



# ASPE ISSUE BRIEF

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## HEALTH INSURANCE MARKETPLACES 2015 OPEN ENROLLMENT PERIOD: MARCH ENROLLMENT REPORT<sup>1</sup>

**For the period: November 15, 2014 – February 15, 2015  
(Including Additional Special Enrollment Period Activity Reported through 2-22-15)<sup>2</sup>  
March 10, 2015**

The Health Insurance Marketplaces (“the Marketplaces”) play a critical role in achieving one of the Affordable Care Act’s core goals: reducing the number of uninsured Americans by providing affordable, high-quality health insurance. This report provides summary data for enrollment-related activity in the individual market Marketplaces during the 2015 Open Enrollment period for all 50 states and the District of Columbia (11-15-14 to 2-15-15), including data relating to individuals who qualified for an “in-line” or other Special Enrollment Period (SEP). (Unless otherwise noted, the data in this report include SEP activity through 2-22-15).<sup>3</sup> It is important to note that this report does not include data on effectuated enrollment (that the number of people who have paid monthly premiums to the insurer). Additionally, this report does not include data relating to any individuals who qualified for an SEP after 2-22-15, including any upcoming SEP for individuals who were unaware of, or did not understand the implications of the fee for not enrolling in health insurance coverage.<sup>4 5</sup>

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<sup>1</sup> As additional data are available from special enrollment periods extending into April, this data will be provided.

<sup>2</sup> Most of the data in this report are for the 11-15-14 to 2-15-15 reporting period (including additional special enrollment period (SEP) activity reported through Sunday, February 22nd), with the following exceptions: the data for the State-Based Marketplaces (SBMs) that are using their own Marketplace platforms include additional SEP activity through 2-21-15 (with the exception of California, which is reporting data including additional SEP activity through 2-22-15).

<sup>3</sup> The SEP for individuals who were “in-line” on 2-15-15 ended on 2-22-15 for the states that are using the HealthCare.gov platform. Most of the SBMs that are using their own Marketplace platforms allowed individuals who started the process before 2-15-15, but could not finish, to complete the application and select a plan by varying dates, mostly within February, with the exception of Colorado, which allowed applicants through March 2 to complete their applications, and Washington, which allowed applicants to enroll through April 17. Vermont has indicated that the state will assist consumers with enrollment if they report a problem trying to enroll, but did not provide for a formal extension period.

<sup>4</sup> CMS recently announced a special enrollment period (SEP) for tax season. For individuals and families in the HealthCare.gov states who did not have health coverage in 2014 and are subject to the fee or “shared responsibility payment” when they file their 2014 taxes. For those who were unaware or did not understand the implications of the fee for not enrolling in coverage, CMS will provide consumers with an opportunity to purchase health insurance coverage from March 15 to April 30, 2015. (For additional information, see <http://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2015-Press-releases-items/2015-02-20.html>).

<sup>5</sup> Most of the SBMs that are using their own Marketplace platforms also announced an SEP for individuals and families that were unaware or did not understand the implications of the fee for not enrolling in coverage, but the timeframes for the SEP varied among the states. s -

**Section I of the report focuses on the 37 states that are using the HealthCare.gov platform** for the 2015 Open Enrollment period (also known as “HealthCare.gov states”) and covers the period 11-15-2014 to 2-15-2015, including activity that was reported through 2-22-15 associated with enrollment through a Special Enrollment Period (SEP). The data on SEP activity include information for those who qualified for an SEP because they were “in line” on 2-15-15, as well as those who qualified for an SEP for other reasons with coverage that was effective on March 1, 2015.<sup>6</sup>

The 37 HealthCare.gov states include 35 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.<sup>7</sup> These 37 states account for 76 percent (8.8 million) of the total plan selections through the Marketplaces in this report.

The data available for these states include plan selections through the Marketplaces for new consumers and those that are reenrolling in coverage. The reenrollee data include separate breakouts for consumers who actively reenrolled in coverage through the Marketplaces (i.e., people who returned to the Marketplaces to select a new plan or actively renew their existing plan),<sup>8</sup> and consumers who were automatically reenrolled into coverage. The report also includes the number of reenrollees who switched plans, as well as updated data on several metrics related to the impact of the advance premium tax credit on net premium costs.<sup>9</sup>

The data included in this report cover the same reporting period as the Week 14 Weekly Enrollment Snapshot for the 37 HealthCare.gov states, and the metrics that are reported in both places are generally consistent (see Appendix Table D1 for additional information on how the data in this report compare with the data in the Week 14 Weekly Enrollment Snapshot).<sup>10</sup> This report also includes data relating to completed applications, eligibility determinations, website visitors, and call center activity for the HealthCare.gov states; data on the overall distribution of plan selections through the Marketplaces in these states by gender, age, metal level, financial assistance status (i.e., whether the consumer has been determined eligible for advance premium tax credits and/or cost-sharing reductions), race/ethnicity, rural status, household income.

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<sup>6</sup> This includes persons who had a qualifying life event that qualifies them for an SEP (such as a change in marital status, a change in dependents, or losing minimum essential health coverage), or a complex situation related to applying for coverage in the Marketplace. Additional information on Marketplace SEPs can be found at <https://www.healthcare.gov/how-can-i-get-coverage-outside-of-open-enrollment/#part=2>.

<sup>7</sup> For more information about data on plan selections through the Marketplaces for the 2014 coverage year, please see the 2014 Open Enrollment Period Marketplace Summary Enrollment Report, which can be accessed at [http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/ib\\_2014Apr\\_enrollment.pdf](http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/ib_2014Apr_enrollment.pdf).

<sup>8</sup> Active reenrollees includes individuals who actively selected a 2015 plan through the Marketplaces prior to the 12-15-14 deadline for coverage beginning on January 1st, as well as those who returned to the Marketplaces and selected a plan after having initially been automatically reenrolled.

<sup>9</sup> For additional information about these premium-related metrics, please see “Health Insurance Marketplace 2015: Average Premiums After Advance Premium Tax Credits through January 30 in 37 States Using the HealthCare.gov Platform,” ASPE Research Brief, U.S. Department of Health and Human Services, February 9, 2015. Available at: [http://aspe.hhs.gov/health/reports/2015/MarketPlaceEnrollment/APTC/ib\\_APTC.pdf](http://aspe.hhs.gov/health/reports/2015/MarketPlaceEnrollment/APTC/ib_APTC.pdf).

<sup>10</sup> The Centers for Medicare & Medicaid Services published weekly Open Enrollment snapshots that provided preliminary point-in-time estimates for weekly data that could fluctuate based on consumers changing or 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>.

**Section II of the report focuses on the 14 states (including the District of Columbia)** that are operating their own Marketplace platforms for 2015 (see page 20). Most of the 14 states include activity for the period 11-15-2014 to 2-15-2015 (including activity associated with individuals who qualified for a SEP that was reported through 2-21-2015, except for California where data on SEP activity extend through 2-22-2015). These 14 states account for 24 percent (2.8 million) of plan selections through the Marketplaces in this report. The data available for these states include new consumers and reenrollees (please see Appendix Table D2 for additional information on the data on plan selections through the Marketplaces that are available for various states). Data are available for certain states relating to completed applications, eligibility determinations, website visitors, call center activity; and the overall distribution of plan selections through the Marketplaces by gender, age, metal level, financial assistance status, and reenrollment status (See Appendix Table D3 for a summary of which additional metrics are available for each state).

### Key Highlights:

***National plan selection data show that as of the end of the second Open Enrollment period, nearly 11.7 million<sup>11</sup> Americans selected or were automatically reenrolled<sup>12</sup> into a 2015 health insurance plan through the Health Insurance Marketplaces, specifically:***

- More than 8.84 million people selected or were automatically reenrolled in 2015 plans through the Marketplaces in the 37 states that are using the HealthCare.gov platform. This includes:
  - More than 4.6 million new consumers, 2.2 million active reenrollees, and nearly 2.0 million automatic reenrollees; and
  - 3.2 million (36 percent) people with plan selections who are under the age of 35.
- Nearly 2.85 million people selected or were automatically reenrolled into 2015 plans through the Marketplaces in the 14 states (including DC) that are using their own Marketplace platforms in 2015.

***Additionally, updated premium and tax credit information show that in the 37 States using the HealthCare.gov platform:***

- More than 8 in 10 individuals (nearly 7.7 million, or 87 percent) with a 2015 plan selection through the Marketplaces in the HealthCare.gov states qualify for an advance premium tax credit<sup>13</sup> with an average value of \$263 per person per month (Table 6).
- The average advance premium tax credit covers about 72 percent of the gross premium for individuals who qualify for an advance premium tax credit.
- The average net premium is \$101 per month among individuals with 2015 plan selections through the Marketplaces who qualify for an advance premium tax credit.
- Overall, more than half (55 percent) of the 8.8 million individuals with 2015 plan selections through the Marketplaces in the HealthCare.gov states have 2015 plan selections through the Marketplaces with a monthly premium of \$100 or less after applying the advance premium tax credit; about 8 in 10 had the option of selecting such a plan.

<sup>11</sup> It is important to note that these data generally represent the number of individuals who have selected, or been automatically reenrolled into a 2015 plan through the Marketplaces, with or without payment of premium. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. Data on effectuated enrollment are not yet available.

<sup>12</sup> It is important to note that the reenrollment data in this report may include some individuals who were reenrolled in coverage through the Marketplaces as of 2-15-15 (including SEP activity through 2-22-15), but who may ultimately decide not to retain Marketplace coverage for the remainder of 2015 (for example, because they have obtained coverage through another source such as an employer or Medicaid/CHIP). The plan selection data in future reports will exclude these individuals (e.g., due to the subsequent cancellation or termination of their coverage).

<sup>13</sup> For purposes of this analysis, an individual qualifying for an advance premium tax credit was defined as any individual with an APTC amount >\$0.

**Table 1**

| Key Statistics Relating to the Marketplaces  | Reporting Period:<br>11-15-14 to<br>2-15-15<br>(including SEP Activity Thru<br>2-22-15) |
|--|---|
| Total 2015 Plan Selections in the Marketplaces   | 11,688,074  |
| 2015 Plan Selections in the Marketplaces in States Using the HealthCare.gov Platform (1)                       | 8,838,291   |
| 2015 Plan Selections in the Marketplaces in State-Based Marketplaces Using Their Own Marketplace Platforms (2) | 2,849,783   |

Notes:

(1) The data for the States using the HealthCare.gov platform are for 11-15-2014 to 2-15-2015, including SEP activity through 2-22-15.

(2) The data for most of the States using their own Marketplace platforms are for 11-15-2014 to 2-15-2015, including SEP activity through 2-21-15 (however, the data for CA include SEP activity through 2-22-15).

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

- ***More Than 4.6 Million People Who Did Not Have Marketplace Coverage at the Beginning of the 2015 Open Enrollment Period Selected Plans Through the Marketplaces.***

More than 8.84 million individuals have selected or been automatically reenrolled into a 2015 plan through the Marketplaces as of 2-15-15 in HealthCare.gov states (see Table 2). Of that total, 53 percent (more than 4.6 million) are plan selections by new consumers who did not have a plan selection through the Marketplaces as of November 2014,<sup>14</sup> and 47 percent (nearly 4.2 million) are plan selections for consumers who are reenrolling in coverage through the Marketplaces.

- ***Many of the Consumers Who Were Reenrolling in Coverage in the HealthCare.gov States Returned to the Marketplaces and Selected a Plan.***

Within the HealthCare.gov states, in addition to the 4.6 million new consumers who selected 2015 coverage through the Marketplaces, 2.2 million active reenrollees also returned to the Marketplaces and selected a 2015 plan as of 2-15-15 (see Table 2).

<sup>14</sup> The nearly 4.7 million new consumers in HealthCare.gov states includes a small number of individuals who previously had 2014 coverage through the Marketplaces in Nevada and Oregon, which switched from using their own Marketplace platforms for the 2014 coverage year to using the HealthCare.gov Marketplace platform for the 2015 coverage year.

The 2.2 million active reenrollees who shopped for coverage represented more than half (53 percent) of the nearly 4.2 million consumers who had an active plan selection through the Marketplaces as of November 2014 and have been reenrolled in 2015 coverage through the Marketplaces. The remaining 47 percent (nearly 2 million) have been automatically reenrolled (see Table 2).

- ***More Than Half of the Reenrollees Who Shopped for Coverage in the HealthCare.gov States Switched Marketplace Plans.***

More than half (1.2 million or 54 percent) of the 2.2 million active reenrollees who selected 2015 plans through the Marketplaces in the HealthCare.gov states switched plans between the 2014 and 2015 coverage years (see Table 2). The remaining 1.0 million (46 percent) remained in the same Marketplace plan (including those who remained in a similar crosswalked plan).<sup>15</sup>

Overall, the 1.2 million active reenrollees, who shopped for coverage and switched plans, represented 29 percent of the nearly 4.2 million consumers who reenrolled in 2015 coverage through the Marketplaces (including the automatic reenrollees). (See Appendix Table B2 for state-level data on active reenrollees who switched Marketplace plans).

The 29 percent of reenrollees who switched plans is higher than that seen in other programs. For example, studies show that approximately 13 percent of Medicare Part D enrollees change plans in a given year;<sup>16</sup> 12 percent of those active employees with Federal Employee Health Benefit Plan coverage switch plans each year,<sup>17</sup> and only about 7.5 percent of those with employer sponsored coverage<sup>18</sup> switch plans for reasons other than a job change during a given year.

<sup>15</sup> Some consumers' 2014 plans were no longer active for 2015 but the insurer offered a plan with similar benefits, known as a "crosswalk plan." For purposes of this report, active reenrollees who selected the crosswalk plan for the 2015 coverage year (identified based on the information provided by the insurance companies) are not included in the total number who switched plans.

<sup>16</sup> Hoadley, J. et. al., "To Switch or Not to Switch: Are Medicare Beneficiaries Switching Drug Plans To Save Money?" Kaiser Family Foundation, October 2013, accessed at <http://kff.org/medicare/issue-brief/to-switch-or-not-to-switch-are-medicare-beneficiaries-switching-drug-plans-to-save-money/>.

<sup>17</sup> Atherley, A. et. al., "Health Plan Switching Among Members of the Federal Employees Health Benefits Program," *Inquiry* 42:255-265 (Fall 2005), Accessed at <http://www.jstor.org/discover/10.2307/29773204?sid=21106062471743&uid=2&uid=3739584&uid=4&uid=3739256>.

<sup>18</sup> Cunningham, P., "Few Americans Switch Employer Health Plans for Better Quality, Lower Costs," NIHCR Research Brief No. 12, January 2013, accessed at <http://www.nihcr.org/Health-Plan-Switching>.

Table 2

| 2015 Plan Selections Through the Marketplaces in States Using the HealthCare.gov Platform By Enrollment Type | Cumulative<br>11-15-14 to 2-15-15<br>(Including SEP Activity thru 2-22-15) |  |   |                                      |
|--|--|--|---|--------------------------------------|
|  | Number   | Plan Selection Data by Enrollment Type<br>as a % of: |   |                                      |
|  |  | Total Plan Selections<br><i>n=8.84m</i>              | All Consumers Reenrolling in Coverage<br><i>n=4.17m</i> | Active Reenrollees<br><i>n=2.21m</i> |
| Total 2015 Plan Selections through the Marketplaces in HealthCare.gov States (1)                             | 8.84 million   | 100%   | N/A   | N/A                                  |
| New Consumers (2)  | 4.67 million   | 53%  | N/A   | N/A                                  |
| Consumers Reenrolling in 2015 Coverage through the Marketplaces (3)  | 4.17 million   | 47%  | 100%  | N/A                                  |
| Active Reenrollees (4)   | 2.21 million   | 25%  | 53%   | 100%                                 |
| <i>Active Reenrollees Who Remained in the Same Marketplace Plan (2)</i>                                      | <i>1.01 million</i>  | <i>11%</i>   | <i>24%</i>  | <i>46%</i>                           |
| <i>Active Reenrollees Who Switched Marketplace Plans (3)</i>   | <i>1.20 million</i>  | <i>14%</i>   | <i>29%</i>  | <i>54%</i>                           |
| Automatic Reenrollees (5)  | 1.96 million   | 22%  | 47%   | N/A                                  |

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 or been automatically reenrolled into 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 issuer). This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP).

(2) New Consumers includes data on 2015 Marketplace plan selections for individuals who did not have an active Marketplace plan selection in HealthCare.gov as of November 2014. This includes consumers who were entirely new to the Marketplace (e.g., those who had not previously submitted a completed application for 2014 coverage through HealthCare.gov, including some individuals who may have previously had experience with a State-Based Marketplace that was using its own Marketplace platform in 2014); as well as those who had previously submitted a completed application to the Marketplace during the 2014 coverage year (including those whose previous 2014 Marketplace plan selection was cancelled or terminated before November 2014, those who were determined eligible to enroll in a QHP, but did not select a Marketplace plan during the 2014 Coverage Year, and those who submitted a completed application to the Marketplace but were not determined eligible to enroll in a QHP during the 2014 coverage year).

(3) Consumers reenrolling in coverage through the Marketplaces includes data for consumers who had an active Marketplace plan selection in HealthCare.gov as of November 2014 and selected or were automatically reenrolled into a 2015 Marketplace plan (e.g., including data for both active reenrollees and automatic reenrollees). It is important to note that the reenrollment data in this report may include some individuals who were reenrolled in coverage through the Marketplaces as of 2-15-15 (including SEP activity through 2-22-15), but who may ultimately decide not to retain Marketplace coverage for the remainder of 2015 (for example, because they have obtained coverage through another source such as an employer or Medicaid/CHIP). The plan selection data in future reports will exclude these individuals (e.g., due to the subsequent cancellation or termination of their coverage).

(4) Active Reenrollees represents the number of consumers reenrolling in coverage through the Marketplaces who returned to the Marketplace and selected a 2015 plan through the Marketplaces, including some individuals who were initially automatically reenrolled by the Marketplace and subsequently returned to the Marketplaces to select a plan.

(5) Automatic Reenrollees represents the number of consumers reenrolling in coverage through the Marketplaces whose plan selections have a current status of automatically renewed because they have not returned to the Marketplaces to select a plan.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.



- ***Nearly 1.7 Million Consumers in the HealthCare.gov States Selected a Marketplace Plan During the Last Month of the 2015 Open Enrollment Period***

The Marketplaces in the HealthCare.gov states experienced additional enrollment as the close of the 2015 Open Enrollment period approached.

Table 3 shows that nearly 1.7 million of the more than 8.8 million plan selections (19 percent) for consumers in the HealthCare.gov states during the 2015 Open Enrollment period occurred during the last month of the Open Enrollment period (between 1-16-15 and 2-15-15, including SEP activity through 2-22-15). By comparison, 51 percent of those who selected a plan in the 2014 Open Enrollment Period in the HealthCare.gov states (nearly 3.0 million out of 5.4 million) did so between 3-2-14 and 3-31-14 (including SEP activity through 4-19-14).<sup>19</sup> Note that in 2014, all consumers were new consumers and there was no renewal process. When looking only at new consumers for the 2015 Open Enrollment Period, a greater proportion waited until the end. Specifically, about 36 percent of the more than 4.6 million new consumers who selected 2015 plans through the Marketplaces in the HealthCare.gov states did so during the last month of the open enrollment period (including SEP activity through 2-22-15).

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<sup>19</sup> For more information, please see the 2014 Open Enrollment Period Marketplace Summary Enrollment Report, which can be accessed at [http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/ib\\_2014Apr\\_enrollment.pdf](http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/ib_2014Apr_enrollment.pdf).



**Table 3**

| 2015 Plan Selections through the Marketplaces in States Using the HealthCare.gov Platform By Plan Selection Date                                   | Total Plan Selections |            | Plan Selections By New Consumers (1) |            |
|--|-----------------------|------------|--------------------------------------|------------|
|  | Number                | % of Total | Number                               | % of Total |
| Total 2015 Plan Selections through the Marketplaces in HealthCare.gov States, 11-14-14 to 2-15-15 (including SEP activity through 2-22-15) (2) (3) | 8.84 million          | 100%       | 4.67 million                         | 100%       |
| Number With Plan Selection Dates During the First Two Months of the Open Enrollment Period (11-15-14 to 1-16-15)                                   | 7.16 million          | 81%        | 3.00 million                         | 64%        |
| Number Who Selected a Plan Through the Marketplaces During the Last Month of the Open Enrollment Period (including SEP activity through 2-22-15)   | 1.68 million          | 19%        | 1.67 million                         | 36%        |

Notes: Numbers may not add to totals due to rounding

(1) New Consumers includes data on 2015 Marketplace plan selections for individuals who did not have an active Marketplace plan selection in HealthCare.gov as of November 2014. This includes consumers who were entirely new to the Marketplace (e.g., those who had not previously submitted a completed application for 2014 coverage through HealthCare.gov, including some individuals who may have previously had experience with a State-Based Marketplace that was using its own Marketplace platform in 2014); as well as those who had previously submitted a completed application to the Marketplace during the 2014 coverage year (including those whose previous 2014 Marketplace plan selection was cancelled or terminated before November 2014, those who were determined eligible to enroll in a QHP, but did not select a Marketplace plan during the 2014 Coverage Year, and those who submitted a completed application to the Marketplace but were not determined eligible to enroll in a QHP during the 2014 coverage year).

(2) Total 2015 Marketplace Plan Selections represents cumulative data on the number of unique individuals who have selected or been automatically reenrolled into 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 issuer). This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP).

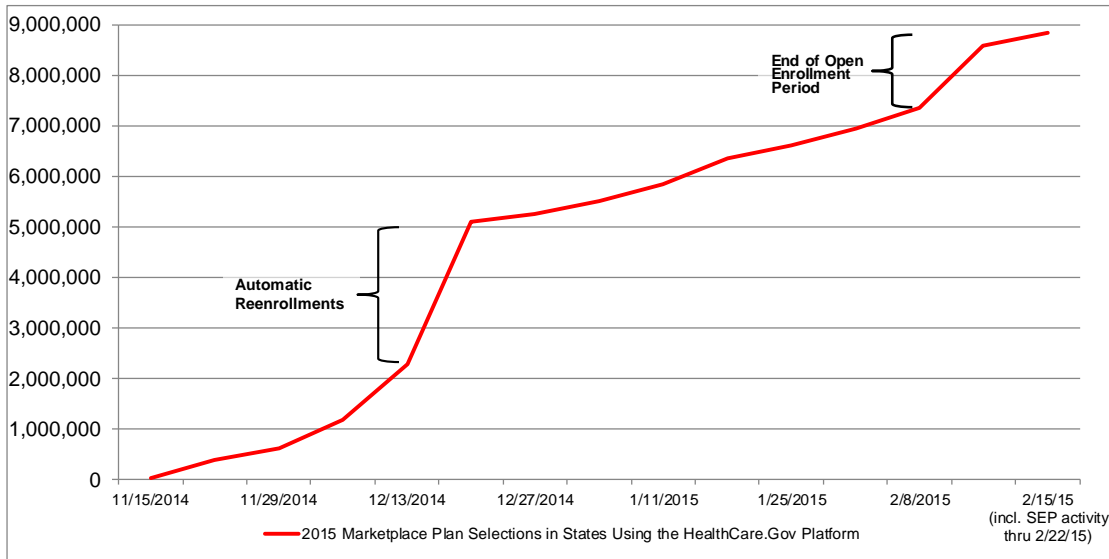
(3) Special Enrollment Period (SEP) activity includes plan selections that were made between 2-16-15 and 2-22-15 by those who qualified for an SEP because they were “in line” on 2-15-15, as well as those who experienced a qualifying life event or a complex situation related to applying for coverage in the Marketplace with coverage effective on March 1, 2015.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

**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 2-15-15 (including SEP Activity thru 2-22-15)**

The number of 2015 Marketplace plan selections increased by 1.7 million between 1-16-15 and 2-15-15, including SEP activity thru 2-22-15 (from more than 7.1 million to 8.8 million)



Notes: Represents cumulative sums of weekly data (Sunday to Saturday) on the 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 3-6-15

- **Interest in the Marketplaces in HealthCare.gov States Has Been High.** – During the 2015 Open Enrollment period:
  - o 35.2 million visitors used the HealthCare.gov and CuidadoDeSalud.gov websites;
  - o 16.8 million calls were made to the Marketplace call center for the HealthCare.gov states;
  - o 9.2 million completed applications for 2015 coverage were submitted; and
  - o 12.4 million individuals were included in these completed applications.<sup>20</sup>

<sup>20</sup> A single completed application form that is submitted to the Marketplace can include multiple individual applicants from the same household.

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***Characteristics of 2015 Plan Selections Through the Marketplaces in the HealthCare.gov States Compared to 2014 and Characteristics of New Consumers and Reenrollees in 2015***

Generally, the demographic characteristics of consumers selecting plans through the Marketplaces in the HealthCare.gov states during the 2014 and 2015 Open Enrollment Periods were quite similar (see Table 4).

There were also some demographic differences between new consumers in 2015 and consumers reenrolling in coverage through the Marketplaces. Most notably, new consumers were more likely to be young adults, less likely to select a silver plan, more likely to be African-American or Latino, and less likely to be White.

As noted in the 2014 summary enrollment report,<sup>21</sup> the data on race and ethnicity should be interpreted with great caution since more than one-third of enrollees do not provide these data.

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<sup>21</sup> 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](http://aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/ib_2014Apr_enrollment.pdf).

Table 4

| Comparison of Selected Characteristics of Plan Selections through the Marketplaces in States Using the HealthCare.gov Platform | 2014 Open Enrollment Period (2) | 2015 Open Enrollment Period (3) |                        |                    |                       |
|--|---------------------------------|---------------------------------|------------------------|--------------------|-----------------------|
|  | Total Plan Selections           | Total Plan Selections           | By Reenrollment Status |                    |                       |
|  |                                 |                                 | New Consumers          | Active Reenrollees | Automatic Reenrollees |
| Total Number of Individuals Who Have Selected a 2015 Plan Through the Marketplaces in the HealthCare.gov States (1)            | 5.44 million                    | 8.84 million                    | 4.67 million           | 2.21 million       | 1.96 million          |
| <i>Males who have selected a Marketplace plan (5)</i>  | 45%                             | 46%                             | 47%                    | 43%                | 46%                   |
| <i>Females who have selected a Marketplace plan (5)</i>  | 55%                             | 54%                             | 53%                    | 57%                | 54%                   |
| <i>0 to 34 year olds who have selected a Marketplace plan (5)</i>  | 35%                             | 36%                             | 40%                    | 28%                | 36%                   |
| <i>18 to 34 year olds who have selected a Marketplace plan (5)</i>   | 28%                             | 28%                             | 31%                    | 21%                | 29%                   |
| <i>Individuals who have selected a Silver Marketplace plan (5)</i>   | 69%                             | 69%                             | 66%                    | 72%                | 72%                   |
| <i>Individuals who have selected a Marketplace plan with Financial Assistance (5)</i>  | 86%                             | 87%                             | 86%                    | 91%                | 84%                   |
| <i>African-Americans who have selected a Marketplace plan (5)</i>  | 17%                             | 14%                             | 16%                    | 11%                | 15%                   |
| <i>Latinos who have selected a Marketplace plan (5)</i>  | 11%                             | 11%                             | 12%                    | 10%                | 10%                   |
| <i>Whites who have selected a Marketplace plan (5)</i>   | 63%                             | 65%                             | 63%                    | 69%                | 66%                   |
| <i>Individuals in ZIP Codes designated as Rural who have selected a Marketplace Plan (5)</i>                                   | N/A                             | 17%                             | 17%                    | 18%                | 18%                   |

## Notes:

(1) Represents the cumulative number of unique individuals who have selected or been automatically reenrolled into 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 issuer). This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). See Appendix D for additional technical notes.

(2) Data for the 2014 Open Enrollment Period are for the following reporting period: 10-1-13 to 3-31-14 (including SEP activity through 4-19-14). 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) Data for the 2015 Open Enrollment Period are for the following reporting period: 11-15-14 to 2-15-15 (including SEP activity through 2-22-15). 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) The data for the 2014 Open Enrollment period correspond with the reporting period for the 2015 Open Enrollment Period.

(5) 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 A1.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

### ***Distribution of 2015 Plan Selections Through the Marketplaces in the HealthCare.gov States By Household Income***

Most (80 percent) of the consumers who selected 2015 plans through the Marketplaces in the HealthCare.gov states during the 2015 Open Enrollment period (11-15-14 to 2-15-15, including SEP activity through 2-22-15) had household incomes that were between 100 percent and 250 percent of the Federal Poverty Level (FPL). However, the observed household income distributions differed between HealthCare.gov states that have and have not expanded Medicaid under the Affordable Care Act (see Table 5).<sup>22</sup>

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<sup>22</sup> As of December 2014, 14 HealthCare.gov states had implemented the expansion of Medicaid under the Affordable Care Act to cover adults under age 65 with incomes up to 133 percent of the Federal Poverty Level. Additionally, Pennsylvania implemented the Medicaid expansion on January 1, 2015 and Indiana the implemented Medicaid expansion on February 1, 2015.

Table 5

| 2015 Plan Selections Through the Marketplaces<br>in States Using the HealthCare.gov Platform<br>by Household Income and Medicaid Expansion Status,<br>11-15-14 to 2-15-15 (including SEP activity thru 2-22-15) |   |  |  |   |  |  |
|---|---|--|--|---|--|--|
| Household Income<br>(% of the Federal<br>Poverty Level (FPL))   | Total Plan Selections   |  |  | Plan Selections for Consumers Renewing<br>Coverage  |  |  |
|   | All States Using<br>the<br>HealthCare.gov<br>Platform for the<br>2015 Coverage<br>Year<br>(37 States) | HealthCare.gov<br>States That<br>Have<br>Implemented<br>the Medicaid<br>Expansion (1)<br>(16 States) | HealthCare.gov<br>States That<br>Have Not<br>Implemented<br>the Medicaid<br>Expansion<br>(21 States) | All States Using<br>the<br>HealthCare.gov<br>Platform for the<br>2015 Coverage<br>Year<br>(37 States) | HealthCare.gov<br>States That<br>Have<br>Implemented<br>the Medicaid<br>Expansion (1)<br>(16 States) | HealthCare.gov<br>States That<br>Have Not<br>Implemented<br>the Medicaid<br>Expansion<br>(21 States) |
| Total 2015 Plan<br>Selections Through the<br>Marketplaces (2)   | 8.84 million  | 2.56 million   | 6.28 million   | 4.17 million  | 1.28 million   | 2.89 million   |
| Plan Selections With<br>Available Data on<br>Household Income (3)   | 8.31 million  | 2.35 million   | 5.97 million   | 3.93 million  | 1.18 million   | 2.75 million   |
| <i>Plan Selections by Household Income (% of Total with Available Data):</i>  |   |  |  |   |  |  |
| <100% of FPL  | 3%  | 2%   | 3%   | 2%  | 2%   | 2%   |
| ≥100% - ≤150% of FPL  | 40%   | 22%  | 47%  | 39%   | 25%  | 45%  |
| >150% - ≤200% of FPL  | 25%   | 32%  | 23%  | 26%   | 31%  | 24%  |
| >200% - ≤250% of FPL  | 15%   | 19%  | 13%  | 15%   | 18%  | 13%  |
| >250% - ≤300% of FPL  | 8%  | 11%  | 7%   | 8%  | 11%  | 7%   |
| >300% - ≤400% of FPL  | 8%  | 11%  | 6%   | 7%  | 10%  | 6%   |
| > 400% of FPL   | 2%  | 3%   | 2%   | 2%  | 3%   | 2%   |

## Notes:

(1) As of December 2014, 14 HealthCare.gov states had implemented the expansion of Medicaid under the Affordable Care Act to cover adults under age 65 with incomes up to 133 percent of the Federal Poverty Level. Additionally, Pennsylvania implemented the Medicaid expansion on January 1, 2015 and Indiana the implemented Medicaid expansion on February 1, 2015. See Appendix D for additional technical notes.

(2) Represents the cumulative number of unique individuals who have selected or been automatically reenrolled into 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 issuer). This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP).

(3) Household Income represents the individual's household income as a percentage of the Federal Poverty Level. The 2014 Federal Poverty Guidelines, which are used in determining premium tax credits for 2015 coverage, can be accessed at <http://aspe.hhs.gov/poverty/14poverty.cfm>.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

### Impact of the Advance Premium Tax Credit on Monthly Premiums

Under the Affordable Care Act, advance premium tax credits are available to reduce premium costs for qualified individuals.<sup>23</sup>

- More than 8 in 10 individuals (nearly 7.7 million, or 87 percent) who selected or were automatically enrolled in a 2015 plan through the Marketplaces in the HealthCare.gov states qualify for an advance premium tax credit<sup>24</sup> with an average value of \$263 per person per month<sup>25</sup> (Table 6).
- The average advance premium tax credit covers about 72 percent of the gross premium for individuals who qualify for an average advance premium tax credit.
- The average net premium after advance premium tax credit is \$101 per month among individuals with 2015 plan selections through the Marketplaces in the HealthCare.gov states who qualify for an advance premium tax credit.

**Table 6**

| Reduction in Average Monthly Premiums from Advance Premium Tax Credits (APTC) in States Using the HealthCare.gov Platform (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |  |                                      |                                     |                      |                                    |   |
|---|--|--------------------------------------|-------------------------------------|----------------------|------------------------------------|---|
| Description   | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (2) | Percent of Plan Selections with APTC | Average Monthly Premium before APTC | Average Monthly APTC | Average Monthly Premium After APTC | Average Percent Reduction in Premium after APTC |
| <b>TOTAL – States Using the HealthCare.gov Platform</b>   | 8.84 million   | 87%                                  | \$364                               | \$263                | \$101                              | 72%   |

Source: ASPE computation of CMS data for 37 states using the HealthCare.gov platform as of 2-15-15 (including SEP activity through 2-22-15).

<sup>23</sup> The premium tax credit (“PTC”) is calculated as the difference between the cost of the adjusted monthly premium of the second-lowest cost silver plan with respect to the applicable taxpayer and the applicable contribution percentage that a person is statutorily required to pay determined by household income. An individual may choose to have all or a portion of the PTC paid in advance (advance premium tax credit or “APTC”) to an issuer of a qualified health plan in order to reduce the cost of monthly insurance premiums. APTCs are generally available for individuals with a projected household income between 100 percent (133 percent in states that have chosen to expand their Medicaid programs) and 400 percent of the Federal Poverty Level (FPL). For 2015, the percentage of household income that a qualified individual or family will pay toward a health insurance premium ranges from 2.01 percent of household income at 100 percent of the FPL to 9.56 percent of income at 400 percent of FPL. For more information on the required contribution percentage, see <http://www.irs.gov/pub/irs-drop/rp-14-37.pdf>.

<sup>24</sup> For purposes of this analysis, an individual qualifying for an advance premium tax credit was defined as any individual with an APTC amount >\$0.

<sup>25</sup> Averages in this brief refer to plan-selection-weighted averages across individuals with plan selections with advance premium tax credits in the 37 HealthCare.gov states. For more information, see the ASPE Issue Brief “Health Insurance Marketplace 2015: Average Premiums After Advance Premium Tax Credits Through January 30 in 37 States Using the HealthCare.gov Platform,” accessed at [http://www.aspe.hhs.gov/health/reports/2015/MarketPlaceEnrollment/APTC/ib\\_APTC.pdf](http://www.aspe.hhs.gov/health/reports/2015/MarketPlaceEnrollment/APTC/ib_APTC.pdf).



### ***Many Consumers Took Advantage of the Availability of 2015 Plans with Premiums of \$100 or Less Through the Marketplaces in the HealthCare.gov States***

- Overall, more than half (55 percent) of the 8.8 million total individuals with 2015 plan selections through the Marketplaces in the HealthCare.gov states have a monthly premium of \$100 or less after applying the advance premium tax credit. About 8 in 10 of these individuals had the option of selecting such a plan (see Table 7).
- Meanwhile, more than 3 in 10 of the 8.8 million total individuals with 2015 plan selections through the Marketplaces in the HealthCare.gov states have a monthly premium of \$50 or less after applying any applicable advance premium tax credit. About 7 in 10 of eligible individuals had the option of selecting such a plan

**Table 7**

| <b>Availability and Selection of Plans With Monthly Premiums of \$100 or Less After the Advance Premium Tax Credit (APTC) through the Marketplaces in States Using the HealthCare.gov Platform (1)</b><br><i>11-15-14 to 2-15-15 (including SEP activity through 2-22-15)</i> |   |   |  |  |   |
|---|---|---|--|--|---|
| <b>Description</b>  | <b>Number of Individuals With 2015 Plan Selections Through the Marketplaces (2)</b> | <b>Availability of Plans With Monthly Premiums of \$100 or Less</b>                             |  | <b>Selection of Plans With Monthly Premiums of \$100 or Less</b>   |   |
|   |   | <b>Percent Who Could Have Selected a Plan with a Monthly Premium of \$50 or Less after APTC</b> | <b>Percent Who Could Have Selected a Plan with a Monthly Premium of \$100 or Less after APTC</b> | <b>Percent Who Selected or Were Automatically Reenrolled in a Plan With a Monthly Premium of \$50 or Less after APTC</b> | <b>Percent Who Selected or Were Automatically Reenrolled in a Plan With a Monthly Premium of \$100 or Less after APTC</b> |
| <b>Total Number of Individuals With 2015 Plan Selections Through the Marketplaces</b>   | 8.84 million  | 66%   | 77%  | 33%  | 55%   |
| <b>Individuals With 2015 Plan Selections With APTC through the Marketplaces</b>   | 7.65 million  | 77%   | 89%  | 38%  | 63%   |

Source: ASPE computation of CMS data for 37 states using the HealthCare.gov platform as of 2-15-15 (including SEP activity through 2-22-15).

### ***Distribution of 2015 Plan Selections Through the Marketplaces in the HealthCare.gov States by Monthly Premium After Tax Credit and Reenrollment Status***

- Consumers who shopped for coverage were more likely to have a 2015 plan selection through the Marketplaces with a monthly premium of \$100 or less after applying the advance premium tax credit – 58 percent for new consumers and 55 percent for reenrollees who returned to the Marketplaces and selected a plan, compared with 46 percent for automatic reenrollees who did not return to the Marketplaces (see Table 8).

**Table 8**

| 2015 Plan Selections Through the Marketplaces in States Using the HealthCare.gov Platform By Monthly Premium After Tax Credit                  | Cumulative 11-15-14 to 2-15-15<br>(Including SEP Activity thru 2-22-15) |                        |                    |                       |
|--|---|------------------------|--------------------|-----------------------|
|  | Total Individuals With 2015 Marketplace Plan Selections                 | By Reenrollment Status |                    |                       |
|  |   | New Consumers          | Active Reenrollees | Automatic Reenrollees |
| Total 2015 Plan Selections Through the Marketplaces in HealthCare.gov States, 11-14-14 to 2-15-15 (including SEP activity through 2-22-15) (3) | 8.84 million  | 4.67 million           | 2.21 million       | 1.96 million          |
| <i>Plan Selections by Monthly Premium After the Advance Premium Tax Credit (APTC):</i>   |   |                        |                    |                       |
| Less Than or Equal to \$100  | 55%   | 58%                    | 55%                | 46%                   |
| ≥\$0 and ≤ \$50  | 33%   | 37%                    | 33%                | 22%                   |
| >\$50 and ≤ \$100  | 22%   | 21%                    | 22%                | 24%                   |
| Greater Than \$100   | 45%   | 42%                    | 45%                | 54%                   |

Source: ASPE computation of CMS data for 37 states using the HealthCare.gov platform as of 2-15-15 (including SEP activity through 2-22-15).

**Table 9**

| 2015 Plan Selections Through the Marketplaces in States Using the HealthCare.gov Platform By Monthly Premium After Tax Credit                  | Cumulative 11-15-14 to 2-15-15<br>(Including SEP Activity thru 2-22-15) |                        |                    |                       |
|--|---|------------------------|--------------------|-----------------------|
|  | Total Individuals With 2015 Marketplace Plan Selections With APTC       | By Reenrollment Status |                    |                       |
|  |   | New Consumers          | Active Reenrollees | Automatic Reenrollees |
| Total 2015 Plan Selections Through the Marketplaces in HealthCare.gov States, 11-14-14 to 2-15-15 (including SEP activity through 2-22-15) (3) | 7.65 million  | 4.01 million           | 2.01 million       | 1.63 million          |
| <i>Plan Selections by Monthly Premium After the Advance Premium Tax Credit (APTC):</i>   |   |                        |                    |                       |
| Less Than or Equal to \$100  | 63%   | 67%                    | 60%                | 55%                   |
| ≥\$0 and ≤ \$50  | 38%   | 43%                    | 37%                | 27%                   |
| >\$50 and ≤ \$100  | 25%   | 24%                    | 23%                | 28%                   |
| Greater Than \$100   | 37%   | 33%                    | 40%                | 45%                   |

Source: ASPE computation of CMS data for 37 states using the HealthCare.gov platform as of 2-15-15 (including SEP activity through 2-22-15).

### ***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 2015 Open Enrollment period, with more than 35 million visitors to the Marketplace websites, 15 million calls to the Marketplace call center, and 9 million completed applications in the HealthCare.gov states as of 2-15-15 (including SEP activity through 2-22-15) (see Table 10).

**Table 10**

| <b>Cumulative Enrollment-Related Information Relating to the Marketplaces in States Using The HealthCare.gov Platform</b> | <b>Reporting Period:<br/>11-15-14 to<br/>2-15-15<br/>(including SEP<br/>Activity Thru<br/>2-22-15) (1)</b> |
|---|--|
| Visitors to the Marketplace Websites (2)  | 35,175,531   |
| Calls to the Marketplace Call Center (3)  | 16,806,861   |
| Number of Completed Applications  | 9,197,913  |
| Number of Individuals Included in Completed Applications  | 12,410,323   |
| Number of Individuals Determined Eligible to Enroll in a 2015 Plan Through the Marketplaces                               | 10,721,940   |

Notes:

(1) The data in this table are for the 11-15-14 to 2-15-15 reporting period. See Appendix D for technical notes.

(2) Visitors to the Marketplace Websites includes 33,845,038 unique visitors on HealthCare.gov and 1,330,493 unique visitors on CuidadoDeSalud.gov between 11-15-14 and 2-15-15, including additional SEP activity through 2-22-15. 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 1,471,607 calls with Spanish-speaking representatives and 15,324,491 other calls between 11-15-14 and 2-15-15, including additional SEP activity through 2-22-15.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

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

Nearly 2.85 million individuals have selected 2015 plans through the Marketplaces in the 14 states (including DC) that are using their own Marketplace platforms for the 2015 coverage year as of 2-15-15 (including SEP activity through 2-21-15).<sup>26</sup> Several states (Maryland, Massachusetts, and Idaho) are unable to separate out data for new consumers and consumers reenrolling in coverage through the Marketplaces due to system vendor changes or other information technology system issues. This includes:

- 357,764 plan selections through the Marketplaces in 3 states reporting all enrollees as new consumers because of systems issues. (Idaho,<sup>27</sup> Maryland, and Massachusetts); and
- 2,492,019 plan selections through the Marketplaces in 11 states reporting data on new consumers, consumers actively reenrolling in Marketplace coverage, and automatic reenrollees (California, Colorado, Connecticut, District of Columbia, Hawaii, Kentucky, Minnesota, New York, Rhode Island, Vermont, and Washington).

Consistent with experience during the 2014 Open Enrollment period, the Marketplaces in the states using their own Marketplace platforms experienced additional plan selections as the close of the 2015 Open Enrollment period approached. Table 11 shows that 16 percent of the nearly 2.85 million plan selections for consumers who selected or were automatically enrolled in Marketplace plans in these states during the 2015 Open Enrollment period (including SEP activity through 2-21-15) occurred during the last month of the Open Enrollment period (between 1-18-15 and 2-15-15, including SEP activity through 2-21-15).

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<sup>26</sup> Data for California are for 11-15-14 to 2-22-15.

<sup>27</sup> Data for Idaho include some automatic reenrollees from their previous HealthCare.gov platform (Idaho used the HealthCare.gov platform during the 2014 coverage year); however, Idaho is treating all plan selections as new in 2015.

**Table 11**

| <b>2015 Plan Selections Through the Marketplaces in States Using Their Own Marketplace Platforms By Plan Selection Date</b>  | <b>Total Plan Selections</b> |                   |
|--|------------------------------|-------------------|
|  | <b>Number</b>                | <b>% of Total</b> |
| Total 2015 Plan Selections Through the Marketplaces in States Using Their Own Marketplace Platforms, 11-14-14 to 2-15-15 ( <i>including SEP activity through 2-22-15</i> ) (2) (3) | 2.85 million                 | 100%              |
| Number With Plan Selection Dates During the First Two Months of the Open Enrollment Period (11-15-14 to 1-17-15)   | 2.38 million                 | 84%               |
| Number Who Selected a Marketplace Plan During the Last Month of the Open Enrollment Period ( <i>including SEP activity through 2-22-15</i> )                                       | 0.47 million                 | 16%               |

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 or been automatically reenrolled into 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 issuer). This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). Except for three states, the data for total number of plan selections removes cancellations and terminations. Minnesota does not remove either from its total plan selection data, whereas DC removes cancellations and terminations from its automatic reenrollment data and New York removes cancellations and terminations from its active and automatic reenrollee data.

(2) Special Enrollment Period (SEP) activity includes plan selections that were made between 2-15-15 and 2-21-15 by those who qualified for an SEP because they were “in line” on 2-15-15, as well as those who experienced a qualifying life event or a complex situation related to applying for coverage in the Marketplace with coverage effective on March 1, 2015.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

This report also includes available data relating to completed applications, eligibility determinations, website visitors, and call center activity (see Table 12); as well as the overall distribution of Marketplace plan selections by gender, age, metal level, and financial assistance status. (See Appendix Table A3 for a summary of available data on the characteristics of Marketplace plan selections in these states, and Appendix Table D3 for a summary of which data are available for each state. Additionally, Appendix Tables C1, C2, C3, C4, and C5 include state-level data for several metrics).

**Table 12**

| <b>Cumulative Enrollment-Related Information on the Marketplaces in States Using Their Own Marketplace Platforms</b>                 | <b>Reporting Period: 2015 Open Enrollment Period (1)</b> |
|--|--|
| Visitors to the Marketplace Websites<br><i>Number of States Reporting: 13</i>  | 13,011,171   |
| Calls to the Marketplace Call Centers<br><i>Number of States Reporting: 14</i>   | 8,110,152  |
| Number of Completed Applications<br><i>Number of States Reporting: 12</i>  | 1,886,934  |
| Number of Individuals Included in Completed Applications<br><i>Number of States Reporting: 12</i>                                    | 3,525,757  |
| Number of Individuals Determined Eligible to Enroll in a 2015 Plan through the Marketplaces<br><i>Number of States Reporting: 14</i> | 3,694,776  |
| Number of Individuals Who Have Selected a 2015 Plan through the Marketplaces (2)<br><i>Number of States Reporting: 14</i>            | 2,849,783  |

## Notes:

(1) Most of the data in this table are for the 11-15-14 to 2-15-15 (including SEP activity through 2-21-15) reporting period with the following exceptions: data for California are for 11-15-14 to 2-15-15 (including SEP activity through 2-22-15).

(2) Total 2015 Marketplace Plan Selections generally 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 issuer). This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated (however, one state, Washington, has reported data on effectuated enrollment). Except for three states, the data for total number of plan selections removes cancellations and terminations. Minnesota does not remove either from its total plan selection data, whereas DC removes cancellations and terminations from its automatic reenrollment data and New York removes cancellations and terminations from its active and automatic reenrollee data. These data do not include a count of the number of individuals who have selected a standalone dental plan. They also generally do not include data for individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP).

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

### 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 platforms. 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 2015 Open Enrollment period – which generally corresponds with data from 11-15-14 to 2-15-15 (including SEP activity through 2-22-15) for the 37 HealthCare.gov states; and from 11-15-14 to 2-15-15 (including SEP activity through 2-22-15) in states that are using their own Marketplace platforms for the 2015 coverage (see Table 13 below).

**Table 13**

| Marketplace Type   | Reporting Period  |
|--|---|
| States Using the HealthCare.gov Marketplace Platform (37 states) | 11-15-14 to 2-15-15 (including SEP activity thru 2-22-15) |
| States Using Their Own Marketplace Platform (14 states)          |   |
| California   | 11-15-14 to 2-15-15 (including SEP activity thru 2-22-15) |
| Other 13 States (including DC)                                   | 11-15-14 to 2-15-15 (including SEP activity thru 2-21-15) |

Data for certain metrics are not available for several of the states that are using their own Marketplace platforms.

It is important to note that some of the 14 states that are using their own Marketplace platforms are not separately reporting data for new consumers and consumers who are reenrolling in coverage through the Marketplaces. Please refer to Appendix D for additional technical notes.

This report also includes available data on the characteristics of individuals who have selected a plan through the Marketplaces for the 37 states that are using the HealthCare.gov platform for 2015, and the 14 states that are using their own Marketplace platforms. 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 2015 Open Enrollment period because the data for the various metrics are counted using comparable definitions for data elements across states and Marketplace types.



**SECTION IV: APPENDICES**

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|                    | <ul style="list-style-type: none"> <li>C3 - Total Marketplace Eligibility Determinations, and Marketplace Plan Selections in States Using Their Own Marketplace Platforms, By State</li> </ul>  | Page 58 |
|                    | <ul style="list-style-type: none"> <li>C4 - Total Marketplace Plan Selections by Financial Assistance Status in States Using Their Own Marketplace Platforms, By State</li> </ul>   | Page 60 |
|                    | <ul style="list-style-type: none"> <li>C5 - Total Marketplace Plan Selections by Age in States Using Their Own Marketplace Platforms, By State</li> </ul>   | Page 62 |
| <b>Appendix D:</b> | <b>Technical Notes</b>  | Page 64 |

## APPENDIX TABLE A1

| Marketplace Plan Selections by Gender, Age, Metal Level, and Financial Assistance,<br>Marketplaces Total<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) (1) |  |  |
|--|--|--|
| Characteristics  | Marketplaces Total<br>(States Using the HealthCare.gov Platform and States<br>Using Their Own Marketplace Platforms) |  |
|  | Number<br>11-15-14 to 2-15-15<br>(including SEP activity<br>through 2-22-15)<br>(2)                                  | % of Available Data,<br>Excluding Unknown<br>(3) |
| <b>Total Who Have Selected a Marketplace Plan</b>  |  |  |
| Total Number of Individuals Who Have Selected or<br>Been Automatically Reenrolled Into a 2015<br>Marketplace Plan  | 11,688,074   | n/a  |
| <b>By Gender</b>   |  |  |
| Female   | 6,281,662  | 54%  |
| Male   | 5,398,069  | 46%  |
| <b>Subtotal: Plan Selections With Available Data<br/>on Gender</b>   | 11,679,731   | 100%   |
| Unknown Gender   | 8,343  | n/a  |
| <b>By Age</b>  |  |  |
| Age < 18   | 890,017  | 8%   |
| Age 18-25  | 1,269,792  | 11%  |
| Age 26-34  | 1,982,477  | 17%  |
| Age 35-44  | 1,940,164  | 17%  |
| Age 45-54  | 2,559,338  | 22%  |
| Age 55-64  | 2,947,749  | 25%  |
| Age ≥65  | 74,824   | 1%   |
| <b>Subtotal: Plan Selections With Available Data<br/>on Age (2)</b>  | 11,664,361   | 100%   |
| Unknown Age  | 3,001  | n/a  |
| Ages 18 to 34  | 3,252,269  | 28%  |
| Ages 0 to 34   | 4,142,286  | 36%  |
| <b>By Metal Level</b>  |  |  |
| Bronze   | 2,574,807  | 22%  |
| Silver   | 7,801,379  | 67%  |

| <b>Marketplace Plan Selections by Gender, Age, Metal Level, and Financial Assistance,<br/>Marketplaces Total</b><br><i>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) (1)</i> |   |   |
|---|---|---|
| <b>Characteristics</b>  | <b>Marketplaces Total</b><br><i>(States Using the HealthCare.gov Platform and States<br/>Using Their Own Marketplace Platforms)</i> |   |
|   | <b>Number<br/>11-15-14 to 2-15-15</b><br><i>(including SEP activity<br/>through 2-22-15)</i><br><b>(2)</b>                          | <b>% of Available Data,<br/>Excluding Unknown</b><br><b>(3)</b> |
| Gold  | 794,853   | 7%  |
| Platinum  | 381,989   | 3%  |
| Catastrophic  | 110,304   | 1%  |
| <b>Subtotal: Plan Selections With Available Data<br/>on Metal Level (4)</b>   | 11,663,332  | 100%  |
| Standalone Dental   | 1,402,616   | n/a   |
| Unknown Metal Level   | 75,060  | n/a   |
| <b>By Financial Assistance Status</b>   |   |   |
| With Financial Assistance   | 9,941,820   | 86%   |
| Without Financial Assistance  | 1,682,145   | 14%   |
| <b>Subtotal: Plan Selections With Available Data<br/>on Financial Assistance (2)</b>  | 11,623,965  | 100%  |
| Unknown Financial Assistance Status   | 0   | 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). Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections for all but three states (Minnesota, DC and New York). These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). Data for the 37 HealthCare.gov States include SEP activity through 2-22-15; data for the 15 States using their own Marketplace platforms include SEP activity through 2-21-15 (with the exception of CA, which includes SEP activity through 2-22-15). For additional technical notes, please refer to Appendix D 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 issuer) during the reference period, excluding plan selections with unknown data for a given metric. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated.

(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. 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 3-6-15.

## APPENDIX TABLE A2

| Marketplace Plan Selections by Gender, Age, Metal Level, Financial Assistance Status, Race/Ethnicity, and Rural Status<br>in States Using the HealthCare.gov Platform (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |   |  |
|---|---|--|
| Characteristics   | States Using the HealthCare.gov Platform for the<br>2015 Coverage Year<br>(37 States) |  |
|   | Number<br>11-15-14 to 2-15-15<br>(including SEP activity<br>through 2-22-15)<br>(2)   | % of Available Data,<br>Excluding Unknown<br>(3) |
| <b>Total Who Have Selected a Marketplace Plan</b>   |   |  |
| Total Number of Individuals Who Have Selected or Been Automatically Reenrolled Into a 2015 Marketplace Plan   | 8,838,291   | n/a  |
| <b>By Gender</b>  |   |  |
| Female  | 4,798,629   | 54%  |
| Male  | 4,034,320   | 46%  |
| <b>Subtotal: Plan Selections With Available Data on Gender</b>  | 8,832,949   | 100%   |
| Unknown Gender  | 5,342   | n/a  |
| <b>By Age</b>   |   |  |
| Age < 18  | 726,305   | 8%   |
| Age 18-25   | 990,751   | 11%  |
| Age 26-34   | 1,479,091   | 17%  |
| Age 35-44   | 1,474,514   | 17%  |
| Age 45-54   | 1,912,050   | 22%  |
| Age 55-64   | 2,182,380   | 25%  |
| Age ≥65   | 52,488  | 1%   |
| <b>Subtotal: Plan Selections With Available Data on Age (2)</b>   | 8,817,579   | 100%   |
| Unknown Age   | n/a   | n/a  |
| Ages 18 to 34   | 2,469,842   | 28%  |
| Ages 0 to 34  | 3,196,147   | 36%  |
| <b>By Metal Level</b>   |   |  |
| Bronze  | 1,872,457   | 21%  |
| Silver  | 6,090,199   | 69%  |

| <b>Marketplace Plan Selections by Gender, Age, Metal Level, Financial Assistance Status, Race/Ethnicity, and Rural Status<br/>in States Using the HealthCare.gov Platform (1)</b><br><i>11-15-14 to 2-15-15 (including SEP activity through 2-22-15)</i> |  |   |
|--|--|---|
| Characteristics  | <b>States Using the HealthCare.gov Platform for the<br/>2015 Coverage Year</b><br><i>(37 States)</i>       |   |
|  | <b>Number<br/>11-15-14 to 2-15-15</b><br><i>(including SEP activity<br/>through 2-22-15)</i><br><b>(2)</b> | <b>% of Available Data,<br/>Excluding Unknown</b><br><b>(3)</b> |
| Gold   | 573,641  | 6%  |
| Platinum   | 225,074  | 3%  |
| Catastrophic   | 76,920   | 1%  |
| <b>Subtotal: Plan Selections With Available Data<br/>on Metal Level (4)</b>  | 8,838,291  | 100%  |
| Standalone Dental  | 1,377,874  | n/a   |
| Unknown Metal Level  | 0  | n/a   |
| <b>By Financial Assistance Status</b>  |  |   |
| With Financial Assistance  | 7,690,911  | 87%   |
| Without Financial Assistance   | 1,147,380  | 13%   |
| <b>Subtotal: Plan Selections With Available Data<br/>on Financial Assistance (2)</b>   | 8,838,291  | 100%  |
| Unknown Financial Assistance Status  | n/a  | n/a   |
| <b>By Self-Reported Race/Ethnicity</b>   |  |   |
| American Indian / Alaska Native  | 26,314   | 0%  |
| Asian  | 460,293  | 8%  |
| Native Hawaiian / Pacific Islander   | 5,145  | 0%  |
| African-American   | 789,498  | 14%   |
| Latino   | 613,053  | 11%   |
| White  | 3,649,620  | 65%   |
| Multiracial  | 76,609   | 1%  |
| <b>Subtotal: Plan Selections With Available Data<br/>on Self-Reported Race/Ethnicity</b>   | 5,620,532  | 100%  |
| Unknown Race/Ethnicity   | 3,217,759  | n/a   |
| <b>By Rural Status</b>   |  |   |
| In ZIP Codes Designated as Rural   | 1,542,970  | 17%   |
| In ZIP Codes Designated as Urban   | 7,295,321  | 83%   |

| <b>Marketplace Plan Selections by Gender, Age, Metal Level, Financial Assistance Status, Race/Ethnicity, and Rural Status</b><br><b>in States Using the HealthCare.gov Platform (1)</b><br><i>11-15-14 to 2-15-15 (including SEP activity through 2-22-15)</i> |  |   |
|--|--|---|
| Characteristics  | <b>States Using the HealthCare.gov Platform for the 2015 Coverage Year</b><br><i>(37 States)</i>             |   |
|  | <b>Number</b><br><b>11-15-14 to 2-15-15</b><br><i>(including SEP activity through 2-22-15)</i><br><b>(2)</b> | <b>% of Available Data, Excluding Unknown</b><br><b>(3)</b> |
| <b>Subtotal: Plan Selections With Available Data on Rural Status</b>   | 8,838,291  | 100%  |
| Unknown Rural Status   | n/a  | 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). Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). For additional technical notes, please refer to Appendix D 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 issuer) during the reference period, excluding plan selections with unknown data for a given metric. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated.

(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. 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 3-6-15.

APPENDIX TABLE A3

| Marketplace Plan Selections by Gender and Age; Gender and Metal Level; Financial Assistance Status and Metal Level; and Metal Level and Age in States Using the HealthCare.gov Platform (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |                             |  |                                   |                                 |  |                                   |                               |  |                                   |
|---|-----------------------------|--|-----------------------------------|---------------------------------|--|-----------------------------------|-------------------------------|--|-----------------------------------|
| Description   | HealthCare.gov States Total |  |                                   | Females – HealthCare.gov States |  |                                   | Males – HealthCare.gov States |  |                                   |
|   | Number (2)                  | % of Available Data, Excluding Unknown (3) |                                   | Number (2)                      | % of Available Data, Excluding Unknown (3) |                                   | Number (2)                    | % of Available Data, Excluding Unknown (3) |                                   |
| <b>Total Who Have Selected a Marketplace Plan</b>   |                             |  |                                   |                                 |  |                                   |                               |  |                                   |
| Number of Individuals Who Have Selected a Marketplace Plan  | 8,838,291                   | n/a  | n/a                               | 4,798,629                       | n/a  | n/a                               | 4,034,320                     | n/a  | n/a                               |
| <b>By Gender and Age</b>  | <b>Number</b>               | <b>% of Gender Total (4)</b>               | <b>% of Age Group Total (5)</b>   | <b>Number</b>                   | <b>% of Gender Total (4)</b>               | <b>% of Age Group Total (5)</b>   | <b>Number</b>                 | <b>% of Gender Total (4)</b>               | <b>% of Age Group Total (5)</b>   |
| Age < 18  | 726,305                     | 8%   | 100%                              | 354,662                         | 7%   | 49%                               | 371,374                       | 9%   | 51%                               |
| Age 18-25   | 990,751                     | 11%  | 100%                              | 528,623                         | 11%  | 53%                               | 461,501                       | 11%  | 47%                               |
| Age 26-34   | 1,479,091                   | 17%  | 100%                              | 787,537                         | 16%  | 53%                               | 690,799                       | 17%  | 47%                               |
| Age 35-44   | 1,474,514                   | 17%  | 100%                              | 791,804                         | 17%  | 54%                               | 681,786                       | 17%  | 46%                               |
| Age 45-54   | 1,912,050                   | 22%  | 100%                              | 1,049,934                       | 22%  | 55%                               | 860,837                       | 21%  | 45%                               |
| Age 55-64   | 2,182,380                   | 25%  | 100%                              | 1,244,747                       | 26%  | 57%                               | 936,186                       | 23%  | 43%                               |
| Age ≥65   | 52,488                      | 1%   | 100%                              | 29,418                          | 1%   | 56%                               | 23,038                        | 1%   | 44%                               |
| <b>Subtotal: Plan Selections With Available Data on Age</b>   | 8,817,579                   | 100%                                       | 100%                              | 4,786,725                       | 100%                                       | 54%                               | 4,025,521                     | 100%                                       | 46%                               |
| Unknown Age   | n/a                         | n/a  | n/a                               | n/a                             | n/a  | n/a                               | n/a                           | n/a  | n/a                               |
| Ages 18 to34  | 2,469,842                   | 28%  | 100%                              | 1,316,160                       | 27%  | 53%                               | 1,152,300                     | 29%  | 47%                               |
| Ages 0 to 34  | 3,196,147                   | 36%  | 100%                              | 1,670,822                       | 35%  | 52%                               | 1,523,674                     | 38%  | 48%                               |
| <b>By Gender and Metal Level</b>  | <b>Number</b>               | <b>% of Gender Total (4)</b>               | <b>% of Metal Level Total (5)</b> | <b>Number</b>                   | <b>% of Gender Total (4)</b>               | <b>% of Metal Level Total (5)</b> | <b>Number</b>                 | <b>% of Gender Total (4)</b>               | <b>% of Metal Level Total (5)</b> |
| Bronze  | 1,872,457                   | 21%  | 100%                              | 950,185                         | 20%  | 51%                               | 921,300                       | 23%  | 49%                               |
| Silver  | 6,090,199                   | 69%  | 100%                              | 3,393,112                       | 71%  | 56%                               | 2,693,099                     | 67%  | 44%                               |
| Gold  | 573,641                     | 6%   | 100%                              | 301,753                         | 6%   | 53%                               | 271,621                       | 7%   | 47%                               |
| Platinum  | 225,074                     | 3%   | 100%                              | 116,818                         | 2%   | 52%                               | 108,158                       | 3%   | 48%                               |
| Catastrophic  | 76,920                      | 1%   | 100%                              | 36,761                          | 1%   | 48%                               | 40,142                        | 1%   | 52%                               |
| <b>Subtotal: Plan Selections With Available Data on Metal Level</b>   | 8,838,291                   | 100%                                       | 100%                              | 4,798,629                       | 100%                                       | 54%                               | 4,034,320                     | 100%                                       | 46%                               |
| Standalone Dental   | 1,377,874                   | n/a  | n/a                               | 751,805                         | n/a  | n/a                               | 625,307                       | n/a  | n/a                               |
| Unknown Metal Level   | 0                           | n/a  | n/a                               | n/a                             | n/a  | n/a                               | n/a                           | n/a  | n/a                               |



| Description   | HealthCare.gov States Total |   |                                   | With Financial Assistance - HealthCare.gov States |   |                                   | Without Financial Assistance - HealthCare.gov States |   |                                   |
|---|-----------------------------|---|-----------------------------------|---|---|-----------------------------------|--|---|-----------------------------------|
|   | Number (2)                  | % of Available Data, Excluding Unknown (3)        |                                   | Number (2)  | % of Available Data, Excluding Unknown (3)        |                                   | Number (2)   | % of Available Data, Excluding Unknown (3)        |                                   |
| <b>Total Who Have Selected a Marketplace Plan</b>                   |                             |   |                                   |   |   |                                   |  |   |                                   |
| Number of Individuals Who Have Selected a Marketplace Plan          | 8,838,291                   | n/a   | n/a                               | 7,690,911   | n/a   | n/a                               | 1,147,380  | n/a   | n/a                               |
| <b>By Financial Assistance Status and Metal Level (6)</b>           | <b>Number</b>               | <b>% of Financial Assistance Status Total (4)</b> | <b>% of Metal Level Total (5)</b> | <b>Number</b>                                     | <b>% of Financial Assistance Status Total (4)</b> | <b>% of Metal Level Total (5)</b> | <b>Number</b>  | <b>% of Financial Assistance Status Total (4)</b> | <b>% of Metal Level Total (5)</b> |
| Bronze  | 1,872,457                   | 21%   | 100%                              | 1,471,197   | 19%   | 79%                               | 401,260  | 35%   | 21%                               |
| Silver  | 6,090,199                   | 69%   | 100%                              | 5,725,012   | 74%   | 94%                               | 365,187  | 32%   | 6%                                |
| Gold  | 573,641                     | 6%  | 100%                              | 360,353   | 5%  | 63%                               | 213,288  | 19%   | 37%                               |
| Platinum  | 225,074                     | 3%  | 100%                              | 134,354   | 2%  | 60%                               | 90,720   | 8%  | 40%                               |
| Catastrophic  | 76,920                      | 1%  | 100%                              | 0   | 0%  | 0%                                | 76,920   | 7%  | 100%                              |
| <b>Subtotal: Plan Selections With Available Data on Metal Level</b> | 8,838,291                   | 100%  | 100%                              | 7,690,911   | 100%  | 87%                               | 1,147,380  | 100%  | 13%                               |
| Standalone Dental   | 1,377,874                   | n/a   | n/a                               | 0   | n/a   | n/a                               | 0  | n/a   | n/a                               |
| Unknown Metal Level   | 0                           | n/a   | n/a                               | 0   | n/a   | n/a                               | 0  | n/a   | n/a                               |

| Description   | HealthCare.gov States Total |  |                                 | Bronze Plan Selections |  |                                 | Silver Plan Selections |  |                                 |
|---|-----------------------------|--|---------------------------------|------------------------|--|---------------------------------|------------------------|--|---------------------------------|
|   | Number (2)                  | % of Available Data, Excluding Unknown (3) |                                 | Number (2)             | % of Available Data, Excluding Unknown (3) |                                 | Number (2)             | % of Available Data, Excluding Unknown (3) |                                 |
| <b>Total Who Have Selected a Marketplace Plan</b>           |                             |  |                                 |                        |  |                                 |                        |  |                                 |
| Number of Individuals Who Have Selected a Marketplace Plan  | 8,838,291                   | n/a  | n/a                             | 1,872,457              | n/a  | n/a                             | 6,090,199              | n/a  | n/a                             |
| <b>By Metal Level and Age (6)</b>                           | <b>Number</b>               | <b>% of Metal Level Total (4)</b>          | <b>% of Age Group Total (5)</b> | <b>Number</b>          | <b>% of Metal Level Total (4)</b>          | <b>% of Age Group Total (5)</b> | <b>Number</b>          | <b>% of Metal Level Total (4)</b>          | <b>% of Age Group Total (5)</b> |
| Age < 18  | 726,305                     | 8%   | 100%                            | 168,300                | 9%   | 23%                             | 429,614                | 7%   | 59%                             |
| Age 18-25   | 990,751                     | 11%  | 100%                            | 194,316                | 10%  | 20%                             | 705,264                | 12%  | 71%                             |
| Age 26-34   | 1,479,091                   | 17%  | 100%                            | 316,319                | 17%  | 21%                             | 989,441                | 16%  | 67%                             |
| Age 35-44   | 1,474,514                   | 17%  | 100%                            | 288,780                | 15%  | 20%                             | 1,044,435              | 17%  | 71%                             |
| Age 45-54   | 1,912,050                   | 22%  | 100%                            | 402,611                | 22%  | 21%                             | 1,353,224              | 22%  | 71%                             |
| Age 55-64   | 2,182,380                   | 25%  | 100%                            | 487,546                | 26%  | 22%                             | 1,515,303              | 25%  | 69%                             |
| Age ≥65   | 52,488                      | 1%   | 100%                            | 9,540                  | 1%   | 18%                             | 39,722                 | 1%   | 76%                             |
| <b>Subtotal: Plan Selections With Available Data on Age</b> | 8,817,579                   | 100%                                       | 100%                            | 1,867,412              | 100%                                       | 21%                             | 6,077,003              | 100%                                       | 69%                             |
| Unknown Age   | n/a                         | n/a  | n/a                             | n/a                    | n/a  | n/a                             | n/a                    | n/a  | n/a                             |
| Ages 18 to34  | 2,469,842                   | 28%  | 100%                            | 510,635                | 27%  | 21%                             | 1,694,705              | 28%  | 69%                             |
| Ages 0 to 34  | 3,196,147                   | 36%  | 100%                            | 678,935                | 36%  | 21%                             | 2,124,319              | 35%  | 66%                             |

| Description   | Gold Plan Selections |   |   | Platinum Plan Selections |   |   | Catastrophic Plan Selections |   |   |
|---|----------------------|---|---|--------------------------|---|---|------------------------------|---|---|
|   | Number<br>(2)        | % of Available<br>Data, Excluding<br>Unknown<br>(3) |   | Number<br>(2)            | % of Available<br>Data, Excluding<br>Unknown<br>(3) |   | Number<br>(2)                | % of Available<br>Data, Excluding<br>Unknown<br>(3) |   |
| <b>Total Who Have Selected a Marketplace Plan</b>                       |                      |   |   |                          |   |   |                              |   |   |
| Number of<br>Individuals Who<br>Have Selected a<br>Marketplace Plan     | 573,641              | n/a   | n/a   | 225,074                  | n/a   | n/a   | 76,920                       | n/a   | n/a   |
| <b>By Metal Level<br/>and Age (6)</b>                                   | <b>Number</b>        | <b>% of<br/>Metal<br/>Level<br/>Total<br/>(4)</b>   | <b>% of<br/>Age<br/>Group<br/>Total<br/>(5)</b> | <b>Number</b>            | <b>% of<br/>Metal<br/>Level<br/>Total<br/>(4)</b>   | <b>% of<br/>Age<br/>Group<br/>Total<br/>(5)</b> | <b>Number</b>                | <b>% of<br/>Metal<br/>Level<br/>Total (4)</b>       | <b>% of<br/>Age<br/>Group<br/>Total<br/>(5)</b> |
| Age < 18  | 89,511               | 16%   | 12%   | 35,230                   | 16%   | 5%  | 3,650                        | 5%  | 1%  |
| Age 18-25   | 45,992               | 8%  | 5%  | 19,500                   | 9%  | 2%  | 25,679                       | 34%   | 3%  |
| Age 26-34   | 92,832               | 16%   | 6%  | 42,376                   | 19%   | 3%  | 38,123                       | 50%   | 3%  |
| Age 35-44   | 93,299               | 16%   | 6%  | 43,676                   | 19%   | 3%  | 4,324                        | 6%  | 0%  |
| Age 45-54   | 110,297              | 19%   | 6%  | 42,789                   | 19%   | 2%  | 3,129                        | 4%  | 0%  |
| Age 55-64   | 137,900              | 24%   | 6%  | 39,890                   | 18%   | 2%  | 1,741                        | 2%  | 0%  |
| Age ≥65   | 2,245                | 0%  | 4%  | 978                      | 0%  | 2%  | 3                            | 0%  | 0%  |
| <b>Subtotal: Plan<br/>Selections With<br/>Available Data on<br/>Age</b> | 572,076              | 100%  | 6%  | 224,439                  | 100%  | 3%  | 76,649                       | 100%  | 1%  |
| Unknown Age   | 1,565                | n/a   | n/a   | n/a                      | n/a   | n/a   | 267                          | n/a   | n/a   |
| Ages 18 to34  | 138,824              | 24%   | 6%  | 61,876                   | 28%   | 3%  | 63,802                       | 83%   | 3%  |
| Ages 0 to 34  | 228,335              | 40%   | 7%  | 97,106                   | 43%   | 3%  | 67,452                       | 88%   | 2%  |

| Description   | Standalone Dental Plan Selections |  |                                 |
|---|-----------------------------------|--|---------------------------------|
|   | Number (2)                        | % of Available Data, Excluding Unknown (3) |                                 |
| <b>Total Who Have Selected a Marketplace Plan</b>                               |                                   |  |                                 |
| Number of Individuals Who Have Selected a Marketplace Plan                      | 1,377,874                         | n/a  | n/a                             |
| <b>Number Who Have Selected a Standalone Dental Plan By Metal Level and Age</b> | <b>Number</b>                     | <b>% of Metal Level Total (4)</b>          | <b>% of Age Group Total (5)</b> |
| Age < 18  | 99,744                            | 7%   | 14%                             |
| Age 18-25   | 159,052                           | 12%  | 16%                             |
| Age 26-34   | 302,134                           | 22%  | 20%                             |
| Age 35-44   | 260,498                           | 19%  | 18%                             |
| Age 45-54   | 277,464                           | 20%  | 15%                             |
| Age 55-64   | 269,468                           | 20%  | 12%                             |
| Age ≥65   | 6,391                             | 0%   | 12%                             |
| <b>Subtotal: Plan Selections With Available Data on Age</b>                     | <b>1,374,751</b>                  | <b>100%</b>                                | <b>16%</b>                      |
| Unknown Age   | n/a                               | n/a  | n/a                             |
| Ages 18 to 34   | 461,186                           | 34%  | 19%                             |
| Ages 0 to 34  | 560,930                           | 41%  | 18%                             |

## 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). Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). For additional technical notes, please refer to Appendix D 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 issuer) during the reference period, excluding plan selections with unknown data for a given metric. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated.

(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) Represents the vertical percentage for the data that are being shown based on a given set of metrics. For example, if the rows show Age Groups and the columns show Gender, then this percentage represents the data for a given Age Group / Gender combination as a percentage of the comparable Gender total for all Age Groups (e.g., Persons between the ages of 18 and 34 represent X percent of the all of the Female Marketplace Plan selections).

(5) Represents the horizontal percentage of the data that are being shown based on a given set of metrics. For example, if the rows show Age Groups and the columns show Gender, then this percentage represents the data for a given Age Group / Gender combination as a percentage of the comparable Age Group total for all Genders (e.g., Females represent X percent of the Marketplace Plan selections for persons between the ages of 18 and 34).

(6) 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. 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.

## APPENDIX TABLE A4

| Marketplace Plan Selections by Gender, Age, Metal Level, and Financial Assistance Status in State-Based Marketplaces Using Their Own Marketplace Platforms (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-21-15) |  |   |
|--|--|---|
| Characteristics  | State-Based Marketplaces Using Their Own Marketplace Platforms for the 2015 Coverage Year<br>(14 States) |   |
|  | Number 11-15-14 to 2-15-15<br>(including SEP activity through 2-21-15)<br>(2)                            | % of Available Data, Excluding Unknown<br>(3) |
| <b>Total Who Have Selected a Marketplace Plan</b> (14 States Reporting)  |  |   |
| Total Number of Individuals Who Have Selected or Been Automatically Reenrolled Into a 2015 Marketplace Plan  | 2,849,783  | 100%  |
| <b>By Gender</b> (10 States Reporting)   |  |   |
| Female   | 1,483,033  | 52.1%   |
| Male   | 1,363,749  | 47.9%   |
| <b>Subtotal: Plan Selections With Available Data on Gender</b>   | 2,846,782  | 100%  |
| Unknown Gender   | 3,001  | n/a   |
| <b>By Age</b> (10 States Reporting)  |  |   |
| Age < 18   | 163,712  | 5.8%  |
| Age 18-25  | 279,041  | 9.8%  |
| Age 26-34  | 503,386  | 17.7%   |
| Age 35-44  | 465,650  | 16.4%   |
| Age 45-54  | 647,288  | 22.7%   |
| Age 55-64  | 765,369  | 26.9%   |
| Age ≥65  | 22,336   | 0.8%  |
| <b>Subtotal: Plan Selections With Available Data on Age (2)</b>  | 2,846,782  | 100%  |
| Unknown Age  | 3,001  | n/a   |
| Ages 18 to 34  | 782,427  | 27.5%   |
| Ages 0 to 34   | 946,139  | 33.2%   |

| <b>Marketplace Plan Selections by Gender, Age, Metal Level, and Financial Assistance Status in State-Based Marketplaces Using Their Own Marketplace Platforms (1)</b><br><i>11-15-14 to 2-15-15 (including SEP activity through 2-21-15)</i> |  |   |
|--|--|---|
| <b>Characteristics</b>   | <b>State-Based Marketplaces Using Their Own Marketplace Platforms for the 2015 Coverage Year</b><br><i>(14 States)</i> |   |
|  | <b>Number 11-15-14 to 2-15-15</b><br><i>(including SEP activity through 2-21-15)</i><br><b>(2)</b>                     | <b>% of Available Data, Excluding Unknown</b><br><b>(3)</b> |
| <b>By Metal Level (10 States Reporting)</b>  |  |   |
| Bronze   | 702,350  | 24.9%   |
| Silver   | 1,711,180  | 60.6%   |
| Gold   | 221,212  | 7.8%  |
| Platinum   | 156,915  | 5.6%  |
| Catastrophic   | 33,384   | 1.2%  |
| <b>Subtotal: Plan Selections With Available Data on Metal Level (4)</b>  | 2,825,041  | 100%  |
| Standalone Dental  | 24,742   | n/a   |
| Unknown Metal Level  | 75,060   | n/a   |
| <b>By Financial Assistance Status (9 States Reporting)</b>   |  |   |
| With Financial Assistance  | 2,250,909  | 80.8%   |
| Without Financial Assistance   | 534,765  | 19.2%   |
| <b>Subtotal: Plan Selections With Available Data on Financial Assistance (2)</b>   | 2,785,674  | 100%  |
| Unknown Financial Assistance Status  | 64,109   | 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 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 eligible for a Special Enrollment Period (SEP). Except for three states, the data for total number of plan selections removes cancellations and terminations. Minnesota does not remove either from its total plan selection data, whereas DC removes cancellations and terminations from its automatic reenrollment data and New York removes cancellations and terminations from its active and automatic reenrollee data. For additional technical notes, please refer to Appendix D of this report.

All states except DC, Minnesota, New York, and Washington removed cancellations and terminations from all total plan selection data. DC removed cancellations and terminations from its auto reenrollee data. New York removed cancellations and terminations from all of its reenrollee data, active and automatic, but did not remove them from the “new” plan selections. Washington removed terminations from all of their plan selection data. Minnesota did not remove cancellations and terminations from its plan selection data.

(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 issuer) during the reference period, excluding plan selections with unknown data for a given metric. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. (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. 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 3-6-15.

APPENDIX TABLE B1

| Marketplace Plan Selection by Enrollment Type in States Using the HealthCare.gov Platform, by State, 2015 (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |  |                                     |   |                                 |                                      |
|---|--|-------------------------------------|---|---------------------------------|--------------------------------------|
| Description   | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (1) | Distribution By Enrollment Type (2) |   |                                 |                                      |
|   |  | New Consumers (3)                   | Consumers Reenrolling in Marketplace Coverage (4) |                                 |                                      |
|   | Number   |                                     | % of Total  | Total Reenrollees<br>% of Total | Active Reenrollees (5)<br>% of Total |
| <b>States Using the HealthCare.gov Platform (7)</b>   |  |                                     |   |                                 |                                      |
| <b>State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (8)</b>  |  |                                     |   |                                 |                                      |
| Nevada (9)  | 73,596   | 100%                                | 0%  | 0%                              | 0%                                   |
| New Mexico  | 52,358   | 51%                                 | 49%   | 18%                             | 31%                                  |
| Oregon (9)  | 112,024  | 100%                                | 0%  | 0%                              | 0%                                   |
| <b>Subtotal - SBMs Using the HealthCare.gov Platform</b>  | 237,978  | 89%                                 | 11%   | 4%                              | 7%                                   |
| <b>Federally-Facilitated Marketplace (FFM) States</b>   |  |                                     |   |                                 |                                      |
| Alabama   | 171,641  | 54%                                 | 46%   | 25%                             | 21%                                  |
| Alaska  | 21,260   | 52%                                 | 48%   | 35%                             | 13%                                  |
| Arizona   | 205,666  | 48%                                 | 52%   | 25%                             | 27%                                  |
| Arkansas  | 65,684   | 44%                                 | 56%   | 20%                             | 37%                                  |
| Delaware  | 25,036   | 51%                                 | 49%   | 22%                             | 27%                                  |
| Florida   | 1,596,296  | 55%                                 | 45%   | 30%                             | 15%                                  |
| Georgia   | 541,080  | 55%                                 | 45%   | 21%                             | 23%                                  |
| Illinois  | 349,487  | 50%                                 | 50%   | 21%                             | 29%                                  |
| Indiana   | 219,185  | 50%                                 | 50%   | 26%                             | 25%                                  |
| Iowa  | 45,162   | 53%                                 | 47%   | 28%                             | 19%                                  |
| Kansas  | 96,197   | 52%                                 | 48%   | 24%                             | 24%                                  |
| Louisiana   | 186,277  | 58%                                 | 42%   | 21%                             | 21%                                  |
| Maine   | 74,805   | 47%                                 | 53%   | 34%                             | 19%                                  |
| Michigan  | 341,183  | 42%                                 | 58%   | 24%                             | 34%                                  |
| Mississippi   | 104,538  | 56%                                 | 44%   | 15%                             | 29%                                  |
| Missouri  | 253,430  | 52%                                 | 48%   | 26%                             | 22%                                  |
| Montana   | 54,266   | 41%                                 | 59%   | 29%                             | 30%                                  |
| Nebraska  | 74,152   | 53%                                 | 47%   | 33%                             | 14%                                  |
| New Hampshire   | 53,005   | 40%                                 | 60%   | 31%                             | 29%                                  |
| New Jersey  | 254,316  | 48%                                 | 52%   | 30%                             | 23%                                  |
| North Carolina  | 560,357  | 51%                                 | 49%   | 31%                             | 18%                                  |
| North Dakota  | 18,171   | 45%                                 | 55%   | 33%                             | 23%                                  |
| Ohio  | 234,341  | 47%                                 | 53%   | 25%                             | 28%                                  |
| Oklahoma  | 126,115  | 54%                                 | 46%   | 21%                             | 25%                                  |
| Pennsylvania  | 472,697  | 41%                                 | 59%   | 24%                             | 34%                                  |
| South Carolina  | 210,331  | 58%                                 | 42%   | 19%                             | 23%                                  |
| South Dakota  | 21,393   | 47%                                 | 53%   | 25%                             | 28%                                  |
| Tennessee   | 231,440  | 53%                                 | 47%   | 26%                             | 21%                                  |



| Marketplace Plan Selection by Enrollment Type in States Using the HealthCare.gov Platform, by State, 2015 (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |  |                                     |   |                           |            |  |
|---|--|-------------------------------------|---|---------------------------|------------|--|
| Description   | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (1) | Distribution By Enrollment Type (2) |   |                           |            |  |
|   |  | New Consumers (3)                   | Consumers Reenrolling in Marketplace Coverage (4) |                           |            |  |
|   | Total Reenrollees  |                                     | Active Reenrollees (5)                            | Automatic Reenrollees (6) |            |  |
|   | Number   | % of Total                          | % of Total  | % of Total                | % of Total |  |
| Texas   | 1,205,174  | 57%                                 | 43%   | 21%                       | 22%        |  |
| Utah  | 140,612  | 49%                                 | 51%   | 24%                       | 27%        |  |
| Virginia  | 385,154  | 54%                                 | 46%   | 26%                       | 20%        |  |
| West Virginia   | 33,421   | 49%                                 | 51%   | 24%                       | 26%        |  |
| Wisconsin   | 207,349  | 44%                                 | 56%   | 32%                       | 24%        |  |
| Wyoming   | 21,092   | 48%                                 | 52%   | 28%                       | 24%        |  |
| <b>TOTAL – States Using the HealthCare.gov Platform</b>   | <b>8,838,291</b>   | <b>53%</b>                          | <b>47%</b>  | <b>25%</b>                | <b>22%</b> |  |

## 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 these tables represent cumulative data on the number of unique individuals who have selected or have been automatically reenrolled into a 2015 Marketplace medical plan for enrollment through the Marketplaces (with or without the first premium payment having been received directly by the issuer). This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces. For additional technical notes, please refer to Appendix D 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 coverage through the Marketplaces.

(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 issuer) as of the reporting date, and did not have a Marketplace plan selection as of November 2014. Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP).

(4) “Consumers reenrolling in coverage through the Marketplaces” 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 have been automatically reenrolled in coverage through the Marketplaces – with or without the first premium payment having been received directly by the issuer). Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). It is important to note that the reenrollment data in this report may include some individuals who were reenrolled in coverage through the Marketplaces as of 2-15-15 (including SEP activity through 2-22-15), but who may ultimately decide not to retain Marketplace coverage for the remainder of 2015 (for example, because they have obtained coverage through another source such as an employer or Medicaid/CHIP). The plan selection data in future reports will exclude these individuals (e.g., due to the subsequent cancellation or termination of their coverage).

(5) Active reenrollees are individuals 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.

(6) Automatic Reenrollees are individuals who had a Marketplace plan selection as of November 2014, and retain coverage without returning to the Marketplace and selecting a plan. A consumer was automatically reenrolled into their 2014 plan or a plan with similar benefits from their same issuer if they were enrolled in a Marketplace plan in 2014 and did not select a plan ahead of the 12-15-14 deadline. If the consumer realized after the deadline that there was a better plan for their family or needed

to update their information, the consumer could make that change before 2-15-15, and would at that point be considered as having actively selected a plan.

(7) For the HealthCare.gov states, the data on 2015 Marketplace plan selections includes data for new consumers and consumers who reenrolling in Marketplace coverage (including data for consumers who actively reenrolled in coverage through the Marketplaces, and data for automatic reenrollees).

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

(9) 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 coverage through the Marketplaces 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 3-6-15.

APPENDIX TABLE B2

| Plan Switching by Active Reenrollees Who Selected Plans Through the Marketplaces in States Using the HealthCare.gov Platform, By State (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |  |  |                              |   |  |  |   |
|--|--|--|------------------------------|---|--|--|---|
| Description  | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (1) | Total Consumers Reenrolling in Coverage Through the Marketplaces (2) | Total Active Reenrollees (3) | Active Reenrollees Who Switched Plans (4) | Proportion Who Switched Plans:                 |  |   |
|  | Number   | Number   | Number                       | Number                                    | Switchers as a % of Total Plan Selections<br>% | Switchers as a % of Total Reenrollees<br>% | Switchers as a % of Active Reenrollees<br>% |
| <b>States Using the HealthCare.gov Platform</b>  |  |  |                              |   |  |  |   |
| <b>State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (5)</b>   |  |  |                              |   |  |  |   |
| Nevada (6)   | 73,596   | 216  | 216                          | 216                                       | 0%   | 100%                                       | 100%  |
| New Mexico   | 52,358   | 25,398   | 9,195                        | 4,542                                     | 9%   | 18%  | 49%   |
| Oregon (6)   | 112,024  | 279  | 279                          | 278                                       | 0%   | 100%                                       | 100%  |
| <b>Subtotal - SBMs Using the HealthCare.gov Platform</b>   | 237,978  | 25,893   | 9,690                        | 5,036                                     | 2%   | 19%  | 52%   |
| <b>Federally-Facilitated Marketplace (FFM) States</b>  |  |  |                              |   |  |  |   |
| Alabama  | 171,641  | 78,631   | 43,040                       | 9,535                                     | 6%   | 12%  | 22%   |
| Alaska   | 21,260   | 10,214   | 7,376                        | 4,422                                     | 21%  | 43%  | 60%   |
| Arizona  | 205,666  | 107,435  | 51,017                       | 34,965                                    | 17%  | 33%  | 69%   |
| Arkansas   | 65,684   | 37,092   | 12,986                       | 5,180                                     | 8%   | 14%  | 40%   |
| Delaware   | 25,036   | 12,321   | 5,526                        | 2,307                                     | 9%   | 19%  | 42%   |
| Florida  | 1,596,296  | 718,276  | 481,215                      | 294,847                                   | 18%  | 41%  | 61%   |
| Georgia  | 541,080  | 242,228  | 116,062                      | 62,038                                    | 11%  | 26%  | 53%   |
| Illinois   | 349,487  | 174,463  | 73,066                       | 32,388                                    | 9%   | 19%  | 44%   |
| Indiana  | 219,185  | 110,569  | 55,906                       | 37,253                                    | 17%  | 34%  | 67%   |
| Iowa   | 45,162   | 21,152   | 12,598                       | 9,266                                     | 21%  | 44%  | 74%   |
| Kansas   | 96,197   | 46,393   | 23,398                       | 13,922                                    | 14%  | 30%  | 60%   |
| Louisiana  | 186,277  | 78,662   | 39,107                       | 22,649                                    | 12%  | 29%  | 58%   |
| Maine  | 74,805   | 39,765   | 25,509                       | 7,550                                     | 10%  | 19%  | 30%   |
| Michigan   | 341,183  | 197,398  | 80,865                       | 41,072                                    | 12%  | 21%  | 51%   |
| Mississippi  | 104,538  | 46,450   | 16,065                       | 9,715                                     | 9%   | 21%  | 60%   |
| Missouri   | 253,430  | 122,027  | 66,032                       | 39,066                                    | 15%  | 32%  | 59%   |
| Montana  | 54,266   | 32,054   | 15,841                       | 8,167                                     | 15%  | 25%  | 52%   |
| Nebraska   | 74,152   | 34,845   | 24,757                       | 19,741                                    | 27%  | 57%  | 80%   |
| New Hampshire  | 53,005   | 31,805   | 16,220                       | 10,833                                    | 20%  | 34%  | 67%   |
| New Jersey   | 254,316  | 133,215  | 75,712                       | 45,197                                    | 18%  | 34%  | 60%   |
| North Carolina   | 560,357  | 274,227  | 174,352                      | 76,409                                    | 14%  | 28%  | 44%   |
| North Dakota   | 18,171   | 10,080   | 5,969                        | 3,121                                     | 17%  | 31%  | 52%   |
| Ohio   | 234,341  | 123,258  | 58,806                       | 35,541                                    | 15%  | 29%  | 60%   |
| Oklahoma   | 126,115  | 57,486   | 26,378                       | 14,275                                    | 11%  | 25%  | 54%   |
| Pennsylvania   | 472,697  | 276,746  | 115,773                      | 55,830                                    | 12%  | 20%  | 48%   |
| South Carolina   | 210,331  | 88,749   | 40,650                       | 22,315                                    | 11%  | 25%  | 55%   |
| South Dakota   | 21,393   | 11,425   | 5,416                        | 3,612                                     | 17%  | 32%  | 67%   |
| Tennessee  | 231,440  | 108,241  | 59,091                       | 35,674                                    | 15%  | 33%  | 60%   |

| <b>Plan Switching by Active Reenrollees Who Selected Plans Through the Marketplaces in States Using the HealthCare.gov Platform, By State (1)</b><br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |  |  |                              |   |   |                                       |  |
|---|--|--|------------------------------|---|---|---------------------------------------|--|
| Description   | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (1) | Total Consumers Reenrolling in Coverage Through the Marketplaces (2) | Total Active Reenrollees (3) | Active Reenrollees Who Switched Plans (4) | Proportion Who Switched Plans:            |                                       |  |
|   | Number   | Number   | Number                       | Number                                    | Switchers as a % of Total Plan Selections | Switchers as a % of Total Reenrollees | Switchers as a % of Active Reenrollees |
|   |  |  |                              |   | %   | %                                     | %                                      |
| Texas   | 1,205,174  | 523,653  | 258,760                      | 133,710                                   | 11%                                       | 26%                                   | 52%                                    |
| Utah  | 140,612  | 71,959   | 33,840                       | 17,931                                    | 13%                                       | 25%                                   | 53%                                    |
| Virginia  | 385,154  | 176,642  | 98,822                       | 43,555                                    | 11%                                       | 25%                                   | 44%                                    |
| West Virginia   | 33,421   | 16,981   | 8,150                        | 3,062                                     | 9%  | 18%                                   | 38%                                    |
| Wisconsin   | 207,349  | 115,755  | 66,759                       | 40,303                                    | 19%                                       | 35%                                   | 60%                                    |
| Wyoming   | 21,092   | 10,964   | 5,877                        | 3,431                                     | 16%                                       | 31%                                   | 58%                                    |
| <b>TOTAL – States Using the HealthCare.gov Platform</b>   | <b>8,838,291</b>   | <b>4,167,054</b>   | <b>2,210,631</b>             | <b>1,203,918</b>                          | <b>14%</b>                                | <b>29%</b>                            | <b>54%</b>                             |

## 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 these tables represent cumulative data on the number of unique individuals who have selected or have been automatically reenrolled into a 2015 Marketplace medical plan for enrollment through the Marketplaces (with or without the first premium payment having been received directly by the issuer). This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces. For additional technical notes, please refer to Appendix D of this report.

(2) “Consumers reenrolling in coverage through the Marketplaces” 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 have been automatically reenrolled in coverage through the Marketplaces – with or without the first premium payment having been received directly by the issuer). Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). It is important to note that the reenrollment data in this report may include some individuals who were reenrolled in coverage through the Marketplaces as of 2-15-15 (including SEP activity through 2-22-15), but who may ultimately decide not to retain Marketplace coverage for the remainder of 2015 (for example, because they have obtained coverage through another source such as an employer or Medicaid/CHIP). The plan selection data in future reports will exclude these individuals (e.g., due to the subsequent cancellation or termination of their coverage).

(3) “Active reenrollees” are individuals 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.

(4) “Active reenrollees who switched plans” are active reenrollees who have not selected the same plan as for the 2014 coverage year, or a similar “crosswalked” plan with similar benefits that is offered by the same issuer as their 2014 plan.

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

(6) 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 coverage through the Marketplaces 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 3-6-15.

## APPENDIX TABLE B3

| Total Completed Applications and Individuals Who Completed Applications in States Using the HealthCare.gov Platform, By State, 2015<br>11-15-2014 to 2-15-2015 (including SEP activity through 2-22-15) |  |  |
|---|--|--|
| Description   | Total Number of Completed Applications for 2015 Coverage (2) | Total Individuals Applying for 2015 Coverage in Completed Applications (3) |
|   | Number   | Number   |
| <b>States Using the HealthCare.gov Platform</b>   |  |  |
| <b>State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (4)</b>  |  |  |
| Nevada  | 82,700   | 122,001  |
| New Mexico  | 58,738   | 79,360   |
| Oregon  | 175,126  | 258,030  |
| <b>Subtotal - SBMs Using the HealthCare.gov Platform</b>  | <b>316,564</b>   | <b>459,391</b>   |
| <b>Federally-Facilitated Marketplace (FFM) States</b>   |  |  |
| Alabama   | 192,777  | 244,632  |
| Alaska  | 22,435   | 30,969   |
| Arizona   | 194,343  | 299,153  |
| Arkansas  | 88,255   | 119,770  |
| Delaware  | 25,913   | 36,179   |
| Florida   | 1,619,814  | 2,061,154  |
| Georgia   | 549,560  | 734,954  |
| Illinois  | 373,220  | 500,406  |
| Indiana   | 242,230  | 322,822  |
| Iowa  | 56,117   | 74,220   |
| Kansas  | 95,844   | 132,595  |
| Louisiana   | 206,463  | 245,015  |
| Maine   | 68,633   | 94,722   |
| Michigan  | 352,323  | 474,323  |
| Mississippi   | 121,401  | 144,733  |
| Missouri  | 259,690  | 354,475  |
| Montana   | 50,771   | 69,867   |
| Nebraska  | 66,671   | 100,254  |
| New Hampshire   | 53,730   | 71,101   |

| <b>Total Completed Applications and Individuals Who Completed Applications in States Using the HealthCare.gov Platform, By State, 2015</b><br><i>11-15-2014 to 2-15-2015 (including SEP activity through 2-22-15)</i> |  |  |
|---|--|--|
| Description   | Total Number of Completed Applications for 2015 Coverage (2) | Total Individuals Applying for 2015 Coverage in Completed Applications (3) |
|   | Number   | Number   |
| New Jersey  | 309,870  | 423,205  |
| North Carolina  | 551,595  | 721,700  |
| North Dakota  | 15,812   | 25,199   |
| Ohio  | 268,617  | 362,214  |
| Oklahoma  | 121,751  | 171,584  |
| Pennsylvania  | 539,463  | 671,675  |
| South Carolina  | 221,364  | 280,564  |
| South Dakota  | 21,428   | 30,705   |
| Tennessee   | 292,069  | 390,237  |
| Texas   | 1,159,040  | 1,703,147  |
| Utah  | 107,675  | 195,563  |
| Virginia  | 363,579  | 511,789  |
| West Virginia   | 37,617   | 50,452   |
| Wisconsin   | 211,488  | 273,135  |
| Wyoming   | 19,791   | 28,419   |
| <b>TOTAL – States Using the HealthCare.gov Platform</b>   | <b>9,197,913</b>   | <b>12,410,323</b>  |

## 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 2-15-15 (including SEP activity through 2-22-15). 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 eligible for a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces. For additional technical notes, please refer to Appendix D 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) Nevada, New Mexico, and Oregon are using the HealthCare.gov platform for 2015.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

## APPENDIX TABLE B4

| <b>Total Marketplace Eligibility Determinations, and Marketplace Plan Selections in States Using the HealthCare.gov Platform, By State, 2015 (1)</b><br><i>11-15-2014 to 2-15-2015 (including SEP activity through 2-22-15)</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 Plan Selections Through the Marketplaces (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   |
| <b>States Using the HealthCare.gov Platform</b>   |   |  |  |  |
| <b>State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (6)</b>  |   |  |  |  |
| Nevada  | 90,696  | 77,228   | 28,290   | 73,596   |
| New Mexico  | 62,905  | 49,378   | 15,522   | 52,358   |
| Oregon  | 140,994   | 111,139  | 61,828   | 112,024  |
| <b>Subtotal - SBMs Using the HealthCare.gov Platform</b>  | 294,595   | 237,745  | 105,640  | 237,978  |
| <b>Federally-Facilitated Marketplace (FFM) States</b>   |   |  |  |  |
| Alabama   | 222,610   | 166,768  | 10,408   | 171,641  |
| Alaska  | 27,056  | 21,779   | 3,613  | 21,260   |
| Arizona   | 245,307   | 192,805  | 49,814   | 205,666  |
| Arkansas  | 78,948  | 65,808   | 23,006   | 65,684   |
| Delaware  | 29,682  | 23,992   | 5,985  | 25,036   |
| Florida   | 1,909,132   | 1,632,571  | 126,181  | 1,596,296  |
| Georgia   | 664,646   | 528,944  | 63,083   | 541,080  |
| Illinois  | 408,019   | 323,657  | 86,560   | 349,487  |
| Indiana   | 252,834   | 209,754  | 66,539   | 219,185  |
| Iowa  | 57,110  | 47,154   | 15,474   | 45,162   |
| Kansas  | 121,007   | 89,471   | 10,512   | 96,197   |
| Louisiana   | 228,809   | 180,933  | 7,915  | 186,277  |
| Maine   | 88,598  | 73,370   | 5,327  | 74,805   |
| Michigan  | 387,618   | 333,890  | 82,135   | 341,183  |
| Mississippi   | 132,596   | 106,478  | 10,699   | 104,538  |
| Missouri  | 316,984   | 248,697  | 34,679   | 253,430  |

| <b>Total Marketplace Eligibility Determinations, and Marketplace Plan Selections in States Using the HealthCare.gov Platform, By State, 2015 (1)</b><br><i>11-15-2014 to 2-15-2015 (including SEP activity through 2-22-15)</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 Plan Selections Through the Marketplaces (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   | 64,632  | 52,823   | 2,683  | 54,266   |
| Nebraska  | 90,915  | 73,371   | 7,218  | 74,152   |
| New Hampshire   | 60,664  | 44,068   | 9,294  | 53,005   |
| New Jersey  | 307,849   | 245,148  | 60,757   | 254,316  |
| North Carolina  | 668,702   | 557,164  | 47,920   | 560,357  |
| North Dakota  | 21,313  | 18,129   | 2,013  | 18,171   |
| Ohio  | 279,722   | 229,459  | 79,963   | 234,341  |
| Oklahoma  | 156,795   | 118,248  | 12,946   | 126,115  |
| Pennsylvania  | 539,023   | 433,287  | 126,853  | 472,697  |
| South Carolina  | 257,282   | 205,800  | 21,106   | 210,331  |
| South Dakota  | 27,626  | 22,496   | 2,861  | 21,393   |
| Tennessee   | 306,785   | 222,782  | 40,373   | 231,440  |
| Texas   | 1,535,857   | 1,177,520  | 146,548  | 1,205,174  |
| Utah  | 164,262   | 141,539  | 29,017   | 140,612  |
| Virginia  | 470,998   | 355,017  | 36,569   | 385,154  |
| West Virginia   | 40,358  | 33,409   | 5,063  | 33,421   |
| Wisconsin   | 237,426   | 205,697  | 27,628   | 207,349  |
| Wyoming   | 26,180  | 21,633   | 847  | 21,092   |
| <b>TOTAL – States Using the HealthCare.gov Platform</b>   | <b>10,721,940</b>   | <b>8,641,406</b>   | <b>1,367,229</b>   | <b>8,838,291</b>   |

## 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 2-15-15 (including SEP activity through 2-22-15). 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 eligible for a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces. For additional technical notes information, please refer to Appendix D 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. Note: This number only includes data for individuals who applied for 2015 Marketplace coverage in completed applications. It does not include individuals who were automatically reenrolled. Thus, the number determined eligible for 2015 coverage may be lower than the total number of 2015 plan selections (which includes reenrollees).

(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. Note: This number only includes data for individuals who applied for 2015 Marketplace coverage in completed applications. It does not include individuals who were automatically reenrolled. Thus, the number determined eligible for 2015 coverage may be lower than the total number of 2015 plan selections with financial assistance (which includes reenrollees).

(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](http://Medicaid.gov)) which covers data through December 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 coverage through the Marketplaces (with or without the first premium payment having been received directly by the issuer) during the reference period. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for 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 3-6-15.

APPENDIX TABLE B5

| Marketplace Plan Selections by Financial Assistance Status in States Using the HealthCare.gov Platform, By State (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |  |  |  |                              |                     |                    |
|--|--|--|--|------------------------------|---------------------|--------------------|
| Description  | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (2) | Plan Selections With Available Data on Financial Assistance Status (3) | By Financial Assistance Status (4)<br>(% of Available Data, Excluding Unknown) |                              |                     |                    |
|  |  |  | With Financial Assistance  | Without Financial Assistance | With APTC (non-add) | With CSR (non-add) |
|  | Number   | Number   | %  | %                            | %                   | %                  |
| <b>States Using the HealthCare.gov Platform (4)</b>  |  |  |  |                              |                     |                    |
| <b>State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (5)</b>   |  |  |  |                              |                     |                    |
| Nevada   | 73,596   | 73,596   | 89%  | 11%                          | 89%                 | 55%                |
| New Mexico   | 52,358   | 52,358   | 76%  | 24%                          | 74%                 | 47%                |
| Oregon   | 112,024  | 112,024  | 79%  | 21%                          | 77%                 | 47%                |
| <b>Subtotal - SBMs Using the HealthCare.gov Platform</b>   | 237,978  | 237,978  | 81%  | 19%                          | 80%                 | 49%                |
| <b>Federally-Facilitated Marketplace (FFM) States</b>  |  |  |  |                              |                     |                    |
| Alabama  | 171,641  | 171,641  | 89%  | 11%                          | 89%                 | 71%                |
| Alaska   | 21,260   | 21,260   | 90%  | 10%                          | 89%                 | 54%                |
| Arizona  | 205,666  | 205,666  | 76%  | 24%                          | 75%                 | 54%                |
| Arkansas   | 65,684   | 65,684   | 88%  | 12%                          | 88%                 | 56%                |
| Delaware   | 25,036   | 25,036   | 84%  | 16%                          | 83%                 | 45%                |
| Florida  | 1,596,296  | 1,596,296  | 93%  | 7%                           | 93%                 | 70%                |
| Georgia  | 541,080  | 541,080  | 90%  | 10%                          | 89%                 | 67%                |
| Illinois   | 349,487  | 349,487  | 78%  | 22%                          | 78%                 | 46%                |
| Indiana  | 219,185  | 219,185  | 88%  | 12%                          | 87%                 | 50%                |
| Iowa   | 45,162   | 45,162   | 86%  | 14%                          | 85%                 | 48%                |
| Kansas   | 96,197   | 96,197   | 80%  | 20%                          | 80%                 | 55%                |
| Louisiana  | 186,277  | 186,277  | 89%  | 11%                          | 89%                 | 57%                |
| Maine  | 74,805   | 74,805   | 89%  | 11%                          | 89%                 | 58%                |
| Michigan   | 341,183  | 341,183  | 88%  | 12%                          | 88%                 | 55%                |
| Mississippi  | 104,538  | 104,538  | 94%  | 6%                           | 93%                 | 76%                |
| Missouri   | 253,430  | 253,430  | 88%  | 12%                          | 88%                 | 58%                |
| Montana  | 54,266   | 54,266   | 85%  | 15%                          | 84%                 | 51%                |
| Nebraska   | 74,152   | 74,152   | 88%  | 12%                          | 87%                 | 50%                |
| New Hampshire  | 53,005   | 53,005   | 71%  | 29%                          | 70%                 | 37%                |
| New Jersey   | 254,316  | 254,316  | 83%  | 17%                          | 83%                 | 51%                |
| North Carolina   | 560,357  | 560,357  | 92%  | 8%                           | 92%                 | 65%                |
| North Dakota   | 18,171   | 18,171   | 86%  | 14%                          | 86%                 | 42%                |
| Ohio   | 234,341  | 234,341  | 84%  | 16%                          | 84%                 | 44%                |
| Oklahoma   | 126,115  | 126,115  | 81%  | 19%                          | 79%                 | 59%                |
| Pennsylvania   | 472,697  | 472,697  | 81%  | 19%                          | 80%                 | 57%                |
| South Carolina   | 210,331  | 210,331  | 88%  | 12%                          | 88%                 | 63%                |
| South Dakota   | 21,393   | 21,393   | 88%  | 12%                          | 86%                 | 63%                |
| Tennessee  | 231,440  | 231,440  | 83%  | 17%                          | 82%                 | 62%                |
| Texas  | 1,205,174  | 1,205,174  | 86%  | 14%                          | 85%                 | 59%                |

| <b>Marketplace Plan Selections by Financial Assistance Status in States Using the HealthCare.gov Platform, By State (1)</b><br><i>11-15-14 to 2-15-15 (including SEP activity through 2-22-15)</i> |  |  |   |                              |                               |                              |
|--|--|--|---|------------------------------|-------------------------------|------------------------------|
| Description  | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (2) | Plan Selections With Available Data on Financial Assistance Status (3) | By Financial Assistance Status (4)<br><i>(% of Available Data, Excluding Unknown)</i> |                              |                               |                              |
|  |  |  | With Financial Assistance   | Without Financial Assistance | With APTC<br><i>(non-add)</i> | With CSR<br><i>(non-add)</i> |
|  | Number   | Number   | %   | %                            | %                             | %                            |
| Utah   | 140,612  | 140,612  | 88%   | 12%                          | 88%                           | 60%                          |
| Virginia   | 385,154  | 385,154  | 84%   | 16%                          | 83%                           | 55%                          |
| West Virginia  | 33,421   | 33,421   | 86%   | 14%                          | 86%                           | 54%                          |
| Wisconsin  | 207,349  | 207,349  | 90%   | 10%                          | 89%                           | 58%                          |
| Wyoming  | 21,092   | 21,092   | 91%   | 9%                           | 91%                           | 52%                          |
| <b>TOTAL – States Using the HealthCare.gov Platform</b>  | <b>8,838,291</b>   | <b>8,838,291</b>   | <b>87%</b>  | <b>13%</b>                   | <b>87%</b>                    | <b>60%</b>                   |

## 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: Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). For additional technical notes, please refer to Appendix D 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 issuer) during the reference period, excluding plan selections with unknown data for a given metric. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated.

(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) Data on Marketplace plan selections with financial assistance includes plan selections for individuals who are receiving a premium tax credit and/or cost-sharing subsidy.

(5) 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 (including data for consumers who actively reenrolled in coverage through the Marketplaces, and data for automatic reenrollees).

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

Source: Centers for Medicare & Medicaid Services, as of 3-6-15; ASPE computation of CMS data for 37 states using the HealthCare.gov platform as of 2-15-15 (including SEP activity through 2-22-15).

## APPENDIX TABLE B6

**Marketplace Plan Selection by Age in States Using the HealthCare.gov Platform, By State (1)**  
*11-15-14 to 2-15-15 (including SEP activity through 2-22-15)*

| Description  | Number of Plan Selections With Available Data on Age (2) (3) | By Age<br>(% of Available Data, Excluding Unknown) |           |           |           |           |           |         |            |           |
|--|--|--|-----------|-----------|-----------|-----------|-----------|---------|------------|-----------|
|  |  | Age < 18   | Age 18-25 | Age 26-34 | Age 35-44 | Age 45-54 | Age 55-64 | Age ≥65 | Ages 18-34 | Ages 0-34 |
|  |  | %  | %         | %         | %         | %         | %         | %       | %          | %         |
| <b>States Using the HealthCare.gov Platform (4)</b>                          |  |  |           |           |           |           |           |         |            |           |
| <b>State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (5)</b> |  |  |           |           |           |           |           |         |            |           |
| Nevada   | 73,411   | 13%  | 9%        | 15%       | 16%       | 20%       | 26%       | 1%      | 24%        | 36%       |
| New Mexico   | 52,216   | 8%   | 7%        | 14%       | 14%       | 22%       | 34%       | 1%      | 21%        | 29%       |
| Oregon   | 111,743  | 7%   | 8%        | 17%       | 16%       | 19%       | 33%       | 1%      | 24%        | 31%       |
| <b>Subtotal - SBMs Using the HealthCare.gov Platform</b>                     | 237,370  | 9%   | 8%        | 16%       | 16%       | 20%       | 31%       | 1%      | 24%        | 32%       |
| <b>Federally-Facilitated Marketplace (FFM) States</b>                        |  |  |           |           |           |           |           |         |            |           |
| Alabama  | 171,371  | 3%   | 13%       | 19%       | 19%       | 22%       | 24%       | 0%      | 32%        | 35%       |
| Alaska   | 21,198   | 10%  | 8%        | 20%       | 16%       | 19%       | 26%       | 1%      | 28%        | 39%       |
| Arizona  | 205,063  | 23%  | 9%        | 14%       | 14%       | 17%       | 23%       | 1%      | 23%        | 45%       |
| Arkansas   | 65,604   | 7%   | 9%        | 16%       | 16%       | 21%       | 30%       | 1%      | 25%        | 32%       |
| Delaware   | 24,983   | 13%  | 8%        | 15%       | 15%       | 22%       | 26%       | 1%      | 23%        | 36%       |
| Florida  | 1,592,786  | 6%   | 13%       | 15%       | 18%       | 24%       | 23%       | 1%      | 28%        | 33%       |
| Georgia  | 540,095  | 6%   | 13%       | 18%       | 19%       | 22%       | 21%       | 1%      | 31%        | 37%       |
| Illinois   | 348,559  | 7%   | 10%       | 18%       | 15%       | 21%       | 28%       | 1%      | 28%        | 35%       |
| Indiana  | 218,631  | 9%   | 9%        | 16%       | 16%       | 20%       | 29%       | 0%      | 25%        | 35%       |
| Iowa   | 45,041   | 5%   | 9%        | 17%       | 15%       | 22%       | 32%       | 0%      | 26%        | 31%       |
| Kansas   | 95,977   | 9%   | 11%       | 19%       | 16%       | 19%       | 25%       | 0%      | 31%        | 40%       |
| Louisiana  | 185,924  | 4%   | 12%       | 20%       | 18%       | 22%       | 23%       | 0%      | 33%        | 37%       |
| Maine  | 74,704   | 10%  | 8%        | 15%       | 14%       | 22%       | 31%       | 0%      | 23%        | 33%       |
| Michigan   | 340,006  | 9%   | 9%        | 16%       | 15%       | 21%       | 28%       | 0%      | 26%        | 35%       |
| Mississippi  | 104,354  | 3%   | 14%       | 17%       | 18%       | 22%       | 25%       | 0%      | 31%        | 34%       |
| Missouri   | 252,945  | 9%   | 11%       | 19%       | 16%       | 20%       | 25%       | 0%      | 30%        | 39%       |
| Montana  | 54,186   | 7%   | 10%       | 20%       | 16%       | 19%       | 29%       | 0%      | 29%        | 36%       |
| Nebraska   | 73,982   | 14%  | 11%       | 18%       | 16%       | 18%       | 23%       | 0%      | 29%        | 43%       |
| New Hampshire  | 52,869   | 8%   | 9%        | 16%       | 14%       | 23%       | 30%       | 0%      | 24%        | 32%       |
| New Jersey   | 253,197  | 8%   | 10%       | 15%       | 15%       | 24%       | 26%       | 1%      | 25%        | 34%       |
| North Carolina   | 559,615  | 8%   | 11%       | 17%       | 18%       | 22%       | 23%       | 0%      | 28%        | 37%       |
| North Dakota   | 18,114   | 23%  | 8%        | 19%       | 13%       | 15%       | 22%       | 0%      | 27%        | 50%       |
| Ohio   | 233,636  | 11%  | 8%        | 15%       | 14%       | 20%       | 31%       | 0%      | 24%        | 34%       |
| Oklahoma   | 125,868  | 10%  | 11%       | 18%       | 17%       | 20%       | 24%       | 0%      | 29%        | 39%       |
| Pennsylvania   | 471,056  | 6%   | 10%       | 18%       | 16%       | 22%       | 29%       | 0%      | 28%        | 34%       |
| South Carolina   | 210,020  | 7%   | 11%       | 17%       | 17%       | 23%       | 26%       | 0%      | 28%        | 34%       |
| South Dakota   | 21,320   | 11%  | 10%       | 20%       | 15%       | 17%       | 26%       | 0%      | 30%        | 41%       |
| Tennessee  | 231,090  | 6%   | 10%       | 18%       | 17%       | 22%       | 27%       | 0%      | 28%        | 34%       |

**Marketplace Plan Selection by Age in States Using the HealthCare.gov Platform, By State (1)**  
 11-15-14 to 2-15-15 (including SEP activity through 2-22-15)

| Description   | Number of Plan Selections With Available Data on Age (2) (3) | By Age<br>(% of Available Data, Excluding Unknown) |            |            |            |            |            |           |            |            |
|---|--|--|------------|------------|------------|------------|------------|-----------|------------|------------|
|   |  | Age < 18   | Age 18-25  | Age 26-34  | Age 35-44  | Age 45-54  | Age 55-64  | Age ≥65   | Ages 18-34 | Ages 0-34  |
|   |  | Number   | %          | %          | %          | %          | %          | %         | %          | %          |
| Texas   | 1,202,044  | 10%  | 13%        | 17%        | 17%        | 22%        | 21%        | 1%        | 29%        | 39%        |
| Utah  | 140,343  | 22%  | 11%        | 21%        | 16%        | 14%        | 16%        | 0%        | 33%        | 54%        |
| Virginia  | 384,487  | 11%  | 12%        | 18%        | 17%        | 20%        | 22%        | 1%        | 30%        | 40%        |
| West Virginia   | 33,322   | 6%   | 7%         | 13%        | 15%        | 21%        | 37%        | 0%        | 20%        | 26%        |
| Wisconsin   | 206,769  | 6%   | 9%         | 17%        | 15%        | 21%        | 32%        | 0%        | 26%        | 32%        |
| Wyoming   | 21,050   | 13%  | 9%         | 20%        | 15%        | 17%        | 26%        | 0%        | 29%        | 42%        |
| <b>TOTAL – States Using the HealthCare.gov Platform</b> | <b>8,817,579</b>   | <b>8%</b>  | <b>11%</b> | <b>17%</b> | <b>17%</b> | <b>22%</b> | <b>25%</b> | <b>1%</b> | <b>28%</b> | <b>36%</b> |

## 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). Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). For additional technical notes, please refer to Appendix D 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 issuer) during the reference period, excluding plan selections with unknown data for a given metric. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated.

(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 (including data for consumers who actively reenrolled in coverage through the Marketplaces, and data for automatic reenrollees).

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

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

## APPENDIX TABLE B7

| Reduction in Average Monthly Premiums from Advance Premium Tax Credits in States Using the HealthCare.gov Platform (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |  |                                      |                                     |                      |                                    |   |
|--|--|--------------------------------------|-------------------------------------|----------------------|------------------------------------|---|
| Description  | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (2) | Percent of Plan Selections with APTC | Average Monthly Premium before APTC | Average Monthly APTC | Average Monthly Premium After APTC | Average Percent Reduction in Premium after APTC |
| <b>States Using the HealthCare.gov Platform (4)</b>  |  |                                      |                                     |                      |                                    |   |
| <b>State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (5)</b>   |  |                                      |                                     |                      |                                    |   |
| Nevada   | 73,596   | 89%                                  | \$361                               | \$242                | \$119                              | 67%   |
| New Mexico   | 52,358   | 74%                                  | \$323                               | \$196                | \$127                              | 61%   |
| Oregon   | 112,024  | 77%                                  | \$334                               | \$198                | \$136                              | 59%   |
| <b>Subtotal - SBMs Using the HealthCare.gov Platform</b>   | <b>237,978</b>   | <b>80%</b>                           | <b>\$341</b>                        | <b>\$213</b>         | <b>\$128</b>                       | <b>62%</b>                                      |
| <b>Federally-Facilitated Marketplace (FFM) States</b>  |  |                                      |                                     |                      |                                    |   |
| Alabama  | 171,641  | 89%                                  | \$354                               | \$266                | \$88                               | 75%   |
| Alaska   | 21,260   | 89%                                  | \$639                               | \$534                | \$105                              | 84%   |
| Arizona  | 205,666  | 75%                                  | \$278                               | \$155                | \$123                              | 56%   |
| Arkansas   | 65,684   | 88%                                  | \$389                               | \$280                | \$109                              | 72%   |
| Delaware   | 25,036   | 83%                                  | \$404                               | \$264                | \$140                              | 65%   |
| Florida  | 1,596,296  | 93%                                  | \$376                               | \$294                | \$82                               | 78%   |
| Georgia  | 541,080  | 89%                                  | \$346                               | \$273                | \$73                               | 79%   |
| Illinois   | 349,487  | 78%                                  | \$336                               | \$208                | \$128                              | 62%   |
| Indiana  | 219,185  | 87%                                  | \$438                               | \$319                | \$120                              | 73%   |
| Iowa   | 45,162   | 85%                                  | \$371                               | \$260                | \$111                              | 70%   |
| Kansas   | 96,197   | 80%                                  | \$301                               | \$211                | \$90                               | 70%   |
| Louisiana  | 186,277  | 89%                                  | \$416                               | \$319                | \$97                               | 77%   |
| Maine  | 74,805   | 89%                                  | \$425                               | \$332                | \$93                               | 78%   |
| Michigan   | 341,183  | 88%                                  | \$366                               | \$236                | \$130                              | 64%   |
| Mississippi  | 104,538  | 93%                                  | \$405                               | \$353                | \$52                               | 87%   |
| Missouri   | 253,430  | 88%                                  | \$363                               | \$281                | \$82                               | 77%   |
| Montana  | 54,266   | 84%                                  | \$346                               | \$230                | \$116                              | 66%   |
| Nebraska   | 74,152   | 87%                                  | \$354                               | \$250                | \$104                              | 70%   |
| New Hampshire  | 53,005   | 70%                                  | \$385                               | \$244                | \$141                              | 63%   |
| New Jersey   | 254,316  | 83%                                  | \$470                               | \$306                | \$164                              | 65%   |
| North Carolina   | 560,357  | 92%                                  | \$410                               | \$315                | \$95                               | 77%   |
| North Dakota   | 18,171   | 86%                                  | \$369                               | \$228                | \$141                              | 62%   |
| Ohio   | 234,341  | 84%                                  | \$389                               | \$244                | \$145                              | 63%   |
| Oklahoma   | 126,115  | 79%                                  | \$295                               | \$206                | \$89                               | 70%   |
| Pennsylvania   | 472,697  | 80%                                  | \$355                               | \$226                | \$129                              | 64%   |
| South Carolina   | 210,331  | 88%                                  | \$365                               | \$278                | \$86                               | 76%   |
| South Dakota   | 21,393   | 86%                                  | \$358                               | \$228                | \$130                              | 64%   |
| Tennessee  | 231,440  | 82%                                  | \$316                               | \$213                | \$102                              | 68%   |

| Reduction in Average Monthly Premiums from Advance Premium Tax Credits in States Using the HealthCare.gov Platform (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |  |                                      |                                     |                      |                                    |   |
|--|--|--------------------------------------|-------------------------------------|----------------------|------------------------------------|---|
| Description  | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (2) | Percent of Plan Selections with APTC | Average Monthly Premium before APTC | Average Monthly APTC | Average Monthly Premium After APTC | Average Percent Reduction in Premium after APTC |
| Texas  | 1,205,174  | 85%                                  | \$328                               | \$239                | \$89                               | 73%   |
| Utah   | 140,612  | 88%                                  | \$248                               | \$159                | \$89                               | 64%   |
| Virginia   | 385,154  | 83%                                  | \$348                               | \$259                | \$89                               | 74%   |
| West Virginia  | 33,421   | 86%                                  | \$448                               | \$311                | \$137                              | 69%   |
| Wisconsin  | 207,349  | 89%                                  | \$440                               | \$315                | \$125                              | 72%   |
| Wyoming  | 21,092   | 91%                                  | \$550                               | \$420                | \$130                              | 76%   |
| <b>TOTAL – States Using the HealthCare.gov Platform</b>  | <b>8,838,291</b>   | <b>87%</b>                           | <b>\$364</b>                        | <b>\$263</b>         | <b>\$101</b>                       | <b>72%</b>                                      |

Source: ASPE computation of CMS data for 37 states using the HealthCare.gov platform as of 2-15-15 (including SEP activity through 2-22-15).

## APPENDIX TABLE B8

| Availability and Selection of Marketplace Plans With Monthly Premiums of \$100 or Less After the Advance Premium Tax Credit (APTC) For Individuals With 2015 Marketplace Plan Selections With APTC in States Using the HealthCare.gov Platform (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |   |  |   |   |  |
|--|---|--|---|---|--|
| Description  | Number of Individuals With 2015 Marketplace Plan Selections with APTC (2) | Data For Individuals Who Have 2015 Marketplace Plan Selections With APTC                 |   |   |  |
|  |   | Availability of Plans With Monthly Premiums of \$100 or Less                             |   | Selection of Plans With Monthly Premiums of \$100 or Less                     |  |
|  |   | Percent Who Could Have Selected a Plan with a Monthly Premium of \$50 or Less after APTC | Percent Who Could Have Selected a Plan with a Monthly Premium of \$100 or Less after APTC | Percent Who Selected a Plan With a Monthly Premium of \$50 or Less after APTC | Percent Who Selected a Plan With a Monthly Premium of \$100 or Less after APTC |
| <b>States Using the HealthCare.gov Platform (4)</b>  |   |  |   |   |  |
| <b>State-Based Marketplaces (SBMs) Using the HealthCare.gov Platform (5)</b>   |   |  |   |   |  |
| Nevada   | 65,326  | 100%   | 100%  | 19%   | 53%  |
| New Mexico   | 38,848  | 64%  | 84%   | 22%   | 49%  |
| Oregon   | 86,444  | 100%   | 100%  | 17%   | 44%  |
| <b>Subtotal - SBMs Using the HealthCare.gov Platform</b>   | 190,618   | 93%  | 97%   | 19%   | 48%  |
| <b>Federally-Facilitated Marketplace (FFM) States</b>  |   |  |   |   |  |
| Alabama  | 152,498   | 80%  | 90%   | 43%   | 70%  |
| Alaska   | 18,839  | 75%  | 86%   | 40%   | 57%  |
| Arizona  | 153,335   | 65%  | 86%   | 24%   | 52%  |
| Arkansas   | 57,797  | 67%  | 85%   | 24%   | 58%  |
| Delaware   | 20,876  | 58%  | 78%   | 18%   | 45%  |
| Florida  | 1,479,439   | 84%  | 93%   | 51%   | 72%  |
| Georgia  | 484,073   | 83%  | 92%   | 51%   | 74%  |
| Illinois   | 271,763   | 63%  | 83%   | 21%   | 49%  |
| Indiana  | 191,586   | 71%  | 85%   | 26%   | 53%  |
| Iowa   | 38,532  | 68%  | 85%   | 27%   | 56%  |
| Kansas   | 76,504  | 72%  | 87%   | 40%   | 67%  |
| Louisiana  | 165,786   | 85%  | 93%   | 41%   | 63%  |
| Maine  | 66,616  | 71%  | 85%   | 40%   | 65%  |
| Michigan   | 298,774   | 70%  | 87%   | 21%   | 48%  |
| Mississippi  | 97,606  | 91%  | 96%   | 60%   | 80%  |
| Missouri   | 222,559   | 80%  | 91%   | 46%   | 69%  |
| Montana  | 45,432  | 60%  | 78%   | 26%   | 54%  |
| Nebraska   | 64,656  | 76%  | 90%   | 34%   | 59%  |
| New Hampshire  | 37,242  | 66%  | 82%   | 21%   | 43%  |
| New Jersey   | 211,158   | 51%  | 71%   | 15%   | 38%  |
| North Carolina   | 512,975   | 80%  | 91%   | 40%   | 65%  |
| North Dakota   | 15,569  | 58%  | 80%   | 17%   | 42%  |
| Ohio   | 196,714   | 62%  | 82%   | 16%   | 41%  |
| Oklahoma   | 100,039   | 82%  | 93%   | 40%   | 66%  |
| Pennsylvania   | 379,607   | 62%  | 81%   | 23%   | 51%  |



| Availability and Selection of Marketplace Plans With Monthly Premiums of \$100 or Less After the Advance Premium Tax Credit (APTC) For Individuals With 2015 Marketplace Plan Selections With APTC in States Using the HealthCare.gov Platform (1)<br>11-15-14 to 2-15-15 (including SEP activity through 2-22-15) |   |  |   |   |  |
|--|---|--|---|---|--|
| Description  | Number of Individuals With 2015 Marketplace Plan Selections with APTC (2) | Data For Individuals Who Have 2015 Marketplace Plan Selections With APTC                 |   |   |  |
|  |   | Availability of Plans With Monthly Premiums of \$100 or Less                             |   | Selection of Plans With Monthly Premiums of \$100 or Less                     |  |
|  |   | Percent Who Could Have Selected a Plan with a Monthly Premium of \$50 or Less after APTC | Percent Who Could Have Selected a Plan with a Monthly Premium of \$100 or Less after APTC | Percent Who Selected a Plan With a Monthly Premium of \$50 or Less after APTC | Percent Who Selected a Plan With a Monthly Premium of \$100 or Less after APTC |
| South Carolina   | 185,276   | 82%  | 92%   | 43%   | 69%  |
| South Dakota   | 18,503  | 53%  | 76%   | 17%   | 47%  |
| Tennessee  | 190,418   | 81%  | 92%   | 32%   | 60%  |
| Texas  | 1,030,138   | 80%  | 92%   | 43%   | 68%  |
| Utah   | 123,088   | 69%  | 90%   | 33%   | 67%  |
| Virginia   | 320,525   | 80%  | 91%   | 42%   | 68%  |
| West Virginia  | 28,719  | 57%  | 77%   | 21%   | 47%  |
| Wisconsin  | 184,822   | 68%  | 83%   | 26%   | 50%  |
| Wyoming  | 19,152  | 59%  | 77%   | 26%   | 49%  |
| <b>TOTAL – States Using the HealthCare.gov Platform</b>  | <b>7,651,234</b>  | <b>77%</b>   | <b>89%</b>  | <b>38%</b>  | <b>63%</b>   |

Source: ASPE computation of CMS data for 37 states using the HealthCare.gov platform as of 2-15-15 (including SEP activity through 2-22-15).

APPENDIX TABLE C1

| Marketplace Plan Selection by Enrollment Type in<br>State-Based Marketplaces Using Their Own Marketplace Platforms, By State, 2015 (1)<br>11-15-2014 to 2-15-2015 (including SEP activity through 2-21-15) |  |                                     |   |                                 |                                  |
|--|--|-------------------------------------|---|---------------------------------|----------------------------------|
| Description  | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (1) | Distribution By Enrollment Type (2) |   |                                 |                                  |
|  |  | New Consumers (3)                   | Consumers Reenrolling in Marketplace Coverage (4) |                                 |                                  |
|  | Number   |                                     | % of Total  | Total Reenrollees<br>% of Total | Active Reenrollees<br>% of Total |
| <b>State-Based Marketplaces (SBMs) Using Their Own Marketplace Platforms</b>   |  |                                     |   |                                 |                                  |
| California (5)   | 1,412,200  | 35%                                 | 65%   | 37%                             | 28%                              |
| Colorado (6)   | 140,327  | 28%                                 | 72%   | 34%                             | 38%                              |
| Connecticut (7)  | 109,839  | 38%                                 | 61%   | 20%                             | 41%                              |
| District of Columbia (8)   | 18,465   | 26%                                 | 74%   | 15%                             | 60%                              |
| Hawaii (9)   | 12,625   | 75%                                 | 25%   | 1%                              | 24%                              |
| Idaho (16)   | 97,079   | 100%                                | N/A   | N/A                             | N/A                              |
| Kentucky (10)  | 106,330  | 26%                                 | 73%   | 39%                             | 35%                              |
| Maryland (16)  | 120,145  | 100%                                | N/A   | N/A                             | N/A                              |
| Massachusetts (16)   | 140,540  | 100%                                | N/A   | N/A                             | N/A                              |
| Minnesota (11)   | 59,704   | 60%                                 | 40%   | 26%                             | 14%                              |
| New York (12)  | 408,841  | 35%                                 | 66%   | N/A                             | N/A                              |
| Rhode Island (13)  | 31,337   | 32%                                 | 68%   | 68%                             | N/A                              |
| Vermont (14)   | 31,619   | 14%                                 | 87%   | 17%                             | 69%                              |
| Washington (15)  | 160,732  | 37%                                 | 63%   | N/A                             | N/A                              |
| <b>State-Based Marketplaces (SBMs) Using Their Own Marketplace Platforms</b>   | <b>2,849,783</b>   | <b>43%</b>                          | <b>57%</b>  | <b>24%</b>                      | <b>20%</b>                       |

## 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 these tables represent cumulative data on the number of unique individuals who have selected or have been automatically reenrolled into a 2015 Marketplace medical plan for enrollment through the Marketplaces (with or without the first premium payment having been received directly by the issuer). This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. Except for three states, the data for total number of plan selections removes cancellations and terminations. Minnesota does not remove either from its total plan selection data, whereas DC removes cancellations and terminations from its automatic reenrollment data and New York removes cancellations and terminations from its active and automatic reenrollee data. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces. For additional technical notes, please refer to Appendix D 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 coverage through the Marketplaces.

(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 issuer) as of the reporting date, and did not have a Marketplace plan selection as of November 2014. Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP).

- (4) “Consumers reenrolling in coverage through the Marketplaces” are those individuals who had a Marketplace plan selection during coverage year 2014, and have either actively submitted a 2015 application and selected a 2015 Marketplace medical plan or have been automatically reenrolled in coverage through the Marketplaces – with or without the first premium payment having been received directly by the issuer). These data also do not include: standalone dental plan selections; or individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP). It is important to note that the reenrollment data in this report may include some individuals who were reenrolled in coverage through the Marketplaces as of 2-15-15 (including SEP activity through 2-21-15), but who may ultimately decide not to retain Marketplace coverage for the remainder of 2015 (for example, because they have obtained coverage through another source such as an employer or Medicaid/CHIP).
- (5) California reports represent data through 2/22/15. California began its automatic renewal process in December 2014 and periodically cancels individuals not paying their premiums during ongoing data cleaning processes. If an individual had effectuated enrollment by 11/12/14 and did not actively re-enroll, he/she was automatically re-enrolled by 12/15/14.
- (6) Colorado automatically renewed eligible individuals December 15, 2014 for coverage beginning January 1, 2015 and periodically cancels individuals not paying their premiums during ongoing data cleaning processes.
- (7) Connecticut automatically renewed eligible individuals during December 2014 for coverage beginning January 1, 2015. Connecticut individuals not paying their premiums are removed from enrollment counts upon receipt of cancellation notice from insurers. If an individual had effectuated coverage as of December 2014, he/she was eligible for automatic re-enrollment.
- (8) DC aligned its automatic renewal process with the Federal 2015 open enrollment process. Individuals automatically renewed needed to effectuate enrollment by December 15, 2014 to be considered enrolled, otherwise DC canceled their coverage. DC removed terminations and cancellations from their data for automatic re-enrollees, but did not remove them for new enrollees or active re-enrollees.
- (9) Hawaii began its automatic renewal process November 15, 2014 and canceled individuals for non-payment by January 31, 2015. If an individual had effectuated enrollment by 11/1/2014, did not actively reenroll, and selected “auto-renewal,” he/she was automatically reenrolled by 12/31/2014 for the 2015 plan year.
- (10) Kentucky notified individuals eligible for automatic renewal November 1, 2014 they would be automatically renewed for coverage effective January 1, 2015. Kentucky periodically cancels individuals not paying their premiums during ongoing data cleaning processes. Any individual who was actively receiving benefits as of 11/14/2014 was considered eligible for automatic re-enrollment and was re-enrolled on 11/15/14. Kentucky’s report of unknown individuals in 2015 plan selection breakouts represents the count of individuals converted from a legacy system (KAMES) to KYHBE.
- (11) Minnesota began its automatic renewal process in January 2015.
- (12) New York’s renewal process began November 15, 2014. New York removed terminations and cancellations from their data for active and automatic re-enrollees, but did not remove them for new enrollees. New York’s re-enrollment data does not distinguish between active and automatic reenrollment. In New York, individuals who were enrolled in October 2014, with an end date of December 31, 2014, were eligible for automatic re-enrollment if their program eligibility stayed the same from 2014 to 2015, and their plan was available in 2015. If an individual’s 2014 coverage was cancelled/terminated after October 2014, they were removed from the 2015 coverage that they were automatically renewed into. Additionally, if individuals voluntarily cancel or terminate their coverage, they are removed from the enrollment count at the time they cancel or terminate their coverage. If an individual’s coverage is cancelled or terminated for non-payment, they are removed from the enrollment count when the issuer transmits that transaction to the Marketplace.
- (13) Rhode Island does not have any automatic re-enrollments for its 2015 plan selection data, as Rhode Island required all individuals to undergo active re-enrollment. Individuals are canceled from the system if they do not make payment on the 23rd day of the month prior to the coverage month.
- (14) Vermont automatically renewed all Marketplace consumers for coverage beginning January 1, 2015, with payment for coverage due 21 days after automatically renewed consumers were sent an invoice.
- (15) Washington reports only individuals who have both enrolled and paid for coverage (effectuated enrollment) for its report of plan selection, thereby undercounting the true total of plan selections in Washington. Washington began its renewal process November 15, 2014, with payment deadlines the 23rd day of the month prior to the coverage month. Washington defines renewals as the number of QHP enrollees with coverage in December 2014 and coverage in 2015 as of February 21, 2015. Washington is not able to provide automatic and active renewal breakouts for 2015 plan selection data due to system issues. Their system counts some re-enrollees as both automatic and active re-enrollees, which may lead to double counting re-enrollee breakouts. Washington removed enrollees who terminated their coverage from their plan selection data for new enrollees and re-enrollees, but retained individuals in the count until issuers confirmed that the coverage was terminated for nonpayment.
- (16) 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.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

## APPENDIX TABLE C2

| Total Completed Applications and Individuals Who Completed Applications in State-Based Marketplaces Using Their Own Marketplace Platforms, By State, 2015 (1)<br>11-15-2014 to 2-15-2015 (including SEP activity through 2-21-15) |  |  |
|---|--|--|
| Description   | Total Number of Completed Applications for 2015 Coverage (2) | Total Individuals Applying for 2015 Coverage in Completed Applications (3) |
|   | Number   | Number   |
| <b>State-Based Marketplaces (SBMs) Using Their Own Marketplace Platforms</b>  |  |  |
| California (4)  | N/A  | NA   |
| Colorado  | 94,088   | 134,931  |
| Connecticut   | 131,627  | 226,266  |
| District of Columbia  | 14,521   | 19,570   |
| Hawaii  | 16,159   | 25,314   |
| Idaho   | 89,460   | 203,577  |
| Kentucky (5)  | 94,447   | 153,920  |
| Maryland (6)  | 263,035  | N/A  |
| Massachusetts   | 334,410  | 522,457  |
| Minnesota   | 127,978  | 201,920  |
| New York  | N/A  | 502,616  |
| Rhode Island  | 71,995   | 120,771  |
| Vermont (7)   | 33,155   | 59,451   |
| Washington  | 616,059  | 1,354,964  |
| <b>TOTAL - SBMs Using Their Own Marketplace Platforms</b>   | <b>1,886,934</b>   | <b>3,525,757</b>   |

## 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 2-15-15 (including SEP activity through 2-21-15). 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 eligible for a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces. For additional technical notes, please refer to Appendix D 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) California reports data through 2/22/15. California's system does not specifically track the total number of completed applications or individuals applying for coverage.
- (5) Kentucky data for "completed applications" includes data for the 2014 special enrollment period from 11-15-14 to 12-31-14, 2015 open enrollment, and 2015 SADP enrollment, as its system is not able to differentiate these data at the application level.
- (6) Maryland's system cannot provide the number of individuals applying for coverage through the Marketplace, as records may be removed from this count after eligibility determinations.
- (7) Vermont data for application numbers include withdrawn cases, but do not include test cases.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

## APPENDIX TABLE C3

| <b>Total Marketplace Eligibility Determinations, and Marketplace Plan Selections in State-Based Marketplaces Using Their Own Marketplace Platforms, By State, 2015 (1)</b><br><i>11-15-2014 to 2-15-2015 (including SEP activity through 2-21-15)</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 Plan Selections Through the Marketplaces (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   |
| <b>State-Based Marketplaces (SBMs) Using Their Own Marketplace Platforms</b>  |   |  |  |  |
| California (6) (7)  | 1,138,456   | 535,032  | 1,056,164  | 1,412,200  |
| Colorado (7) (8)  | 132,077   | N/A  | 85,432   | 140,327  |
| Connecticut (9)   | 167,193   | 124,803  | 277,336  | 109,839  |
| District of Columbia  | 7,539   | 1,714  | 9,355  | 18,465   |
| Hawaii  | 24,568  | 12,306   | 32,854   | 12,625   |
| Idaho   | 215,145   | 163,829  | 314,398  | 97,079   |
| Kentucky  | 223,335   | 138,320  | 152,529  | 106,330  |
| Maryland  | 120,632   | 85,345   | 154,194  | 120,145  |
| Massachusetts   | 246,397   | 164,849  | 276,060  | 140,540  |
| Minnesota (10)  | 71,451  | 38,382   | 106,654  | 59,704   |
| New York (11)   | 1,006,505   | 498,707  | 357,456  | 408,841  |
| Rhode Island  | 44,097  | 33,604   | 65,396   | 31,337   |
| Vermont   | 57,533  | 22,660   | 16,922   | 31,619   |
| Washington  | 239,848   | 176,295  | 818,697  | 160,732  |
| <b>TOTAL - SBMs Using Their Own Marketplace Platforms</b>   | <b>3,694,776</b>  | <b>1,995,846</b>   | <b>3,723,447</b>   | <b>2,849,783</b>   |

## 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 2-15-15 (including SEP activity through 2-22-15). 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 eligible for a Special Enrollment Period (SEP). This table only reflects data for the individual market Marketplaces. For additional technical notes information, please refer to Appendix D 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. Note: With the exception of states that treated all of the individuals who selected 2015 coverage through the Marketplaces, this number only includes data for individuals who applied for 2015 Marketplace coverage in completed applications. It does not include individuals who were automatically reenrolled. Thus, the number determined eligible for 2015 coverage may be lower than the total number of 2015 plan selections (which includes reenrollees).

(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 December 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 issuer) during the reference period. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. These data do not include 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). Except for three states, the data for total number of plan selections removes cancellations and terminations. Minnesota does not remove either from its total plan selection data, whereas DC removes cancellations and terminations from its automatic reenrollment data and New York removes cancellations and terminations from its active and automatic reenrollee data.

(6) California reports data through 2/22/15.

(7) Reported Medicaid + CHIP eligibility assessment totals may be underreported, as CA and CO employ processes that do not capture all Medicaid + CHIP eligibility assessments.

(8) Colorado data for individuals applying and those eligible for a QHP does not include individuals automatically reenrolled. Therefore, the number of individuals completing applications, and those eligible for a QHP, is less than the total number of individuals enrolled. Colorado’s Marketplace, Connect for Health Colorado, and the Medicaid Agency, use the Shared Eligibility System to determine eligibility for Medicaid, APTC/CSR, and CHIP. Therefore, the data provided by Colorado for “Individuals Assessed Eligible for Medicaid/CHIP” only include new individual determinations for the Medicaid and CHIP programs processed between 11/15/14 – 2/21/15. These data do not include redeterminations, recertifications, and renewals for Medicaid and CHIP.

(9) Connecticut’s number of individuals assessed eligible for Medicaid/CHIP is greater than the number of individuals applying. This results from Medicaid redeterminations for individuals who already have an initial application with the exchange.

(10) Minnesota data for number of individuals assessed eligible for Medicaid/MinnesotaCare represents data through 2/22/15.

(11) New York eligibility data represent individuals who have an active eligibility determination on or after 11/15/14. The number of individuals applying represents individuals in accounts that were created on or after 11/15/14. This figure does not include renewals, or other eligibility determinations for accounts created before 11/15/14.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.



APPENDIX TABLE C4

| <b>Marketplace Plan Selections by Financial Assistance Status in State-Based Marketplaces Using Their Own Marketplace Platforms, By State, 2015 (1)</b><br><i>11-15-2014 to 2-15-2015 (including SEP activity through 2-21-15)</i> |  |  |  |                              |
|--|--|--|--|------------------------------|
| Description  | Total Number of Individuals With 2015 Plan Selections Through the Marketplaces (2) | Plan Selections With Available Data on Financial Assistance Status (3) | By Financial Assistance Status (4)<br>(% of Available Data, Excluding Unknown) |                              |
|  |  |  | With Financial Assistance  | Without Financial Assistance |
|  | Number   | Number   | %  | %                            |
| <b>State-Based Marketplaces (SBMs) Using Their Own Marketplace Platforms</b>   |  |  |  |                              |
| California (5)   | 1,412,200  | 1,407,795  | 90.3%  | 9.7%                         |
| Colorado   | 140,327  | 140,327  | 54.2%  | 45.8%                        |
| Connecticut  | 109,839  | 109,839  | 77.4%  | 22.6%                        |
| District of Columbia (7)   | 18,465   | 18,465   | 10.8%  | 89.2%                        |
| Hawaii   | 12,625   | 12,625   | 76.7%  | 23.3%                        |
| Idaho (9)  | 97,079   | 97,079   | 84.2%  | 15.8%                        |
| Kentucky   | 106,330  | 106,330  | 69.3%  | 30.7%                        |
| Maryland (9)   | 120,145  | 120,145  | 70.8%  | 29.2%                        |
| Massachusetts (9)  | 140,540  | 140,540  | 65.6%  | 34.4%                        |
| Minnesota (6) (7)  | 59,704   | N/A  | N/A  | N/A                          |
| New York (7)   | 408,841  | 408,841  | 73.5%  | 26.5%                        |
| Rhode Island   | 31,337   | 31,337   | 88.2%  | 11.8%                        |
| Vermont  | 31,619   | 31,619   | 62.2%  | 37.8%                        |
| Washington (7)   | 160,732  | 160,732  | 78.8%  | 21.2%                        |
| <b>TOTAL – SBMs Using Their Own Marketplace Platforms</b>  | <b>2,849,783</b>   | <b>2,785,674</b>   | <b>80.8%</b>   | <b>19.2%</b>                 |

## 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 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). Except for three states, the data for total number of plan selections removes cancellations and terminations. Minnesota does not remove either from its total plan selection data, whereas DC removes cancellations and terminations from its automatic reenrollment data and New York removes cancellations and terminations from its active and automatic reenrollee data. For additional technical notes, please refer to Appendix D 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 issuer) during the reference period, excluding plan selections with unknown data for a given metric. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated.

(3) In some cases, the data for certain characteristics of Marketplace plan selections are not 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) Data on Marketplace plan selections with financial assistance includes plan selections for individuals who are receiving a premium tax credit and/or cost-sharing subsidy.



(5) California reports represent data through 2/22/15. California's plan selection breakouts result in roughly 4,000 unknowns due to total plan selection and plan selection breakout reports having been run at different times.

(6) Minnesota tracks plan selection by financial assistance at the household level; it cannot report it at the individual level.

(7) All states except DC, Minnesota, New York, and Washington removed cancellations and terminations from all total plan selection data. DC removed cancellations and terminations from its automatic reenrollee data. New York removed cancellations and terminations from all of its reenrollee data, active and automatic, but did not remove them from the "new" plan selections. Washington removed terminations from all of their plan selection data. Minnesota did not remove cancellations and terminations from its plan selection data.

(8) Washington reports only individuals who have both enrolled and paid for coverage (effectuated enrollment) for its report of plan selection, thereby undercounting the true total number of plan selections in Washington.

(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.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

APPENDIX TABLE C5

| Marketplace Plan Selection by Age in State-Based Marketplaces Using Their Own Marketplace Platforms, By State, 2015 (1)<br>11-15-2014 to 2-21-2015 |  |  |             |              |              |              |              |             |              |              |
|--|--|--|-------------|--------------|--------------|--------------|--------------|-------------|--------------|--------------|
| Description  | Number of Plan Selections With Available Data on Age (2) (3) | By Age<br>(% of Available Data, Excluding Unknown) |             |              |              |              |              |             |              |              |
|  |  | Age < 18   | Age 18-25   | Age 26-34    | Age 35-44    | Age 45-54    | Age 55-64    | Age ≥65     | Ages 18-34   | Ages 0-34    |
|  |  | Number   | %           | %            | %            | %            | %            | %           | %            | %            |
| <b>State-Based Marketplaces (SBMs) Using Their Own Marketplace Platforms</b>   |  |  |             |              |              |              |              |             |              |              |
| California (4)   | 1,408,352  | 5.2%   | 10.8%       | 16.9%        | 16.0%        | 24.2%        | 26.8%        | 0.9%        | 27.5%        | 32.7%        |
| Colorado   | 140,327  | 11.6%  | 7.6%        | 18.9%        | 16.1%        | 18.9%        | 26.5%        | 0.3%        | 26.6%        | 38.2%        |
| Connecticut  | 109,839  | 7.3%   | 10.2%       | 15.4%        | 13.7%        | 23.4%        | 30.0%        | 1.4%        | 25.3%        | 32.5%        |
| District of Columbia (5)   | 18,465   | 7.8%   | 6.1%        | 37.2%        | 21.4%        | 14.5%        | 13.0%        | 0.6%        | 43.1%        | 50.9%        |
| Hawaii   | 12,625   | 14.5%  | 9.4%        | 17.3%        | 16.3%        | 16.7%        | 25.8%        | 1.4%        | 26.3%        | 40.6%        |
| Idaho (8)  | 97,079   | 12.7%  | 11.0%       | 18.1%        | 16.6%        | 17.8%        | 23.8%        | 0.2%        | 29.0%        | 41.7%        |
| Kentucky   | 106,330  | 10.6%  | 7.8%        | 14.8%        | 16.1%        | 21.5%        | 29.2%        | 0.5%        | 22.4%        | 33.0%        |
| Maryland (8)   | 120,145  | 5.7%   | 10.7%       | 19.0%        | 17.6%        | 22.4%        | 24.6%        | 1.7%        | 29.2%        | 34.8%        |
| Massachusetts (8)  | 140,540  | 5.6%   | 8.8%        | 21.8%        | 17.2%        | 21.8%        | 24.8%        | 1.0%        | 30.3%        | 35.8%        |
| Minnesota (5)  | 59,704   | 9.0%   | 7.1%        | 17.2%        | 14.9%        | 19.0%        | 32.7%        | 0.5%        | 24.2%        | 33.2%        |
| New York (5)   | 408,841  | 2.6%   | 9.2%        | 20.2%        | 18.4%        | 23.5%        | 25.6%        | 0.5%        | 29.4%        | 32.0%        |
| Rhode Island   | 31,337   | 5.0%   | 10.0%       | 17.3%        | 17.5%        | 22.7%        | 27.5%        | 0.9%        | 27.1%        | 32.1%        |
| Vermont  | 31,619   | 6.4%   | 9.1%        | 13.0%        | 14.2%        | 22.4%        | 34.5%        | 0.5%        | 22.0%        | 28.4%        |
| Washington (5)   | 160,732  | 3.7%   | 7.9%        | 16.5%        | 16.4%        | 21.4%        | 33.9%        | 0.7%        | 24.2%        | 27.9%        |
| <b>TOTAL - SBMs Using Their Own Marketplace Platforms</b>  | <b>2,849,783</b>   | <b>5.7%</b>  | <b>9.8%</b> | <b>17.7%</b> | <b>16.4%</b> | <b>22.7%</b> | <b>26.9%</b> | <b>0.8%</b> | <b>27.5%</b> | <b>33.2%</b> |

## Notes:

“N/A” means that the data for the respective metric is not 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 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 eligible for a Special Enrollment Period (SEP). Except for three states, the data for total number of plan selections removes cancellations and terminations. Minnesota does not remove either from its total plan selection data, whereas DC removes cancellations and terminations from its automatic reenrollment data and New York removes cancellations and terminations from its active and automatic reenrollee data. For additional technical notes, please refer to Appendix D 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 issuer) during the reference period, excluding plan selections with unknown data for a given metric. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated.

(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) California reports represent data through 2/22/15. California's plan selection breakouts result in roughly 4,000 unknowns due to total plan selection and plan selection breakout reports run at different times.

(5) All states except DC, Minnesota, New York, and Washington removed cancellations and terminations from all total plan selection data. DC removed cancellations and terminations from its auto reenrollee data. New York removed cancellations and terminations from all of its reenrollee data, active and automatic, but did not remove them from the "new" plan selections. Washington removed terminations from all of their plan selection data. Minnesota did not remove cancellations and terminations from its plan selection data.

(7) Washington reports only individuals who have both enrolled and paid for coverage (effectuated enrollment) for its report of plan selection, thereby undercounting the true total of plan selections in Washington.

(8) 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.

Source: Centers for Medicare & Medicaid Services, as of 3-6-15.

## APPENDIX D: TECHNICAL NOTES

We believe that the information contained in this issue brief provides the most systematic summary of enrollment-related activity in the Marketplaces during 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 have been included in weekly enrollment updates 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 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 2-15-15 (including SEP activity through 2-22-15) 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 2015 Open Enrollment period – which generally corresponds with data from 11-15-14 to 2-15-15 (including SEP activity through 2-22-15) for the 37 HealthCare.gov states, and from 11-15-14 to 2-15-15 (including SEP activity through 2-21-15) for the states that are using their own Marketplace platforms for the 2015 coverage, except California. 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 D1**

| Marketplace Type   | Reporting Period  |   |
|--|---|---|
|  | 2015 March Enrollment Report                              | Week 14 Weekly Enrollment Snapshot                        |
| States Using the HealthCare.gov Marketplace Platform (37 states) | 11-15-14 to 2-22-15 (including SEP activity thru 2-22-15) | 11-15-14 to 2-22-15 (including SEP activity thru 2-22-15) |
| States Using Their Own Marketplace Platform (14 states)          |   |   |
| California   | 11-15-14 to 2-22-15 (including SEP activity thru 2-22-15) | Not Included  |
| Other 13 States (including DC)                                   | 11-15-14 to 2-21-15 (including SEP activity thru 2-22-15) | Not Included  |

**2015 Plan Selections Through the Marketplaces (also known as Marketplace Plan Selections)**

– Represents cumulative data on the number of unique individuals who have selected a 2015 plan through the Marketplaces for enrollment through the Marketplaces (with or without the first premium payment having been received directly by the issuer) during the reference period. This is also known as pre-effectuated enrollment, because enrollment is not considered effectuated until the first premium payment is made, and this figure includes plan selections for which enrollment has not yet been effectuated. These data represent the number of individuals with active plan selections for a Marketplace medical plan as of the reporting date. These data 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 eligible for a Special Enrollment Period (SEP).

Additionally, in the data for the HealthCare.gov states, individuals whose Marketplace coverage has been cancelled or terminated are not included in the total number of Marketplace plan selections.<sup>28</sup> The data for the HealthCare.gov states also do not include plan selection data for coverage with an effective date beginning after 3-1-15. This table only reflects data for the individual market Marketplaces. Among the SBMs that are using their own Marketplace platforms, except for three states, the data for total number of plan selections removes cancellations and terminations. Minnesota does not remove either from its total plan selection data, whereas DC removes cancellations and terminations from its automatic reenrollment data and New York removes cancellations and terminations from its active and automatic reenrollee data.

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.

This report includes data on SEP activity through 2-22-15. It is important to note that this report does not include data on effectuated enrollment (that the number of people who have paid monthly premiums to the insurer). Additionally, this report does not include data relating to any individuals who enroll through an SEP after 2-22-15, including any upcoming SEP for individuals who were unaware of, or did not understand the implications of the fee for not enrolling in health insurance coverage.

This report does not include data relating to any individuals who enroll through an SEP after 2-22-15, including any upcoming SEP for individuals who were unaware of, or did not understand the implications of the fee for not enrolling in health insurance coverage.

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<sup>28</sup> For example, coverage has been terminated for approximately 90,000 consumers who had 2014 coverage were not able to continue their Marketplace coverage in 2015 because they did not provide the necessary documentation of their citizenship or immigration status, and these individuals are no longer included in the cumulative total.

***In-Line Special Enrollment Period*** – The SEP for individuals who were “in-line” on 2-15-15 ended on 2-22-15 for the states that are using the HealthCare.gov platform. Most of the SBMs that are using their own Marketplace platforms allowed individuals who started the process before 2-15-15, but could not finish, to complete the application and select a plan by varying dates, mostly within February, with the exception of Colorado, which allowed applicants through March 2 to complete their applications, and Washington, which allowed applicants to enroll through April 17. Vermont has indicated that the state will assist consumers with enrollment if they report a problem trying to enroll, but did not provide for a formal extension period.

***Tax Season Special Enrollment Period*** – CMS recently announced a special enrollment period (SEP) for tax season. For individuals and families in the HealthCare.gov states who did not have health coverage in 2014 and are subject to the fee or “shared responsibility payment” when they file their 2014 taxes. For those who were unaware or did not understand the implications of the fee for not enrolling in coverage, CMS will provide consumers with an opportunity to purchase health insurance coverage from March 15 to April 30, 2015. (For additional information, see <http://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2015-Press-releases-items/2015-02-20.html>). Most of the SBMs that are using their own Marketplace platforms followed the federal guidelines regarding the SEP for tax season.

***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 plan through the Marketplaces (with or without the first premium payment having been received directly by the issuer) and did not have an active 2014 Marketplace plan selection as of November 1, 2014. These data do not include stand-alone dental plan selections. These data also generally do not include any individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for a Special Enrollment Period (SEP);. Additionally, in the data for the HealthCare.gov states and most states using their own platforms, individuals who have cancelled or terminated their Marketplace plans are not included in the total number of Marketplace plan selections. 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 coverage through the Marketplaces”*** 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 have been automatically reenrolled in coverage through the Marketplaces – with or without the first premium payment having been received directly by the issuer. Individuals who have cancelled or terminated their Marketplace plans are not included in the total number of plan selections. These data also do not include: standalone dental plan selections; or

individuals who may have selected a 2014 Marketplace plan during the reporting period, as a result of having been eligible for 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 coverage through the Marketplaces 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. A consumer is considered to have actively selected a plan, if they are a consumer with coverage in 2014 who came back, updated their application and selected a plan. The consumer could have actively selected their 2014 plan, decided to choose a new plan from their existing insurer or selected a new plan from a different insurer. A consumer could have actively selected a plan prior to the 12-15-14 deadline or could have come back after being automatically reenrolled and decided to update their information and select a plan; and
- o ***Consumers who have been 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. A consumer was automatically reenrolled into their 2014 plan or a plan with similar benefits from their same issuer<sup>29</sup> if they were enrolled in a Marketplace plan in 2014 and did not select a plan ahead of the 12-15-14 deadline. If the consumer realized after the deadline that there was a better plan for their family or needed to update their information, the consumer could make that change before 2-15-15, and would at that point be considered as having actively selected a plan.

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

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<sup>29</sup> Some consumers’ 2014 plans were no longer active for 2015 but the insurer offered a plan with similar benefits. Based on the information provided by the insurance companies, consumers were “crosswalked” and automatically re-enrolled into that similar plan. No consumer was automatically re-enrolled into a plan with a different issuer.



Appendix Table D2

| Enrollment Type  | States Using Their Own Marketplace Platforms<br>(14 states including DC)                        | States Using the HealthCare.gov Platform<br>(37 states) |
|--|---|---|
| New Consumers  | Included in this report   | Included in this report                                 |
| Consumers Who Are Actively Reenrolling in Marketplace Coverage             | Included in this report *   | Included in this report**                               |
| Consumers Who Are Being Automatically Reenrolled into Marketplace Coverage | Included in this report for the following 10 states: CA, CO, CT, DC, HI, KY, MN, NY, VT, and WA | 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).

**Automatic Reenrollments** – In this report, data on automatic reenrollments are included in the overall Marketplace plan selection totals for Consumers Who Are Actively Reenrolling in Marketplace Coverage for the 37 HealthCare.gov states and 10 of the SBMs that are using their own Marketplace platforms for 2015 (see Appendix Table D2 for a list of these states). These data represent consumers who had a Marketplace plan selection as of November 2014, and retain coverage without returning to the Marketplace and selecting a plan because the applicable Marketplace has passively reenrolled them in 2015 Marketplace coverage. It is important to note that the reenrollment data in this report may include some individuals who were reenrolled in coverage through the Marketplaces as of 2-15-15 (including SEP activity through 2-22-15), but who may ultimately decide not to retain Marketplace coverage for the remainder of 2015 (for example, because they have obtained coverage through another source such as an employer or Medicaid/CHIP). The plan selection data in future reports will exclude these individuals (e.g., due to the subsequent cancellation or termination of their coverage).

**Definition of Active Reenrollees Who Switched Plans** – For purposes of this report, active reenrollees who switched plans are active reenrollees who have not selected the same plan as for the 2014 coverage year, or a similar “crosswalked” plan with similar benefits that is offered by the same issuer as their 2014 plan.<sup>30</sup>

**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

<sup>30</sup> Some consumers’ 2014 plans were no longer active for 2015 but the insurer offered a plan with similar benefits, known as a “crosswalk plan.” For purposes of this report, active reenrollees who selected the crosswalk plan for the 2015 coverage year (identified based on the information provided by the insurance companies) are not included in the total number who switched plans.



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:

- **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*).

- **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, people who select 2015 Marketplace plans in Nevada and Oregon are generally treated as new consumers for operational enrollment and reporting purposes because the system cannot identify or automatically reenroll individuals 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 coverage through the Marketplaces 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 Marketplace Plan Selections with Financial Assistance*** – Marketplace plan selections with financial assistance includes plan selections for individuals who are receiving a premium tax credit and/or cost-sharing reduction.

***Data on Premium Tax Credits*** – The Affordable Care Act specifies that an individual or family who is eligible for premium tax credits will be required to pay no more than a fixed percentage of their income based on the second-lowest cost silver plan available in the Marketplace in their coverage area. This applicable percentage varies only by household income as a percentage of the Federal Poverty Level (FPL) and does not depend on household members' ages, the number of people within the household covered through the Marketplace, or Marketplace premiums. The applicable percentage is converted into a maximum dollar amount the household is required to pay annually for the benchmark plan, and the premium tax credit is applied to make up the difference between the maximum dollar amount and the actual premium, if any. The exact dollar amount of the premium tax credit depends on the premium of the second-lowest cost silver plan available to the household and the cost of covering the family members who are seeking Marketplace coverage.

For purposes of this report, an individual qualifying for an advance premium tax credit was defined as any individual with an APTC amount >\$0. Averages in this brief refer to plan-selection-weighted averages across individuals with plan selections with advance premium tax credits in the 37 HealthCare.gov states.<sup>31</sup>

***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. Data for standalone dental plan selections are shown separately.

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<sup>31</sup> For additional methodological information, see the ASPE Issue Brief “Health Insurance Marketplace 2015: Average Premiums After Advance Premium Tax Credits Through January 30 in 37 States Using the HealthCare.gov Platform,” accessed at [http://www.aspe.hhs.gov/health/reports/2015/MarketPlaceEnrollment/APTC/ib\\_APTC.pdf](http://www.aspe.hhs.gov/health/reports/2015/MarketPlaceEnrollment/APTC/ib_APTC.pdf).

**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 types (see Appendix Tables A1 and A2).

**Data on Additional Characteristics of Marketplace Plan Selections** – This report also includes data on the characteristics of individuals 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,<sup>32</sup> but lower than that reported in administrative data sources in the healthcare industry.<sup>33</sup> 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 individuals 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.<sup>34</sup>

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<sup>32</sup> 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 Center for Health Statistics regarding the American Community Survey, the Current Population Survey, and the National Health Interview Survey; February 2014.)

<sup>33</sup> 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>.

<sup>34</sup> 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

- **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](http://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.

**Metrics Reported by SBMs Using Their Own Marketplace Platforms** -- It is important to note that some of the 14 states that are using their own Marketplace platforms are not separately reporting data for new consumers and consumers who are reenrolling in Marketplace coverage.

**Appendix Table D3**

| <b>Metric</b>   | <b>Number of States Reporting Data for this Metric</b>  |
|---|---|
| Visitors to the Marketplace Websites  | 13 States – California, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Kentucky, Maryland, Minnesota, New York, Rhode Island, Vermont, Washington                |
| Calls to the Marketplace Call Centers   | 14 States – California, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, New York, Rhode Island, Vermont, Washington |
| Completed Applications  | 12 States – Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, Rhode Island, Vermont, Washington                       |
| Individuals Applying for Coverage in Completed Applications   | 12 States – Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Kentucky, Massachusetts, Minnesota, New York, Rhode Island, Vermont, Washington                       |
| Number of Individuals Determined Eligible to Enroll in a Marketplace Plan                           | 14 States – Colorado, California, Connecticut, District of Columbia, Hawaii, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, New York, Rhode Island, Vermont, Washington |
| Number of Individuals Determined Eligible to Enroll in a Marketplace Plan with Financial Assistance | 13 States – California, Connecticut, District of Columbia, Hawaii, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, New York, Rhode Island, Vermont, Washington           |
| Number of Individuals Determined or   | 14 States – California, Colorado, Connecticut, DC, Hawaii, Idaho,   |

Enrollment Report, which can be accessed at [http://www.aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/ib\\_2014Apr\\_enrollment.pdf](http://www.aspe.hhs.gov/health/reports/2014/MarketPlaceEnrollment/Apr2014/ib_2014Apr_enrollment.pdf).

| <b>Metric</b>   | <b>Number of States Reporting Data for this Metric</b>  |
|---|---|
| Assessed Eligible for Medicaid/CHIP by the Marketplace          | Kentucky, Maryland, Massachusetts, Minnesota, New York, Rhode Island, Vermont, Washington   |
| Number of Individuals with 2015 Marketplace Plan Selections     | 14 States – California, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, New York, Rhode Island, Vermont, Washington |
| 2015 Marketplace Plan Selections by Financial Assistance Status | 13 States – California, Colorado, Connecticut, DC, Hawaii, Idaho, Kentucky, Maryland, Massachusetts, New York, Rhode Island, Vermont, Washington                              |
| 2015 Marketplace Plan Selections by Age                         | 14 States –California, Colorado, Connecticut, DC, Hawaii, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, New York, Rhode Island, Vermont, Washington                    |
| 2015 Marketplace Plan Selections by Gender                      | 14 States – California, Colorado, Connecticut, DC, Hawaii, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, New York, Rhode Island, Vermont, Washington                   |
| 2015 Marketplace Plan Selections by Metal Level                 | 14 States –California, Colorado, Connecticut, DC, Hawaii, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, New York, Rhode Island, Vermont, Washington                    |

**Effectuated Enrollment** – Data on effectuated enrollment for the 2015 Open Enrollment period are not yet available. Therefore, the enrollment data in this report are generally based on pre-effectuated enrollment (plan selections). However, one state, Washington, has reported data on effectuated enrollment.

**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.