## Florida Unwinding Monthly Report (February 2024)

## Unwinding Period Start Date: February 2024 Submission Date: 03/08/2024 Last saved date and time: Friday, 03-08-2024 - 20:58 Submitted by: Submitted status: Yes

## **APPLICATION PROCESSING**

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

152371

Unable to report

No

1a. Total MAGI and other non-disability applications

122904

Jnable to report	Ne
b. Total disability-related applications	2946
Jnable to report	Ne
<b>Metric 1 Notes</b> Empty}	
2. Of those applications included in Monthly Metric 1, the total number of applications completed as of the last day of the reporting period	15221
Jnable to report	N
2a. Completed MAGI and other non-disability related applications as of the last da of the reporting period	y <b>12282</b> :
Jnable to report	N
2b. Completed disability-related applications as of the last day of the reporting pe	riod <b>2939</b>
Jnable to report	Ne
<b>Metric 2 Notes</b> Empty}	
3. Of those applications included in Monthly Metric 1 the total number of applicati hat remain pending as of the last day of the reporting period	ons <b>10</b>

Unable to report	No
3a. Pending MAGI and other non-disability applications as of the last day of the reporting period	71
Unable to report	No
3b. Pending disability-related applications as of the last day of the reporting period	31
Unable to report	No
Metric 3 Notes {Empty}	

RENEWALS INITIATED	
4. Total beneficiaries for whom a renewal was initiated in the reporting period	440260
Unable to report	No
Metric 4 Notes {Empty}	

## **RENEWALS AND OUTCOMES**

5. Total beneficiaries due for renewal in the reporting period

307840

Jnable to report	No
<b>Metric 5 Notes</b> Empty}	
5a. Of the beneficiaries included in Metric 5, the number renewed and retained in Medicaid or CHIP (those who remained enrolled)	n <b>211964</b>
Jnable to report	No
5a(1). Number of beneficiaries renewed on an ex parte basis	44325
Jnable to report	No
5a(2). Number of beneficiaries renewed using a pre-populated renewal form	167639
Jnable to report	No
<b>Metric 5a Notes</b> Empty}	
5b. Of the beneficiaries included in Metric 5, the number determined ineligible fo Medicaid or CHIP (and transferred to Marketplace)	or <b>4351</b> 4
Jnable to report	No

5c. Of the beneficiaries included in Metric 5, the number terminated for procedural reasons (i.e. failure to respond)	3889
Jnable to report	Ne
<b>Metric 5c Notes</b> [Empty}	
5d. Of the beneficiaries included in Metric 5, the number whose renewal was not completed	1347
Jnable to report	N
Metric 5d Notes [Empty]	
5. Month in which renewals due in the reporting month were initiated	2024-0
Jnable to report	N
Metric 6 Notes [Empty]	
7. Number of beneficiaries due for a renewal since the beginning of the state's unwinding period whose renewal has not yet been completed	5160
Jnable to report	N
Metric 7 Notes [Empty]	

MEDICAID FAIR HEARINGS	
8. Total number of Medicaid fair hearings pending more than 90 days at the end of the reporting period	149
Unable to report	No
Metric 8 Notes {Empty}	