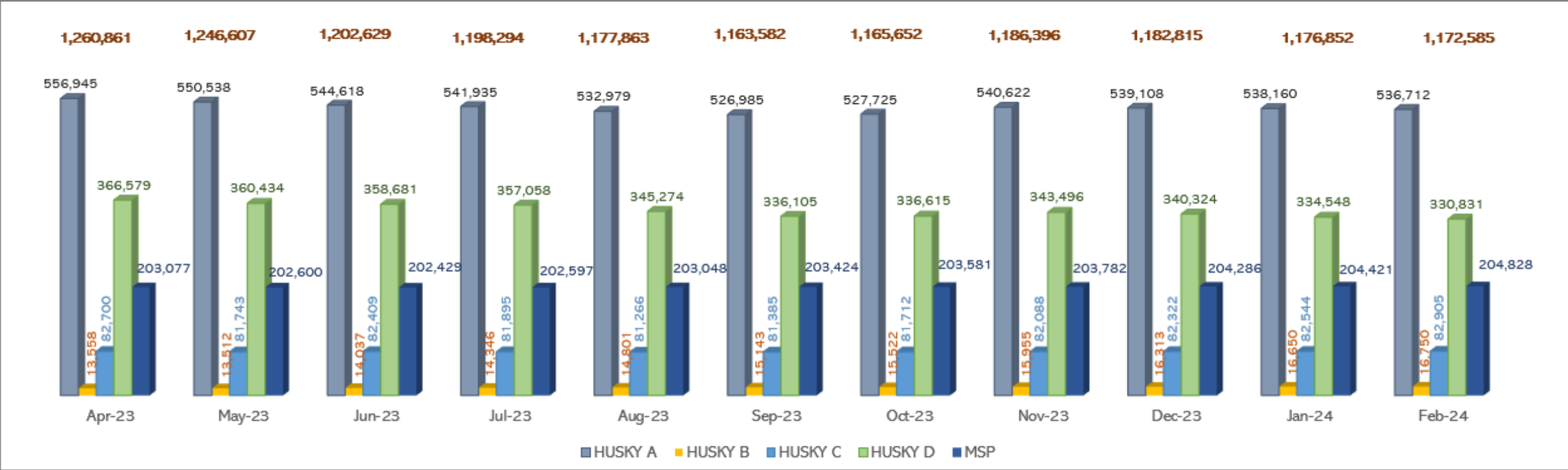


PUBLIC HEALTH EMERGENCY (PHE)
UNWINDING – HUSKY HEALTH
PROGRAM PERFORMANCE
DASHBOARD

APRIL – FEBRUARY 2024



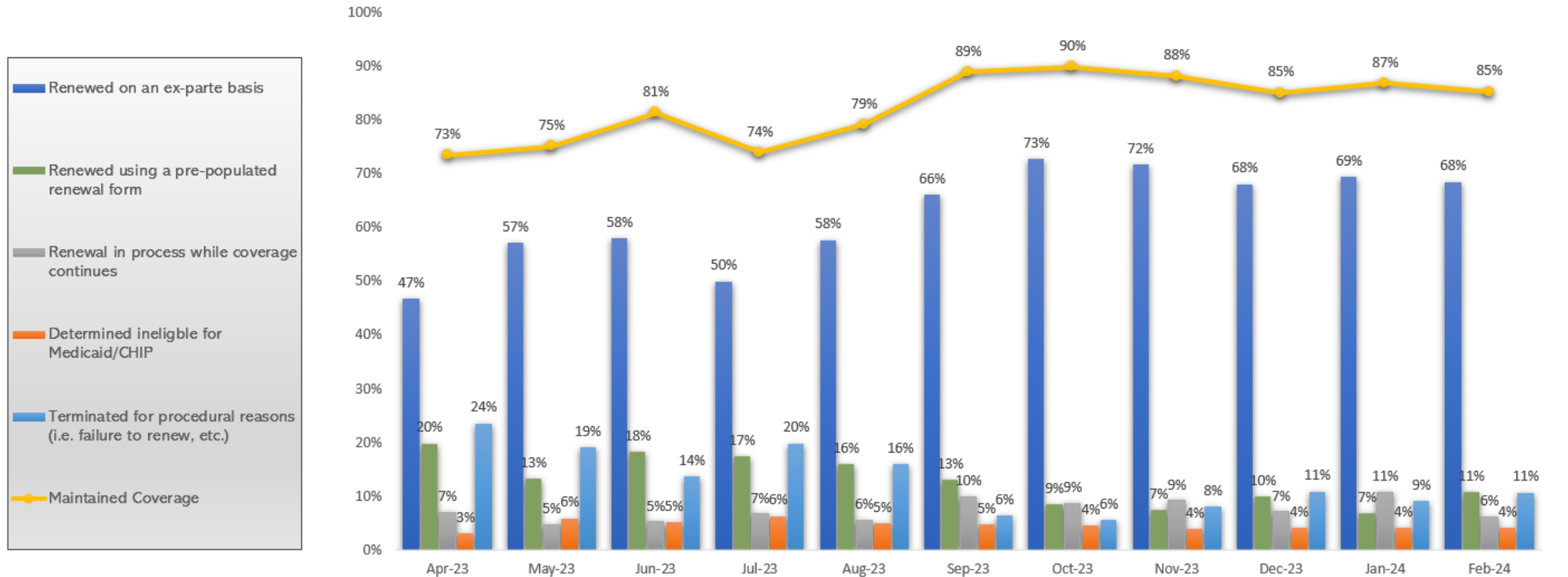
HUSKY ENROLLMENT DURING UNWINDING



HUSKY RENEWAL ACTIVITY AND OUTCOMES

HUSKY Health Renewal Outcomes – April to February 2024

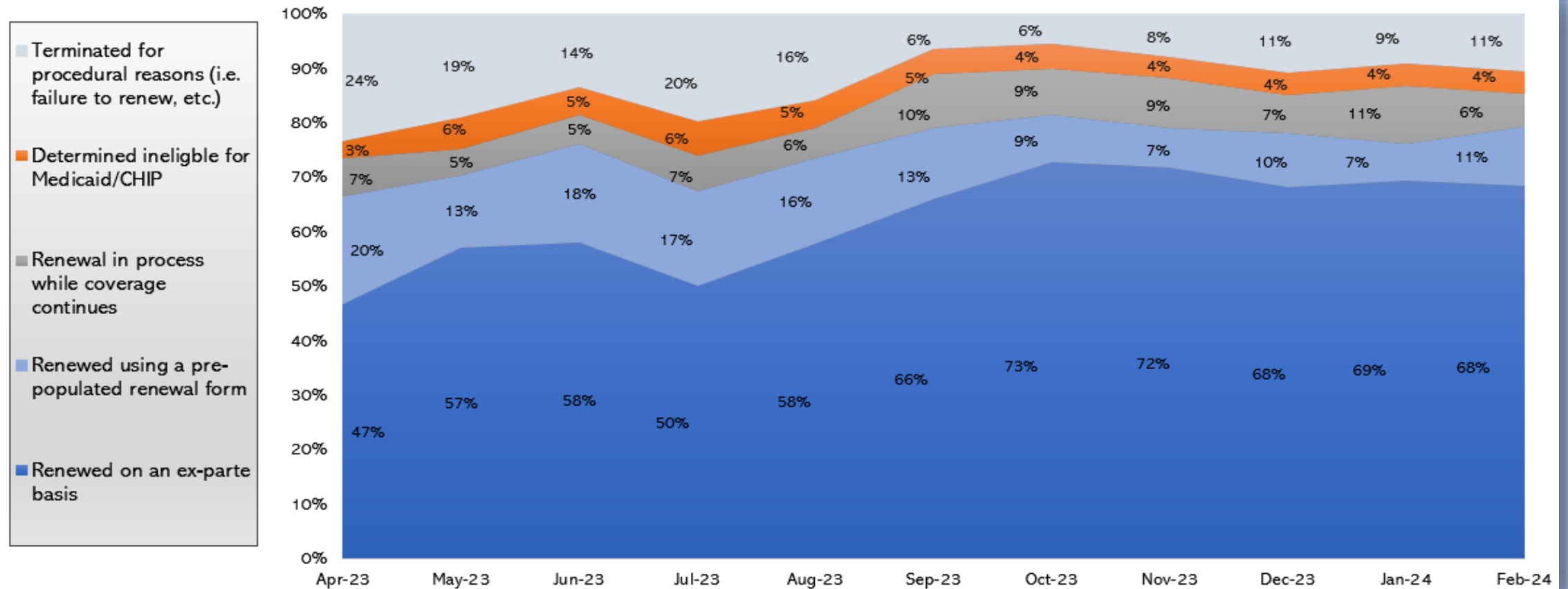
As reported by DSS to CMS at end of each month



From April to February, an average of 82 % of individuals maintained coverage at month end. Those who disenroll often re-enroll after the month end.

HUSKY Health Renewal Outcomes – April to February 2024

As reported by DSS to CMS at end of each month



From April to February, an average of 82% of individuals maintained coverage at month end. Those who disenroll often re-enroll after the month end.

NATIONAL RENEWAL OUTCOMES BY STATE

FEDERAL DATA FROM CMS

Medicaid/CHIP Renewal Outcomes, by State (November 2023)

State	Total Due for Renewal in November	Among the Total Number of Medicaid/CHIP Beneficiaries Due for Renewal in November 2023:							
		Number Renewed in Medicaid/CHIP	Percent Renewed in Medicaid/CHIP*	Percent Renewed on an <i>Ex Parte</i> Basis* (i.e., based on available information)	Number Terminated from Medicaid/CHIP	Percent Terminated from Medicaid/CHIP*	Percent Terminated for a Procedural Reason*	Number of Renewals Pending at the End of the Month	Percent Pending at the End of the Month
AK	10,781	3,971	36.8%	27.4%	1,847	17.1%	6.7%	4,963	46.0%
AL	94,633	61,893	65.4%	35.2%	29,765	31.5%	27.8%	2,975	3.1%
AR	33,185	27,703	83.5%	70.1%	3,800	11.5%	8.8%	1,682	5.1%
AZ	157,842	134,923	85.5%	79.1%	19,442	12.3%	8.0%	3,477	2.2%
CA	1,058,359	493,960	46.7%	36.2%	205,710	19.4%	17.8%	358,689	33.9%
CO	149,355	70,919	47.5%	24.3%	68,758	46.0%	31.8%	9,678	6.5%
CT	105,291	83,218	79.0%	71.7%	12,476	11.8%	8.0%	9,597	9.1%
DC	29,784	13,756	46.2%	40.0%	4,256	14.3%	13.2%	11,772	39.5%
DE	23,654	10,313	43.6%	27.2%	2,408	10.2%	3.5%	10,933	46.2%
FL	346,495	208,532	60.2%	31.0%	120,712	34.8%	24.9%	17,251	5.0%
GA	159,004	87,708	55.2%	40.7%	57,516	36.2%	29.6%	13,780	8.7%
HI	17,513	17,501	99.9%	99.9%	12	0.1%	0.0%	0	0.0%
IA	65,181	35,468	54.4%	40.8%	2,737	4.2%	0.9%	26,976	41.4%
ID	15,159	10,922	72.0%	58.5%	3,569	23.5%	19.0%	668	4.4%
IL	272,042	184,243	67.7%	58.9%	10,338	3.8%	0.3%	77,461	28.5%
IN	140,607	79,350	56.4%	47.7%	27,477	19.5%	16.6%	33,780	24.0%
KS	40,102	17,896	44.6%	38.5%	2,504	6.2%	0.2%	19,702	49.1%
KY	32,097	22,888	71.3%	62.6%	1,508	4.7%	0.0%	7,701	24.0%
LA	119,971	67,160	56.0%	42.8%	47,309	39.4%	27.2%	5,502	4.6%
MA	125,118	60,045	48.0%	26.2%	61,892	49.5%	42.4%	3,181	2.5%
MD	158,602	96,526	60.9%	49.4%	39,583	25.0%	21.7%	22,493	14.2%
ME	37,249	18,383	49.4%	30.8%	1,345	3.6%	0.9%	17,521	47.0%
MI	231,036	143,025	61.9%	37.3%	13,216	5.7%	0.9%	74,795	32.4%
MN	140,304	56,231	40.1%	22.9%	9,111	6.5%	0.5%	74,962	53.4%
MO	98,816	52,398	53.0%	48.7%	20,499	20.7%	16.3%	25,919	26.2%
MS	54,046	27,919	51.7%	19.4%	7,448	13.8%	9.3%	18,679	34.6%

*Percentages calculated as a share of the total number of beneficiaries due for renewal in the reporting month. AK, CO, DC, DE, IL, KS, KY, ME, MI, MN, NH, NJ, NM, NV, NY, OR, and VT held some or all procedural terminations for renewals due in November.

Medicaid/CHIP Renewal Outcomes, by State (November 2023) (cont'd)

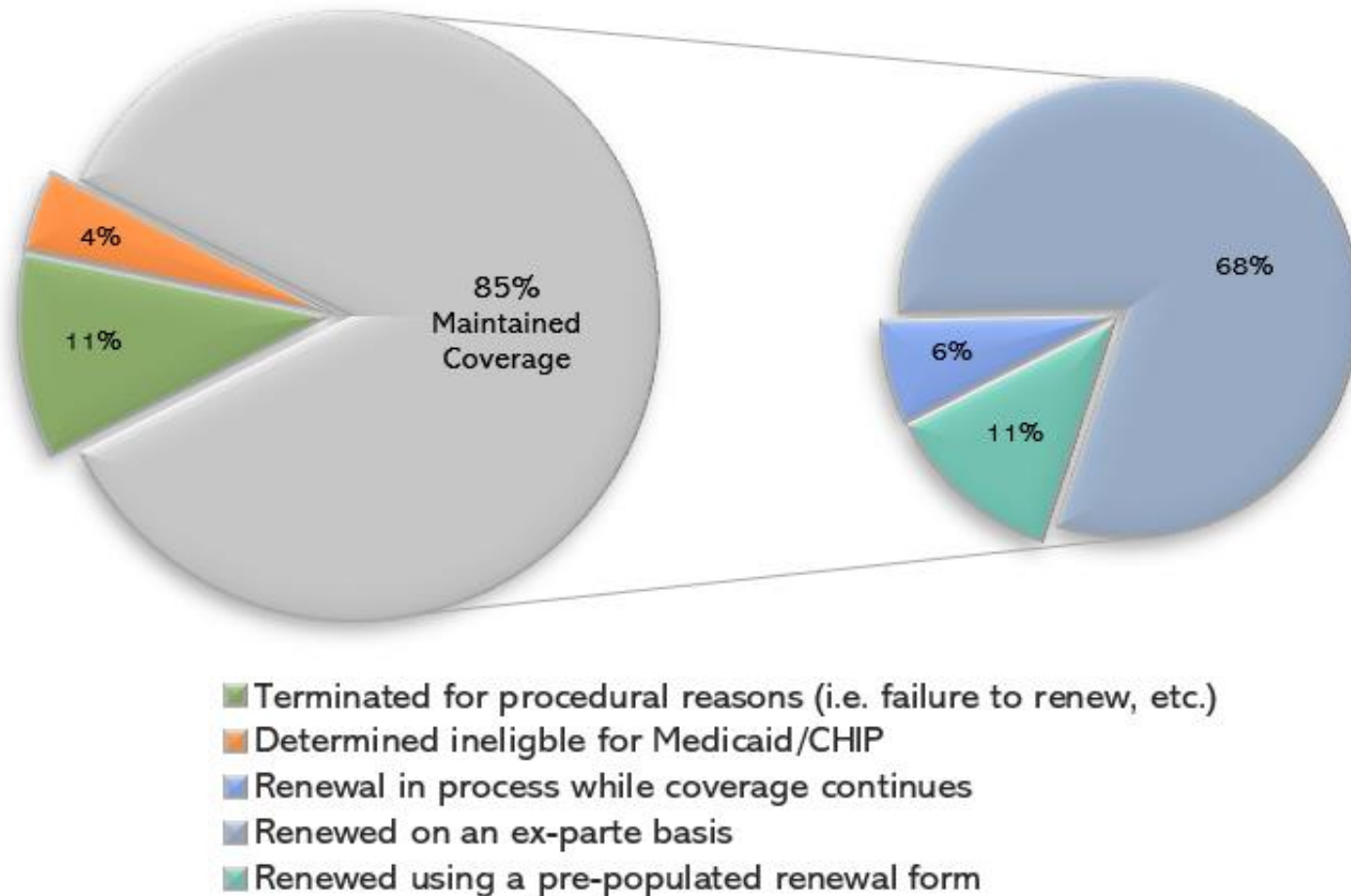
State	Total Due for Renewal in November	Among the Total Number of Medicaid/CHIP Beneficiaries Due for Renewal in November 2023:							
		Number Renewed in Medicaid/CHIP	Percent Renewed in Medicaid/CHIP*	Percent Renewed on an <i>Ex Parte</i> Basis* (i.e., based on available information)	Number Terminated from Medicaid/CHIP	Percent Terminated from Medicaid/CHIP*	Percent Terminated for a Procedural Reason*	Number of Renewals Pending at the End of the Month	Percent Pending at the End of the Month
MT	19,766	6,501	32.9%	19.5%	5,936	30.0%	24.9%	7,329	37.1%
NC	188,607	112,937	59.9%	59.4%	19,237	10.2%	8.8%	56,433	29.9%
ND	10,092	6,005	59.5%	31.8%	3,967	39.3%	28.1%	120	1.2%
NE	36,029	12,088	33.6%	27.6%	4,140	11.5%	2.6%	19,801	55.0%
NH	12,279	10,249	83.5%	73.6%	1,478	12.0%	9.3%	552	4.5%
NJ	154,884	39,897	25.8%	15.9%	6,930	4.5%	0.7%	108,057	69.8%
NM	66,014	47,004	71.2%	20.2%	10,153	15.4%	12.2%	8,857	13.4%
NV	48,917	40,933	83.7%	60.9%	541	1.1%	0.0%	7,443	15.2%
NY	546,384	367,035	67.2%	36.1%	159,084	29.1%	11.3%	20,265	3.7%
OH	289,051	211,629	73.2%	47.9%	47,554	16.5%	11.5%	29,868	10.3%
OK	51,269	28,657	55.9%	22.3%	19,682	38.4%	34.0%	2,930	5.7%
OR	109,883	92,797	84.5%	79.3%	16,230	14.8%	6.6%	856	0.8%
PA	260,173	90,178	34.7%	6.0%	47,202	18.1%	7.4%	122,793	47.2%
RI	22,509	9,590	42.6%	38.6%	10,656	47.3%	21.8%	2,263	10.1%
SC	59,020	50,290	85.2%	81.9%	5,727	9.7%	6.6%	3,003	5.1%
SD	5,911	2,656	44.9%	28.0%	2,477	41.9%	10.0%	778	13.2%
TN	106,872	62,749	58.7%	49.5%	29,110	27.2%	21.4%	15,013	14.0%
TX	1,080,037	257,191	23.8%	4.1%	311,150	28.8%	18.0%	511,696	47.4%
UT	34,456	12,707	36.9%	23.0%	17,668	51.3%	48.9%	4,081	11.8%
VA	153,643	119,426	77.7%	71.7%	8,724	5.7%	3.2%	25,493	16.6%
VT	12,122	7,905	65.2%	51.6%	2,338	19.3%	16.1%	1,879	15.5%
WA	142,381	117,387	82.4%	73.5%	24,444	17.2%	13.3%	550	0.4%
WI	84,934	41,905	49.3%	10.9%	35,932	42.3%	29.3%	7,097	8.4%
WV	38,716	19,974	51.6%	18.9%	15,128	39.1%	34.4%	3,614	9.3%
WY	5,478	2,660	48.6%	30.2%	280	5.1%	0.5%	2,538	46.3%
Total	7,255,653	3,857,201	53.2%	35.8%	1,581,006	21.8%	14.9%	1,817,446	25.0%

*Percentages calculated as a share of the total number of beneficiaries due for renewal in the reporting month. AK, CO, DC, DE, IL, KS, KY, ME, MI, MN, NH, NJ, NM, NV, NY, OR, and VT held some or all procedural terminations for renewals due in November.

HUSKY RENEWAL OUTCOMES – LATEST STATUS

HUSKY Health Renewal Outcomes – February 2024

As reported by DSS to CMS at end of each month



Notes:

- ❑ Data captures renewal outcomes at individual level (not household). In February, 104,272 individuals went through the renewal process.
- ❑ 68% of individuals had coverage renewed without further information being requested from them. This is called an *ex-parte* or passive renewal.
- ❑ 11% of individuals who could not be renewed passively (i.e., data sources show income over the program limit) were renewed using a pre-filled form.
- ❑ 6% of individuals were conditionally enrolled/renewal in process, but a final eligibility determination has not yet been made (pending receipt of outstanding verifications).
- ❑ Data is point-in-time at end of reporting month and does not include subsequent reenrollments.

HUSKY Health Renewal Outcomes February 2024

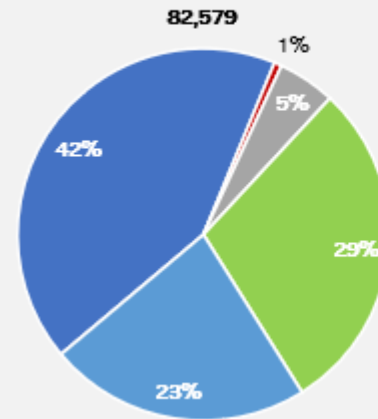
By Medical Benefit Plan

Notes:

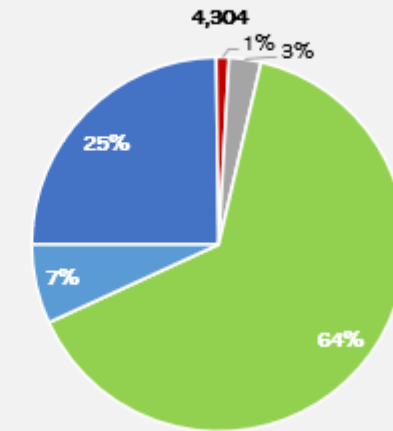
Medical Benefit Plans refer to the HUSKY Programs (A, B, C, and D) and the Medicare Savings Program (MSP)

- HUSKY A - Medicaid for children, parents, relative caregivers, and pregnant individuals, etc.
- HUSKY B - Children's Health Insurance Program (CHIP)
- HUSKY C - Medicaid for older adults and individuals with disabilities
- HUSKY D - Medicaid for adults without dependent children
- MSP provides premium and/or copayment assistance to Medicare beneficiaries

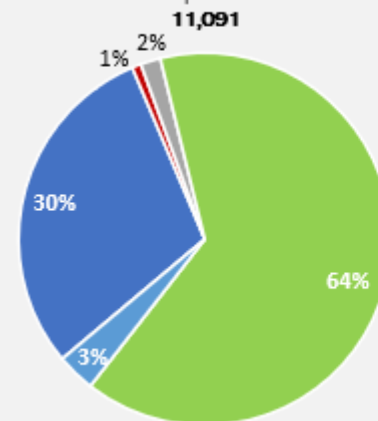
Renewed and retained in Medicaid/CHIP



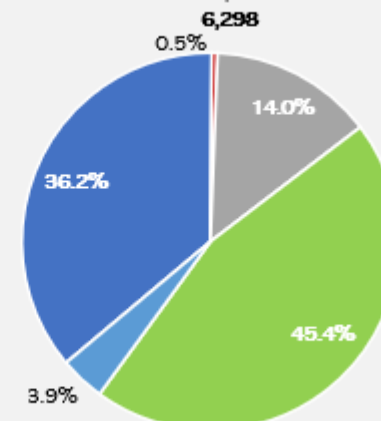
Determined ineligible for Medicaid/CHIP



Terminated for procedural reasons



Renewal in process

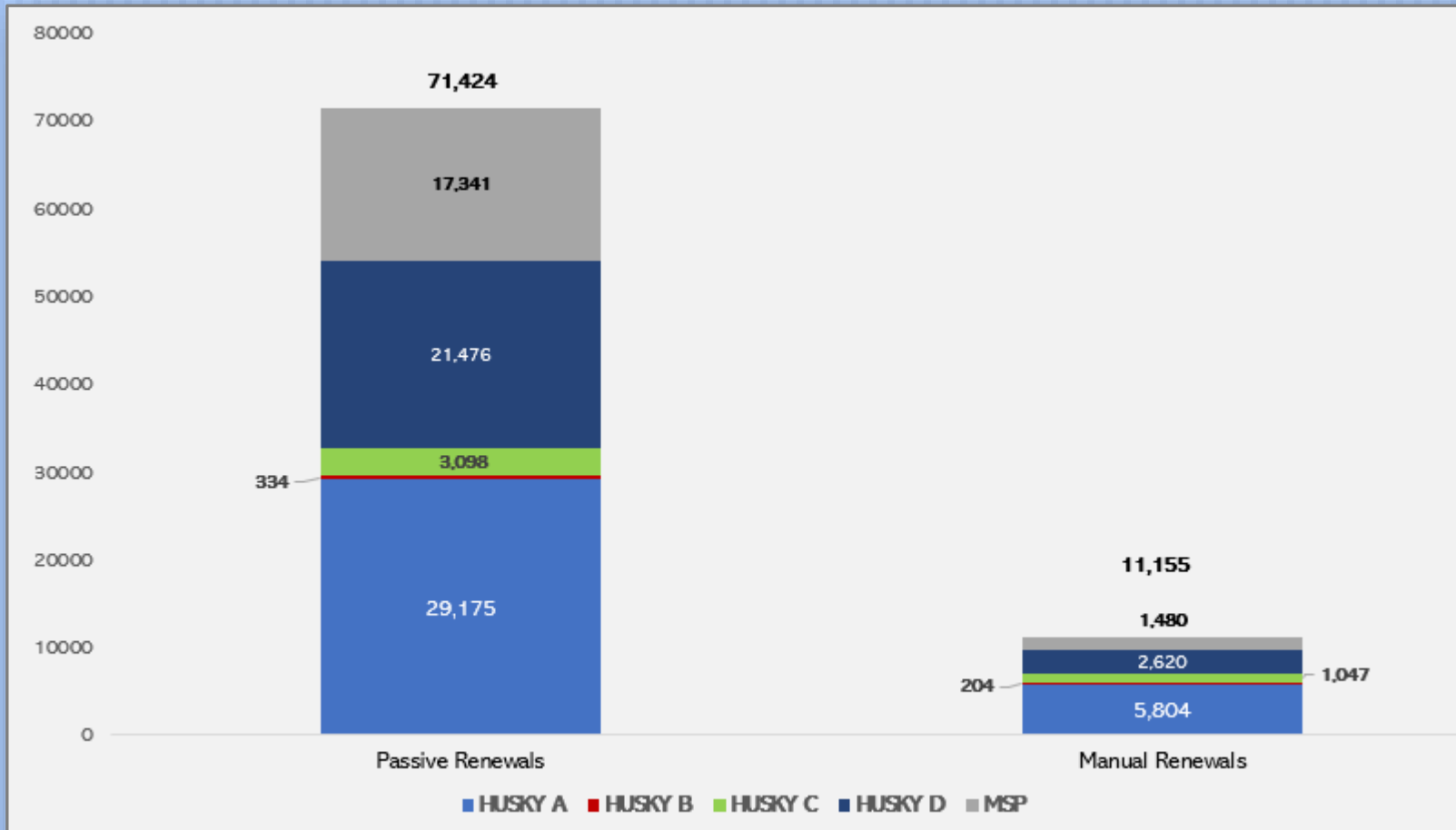


- HUSKY A
- HUSKY B
- HUSKY C
- HUSKY D
- MSP - Medicare Savings Program

HUSKY HEALTH RENEWAL OUTCOMES – FEBRUARY 2024

PASSIVE VS. MANUAL RENEWALS BY MEDICAL BENEFIT PLAN

88,702 individuals renewed during January, with 69% renewing "passively"

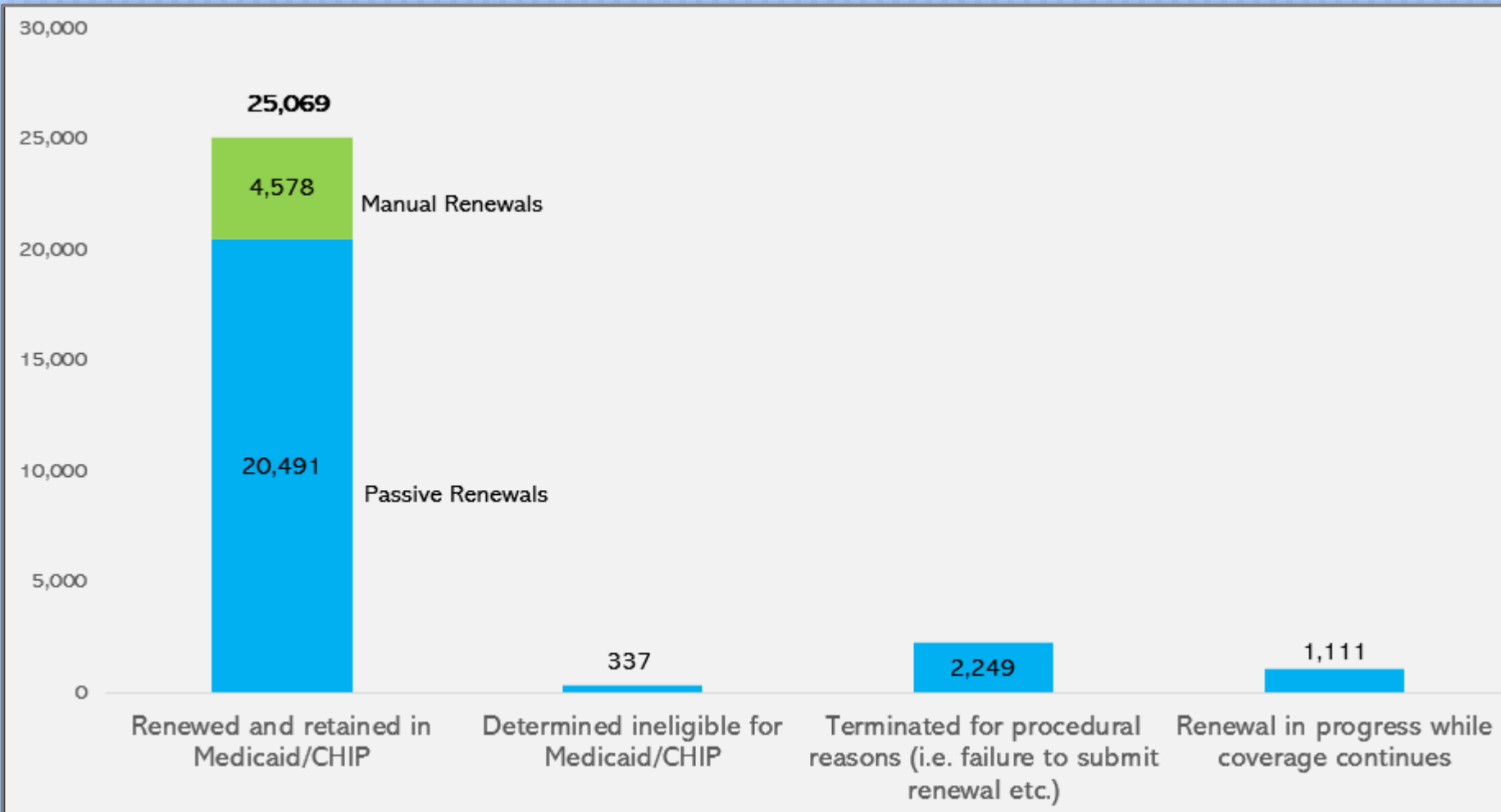


Notes:

Medical Benefit Plans refer to the HUSKY Programs (A, B, C, and D) and the Medicare Savings Program (MSP)

- HUSKY A – Medicaid for children, parents, relative caregivers, and pregnant individuals, etc.
- HUSKY B – Children’s Health Insurance Program (CHIP)
- HUSKY C – Medicaid for older adults and individuals with disabilities
- HUSKY D – Medicaid for adults without dependent children
- MSP – provides premium and/or copayment assistance to Medicare beneficiaries

HUSKY HEALTH RENEWAL OUTCOMES FOR CHILDREN – February 2024



Notes:

- Includes data for children on HUSKY A and HUSKY B (CHIP)
- The "Renewal in process" metric also includes children in HUSKY A and B who are in a reasonable opportunity period and have a VCL (verification check-list) for outstanding verifications. Coverage is maintained during this process.

RENEWAL POST-DISENROLLMENT STATUS

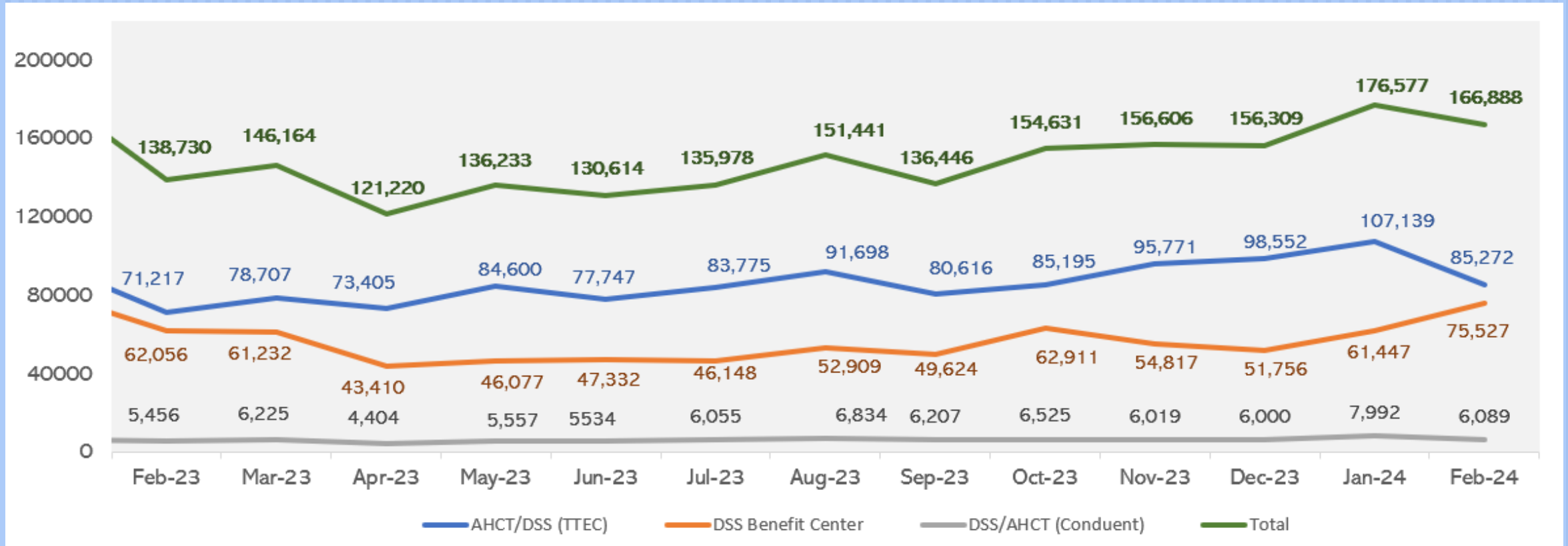
Tracking Individuals for up to 90 days after disenrollment

Renewal Disenrollment Tracking 30/60/90-Day Mark	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24
	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	60-day mark	30-day mark
Total individuals disenrolled at renewal	24,508	25,342	15,569	32,642	22,298	10,121	9,044	12,476	15,647	11,658	15,395
Total individuals active currently in MAGI HUSKY/CHIP	9,639	7,707	4,212	8,839	8,555	2,730	2,078	3,123	3,422	1,998	2,095
Total individuals active currently in QHP/APTC	851	1,493	1,145	2,350	1,216	827	953	996	1,053	654	978
Total individuals active currently in Covered CT	453	672	513	943	815	568	655	724	905	648	811
Total Individuals who transitioned to non-MAGI HUSKY	149	217	57	110	85	34	56	58	65	51	104
Total individuals who closed and are now active	11,092	10,089	5,927	12,242	10,671	4,159	3,742	4,901	5,445	3,351	3,988
*Total individuals not enrolled in any state programs	13,416	14,835	9,642	20,400	11,627	5,962	5,302	7,575	10,202	8,307	11,407
Re-enrolled	45%	40%	38%	38%	48%	41%	41%	39%	35%	29%	26%

41% of individuals who were disenrolled at renewal during the first 9 months of unwinding have regained coverage 30 to 90 days later, mostly by requalifying for HUSKY coverage. Most of the remaining households have stayed closed because they did not come in to renew coverage or be evaluated for other coverage options.

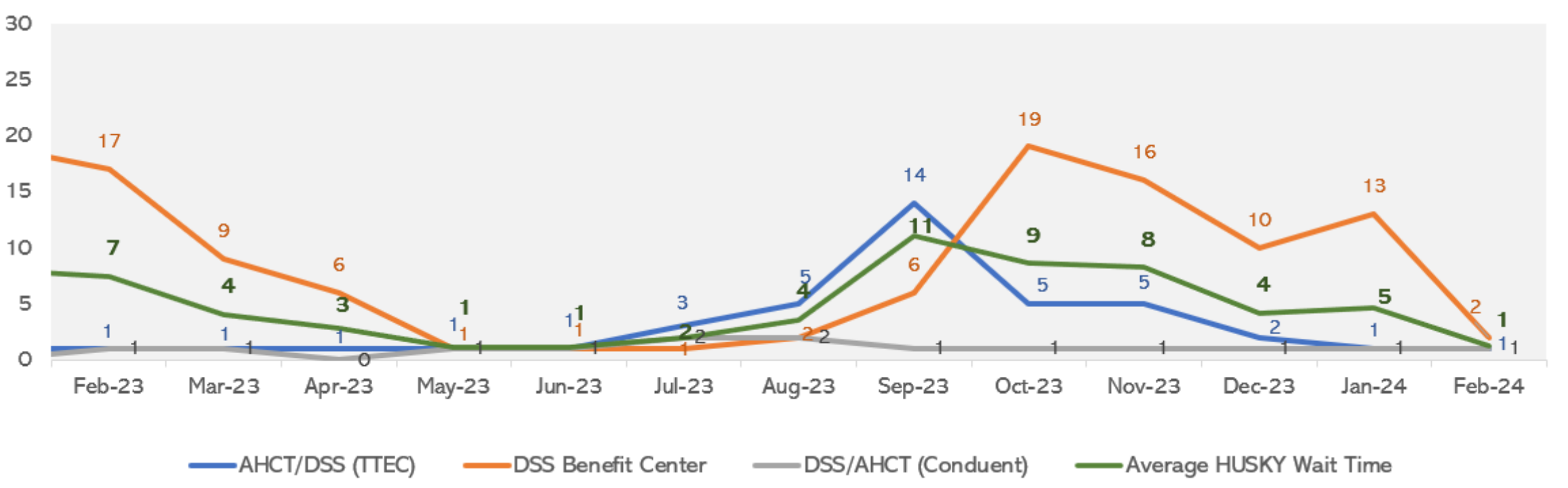
CALL CENTER DATA ACROSS ALL HUSKY CONTACT CENTERS

HUSKY Call Volume By Call Center



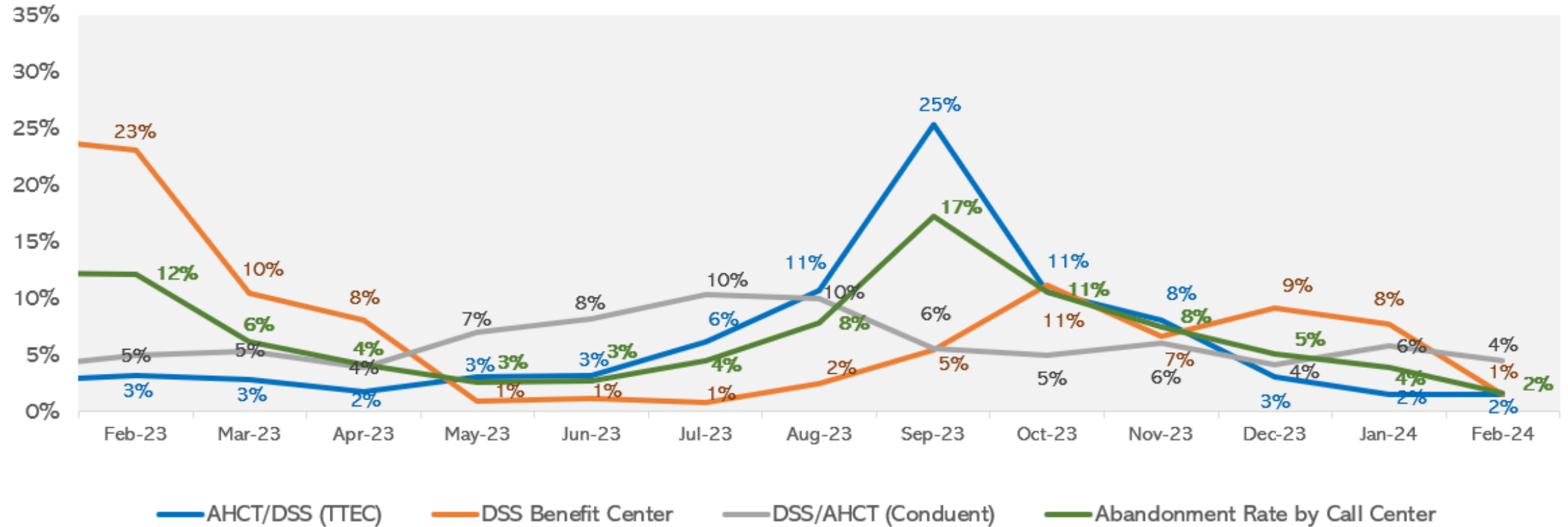
Per CMS requirements, data represents only Medicaid/CHIP calls. Calls for other programs are excluded. The DSS Benefit Center handles 30% of Medicaid/CHIP calls. Total call volume for the Benefit Center in February was 269,378.

HUSKY Average Wait Time By Call Center (min)



Per CMS requirements, data represents only Medicaid/CHIP calls. Calls for other programs are excluded. Wait times are measured from the time a caller selects the option to speak with an agent to the moment the caller is connected to one.

HUSKY Abandonment Rate By Call Center

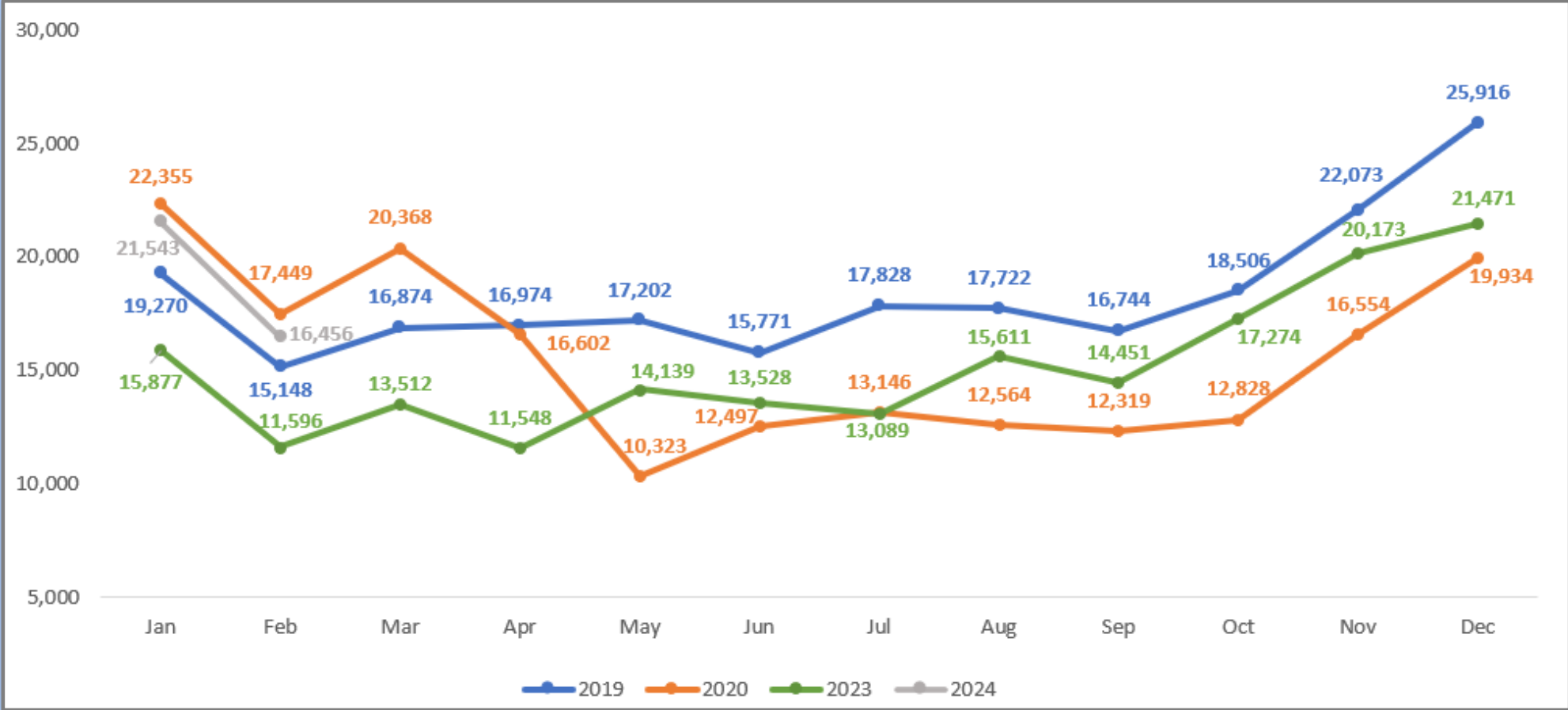


Per CMS requirements, data represents only Medicaid/CHIP calls. Calls for other programs are excluded.

NEW HUSKY APPLICATION ACTIVITY AND TIMELINESS

Year-Over-Year New Medical Applications

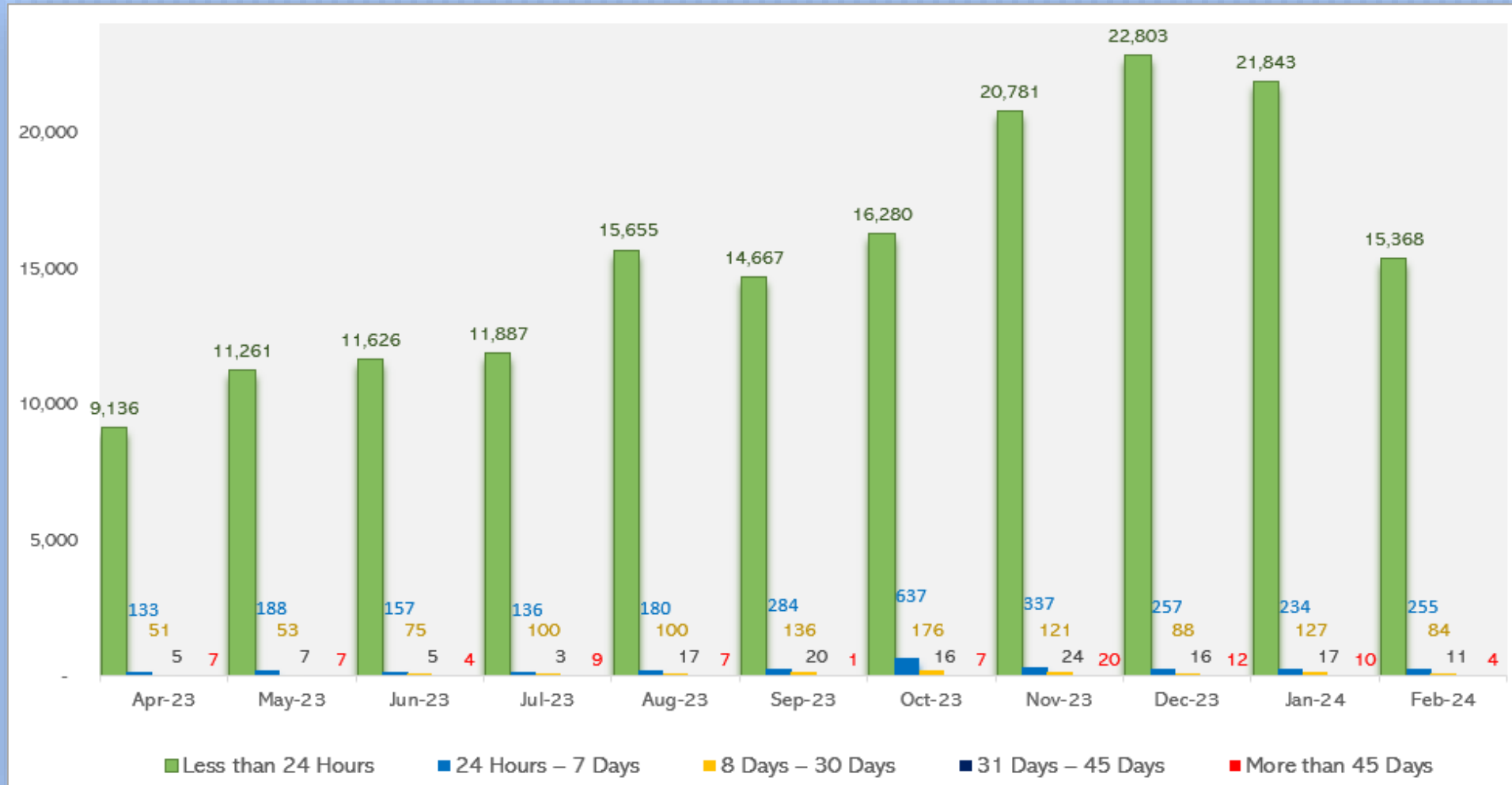
DSS consistently maintains an average of 98% processing timeliness



Calendar years 2021-2022 were omitted to ease crowding in the chart allowing better comparison of pre-pandemic data in 2019 and early 2020 with current trends.

MAGI Medicaid New Applications by Processing Time

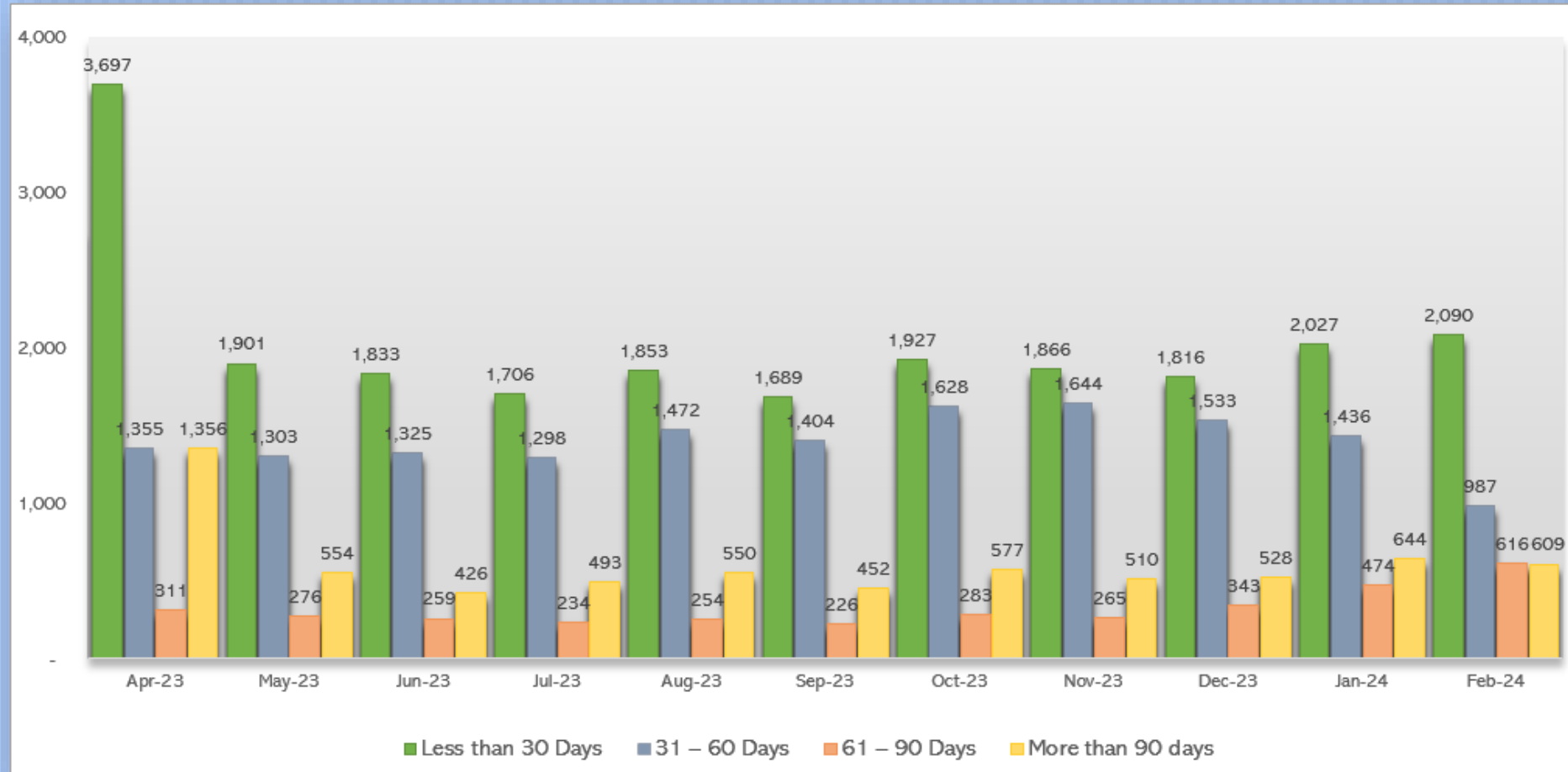
(current median processing time 0 days)



The standard of promptness for MAGI-based Medicaid applications is 45 days from receipt.

Non-MAGI Medicaid New Applications by Processing Time

(current median processing time 31 days)



The standard of promptness for most Medicaid applications is 45 days from receipt. A longer period of up to 90 days is allowed for people with disabilities and applications for long term services and supports.