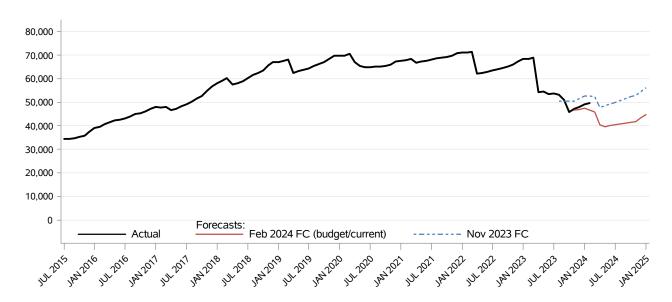
Medical Services State Children's Health Insurance Program (SCHIP)

CFC Monthly Monitoring Report

The **State Children's Health Insurance Program (SCHIP)** provides medical services to children above 200% and below 300% of the Federal Poverty Level (FPL) who are not eligible for SSI.



		Forecasts		Budget/Current Forecast and Variance		
Month	Actual	Nov 2023	Feb 2024	Feb 2024	N	%
SEP 2023	50,925	50,576				
OCT 2023	45,883	50,585				
NOV 2023	47,080	50,585	46,599	46,599	481	1.0%
DEC 2023	47,982	51,675	47,026	47,026	956	2.0%
JAN 2024	49,063	52,657	47,370	47,370	1,693	3.6%
FEB 2024	49,626	52,551	46,613	46,613	3,013	6.5%
MAR 2024		52,406	45,828	45,828		
APR 2024		47,646	40,319	40,319		
MAY 2024		48,462	39,695	39,695		
JUN 2024		49,258	40,055	40,055		
JUL 2024		50,037	40,416	40,416		
AUG 2024		50,798	40,776	40,776		

Data Source: HCA Provider One (last update: 05/06/2024)

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Descriptions:

- **Actual:** The number of clients eligible at any time during the month and are lag adjusted up to 24 months and the most recent two months of data are not shown.
- **Budget Forecast:** Caseload forecast adopted by the Caseload Forecast Council to serve as the basis for the biennial or supplemental budget. The actual budget may incorporate adjustments to this forecast to reflect legislation and policy decisions by the legislature subsequent to the development of the forecast.
- Current Forecast: Most recent forecast adopted by the Caseload Forecast Council; may be the same as the Budget Forecast.

Disclaimer of Liability:

Although the Washington State Caseload Forecast Council does all that it can to assure the accuracy of its forecasts and the data on which its forecasts are based, no warranty expressed or implied is made regarding accuracy, adequacy, completeness, legality, reliability, or usefulness of any information contained herein. This disclaimer applies to both isolated and aggregate uses of the information. If you find any errors or omissions, we encourage you to report them to the Caseload Forecast Council.