

RESEARCH REPORT

Joint Eligibility and Participation in SNAP and Medicaid/CHIP, 2011, 2013, and 2015

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Contents

Acknowledgments	iv
Joint Eligibility and Participation in SNAP and Medicaid/CHIP, 2011, 2013, and 2015	1
Importance of Tracking Joint Eligibility and Participation	3
Results: Joint Eligibility	7
Results: Joint Participation	15
Conclusions	18
Methodology	19
Eligibility	19
SNAP Simulation	19
Medicaid/CHIP Simulation	20
Overlap in Eligibility	22
Appendix A. State-Level Estimates for Children	23
Appendix B. State-Level Estimates for Parents	32
Appendix C. State-Level Estimates for Nonparents	41
Notes	50
References	51
About the Authors	53
Statement of Independence	54

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Joint Eligibility and Participation in SNAP and Medicaid/CHIP, 2011, 2013, and 2015

This report examines joint eligibility and participation in the Supplemental Nutrition Assistance Program (SNAP) and the Medicaid/Children's Health Insurance Program (CHIP) among children and adults under age 65 in 2011, 2013, and 2015. It is the fourth report in a series that we believe is the only published source of estimates on joint eligibility and participation in the nation's primary food and medical assistance programs. SNAP is the nation's largest nutrition assistance program and Medicaid and CHIP are the nation's primary medical assistance programs for nonelderly adults and children. SNAP and Medicaid/CHIP are intended to assist many of the same families, and the measures provided here help assess the overlap in eligibility and the extent to which these programs are reaching eligible families.

Measures of the overlap in eligibility show the potential of policies that rely on joint eligibility to increase receipt of SNAP and Medicaid/CHIP coverage among eligible families. Examples include assessing multiple program eligibility through screeners, colocating program offices, and using information from one program to determine or renew eligibility for another. These measures are also necessary for assessing states' performance toward the goal of increasing the joint participation rate, that is, the percentage of individuals eligible for both benefits who are receiving both. Additional motivation for measuring joint eligibility and participation rates comes from six states' efforts as part of the Work Support Strategies (WSS) initiative to increase eligible families' participation in multiple benefit programs (box 1).¹

This report examines changes in eligibility for SNAP and Medicaid/CHIP between 2011 and 2015, a time when more than half of states expanded Medicaid to cover families earning up to 138 percent of the federal poverty level (FPL). We show how many children and adults are eligible, nationally and at the state level, for Medicaid/CHIP, SNAP, or both. In addition, we examine the changes in joint participation in three WSS states for which we have state administrative participation data: Idaho, Illinois, and South Carolina. The joint eligibility estimates presented here could be used with relevant administrative data to calculate joint participation rates for other states. Estimates of program eligibility derive from the American Community Survey (ACS), and our analysis of program participation uses administrative data available for Idaho, Illinois, and South Carolina combined with ACS data (see Methodology section).

BOX 1

Work Support Strategies

Work Support Strategies (WSS) was a multiyear, multistate, foundation-funded initiative to help low-income families get and keep the package of work supports for which they are eligible. Colorado, Idaho, Illinois, North Carolina, Rhode Island, and South Carolina were selected through a competitive process to participate in WSS, first in a planning and design year in 2011 and then in the implementation phase from 2012 through 2015.

Through grants, expert technical assistance, and peer learning, the initiative helped states reform, modernize, and align the systems delivering work support programs intended to increase families' well-being and stability, particularly SNAP, Medicaid and CHIP, and child care assistance through the Child Care and Development Block Grant. Through WSS, states sought to streamline and integrate service delivery, use 21st-century technology, and apply innovative business processes to improve administrative efficiency and reduce the burden on states and working families, all toward the goal of increasing participation and retention to support work and well-being.

For additional reports and information, see "Work Support Strategies," Urban Institute, last updated December 6, 2016, <http://www.urban.org/work-support-strategies>.

Though we expect little change in the prevalence of joint eligibility among children, we expect Medicaid expansions under the Patient Protection and Affordable Care Act (ACA) would increase the prevalence of joint eligibility among nonelderly adults between 2013 and 2015, particularly those not living with a dependent child (hereafter referred to as nonparents). We find that the proportion of adults jointly eligible increased substantially between 2013 and 2015 in expansion states. In addition, a lower proportion of these adults was only eligible for SNAP and a higher proportion was only eligible for Medicaid. These changes were most pronounced among nonparents, for whom the proportion jointly eligible rose from 6 percent to 17 percent (8.7 million people), the proportion only eligible for Medicaid rose from 4 percent to 15 percent (8.8 million people), and the proportion only eligible for SNAP declined from 14 percent to 3 percent (8.4 million people). Not surprisingly, we find few changes in nonexpansion states. Compared with expansion states in 2015, in nonexpansion states fewer adults were eligible for assistance from both programs, and nonparents were still largely limited to SNAP. These results suggest there may be potential for increasing Medicaid coverage among adults, particularly in states that expanded under the ACA, by working through SNAP.

Expectations on how joint participation rates could change over this period are less clear. We expect that state efforts to improve access to benefits would lead to increases in joint participation. But

several factors, including expansions in eligibility and implementation of the ACA, could lead to decreases in joint participation rates (discussed later in the report). For the three states we examine, we find varying changes in joint participation rates from 2013 to 2015, with increases for children and adults in South Carolina, a mix in Illinois, and relatively stable rates in Idaho.

Importance of Tracking Joint Eligibility and Participation

Federal and state food and medical assistance programs aim to improve the circumstances of low-income families and individuals. To achieve this goal, benefits must reach those in need. Monitoring the overlap in SNAP and Medicaid/CHIP eligibility shows who can enroll in both programs and who can enroll in only one program, by state and eligibility group (children, parents, and nonparent adults). Monitoring enrollment shows the potential and the limitations of policies that rely on joint eligibility, such as assessing multiple program eligibility through screeners, colocating program offices, and using information from one program to determine or renew eligibility for another program, to increase receipt of SNAP and Medicaid/CHIP coverage among eligible families. Prior research examined joint eligibility in 2011 and 2013 and found that the overlap varied by state and eligibility group (children, parents, and nonparent adults). Among people eligible for at least one program, children (and to a lesser extent, parents) tended to be jointly eligible for Medicaid/CHIP and SNAP, while nonparents tended to be only SNAP eligible (Wheaton, Lynch, and Johnson 2016).

Tracking the joint participation rate—the percentage of those eligible for programs who actually receive benefits—can demonstrate how well programs are reaching the population targeted in their eligibility rules. Prior research examined changes in joint participation rates from 2011 to 2013 and found increases in four out of five WSS states (Loprest, Lynch, and Wheaton 2016). We know of no other published joint eligibility estimates or assessment of changes in joint eligibility for SNAP and Medicaid/CHIP.

Eligibility rates for SNAP and Medicaid/CHIP are shaped by factors including income eligibility thresholds and poverty rates (see table 1). Federal SNAP rules require that households without an elderly or disabled member have gross income below 130 percent of FPL and net income (after deductions) of less than 100 percent of FPL. Some states have increased the SNAP eligibility limit through broad-based categorical eligibility programs. However, because benefits get phased out under the SNAP formula, families are not necessarily eligible to receive a benefit at incomes above the federal eligibility limit.² In our study period, the most significant change in Medicaid eligibility rules was the

expansion of Medicaid under the ACA. Between 2014 and mid-2015, 29 states (including the District of Columbia, which is considered a state in this analysis for ease of discussion) adopted the expansion. In addition, other changes affected eligibility levels in different ways or in select states.

TABLE 1

State Poverty Rates and Program Eligibility Thresholds as a Percentage of FPL for Children and Nonelderly Adults, 2015

	Share of nonelderly in poverty	SNAP	Medicaid/CHIP		
		Households with children/without children	Children	Parents and relative caretakers of dependent children	Other nondisabled adults
Alabama	19.7	130	317	18	n.a.
Alaska	9.9	130	208	146	n.a.
Arizona	18.1	185	200 [^]	138	138
Arkansas	20.4	130	216	138	138
California	15.3	200	266	138	138
Colorado	11.5	130	265	138	138
Connecticut	10.2	185	323	201	138
Delaware	14.1	200	217	138	138
District of Columbia	15.6	200	324	221	215
Florida	16.1	200	215	34	n.a.
Georgia	17.5	130	252	38	n.a.
Hawaii	10.3	200	313	138	138
Idaho	14.2	130	190	27	n.a.
Illinois	14.0	130	318	138	138
Indiana	15.7	130	255	139	139
Iowa	13.2	160	380	138	138
Kansas	13.0	130	247	38	n.a.
Kentucky	18.7	130	218	138	138
Louisiana	19.7	130	255	24	n.a.
Maine	12.7	185	213	105	n.a.
Maryland	9.9	200	322	138	138
Massachusetts	10.9	200/130	305	138	138
Michigan	16.5	200	217	138	138
Minnesota	9.6	165	288	138	138
Mississippi	23.0	130	214	28	n.a.
Missouri	14.9	130	305	23	n.a.
Montana	15.2	200	266	51	n.a.
Nebraska	12.6	130	218	55	n.a.
Nevada	15.4	200	205	138	138
New Hampshire	7.5	185/130	323	138	138
New Jersey	10.5	185	355	138	138
New Mexico	21.8	165	305	138	138
New York	15.1	130	405	138	138
North Carolina	17.3	200	216	45	n.a.
North Dakota	10.7	200	175	138	138
Ohio	15.5	130	211	138	138
Oklahoma	16.8	130	210	46	n.a.
Oregon	17.5	185	305	138	138
Pennsylvania	15.5	160	319	138	138
Rhode Island	13.4	185	266	138	138
South Carolina	17.4	130	213	67	n.a.

	Share of nonelderly in poverty	SNAP		Medicaid/CHIP	
		Households with children/without children	Children	Parents and relative caretakers of dependent children	Other nondisabled adults
South Dakota	12.6	130	209	53	n.a.
Tennessee	17.4	130	255	103	n.a.
Texas	16.0	165	206	19	n.a.
Utah	11.1	130	205	46	n.a.
Vermont	9.7	185	317	138	138
Virginia	11.5	130	205	45	n.a.
Washington	12.5	200	317	138	138
West Virginia	19.3	130	305	138	138
Wisconsin	11.7	200	306	100	100
Wyoming	10.1	130	205	58	n.a.

Sources: State poverty percentages are from Urban Institute tabulations of 2015 American Community Survey data. SNAP broad-based categorical eligibility policies are from USDA FNS (2016) and state sources. Medicaid/CHIP policies are from Brooks et al. (2015).

Notes: The sample is the nonelderly civilian population, excluding those living in group quarters and institutions. The SNAP column shows the limit for gross income as a percentage of the SNAP poverty guideline applicable to households without an elderly or disabled member. SNAP programs not using broad-based categorical eligibility are in bold and have income and assets tests at the standard federal levels. The Medicaid/CHIP columns reflect state decisions as of mid-2015, at which time 29 states had elected to expand Medicaid under the ACA. Thresholds presented exclude Medicaid/CHIP programs that do not offer full-benefit coverage or coverage available throughout the state. To simulate a sample person's eligibility for Medicaid/CHIP, an income-to-poverty ratio is computed using US Department of Health and Human Services guidelines and the Medicaid/CHIP-defined family modified adjusted gross income. We list Medicaid policies for nondisabled adults only because of the complexity of disability eligibility rules. Policies under which adults with disabilities are eligible for Medicaid are modeled and included in our eligibility estimates.

ACA = Patient Protection and Affordable Care Act; CHIP = Children's Health Insurance Program; SNAP = Supplemental Nutrition Assistance Program.

n.a. = not applicable. ^ = the Medicaid/CHIP program is closed to new applicants.

Changes we expect will lower eligibility levels between 2013 and 2015 include the following:

- Poverty declining from 2014 to 2015 in 23 states and nationally after several years of being relatively unchanged (DeNavas-Walt and Proctor 2015; Proctor, Semega, and Kollar 2016).
- The reinstatement in certain states of SNAP time limits for adults who are in households without children and do not meet work requirements.
- The higher SNAP benefit provided under the American Recovery and Reinvestment Act (ARRA) being phased out by November 2013.³
- The lowering of Medicaid eligibility thresholds for Wisconsin parents from 200 percent to 100 percent of FPL (Brooks et al. 2015).

Changes we expect will increase eligibility levels between 2013 and 2015 include the following:

- The increase in the California SNAP eligibility limit from 130 percent of FPL to 200 percent of FPL.⁴
- The 2014 removal of the cap on Medicaid enrollment for nondisabled nonparents in Wisconsin (Gates and Rudowitz 2014).

In addition, the conversion to modified adjusted gross income (MAGI) under the ACA is expected to cause some individuals to gain or lose eligibility. Some evidence has demonstrated that, on average, the conversion increased eligibility, particularly for parents (Kenney et al. 2016b).

The ACA mostly affected adult eligibility, particularly among nonparents, who were not usually eligible for Medicaid before the ACA. Given the change in poverty rates and other factors listed above, we might expect that children's eligibility levels would stay flat or decline. Joint Medicaid/SNAP eligibility among parents was expected to be higher after implementation of the ACA because of Medicaid expansion in the states that took that option, although declining poverty rates, the end of the higher SNAP benefits provided under ARRA, and the lowering of the Medicaid eligibility threshold in Wisconsin could somewhat offset the change. Joint eligibility among nonparents was also expected to increase. However, we expect it to be offset somewhat by declining poverty rates, the end of the higher SNAP benefits under ARRA, and the reinstatement of SNAP time limits in some states for adults who are in households without children and do not meet work requirements.

Participation among eligible individuals is shaped by several factors, including program outreach, policies and practices for enrollment and renewal (including how burdensome they are), cost-sharing policies, and level of benefits. The ACA may affect joint participation in expansion states, as well as in nonexpansion states, and among groups whose eligibility threshold did not change. In addition to the individual mandate requiring people to have health insurance, the ACA shifted to using MAGI to determine eligibility, supported improvements to enrollment processes and strategies, reduced the cost-sharing requirements for children moved from CHIP to Medicaid, and integrated enrollment systems for Medicaid, CHIP, and the newly established health insurance marketplaces (Brooks et al. 2015). Between 2013 and 2015, Medicaid/CHIP participation among children increased more in expansion states than in nonexpansion states, likely caused by two factors: (1) the increase in coverage options for parents through Medicaid expansions and (2) ACA-driven cost-sharing reductions and outreach and enrollment efforts (Kenney et al. 2017). In the early years following eligibility expansions, the share of people claiming benefits may decrease, as the newly eligible need time to realize they are eligible and figure out how to enroll. In addition, states implementing processes to meet ACA requirements, particularly the development and implementation of integrated program technology

systems, led to transitional difficulties that may have affected participation in 2015 (Loprest, Lynch, and Wheaton 2016). Kenney and others found a decline in Medicaid participation among nonparents in expansion states between 2013 and 2014. Interestingly, however, they found an increase among parents, who may have been more familiar with Medicaid (Kenney et al. 2016b).

In addition, since 2011, the three study states engaged in efforts to increase participation in SNAP and Medicaid/CHIP as part of the WSS initiative (Isaacs, Katz, and Kassabian 2016). For example, during this time (before 2013), South Carolina began using electronic data on SNAP eligibility to automatically enroll children in Medicaid (Edwards and Kellenberg 2013). Illinois received a waiver under the ACA to enroll nonelderly, nondisabled SNAP participants into Medicaid on the basis of SNAP eligibility. Idaho worked to align definitions and requirements across programs and aligned program renewal times to reduce eligible individuals dropping off benefits at this point. South Carolina started to colocate SNAP and Medicaid offices and to share information across agencies in order to ease multiple benefit application for individuals. All three states integrated their applications (Issacs, Katz, and Kassabian 2016).

Results: Joint Eligibility

In this section, we examine changes in the overlap of SNAP and Medicaid/CHIP eligibility for children, parents, and nonparents for expansion and nonexpansion states in 2011, 2013, and 2015. The eligibility estimates include people who have other non-Medicaid/CHIP coverage, including those who would not immediately qualify for CHIP because of waiting periods or other provisions designed to target coverage to the uninsured. Figure 1 shows that patterns of eligibility for SNAP and Medicaid among adults were generally stable between 2011 and 2013 in both expansion and nonexpansion states. In 2011 and 2013, nonparents' eligibility rates were low and they were more likely to be only eligible for SNAP (about 16 percent) than jointly eligible (6 percent) or only eligible for Medicaid (3 percent). In 2011 and 2013, the proportion of nonparents eligible for either program was about the same in nonexpansion and expansion states. In expansion states, however, nonparents were slightly more likely to be Medicaid eligible and not only eligible for SNAP. In 2011 and 2013, parents' eligibility rates were also low but higher than nonparents'. Nationwide in 2011 and 2013, parents were more likely to be jointly eligible (14 percent) than only eligible for SNAP (close to 9 percent) or only eligible for Medicaid (3 percent). Parents in expansion states also had higher Medicaid eligibility rates compared with their counterparts in nonexpansion states (19 percent versus about 13 percent).

Between 2013 and 2015, the pattern shifted for adults in expansion states. Many more became jointly eligible or only eligible for Medicaid and many fewer were only eligible for SNAP. This pattern was especially evident for nonparent adults: compared with parents, they were more often only eligible for SNAP and less often eligible for Medicaid. Among nonparents between 2013 and 2015, the proportion jointly eligible increased from 6 percent to 17 percent (8.7 million people), the proportion only eligible for Medicaid increased from 4 percent to 15 percent (8.8 million people), and the proportion only eligible for SNAP declined from 14 percent to 3 percent (8.4 million people). Among parents between 2013 and 2015, the proportion jointly eligible increased from 15 percent to 19 percent (1.2 million people), the proportion only eligible for Medicaid increased from 4 percent to 11 percent (2.5 million people), and the proportion only eligible for SNAP declined from 6 percent to 3 percent (1.2 million people). In nonexpansion states, the patterns of eligibility were similar in 2013 and 2015 for nonparents, but the proportion of parents only eligible for Medicaid increased. An increase in parents' Medicaid eligibility has been observed in nonexpansion states before and may relate to the change to using MAGI and converted income thresholds to determine Medicaid/CHIP eligibility under the ACA (Kenney et al. 2016b).

Figure 1 also shows that patterns of joint eligibility were generally stable among children over our study period; patterns were similar in expansion and nonexpansion states. A majority of children were Medicaid eligible and of those, about 60 percent were also eligible for SNAP. Very few children were only eligible for SNAP. Patterns were stable over time because eligibility for Medicaid/CHIP changed little among children over this time. States were required to keep their Medicaid/CHIP eligibility thresholds for children and although poverty declined and other factors changed, it was not enough to meaningfully change eligibility levels.

FIGURE 1A

Program Eligibility among Nonparents by State Medicaid Expansion Status, 2011, 2013, and 2015

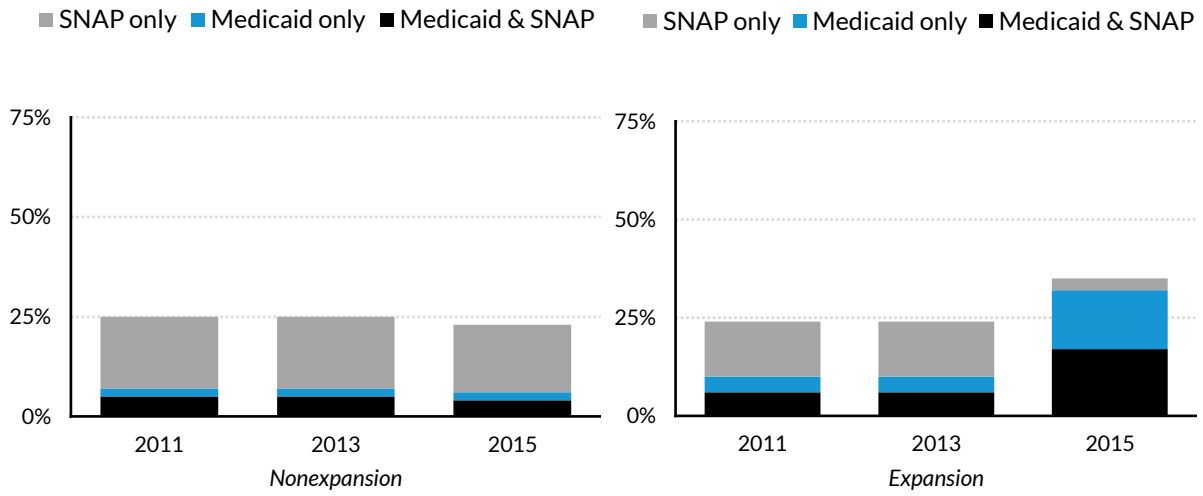


FIGURE 1B

Program Eligibility among Parents by State Medicaid Expansion Status, 2011, 2013, and 2015

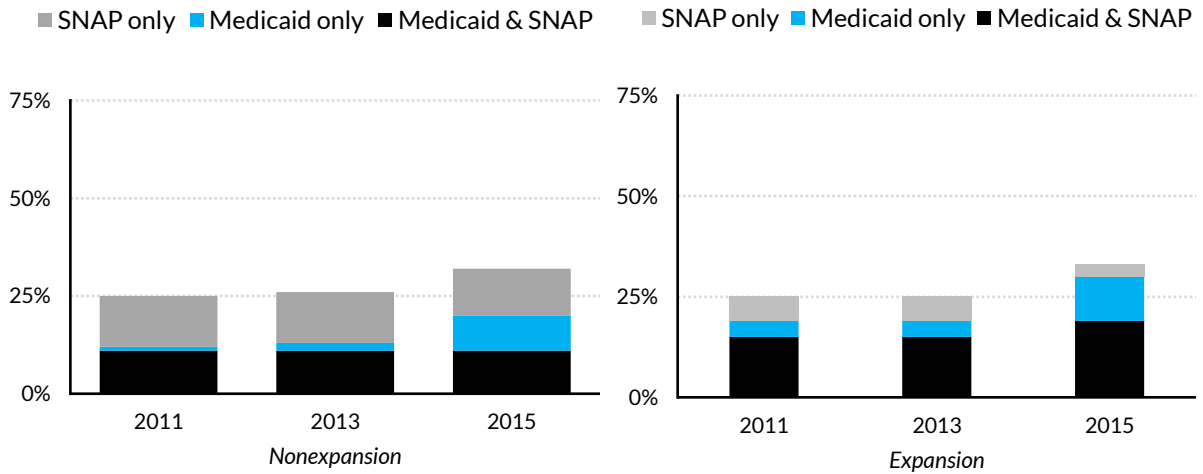
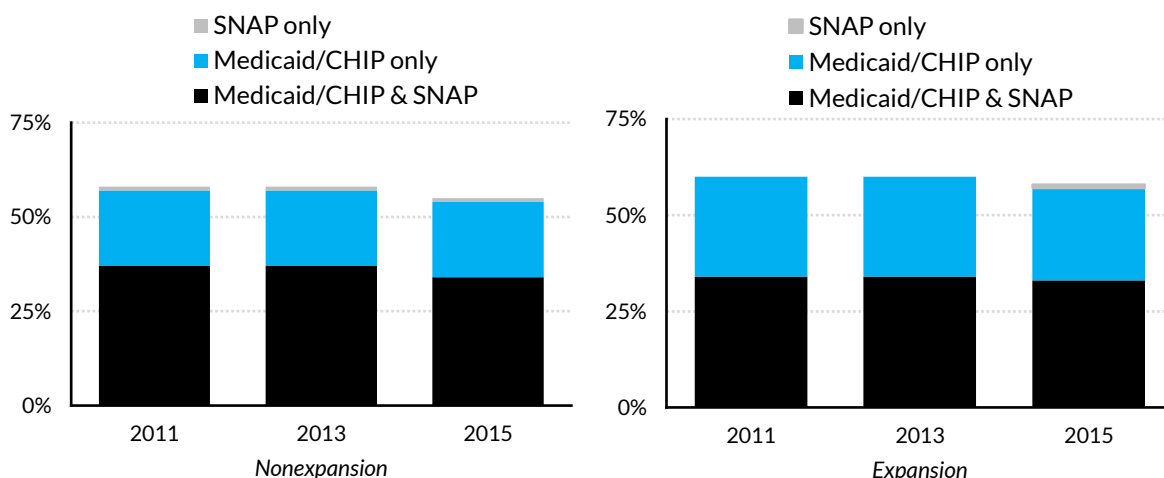


FIGURE 1C

Program Eligibility among Children by State Medicaid Expansion Status, 2011, 2013, and 2015



Sources: Transfer Income Model, version 3, and Urban Institute Medicaid/CHIP Eligibility Simulation Model and Health Insurance Policy Simulation Model estimates using data from the 2011, 2013, and 2015 American Community Surveys.

Notes: Children are defined as people under age 19. Expansion states at the time of this analysis included Arizona, Arkansas, California, Colorado, Connecticut, Delaware, the District of Columbia, Hawaii, Illinois, Indiana, Iowa, Kentucky, Maryland, Massachusetts, Michigan, Minnesota, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, Vermont, Washington, and West Virginia.

CHIP = Children’s Health Insurance Program; SNAP=Supplemental Nutrition Assistance Program.

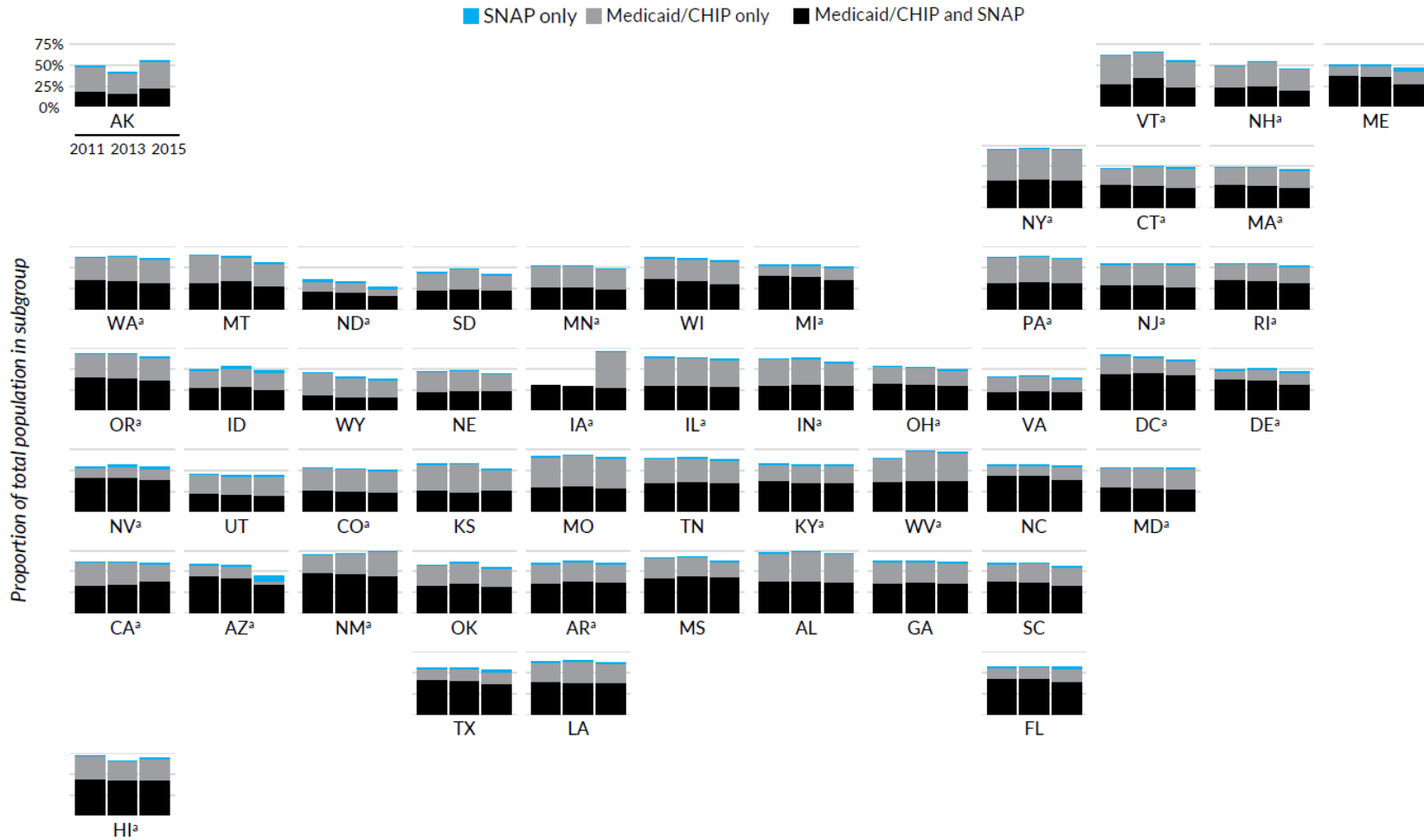
The eligibility estimates presented above include a substantial number of people who have insurance from other sources and no Medicaid/CHIP (see appendixes). The patterns of Medicaid/CHIP eligibility are generally similar over time and among groups when we exclude people who only have other types of coverage. However, the proportion only eligible for Medicaid/CHIP shrinks more than the proportion jointly eligible for Medicaid/CHIP and SNAP. People only eligible for Medicaid/CHIP and not SNAP are more likely to have non-Medicaid/CHIP coverage than those who are jointly eligible.

As we have observed for 2011 and 2013, eligibility patterns varied by state and subgroup in 2015 (Wheaton, Lynch, and Johnson 2016). Figure 1 shows that although nonparent Medicaid eligibility increased between 2013 and 2015 in expansion states, parents and particularly children remained more likely than nonparents to be jointly eligible for Medicaid/CHIP and SNAP or to be eligible for just Medicaid/CHIP. Among these groups and in all years, children were also the least likely to be only eligible for SNAP. These patterns result from the fact that children’s Medicaid/CHIP eligibility thresholds are higher than their SNAP thresholds and higher than adults’ Medicaid eligibility thresholds.

Figures 2, 3, and 4 show that eligibility patterns vary across states. In 2015, joint Medicaid/CHIP and SNAP eligibility ranged from 16.7 percent in North Dakota to 44.7 percent in New Mexico for children (28 percentage points); from 6.4 percent in Wyoming to 30.6 percent in New Mexico for parents (24.2 percentage points); and from 1.3 percent in Wyoming to 25.4 percent in West Virginia for nonparents (22.1 percentage points). Thus in 2015, children's levels of joint eligibility varied more by state than adults', and parents' levels of joint eligibility varied more than nonparents'. In addition, in 2015, state rankings on joint eligibility among children were more strongly correlated with state poverty rates (as shown in table 1) than were state rankings for parents and nonparents (0.78, 0.31, and 0.25, respectively, data not shown). State rankings on joint eligibility among nonparents are almost perfectly predicted by expansion status (i.e., the disparate eligibility thresholds for expansion and nonexpansion states), with all nonexpansion states except Wisconsin having lower levels of joint eligibility compared with expansion states in 2015.

FIGURE 2

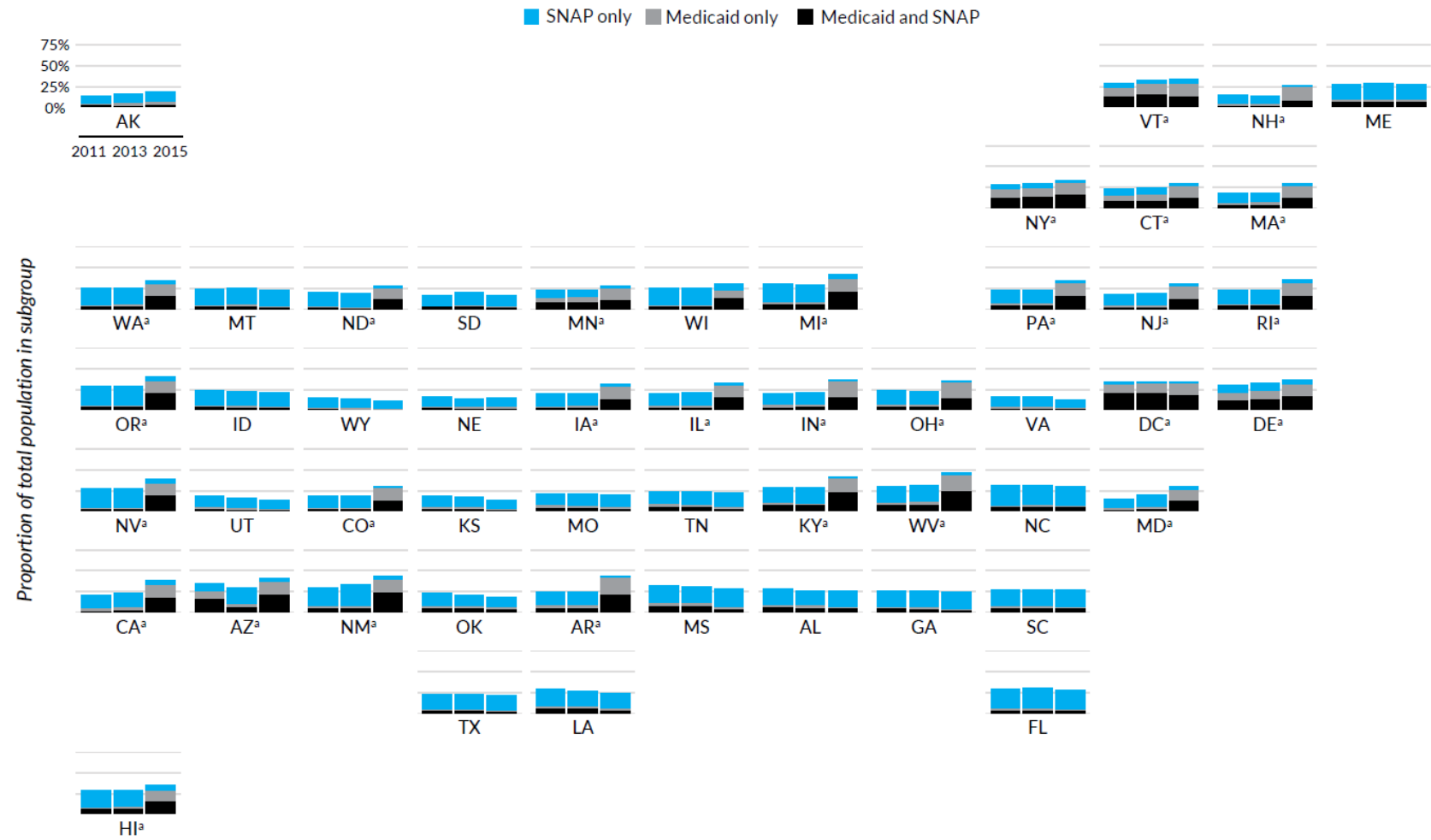
Program Eligibility among Children by State, 2011, 2013, and 2015 (percent)



^a This state expanded Medicaid as of mid-2015.

FIGURE 3

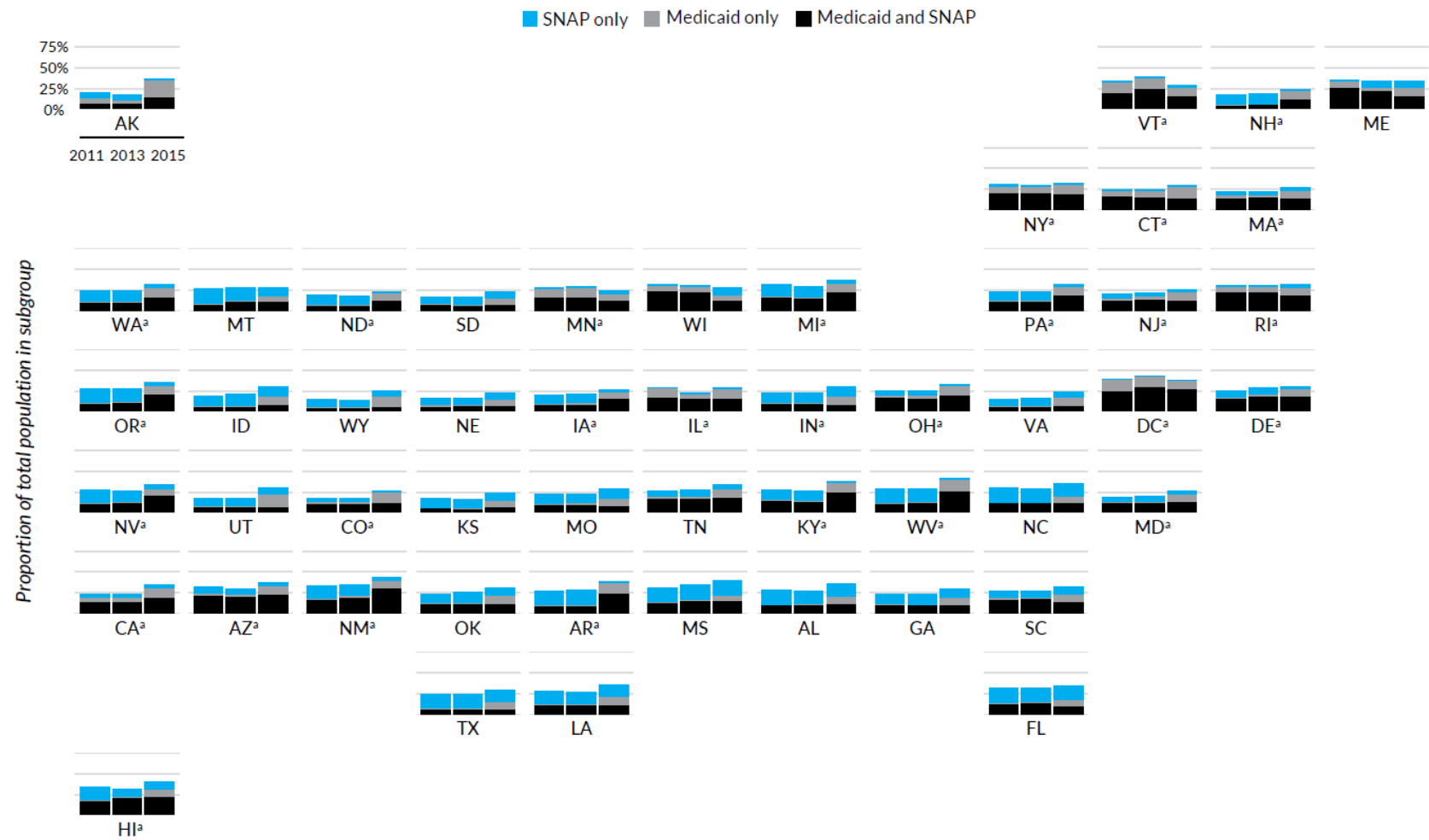
Program Eligibility among Nonparents by State, 2011, 2013, and 2015 (percent)



^a This state expanded Medicaid as of mid-2015.

FIGURE 4

Program Eligibility among Parents by State, 2011, 2013, and 2015 (percent)



^a This state expanded Medicaid as of mid-2015.

Results: Joint Participation

In this section, we report on changes in joint participation rates from 2011, 2013, and 2015 for Idaho, Illinois, and South Carolina. Idaho and South Carolina did not expand Medicaid under the ACA, but Illinois did. The joint participation estimates show the extent to which people eligible for both Medicaid/CHIP and SNAP participate in both programs. To focus the estimates on those in most need of coverage through Medicaid/CHIP, the joint participation estimates exclude people who have health insurance coverage but not through Medicaid/CHIP.

Figures 5 and 6 show our calculated joint participation rates for Idaho, Illinois, and South Carolina in 2011, 2013, and 2015 for children and nonelderly adults. The results show that South Carolina had an increase in joint participation rates for children and adults over these years. For children, the joint participation rate rose from 80 percent to 92 percent to near complete participation. For adults, the joint participation rate rose from 62 percent to 64 percent to 84 percent. Illinois also saw a steady increase in children's joint participation rates from 2011 to 2015; however, after an increase in joint participation for adults from 47 percent in 2011 to 55 percent in 2013, the rate declined to 50 percent in 2015. In Idaho, the joint participation rates for children remained fairly steady, with very high joint participation for children. For adults, joint participation increased between 2011 and 2013 from 78 percent to 98 percent, with a slight decline in 2015 to 94 percent.

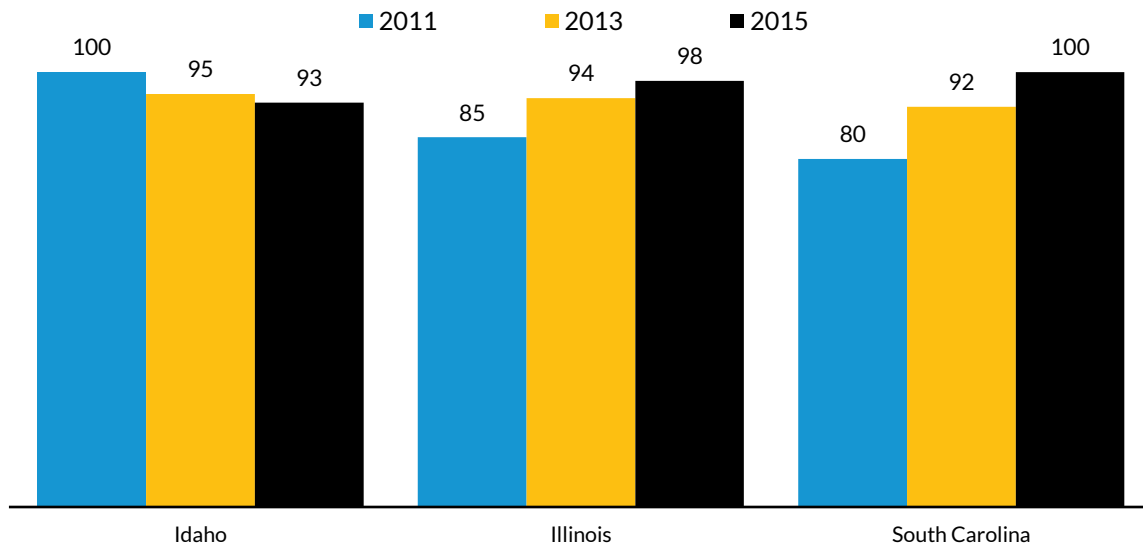
The differences in these patterns could be caused by differences in state efforts to increase joint participation rates, as well as by differences in eligibility rules and changes in eligibility. For example, the ACA increased variation in the composition of the adult joint eligible population over time and across states as the proportion of nonparents in Illinois' adult joint eligible population increased but nonparents remained generally ineligible for Medicaid in Idaho and South Carolina (figures 3 and 4). For all three states, the increases in joint participation from 2011 to 2013 are consistent with the states' efforts to increase access (discussed above and in Loprest, Lynch, and Wheaton 2016). Between 2013 and 2015, joint eligibility for children as a percentage of the child population in these three states declined slightly (figure 2), likely reflecting increases in income as states continued to recover from the recession (DeNavas-Walt and Proctor 2015; Proctor, Semega, and Kollar 2016). With this relatively flat eligibility, South Carolina's continued increase in joint participation for children may reflect the state's continuing use of SNAP data to enroll children in Medicaid/CHIP. Idaho and Illinois did not see large changes for children because they were already at nearly full joint participation in 2013.

For adults, joint eligibility remained steady in Idaho and declined somewhat in South Carolina (neither state expanded Medicaid under the ACA). In Idaho, the number of adults jointly participating remained steady, leading to little change in the joint participation rate. South Carolina's slight decline in the number of adults jointly eligible was accompanied by an increase in the number of adults receiving both benefits, which led to a substantial increase in the joint participation rate. Even without an expansion of Medicaid, the ACA perhaps led Medicaid-eligible individuals who had not previously enrolled or who were unaware of their eligibility to explore health insurance options, resulting in Medicaid enrollment. Kenney and others found an increase in Medicaid participation among parents in nonexpansion states between 2013 and 2015, though the increase was smaller than that observed in expansion states (Kenney et al. 2017).

In Illinois, joint Medicaid/SNAP eligibility for adults increased from 9 percent to 16 percent, largely because eligibility increased among nonparents after the state expanded Medicaid.⁵ This large increase led to a decline in the joint participation rate, despite a 30 percent increase in the absolute number of adults receiving joint benefits in Illinois over this period. The decline could reflect that newly eligible adults may be less likely to know they are eligible to enroll. A decline in participation rates directly after eligibility expansion has been observed in research on Medicaid (Kenney et al. 2016b), with rises occurring over time. However, despite the addition of many people to the eligibility pool, Illinois' 2015 participation rate is higher than it was in 2011.

FIGURE 5

Joint SNAP and Medicaid/CHIP Participation Rates for Children under Age 19, 2011, 2013, 2015 (percent)

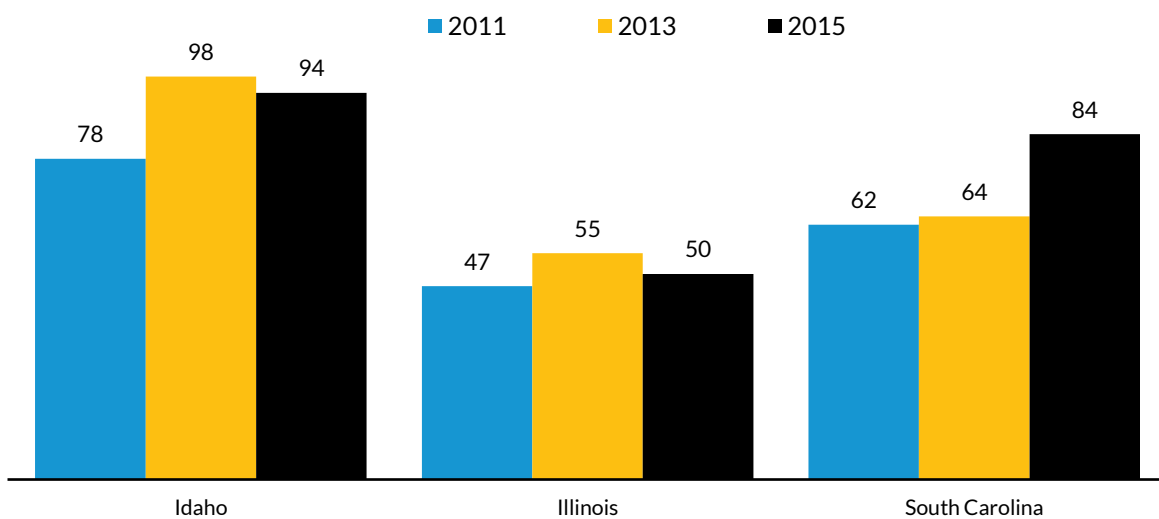


Source: Transfer Income Model, version 3, and Urban Institute Medicaid/CHIP Eligibility Simulation Model and Health Insurance Policy Simulation Model estimates using data from the 2011, 2013, and 2015 American Community Surveys.

Notes: Participation rates are based on state administrative data and Urban Institute eligibility estimates. Estimates include only joint eligibles who are receiving Medicaid/CHIP or uninsured.

FIGURE 6

Joint SNAP and Medicaid Participation Rates for Adults Ages 19–64, 2011, 2013, 2015 (percent)



Source: Transfer Income Model, version 3, and Urban Institute Medicaid/CHIP Eligibility Simulation Model and Health Insurance Policy Simulation Model estimates using data from the 2011, 2013, and 2015 American Community Surveys.

Notes: Participation rates are based on state administrative data and Urban Institute eligibility estimates. Estimates include only joint eligibles who are receiving Medicaid or uninsured.

Conclusions

These findings demonstrate that joint eligibility for Medicaid and SNAP significantly increased for adults in expansion states between 2013 and 2015, yet joint eligibility remained about the same for adults in nonexpansion states and children in expansion and nonexpansion states. The especially large increase in joint Medicaid/SNAP eligibility among nonparents in expansion states suggests that the composition of the joint eligible adult population in those states changed, and there may be an opportunity for outreach efforts to reach new subpopulations. Similarly, the increase in the proportion of adults only eligible for Medicaid suggests that ACA expansion may extend Medicaid eligibility to a population of adults not otherwise eligible for or receiving public assistance. The increase in the proportion jointly eligible suggests that many others may be reached through SNAP if they are already enrolled. Others not enrolled in SNAP may be harder to reach if they are unaware they are eligible or choose not to enroll. But as Kenney and others (2016b) and Blumberg and others (2016) have noted, there may be opportunities to reach eligible people through other programs, such as the earned income tax credit.

In nonexpansion states, opportunities to reach jointly eligible people through one or the other program are more limited but are still an important option, as seen in the case of South Carolina. States can also implement other changes to better integrate the application process and improve access to SNAP and Medicaid/CHIP benefits, such as joint benefit applications, collocating benefit offices, or easier sharing of verification documents across programs.

In expansion states, changes in joint participation rates must be interpreted with care. As observed for Illinois, expansions in eligibility that add many new eligible people may reduce the percentage of eligible people that participate, while at the same time increasing the total number of participants.

The method used in this report for calculating joint participation rates could be extended to other states with the necessary state administrative data. Together with information on individual program participation rates, joint participation data offer states additional ways to measure their progress toward meeting the multiple needs of low-income individuals.

Methodology

Eligibility

Eligibility estimates are prepared using the 2011, 2013, and 2015 ACS data as processed by three models: The Transfer Income Model, version 3 (TRIM3); the Medicaid/CHIP Eligibility Simulation Model; and the Health Insurance Policy Simulation Model (HIPSM). The ACS is a nationwide annual survey that provides estimates of demographic, housing, social, and economic characteristics for all states as well as for smaller geographic areas.⁶ Each year of the ACS includes a public use sample of more than 700,000 children and 1.8 million nonelderly adults ages 19 to 64. Residents of group quarters and institutions are excluded from the analysis, and members of the military and people ages 65 and older are included as appropriate when determining eligibility for other family members but are not shown in the results. We examine children, parents, and nonparents. They are defined, respectively, as a person under age 19; an adult living in a household with their biological child, adoptive child, or stepchild under age 19; and an adult not living with their child under age 19.

SNAP Simulation

SNAP eligibility estimates are generated using TRIM3, a comprehensive microsimulation model of tax and transfer programs developed and maintained by the Urban Institute.⁷ Most households are simulated to file as a single SNAP unit. However, complex households may be split into multiple filing units subject to SNAP regulations that require married couples to file together and children under 22 to file with their parents. In most cases, all household members are considered potentially eligible for SNAP. Exceptions include Supplemental Security Income (SSI) recipients in California, who receive higher SSI benefits in lieu of SNAP, and people ineligible because of their immigration and citizenship status.⁸

In 2015, most states had waivers suspending time limits for able-bodied adults without dependents. Time limits were not modeled in the states with waivers but were modeled for 17 states that had time limits in place for most of the year and did not guarantee employment and training services to all such adults at risk of losing eligibility. Eligibility is modeled on a month-by-month basis to capture how a family's real-world income and eligibility may change during the year. Earnings are allocated to months based on reported weeks of work. Most sources of unearned income are divided evenly across months, but the model captures monthly variations in receipt of child support and unemployment compensation.⁹ Monthly earned income (excluding earnings of children in school) and unearned income are summed

over unit members to calculate gross income. Net income is calculated by subtracting various deductions from gross income. Household assets are inferred based on reported income from interest, dividends, and rent. SNAP units consisting entirely of members receiving SSI, TANF, or other cash assistance are automatically eligible for SNAP. Under federal rules, other households must have gross income below 130 percent of FPL and net income below 100 percent of FPL. Households with an elderly or disabled member are not required to pass the gross income test. Households must also pass liquid asset and vehicle asset tests. Under state broad-based categorical eligibility (BBCE) rules, states can increase the gross income limit to as much as 200 percent of FPL and bypass the net income and assets tests by providing applicants with a TANF-funded service, such as an informational brochure. Eligibility estimates are generated according to each state's BBCE rules or according to federal rules for states without BBCE. TRIM3 also simulates SNAP certification periods and reporting requirements. One- and two-person households that pass their state's BBCE or federal eligibility test are automatically counted as eligible. Households with three or more people are only counted as eligible if the SNAP benefit formula finds them eligible for a non-zero benefit amount. One- and two-person units are guaranteed a minimum benefit if they are found eligible, but this policy does not apply to larger households.¹⁰

Medicaid/CHIP Simulation

We use the Urban Institute Medicaid/CHIP Eligibility Simulation Model to estimate eligibility in 2011 and 2013. For 2015, when ACA rules were in place, we use both the Urban Institute Medicaid/CHIP Eligibility Simulation Model and HIPSM. In this analysis, we rely on a slightly modified version of the Urban Institute Medicaid/CHIP Eligibility Simulation Model designed to make the Medicaid/CHIP modeling more consistent with the TRIM3 modeling of SNAP. The main difference is that the modified version uses the TRIM3 approach to modeling SSI-based eligibility. This mostly affects adults, but there may be minor differences among children. The Medicaid/CHIP Eligibility Simulation Model also uses a slightly different definition of the family unit and adjusts how we impute pre-ACA eligibility compared with the core models used in Urban Institute research. The eligibility estimates are lower than those produced by the core models; we believe they understate Medicaid eligibility (particularly for adults and people with a disability) because the ACS lacks data on pregnancy status and medical expenses and contains limited information on family relationships. For pre-ACA estimates, the Medicaid/CHIP Eligibility Simulation Model uses available information on eligibility guidelines, including income thresholds for the appropriate family size, asset tests, parent/family status, and the amount and extent of income disregards, for each program and state as of June of the calendar year being modeled (Lynch, Haley, and Kenney 2014). The model also considers length of residency in the United States for states where this is a factor.

Because the ACS does not contain sufficient information to determine whether someone is an authorized immigrant, we impute documentation status for noncitizens (Kenney et al. 2016a).

For 2011 and 2013, the following eligibility pathways are modeled, presented in roughly the order in which caseworkers or state eligibility-determination programs check for eligibility:

- Children: Title IV-E/foster care, SSI, Social Security Act section 1931, CHIP, imputed (certain people with reported Medicaid/CHIP who fall into particular Medicaid categorically eligible groups but do not meet all requirements according to information available through the ACS and the rules we have).
- Adults: Aged-out foster children, SSI, Social Security Act section 1931, aged/blind/disabled, Social Security Act section 1115 waivers, Medically Needy (adults categorically eligible for Medically Needy coverage who meet income qualifications for eligibility without deducting medical expenses), relative caretakers (section 1931), imputed (certain people with reported Medicaid eligibility who fall into particular Medicaid categorically eligible groups but do not meet all requirements according to information available through the ACS and the rules we have).

For 2013, we also include as eligible those who qualified for early ACA expansions in Connecticut, the District of Columbia, and Minnesota. (Additional states such as California implemented early ACA expansions, but we only include states with statewide, comprehensive early ACA expansions.) (Heberlein et al. 2013).

For 2015, we use the ACS-HIPSM (Buettgens et al. 2013), which builds on the Medicaid/CHIP Eligibility Simulation Model and applies rules as defined in the ACA. ACS-HIPSM reflects both the increase in eligibility to 138 percent of FPL in participating states and the shift to MAGI-based eligibility-determination procedures for some groups of people. MAGI-based eligibility is determined using MAGI-converted thresholds from the Centers for Medicare and Medicaid Services (CMS 2014). The MAGI conversion and new 5 percent disregard effectively increased Medicaid eligibility levels for some individuals, particularly parents, even in states not participating in the ACA's Medicaid expansion (Kenney et al. 2016b). We model eligibility for the disabled, who are MAGI exempt, the same as we did in 2011 and 2013. Documentation status is imputed with the same methodology used for 2011 and 2013.

We made an extensive effort to collect information on the different rules for each state and to marshal all relevant information in the ACS. Still, eligibility in states with more pathways (or more detailed pathways to eligibility not described above) may be understated in our model. In addition, state determinations of disability-related eligibility use additional criteria beyond the indicators of functional

limitations available from the ACS. The ACS, like other surveys, is not detailed enough to correctly capture important elements of all major eligibility pathways. The three most important pathways for which our ACS data are limited are pregnancy, Medically Needy status, and relative caretaker eligibility. The ACS does not collect data on pregnancy status, the medical expenses used to calculate spend down for Medically Needy program eligibility, or the details needed to consistently identify relative caretakers. To compensate for these limitations, we impute eligibility to certain categorically eligible adults and children with reported Medicaid/CHIP receipt (Lynch et al. 2011). The Medicaid/CHIP simulation model has known limitations, but we have found our core model's flag for simulated eligibility and the ACS's flag for reported Medicaid/CHIP to be good predictors of enrollment (Lynch and Resnick 2013). The 2015 and earlier edit rules are different because eligibility rules and pathways to coverage changed under the ACA; the 2015 rules were developed to be as similar as possible to those used for prior years while incorporating changes to align with policy shifts. For example, the edits incorporate the availability of subsidized marketplace coverage starting in 2014, using lower income thresholds to identify people who likely cannot afford nongroup coverage. Given the policy changes, consistent editing across the 2013 to 2014 period is likely impossible, which could introduce bias in our estimates of Medicaid/CHIP participation over time.

Overlap in Eligibility

The overlap in SNAP and Medicaid/CHIP eligibility is determined by merging the TRIM3 SNAP and Medicaid/CHIP eligibility estimates at the individual level. TRIM3 SNAP estimates are generated at the monthly level, and we assume that people eligible for SNAP in a given month who are also found eligible for Medicaid according to our model's estimate will be eligible for Medicaid/CHIP in any months they are eligible for SNAP.¹¹ Results are presented as average monthly estimates and reflect the number of people eligible for both SNAP and Medicaid/CHIP in the average month of the year.

Joint participation rates for Illinois, Idaho, and South Carolina are calculated by dividing the average monthly number of nonelderly persons receiving both SNAP and Medicaid/CHIP for 2013 and 2015 by the average monthly number found jointly eligible in those years. State joint participation administrative data are only available for the first quarter of 2015, so estimates are based on the monthly average for these months alone. Estimates for 2011 and 2013 are monthly averages over the entire years. The joint participation rate estimates exclude eligible persons not covered by Medicaid/CHIP who have health insurance from another source (such as through an individual's own, spouse's, or parent's employer). Health insurance coverage is based on ACS data, as edited by the Urban Institute (Lynch et al. 2011).

Appendix A. State-Level Estimates for Children

The tables in this and the following appendixes provide the number and percentage of children, parents, and nonparents jointly eligible for SNAP and Medicaid/CHIP, eligible only for Medicaid/CHIP, and eligible only for SNAP by state, health coverage status, and year. These estimates include people who have health insurance through an employer or other source but who would qualify for Medicaid/CHIP; these people are shown separately from those enrolled in Medicaid/CHIP or uninsured.

TABLE A.1

Number of Children Eligible for Medicaid/CHIP and SNAP, Medicaid/CHIP Only, and SNAP Only by Coverage Status and State, 2011

Thousands

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		SNAP only	Total
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured		
Alabama	397	54	171	231	2	1,184
Alaska	27	9	40	16	3	196
Arizona	653	110	122	97	18	1,704
Arkansas	253	17	115	53	3	742
California	2,932	391	1,549	1,083	38	9,753
Colorado	286	46	180	161	5	1,278
Connecticut	202	39	65	96	3	841
Delaware	67	14	12	12	2	216
DC	44	4	14	10	0	109
Florida	1,576	270	298	203	52	4,218
Georgia	830	123	348	314	12	2,622
Hawaii	83	59	20	66	1	318
Idaho	103	21	46	45	4	449
Illinois	876	121	519	558	8	3,254
Indiana	447	63	245	279	6	1,677
Iowa	193	37	102	260	0	753
Kansas	173	31	99	128	3	757
Kentucky	360	41	118	94	6	1,073
Louisiana	424	38	170	107	6	1,180
Maine	93	12	20	12	3	281
Maryland	344	76	142	178	4	1,412
Massachusetts	333	81	143	163	7	1,471
Michigan	810	165	140	126	27	2,399
Minnesota	294	66	133	201	4	1,336
Mississippi	303	30	116	74	3	787
Missouri	389	62	213	308	4	1,477
Montana	61	14	35	39	1	230
Nebraska	97	13	62	54	1	478

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		SNAP only	Total
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured		
Nevada	211	75	41	41	10	695
New Hampshire	59	12	30	42	1	293
New Jersey	508	116	192	336	7	2,140
New Mexico	240	27	67	49	1	547
New York	1,320	209	683	937	7	4,470
North Carolina	887	173	153	117	20	2,408
North Dakota	27	7	13	7	4	158
Ohio	836	95	287	272	16	2,819
Oklahoma	300	28	148	89	3	988
Oregon	301	63	103	144	3	898
Pennsylvania	810	130	347	506	9	2,889
Rhode Island	66	15	20	23	1	229
South Carolina	390	47	130	106	4	1,134
South Dakota	45	5	26	16	1	212
Tennessee	492	59	221	226	3	1,558
Texas	2,726	343	602	358	51	7,305
Utah	170	39	86	122	5	919
Vermont	34	2	24	20	0	131
Virginia	378	70	173	155	8	1,943
Washington	499	88	198	235	6	1,651
West Virginia	135	11	53	60	1	403
Wisconsin	433	82	113	227	4	1,392
Wyoming	23	4	18	18	1	140
US total	23,534	3,709	8,961	9,073	393	77,514

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2011 American Community Survey.

Notes: CHIP = Children's Health Insurance Program; SNAP = Supplemental Nutrition Assistance Program.

TABLE A.2

Percentage of Children Eligible for Medicaid/CHIP and SNAP, Medicaid/CHIP Only, and SNAP Only by Coverage Status and State, 2011

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		SNAP only
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	
Alabama	34	5	14	19	0
Alaska	14	5	20	8	1
Arizona	38	6	7	6	1
Arkansas	34	2	15	7	0
California	30	4	16	11	0
Colorado	22	4	14	13	0
Connecticut	24	5	8	11	0
Delaware	31	7	5	5	1
DC	40	4	13	10	0
Florida	37	6	7	5	1
Georgia	32	5	13	12	0

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		SNAP only
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	
Hawaii	26	19	6	21	0
Idaho	23	5	10	10	1
Illinois	27	4	16	17	0
Indiana	27	4	15	17	0
Iowa	26	5	13	34	0
Kansas	23	4	13	17	0
Kentucky	34	4	11	9	1
Louisiana	36	3	14	9	0
Maine	33	4	7	4	1
Maryland	24	5	10	13	0
Massachusetts	23	5	10	11	0
Michigan	34	7	6	5	1
Minnesota	22	5	10	15	0
Mississippi	38	4	15	9	0
Missouri	26	4	14	21	0
Montana	27	6	15	17	0
Nebraska	20	3	13	11	0
Nevada	30	11	6	6	1
New Hampshire	20	4	10	14	0
New Jersey	24	5	9	16	0
New Mexico	44	5	12	9	0
New York	30	5	15	21	0
North Carolina	37	7	6	5	1
North Dakota	17	5	8	4	2
Ohio	30	3	10	10	1
Oklahoma	30	3	15	9	0
Oregon	34	7	11	16	0
Pennsylvania	28	4	12	18	0
Rhode Island	29	7	9	10	1
South Carolina	34	4	11	9	0
South Dakota	21	3	12	8	1
Tennessee	32	4	14	15	0
Texas	37	5	8	5	1
Utah	18	4	9	13	1
Vermont	26	2	18	16	0
Virginia	19	4	9	8	0
Washington	30	5	12	14	0
West Virginia	34	3	13	15	0
Wisconsin	31	6	8	16	0
Wyoming	16	3	13	13	1
US total	30	5	12	12	1

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2011 American Community Survey.

Notes: CHIP = Children’s Health Insurance Program; SNAP = Supplemental Nutrition Assistance Program.

TABLE A.3

Number of Children Eligible for Medicaid/CHIP and SNAP, Medicaid/CHIP Only, and SNAP Only by Coverage Status and State, 2013

Thousands

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		SNAP only	Total
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured		
Alabama	400	51	188	229	1	1,179
Alaska	26	7	30	15	3	196
Arizona	608	110	146	88	12	1,692
Arkansas	269	23	112	55	3	742
California	2,961	372	1,492	1,053	37	9,626
Colorado	282	45	187	156	6	1,302
Connecticut	198	26	94	94	3	825
Delaware	68	12	16	11	1	214
DC	49	3	13	8	0	114
Florida	1,584	255	351	213	44	4,240
Georgia	857	113	357	293	9	2,619
Hawaii	89	47	20	52	1	319
Idaho	111	20	52	45	6	447
Illinois	865	93	520	506	5	3,163
Indiana	457	64	236	282	4	1,664
Iowa	194	31	124	240	0	757
Kansas	152	32	116	138	1	753
Kentucky	328	37	126	96	4	1,056
Louisiana	402	41	187	114	4	1,166
Maine	86	13	23	12	3	270
Maryland	343	73	152	178	4	1,408
Massachusetts	331	71	144	161	6	1,454
Michigan	796	127	165	145	19	2,355
Minnesota	287	70	129	211	4	1,335
Mississippi	318	33	103	64	3	773
Missouri	401	55	217	307	2	1,454
Montana	71	10	40	26	1	236
Nebraska	105	12	59	57	1	483
Nevada	216	73	39	52	10	695
New Hampshire	56	16	34	47	1	284
New Jersey	519	116	211	321	6	2,122
New Mexico	235	22	76	49	2	534
New York	1,330	193	683	931	6	4,420
North Carolina	896	144	175	117	18	2,394
North Dakota	26	9	10	9	3	166
Ohio	792	97	276	267	11	2,762
Oklahoma	317	37	153	91	3	992
Oregon	290	61	96	159	2	898
Pennsylvania	787	145	360	513	4	2,834
Rhode Island	66	12	20	24	1	222
South Carolina	393	36	140	104	3	1,128
South Dakota	48	5	33	17	1	212
Tennessee	508	60	229	212	4	1,563
Texas	2,677	328	640	409	44	7,375
Utah	158	47	96	105	5	936

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		SNAP only	Total
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured		
Vermont	42	3	20	18	1	130
Virginia	395	78	179	168	9	1,955
Washington	482	98	218	253	5	1,662
West Virginia	131	18	61	79	1	398
Wisconsin	395	82	123	225	5	1,370
Wyoming	21	2	19	14	1	144
US total	23,417	3,529	9,293	9,030	336	77,040

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2013 American Community Survey.

Notes: CHIP = Children's Health Insurance Program; SNAP = Supplemental Nutrition Assistance Program.

TABLE A.4

Percentage of Children Eligible for Medicaid/CHIP and SNAP, Medicaid/CHIP Only, and SNAP Only by Coverage Status and State, 2013

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		SNAP only
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	
Alabama	34	4	16	19	0
Alaska	13	4	15	8	2
Arizona	36	6	9	5	1
Arkansas	36	3	15	7	0
California	31	4	16	11	0
Colorado	22	3	14	12	0
Connecticut	24	3	11	11	0
Delaware	32	6	7	5	1
DC	42	3	12	7	0
Florida	37	6	8	5	1
Georgia	33	4	14	11	0
Hawaii	28	15	6	16	0
Idaho	25	5	12	10	1
Illinois	27	3	16	16	0
Indiana	27	4	14	17	0
Iowa	26	4	16	32	0
Kansas	20	4	15	18	0
Kentucky	31	4	12	9	0
Louisiana	34	4	16	10	0
Maine	32	5	8	4	1
Maryland	24	5	11	13	0
Massachusetts	23	5	10	11	0
Michigan	34	5	7	6	1
Minnesota	21	5	10	16	0
Mississippi	41	4	13	8	0
Missouri	28	4	15	21	0
Montana	30	4	17	11	1
Nebraska	22	2	12	12	0

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	SNAP only
Nevada	31	10	6	7	1
New Hampshire	20	6	12	16	0
New Jersey	24	5	10	15	0
New Mexico	44	4	14	9	0
New York	30	4	15	21	0
North Carolina	37	6	7	5	1
North Dakota	16	5	6	5	2
Ohio	29	4	10	10	0
Oklahoma	32	4	15	9	0
Oregon	32	7	11	18	0
Pennsylvania	28	5	13	18	0
Rhode Island	30	5	9	11	0
South Carolina	35	3	12	9	0
South Dakota	22	2	16	8	0
Tennessee	33	4	15	14	0
Texas	36	4	9	6	1
Utah	17	5	10	11	1
Vermont	33	2	16	14	0
Virginia	20	4	9	9	0
Washington	29	6	13	15	0
West Virginia	33	4	15	20	0
Wisconsin	29	6	9	16	0
Wyoming	15	1	13	10	1
US total	30	5	12	12	0

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2013 American Community Survey.

Notes: CHIP = Children's Health Insurance Program; SNAP = Supplemental Nutrition Assistance Program.

TABLE A.5

Number of Children Eligible for Medicaid/CHIP and SNAP, Medicaid/CHIP Only, and SNAP Only by Coverage Status and State, 2015

Thousands

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only			Total
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	SNAP only	
Alabama	389	51	189	195	4	1,164
Alaska	34	9	41	22	2	194
Arizona	517	71	63	14	95	1,697
Arkansas	248	24	119	43	11	735
California	3,226	458	1,159	719	132	9,552
Colorado	274	33	203	139	14	1,312
Connecticut	174	23	103	82	7	804
Delaware	61	8	16	12	4	214
DC	48	4	12	8	1	121

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		SNAP only	Total
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured		
Florida	1,524	200	392	228	109	4,318
Georgia	835	106	387	267	24	2,636
Hawaii	90	50	23	56	5	322
Idaho	101	12	62	32	8	451
Illinois	821	87	495	474	15	3,084
Indiana	453	56	221	218	16	1,653
Iowa	186	30	129	188	4	755
Kansas	167	27	92	93	7	749
Kentucky	328	41	130	86	10	1,057
Louisiana	402	48	170	99	14	1,167
Maine	63	10	27	14	8	265
Maryland	330	59	165	164	15	1,404
Massachusetts	319	48	160	127	12	1,445
Michigan	720	99	192	136	40	2,311
Minnesota	280	52	159	150	12	1,337
Mississippi	305	25	102	43	10	768
Missouri	364	57	252	259	8	1,451
Montana	59	8	34	27	3	233
Nebraska	98	19	56	43	5	490
Nevada	224	51	45	37	23	699
New Hampshire	46	9	39	31	2	278
New Jersey	495	83	249	292	13	2,094
New Mexico	218	17	96	55	4	525
New York	1,303	167	783	803	18	4,374
North Carolina	833	109	235	128	36	2,404
North Dakota	25	5	11	3	6	181
Ohio	772	76	294	194	30	2,745
Oklahoma	293	30	141	74	12	1,011
Oregon	296	30	128	119	7	900
Pennsylvania	768	127	386	416	15	2,805
Rhode Island	59	12	23	17	4	221
South Carolina	347	38	151	84	16	1,136
South Dakota	44	6	25	14	4	219
Tennessee	474	73	227	195	12	1,566
Texas	2,522	306	684	368	129	7,559
Utah	148	46	94	116	12	954
Vermont	27	2	24	13	1	122
Virginia	382	61	171	125	28	1,957
Washington	468	64	266	220	14	1,688
West Virginia	133	15	65	67	2	395
Wisconsin	347	66	138	218	11	1,348
Wyoming	21	4	20	9	2	148
US total	22,660	3,111	9,448	7,536	992	77,019

Sources: Transfer Income Model, version 3, Urban Institute Medicaid/CHIP Eligibility Simulation Model, and Health Insurance Policy Simulation Model estimates using data from the 2015 American Community Survey.

Notes: CHIP = Children's Health Insurance Program; SNAP = Supplemental Nutrition Assistance Program.

TABLE A.6

Percentage of Children Eligible for Medicaid/CHIP and SNAP, Medicaid/CHIP Only, and SNAP Only by Coverage Status and State, 2015

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		SNAP only
	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	Medicaid/CHIP enrolled or uninsured	Not on Medicaid/CHIP, insured	
Alabama	33	4	16	17	0
Alaska	18	5	21	11	1
Arizona	30	4	4	1	6
Arkansas	34	3	16	6	1
California	34	5	12	8	1
Colorado	21	3	15	11	1
Connecticut	22	3	13	10	1
Delaware	29	4	7	6	2
DC	40	3	10	7	1
Florida	35	5	9	5	3
Georgia	32	4	15	10	1
Hawaii	28	15	7	17	1
Idaho	22	3	14	7	2
Illinois	27	3	16	15	0
Indiana	27	3	13	13	1
Iowa	25	4	17	25	0
Kansas	22	4	12	12	1
Kentucky	31	4	12	8	1
Louisiana	34	4	15	8	1
Maine	24	4	10	5	3
Maryland	23	4	12	12	1
Massachusetts	22	3	11	9	1
Michigan	31	4	8	6	2
Minnesota	21	4	12	11	1
Mississippi	40	3	13	6	1
Missouri	25	4	17	18	1
Montana	25	3	14	11	1
Nebraska	20	4	11	9	1
Nevada	32	7	6	5	3
New Hampshire	17	3	14	11	1
New Jersey	24	4	12	14	1
New Mexico	41	3	18	10	1
New York	30	4	18	18	0
North Carolina	35	5	10	5	2
North Dakota	14	3	6	2	3
Ohio	28	3	11	7	1
Oklahoma	29	3	14	7	1
Oregon	33	3	14	13	1
Pennsylvania	27	5	14	15	1
Rhode Island	27	5	10	8	2
South Carolina	31	3	13	7	1
South Dakota	20	3	12	6	2
Tennessee	30	5	14	12	1
Texas	33	4	9	5	2
Utah	16	5	10	12	1
Vermont	22	2	20	10	1
Virginia	20	3	9	6	1
Washington	28	4	16	13	1

State	Medicaid/CHIP and SNAP		Medicaid/CHIP Only		
	Medicaid/ CHIP enrolled or uninsured	Not on Medicaid/ CHIP, insured	Medicaid/ CHIP enrolled or uninsured	Not on Medicaid/ CHIP, insured	SNAP only
West Virginia	34	4	17	17	0
Wisconsin	26	5	10	16	1
Wyoming	14	3	13	6	1
US total	29	4	12	10	1

Sources: Transfer Income Model, version 3, Urban Institute Medicaid/CHIP Eligibility Simulation Model, and Health Insurance Policy Simulation Model estimates using data from the 2015 American Community Survey.

Notes: CHIP = Children's Health Insurance Program; SNAP = Supplemental Nutrition Assistance Program.

Appendix B. State-Level Estimates for Parents

TABLE B.1

Number of Parents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only by Coverage Status and State, 2011

Thousands

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Alabama	90	11	8	1	161	966
Alaska	10	1	8	0	8	142
Arizona	245	34	23	4	104	1,254
Arkansas	53	3	9	0	101	601
California	1,001	187	342	31	270	7,833
Colorado	101	24	26	4	34	1,082
Connecticut	100	30	32	15	7	735
Delaware	25	5	2	0	13	180
DC	17	2	7	3	0	74
Florida	407	40	29	4	567	3,312
Georgia	188	30	21	2	243	2,039
Hawaii	30	14	3	1	41	255
Idaho	21	2	3	0	43	347
Illinois	368	95	145	156	21	2,630
Indiana	126	10	24	2	138	1,338
Iowa	52	7	6	0	61	627
Kansas	32	5	5	0	63	611
Kentucky	113	15	11	2	109	882
Louisiana	100	7	11	0	135	901
Maine	56	11	11	6	5	250
Maryland	116	24	13	4	66	1,163
Massachusetts	173	30	35	5	61	1,325
Michigan	298	22	22	2	276	1,943
Minnesota	137	52	51	73	9	1,137
Mississippi	71	5	9	1	94	584
Missouri	109	9	17	2	137	1,225
Montana	15	1	2	0	33	187
Nebraska	25	3	6	0	33	392
Nevada	52	12	5	1	78	544
New Hampshire	13	1	2	0	30	271
New Jersey	204	47	52	5	80	1,895
New Mexico	58	8	6	1	59	388
New York	632	147	258	59	59	3,775
North Carolina	211	27	13	2	326	1,923
North Dakota	10	0	2	0	16	141
Ohio	363	38	48	5	114	2,271
Oklahoma	79	12	13	1	82	775
Oregon	77	4	7	0	124	751

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Pennsylvania	262	23	27	3	247	2,459
Rhode Island	32	12	8	4	2	196
South Carolina	135	26	14	2	68	898
South Dakota	13	1	1	0	13	162
Tennessee	191	23	30	4	87	1,247
Texas	375	39	37	5	946	5,630
Utah	44	7	6	0	60	666
Vermont	20	4	10	4	1	118
Virginia	96	14	15	2	123	1,650
Washington	129	18	15	2	180	1,412
West Virginia	36	2	4	0	53	329
Wisconsin	212	67	38	35	13	1,151
Wyoming	5	1	1	0	10	111
US total	7,326	1,212	1,494	457	5,603	62,778

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2011 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

TABLE B.2

Percentage of Parents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only by Coverage Status and State, 2011

State	Medicaid and SNAP		Medicaid Only		SNAP only
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	
Alabama	9	1	1	0	17
Alaska	7	1	6	0	6
Arizona	20	3	2	0	8
Arkansas	9	1	1	0	17
California	13	2	4	0	3
Colorado	9	2	2	0	3
Connecticut	14	4	4	2	1
Delaware	14	3	1	0	7
DC	23	3	10	3	1
Florida	12	1	1	0	17
Georgia	9	1	1	0	12
Hawaii	12	5	1	0	16
Idaho	6	1	1	0	12
Illinois	14	4	6	6	1
Indiana	9	1	2	0	10
Iowa	8	1	1	0	10
Kansas	5	1	1	0	10
Kentucky	13	2	1	0	12
Louisiana	11	1	1	0	15
Maine	23	4	5	2	2
Maryland	10	2	1	0	6
Massachusetts	13	2	3	0	5

State	Medicaid and SNAP		Medicaid Only		SNAP only
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	
Michigan	15	1	1	0	14
Minnesota	12	5	5	6	1
Mississippi	12	1	1	0	16
Missouri	9	1	1	0	11
Montana	8	0	1	0	17
Nebraska	6	1	1	0	8
Nevada	10	2	1	0	14
New Hampshire	5	1	1	0	11
New Jersey	11	3	3	0	4
New Mexico	15	2	1	0	15
New York	17	4	7	2	2
North Carolina	11	1	1	0	17
North Dakota	7	0	1	0	11
Ohio	16	2	2	0	5
Oklahoma	10	2	2	0	11
Oregon	10	0	1	0	16
Pennsylvania	11	1	1	0	10
Rhode Island	17	6	4	2	1
South Carolina	15	3	2	0	8
South Dakota	8	0	1	0	8
Tennessee	15	2	2	0	7
Texas	7	1	1	0	17
Utah	7	1	1	0	9
Vermont	17	3	9	4	1
Virginia	6	1	1	0	7
Washington	9	1	1	0	13
West Virginia	11	1	1	0	16
Wisconsin	18	6	3	3	1
Wyoming	4	1	1	0	9
US total	12	2	2	1	9

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2011 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

TABLE B.3

**Number of Parents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only
by Coverage Status and State, 2013**

Thousands

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Alabama	92	13	11	1	141	933
Alaska	10	1	6	0	9	143
Arizona	226	37	24	2	92	1,245
Arkansas	53	6	7	0	99	579
California	1,000	182	320	22	282	7,698
Colorado	106	21	26	3	35	1,083
Connecticut	92	26	40	14	6	715
Delaware	26	5	5	0	12	165
DC	24	3	8	2	0	88
Florida	431	46	37	5	538	3,304
Georgia	186	26	19	3	251	2,006
Hawaii	32	19	3	1	24	241
Idaho	21	3	3	0	48	355
Illinois	357	75	104	37	31	2,590
Indiana	120	11	22	2	147	1,327
Iowa	57	5	9	1	65	639
Kansas	31	4	4	0	64	616
Kentucky	104	14	8	1	102	866
Louisiana	93	8	14	1	118	875
Maine	46	6	8	0	15	224
Maryland	121	30	16	5	64	1,183
Massachusetts	174	34	36	5	45	1,299
Michigan	282	23	25	3	238	1,897
Minnesota	135	50	50	81	12	1,113
Mississippi	80	8	9	1	98	563
Missouri	113	12	15	2	130	1,178
Montana	21	2	2	0	28	189
Nebraska	28	4	4	0	30	392
Nevada	57	13	3	1	68	539
New Hampshire	14	1	1	0	32	268
New Jersey	210	67	53	8	62	1,871
New Mexico	70	8	8	1	49	387
New York	620	144	259	60	46	3,707
North Carolina	203	26	16	2	308	1,887
North Dakota	10	0	1	-	15	147
Ohio	349	36	56	5	122	2,231
Oklahoma	83	11	12	0	89	768
Oregon	84	6	6	0	116	759
Pennsylvania	256	31	26	4	232	2,359
Rhode Island	33	10	9	5	2	191
South Carolina	137	23	14	3	63	878
South Dakota	11	1	3	0	15	169
Tennessee	189	28	31	4	92	1,252
Texas	377	45	38	6	902	5,694
Utah	42	7	8	1	63	700
Vermont	22	6	10	4	1	111

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Virginia	95	16	16	2	142	1,625
Washington	129	23	14	2	173	1,416
West Virginia	40	3	3	0	48	329
Wisconsin	193	68	38	43	9	1,139
Wyoming	5	1	2	-	9	119
US total	7,292	1,248	1,458	343	5,385	62,053

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2013 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

TABLE B.4

Percentage of Parents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only by Coverage Status and State, 2013

State	Medicaid and SNAP		Medicaid Only		SNAP only
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	
Alabama	10	1	1	0	15
Alaska	7	1	4	0	6
Arizona	18	3	2	0	7
Arkansas	9	1	1	0	17
California	13	2	4	0	4
Colorado	10	2	2	0	3
Connecticut	13	4	6	2	1
Delaware	16	3	3	0	7
DC	27	4	9	2	0
Florida	13	1	1	0	16
Georgia	9	1	1	0	13
Hawaii	13	8	1	0	10
Idaho	6	1	1	0	14
Illinois	14	3	4	1	1
Indiana	9	1	2	0	11
Iowa	9	1	1	0	10
Kansas	5	1	1	0	10
Kentucky	12	2	1	0	12
Louisiana	11	1	2	0	13
Maine	21	3	4	0	7
Maryland	10	3	1	0	5
Massachusetts	13	3	3	0	4
Michigan	15	1	1	0	13
Minnesota	12	5	4	7	1
Mississippi	14	1	2	0	17
Missouri	10	1	1	0	11
Montana	11	1	1	0	15
Nebraska	7	1	1	0	8
Nevada	11	2	1	0	13
New Hampshire	5	0	0	0	12

State	Medicaid and SNAP		Medicaid Only		SNAP only
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	
New Jersey	11	4	3	0	3
New Mexico	18	2	2	0	13
New York	17	4	7	2	1
North Carolina	11	1	1	0	16
North Dakota	7	0	1	0	10
Ohio	16	2	2	0	5
Oklahoma	11	1	2	0	12
Oregon	11	1	1	0	15
Pennsylvania	11	1	1	0	10
Rhode Island	17	5	5	3	1
South Carolina	16	3	2	0	7
South Dakota	6	0	2	0	9
Tennessee	15	2	2	0	7
Texas	7	1	1	0	16
Utah	6	1	1	0	9
Vermont	20	5	9	3	1
Virginia	6	1	1	0	9
Washington	9	2	1	0	12
West Virginia	12	1	1	0	15
Wisconsin	17	6	3	4	1
Wyoming	4	1	1	0	8
US total	12	2	2	1	9

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2013 American Community Survey.

Notes: SNAP = Supplemental Nutrition Assistance Program.

TABLE B.5

Number of Parents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only by Coverage Status and State, 2015

Thousands

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Alabama	92	22	22	61	127	907
Alaska	15	6	15	14	2	143
Arizona	232	67	52	79	39	1,258
Arkansas	107	37	34	39	6	584
California	1,251	325	374	480	252	7,740
Colorado	115	33	51	87	13	1,121
Connecticut	81	21	38	57	6	683
Delaware	27	7	5	10	5	177
DC	21	4	5	4	1	90
Florida	296	67	89	147	592	3,391
Georgia	176	48	55	121	221	2,041
Hawaii	32	24	3	16	22	239

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Idaho	23	7	14	22	36	327
Illinois	333	84	114	183	28	2,532
Indiana	99	21	37	88	145	1,300
Iowa	76	28	19	24	16	607
Kansas	34	11	11	35	50	585
Kentucky	166	44	43	60	9	847
Louisiana	90	17	29	47	122	854
Maine	31	6	9	13	17	224
Maryland	119	52	30	71	35	1,186
Massachusetts	147	35	45	78	39	1,265
Michigan	340	91	63	118	67	1,849
Minnesota	122	31	30	57	33	1,133
Mississippi	74	14	15	25	97	571
Missouri	81	21	32	69	137	1,183
Montana	17	4	4	8	19	182
Nebraska	22	8	11	18	31	398
Nevada	80	31	15	28	21	523
New Hampshire	21	9	7	18	5	248
New Jersey	198	57	52	132	50	1,854
New Mexico	92	21	14	21	12	369
New York	565	133	176	220	77	3,576
North Carolina	193	45	52	107	276	1,932
North Dakota	15	5	5	9	2	157
Ohio	380	82	86	163	24	2,218
Oklahoma	79	20	29	48	70	780
Oregon	128	28	30	49	24	732
Pennsylvania	333	120	80	155	55	2,339
Rhode Island	30	9	7	9	8	194
South Carolina	108	25	25	51	69	873
South Dakota	14	1	3	8	14	172
Tennessee	183	54	44	83	51	1,245
Texas	342	96	157	323	811	5,834
Utah	37	15	29	75	50	691
Vermont	15	2	4	5	3	102
Virginia	102	30	31	127	109	1,619
Washington	179	59	57	104	45	1,413
West Virginia	73	12	16	27	4	321
Wisconsin	115	32	21	57	87	1,130
Wyoming	6	2	5	10	8	122
US total	7,506	2,024	2,194	3,865	4,046	61,860

Sources: Transfer Income Model, version 3, Urban Institute Medicaid/CHIP Eligibility Simulation Model, and Health Insurance Policy Simulation Model estimates using data from the 2015 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

TABLE B.6

Percentage of Parents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only
by Coverage Status and State, 2015

State	Medicaid and SNAP		Medicaid Only		SNAP only
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	
Alabama	10	2	2	7	14
Alaska	11	5	11	9	2
Arizona	18	5	4	6	3
Arkansas	18	6	6	7	1
California	16	4	5	6	3
Colorado	10	3	5	8	1
Connecticut	12	3	6	8	1
Delaware	15	4	3	6	3
DC	23	4	5	5	1
Florida	9	2	3	4	17
Georgia	9	2	3	6	11
Hawaii	13	10	1	7	9
Idaho	7	2	4	7	11
Illinois	13	3	4	7	1
Indiana	8	2	3	7	11
Iowa	13	5	3	4	3
Kansas	6	2	2	6	9
Kentucky	20	5	5	7	1
Louisiana	11	2	3	6	14
Maine	14	3	4	6	7
Maryland	10	4	2	6	3
Massachusetts	12	3	4	6	3
Michigan	18	5	3	6	4
Minnesota	11	3	3	5	3
Mississippi	13	2	3	4	17
Missouri	7	2	3	6	12
Montana	9	2	2	5	10
Nebraska	5	2	3	5	8
Nevada	15	6	3	5	4
New Hampshire	8	4	3	7	2
New Jersey	11	3	3	7	3
New Mexico	25	6	4	6	3
New York	16	4	5	6	2
North Carolina	10	2	3	6	14
North Dakota	10	3	3	6	2
Ohio	17	4	4	7	1
Oklahoma	10	3	4	6	9
Oregon	17	4	4	7	3
Pennsylvania	14	5	3	7	2
Rhode Island	16	4	4	4	4
South Carolina	12	3	3	6	8
South Dakota	8	1	2	4	8
Tennessee	15	4	4	7	4
Texas	6	2	3	6	14
Utah	5	2	4	11	7
Vermont	15	2	4	5	3
Virginia	6	2	2	8	7
Washington	13	4	4	7	3

State	Medicaid and SNAP		Medicaid Only		
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	SNAP only
West Virginia	23	4	5	8	1
Wisconsin	10	3	2	5	8
Wyoming	5	2	4	8	7
US total	12	3	4	6	7

Sources: Transfer Income Model, version 3, Urban Institute Medicaid/CHIP Eligibility Simulation Model, and Health Insurance Policy Simulation Model estimates using data from the 2015 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

Appendix C. State-Level Estimates for Nonparents

TABLE C.1

Number of Nonparents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only by Coverage Status and State, 2011

Thousands

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Alabama	124	14	39	4	365	1,873
Alaska	10	1	5	0	25	292
Arizona	348	87	128	67	229	2,465
Arkansas	57	8	35	2	170	1,100
California	328	53	568	34	2,141	14,925
Colorado	60	7	29	5	278	2,064
Connecticut	103	27	55	42	99	1,391
Delaware	33	15	20	12	28	354
DC	47	22	18	17	8	326
Florida	342	38	121	15	1,802	7,780
Georgia	197	16	65	9	717	3,820
Hawaii	37	2	11	1	103	534
Idaho	25	3	11	0	94	560
Illinois	204	21	89	11	744	5,096
Indiana	105	8	66	5	339	2,493
Iowa	45	3	19	2	162	1,150
Kansas	39	5	18	4	133	1,047
Kentucky	139	6	40	3	306	1,711
Louisiana	121	10	36	3	373	1,806
Maine	41	2	9	1	99	550
Maryland	70	5	47	5	239	2,394
Massachusetts	124	9	72	5	283	2,670
Michigan	252	25	77	12	877	3,959
Minnesota	144	44	62	51	184	2,063
Mississippi	90	5	40	2	228	1,137
Missouri	117	11	64	6	306	2,309
Montana	14	1	7	0	79	406
Nebraska	21	3	11	1	74	679
Nevada	36	4	15	2	243	1,105
New Hampshire	16	1	9	1	51	537
New Jersey	100	13	52	10	447	3,421
New Mexico	44	5	20	1	178	820
New York	893	250	448	303	428	8,079
North Carolina	202	28	58	10	877	3,779
North Dakota	7	1	2	1	44	264
Ohio	254	11	83	8	723	4,564
Oklahoma	77	10	37	5	207	1,407
Oregon	70	6	21	3	358	1,594

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Pennsylvania	269	22	104	11	803	5,054
Rhode Island	22	3	7	1	71	437
South Carolina	111	11	36	6	352	1,853
South Dakota	10	1	3	0	36	302
Tennessee	151	13	76	7	364	2,581
Texas	371	39	157	18	1,659	9,476
Utah	30	4	17	3	126	926
Vermont	27	9	15	10	13	261
Virginia	91	10	59	7	352	3,211
Washington	113	9	46	5	523	2,749
West Virginia	62	4	21	1	150	780
Wisconsin	83	10	34	4	443	2,255
Wyoming	6	1	3	0	24	231
US total	6,285	915	3,086	738	18,957	122,641

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2011 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

TABLE C.2

Percentage of Nonparents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only by Coverage Status and State, 2011

State	Medicaid and SNAP		Medicaid Only		SNAP only
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	
Alabama	7	1	2	0	19
Alaska	3	0	2	0	9
Arizona	14	4	5	3	9
Arkansas	5	1	3	0	15
California	2	0	4	0	14
Colorado	3	0	1	0	13
Connecticut	7	2	4	3	7
Delaware	9	4	6	3	8
DC	14	7	5	5	2
Florida	4	0	2	0	23
Georgia	5	0	2	0	19
Hawaii	7	0	2	0	19
Idaho	4	0	2	0	17
Illinois	4	0	2	0	15
Indiana	4	0	3	0	14
Iowa	4	0	2	0	14
Kansas	4	0	2	0	13
Kentucky	8	0	2	0	18
Louisiana	7	1	2	0	21
Maine	7	0	2	0	18
Maryland	3	0	2	0	10
Massachusetts	5	0	3	0	11

State	Medicaid and SNAP		Medicaid Only		SNAP only
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	
Michigan	6	1	2	0	22
Minnesota	7	2	3	2	9
Mississippi	8	0	4	0	20
Missouri	5	0	3	0	13
Montana	3	0	2	0	20
Nebraska	3	0	2	0	11
Nevada	3	0	1	0	22
New Hampshire	3	0	2	0	10
New Jersey	3	0	2	0	13
New Mexico	5	1	2	0	22
New York	11	3	6	4	5
North Carolina	5	1	2	0	23
North Dakota	3	0	1	0	17
Ohio	6	0	2	0	16
Oklahoma	5	1	3	0	15
Oregon	4	0	1	0	22
Pennsylvania	5	0	2	0	16
Rhode Island	5	1	2	0	16
South Carolina	6	1	2	0	19
South Dakota	3	0	1	0	12
Tennessee	6	0	3	0	14
Texas	4	0	2	0	18
Utah	3	0	2	0	14
Vermont	10	4	6	4	5
Virginia	3	0	2	0	11
Washington	4	0	2	0	19
West Virginia	8	1	3	0	19
Wisconsin	4	0	1	0	20
Wyoming	3	0	1	0	10
US total	5	1	3	1	15

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2011 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

TABLE C.3

**Number of Nonparents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only
by Coverage Status and State, 2013**

Thousands

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Alabama	102	11	55	6	317	1,897
Alaska	9	0	7	0	32	293
Arizona	179	13	66	7	483	2,533
Arkansas	65	3	36	3	171	1,116
California	397	66	548	40	2,505	15,445
Colorado	63	8	36	4	281	2,116
Connecticut	107	24	57	48	115	1,414
Delaware	40	15	22	16	31	377
DC	49	24	21	15	6	332
Florida	362	42	143	20	1,865	7,979
Georgia	189	18	72	10	740	3,913
Hawaii	39	3	14	2	105	551
Idaho	21	2	14	2	90	560
Illinois	220	22	94	15	747	5,153
Indiana	112	10	66	8	348	2,514
Iowa	46	3	22	2	164	1,140
Kansas	34	3	20	3	125	1,046
Kentucky	132	11	34	6	322	1,729
Louisiana	113	9	56	3	329	1,861
Maine	36	4	18	1	104	569
Maryland	80	9	45	7	336	2,411
Massachusetts	128	8	80	12	283	2,740
Michigan	247	25	80	14	834	3,975
Minnesota	149	51	75	50	166	2,109
Mississippi	84	8	40	4	230	1,155
Missouri	111	14	58	6	328	2,357
Montana	14	3	8	1	79	400
Nebraska	18	1	15	1	63	686
Nevada	42	5	15	2	249	1,139
New Hampshire	15	1	11	2	45	536
New Jersey	100	14	55	12	483	3,466
New Mexico	46	5	19	2	199	814
New York	909	265	488	338	421	8,216
North Carolina	214	25	72	11	900	3,881
North Dakota	7	1	3	0	47	283
Ohio	252	11	85	9	720	4,579
Oklahoma	70	9	37	5	193	1,447
Oregon	73	8	30	4	346	1,599
Pennsylvania	264	25	98	13	779	5,141
Rhode Island	20	2	8	1	72	441
South Carolina	106	14	39	7	360	1,908
South Dakota	11	1	5	0	45	311
Tennessee	139	15	74	10	371	2,592
Texas	372	42	173	23	1,682	9,854
Utah	19	5	21	6	106	937
Vermont	30	12	18	13	12	259

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Virginia	92	9	60	8	373	3,291
Washington	114	12	45	6	538	2,794
West Virginia	64	7	22	3	142	766
Wisconsin	86	9	39	4	441	2,268
Wyoming	5	0	4	1	23	229
US total	6,197	907	3,225	785	19,747	125,118

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2013 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

TABLE C.4

Percentage of Nonparents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only by Coverage Status and State, 2013

State	Medicaid and SNAP		Medicaid Only		SNAP only
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	
Alabama	5	1	3	0	17
Alaska	3	0	2	0	11
Arizona	7	1	3	0	19
Arkansas	6	0	3	0	15
California	3	0	4	0	16
Colorado	3	0	2	0	13
Connecticut	8	2	4	3	8
Delaware	10	4	6	4	8
DC	15	7	6	5	2
Florida	5	1	2	0	23
Georgia	5	0	2	0	19
Hawaii	7	1	3	0	19
Idaho	4	0	3	0	16
Illinois	4	0	2	0	14
Indiana	4	0	3	0	14
Iowa	4	0	2	0	14
Kansas	3	0	2	0	12
Kentucky	8	1	2	0	19
Louisiana	6	0	3	0	18
Maine	6	1	3	0	18
Maryland	3	0	2	0	14
Massachusetts	5	0	3	0	10
Michigan	6	1	2	0	21
Minnesota	7	2	4	2	8
Mississippi	7	1	3	0	20
Missouri	5	1	2	0	14
Montana	4	1	2	0	20
Nebraska	3	0	2	0	9
Nevada	4	0	1	0	22
New Hampshire	3	0	2	0	8

State	Medicaid and SNAP		Medicaid Only		SNAP only
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	
New Jersey	3	0	2	0	14
New Mexico	6	1	2	0	24
New York	11	3	6	4	5
North Carolina	6	1	2	0	23
North Dakota	2	0	1	0	17
Ohio	6	0	2	0	16
Oklahoma	5	1	3	0	13
Oregon	5	0	2	0	22
Pennsylvania	5	0	2	0	15
Rhode Island	5	1	2	0	16
South Carolina	6	1	2	0	19
South Dakota	4	0	2	0	15
Tennessee	5	1	3	0	14
Texas	4	0	2	0	17
Utah	2	0	2	1	11
Vermont	12	5	7	5	5
Virginia	3	0	2	0	11
Washington	4	0	2	0	19
West Virginia	8	1	3	0	19
Wisconsin	4	0	2	0	19
Wyoming	2	0	2	0	10
US total	5	1	3	1	16

Sources: Transfer Income Model, version 3 and Urban Institute Medicaid/CHIP Eligibility Simulation Model estimates using data from the 2013 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

TABLE C.5

Number of Nonparents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only by Coverage Status and State, 2015

Thousands

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Alabama	91	12	36	7	364	1,917
Alaska	9	3	6	3	34	291
Arizona	409	169	206	181	108	2,604
Arkansas	185	69	114	103	11	1,116
California	2,024	849	1,515	1,004	757	15,882
Colorado	199	111	164	148	38	2,187
Connecticut	143	52	89	105	46	1,444
Delaware	41	25	26	25	18	371
DC	47	21	26	19	4	347
Florida	292	61	111	36	1,843	8,228
Georgia	130	20	43	11	778	3,985
Hawaii	57	37	30	40	37	565

State	Medicaid and SNAP		Medicaid Only		SNAP only	Total
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured		
Idaho	21	2	9	1	101	604
Illinois	580	265	349	400	112	5,172
Indiana	273	144	221	260	29	2,548
Iowa	112	52	83	101	27	1,183
Kansas	20	3	12	5	110	1,078
Kentucky	292	117	142	145	34	1,736
Louisiana	74	11	35	7	333	1,877
Maine	37	4	11	6	96	557
Maryland	231	116	139	158	94	2,436
Massachusetts	280	93	221	187	51	2,830
Michigan	607	260	296	336	188	4,000
Minnesota	173	82	135	164	48	2,117
Mississippi	54	6	21	2	242	1,125
Missouri	79	16	31	11	336	2,349
Montana	10	2	6	1	79	413
Nebraska	20	3	8	3	73	683
Nevada	160	77	85	81	62	1,207
New Hampshire	32	15	37	56	7	551
New Jersey	343	142	232	267	120	3,521
New Mexico	163	38	73	52	26	814
New York	1,048	360	649	566	196	8,405
North Carolina	184	44	66	28	875	3,928
North Dakota	26	14	17	18	5	287
Ohio	525	207	385	439	80	4,564
Oklahoma	50	13	27	10	177	1,443
Oregon	255	101	125	113	79	1,664
Pennsylvania	613	289	351	398	143	5,127
Rhode Island	54	22	35	26	18	438
South Carolina	93	13	30	7	383	1,962
South Dakota	8	1	4	1	36	304
Tennessee	99	16	45	8	419	2,632
Texas	264	44	119	29	1,753	10,280
Utah	20	3	16	4	101	999
Vermont	28	8	23	21	11	271
Virginia	61	14	45	17	306	3,320
Washington	353	155	176	195	136	2,890
West Virginia	137	54	62	77	19	753
Wisconsin	215	105	98	116	178	2,277
Wyoming	2	1	2	0	20	219
US total	11,221	4,341	6,784	6,001	11,144	127,499

Sources: Transfer Income Model, version 3, Urban Institute Medicaid/CHIP Eligibility Simulation Model, and Health Insurance Policy Simulation Model estimates using data from the 2015 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

TABLE C.6

Percentage of Nonparents Eligible for Medicaid and SNAP, Medicaid Only, and SNAP Only by Coverage Status and State, 2015

State	Medicaid and SNAP		Medicaid Only		SNAP only
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	
Alabama	5	1	2	0	19
Alaska	3	1	2	1	11
Arizona	16	6	8	7	4
Arkansas	17	6	10	9	1
California	13	5	10	6	5
Colorado	9	5	7	7	2
Connecticut	10	4	6	7	3
Delaware	11	7	7	7	5
DC	14	6	7	5	1
Florida	4	1	1	0	22
Georgia	3	0	1	0	20
Hawaii	10	7	5	7	7
Idaho	3	0	1	0	17
Illinois	11	5	7	8	2
Indiana	11	6	9	10	1
Iowa	9	4	7	9	2
Kansas	2	0	1	0	10
Kentucky	17	7	8	8	2
Louisiana	4	1	2	0	18
Maine	7	1	2	1	17
Maryland	9	5	6	7	4
Massachusetts	10	3	8	7	2
Michigan	15	7	7	8	5
Minnesota	8	4	6	8	2
Mississippi	5	1	2	0	22
Missouri	3	1	1	0	14
Montana	3	0	1	0	19
Nebraska	3	0	1	0	11
Nevada	13	6	7	7	5
New Hampshire	6	3	7	10	1
New Jersey	10	4	7	8	3
New Mexico	20	5	9	6	3
New York	12	4	8	7	2
North Carolina	5	1	2	1	22
North Dakota	9	5	6	6	2
Ohio	12	5	8	10	2
Oklahoma	3	1	2	1	12
Oregon	15	6	7	7	5
Pennsylvania	12	6	7	8	3
Rhode Island	12	5	8	6	4
South Carolina	5	1	2	0	20
South Dakota	3	0	1	0	12
Tennessee	4	1	2	0	16
Texas	3	0	1	0	17
Utah	2	0	2	0	10
Vermont	10	3	8	8	4
Virginia	2	0	1	1	9
Washington	12	5	6	7	5

State	Medicaid and SNAP		Medicaid Only		
	Medicaid enrolled or uninsured	Not on Medicaid, insured	Medicaid enrolled or uninsured	Not on Medicaid, insured	SNAP only
West Virginia	18	7	8	10	2
Wisconsin	9	5	4	5	8
Wyoming	1	0	1	0	9
US total	9	3	5	5	9

Sources: Transfer Income Model, version 3, Urban Institute Medicaid/CHIP Eligibility Simulation Model, and Health Insurance Policy Simulation Model estimates using data from the 2015 American Community Survey.

Note: SNAP = Supplemental Nutrition Assistance Program.

Notes

- ¹ For findings of the Work Support Strategies evaluation, see Hahn (2016) and Isaacs, Katz, and Kassabian (2016).
- ² Households with one or two members are guaranteed a minimum monthly benefit (\$16 in 2015) but larger households have no such guarantee. In our analysis, a household is only counted as eligible for SNAP if it meets the relevant eligibility criteria and is also eligible for a non-zero benefit (including the minimum benefit).
- ³ The reduction in the maximum SNAP benefit could result in fewer households being eligible for a non-zero benefit (and thus counted as eligible) in states with SNAP income limits above 130 percent of FPL. Households in states with income limits at 130 percent of FPL are unlikely to lose eligibility after the maximum SNAP benefit was reduced, because families will generally remain eligible for a non-zero benefit at incomes below that level.
- ⁴ As previously noted, because the SNAP benefit is reduced as income increases, households do not necessarily qualify for a benefit at incomes above the federal eligibility limit.
- ⁵ Eligibility thresholds did not change for employed parents and only increased from 133 percent to 138 percent of FPL for parents between 2013 and 2015.
- ⁶ We use an augmented version of the ACS developed by researchers at the University of Minnesota as part of their Integrated Public Use Microdata Series project, because it includes imputations that provide additional detail on the relationships between people in ACS households (Steven Ruggles, J. Trent Alexander, Katie Genadek, Ronald Goeken, Matthew B. Schroeder, and Matthew Sobek, "Integrated Public Use Microdata Series: Version 5.0 (Machine-readable database)," University of Minnesota, 2010).
- ⁷ TRIM3 is funded primarily by the US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. Documentation is available at <http://trim3.urban.org> (Urban Institute, 2012). The adaptation of TRIM3 methods to ACS data was funded by the Annie E. Casey Foundation and the MacArthur Foundation. For further information about ACS TRIM3 modeling, see Giannarelli, Lippold, and Martinez-Schiferl (2012); Wheaton and colleagues (2011); and Zedlewski and colleagues (2010).
- ⁸ Undocumented immigrant status is taken from Medicaid/CHIP Eligibility Simulation Model imputations.
- ⁹ TRIM3 uses imputation methods to disaggregate child support and unemployment compensation from a collective "other income" ACS variable.
- ¹⁰ The SNAP benefit formula produces a positive benefit amount for families with three or more members that pass the federal eligibility tests. However, families in states with higher BBCE eligibility thresholds can pass the income test but not qualify for a positive benefit.
- ¹¹ The Medicaid/CHIP eligibility estimate is obtained by dividing annual income by 12 and comparing the result with the relevant income threshold.

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