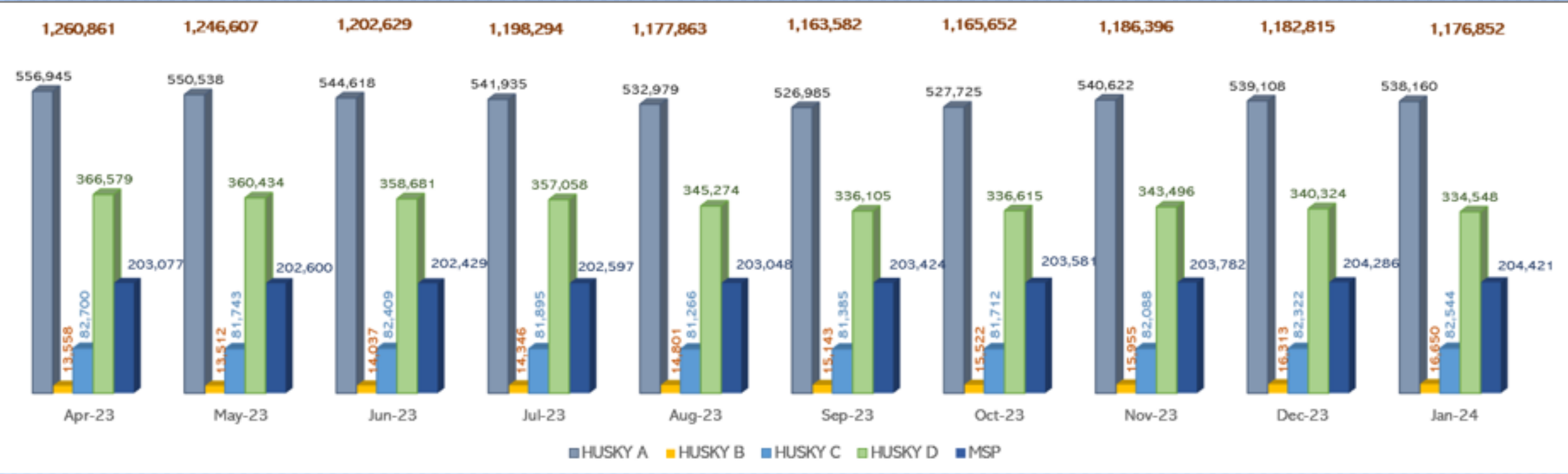


PUBLIC HEALTH EMERGENCY (PHE) UNWINDING – HUSKY HEALTH PROGRAM PERFORMANCE DASHBOARD

APRIL – JANUARY 2024



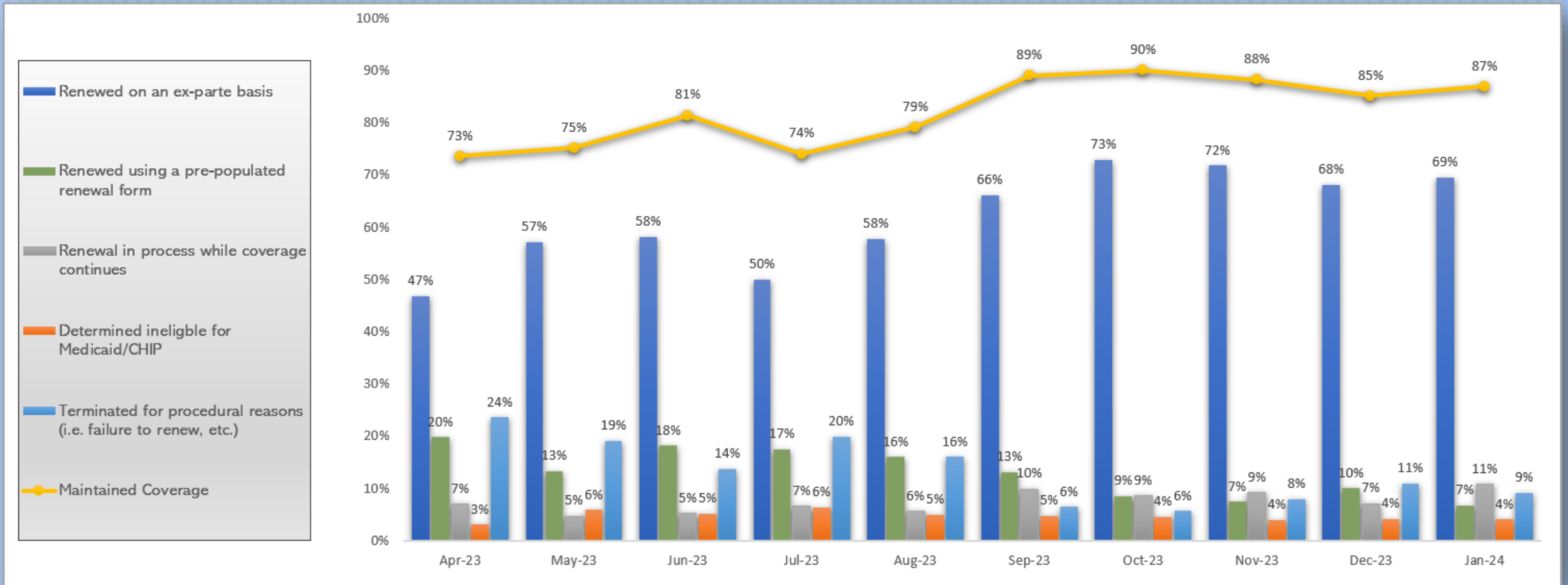
HUSKY ENROLLMENT DURING UNWINDING



HUSKY RENEWAL ACTIVITY AND OUTCOMES

HUSKY Health Renewal Outcomes – April to January 2024

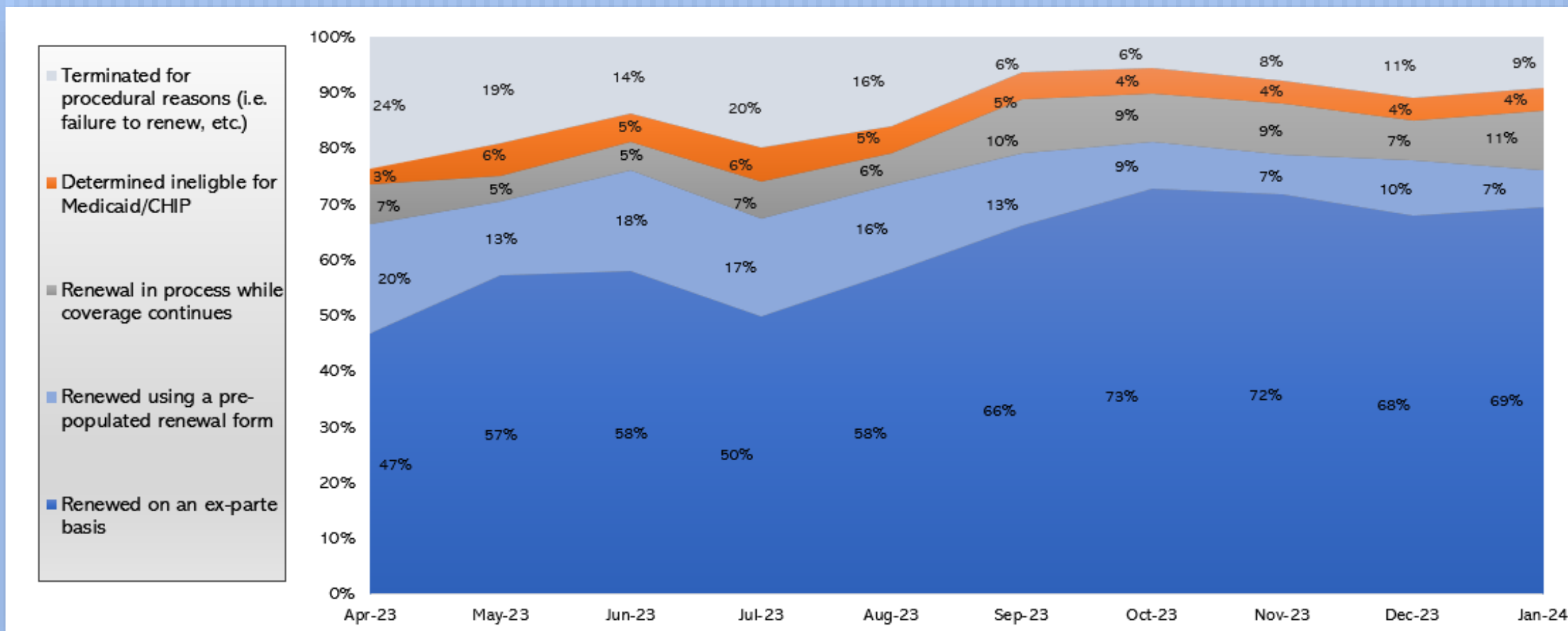
As reported by DSS to CMS at end of each month



From April to January, 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 January 2024

As reported by DSS to CMS at end of each month



From April to January, 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 (October 2023)

Among the Total Number of Medicaid/CHIP Beneficiaries Due for Renewal in October 2023:

State	Total Due for Renewal in October	Among the Total Number of Medicaid/CHIP Beneficiaries Due for Renewal in October 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 and 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	11,813	4,272	36.2%	27.4%	1,984	16.8%	6.2%	5,557	47.0%
AL	104,021	67,958	65.3%	37.7%	32,823	31.6%	27.8%	3,240	3.1%
AR	38,547	30,414	78.9%	62.7%	5,734	14.9%	11.6%	2,399	6.2%
AZ	205,062	168,065	82.0%	74.7%	28,706	14.0%	10.0%	8,291	4.0%
CA	1,061,239	512,198	48.3%	36.9%	198,537	18.7%	16.9%	350,504	33.0%
CO	147,244	70,118	47.6%	23.2%	68,061	46.2%	29.4%	9,065	6.2%
CT	89,758	73,000	81.3%	72.8%	9,044	10.1%	5.6%	7,714	8.6%
DC	42,847	29,310	68.4%	63.3%	4,897	11.4%	10.1%	8,640	20.2%
DE	22,858	11,231	49.1%	26.8%	2,988	13.1%	6.4%	8,639	37.8%
FL	399,775	200,882	50.2%	16.7%	184,716	46.2%	36.3%	14,177	3.5%
GA	138,160	49,664	35.9%	22.6%	65,295	47.3%	40.2%	23,201	16.8%
HI	19,667	19,646	99.9%	99.9%	21	0.1%	0.0%	0	0.0%
IA	72,233	40,885	56.6%	36.5%	5,523	7.6%	1.4%	25,825	35.8%
ID	17,335	13,560	78.2%	65.5%	3,530	20.4%	16.0%	245	1.4%
IL	293,985	173,755	59.1%	44.2%	20,122	6.8%	0.6%	100,108	34.1%
IN	136,607	69,467	50.9%	40.0%	34,391	25.2%	21.6%	32,749	24.0%
KS	35,659	12,550	35.2%	28.5%	1,696	4.8%	0.1%	21,413	60.0%
KY	155,003	89,854	58.0%	46.4%	12,613	8.1%	0.0%	52,536	33.9%
LA	165,628	115,068	69.5%	59.1%	45,266	27.3%	19.3%	5,294	3.2%
MA	299,095	171,804	57.4%	39.2%	115,340	38.6%	25.7%	11,951	4.0%
MD	117,751	102,688	87.2%	58.6%	8,195	7.0%	0.0%	6,868	5.8%
ME	42,965	21,345	49.7%	28.8%	1,604	3.7%	0.7%	20,016	46.6%
MI	270,307	168,088	62.2%	36.0%	16,424	6.1%	1.0%	85,795	31.7%
MN	122,937	50,666	41.2%	19.5%	8,548	7.0%	0.6%	63,723	51.8%
MO	107,020	53,814	50.3%	39.5%	23,375	21.8%	18.1%	29,831	27.9%
MS	57,118	30,403	53.2%	19.0%	8,674	15.2%	10.8%	18,041	31.6%

*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, MD, ME, MI, MN, NH, NJ, NM, NV, NY, OR, VT, and WV held some or all procedural terminations for renewals due in October.

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

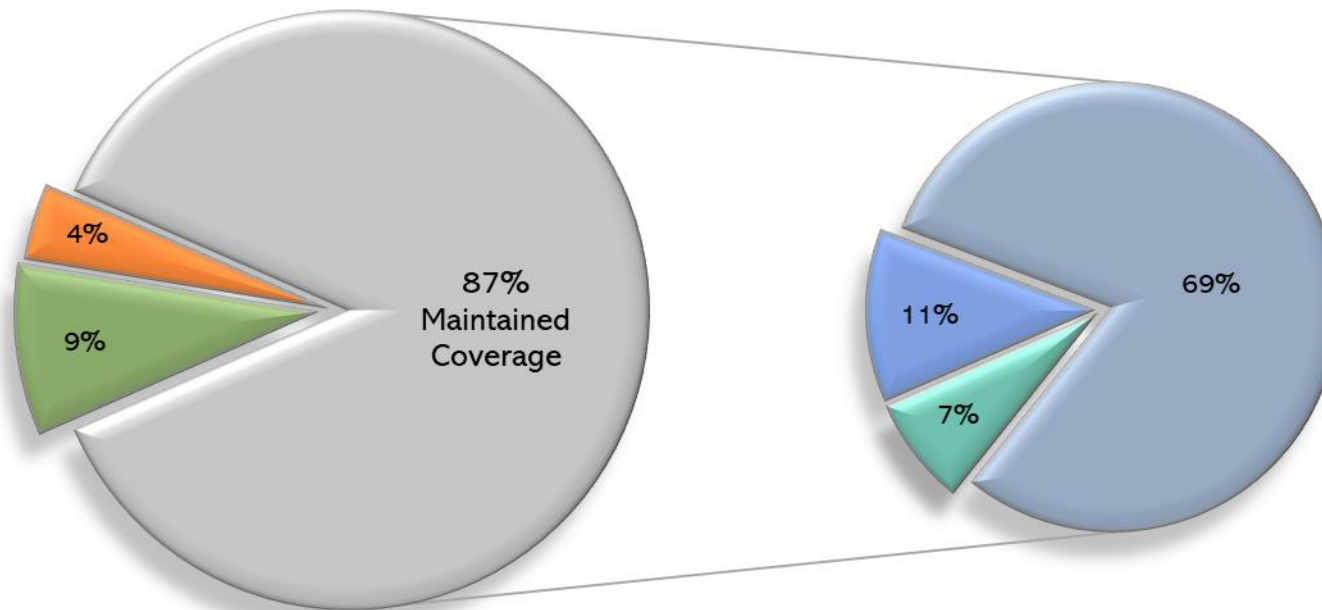
State	Total Due for Renewal in October	Among the Total Number of Medicaid/CHIP Beneficiaries Due for Renewal in October 2023:							
		Number Renewed in Medicaid/CHIP	Percent Renewed in Medicaid/CHIP*	Percent Renewed on an <i>Ex Parte</i> Basis* (i.e., based on available information)	Number Terminated from Medicaid/CHIP	Percent Terminated from Medicaid and 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	25,435	8,661	34.1%	18.8%	7,902	31.1%	25.4%	8,872	34.9%
NC	201,976	163,456	80.9%	80.4%	33,047	16.4%	14.4%	5,473	2.7%
ND	12,614	7,199	57.1%	27.6%	5,263	41.7%	29.4%	152	1.2%
NE	41,756	14,869	35.6%	27.2%	5,107	12.2%	4.8%	21,780	52.2%
NH	14,920	10,914	73.2%	59.9%	3,037	20.4%	16.3%	969	6.5%
NJ	169,824	41,158	24.2%	15.7%	7,103	4.2%	0.6%	121,563	71.6%
NM	79,767	62,978	79.0%	57.3%	10,965	13.7%	11.0%	5,824	7.3%
NV	111,577	64,944	58.2%	27.6%	4,132	3.7%	0.0%	42,501	38.1%
NY	541,754	389,142	71.8%	38.5%	136,911	25.3%	9.1%	15,701	2.9%
OH	298,158	196,171	65.8%	46.9%	71,367	23.9%	17.7%	30,620	10.3%
OK	56,296	27,605	49.0%	23.4%	25,163	44.7%	35.0%	3,528	6.3%
OR	113,665	89,723	78.9%	71.5%	22,741	20.0%	10.2%	1,201	1.1%
PA	273,369	106,251	38.9%	5.3%	59,991	21.9%	9.6%	107,127	39.2%
RI	17,670	9,017	51.0%	47.8%	6,630	37.5%	33.1%	2,023	11.4%
SC	34,743	22,781	65.6%	59.4%	1,267	3.6%	0.0%	10,695	30.8%
SD	7,110	3,413	48.0%	21.0%	2,991	42.1%	12.2%	706	9.9%
TN	159,666	87,588	54.9%	43.7%	49,585	31.1%	24.2%	22,493	14.1%
TX	363,558	90,857	25.0%	0.5%	156,193	43.0%	33.1%	116,508	32.0%
UT	35,456	12,543	35.4%	20.5%	19,521	55.1%	52.7%	3,392	9.6%
VA	179,166	136,542	76.2%	63.5%	8,849	4.9%	2.8%	33,775	18.9%
VT	10,166	6,148	60.5%	46.1%	2,347	23.1%	18.9%	1,671	16.4%
WA	124,481	101,480	81.5%	72.9%	22,380	18.0%	13.3%	621	0.5%
WI	77,631	42,959	55.3%	9.9%	29,584	38.1%	21.9%	5,088	6.6%
WV	44,419	22,753	51.2%	25.2%	17,468	39.3%	33.8%	4,198	9.5%
WY	6,030	3,316	55.0%	32.7%	535	8.9%	4.0%	2,179	36.1%
Total	7,175,841	4,073,173	56.8%	38.0%	1,618,186	22.6%	15.5%	1,484,482	20.7%

*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, MD, ME, MI, MN, NH, NJ, NM, NV, NY, OR, VT, and WV held some or all procedural terminations for renewals due in October.

HUSKY RENEWAL OUTCOMES – LATEST STATUS

HUSKY Health Renewal Outcomes – January 2024

As reported by DSS to CMS at end of each month



- Terminated for procedural reasons (i.e. failure to renew, etc.)
- Determined ineligible for Medicaid/CHIP
- Renewal in process while coverage continues
- Renewed on an ex-parte basis
- Renewed using a pre-populated renewal form

Notes:

- ❑ Data captures renewal outcomes at individual level (not household). In January, 88,702 individuals went through the renewal process.
- ❑ 69% of individuals had coverage renewed without further information being requested from them. This is called an *ex-parte* or passive renewal.
- ❑ 7% 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.
- ❑ 11% 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 January 2024

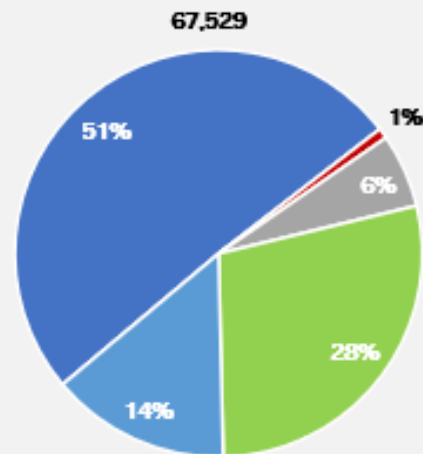
By Medical Benefit Plan

Notes:

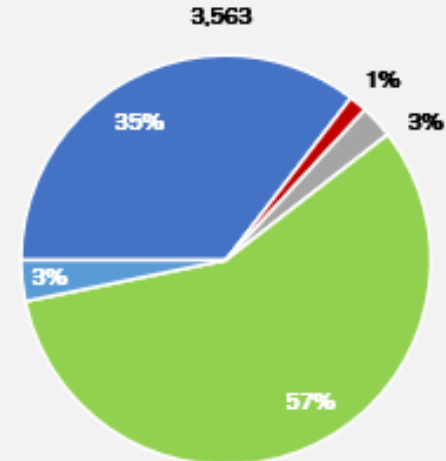
Medical Benefit Plans refer to the HUSKY Programs (A, B, C, and D) and the Medicare Savings Program (MSP)

- 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

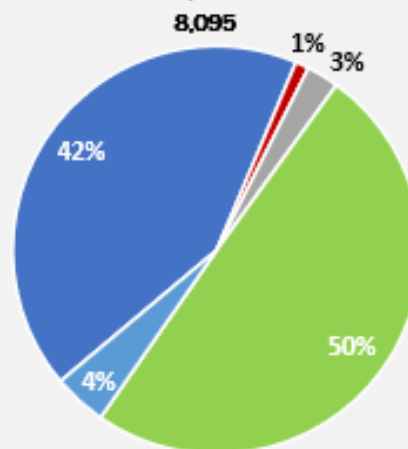
Renewed and retained in Medicaid/CHIP



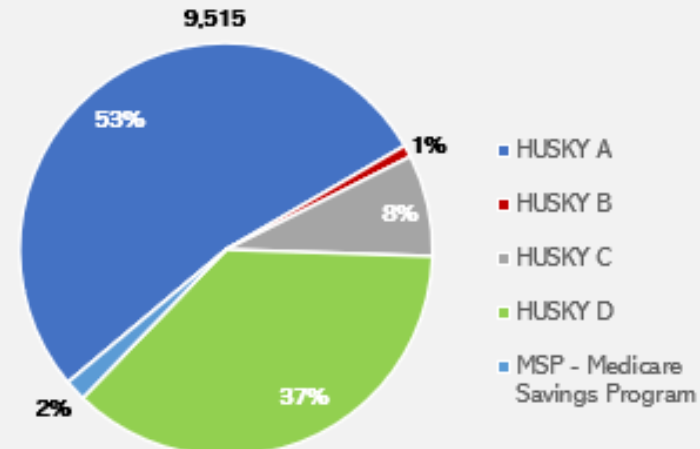
Determined ineligible for Medicaid/CHIP



Terminated for procedural reasons



Renewal in process

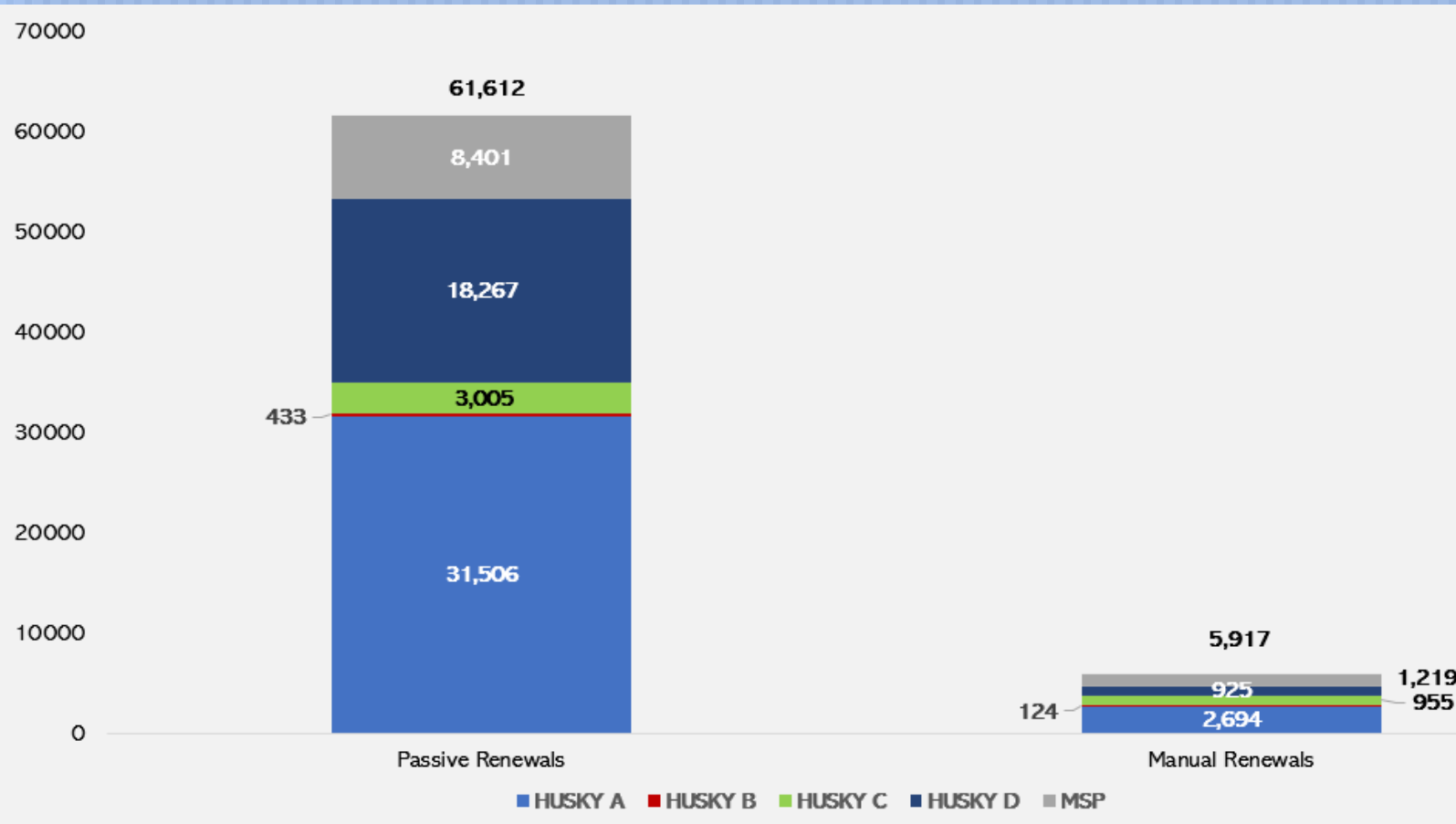


- HUSKY A
- HUSKY B
- HUSKY C
- HUSKY D
- MSP - Medicare Savings Program

HUSKY HEALTH RENEWAL OUTCOMES – JANUARY 2024

PASSIVE VS. MANUAL RENEWALS BY MEDICAL BENEFIT PLAN

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

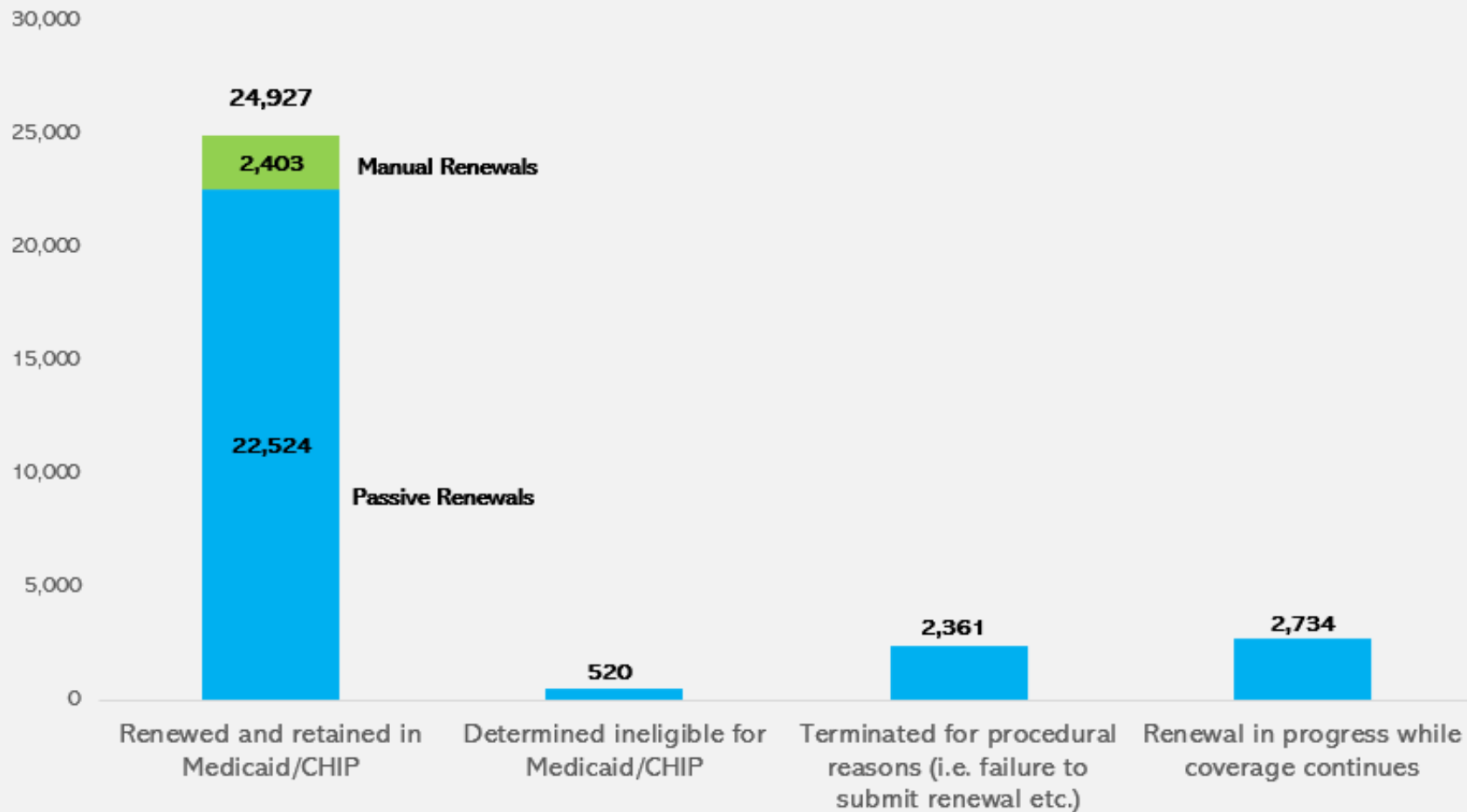


Notes:

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 – January 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

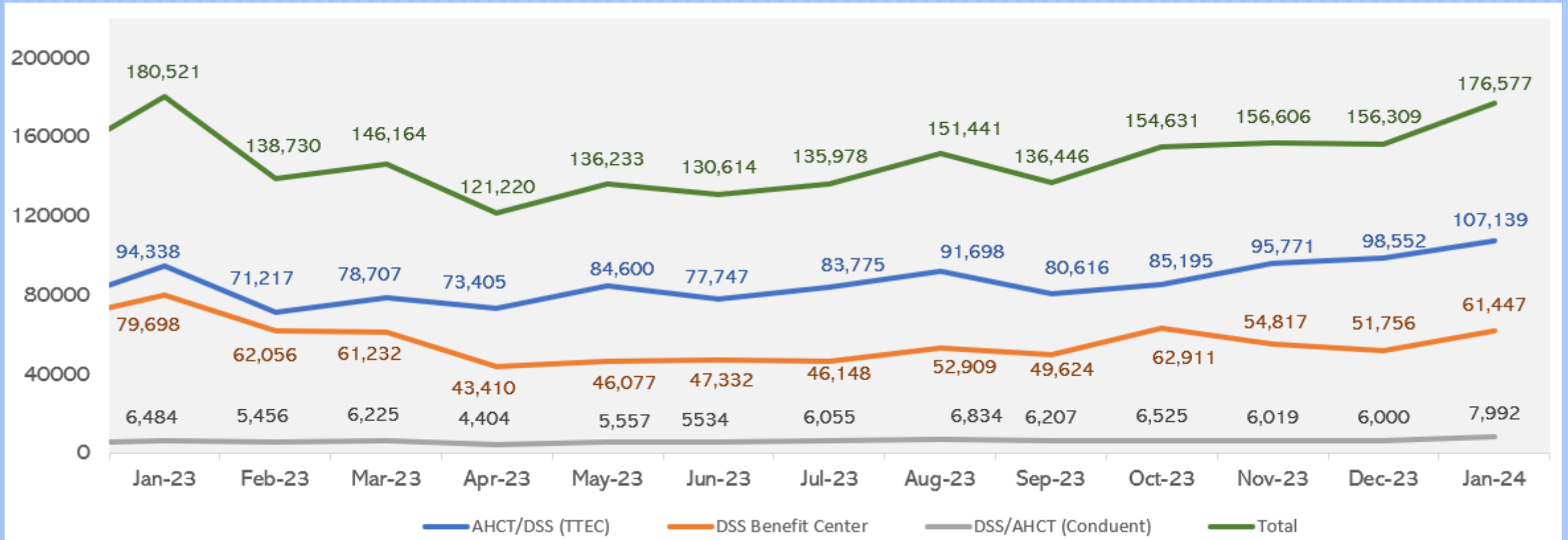
Tracking Individuals for up to 90 days after disenrollment

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
	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
Total individuals active currently in MAGI HUSKY/CHIP	9,639	7,707	4,212	8,839	8,555	2,730	2,078	2,850	2,465
Total individuals active currently in QHP/APTC	851	1,493	1,145	2,350	1,216	827	953	1,020	1,086
Total individuals active currently in Covered CT	453	672	513	943	815	568	655	702	882
Total Individuals who transitioned to non-MAGI HUSKY	149	217	57	110	85	34	56	57	77
Total individuals who closed and are now active	11,092	10,089	5,927	12,242	10,671	4,159	3,742	4,629	4,510
*Total individuals not enrolled in any state programs	13,416	14,835	9,642	20,400	11,627	5,962	5,302	7,847	11,137
Re-enrolled	45%	40%	38%	38%	48%	41%	41%	37%	29%

42% of individuals who were disenrolled at renewal during the first 7 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.

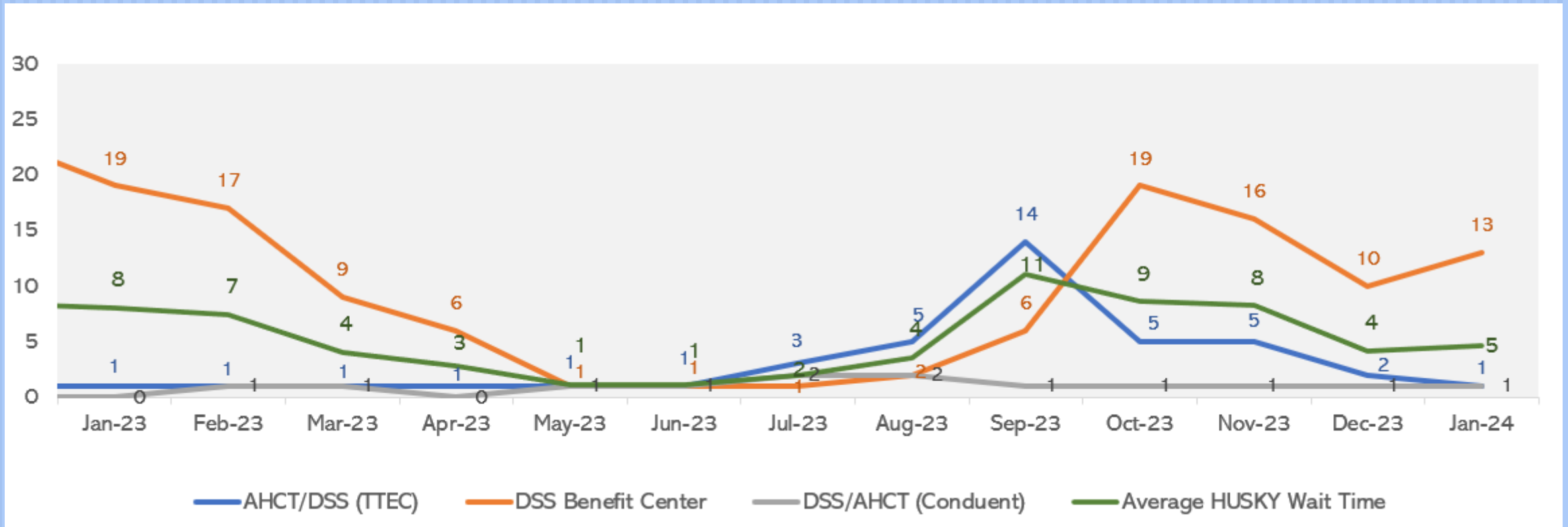
CALL CENTER DATA ACROSS ALL HUSKY CONTACT CENTERS

HUSKY Call Volume By Call Center



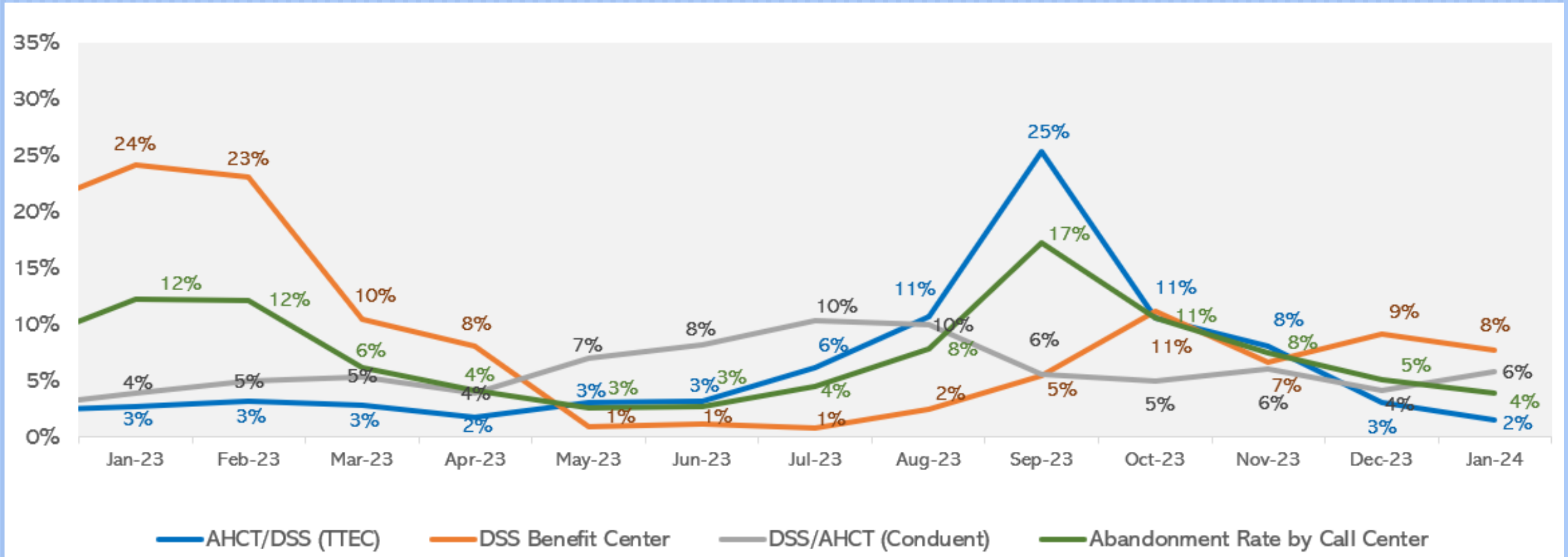
Per CMS requirements, data represents only Medicaid/CHIP calls. Calls for other programs are excluded. The DSS Benefit Center handles 30% of Medicaid/CHIP calls. Total call volume for the Benefit Center in January was 219,452.

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

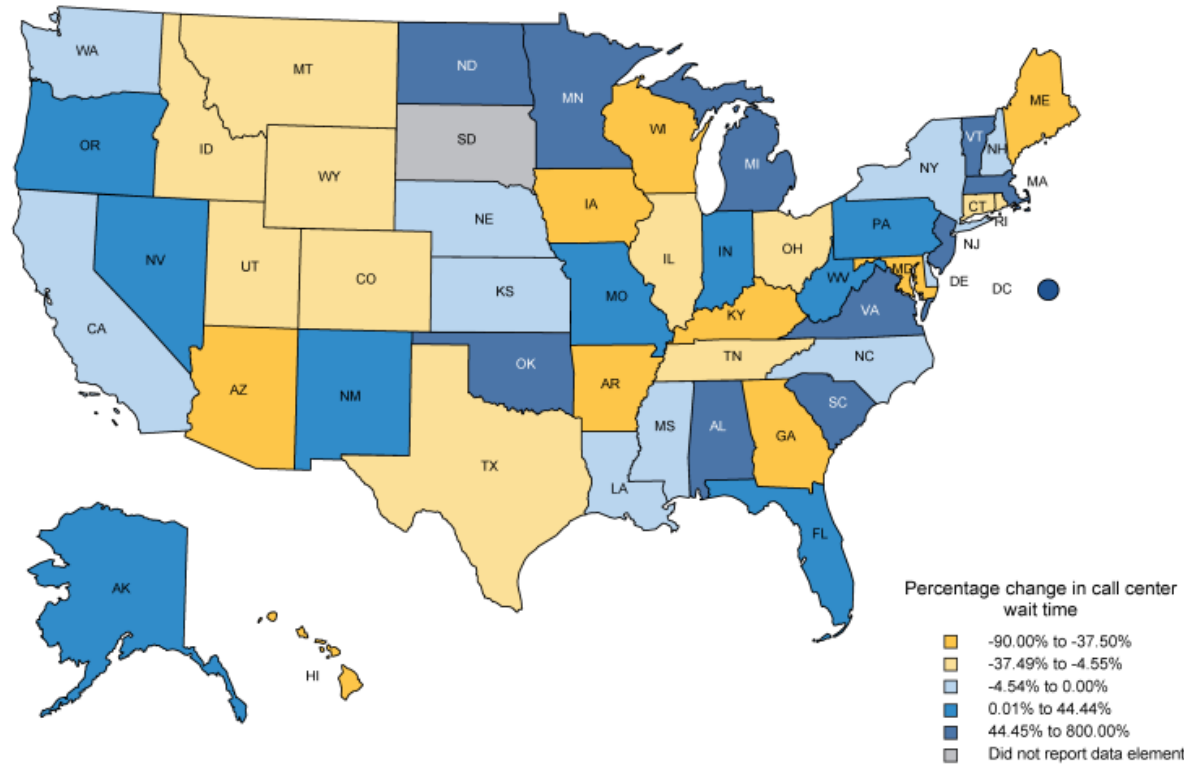


Per CMS requirements, data represents only Medicaid/CHIP calls. Calls for other programs are excluded.

Preliminary Performance Indicators

50 States & the District of Columbia

Percentage change in average call center wait time, September 2023 to October 2023



© 2021 Mapbox © OpenStreetMap

State	Avg Call Center Wait Time	% Change from Previous Month	State	Avg Call Center Wait Time	% Change from Previous Month
AK	16.00	23.08%	MT	27.00	-6.90%
AL	3.00	50.00%	NC	0.00	0.00%
AR	4.00	-75.00%	ND	3.00	50.00%
AZ	6.00	-60.00%	NE	4.00	0.00%
CA	4.00	0.00%	NH	7.00	0.00%
CO	10.00	-16.67%	NJ	3.00	50.00%
CT	9.00	-18.18%	NM	38.00	11.76%
DC	3.00	200.00%	NV	34.00	9.68%
DE	1.00	0.00%	NY	1.00	0.00%
FL	33.00	3.13%	OH	4.00	-33.33%
GA	15.00	-37.50%	OK	11.00	120.00%
HI	2.00	-90.00%	OR	27.00	8.00%
IA	5.00	-75.00%	PA	15.00	7.14%
ID	31.00	-8.82%	RI	46.00	-6.12%
IL	21.00	-4.55%	SC	2.00	100.00%
IN	13.00	44.44%	SD	NR	NR
KS	1.00	0.00%	TN	19.00	-5.00%
KY	4.00	-63.64%	TX	14.00	-6.67%
LA	2.00	0.00%	UT	19.00	-13.64%
MA	3.00	200.00%	VA	2.00	100.00%
MD	4.00	-60.00%	VT	9.00	800.00%
ME	16.00	-52.94%	WA	1.00	0.00%
MI	2.00	100.00%	WI	6.00	-45.45%
MN	8.00	60.00%	WV	13.00	18.18%
MO	24.00	14.29%	WY	2.00	-33.33%
MS	0.00	0.00%			

Did not report data element NR

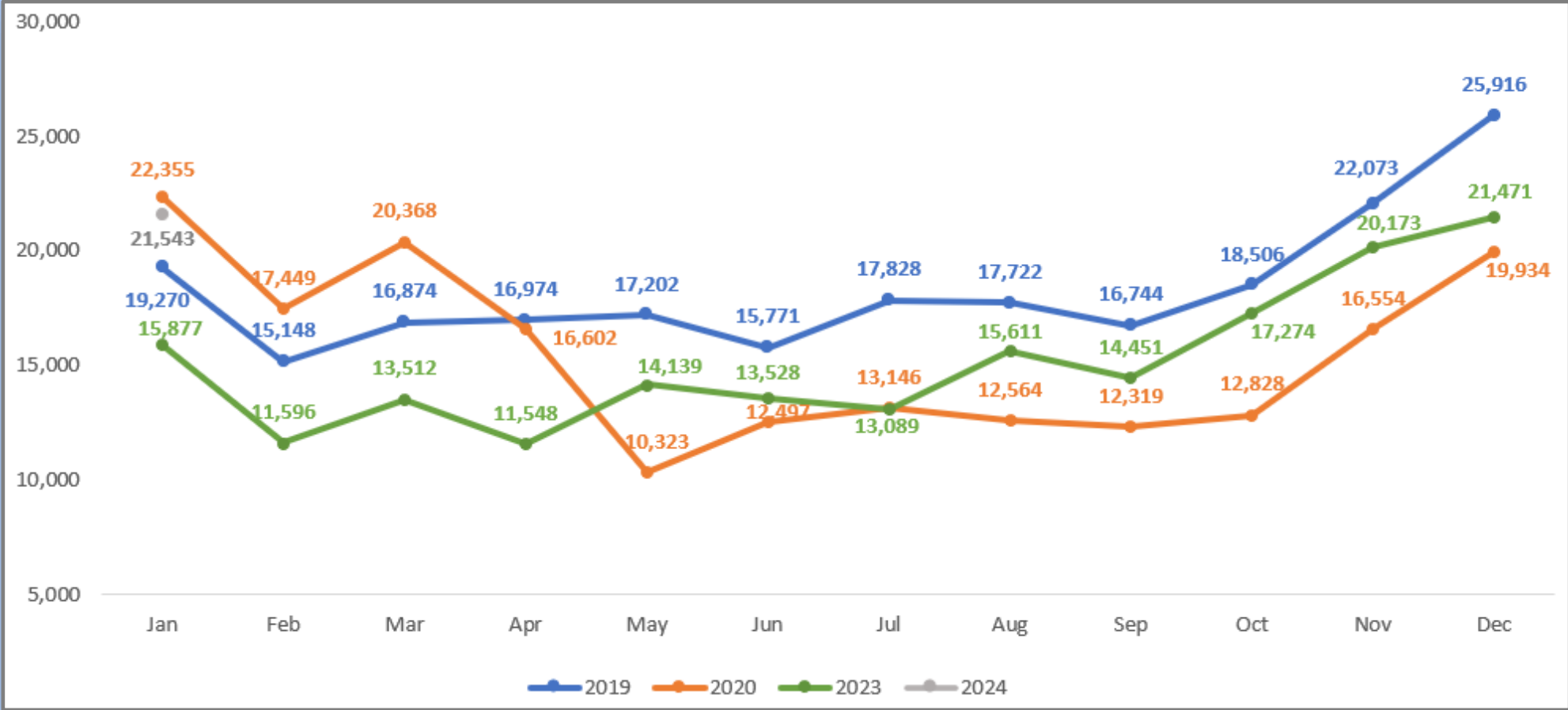
Source: Medicaid and CHIP Eligibility and Enrollment Performance Indicator Data, preliminary data submitted by December 5, 2023, with data through October 2023. Arizona's October 2023 Call Center Data from the Medicaid and CHIP Eligibility and Enrollment Performance Indicator Data as of December 11, 2023.

Notes: This analysis includes preliminary Performance Indicator data from 50 states and the District of Columbia. SD does not have call centers and does not report call center metrics. Data notes can be found in the Appendix and state-specific data quality notes can be found in the Medicaid and CHIP CAA Reporting Metrics at [Medicaid.gov/unwinding-data](https://www.medicicaid.gov/unwinding-data).

NEW HUSKY APPLICATION ACTIVITY AND TIMELINESS

Year-Over-Year New Medical Applications

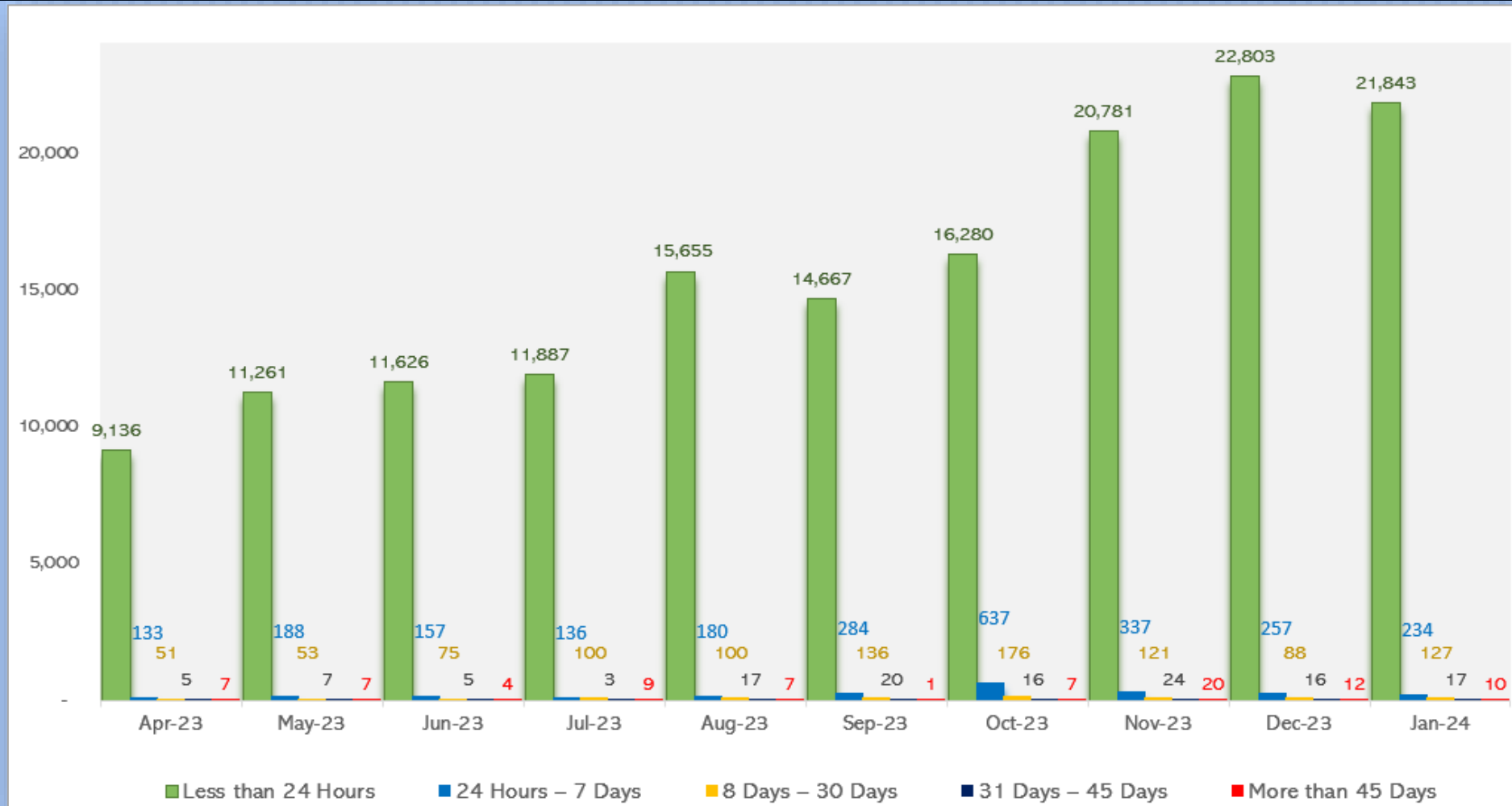
DSS consistently maintains an average of 98% processing timeliness



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

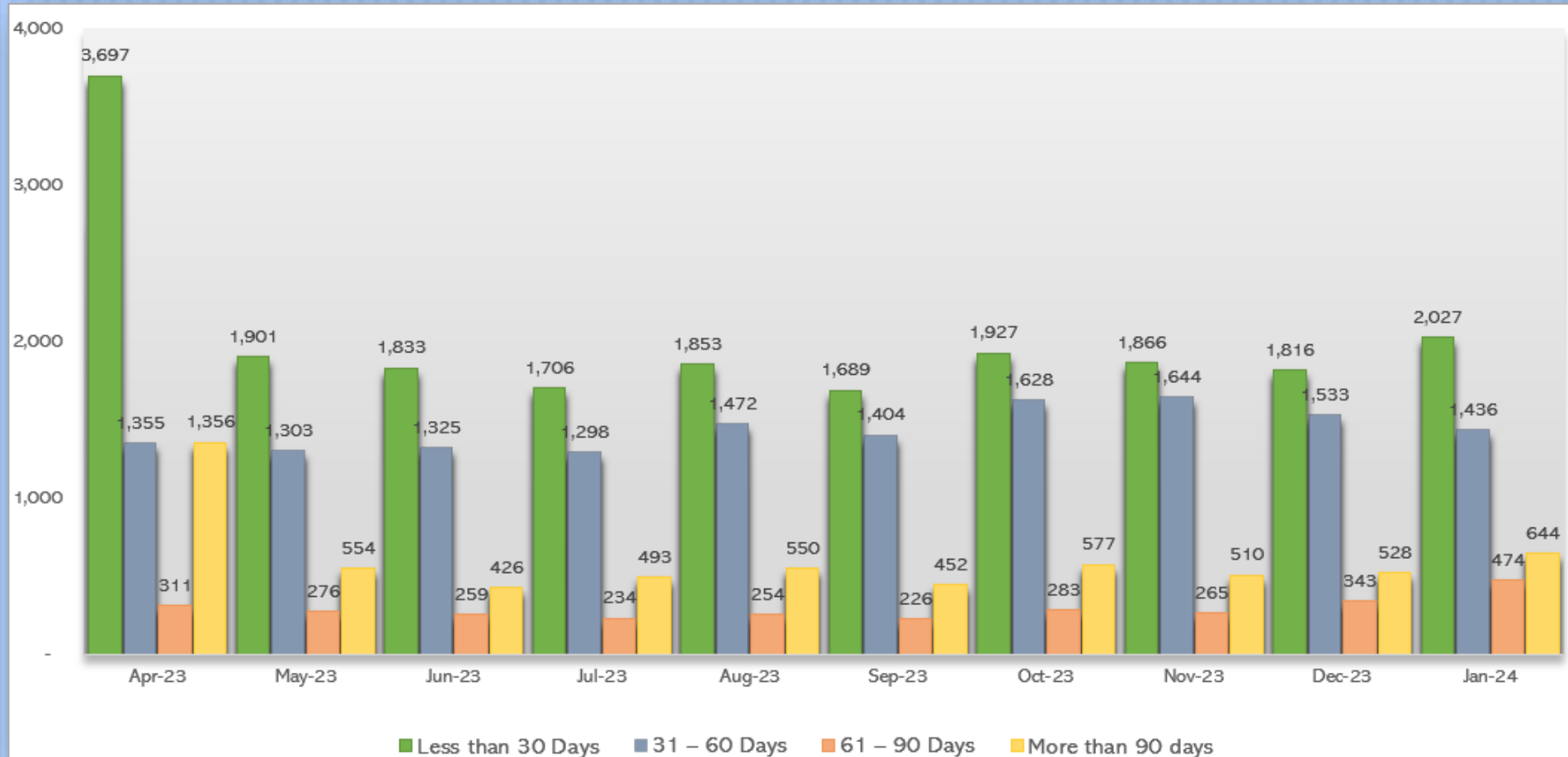
(current median processing time 0 days)



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 33 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.