
Maine	35,000	157,000	82,000	25,412	73.6%	16.2%	31.0%
New Hampshire	31,000	157,000	79,000	21,578	69.0%	13.7%	27.2%
Wisconsin	107,000	444,000	269,000	71,443	66.6%	16.1%	26.6%
Pennsylvania	267,000	1,439,000	677,000	159,821	60.0%	11.1%	23.6%
Virginia	175,000	941,000	451,000	102,815	58.9%	10.9%	22.8%
Montana	39,000	190,000	98,000	22,582	57.6%	11.9%	23.1%
Georgia	247,000	1,445,000	608,000	139,371	56.3%	9.6%	22.9%
Alabama	100,000	637,000	252,000	55,000	54.7%	8.6%	21.8%
Missouri	140,000	785,000	349,000	74,469	53.2%	9.5%	21.4%
Illinois	215,000	897,000	566,000	113,733	52.8%	12.7%	20.1%
Tennessee	149,000	832,000	378,000	77,867	52.2%	9.4%	20.6%
New Jersey	154,000	603,000	396,000	74,370	48.4%	12.3%	18.8%
Utah	83,000	384,000	208,000	39,902	47.9%	10.4%	19.2%
South Carolina	117,000	657,000	283,000	55,830	47.8%	8.5%	19.7%
Delaware	14,000	60,000	34,000	6,538	47.0%	10.9%	19.0%
Arkansas	61,000	218,000	147,000	27,395	45.1%	12.6%	18.6%
Kansas	66,000	352,000	169,000	29,309	44.6%	8.3%	17.4%
Indiana	150,000	856,000	369,000	64,972	43.4%	7.6%	17.6%
Nebraska	50,000	244,000	136,000	21,578	43.1%	8.8%	15.8%
Texas	696,000	3,831,000	1,683,000	295,025	42.4%	7.7%	17.5%
Wyoming	18,000	84,000	45,000	6,838	38.6%	8.1%	15.1%
Ohio	205,000	796,000	498,000	78,925	38.4%	9.9%	15.9%
Mississippi	68,000	417,000	162,000	25,554	37.9%	6.1%	15.8%
Louisiana	122,000	735,000	305,000	45,561	37.3%	6.2%	14.9%
Arizona	160,000	559,000	391,000	57,611	36.0%	10.3%	14.7%
West Virginia	30,000	118,000	68,000	10,599	35.9%	9.0%	15.5%
Oklahoma	97,000	520,000	235,000	32,882	33.9%	6.3%	14.0%
Alaska	22,000	105,000	51,000	6,666	30.1%	6.4%	13.2%
Iowa	54,000	218,000	145,000	15,346	28.3%	7.1%	10.6%
South Dakota	25,000	125,000	66,000	6,765	26.8%	5.4%	10.2%
North Dakota	20,000	73,000	54,000	5,238	26.2%	7.2%	9.8%
Total FFM	4,745,000	24,142,000	11,773,000	2,558,000	53.9%	10.6%	21.7%
National	6,958,000	32,781,000	17,542,000	4,238,000	60.9%	12.9%	24.2%

Source: Urban Institute projections based on the 2014 Health Insurance Policy Simulation Model using data from the American Community Survey (HIPSIM-ACS 2014); Enrollment data is as of Mar 1, 2014 from HHS (http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Mar2014/ib_2014mar_enrollment.pdf).

Note: The Marketplace target population for 2016 consists of three groups: those eligible for subsidies, those currently with nongroup coverage but who are ineligible for subsidies or Medicaid/CHIP, and those currently uninsured who do not have access to employer coverage and who are ineligible for subsidies or Medicaid/CHIP; SBM=State-Based Marketplace; FFM=Federally Facilitated Marketplace.

Table 2: Marketplace Subsidized Enrollment Progress, by Marketplace Type

Enrollment as of March 1, 2014 in State Based Marketplaces							
State	(1) Projected 2014 Subsidized Enrollment	(2) Total Eligible for Subsidies for 2016	(3) Projected 2016 Subsidized Marketplace Enrollment	(4) March 1, 2014 Subsidized Marketplace Enrollment Data	(5 = 4/1) March 1, 2014 Subsidized Enrollment as a Percent of Projected 2014 Subsidized Enrollment	(6 = 4/2) March 1, 2014 Subsidized Enrollment as a Percent of Population Eligible for Subsidies	(7 = 4/3) March 1, 2014 Subsidized Enrollment as a Percent of Projected 2016 Subsidized Enrollment
Vermont	11,000	35,000	20,000	13,379	121.3%	37.8%	65.5%
California	723,000	2,097,000	1,338,000	764,664	105.8%	36.5%	57.1%
Rhode Island	16,000	52,000	29,000	16,634	104.5%	32.1%	56.4%
Connecticut	42,000	142,000	77,000	41,949	100.7%	29.6%	54.4%
Idaho	47,000	143,000	87,000	39,914	85.2%	27.8%	46.0%
Washington	119,000	381,000	221,000	86,882	72.9%	22.8%	39.4%
New York	262,000	900,000	485,000	176,125	67.3%	19.6%	36.3%
Kentucky	68,000	225,000	127,000	38,462	56.2%	17.1%	30.4%
Colorado	100,000	297,000	186,000	47,577	47.5%	16.0%	25.6%
Nevada	55,000	173,000	102,000	22,399	40.7%	13.0%	22.0%
Oregon	78,000	241,000	144,000	30,657	39.5%	12.7%	21.3%
New Mexico	39,000	121,000	72,000	11,709	30.2%	9.7%	16.3%
District of Columbia	4,000	15,000	7,000	812	23.1%	5.4%	12.5%
Hawaii	15,000	62,000	28,000	1,631	10.8%	2.6%	5.8%
Maryland	69,000	246,000	128,000	-	-	-	-
Massachusetts	63,000	237,000	116,000	-	-	-	-
Minnesota	53,000	180,000	98,000	-	-	-	-
Total SBM	1,762,000	5,547,000	3,264,000	1,293,000	81.9%	26.5%	44.2%

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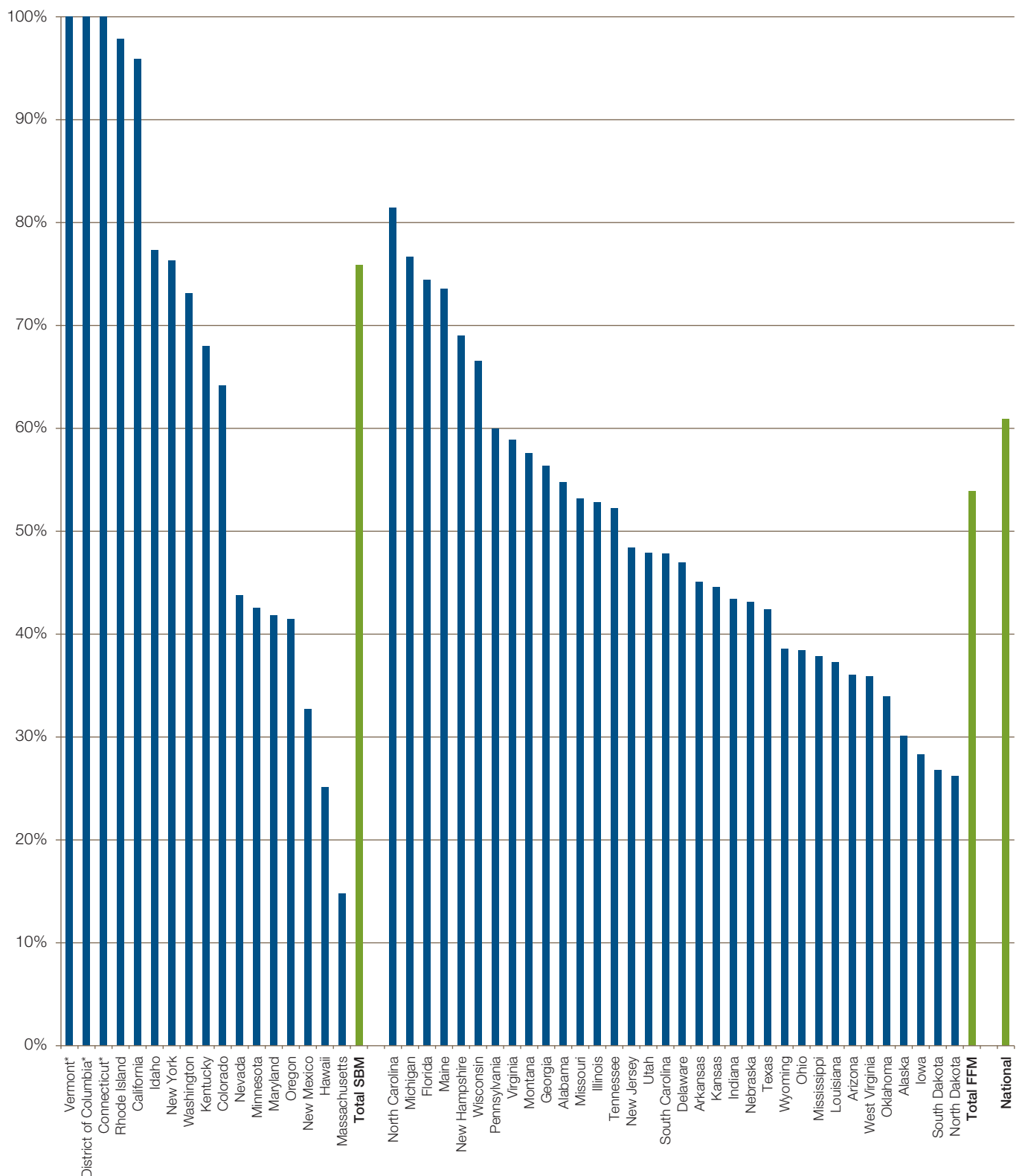
Table 2: Marketplace Subsidized Enrollment Progress, by Marketplace Type *continued*

Enrollment as of March 1, 2014 in Federally Facilitated Marketplaces							
State	(1) Projected 2014 Subsidized Enrollment	(2) Total Eligible for Subsidies for 2016	(3) Projected 2016 Subsidized Marketplace Enrollment	(4) March 1, 2014 Subsidized Marketplace Enrollment Data	(5 = 4/1) March 1, 2014 Subsidized Enrollment as a Percent of Projected 2014 Subsidized Enrollment	(6 = 4/2) March 1, 2014 Subsidized Enrollment as a Percent of Population Eligible for Subsidies	(7 = 4/3) March 1, 2014 Subsidized Enrollment as a Percent of Projected 2016 Subsidized Enrollment
North Carolina	203,000	700,000	376,000	182,497	89.8%	26.1%	48.5%
Michigan	157,000	567,000	290,000	125,791	80.2%	22.2%	43.3%
Florida	503,000	1,714,000	931,000	397,878	79.2%	23.2%	42.7%
Maine	30,000	102,000	55,000	22,871	77.1%	22.4%	41.7%
Wisconsin	88,000	321,000	164,000	64,299	72.8%	20.0%	39.3%
New Hampshire	25,000	92,000	47,000	15,968	62.6%	17.4%	33.8%
Montana	32,000	105,000	60,000	19,421	59.9%	18.5%	32.4%
Pennsylvania	217,000	813,000	402,000	127,857	58.9%	15.7%	31.8%
Virginia	140,000	511,000	260,000	82,252	58.7%	16.1%	31.7%
Georgia	207,000	738,000	383,000	118,465	57.2%	16.0%	30.9%
Alabama	83,000	320,000	153,000	47,300	57.2%	14.8%	30.9%
Missouri	116,000	411,000	215,000	63,299	54.6%	15.4%	29.5%
Illinois	170,000	582,000	315,000	87,574	51.5%	15.0%	27.8%
Tennessee	121,000	452,000	225,000	61,515	50.7%	13.6%	27.4%
Utah	69,000	216,000	127,000	34,316	49.9%	15.9%	27.0%
New Jersey	124,000	407,000	229,000	61,727	49.9%	15.2%	27.0%
Nebraska	38,000	122,000	71,000	18,773	49.1%	15.3%	26.5%
South Carolina	99,000	360,000	183,000	48,014	48.6%	13.3%	26.2%
Arkansas	51,000	152,000	95,000	24,929	48.6%	16.4%	26.2%
Indiana	125,000	465,000	231,000	57,175	45.8%	12.3%	24.8%
Delaware	12,000	44,000	21,000	5,165	44.6%	11.8%	24.1%
Wyoming	14,000	45,000	27,000	6,291	43.7%	13.9%	23.6%
Kansas	53,000	184,000	98,000	22,861	43.1%	12.4%	23.3%
Mississippi	57,000	201,000	106,000	23,765	41.3%	11.8%	22.3%
Texas	589,000	1,952,000	1,092,000	241,921	41.0%	12.4%	22.2%
Louisiana	101,000	361,000	187,000	39,638	39.3%	11.0%	21.2%
Ohio	174,000	584,000	322,000	67,086	38.6%	11.5%	20.8%
West Virginia	26,000	93,000	48,000	9,115	35.3%	9.8%	19.1%
Arizona	134,000	386,000	249,000	42,632	31.7%	11.1%	17.1%
Oklahoma	82,000	284,000	152,000	25,648	31.3%	9.0%	16.9%
Iowa	42,000	136,000	78,000	12,891	30.6%	9.5%	16.5%
South Dakota	20,000	63,000	37,000	6,021	30.1%	9.6%	16.3%
Alaska	20,000	66,000	36,000	5,799	29.6%	8.7%	16.0%
North Dakota	15,000	44,000	29,000	4,400	28.4%	10.0%	15.4%
<i>Total FFM</i>	<i>3,938,000</i>	<i>13,595,000</i>	<i>7,293,000</i>	<i>2,175,000</i>	<i>55.2%</i>	<i>16.0%</i>	<i>29.8%</i>
National	5,701,000	19,142,000	10,557,000	3,468,000	62.9%	18.8%	33.9%

Source: Urban Institute projections based on the 2014 Health Insurance Policy Simulation Model using data from the American Community Survey (HIPS-M-ACS 2014); Enrollment data is as of Mar 1, 2014 from HHS (http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Mar2014/ib_2014mar_enrollment.pdf).

Note: SBM=State-Based Marketplace; FFM=Federally Facilitated Marketplace; “-” indicates data is not available; SBM and National totals and rates omit states with unavailable data for columns 4, 5, 6, and 7.

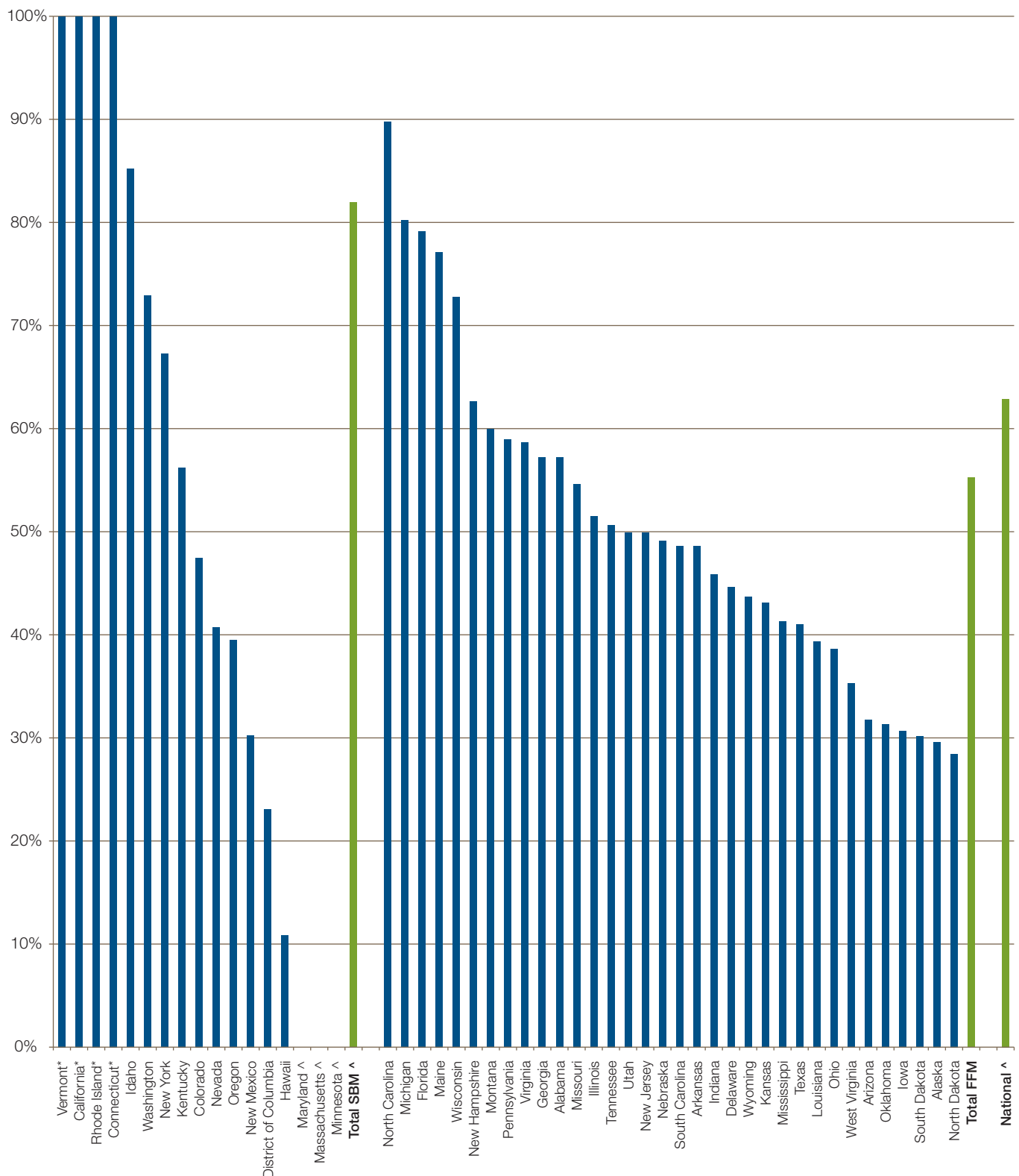
Figure 1: March 1, 2014 Enrollment as a Percent of Projected 2014 Enrollment



Source: Urban Institute projections based on the 2014 Health Insurance Policy Simulation Model using data from the American Community Survey (HIPSM-ACS 2014); Enrollment data is as of Mar 1, 2014 from HHS (http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Mar2014/ib_2014mar_enrollment.pdf).

Notes: *denotes states with current enrollment greater than projected 2014 enrollment; CT (101.0%), DC (108.8%), and VT (178.9%); SBM=State-Based Marketplace; FFM=Federally Facilitated Marketplace.

Figure 2: March 1, 2014 Subsidized Enrollment as a Percent of Projected 2014 Subsidized Enrollment



Source: Urban Institute projections based on the 2014 Health Insurance Policy Simulation Model using data from the American Community Survey (HIPSIM-ACS 2014); Enrollment data is as of Mar 1, 2014 from HHS (http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Mar2014/ib_2014mar_enrollment.pdf).

Notes: *denotes states with current enrollment greater than projected 2014 enrollment; CA (105.8%), CT (100.7%), RI (104.5%), and VT (121.3%); SBM=State-Based Marketplace; FFM=Federally Facilitated Marketplace; ^Data is not available in MA, MD, and MN and SBM and National rates omit these states.

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About the Authors and Acknowledgements

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