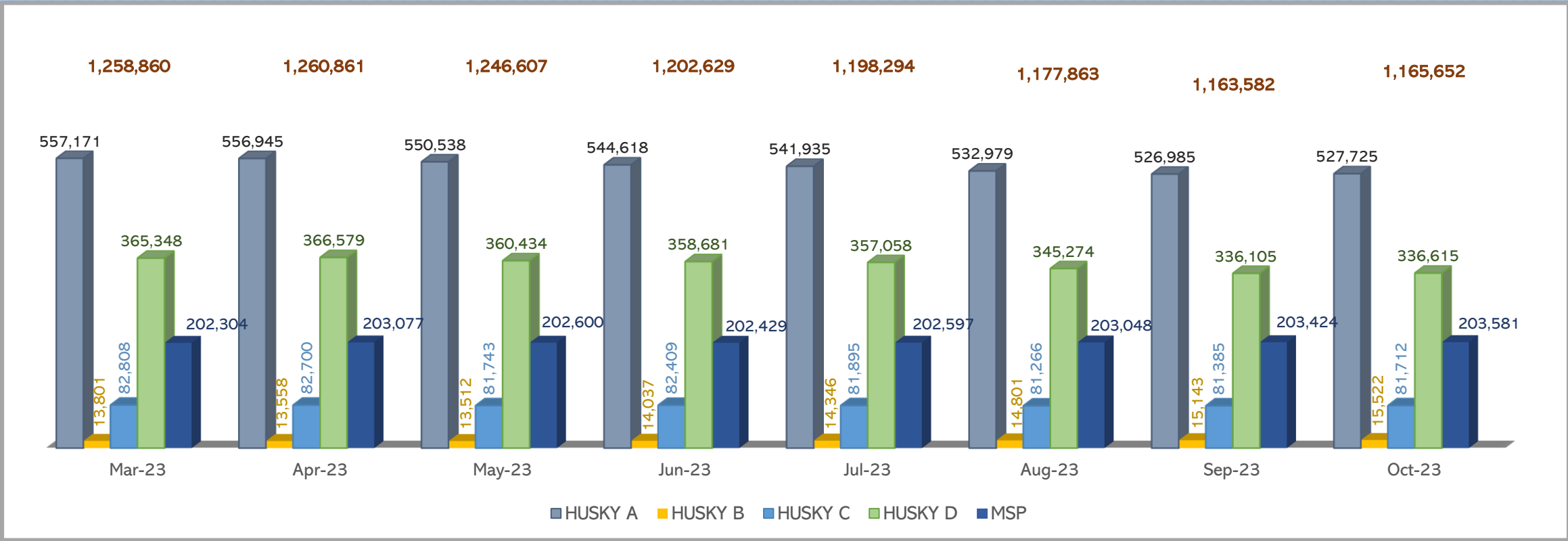


PUBLIC HEALTH EMERGENCY (PHE) UNWINDING – HUSKY HEALTH PROGRAM PERFORMANCE DASHBOARD

APRIL – OCTOBER 2023



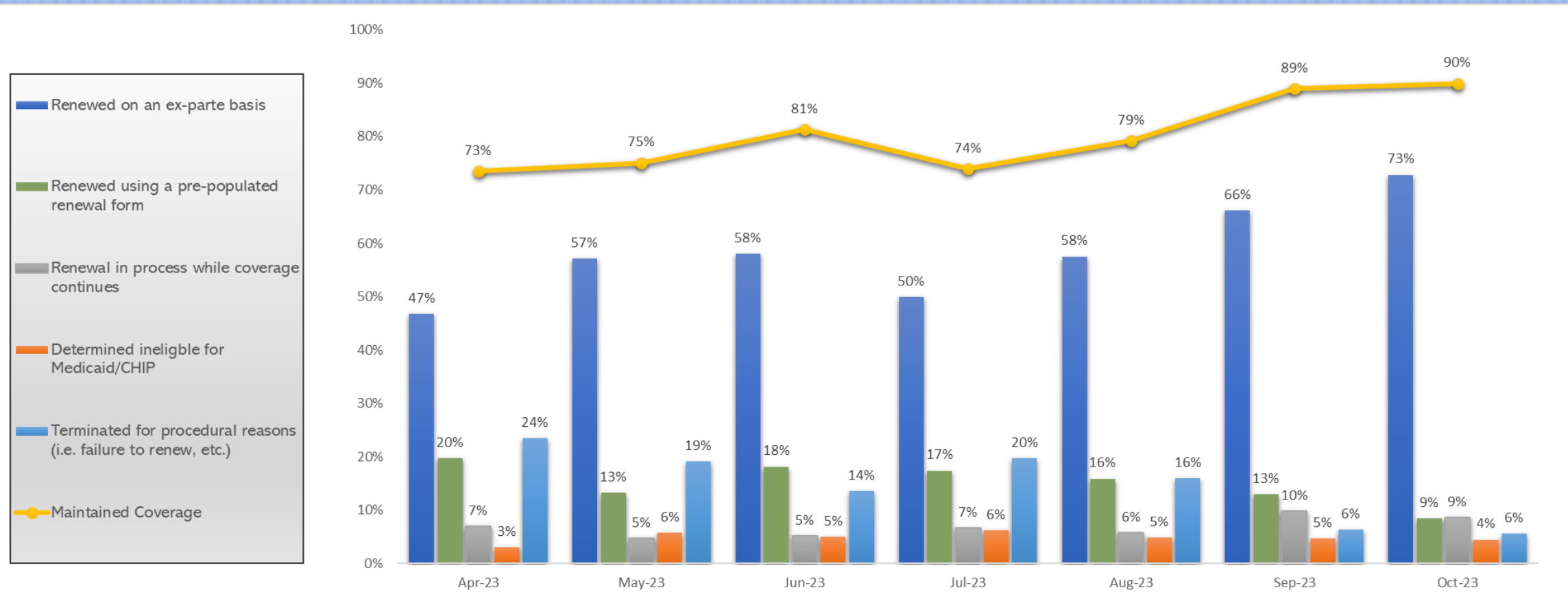
HUSKY ENROLLMENT DURING UNWINDING



HUSKY RENEWAL ACTIVITY AND OUTCOMES

HUSKY Health Renewal Outcomes – April to October 2023

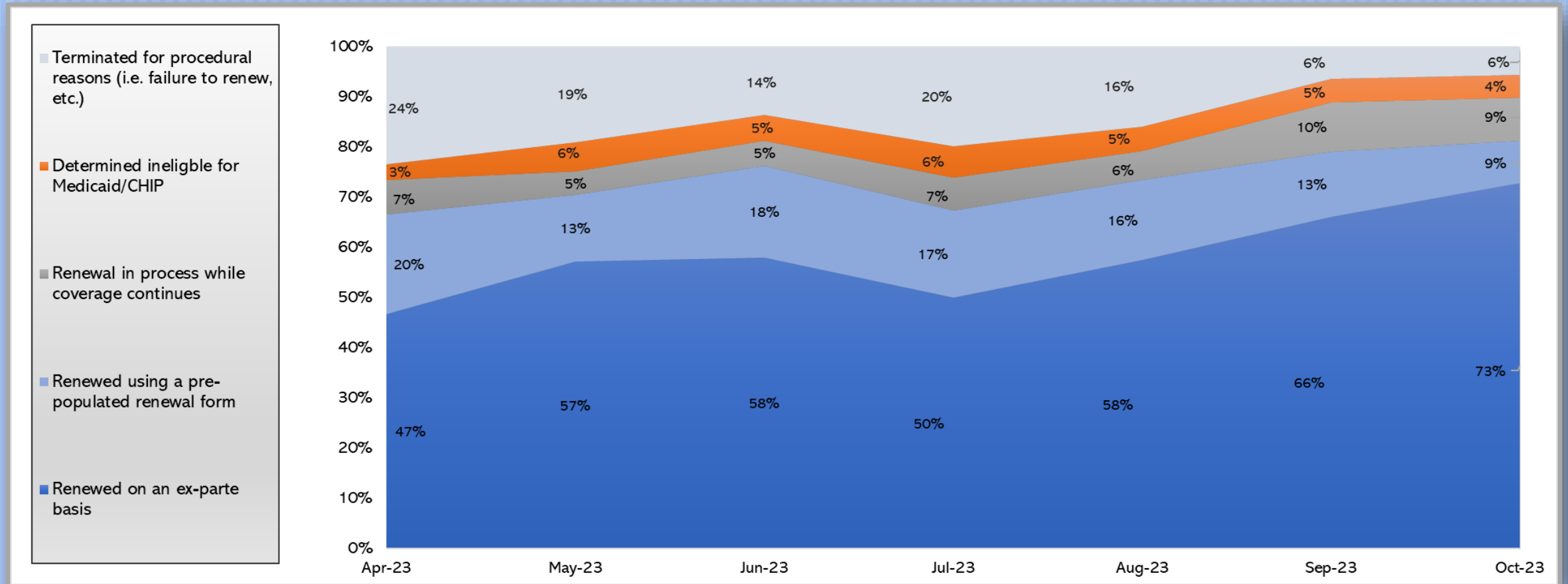
As reported by DSS to CMS at end of each month



From April to October, an average of 80% of individuals maintained coverage at month end. Those who disenroll often re-enroll after the month end.

HUSKY Health Renewal Outcomes – April to October 2023

As reported by DSS to CMS at end of each month



From April to October, an average of 80% 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 and CHIP Renewal Outcomes, by State (August 2023)

State	Total Due for Renewal in August	Among the Total Number of Medicaid/CHIP Beneficiaries Due for Renewal in August 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	19,995	6,516	32.6%	28.2%	9,919	49.6%	40.3%	3,560	17.8%
AL	117,961	77,032	65.3%	32.7%	37,791	32.0%	28.6%	3,138	2.7%
AR	94,593	50,662	53.6%	34.2%	31,778	33.6%	26.2%	12,153	12.9%
AZ	223,185	178,491	80.0%	72.6%	37,812	16.9%	11.5%	6,882	3.1%
CA	1,042,671	518,152	49.7%	34.9%	209,487	20.1%	17.9%	315,032	30.2%
CO	129,894	60,480	46.6%	22.6%	66,223	51.0%	35.6%	3,191	2.5%
CT	107,162	78,651	73.4%	57.5%	22,336	20.8%	16.0%	6,175	5.8%
DC	28,511	12,114	42.5%	31.2%	6,079	21.3%	17.9%	10,318	36.2%
DE	25,276	11,926	47.2%	21.0%	3,278	13.0%	6.8%	10,072	39.9%
FL	344,468	190,547	55.3%	21.8%	126,574	36.7%	27.5%	27,347	7.9%
GA	190,016	66,278	34.9%	26.5%	77,838	41.0%	30.1%	45,900	24.2%
HI	37,788	25,625	67.8%	58.2%	6,499	17.2%	14.6%	5,664	15.0%
IA	88,539	39,720	44.9%	25.8%	6,473	7.3%	1.5%	42,346	47.8%
ID	49,553	11,308	22.8%	0.6%	38,127	76.9%	62.9%	118	0.2%
IL	336,683	202,769	60.2%	41.5%	18,629	5.5%	0.6%	115,285	34.2%
IN	145,579	78,151	53.7%	40.9%	32,404	22.3%	18.7%	35,024	24.1%
KS	16,800	16,124	96.0%	96.0%	80	0.5%	0.0%	596	3.6%
KY	54,344	28,296	52.1%	42.4%	18,662	34.3%	22.4%	7,386	13.6%
LA	151,428	91,307	60.3%	48.5%	54,553	36.0%	26.8%	5,568	3.7%
MA	154,548	77,131	49.9%	30.3%	63,696	41.2%	34.0%	13,721	8.9%
MD	113,836	93,405	82.1%	60.6%	11,891	10.5%	0.0%	8,540	7.5%
ME	35,239	17,248	49.0%	21.5%	1,847	5.2%	0.8%	16,144	45.8%
MI	260,286	148,654	57.1%	31.9%	13,523	5.2%	0.9%	98,109	37.7%
MN	99,192	50,354	50.8%	22.1%	7,688	7.8%	0.6%	41,150	41.5%
MO	113,920	66,448	58.3%	45.7%	28,051	24.6%	20.6%	19,421	17.1%
MS	70,069	35,402	50.5%	15.4%	16,659	23.8%	18.4%	18,008	25.7%

*Percentages calculated as a share of the total number of beneficiaries due for renewal in the reporting month. DC, DE, IL, KS, KY, MD, ME, MI, NJ, NY, SC, and VA held some or all procedural terminations for renewals due in August.

Medicaid and CHIP Renewal Outcomes, by State (August 2023) (cont'd)

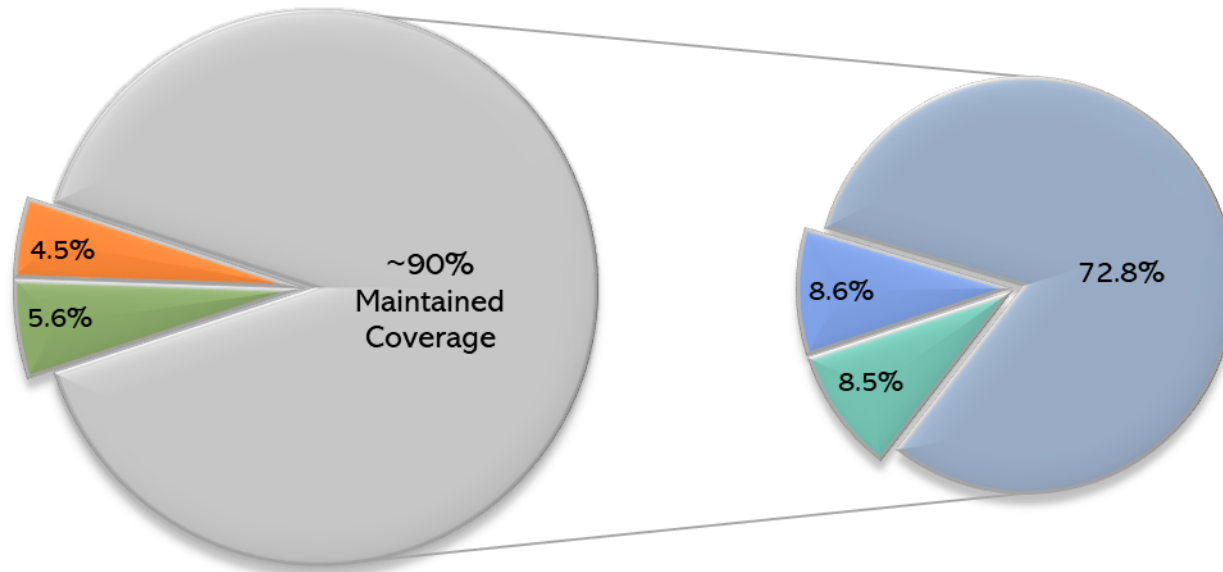
State	Total Due for Renewal in August	Among the Total Number of Medicaid/CHIP Beneficiaries Due for Renewal in August 2023:							
		Number Renewed in Medicaid/CHIP	Percent Renewed in Medicaid/CHIP*	Percent Renewed on an <i>Ex Parte</i> Basis* (i.e., based on available information)	Number Terminated 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	40,901	10,095	24.7%	11.9%	14,395	35.2%	27.5%	16,411	40.1%
NC	182,515	122,008	66.9%	66.5%	31,526	17.3%	15.1%	28,981	15.9%
ND	11,539	7,057	61.2%	28.2%	4,340	37.6%	21.8%	142	1.2%
NE	39,114	16,691	42.7%	29.2%	4,219	10.8%	5.1%	18,204	46.5%
NH	18,497	10,029	54.2%	42.1%	6,947	37.6%	33.7%	1,521	8.2%
NJ	166,822	46,578	27.9%	15.4%	8,282	5.0%	1.0%	111,962	67.1%
NM	66,585	30,399	45.7%	32.6%	20,587	30.9%	28.8%	15,599	23.4%
NV	68,611	30,109	43.9%	40.3%	37,612	54.8%	50.4%	890	1.3%
NY	497,883	311,665	62.6%	25.7%	173,479	34.8%	19.4%	12,739	2.6%
OH	293,578	193,157	65.8%	45.5%	76,350	26.0%	20.2%	24,071	8.2%
OK	69,101	19,834	28.7%	12.5%	46,536	67.3%	54.5%	2,731	4.0%
OR	109,033	102,749	94.2%	88.6%	6,105	5.6%	0.3%	179	0.2%
PA	322,810	109,594	34.0%	3.0%	78,446	24.3%	12.2%	134,770	41.8%
RI	16,420	9,572	58.3%	53.6%	5,887	35.9%	31.4%	961	5.9%
SC	13,338	1,588	11.9%	8.5%	653	4.9%	1.3%	11,097	83.2%
SD	10,094	4,088	40.5%	15.0%	4,749	47.1%	21.2%	1,257	12.5%
TN	150,448	78,394	52.1%	35.2%	48,485	32.2%	25.0%	23,569	15.7%
TX	769,726	194,610	25.3%	2.3%	328,320	42.7%	26.4%	246,796	32.1%
UT	31,863	12,061	37.9%	22.9%	17,229	54.1%	51.6%	2,573	8.1%
VA	218,452	84,992	38.9%	27.6%	25,399	11.6%	9.1%	108,061	49.5%
VT	13,075	8,461	64.7%	46.0%	3,390	25.9%	20.1%	1,224	9.4%
WA	119,931	96,632	80.6%	71.4%	22,763	19.0%	14.5%	536	0.5%
WI	90,490	42,135	46.6%	8.1%	40,817	45.1%	30.3%	7,538	8.3%
WV	50,000	26,350	52.7%	15.5%	22,562	45.1%	37.6%	1,088	2.2%
WY	5,830	2,917	50.0%	26.2%	789	13.5%	6.0%	2,124	36.4%
Total	7,428,192	3,804,556	51.2%	31.5%	1,977,764	26.6%	18.9%	1,645,872	22.2%

*Percentages calculated as a share of the total number of beneficiaries due for renewal in the reporting month. DC, DE, IL, KS, KY, MD, ME, MI, NJ, NY, SC, and VA held some or all procedural terminations for renewals due in August.

HUSKY RENEWAL OUTCOMES – LATEST STATUS

HUSKY Health Renewal Outcomes – October 2023

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 October, 89,758 individuals went through the renewal process.
- ❑ 73% of individuals had coverage renewed without further information being requested from them. This is called an *ex-parte* or passive renewal.
- ❑ 8.5% 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.
- ❑ Nearly 9% 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 – October 2023

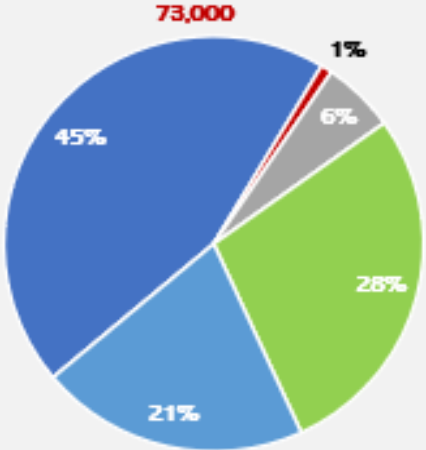
By Medical Benefit Plan

Notes:

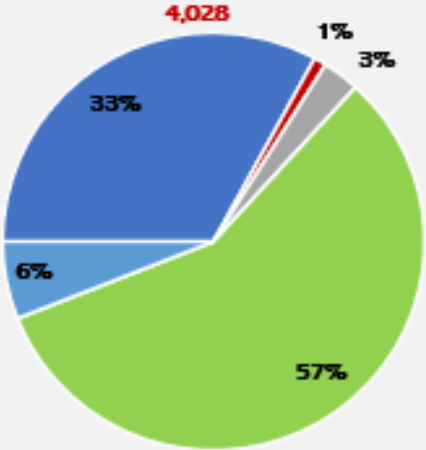
Medical Benefit Plans refer to the HUSKY Programs (A, B, C, and D) and the Medicare Savings Program (MSP)

- 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

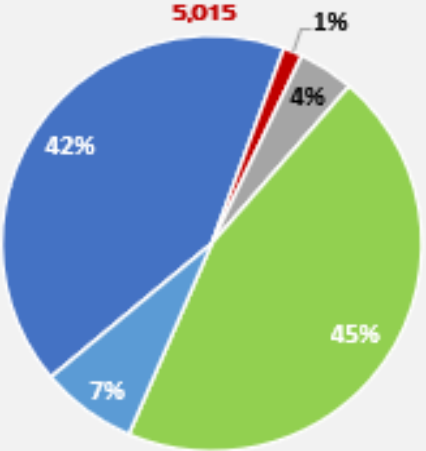
Renewed and retained in Medicaid/CHIP



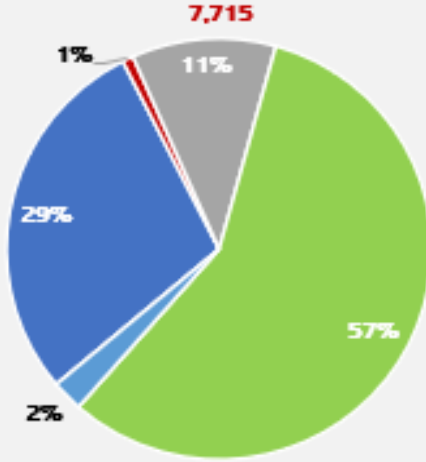
Determined ineligible for Medicaid/CHIP



Terminated for procedural reasons



Renewal in process

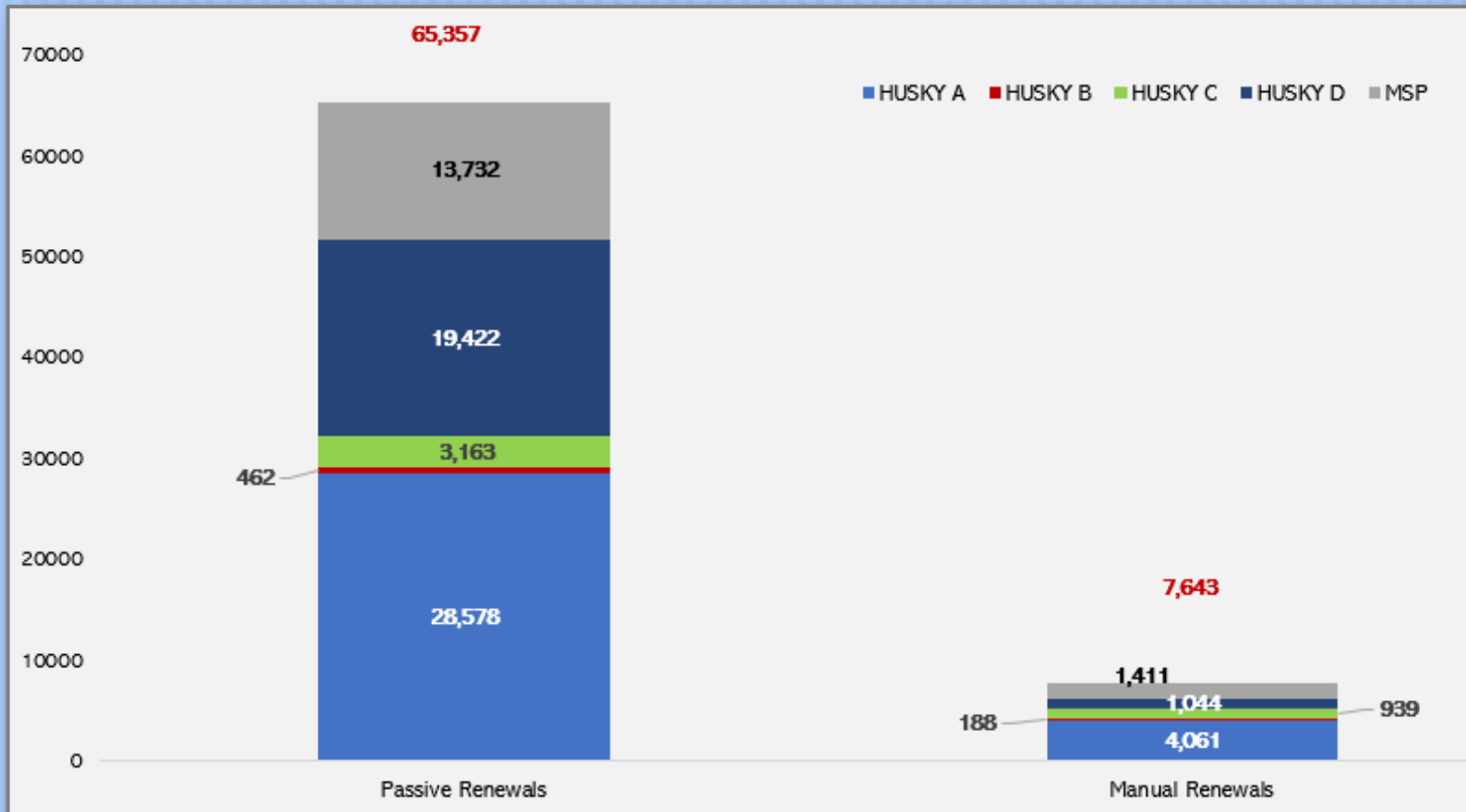


- HUSKY A
- HUSKY B
- HUSKY C
- HUSKY D
- MSP - Medicare Savings Program

HUSKY HEALTH RENEWAL OUTCOMES – OCTOBER 2023

PASSIVE VS. MANUAL RENEWALS BY MEDICAL BENEFIT PLAN

73,000 individuals renewed during October, with 73% renewing “passively”

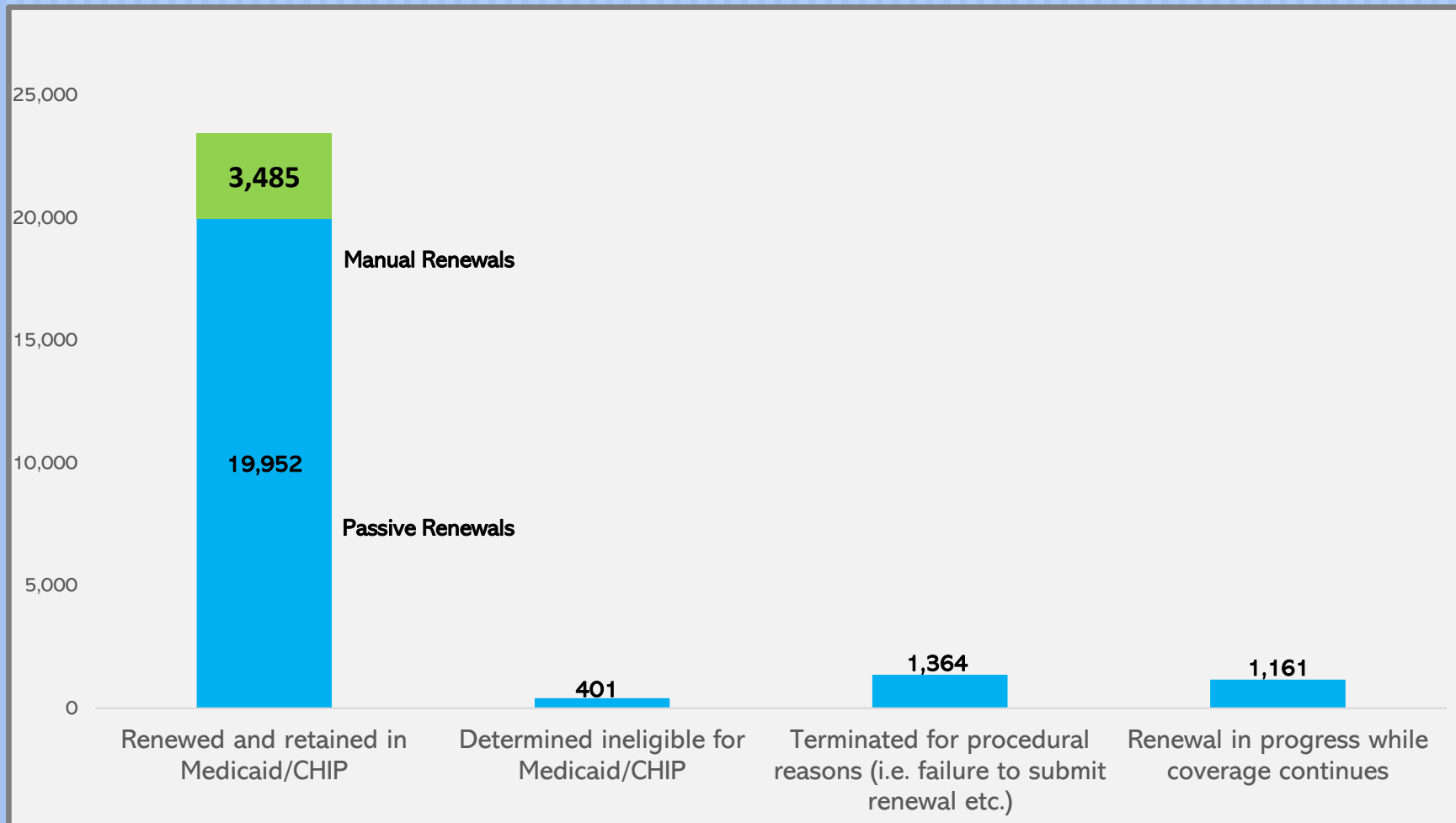


Notes:

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.
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- 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 – October 2023



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

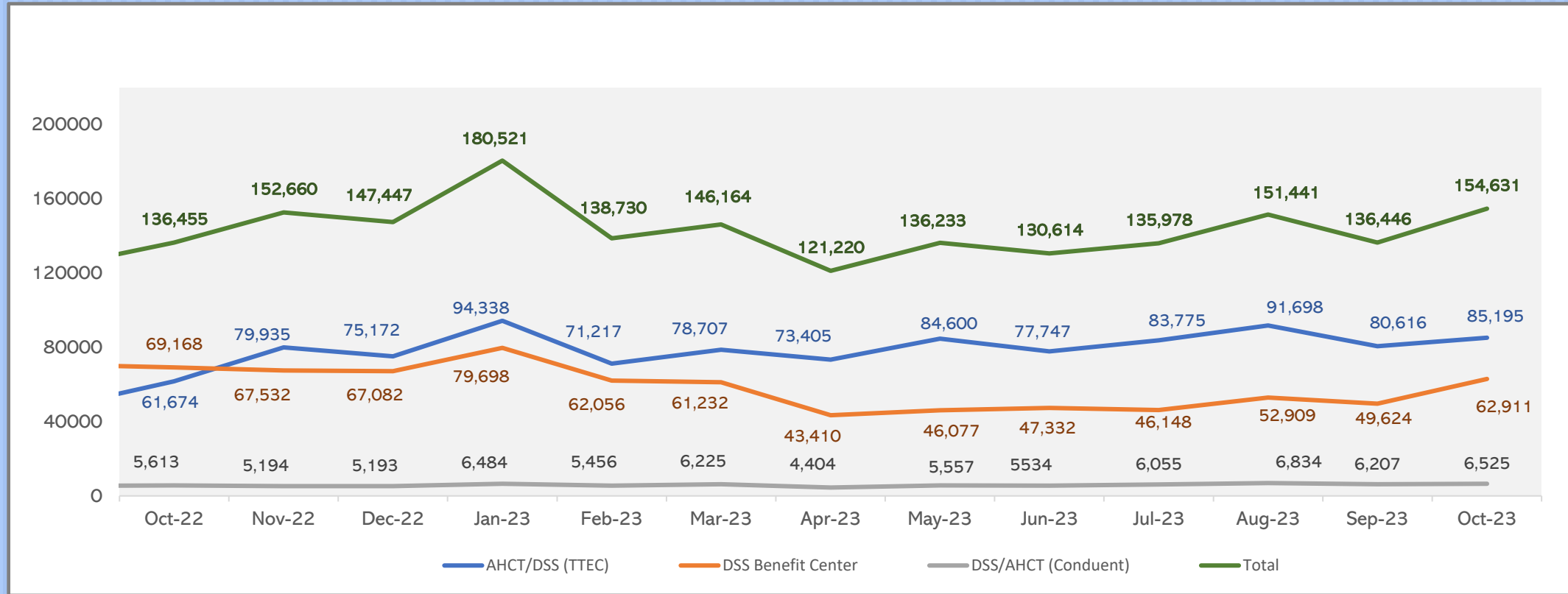
Tracking Individuals after Disenrollment for 90 days

Renewal Disenrollment Tracking – 30/60/90 Days Later	April	May	June	July	August	September
	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	32,643	22,298	10,051
Total individuals active currently in HUSKY	9,639	7,707	4,212	8,839	5,313	1,188
Total individuals active currently in QHP/APTC	851	1,493	1,145	2,350	1,291	819
Total individuals active currently in Covered CT	453	672	513	943	647	432
Total Individuals who transitioned to non-MAGI HUSKY	149	217	57	110	83	36
Total individuals who closed and are now active	11,092	10,089	5,927	12,242	7,334	2,475
Total individuals not enrolled in any state programs	13,416	14,835	9,642	20,401	14,964	7,576

40% of individuals who were disenrolled at renewal during the first 4 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.

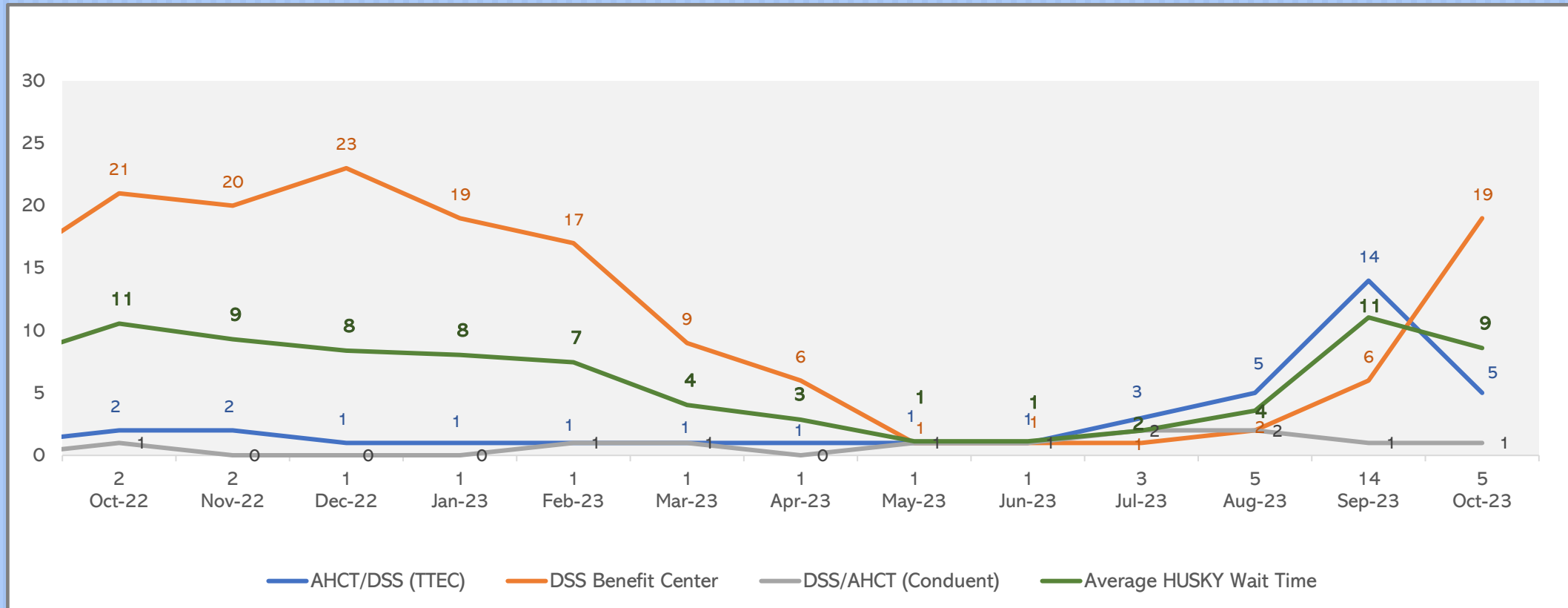
CALL CENTER DATA ACROSS ALL HUSKY CONTACT CENTERS

Call Volume By Call Center



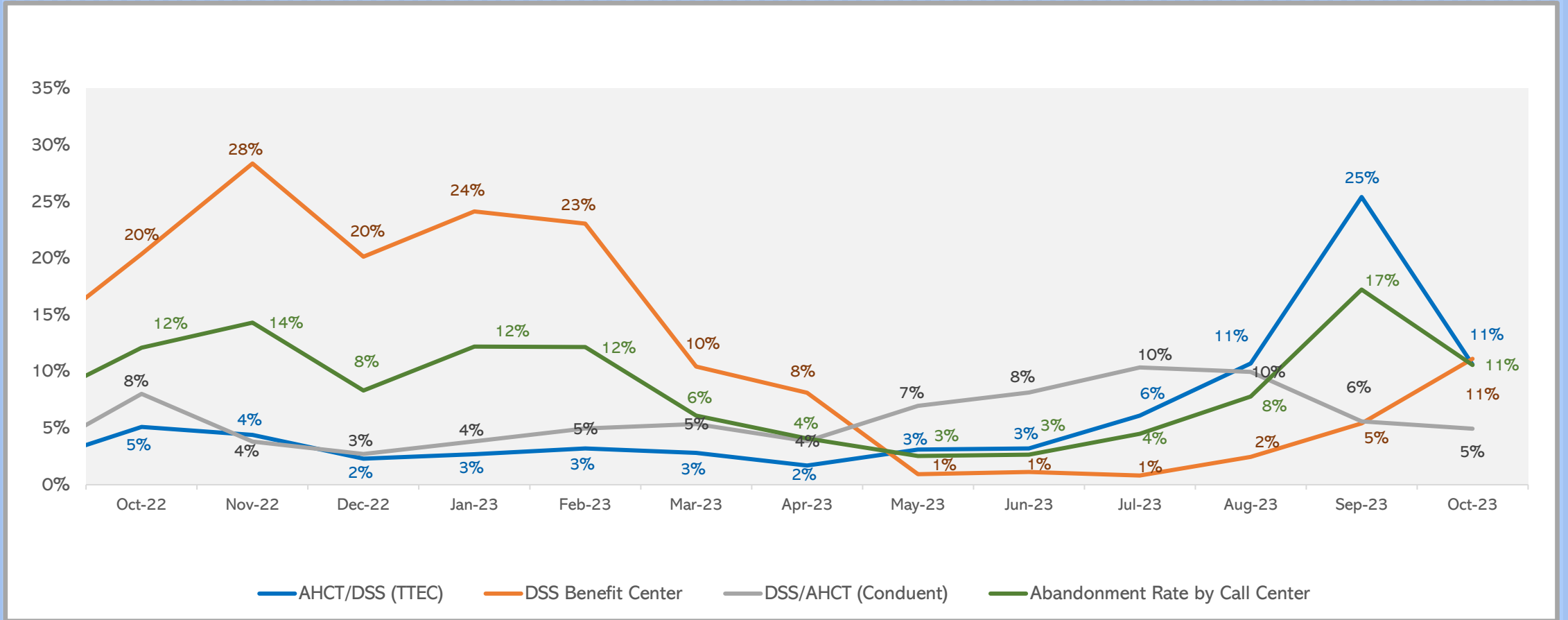
Per CMS requirements, data represents only Medicaid/CHIP calls. Calls for other programs are excluded. The DSS Benefit Center handles 30% of Medicaid/CHIP calls. Total call volume for the Benefit Center in October was 224,681.

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.

Abandonment Rate By Call Center

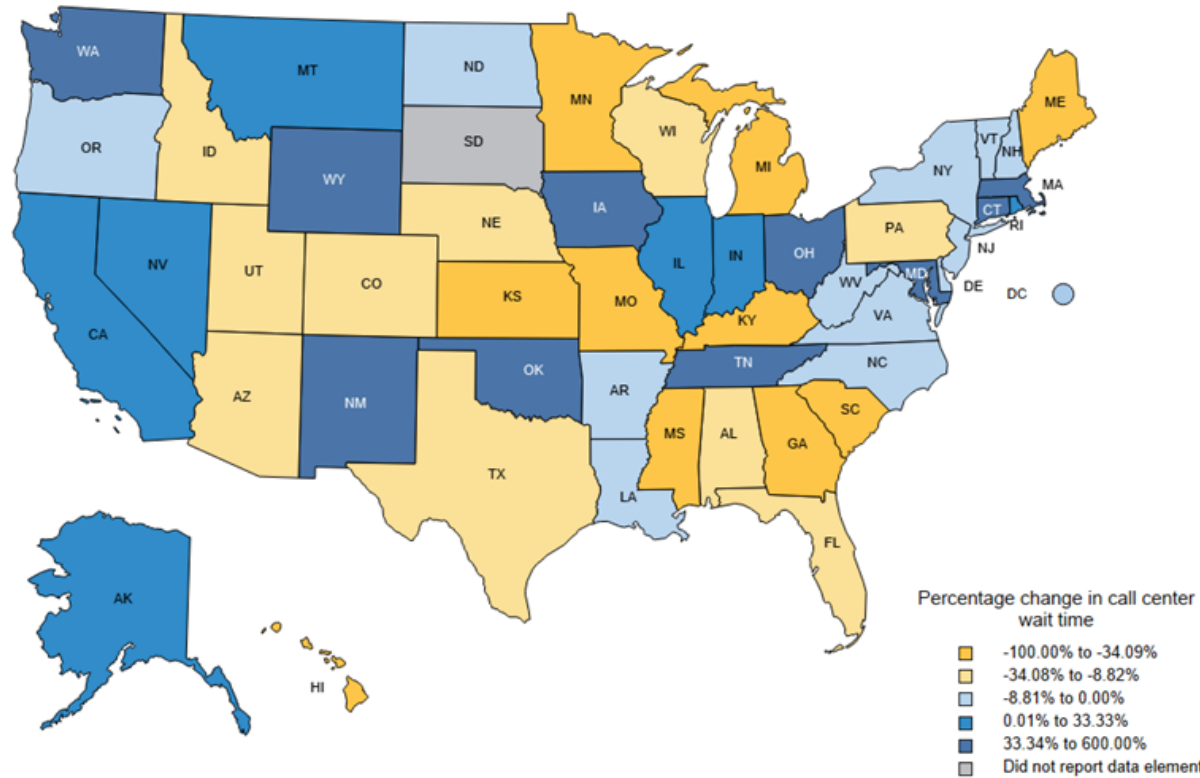


Per CMS requirements, data represents only Medicaid/CHIP calls. Calls for other programs are excluded.

Preliminary Performance Indicators

50 States & the District of Columbia

Percentage change in average call center wait time, July 2023 to August 2023



© 2021 Mapbox © OpenStreetMap

Source: Medicaid and CHIP Eligibility and Enrollment Performance Indicator Data, preliminary data submitted by October 23, 2023, with data through August 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).

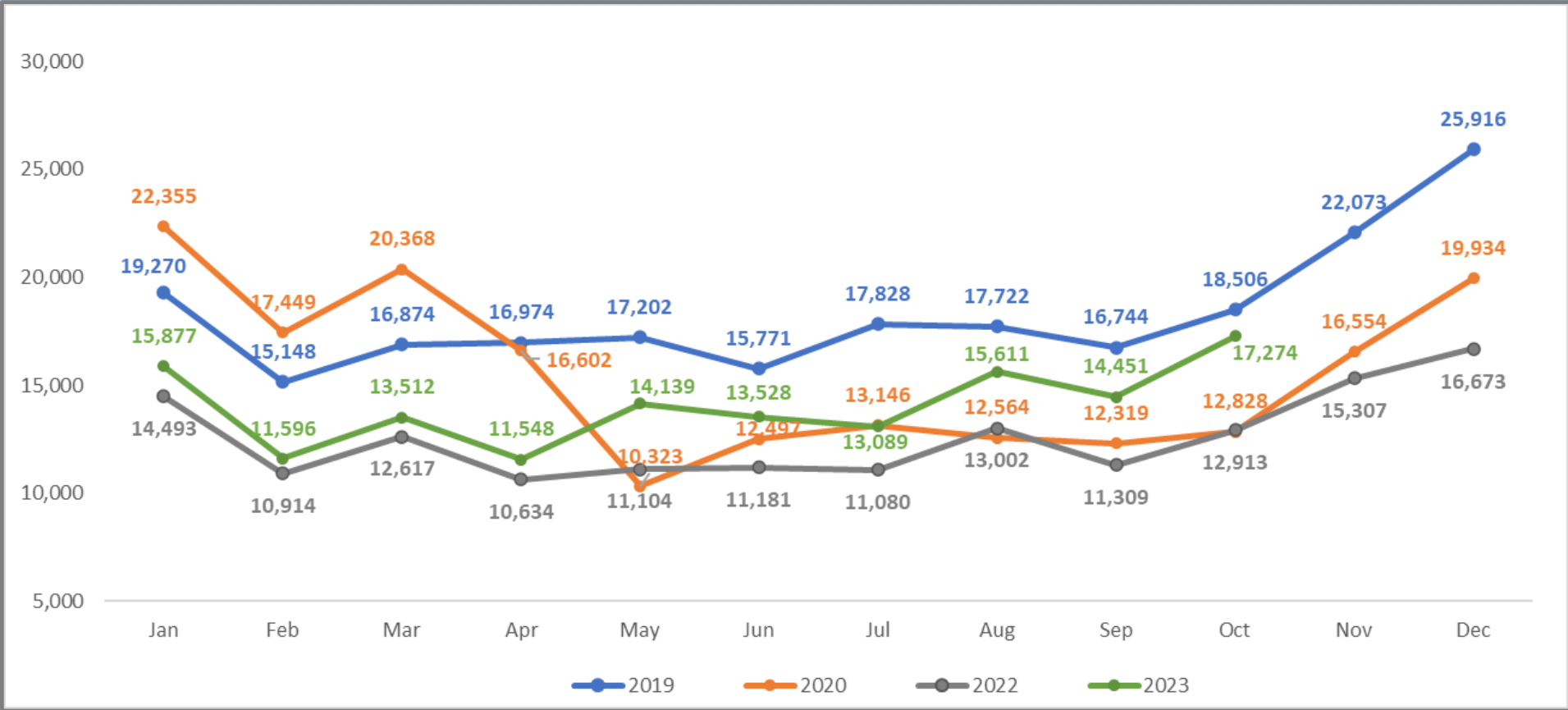
State	Avg Call Center Wait Time	% Change from Previous Month	State	Avg Call Center Wait Time	% Change from Previous Month
AK	16.00	23.08%	MT	34.00	9.68%
AL	3.00	-25.00%	NC	0.00	0.00%
AR	4.00	0.00%	ND	1.00	0.00%
AZ	31.00	-8.82%	NE	4.00	-20.00%
CA	4.00	33.33%	NH	15.00	0.00%
CO	12.00	-14.29%	NJ	2.00	0.00%
CT	4.00	100.00%	NM	35.00	40.00%
DC	1.00	0.00%	NV	21.00	10.53%
DE	1.00	0.00%	NY	0.00	0.00%
FL	29.00	-29.27%	OH	7.00	40.00%
GA	18.00	-35.71%	OK	3.00	100.00%
HI	11.00	-47.62%	OR	27.00	-3.57%
IA	20.00	233.33%	PA	13.00	-13.33%
ID	46.00	-11.54%	RI	45.00	4.65%
IL	17.00	6.25%	SC	1.00	-66.67%
IN	8.00	33.33%	SD	NR	NR
KS	2.00	-81.82%	TN	15.00	400.00%
KY	8.00	-46.67%	TX	11.00	-15.38%
LA	2.00	0.00%	UT	25.00	-13.79%
MA	2.00	100.00%	VA	1.00	0.00%
MD	15.00	400.00%	VT	1.00	0.00%
ME	29.00	-34.09%	WA	1.00	100.00%
MI	1.00	-50.00%	WI	12.00	-29.41%
MN	4.00	-42.86%	WV	11.00	-8.33%
MO	17.00	-37.04%	WY	7.00	600.00%
MS	0.00	-100.00%			
			Did not report data element	NR	NR



NEW HUSKY APPLICATION ACTIVITY AND TIMELINESS

Year-Over-Year New Medical Applications

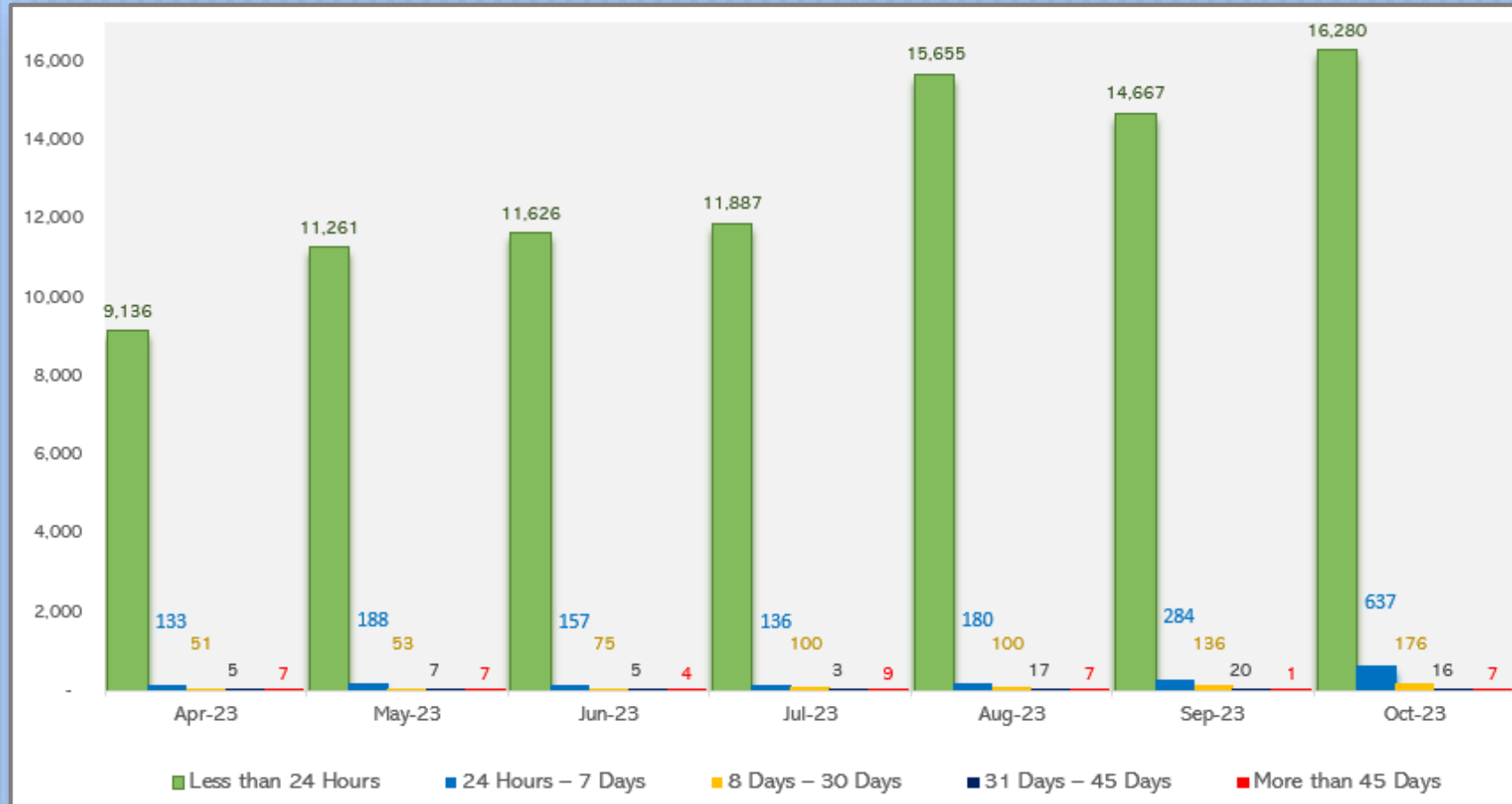
DSS consistently maintains an average of 98% processing timeliness



Calendar year 2021 was omitted to ease crowding in the chart allowing better comparison of pre-pandemic data in 2019 and early 2020 with current trends. 2021 looks very much like 2022.

MAGI Medicaid New Applications by Processing Time

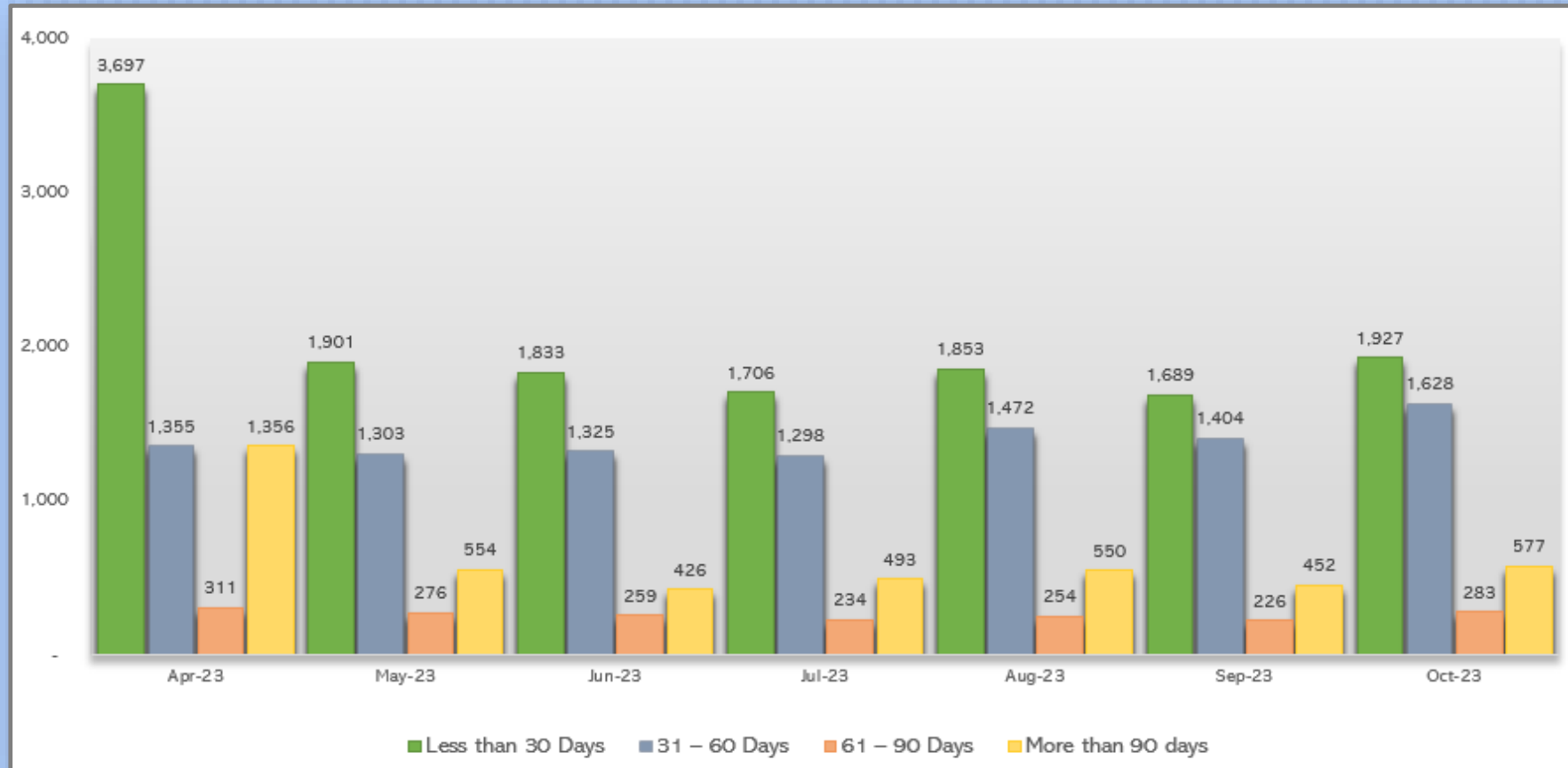
(current median processing time 0 days)



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.