## Application Processing

1. Total pending applications received between March 1, 2020 and the end of the month prior to the state's unwinding period: 3799

   Unable to report: No

1a. Total MAGI and other non-disability applications: 3779

   Unable to report: No
1b. Total disability-related applications | 20

Unable to report | No

**Metric 1 Notes**
1. The State of Utah has worked to clean up our pending applications data. We have removed duplicate cases, non-medical program applications, switching between program counted as applications, etc.
2. When the State of Utah receives a medical application, they are all registered as a "generic medical" program until a worker can address the application and determine which coverage group the application belongs with (MAGI or Non-MAGI). All the generic medical programs are added to this line.
1b. Line 1a includes potential pending disability applications that have not been identified yet. This number is specific to those we have identified as disability related applications.

2. Of those applications included in Monthly Metric 1, the total number of applications completed as of the last day of the reporting period | 160

Unable to report | No

2a. Completed MAGI and other non-disability related applications as of the last day of the reporting period | 158

Unable to report | No

2b. Completed disability-related applications as of the last day of the reporting period | 2

Unable to report | No

**Metric 2 Notes**
(Empty)
3. Of those applications included in Monthly Metric 1 the total number of applications that remain pending as of the last day of the reporting period: 166

Unable to report: No

3a. Pending MAGI and other non-disability applications as of the last day of the reporting period: 159

Unable to report: No

3b. Pending disability-related applications as of the last day of the reporting period: 7

Unable to report: No

**Metric 3 Notes**
{Empty}

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**RENEWALS INITIATED**

4. Total beneficiaries for whom a renewal was initiated in the reporting period: 23112

Unable to report: No

**Metric 4 Notes**
This data consists of only those individuals who were selected for review this period, it does not include any individuals brought in outside of this reporting period.

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**RENEWALS AND OUTCOMES**
5. Total beneficiaries due for renewal in the reporting period 40411

Unable to report No

**Metric 5 Notes**

(Empty)

5a. Of the beneficiaries included in Metric 5, the number renewed and retained in Medicaid or CHIP (those who remained enrolled) 17101

Unable to report No

5a(1). Number of beneficiaries renewed on an ex parte basis 6254

Unable to report No

5a(2). Number of beneficiaries renewed using a pre-populated renewal form 10847

Unable to report No

**Metric 5a Notes**

5a(1) This is the number of individuals renewed via ex parte from March 1, 2023 to March 10, 2023, prior to the state sending pre-populated review forms.

5a(2) This is the number of individuals renewed after March 10, 2023, pre-populated review forms had been sent. It is possible that some individuals were renewed via ex parte despite sending the pre-populated review forms.

5b. Of the beneficiaries included in Metric 5, the number determined ineligible for Medicaid or CHIP (and transferred to Marketplace) 2108
Unable to report

**Metric 5b Notes**
Although 2,108 individuals were determined ineligible, only 205 individuals were sent to the Marketplace prior to May 1. We recognize this was a lower number than expected and are actively investigating the system issue to ensure all individuals determined ineligible are timely transferred to the Marketplace.

<table>
<thead>
<tr>
<th>Metric 5c Notes</th>
<th>19587</th>
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<tbody>
<tr>
<td>5c. Of the beneficiaries included in Metric 5, the number terminated for procedural reasons (i.e. failure to respond)</td>
<td>Unable to report</td>
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<thead>
<tr>
<th>Metric 5d Notes</th>
<th>1615</th>
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<tr>
<td>5d. Of the beneficiaries included in Metric 5, the number whose renewal was not completed</td>
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**Metric 6 Notes**

<table>
<thead>
<tr>
<th>Metric 6 Notes</th>
<th>2023-03</th>
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<tbody>
<tr>
<td>6. Month in which renewals due in the reporting month were initiated</td>
<td>Unable to report</td>
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<tr>
<td>Metric</td>
<td>Description</td>
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<td>--------</td>
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<tr>
<td>7</td>
<td>Number of beneficiaries due for a renewal since the beginning of the state's unwinding period whose renewal has not yet been completed</td>
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<td>Metric 7 Notes</td>
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**MEDICAID FAIR HEARINGS**

<table>
<thead>
<tr>
<th>Metric</th>
<th>Description</th>
<th>Value</th>
<th>Notes</th>
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</thead>
<tbody>
<tr>
<td>8</td>
<td>Total number of Medicaid fair hearings pending more than 90 days at the end of the reporting period</td>
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<td></td>
<td>No</td>
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<tr>
<td>Metric 8 Notes</td>
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