



ASPE

ISSUE BRIEF

HEALTH INSURANCE MARKETPLACE 2015 OPEN ENROLLMENT PERIOD: DECEMBER ENROLLMENT REPORT

For the period: November 15, 2014 – December 15, 2014¹

December 30, 2014

The Health Insurance Marketplace (“the Marketplace”) plays a critical role in achieving one of the Affordable Care Act’s goals of reducing the number of uninsured Americans by creating a market for affordable, high-quality health insurance for individual and small group consumers. This report provides preliminary data for enrollment-related activity in the individual Marketplace during the first month of the 2015 Open Enrollment period for all 50 states and the District of Columbia.

Section I of the report focuses on the 37 states that are using the HealthCare.gov platform for 2015 (also known as “HealthCare.gov states”) for the first month of the 2015 Open Enrollment (generally for the period 11-15-2014 to 12-15-2014).¹ The 37 HealthCare.gov states include 35 states that are states that used the HealthCare.gov platform in both 2014 and 2015 and Oregon and Nevada, which are new to the HealthCare.gov platform in 2015. These 37 states accounted for 68 percent of total Marketplace plan selections in 2014.² The data available for these states includes Marketplace plan selections for new consumers and consumers reenrolling in Marketplace coverage – including consumers who are actively reenrolling in Marketplace coverage (people who return to the Marketplace to select a new plan or actively renew their existing plan), but *not* consumers who are being automatically reenrolled into coverage (“automatic reenrollees” – people who retain coverage without returning to the Marketplace and selecting a plan). The reporting period for HealthCare.gov states in this report (through 12-15-14) differs from the reporting period (through 12-26-14) in the most recent weekly enrollment snapshot published by the Centers for Medicare & Medicaid Services (CMS).³

¹ Most of the data in this report are for the 11-15-14 to 12-15-14 reporting period with the following exceptions: Marketplace plan selection data for most of the 14 states that are using their own Marketplace platforms are for 11-15-14 to 12-13-14 (with the exception of California, which is reporting data for 11-15-14 to 12-14-14); and data on website visits and call center volume for states that are using the HealthCare.gov platform are for 11-15-14 to 12-20-14.

² For more information about data on Marketplace plan selections for the 2014 coverage year, please see the Marketplace Summary Enrollment Report, which can be accessed at http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/ib_2014Apr_enrollment.pdf.

³ The Centers for Medicare & Medicaid Services has released a weekly snapshot for Open Enrollment Week 6: December 20 - December 26, 2014 which states that nearly 6.5 million consumers have selected 2015 Marketplace plans in the states that are using the HealthCare.gov platform through 12-26-14, including data for automatic reenrollments. The weekly Open Enrollment snapshots provide preliminary point-in-time estimates for weekly data that could fluctuate based on consumers changing or

The most recent Weekly Enrollment Snapshot included a summary of enrollment activity in the 37 HealthCare.gov states showing that from November 15th to December 26th, nearly 6.5 million consumers selected a 2015 Marketplace plan or were automatically reenrolled in those states. As noted above, this report includes data for the HealthCare.gov states through 12-15-14, as well as for other states that are using their own Marketplace platforms (as discussed below). However, neither the most recent Weekly Enrollment Snapshot, nor this report fully capture the total number of plan selections for coverage beginning January 1st (see Appendix Table C1 for additional information on how the data in this report compare with the data in the most recent Weekly Enrollment Snapshot). This report also includes data relating to completed applications, eligibility determinations, and website visits, and call center activity for the HealthCare.gov states; as well as data on the overall distribution of Marketplace plan selections in these states by gender, age, metal level, financial assistance status, race/ethnicity, and rural status.

Section II of the report focuses on the 14 states (including the District of Columbia) that are operating their own Marketplace platform for 2015 (see page 10). Most of the 14 states include activity for the period 11-15-2014 to 12-13-2014 (however data for California are through 12-14-14). These 14 states accounted for 32 percent of Marketplace plan selections in 2014. The data available for these states includes new consumers, consumers who are actively reenrolling in Marketplace coverage (except for two states, New York and California), and automatic reenrollees in 5 states (Connecticut, Idaho, Kentucky, Vermont, and Washington).

Because complete data are not yet available, this report does not provide a comprehensive estimate of the total number of Marketplace plan selections, including both new consumers and consumers reenrolling in Marketplace coverage, for all states for coverage beginning on January 1, 2015. (Please see Appendix Table C2 for additional information on the Marketplace plan selection data that are available for various states).

canceling plans or having a change in status such as a new job or marriage; data revisions may mean that the weekly totals from the snapshots may not sum to the cumulative numbers. The weekly snapshots can be accessed at <http://www.hhs.gov/healthcare/facts/blog/index.html>.

Key Highlights:

Preliminary national plan selection data available to date show that as of December 15th, more than 4.0 million Americans had selected new coverage or been reenrolled in 2015 health insurance coverage through the Marketplace for coverage beginning January 1st (see Appendix Table B1). In detail:

- 3.4 million people have selected 2015 Marketplace plans in the 37 states that are using the HealthCare.gov platform in 2015 as of December 15th, including plan selections by new consumers and consumers who are actively reenrolling in Marketplace coverage (excluding automatic reenrollees); and
- Over 600,000 people have selected 2015 Marketplace plans in the 14 states (including DC) that are using their own Marketplace platforms in 2015, based on data that generally run through December 13th. Depending on the state, these data may reflect new consumers only, or both new consumers and consumers reenrolling in Marketplace coverage (including, in some states, automatic reenrollees).

SECTION I. DATA FOR THE 37 STATES USING THE HEALTHCARE.GOV PLATFORM

- ***The Marketplaces in HealthCare.gov States are Succeeding in Reaching People Who Do Not Currently have Marketplace Coverage.***

3.4 million individuals have already selected 2015 Marketplace plans as of 12-15-14 in HealthCare.gov states, including new consumers, and consumers who are reenrolling in Marketplace coverage (see Table 1). Of that total, 52 percent (1.8 million) are plan selections by new consumers who did not have a Marketplace plan selection as of November 2014, and 48 percent (1.6 million) are plan selections from consumers who are reenrolling in Marketplace coverage (excluding automatic reenrollees).

Table 1

2015 Marketplace Plan Selections in States Using the HealthCare.gov Platform By Enrollment Type	Cumulative 11-15-14 to 12-15-14	
	Number	% of Total
Total 2015 Marketplace Plan Selections in HealthCare.gov States (1)	3.42 million	100%
New Consumers	1.77 million	52%
Consumers Reenrolling in Marketplace Coverage (2)	1.64 million	48%

Notes: Numbers may not add to totals due to rounding

(1) Total 2015 Marketplace Plan Selections represents cumulative data on the number of unique individuals who have selected a 2015 Marketplace medical plan for enrollment through the individual market Marketplaces (with or without the first premium payment having been received directly by the Marketplaces or the issuer). This is also known as pre-effectuated enrollment. These data do not include: cancellations and terminations; a count of the number of individuals who have selected a standalone dental plan; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP).

(2) Consumers reenrolling in Marketplace coverage includes data for consumers who are actively reenrolling in Marketplace coverage, but does not include data for automatic reenrollees.

Source: Centers for Medicare & Medicaid Services, as of 12-23-14.

- ***Interest in the Marketplaces in HealthCare.gov States is High*** – During the first month of the 2015 Open Enrollment period:
 - o 14.7 million visits were made to the HealthCare.gov and CuidadoDeSalud.gov websites;
 - o 6.8 million calls were made to the Marketplace call center for the HealthCare.gov states;
 - o 3.4 million completed applications for 2015 coverage were submitted; and
 - o 5.0 million people were included in these completed applications.

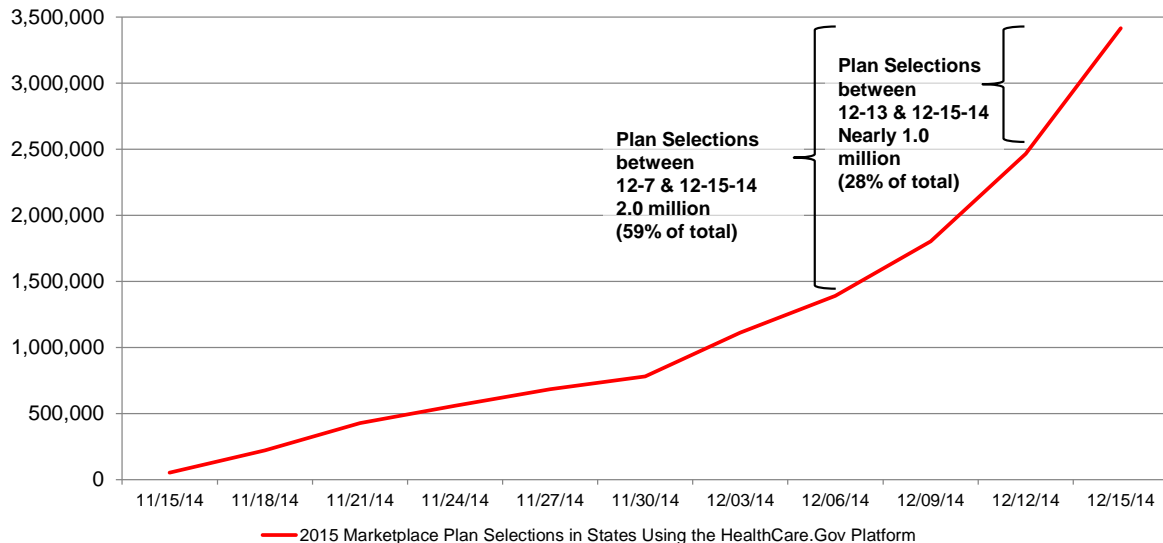
- ***Two-Thirds of the Consumers Who Submitted Applications to the Marketplaces in the HealthCare.gov States Have Already Selected Marketplace Plans*** – Most of the people who applied for coverage through the Marketplace during the first month of the 2015 Open Enrollment period in the HealthCare.gov states have already received an eligibility determination and/or selected a plan (see Appendix Table B2):
 - o 97 percent of applicants have received an eligibility determination.⁴
 - o Two-thirds (68 percent) of those applying have already selected a 2015 Marketplace plan; and
 - o 9 percent of applicants have been determined or assessed eligible for Medicaid/CHIP.
- ***People Responded to the December 15th Deadline for Marketplace Coverage Beginning on January 1, 2015 in HealthCare.gov States***
 - o 2.0 million people selected a 2015 Marketplace plan in the 37 HealthCare.gov states between 12-7-14 and 12-15-14 (59 percent of the 3.4 million people who selected a plan during the first month of the 2015 Open Enrollment period) (see Figure 1); and
 - o Nearly 1.0 million people selected a 2015 Marketplace plan on 12-13-14, 12-14-14 or 12-15-14, which is 28 percent of the total number of people selecting a plan during the first month of the open enrollment period.

⁴ The number of applicants who have received an eligibility determination includes both those who have been determined eligible to enroll in a plan through the Marketplaces, and those who have been determined or assessed eligible for Medicaid/CHIP by the Marketplaces.

Figure 1

Trends in the Cumulative Number of Individuals Who Selected a Marketplace Plan in States Using the HealthCare.gov Platform, 11-15-14 to 12-15-14

3.4 million people selected 2015 Marketplace plans in HealthCare.gov states during the first month of the open enrollment period, including 28% during the last 3 days



Notes: Represents the cumulative number of unique individuals who have been determined eligible to enroll in a plan through the states using the HealthCare.gov platform, and have actively selected a plan (with or without the first premium payment having been received by the issuer). Number of states using the HealthCare.gov platform: 37 states during the 2015 coverage year.

Source: Centers for Medicare & Medicaid Services, as of 12-23-14

Characteristics of 2015 Marketplace Plan Selections

In the HealthCare.gov states, the socio-demographic characteristics of people who selected 2015 Marketplace plans during the first month of the 2015 Open Enrollment period are generally similar to those of people who selected Marketplace plans during the early months of the 2014 Open Enrollment period (see Table 2).⁵

- Young People:** The 2014 Open Enrollment period showed that the proportion of young people (ages 0 to 34) selecting plans increased over time as the period progressed. For example, the proportion of 0 to 34 year olds who selected a Marketplace plan during the early months of the 2014 Open Enrollment period (29 percent for 10-1-13 to 12-28-13)⁶ grew to 35 percent by the end of the open enrollment period. For the 2015 Open

⁵ The number and composition of the HealthCare.gov states has changed slightly between the 2014 coverage year, when there were 36 HealthCare.gov states, and the 2015 coverage year, when 37 states are using the HealthCare.gov Marketplace platform

⁶ For additional information on Marketplace plan selection data for 10-1-13 to 12-28-13, please see the "Health Insurance Marketplace: January 2014 Enrollment Report," which can be accessed at http://www.aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Jan2014/ib_2014jan_enrollment.pdf

Enrollment period, the information to date suggests a slightly higher rate of plan selections by this age group at this early point than for 2014 (33 percent versus 29 percent in the early months of the 2014 Open Enrollment period). However, it is important to note that because it is early in the open enrollment period, the age distribution of the 2015 plan selections could change. This is especially the case because the data for automatic reenrollees have not yet been incorporated into the analysis.

- **Race/Ethnicity:** The self-reported Marketplace data on race/ethnicity should be used with caution due to the high proportion of plan selections with unknown race/ethnicity (nearly a third both in 2014 and thus far in 2015). The proportions of plan selections by race/ethnicity in the early months of the 2014 Open Enrollment Period⁷ are similar to those for the first month of 2015 with the following exceptions: the proportion of Latino plan selections is slightly higher than in 2014 (8 percent in 2015 compared with 7 percent in 2014), and for African-Americans the share is slightly lower in 2015 (11 percent in 2015 compared to 14 percent in 2014).
- **Financial Assistance:** Similarly, the proportion of people who selected Marketplace plans with financial assistance (including premium tax credits and/or cost-sharing subsidies) grew during the 2014 Open Enrollment Period. For example, the proportion selecting plans with financial assistance grew from 80 percent during the early months of the 2014 Open Enrollment period (10-1-13 to 12-28-13) to 86 percent by the end of the open enrollment period. For the 2015 Open Enrollment period, the proportion who selected a plan with financial assistance is 87 percent to date compared with 80 percent in the early months of the 2014 Open Enrollment period.
- **Gender:** For the 2015 Open Enrollment period, the proportion of males who have selected a Marketplace plan is 44 percent to date compared to 45 percent in the early months of the 2014 Open Enrollment period (10-1-13 to 12-28-13). As this pattern suggests, the same holds true for women (56 percent vs. 55 percent).
- **Rural Status:** Approximately one-fifth (18 percent) of the people who selected a 2015 Marketplace plan in the HealthCare.gov states between 11-15-14 and 12-15-14 live in rural ZIP Codes.

⁷ Data on the race/ethnicity distribution of Marketplace plan selections during the early months of the 2014 Open Enrollment Period are for 10-1-13 to 2-1-14, the earliest period for which these data are available.

Table 2

Comparison of Selected Characteristics of Marketplace Plan Selections in States Using the HealthCare.gov Platform	2014 Open Enrollment Period (2) (36 States)	2015 Open Enrollment Period (3) (37 States)
	10-1-13 to 12-28-13 (4)	11-15-14 to 12-15-14 (5) (not including automatic reenrollments)
Total Number of Individuals Who Have Selected a Marketplace Plan (1)	1,196,430	3,416,023
<i>Males who have selected a Marketplace plan (6)</i>	45%	44%
<i>Females who have selected a Marketplace plan (6)</i>	55%	56%
<i>0 to 34 year olds who have selected a Marketplace plan (6)</i>	29%	33%
<i>18 to 34 year olds who have selected a Marketplace plan (6)</i>	23%	24%
<i>Individuals who have selected a Silver Marketplace plan (6)</i>	61%	68%
<i>Individuals who have selected a Marketplace plan with Financial Assistance (6)</i>	80%	87%
<i>African-Americans who have selected a Marketplace plan (6)</i>	14%	11%
<i>Latinos who have selected a Marketplace plan (6)</i>	7%	8%
<i>Whites who have selected a Marketplace plan (6)</i>	71%	70%
<i>Individuals in ZIP Codes designated as Rural who have selected a Marketplace Plan (6)</i>	N/A	18%

(1) Represents cumulative data on the number of unique individuals who have selected a 2015 Marketplace medical plan for enrollment through the individual market Marketplaces (with or without the first premium payment having been received directly by the Marketplaces or the issuer). This is also known as pre-effectuated enrollment. These data do not include: cancellations and terminations; a count of the number of individuals who have selected a standalone dental plan; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). See Appendix C for additional technical notes.

(2) During the 2014 Marketplace coverage year, there were a total of 36 states using the HealthCare.gov platform, including one state (Idaho) that switched from using the HealthCare.gov platform in 2014 to using its own Marketplace platform in 2015.

(3) During the 2015 Marketplace coverage year, there were a total of 37 states using the HealthCare.gov platform, including 35 states that are states that used the HealthCare.gov platform in both 2014 and 2015, and two states which are new to the HealthCare.gov platform in 2015 (Oregon and Nevada).

(4) Most of the data for the early months of the 2014 Open Enrollment period are for 10-1-13 to 12-28-13. However, the race/ethnicity data are for 10-1-13 to 2-1-14 (the earliest period for which these data are available).

(5) Data for the HealthCare.gov states for the first month of the 2015 Open Enrollment Period only include plan selections for

individuals who are new consumers or who have actively reenrolled in Marketplace coverage during the reference period. These data do not include automatic reenrollments.

(6) Percentages shown in this table are based on the total number of active Marketplace plan selections for which the applicable data are available, excluding plan selections with unknown data for a given metric (e.g., age, gender, race/ethnicity, etc.)

Additional information on the number of plan selections with missing data for each metric can be found in Appendix Table A.

Source: Centers for Medicare & Medicaid Services, as of 12-23-14.

Other Data on Marketplace Enrollment-Related Activity in the HealthCare.gov States

Interest in the Marketplaces in HealthCare.gov states has been high during the first month of the 2015 Open Enrollment period, with 14.7 million visits on the Marketplace websites, 6.8 million calls to the Marketplace call center, and 3.4 million completed applications in the HealthCare.gov states (see Table 3).

Table 3

Cumulative Marketplace Enrollment-Related Information in States Using The HealthCare.gov Platform	Reporting Period: First Month of the 2015 Open Enrollment Period (1) (not including automatic reenrollments)
Visits to the Marketplace Websites (2)	14,658,020
Calls to the Marketplace Call Centers (3)	6,827,704
Number of Completed Applications	3,392,182
Number of Individuals Included in Completed Applications	4,990,439
Number of Individuals Determined Eligible to Enroll in a 2015 Marketplace Plan	4,376,414
Number of Individuals Who Have Selected a 2015 Marketplace Plan (4)	3,416,023

Notes:

(1) Most of the data in this table are for the 11-15-14 to 12-15-14 reporting period with the following exceptions: the data on website visits and call center volume are for 11-15-14 to 12-20-14.

(2) Visits on the Marketplace Websites includes 14,161,103 unique visitors on HealthCare.gov and 496,917 unique visitors on CuidadoDeSalud.gov between 11-15-14 and 12-20-14. Visitors to the Marketplace Websites is the sum of monthly data and has been deduplicated to the extent possible.

(3) Total Calls to the Marketplace call centers includes 501,614 calls with Spanish-speaking representatives and 6,326,090 other calls between 11-15-14 and 12-20-14.

(4) Total 2015 Marketplace Plan Selections represents cumulative data on the number of unique individuals who have selected a 2015 Marketplace medical plan for enrollment through the individual market Marketplaces (with or without the first premium payment having been received directly by the Marketplaces or the issuer). This is also known as pre-effectuated enrollment. These data do not include: cancellations and terminations; a count of the number of individuals who have selected a standalone dental plan; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). See Appendix C for technical notes.

Source: Centers for Medicare & Medicaid Services, as of 12-23-2014.

SECTION II. DATA FOR THE 14 STATES USING THEIR OWN MARKETPLACE PLATFORMS

Initial data indicate that over 600,000 individuals have selected 2015 Marketplace plans in the 14 states (including DC) that are using their own Marketplace platforms for the 2015 coverage year. This includes:

- 161,752 Marketplace plan selections in two states reporting only data for new consumers (California and New York);
- 153,011 Marketplace plan selections in seven states reporting data on new consumers and consumers actively reenrolling in Marketplace coverage (Colorado, District of Columbia, Hawaii, Maryland, Massachusetts, Minnesota, and Rhode Island); and
- 318,075 Marketplace plan selections in five states reporting data on new enrollees, consumers actively reenrolling in Marketplace coverage, and automatic reenrollees (Connecticut, Idaho, Kentucky, Vermont, and Washington).

Data on consumers reenrolling in Marketplace coverage are not yet available for all 14 of these states, nor is a complete breakdown of new consumers versus consumers reenrolling in Marketplace coverage available. Several states could not separate out data for new consumers compared to consumers reenrolling in Marketplace coverage due to system vendor changes or other information technology system issues. Also, five states initiated automatic reenrollment prior to 12-14-2014 and these reenrollments are included in their plan selection data.

SECTION III. METHODOLOGICAL OVERVIEW

The data reported here have been obtained from the information systems of the Centers for Medicare & Medicaid Services (CMS), based on information collected for 37 states using the HealthCare.gov platform. We also obtained more limited data reported to CMS by the 14 states (including DC) that are using their own Marketplace platform. Data for the Small Business Health Options Program (SHOP) Marketplaces are not included in this report.

This report includes data that are currently available on enrollment-related activity for the first month of the open enrollment period – which generally corresponds with data from 11-15-14 to 12-15-14 for the 37 HealthCare.gov states, and from 11-15-14 to 12-13-14 for most of the states that are using their own Marketplace platforms for the 2015 coverage (see Table 4 below).

Table 4

Marketplace Type	Reporting Period
States Using the HealthCare.gov Marketplace Platform (37 states)	11-15-14 to 12-15-14*
States Using Their Own Marketplace Platform (14 states)	
California	11-15-14 to 12-14-14
Other 13 States (including DC)	11-15-14 to 12-13-14

*Data for call center and website visits are for 11-15-2014 – 12-20-2014

Data for certain metrics are not yet available for several of the states that are using their own Marketplace platforms. Additionally, some states (Connecticut, Idaho, Kentucky, Vermont, and Washington) initiated automatic reenrollments prior to 12-14-2014; automatic reenrollments are included in these states' plan selection data. This report does not include complete data on the number of individuals with 2014 Marketplace coverage who have selected health insurance coverage through the Marketplace that can begin on January 1, 2015 because the automatic reenrollments were not completed during the one-month period this report examines. In addition, some states extended their deadline for plan selection for January 1 coverage or offered special enrollment periods to consumers experiencing longer than normal wait times or other challenges.^{8 9}

It is important to note that data for the 14 states that are using their own Marketplace platforms include new consumers but not all states are reporting reenrollments (California and New York are only reporting data for new consumers) and some states are not separately reporting data for new consumers and consumers who are reenrolling in Marketplace coverage. Most of the 14 states include activity through 12-13-14 (however data for California are through 12-14-14), ending prior to the surge associated with the deadlines for January 1st coverage.¹⁰ Please refer to Appendix C for additional technical notes.

This report also includes data on the characteristics of persons who have selected a Marketplace plan through the 37 states that are using the HealthCare.gov platform for 2014. In some cases, the data for certain characteristics of Marketplace plan selections are not yet available in selected states.

We believe that the information contained in this issue brief provides the most systematic summary of enrollment-related activity in the Marketplaces for the first month of the 2015 Open Enrollment period because the data for the various metrics are counted using comparable definitions for data elements across states and Marketplace types.

⁸ For example, in the HealthCare.gov states, the deadline for Marketplace coverage beginning on January 1st was 12-15-14. However, consumers in these states who experienced longer than normal wait times or other challenges as a result of increased website and call center activity near the December 15th deadline will be eligible for a Special Enrollment Period.

⁹ Dan Mangan, "More Extensions as Obamacare Deadline Looms," accessed at <http://www.cnn.com/id/102269082#>.

¹⁰ In the States that are using their own Marketplace platform, the deadline for Marketplace coverage beginning on January 1st varies. The deadline in the District of Columbia and Kentucky was December 15th, but some states have announced later deadlines. For example, the deadline in Maryland was December 18th; the deadline for Connecticut was December 19th; the deadline in New York and Idaho was December 20th; the deadline in California was December 21st; the deadline in Massachusetts, Rhode Island, and Washington was December 23rd; and the deadline in Hawaii, Minnesota and Vermont is December 31st. Additionally, Connect for Health Colorado has offered to work with people who started the process before the December 15th deadline, but were not able to finish enrolling, to complete their application for January coverage.

SECTION IV: APPENDICES

Appendix A:	Marketplace Plan Selections by Gender, Age, Metal Level, Financial Assistance Status, Race/Ethnicity, and Rural Status in States Using the HealthCare.gov Platform	Page 13
Appendix B:	State-Level Tables	
	<ul style="list-style-type: none"> • B1 – Marketplace Plan Selection by Enrollment Type, Marketplace Type and State 	Page 16
	<ul style="list-style-type: none"> • B2 - Total Completed Applications and Individuals Who Completed Applications in States Using the HealthCare.gov Platform, By State 	Page 19
	<ul style="list-style-type: none"> • B3 - Total Marketplace Eligibility Determinations, and Marketplace Plan Selections in States Using the HealthCare.gov Platform, By State 	Page 22
	<ul style="list-style-type: none"> • B4 - Total Marketplace Plan Selections by Financial Assistance Status in States Using the HealthCare.gov Platform, By State 	Page 25
Appendix C:	Technical Notes	Page 27

APPENDIX TABLE A

Marketplace Plan Selections by Gender, Age, Metal Level, Financial Assistance Status, Race/Ethnicity, and Rural Status, in States Using the HealthCare.gov Platform, 11-15-14 to 12-15-14 (1)		
Characteristics	States Using the HealthCare.gov Platform for the 2015 Coverage Year (37 States)	
	Number 11-15-14 to 12-15-14 (not including automatic reenrollments) (2)	% of Available Data, Excluding Unknown (3)
Total Who Have Selected a Marketplace Plan		
Total Number of Individuals Who Have Selected a Marketplace Plan	3,416,023	n/a
By Gender		
Female	1,896,562	56%
Male	1,518,929	44%
Subtotal: Plan Selections With Available Data on Gender	3,415,491	100%
Unknown Gender	532	n/a
By Age		
Age < 18	308,507	9%
Age 18-25	333,360	10%
Age 26-34	488,825	14%
Age 35-44	520,425	15%
Age 45-54	732,671	21%
Age 55-64	1,016,196	30%
Age ≥65	16,038	0%
Subtotal: Plan Selections With Available Data on Age (2)	3,416,022	100%
Unknown Age	n/a	n/a
Ages 18 to 34	822,185	24%
Ages 0 to 34	1,130,692	33%
By Metal Level		
Bronze	706,150	21%
Silver	2,321,915	68%
Gold	265,657	8%

Marketplace Plan Selections by Gender, Age, Metal Level, Financial Assistance Status, Race/Ethnicity, and Rural Status, in States Using the HealthCare.gov Platform, 11-15-14 to 12-15-14 (1)		
Characteristics	States Using the HealthCare.gov Platform for the 2015 Coverage Year (37 States)	
	Number 11-15-14 to 12-15-14 (not including automatic reenrollments) (2)	% of Available Data, Excluding Unknown (3)
Platinum	103,330	3%
Catastrophic	23,697	1%
Subtotal: Plan Selections With Available Data on Metal Level (4)	3,416,023	100%
Standalone Dental	521,784	n/a
Unknown Metal Level	0	n/a
By Financial Assistance Status		
With Financial Assistance	2,985,989	87%
Without Financial Assistance	430,033	13%
Subtotal: Plan Selections With Available Data on Financial Assistance (2)	3,416,022	100%
Unknown Financial Assistance Status	N/A	n/a
By Self-Reported Race/Ethnicity		
American Indian / Alaska Native	9,367	0%
Asian	211,701	9%
Native Hawaiian / Pacific Islander	1,749	0%
African-American	253,132	11%
Latino	200,407	8%
White	1,659,111	70%
Multiracial	30,117	1%
Subtotal: Plan Selections With Available Data on Self-Reported Race/Ethnicity	2,365,584	100%
Unknown Race/Ethnicity	1,050,439	n/a
By Rural Status		
In ZIP Codes Designated as Rural	605,733	18%
In ZIP Codes Designated as Urban	2,810,163	82%

Marketplace Plan Selections by Gender, Age, Metal Level, Financial Assistance Status, Race/Ethnicity, and Rural Status, in States Using the HealthCare.gov Platform, 11-15-14 to 12-15-14 (1)		
Characteristics	States Using the HealthCare.gov Platform for the 2015 Coverage Year (37 States)	
	Number 11-15-14 to 12-15-14 (not including automatic reenrollments) (2)	% of Available Data, Excluding Unknown (3)
Subtotal: Plan Selections With Available Data on Rural Status	3,415,896	100%
Unknown Rural Status	127	n/a

Notes:

Percentages in this table have been rounded. Some numbers may not add to totals due to rounding.

(1) Unless otherwise noted, the data in this table represent cumulative data on the number of unique individuals who have been determined eligible to enroll in a Marketplace plan, and have selected a Marketplace medical plan (with or without the first premium payment having been received by the issuer). These data do not include: cancellations and terminations; a count of the number of individuals who have selected a standalone dental plan; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). For additional technical notes, please refer to Appendix C of this report.

(2) For each metric, the data represent the total number of “Individuals Applying for 2015 Coverage in Completed Applications” who have selected a 2015 medical Marketplace plan for enrollment through the Marketplace (with or without the first premium payment having been received directly by the Marketplaces or the issuer) during the reference period, excluding plan selections with unknown data for a given metric. This is also known as pre-effectuated enrollment.

(3) In some cases, the data for certain characteristics of Marketplace plan selections are not yet available. For this reason, for each metric, we have calculated the comparable percentages based on the number of plan selections with known data for that metric.

(4) The subtotals for each metal tier type do not sum to the total number due to a small number of individuals (0.1%) who have multiple 2015 Marketplace plan selections in the system that will be resolved through data cleanup processes (including some people who may have records in multiple states). Data for standalone dental plan selections are shown separately in this section, but are not included in any of the other metrics in this table.

Source: Centers for Medicare & Medicaid Services, as of 12-23-2014.

APPENDIX TABLE B1

Marketplace Plan Selection by Enrollment Type, Marketplace Type and State, 2015 (1) 11-15-2014 to 12-13-2014 (for State-Based Marketplaces Using Their Own Platforms), and 11-15-2014 to 12-15-2014 (for States Using the HealthCare.gov Platform)			
Description	Total Number of Individuals Who Have Selected a 2015 Marketplace Plan (1)	Distribution By Enrollment Type (2)	
		New Consumers (3)	Consumers Reenrolling in Marketplace Coverage (4)
	Number	% of Total	% of Total
State-Based Marketplaces (SBMs) Using Their Own Marketplace Platforms			
California (5) (6)	118,770	N/A*	N/A
Colorado (7)	36,238	N/A	N/A
Connecticut (7) (8)	77,042	N/A	N/A
District of Columbia (7)	2,069	N/A	N/A
Hawaii (7)	1,903	N/A	N/A
Idaho (8) (9)	73,262	N/A	N/A
Kentucky (8)	82,651	9%	91%
Maryland (9)	50,742	N/A	N/A
Massachusetts (9)	32,266	N/A	N/A
Minnesota (7)	17,446	N/A	N/A
New York (6) (10)	42,982	N/A*	N/A
Rhode Island	12,347	20%	80%
Vermont (7) (8)	21,709	N/A	N/A
Washington (8)	63,411	20%	80%
TOTAL - SBMs Using Their Own Marketplace Platforms	632,838	14%	86%
States Using the HealthCare.gov Platform (11)			
State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (12)			
Nevada (13)	40,285	100%	0%
New Mexico	17,556	59%	41%
Oregon (13)	73,152	100%	0%
Subtotal - SBMs Using the HealthCare.gov Platform	130,993	95%	5%
Federally-Facilitated Marketplace (FFM) States			
Alabama	64,926	47%	53%
Alaska	9,325	39%	61%
Arizona	72,932	47%	53%
Arkansas	19,900	50%	50%
Delaware	8,956	56%	44%
Florida	673,255	49%	51%
Georgia	187,654	55%	45%
Illinois	121,243	54%	46%
Indiana	88,733	52%	48%
Iowa	18,913	49%	51%

Marketplace Plan Selection by Enrollment Type, Marketplace Type and State, 2015 (1) <i>11-15-2014 to 12-13-2014 (for State-Based Marketplaces Using Their Own Platforms), and</i> <i>11-15-2014 to 12-15-2014 (for States Using the HealthCare.gov Platform)</i>			
Description	Total Number of Individuals Who Have Selected a 2015 Marketplace Plan (1)	Distribution By Enrollment Type (2)	
		New Consumers (3)	Consumers Reenrolling in Marketplace Coverage (4)
	Number	% of Total	% of Total
Kansas	39,023	53%	47%
Louisiana	56,651	51%	49%
Maine	36,132	39%	61%
Michigan	123,208	53%	47%
Mississippi	28,452	58%	42%
Missouri	102,087	50%	50%
Montana	22,618	42%	58%
Nebraska	32,213	52%	48%
New Hampshire	23,210	41%	59%
New Jersey	105,306	43%	57%
North Carolina	249,784	44%	56%
North Dakota	8,528	39%	61%
Ohio	88,927	48%	52%
Oklahoma	44,129	55%	45%
Pennsylvania	180,046	53%	47%
South Carolina	75,075	57%	43%
South Dakota	8,817	51%	49%
Tennessee	87,137	49%	51%
Texas	379,525	54%	46%
Utah	49,740	50%	50%
Virginia	164,884	54%	46%
West Virginia	12,283	54%	46%
Wisconsin	92,398	42%	58%
Wyoming	9,020	49%	51%
TOTAL – States Using the HealthCare.gov Platform	3,416,023	52%	48%
MARKETPLACE TOTAL	4,048,861	50%	50%

Notes:

“N/A” means that the data for the respective metric are not yet available for a given state.

* Indicates that the data reported for the current month only include new consumers, and exclude reenrollees.

(1) Unless otherwise noted, the data in these tables represent cumulative data on the number of unique individuals who have selected a 2015 Marketplace medical plan for enrollment through the Marketplaces (with or without the first premium payment having been received directly by the Marketplaces or the issuer). This is also known as pre-effectuated enrollment. These data do not include: cancellations and terminations; standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces. For additional technical notes, please refer to Appendix C of this report.

(2) “Distribution by Enrollment Type” represents the percentage of plan selections with available data on enrollment type that are new consumers vs. consumers reenrolling in Marketplace coverage.

(3) “New Consumers” are those individuals who selected a 2015 Marketplace medical plan (with or without the first premium payment having been received directly by the Marketplaces or the issuer) as of the reporting date, and did not have a Marketplace

plan selection as of November 2014. These data do not include: cancellations and terminations; standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). 3 SBM states that are using their own Marketplace platforms are reporting this metric.

(4) “Consumers Reenrolling in Marketplace Coverage” are those individuals who had a Marketplace plan selection as of November 2014, and have either actively submitted a 2015 application and selected a 2015 Marketplace medical plan or in applicable states using their own Marketplace platforms (Connecticut, Idaho, Kentucky, Vermont, and Washington), are being automatically reenrolled in Marketplace coverage – with or without the first premium payment having been received directly by the Marketplaces or the issuer). These data do not include: cancellations and terminations; standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). 3 SBM states that are using their own Marketplace platforms are reporting this metric.

(5) California: The data that are being reported for California are for the following reporting period: 11-15-14 to 12-14-14. In a recent press release, Covered California recently stated that the comparable number as of 12-15-14 is 144,178 (see <http://news.coveredca.com/2014/12/covered-california-and-department-of.html>).

(6) California and New York only reported data on 2015 Marketplace plan selections by new consumers; data on the number of 2015 Marketplace plan selections by consumers reenrolling in Marketplace coverage are not yet available for these states.

(7) Several states have reported data on 2015 Marketplace plan selections that include plan selections by new consumers and plan selections by consumers reenrolling in Marketplace coverage, but have not yet reported any data on the distribution of Marketplace plan selections by enrollment status (new consumers vs. consumers reenrolling in Marketplace coverage for 2015).

(8) Several states (Connecticut, Idaho, Kentucky, Vermont, and Washington) initiated automatic reenrollment prior to 12-14-2014, and these numbers are included in their plan selection data.

(9) Idaho is an SBM that changed Marketplace platforms for the 2015 coverage year (Idaho transitioned from using the HealthCare.gov platform to using its own platform). Additionally, Massachusetts and Maryland changed their eligibility and enrollment system vendors for the 2015 coverage year. All of the plan selections for these states are being treated as new consumers for operational enrollment and reporting purposes.

(10) New York is currently unable to distinguish between Marketplace plan selections for the 2014 coverage year and Marketplace plan selections for the 2015 coverage year. Therefore, the plan selection data that are reported by New York may include a small number of plan selections from new consumers who were approved for a special enrollment period for 2014 Marketplace coverage between 11-15-14 and 12-15-14.

(11) For the HealthCare.gov states, the data on 2015 Marketplace plan selections includes data for new consumers and consumers who are actively reenrolling in Marketplace coverage, but does not include data for consumers who are being automatically reenrolled into coverage.

(12) Nevada, New Mexico, and Oregon are using the HealthCare.gov platform for 2015.

(13) Nevada and Oregon changed Marketplace platforms in 2015. Therefore, their 2015 Marketplace plan selections are generally being classified as new consumers for operational enrollment and reporting purposes. However, a small number of 2015 plan selections in these states may be classified as consumers reenrolling in Marketplace coverage in cases where an individual who had an active 2014 Marketplace plan selection in a HealthCare.gov state signs up for 2015 coverage in Oregon or Nevada.

Source: Centers for Medicare & Medicaid Services, as of 12-23-2014.

APPENDIX TABLE B2

Total Completed Applications and Individuals Who Completed Applications in States Using the HealthCare.gov Platform, By State, 2015 11-15-2014 to 12-15-2014						
Description	Total Number of Completed Applications for 2015 Coverage (2)	Total Individuals Applying for 2015 Coverage in Completed Applications (3)	Individuals Applying for 2015 Coverage in Completed Applications By Status			
			Have Selected a 2015 Marketplace Plan (4)	Have Been Determined Eligible to Enroll, but Have Not Selected a 2015 Marketplace Plan (5)	Have Been Determined or Assessed Eligible for Medicaid/CHIP (6)	Pending / Other (7)
	Number	Number	% of Total	% of Total	% of Total	% of Total
States Using the HealthCare.gov Platform						
State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (8)						
Nevada	40,737	62,168	65%	14%	21%	0%
New Mexico	19,468	28,175	62%	18%	19%	1%
Oregon	97,115	144,520	51%	12%	19%	18%
Subtotal - SBMs Using the HealthCare.gov Platform	157,320	234,863	56%	14%	20%	11%
Federally-Facilitated Marketplace (FFM) States						
Alabama	70,021	96,948	67%	25%	4%	5%
Alaska	8,650	12,715	73%	17%	8%	1%
Arizona	67,729	112,752	65%	20%	15%	0%
Arkansas	28,426	41,211	48%	17%	18%	17%
Delaware	8,948	13,638	66%	17%	16%	1%
Florida	635,946	884,010	76%	18%	6%	0%
Georgia	183,868	273,616	69%	23%	8%	0%
Illinois	124,630	182,770	66%	17%	16%	0%
Indiana	92,144	135,405	66%	18%	16%	0%
Iowa	21,175	30,424	62%	18%	19%	1%
Kansas	36,262	54,899	71%	22%	7%	0%
Louisiana	60,006	79,306	71%	23%	3%	2%
Maine	30,420	45,236	80%	15%	5%	0%
Michigan	123,508	185,745	66%	14%	19%	0%
Mississippi	34,829	44,163	64%	28%	7%	0%
Missouri	98,530	145,940	70%	21%	9%	0%

**Total Completed Applications and Individuals Who Completed Applications in
States Using the HealthCare.gov Platform, By State, 2015**
11-15-2014 to 12-15-2014

Description	Total Number of Completed Applications for 2015 Coverage (2)	Total Individuals Applying for 2015 Coverage in Completed Applications (3)	Individuals Applying for 2015 Coverage in Completed Applications By Status			
			Have Selected a 2015 Marketplace Plan (4)	Have Been Determined Eligible to Enroll, but Have Not Selected a 2015 Marketplace Plan (5)	Have Been Determined or Assessed Eligible for Medicaid/CHIP (6)	Pending / Other (7)
	Number	Number	% of Total	% of Total	% of Total	% of Total
Montana	20,268	30,235	75%	19%	3%	3%
Nebraska	26,288	43,641	74%	18%	8%	1%
New Hampshire	22,616	33,210	70%	14%	15%	1%
New Jersey	119,433	179,170	59%	17%	12%	12%
North Carolina	227,103	328,173	76%	18%	6%	0%
North Dakota	6,510	11,350	75%	13%	11%	0%
Ohio	94,358	139,786	64%	17%	19%	0%
Oklahoma	41,064	62,652	70%	22%	8%	0%
Pennsylvania	211,638	295,846	61%	15%	11%	13%
South Carolina	75,454	102,849	73%	20%	6%	0%
South Dakota	8,546	13,400	66%	25%	9%	0%
Tennessee	104,975	150,531	58%	24%	8%	10%
Texas	358,779	569,431	67%	25%	3%	5%
Utah	37,044	74,817	66%	19%	15%	0%
Virginia	145,093	224,808	73%	20%	6%	0%
West Virginia	12,970	18,803	65%	17%	8%	10%
Wisconsin	89,885	126,164	73%	15%	6%	6%
Wyoming	7,746	11,932	76%	18%	6%	0%
TOTAL – States Using the HealthCare.gov Platform	3,392,182	4,990,439	68%	19%	9%	3%

Notes:

“N/A” means that the data for the respective metric are not yet available for a given state.

(1) Unless otherwise noted, the data in this table represent cumulative Marketplace enrollment-related activity for 11-15-14 to 12-15-14. These data also do not include any enrollment-related activity relating to individuals who may have applied for and/or selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces. For additional technical notes, please refer to Appendix C of this report.

(2) “Completed Applications for 2015 Coverage” represents the total number of electronic and paper applications that were submitted to the Marketplace during the reference period with sufficient information to begin performing eligibility determinations for enrollment in a plan through the Marketplace and, if appropriate, sufficient information to begin performing eligibility determinations for advance payments of the premium tax credit and cost-sharing reductions, and eligibility assessments or determinations for Medicaid and CHIP.

(3) “Individuals Applying for 2015 Coverage in Completed Applications” represents the total number of individuals included in Completed Applications that were submitted to the Marketplaces during the applicable reference period. This number does not include individuals applying through the SHOP.

(4) “Has Selected a 2015 Marketplace Plan” represents the percentage of “Individuals Applying for 2015 Coverage in Completed Applications” who have selected a 2015 Marketplace medical plan for enrollment through the Marketplaces (with or without the first premium payment having been received directly by the Marketplaces or the issuer) during the reference period. This is also known as pre-effectuated enrollment. These data do not include: cancellations and terminations; standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP).

(5) “Has Been Determined Eligible to Enroll, But Has Not Selected a 2015 Marketplace Plan” represents the percentage of “Individuals Applying for 2015 Coverage in Completed Applications” who have been determined eligible to enroll in a 2015 Marketplace plan, but have not yet selected a 2015 Marketplace medical plan.

(6) “Has Been Determined or Assessed Eligible for Medicaid / CHIP” represents the percentage of “Individuals Applying for 2015 Coverage in Completed Applications” who have been determined or assessed by the Marketplace as eligible for Medicaid or CHIP, based on their modified adjusted gross income (MAGI). In some states, completed applications for individuals, whom the Marketplace has assessed as potentially eligible for Medicaid or CHIP based on MAGI, are transferred to the relevant state agency for a final eligibility determination. In these “assessment states” the data include those accounts where a final decision is pending. In other states, the Marketplace has been delegated the final Medicaid/CHIP eligibility determination responsibility for these individuals. Thus, this data element includes FFM determinations and assessments, regardless of the state Medicaid/CHIP agency’s final eligibility determination, if applicable. These data may vary from accounts transferred via “flat file” to states by the FFM. Quality assurance continues on Medicaid assessments and determinations. Note: Marketplace Medicaid/CHIP eligibility determination and assessment data in this report cannot be added to eligibility determination data in the most recent monthly Medicaid and CHIP Applications, Eligibility Determinations, and Enrollment report (available on Medicaid.gov), which covers data from October 2014. In the Marketplaces, some of the individuals assessed or determined eligible for Medicaid or CHIP by the Marketplace and reported in this report may also be reported in the monthly Medicaid and CHIP Applications, Eligibility Determinations, and Enrollment Report when the state has made an eligibility determination based on the information provided by the Marketplace. Total Medicaid & CHIP enrollment is reported in the monthly Medicaid and CHIP Applications, Eligibility Determinations, and Enrollment Report, and is a point-in-time count of total enrollment in the Medicaid and CHIP programs at the end of the monthly reporting period.

(7) “Pending/Other” is a derived estimate representing the percentage of “Individuals Applying for 2015 Coverage in Completed Applications” who either: 1) have a pending eligibility determination or assessment for a Marketplace plan or Medicaid/CHIP coverage; 2) have a completed eligibility determination or assessment for a Marketplace plan or Medicaid/CHIP coverage that is not captured in the relevant column in this table for a given state due to system issues; or 3) have been deemed ineligible for Marketplace plan coverage. The Pending/Other totals shown in this table are based on the sums of the corresponding state-level Pending/Other counts, which may differ slightly from the difference between the total number of individuals applying for coverage in completed applications and the total number of individuals with processed eligibility determinations.

(8) Nevada, New Mexico, and Oregon are using the HealthCare.gov platform for 2015.

Source: Centers for Medicare & Medicaid Services, as of 12-23-2014.

APPENDIX TABLE B3

Total Marketplace Eligibility Determinations, and Marketplace Plan Selections in States Using the HealthCare.gov Platform, By State, 2015 (1) 11-15-2014 to 12-15-2014				
State Name	Number of Individuals Determined Eligible to Enroll through the Marketplace for 2015 Coverage		Number of Individuals Determined or Assessed Eligible for Medicaid / CHIP by the Marketplace (4)	Number of Individuals With 2015 Marketplace Plan Selections (not including automatic reenrollments) (5)
	Total Eligible to Enroll in a Marketplace Plan (2)	Eligible to Enroll in a Marketplace Plan with Financial Assistance (3)		
	Number	Number	Number	Number
States Using the HealthCare.gov Platform				
<i>State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (6)</i>				
Nevada	48,812	42,381	13,066	40,285
New Mexico	22,748	17,479	5,249	17,556
Oregon	91,179	73,149	28,043	73,152
Subtotal - SBMs Using the HealthCare.gov Platform	162,739	133,009	46,358	130,993
<i>Federally-Facilitated Marketplace (FFM) States</i>				
Alabama	88,942	68,026	3,434	64,926
Alaska	11,536	9,637	1,069	9,325
Arizona	95,610	75,403	16,809	72,932
Arkansas	26,790	22,194	7,347	19,900
Delaware	11,303	8,970	2,219	8,956
Florida	833,380	721,666	48,812	673,255
Georgia	250,766	200,426	22,298	187,654
Illinois	152,589	121,063	29,565	121,243
Indiana	112,811	93,994	22,201	88,733
Iowa	24,432	20,305	5,780	18,913
Kansas	50,871	38,039	3,912	39,023
Louisiana	74,992	60,664	2,341	56,651
Maine	42,945	36,040	2,194	36,132
Michigan	149,270	129,927	36,015	123,208
Mississippi	40,985	33,002	3,092	28,452
Missouri	133,171	106,847	12,560	102,087

Total Marketplace Eligibility Determinations, and Marketplace Plan Selections in States Using the HealthCare.gov Platform, By State, 2015 (1) <i>11-15-2014 to 12-15-2014</i>				
State Name	Number of Individuals Determined Eligible to Enroll through the Marketplace for 2015 Coverage		Number of Individuals Determined or Assessed Eligible for Medicaid / CHIP by the Marketplace (4)	Number of Individuals With 2015 Marketplace Plan Selections (not including automatic reenrollments) (5)
	Total Eligible to Enroll in a Marketplace Plan (2)	Eligible to Enroll in a Marketplace Plan with Financial Assistance (3)		
	Number	Number	Number	Number
Montana	28,444	23,485	759	22,618
Nebraska	40,095	33,285	3,315	32,213
New Hampshire	28,022	19,939	5,005	23,210
New Jersey	136,612	107,585	21,093	105,306
North Carolina	307,667	261,605	20,079	249,784
North Dakota	10,021	8,713	1,279	8,528
Ohio	113,208	93,341	26,263	88,927
Oklahoma	57,763	44,512	4,741	44,129
Pennsylvania	224,707	177,085	31,328	180,046
South Carolina	96,032	77,154	6,647	75,075
South Dakota	12,170	10,072	1,181	8,817
Tennessee	123,419	90,362	11,943	87,137
Texas	523,441	401,973	18,211	379,525
Utah	63,619	55,029	11,025	49,740
Virginia	209,955	159,679	14,377	164,884
West Virginia	15,446	12,597	1,512	12,283
Wisconsin	111,434	97,436	7,590	92,398
Wyoming	11,227	9,458	672	9,020
TOTAL – States Using the HealthCare.gov Platform	4,376,414	3,562,522	453,026	3,416,023

Notes:

“N/A” means that the data for the respective metric are not yet available for a given state.

(1) Unless otherwise noted, the data in this table represent cumulative Marketplace enrollment-related activity for 11-15-14 to 12-15-14. These data also do not include any enrollment-related activity relating to individuals who may have applied for and/or selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces. For additional technical notes information, please refer to Appendix C of this report.

(2) “Individuals Determined Eligible to Enroll in a Plan Through the Marketplace” (i.e., enrollment through the Marketplaces for a 2015 Marketplace plan) represents the total number of individuals for whom a Completed Application has been received for the 2015 plan year (including any individuals with active 2014 Marketplace enrollments who returned to the Marketplaces and updated their information), and who are determined to be eligible for plan enrollment through the Marketplaces during the reference period, whether or not they qualify for advance payments of the premium tax credit or cost-sharing reductions. These individuals may or may not have enrolled in coverage by the end of the reference period. Individuals who have been determined or assessed eligible for Medicaid or CHIP are not included.

(3) “Individuals Determined Eligible to Enroll in a Plan Through the Marketplace with Financial Assistance” (i.e., enrollment through the Marketplace for a 2015 Marketplace plan with Financial Assistance) represents the total number of individuals determined eligible to enroll through the Marketplace in a Marketplace plan who qualify for an advance premium tax credit (APTC), with or without a cost-sharing reduction (CSR) for the 2015 plan year (including any individuals with active 2014 Marketplace enrollments who returned to the Marketplace and updated their information). These individuals may or may not have enrolled in coverage by the end of the reference period.

(4) “Individuals Determined or Assessed Eligible for Medicaid / CHIP by the Marketplace” represents the number of individuals who have been determined or assessed by the Marketplace as eligible for Medicaid or CHIP based on their modified adjusted gross income (MAGI). In some states, completed applications for individuals, whom the Marketplace has assessed as potentially eligible for Medicaid or CHIP, based on MAGI, are transferred to the relevant state agency for a final eligibility determination. In these “assessment states” the data include those accounts where a final decision is pending. In other states, the Marketplace has been delegated the final Medicaid/CHIP eligibility determination responsibility for these individuals. Thus, this data element includes FFM determinations and assessments, regardless of the state Medicaid/CHIP agency’s final eligibility determination, if applicable. These data may vary from accounts transferred via “flat file” to states by the FFM. Quality assurance continues on Medicaid assessments and determinations. Note: Marketplace Medicaid/CHIP eligibility determination and assessment data in this report cannot be added to eligibility determination data in the most recent monthly Medicaid and CHIP Applications, Eligibility Determinations, and Enrollment report (available on Medicaid.gov) which covers data through October 2014. In the Marketplaces, some of the individuals assessed or determined eligible for Medicaid or CHIP by the Marketplace and reported in this report may also be reported in the monthly Medicaid and CHIP Applications, Eligibility Determinations, and Enrollment Report when the state has made an eligibility determination based on the information provided by the Marketplace. Total Medicaid/CHIP enrollment is reported in the monthly Medicaid and CHIP Applications, Eligibility Determinations, and Enrollment Report, and is a point-in-time count of total enrollment in the Medicaid and CHIP programs at the end of the monthly reporting period.

(5) “Individuals With 2015 Marketplace Plan Selections” represents the total number of individuals determined eligible to enroll in a plan through the marketplace” who have selected a 2015 Marketplace medical plan for enrollment through the Marketplaces or, after December 15, have been automatically reenrolled in Marketplace coverage (with or without the first premium payment having been received directly by the Marketplace or the issuer) during the reference period. This is also known as pre-effectuated enrollment. These data do not include: cancellations and terminations; a count of the number of individuals who have selected a standalone dental plan; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP).

(6) Nevada, New Mexico, and Oregon are using the HealthCare.gov platform for 2015.

Source: Centers for Medicare & Medicaid Services, as of 12-23-2014.

APPENDIX TABLE B4

Marketplace Plan Selections by Financial Assistance Status in States Using the HealthCare.gov Platform, By State (1) 11-15-14 to 12-15-14				
Description	Total Number of Individuals Who Have Selected a 2015 Marketplace Plan (2)	Plan Selections With Available Data on Financial Assistance Status (3)	By Financial Assistance Status (% of Available Data, Excluding Unknown)	
			With Financial Assistance	Without Financial Assistance
	Number	Number	%	%
States Using the HealthCare.gov Platform (4)				
State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (5)				
Nevada	40,285	40,285	90%	10%
New Mexico	17,556	17,556	73%	27%
Oregon	73,152	73,152	79%	21%
Subtotal - SBMs Using the HealthCare.gov Platform	130,993	130,993	82%	18%
Federally-Facilitated Marketplace (FFM) States				
Alabama	64,926	64,926	91%	9%
Alaska	9,325	9,325	91%	9%
Arizona	72,932	72,932	77%	23%
Arkansas	19,900	19,900	89%	11%
Delaware	8,956	8,956	83%	17%
Florida	673,255	673,255	94%	6%
Georgia	187,654	187,654	89%	11%
Illinois	121,243	121,243	80%	20%
Indiana	88,733	88,733	88%	12%
Iowa	18,913	18,913	86%	14%
Kansas	39,023	39,023	80%	20%
Louisiana	56,651	56,651	91%	9%
Maine	36,132	36,132	89%	11%
Michigan	123,208	123,208	89%	11%
Mississippi	28,452	28,452	95%	5%
Missouri	102,087	102,087	89%	11%
Montana	22,618	22,618	85%	15%
Nebraska	32,213	32,213	88%	12%
New Hampshire	23,210	23,210	69%	31%
New Jersey	105,306	105,306	82%	18%
North Carolina	249,784	249,784	92%	8%
North Dakota	8,528	8,528	88%	12%
Ohio	88,927	88,927	85%	15%
Oklahoma	44,129	44,129	82%	18%
Pennsylvania	180,046	180,046	79%	21%
South Carolina	75,075	75,075	88%	12%
South Dakota	8,817	8,817	88%	12%

Marketplace Plan Selections by Financial Assistance Status in States Using the HealthCare.gov Platform, By State (1) <i>11-15-14 to 12-15-14</i>				
Description	Total Number of Individuals Who Have Selected a 2015 Marketplace Plan (2)	Plan Selections With Available Data on Financial Assistance Status (3)	By Financial Assistance Status (% of Available Data, Excluding Unknown)	
			With Financial Assistance	Without Financial Assistance
	Number	Number	%	%
Tennessee	87,137	87,137	83%	17%
Texas	379,525	379,524	86%	14%
Utah	49,740	49,740	89%	11%
Virginia	164,884	164,884	83%	17%
West Virginia	12,283	12,283	85%	15%
Wisconsin	92,398	92,398	90%	10%
Wyoming	9,020	9,020	92%	8%
TOTAL – States Using the HealthCare.gov Platform	3,416,023	3,416,022	87%	13%

Notes:

“N/A” means that the data for the respective metric is not yet available for a given state. Percentages in this table have been rounded. Some numbers may not add to totals due to rounding.

(1) Unless otherwise noted, the data in this table represent cumulative data on the number of unique individuals who have been determined eligible to enroll in a Marketplace plan, and have selected a Marketplace medical plan (with or without the first premium payment having been received by the issuer). These data do not include: cancellations and terminations; a count of the number of individuals who have selected a standalone dental plan; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). For additional technical notes, please refer to Appendix C of this report.

(2) For each metric, the data represent the total number of “Individuals Applying for 2015 Coverage in Completed Applications” who have selected a 2015 medical Marketplace plan for enrollment through the Marketplace (with or without the first premium payment having been received directly by the Marketplaces or the issuer) during the reference period, excluding plan selections with unknown data for a given metric. This is also known as pre-effectuated enrollment.

(3) In some cases, the data for certain characteristics of Marketplace plan selections are not yet available. For this reason, for each metric, we have calculated the comparable percentages based on the number of plan selections with known data for that metric.

(4) For the HealthCare.gov states, the data on 2015 Marketplace plan selections includes data for new consumers and consumers who are actively reenrolling in Marketplace coverage, but does not include data for consumers who are being automatically reenrolled into coverage.

(5) Nevada, New Mexico, and Oregon are using the HealthCare.gov platform for 2015.

Source: Centers for Medicare & Medicaid Services, as of 12-23-2014.

APPENDIX C: TECHNICAL NOTES

We believe that the information contained in this issue brief provides the most systematic summary of enrollment-related activity in the Marketplaces through the first month of the 2015 Open Enrollment period because the data for the various metrics are counted using comparable definitions for data elements across states, and Marketplace platforms. However, data for certain metrics may not be available (including in states that changed their Marketplace platform between the 2014 and 2015 coverage years) due to information system issues. **It is also important to note that the data that are included in this report may differ slightly from comparable data that are included in the weekly enrollment updates that are published by CMS (also known as the Weekly Enrollment Snapshots) because that data may be based on different time periods and/or reporting dates than those that are used in this report.**

The following section provides additional information about the metrics used in this enrollment report, in addition to the information that is included elsewhere in the footnotes of the tables in this report.

Additional Information About the Metrics Used in this Marketplace Summary Enrollment Report

Reporting of Data on Activity Relating to the 2015 Marketplace Coverage Year – Except where otherwise noted, this report includes enrollment-related data on activity related to the 2015 Marketplace coverage year. The data that are being reported for 11-15-14 to 12-15-14 do not include activity associated with individuals who may have applied for and/or qualified for a Special Enrollment Period for 2014 Marketplace coverage.

Reporting Period – This report includes data that are currently available on enrollment-related activity for the first month of the 2015 Open Enrollment period – which generally corresponds with data from 11-15-14 to 12-15-14 for the 37 HealthCare.gov states, and from 11-15-14 to 12-13-14 for most of the states that are using their own Marketplace platforms for the 2015 coverage. The following table shows how the reporting periods for the data in this report compare with those for the most recent Weekly Enrollment Snapshot.

Appendix Table C1

Marketplace Type	Reporting Period	
	December Monthly Enrollment Report	Week 6 Weekly Enrollment Snapshot
States Using the HealthCare.gov Marketplace Platform (37 states)	11-15-14 to 12-15-14*	11-15-14 to 12-26-14
States Using Their Own Marketplace Platform (14 states)		
California	11-15-14 to 12-14-14	Not included
Other 13 States (including DC)	11-15-14 to 12-13-14	Not included

*Data for call center and website visits are for 11-15-2014 – 12-20-2014

2015 Marketplace Plan Selections – Represents cumulative data on the number of unique individuals who have selected a 2015 Marketplace plan for enrollment through the Marketplaces (with or without the first premium payment having been received directly by the Marketplaces or the issuer) during the reference period. This is also known as pre-effectuated enrollment. These data represent the number of individuals with active plan selections for a Marketplace medical plan as of the reporting date (excluding cancellations and terminations), and do not include stand-alone dental plan selections. These data also do not include any individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces.

We are using the term “active Marketplace plan selections” to signify that the total number of Individuals Who Have Selected a Marketplace Plan that is reported in the monthly Marketplace enrollment reports excludes data for plan selections that have been cancelled or terminated. For example, if an individual selected a Marketplace plan during the first week of the open enrollment period, but selected a different plan during the third week of the open enrollment period, the active plan selections total would only include data for the most recent plan selection. This is consistent with the way that the Marketplace plan selection data were reported in the previous monthly enrollment reports for the 2014 Open Enrollment period.

Definitions of “New” and “Reenrolling” Consumers – The monthly enrollment reports for the 2015 Open Enrollment period distinguish plan selections by new consumers from plan selections by those who are reenrolling in Marketplace coverage:

- **“New Consumers”** are those individuals who selected a 2015 Marketplace plan (with or without the first premium payment having been received directly by the Marketplaces or the issuer) and did not have a Marketplace plan selection as of November 2014. These data do not include: cancellations and terminations; standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). Additionally, some states are generally classifying all of their plan selections as new consumers for operational enrollment and reporting purposes due to changes in Marketplace platform (e.g., Idaho switched to using its own Marketplace platform in 2015, while Nevada and Oregon switched to using the HealthCare.gov platform in 2015), or changes in system vendors (Maryland and Massachusetts).
- **“Consumers Reenrolling in Marketplace Coverage”** are those individuals who had Marketplace plan selection as of November 2014, and have either actively submitted a 2015 application and selected a 2015 Marketplace medical plan, or in applicable states using their own Marketplace platforms (Connecticut, Idaho, Kentucky, Vermont, and Washington), are being automatically reenrolled in Marketplace coverage – with or without the first premium payment having been received directly by the Marketplaces or the issuer. These data do not include: cancellations and terminations; standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been granted a Special Enrollment Period (SEP). This category is consistent with the “consumers renewing coverage” category

that is included in the HHS Weekly Enrollment Snapshots. Consumers Reenrolling in Marketplace Coverage includes the following two categories:

- o **Consumers who are Actively Reenrolling in Marketplace Coverage** – People who had a Marketplace plan selection as of November 2014, and return to the Marketplace to select a new plan or actively renew their existing plan; and
- o **Consumers who are being Automatically Reenrolled into Marketplace Coverage (also known as “Automatic Reenrollees”)** – People who had a Marketplace plan selection as of November 2014, and retain coverage without returning to the Marketplace and selecting a plan.

The categories of Marketplace plan selection data for the first month of the 2015 Open Enrollment period that are included in this report vary by Marketplace type and state:

Appendix Table C2

Enrollment Type	States Using Their Own Marketplace Platforms (14 states including DC)	States Using the HealthCare.gov Platform (37 states)
New Consumers	Included in this report	Included in this report
Consumers Who Are Actively Reenrolling in Marketplace Coverage	Included in this report for the following 12 states: CO, CT, DC, HI, ID, KY, MD, MA, MN, RI, VT, and WA* [Not included for CA and NY]	Included in this report**
Consumers Who Are Being Automatically Reenrolled into Marketplace Coverage	Included in this report for the following five states: CT, ID, KY, VT, and WA	Not included in this report

* Some states that are using their own Marketplace platforms are generally classifying all of their plan selections as new consumers for operational enrollment and reporting purposes due to changes in Marketplace platform (e.g., ID, which switched to using its own Marketplace platform in 2015), or changes in eligibility and enrollment system vendors (MD and MA).

** Some HealthCare.gov states are generally classifying all of their plan selections as new consumers for operational enrollment and reporting purposes due to changes in Marketplace platform (e.g., NV and OR, which switched to using the HealthCare.gov platform in 2015).

Categories for Reporting State-Level Marketplace Data – The Health Insurance Marketplace includes the Marketplaces established in each of the states (and the District of Columbia) and run by the state or the federal government. This report addresses the individual market Marketplaces that are using their own Marketplace platforms for the 2015 coverage year, as well as the individual market Marketplaces that are using the HealthCare.gov Marketplace platform for eligibility and enrollment for the 2015 coverage year (data for the small group Marketplace, also known as SHOP, is not included in this report).

Marketplace enrollment-for the 2015 Open Enrollment period, will be reported based on the

following two major categories:

- **State-Based Marketplaces (SBMs) Using Their Own Marketplace Platform** – 14 states (including DC):

California, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, New York, Rhode Island, Vermont, and Washington.

- **States Using the HealthCare.gov Platform** – 37 states, including:

- o **State-Based Marketplaces Using the HealthCare.gov Platform** – 3 states

Nevada, New Mexico, and Oregon (*Note: one of these states (New Mexico) also used the HealthCare.Gov platform during the 2014 Open Enrollment period; however, Nevada and Oregon switched to using the HealthCare.gov platform for the 2015 Open Enrollment period*).

- o **Federally-Facilitated Marketplaces** – 34 states

Alabama, Alaska, Arizona, Arkansas, Delaware, Florida, Georgia, Illinois, Indiana, Iowa, Kansas, Louisiana, Maine, Michigan, Mississippi, Missouri, Montana, Nebraska, New Hampshire, New Jersey, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, West Virginia, Wisconsin, and Wyoming. (*Note: all of these states also used the HealthCare.Gov platform during the 2014 Open Enrollment period*).

Notes on Changes in Marketplace Platforms – The following states changed their Marketplace eligibility and enrollment platform between the 2014 and 2015 coverage years:

- Nevada and Oregon switched from using their own Marketplace eligibility and enrollment platforms in 2014 to using the HealthCare.gov platform for eligibility and enrollment for 2015 (as a consequence, all people who select 2015 Marketplace plans in NV and OR are treated as new consumers for operational enrollment and reporting purposes because the system cannot identify or automatically reenroll persons who previously had 2014 Marketplace coverage in these states); and
- Idaho switched from using the HealthCare.gov platform for 2014 to using its own Marketplace platform for 2015.

Additionally, Maryland and Massachusetts are continuing to use their own Marketplace platforms, but have implemented new eligibility and enrollment systems for the 2015 Open Enrollment period, and as a result, the Marketplaces in these states are unable to distinguish between new consumers and consumers reenrolling in Marketplace coverage for plan year 2015. Individuals who have 2014 Marketplace coverage in these states will need to return to the Marketplace to reenroll in coverage for 2015.

Idaho, Nevada, Oregon, Maryland and Massachusetts are generally classifying all of their plan selections as new consumers for operational enrollment and reporting purposes due to their changes in Marketplace platform (e.g., ID, NV and OR) or eligibility and enrollment system vendors (MD and MA).

Data on Total Number of Completed Applications and Total Individuals Applying for Coverage in Completed Applications – We are showing data on the number of completed applications and the total number of individuals applying for coverage in the completed applications in this report.

Data on Characteristics of Marketplace Plan Selections by Metal Level – The subtotals for each metal tier type do not sum to the total number of Plan Selections with Available Data on Metal Level due to a small number of individuals (0.1%) who have multiple 2015 Marketplace plan selections in the system that will be resolved through data cleanup processes (including some people who may have records in multiple states). Data for standalone dental plan selections are shown separately.

Standalone Dental Plan Selections – Individuals who are shopping for health insurance coverage in the Marketplace have the choice of selecting:

- A medical Marketplace plan with integrated dental coverage,
- A medical Marketplace plan without integrated dental coverage, or
- A medical Marketplace plan and a separate standalone dental plan (it is not possible to select a standalone dental plan without also selecting a medical plan).

Individuals who have selected both a medical Marketplace plan and a standalone dental plan are only counted once in the total Marketplace plan selections metric. However, we report data on total standalone dental plan selections separately for the 37 states that are using the HealthCare.gov platform, including combined data for both the “High” and “Low” standalone dental plan metal tier types (see Appendix Table A).

Data on Additional Characteristics of Marketplace Plan Selections – This report also includes data on the characteristics of persons who have selected a Marketplace plan in the 37 states that are using the HealthCare.gov platform by Race/Ethnicity and Rural Status. In some cases, the data for certain characteristics of Marketplace plan selections are not yet available. For this reason, for each metric, we have calculated the comparable percentages based on the number of plan selections with known data for that metric.

- ***Race/Ethnicity*** – The application for Marketplace coverage in the states using the HealthCare.gov platform contains questions on race and on ethnicity, which are both marked as optional. The share of unknown race/ethnicity in Marketplace plan selection data for HealthCare.gov states is higher than in federal survey data,¹¹ but lower than that

¹¹ The main Census surveys have missing data on 3 to 5 percent of respondents, and the National Health Interview Survey has missing information for about 5 percent of respondents. (Source: ASPE correspondence with U.S. Census and the National

reported in administrative data sources in the healthcare industry.¹² Thus, while this information is provided for transparency purposes, its quality is low and its use should be limited. For example, it is also important to note that the racial/ethnic makeup of the persons with unknown race and ethnicity who selected a Marketplace plan in the HealthCare.gov states may differ substantially from that among those who reported race and ethnicity. For example, if racial and ethnic minorities are more likely to skip the optional questions, they would be disproportionately under-reported in the overall totals.¹³

- **Rural Status** – The proportion of Marketplace plan selections in rural areas was derived by aggregating data for Marketplace plan selections with valid ZIP Code information based on the HHS Office of Rural Health Policy’s (ORHP) most current list of Rural Designated ZIPs, which has been updated using the 2010 Census data.

Number of Individuals Determined or Assessed Eligible for Medicaid / CHIP by the Marketplace – Marketplace Medicaid & CHIP eligibility determination and assessment data in this report cannot be added to eligibility determination data in the most recent monthly Medicaid and CHIP Applications, Eligibility Determinations, and Enrollment report (available on www.Medicaid.gov), which covers data through October 2014. Some of the individuals assessed or determined eligible for Medicaid or CHIP by the Marketplace and reported in this report may also be reported in the monthly Medicaid and CHIP Applications, Eligibility Determinations, and Enrollment Report when the state has made an eligibility determination based on the information provided by the Marketplace. Total Medicaid & CHIP enrollment is reported in the monthly Medicaid and CHIP Applications, Eligibility Determinations, and Enrollment Report, and is a point-in-time count of total enrollment in the Medicaid and CHIP programs at the end of the monthly reporting period.

Effectuated Enrollment – Data on effectuated enrollment for the 2015 Open Enrollment period are not yet available.

Center for Health Statistics regarding the American Community Survey, the Current Population Survey, and the National Health Interview Survey; February 2014.)

¹² For example, a study of administrative data from the Department of Veterans Affairs found that race/ethnicity information was missing from files for 36 percent of patients. Additionally, as of 2008, commercial plans that collected race and ethnicity data only had information for about 40 percent of their members. The health insurance company Aetna, which began collecting data on race and ethnicity for all its members in 2002 via enrollment forms, currently has information on race/ethnicity for about 35 percent of its membership. (Sources: Nancy R. Kressin, Bei-Hung Chang, Ann Hendricks, and Lewis E. Kazis, “Agreement between administrative data and patients’ self-reports of race/ethnicity,” *American Journal of Public Health*, vol. 93, no. 10 (2003), p. 1734-1739; José J. Escarce, Rita Carreón, German Veselovskiy, and Elisa H. Lawson, “Collection of race and ethnicity data by health plans has grown substantially, but opportunities remain to expand efforts,” *Health Affairs*, vol. 30, no. 10 (2011); and Aetna, “Aetna’s Commitment,” accessed April 25, 2014. Available at: <http://www.aetna.com/about-aetna-insurance/initiatives/racial-ethnic-equality/index.html>.)

¹³ For additional information on the methodology that was used to analyze the characteristics of individuals who selected a Marketplace plan in the HealthCare.gov states by race/ethnicity, please refer to Appendix C in the 2014 Marketplace Summary Enrollment Report, which can be accessed at http://www.aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/ib_2014Apr_enrollment.pdf.

Additional Data Validation – CMS has been taking steps to enhance the processes for generating and validating Marketplace data. As such, some of the numbers in this report could be updated in future reports.