

Unwinding Reports

# Mississippi Unwinding Monthly Report (October 2023)

## Information

**Print**

Unwinding Period Start Date: **October 2023**

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Submission Date: **02/12/2024**

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Last saved date and time: **Monday, 02-12-2024 - 14:33**

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Submitted by:

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Submitted status: **Yes**

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### APPLICATION PROCESSING

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1. Total pending applications received between March 1, 2020 and the end of the month **8523** prior to the state's unwinding period

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Unable to report	<b>No</b>
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1a. Total MAGI and other non-disability applications	<b>6789</b>
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Unable to report	<b>No</b>
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1b. Total disability-related applications	<b>1734</b>
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Unable to report	<b>No</b>
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**Metric 1 Notes**

{Empty}

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2. Of those applications included in Monthly Metric 1, the total number of applications completed as of the last day of the reporting period	<b>8521</b>
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Unable to report	<b>No</b>
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2a. Completed MAGI and other non-disability related applications as of the last day of the reporting period	<b>6787</b>
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Unable to report	<b>No</b>
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2b. Completed disability-related applications as of the last day of the reporting period	<b>1734</b>
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Unable to report	<b>No</b>
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**Metric 2 Notes**

{Empty}

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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	<b>2</b>
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Unable to report

**No**

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

**1**

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Unable to report

**No**

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

**1**

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Unable to report

**No**

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**Metric 3 Notes**

{Empty}

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**RENEWALS INITIATED**

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

**57616**

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Unable to report

**No**

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**Metric 4 Notes**

{Empty}

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**RENEWALS AND OUTCOMES**

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5. Total beneficiaries due for renewal in the reporting period

**57118**

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Unable to report

**No**

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**Metric 5 Notes**

{Empty}

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

**39587**

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Unable to report

**No**

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

**12587**

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Unable to report

**No**

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

**27000**

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Unable to report

**No**

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**Metric 5a Notes**

Updated total for October reviews processed from 11/1/2023-1/31/2024. Change to 5a - 9,184 total increase (1,752 via ex parte and 7,432 via renewal forms).

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

**2775**

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Unable to report

**No**

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**Metric 5b Notes**

Updated total for October reviews processed from 11/1/2023-1/31/2024. Change to 5b - 253 increase.

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5c. Of the beneficiaries included in Metric 5, the number terminated for procedural reasons (i.e. failure to respond)	<b>6371</b>
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Unable to report	<b>No</b>
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**Metric 5c Notes**

Updated total for October reviews processed from 11/1/2023-1/31/2024. Change to 5c - 219 increase.

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5d. Of the beneficiaries included in Metric 5, the number whose renewal was not completed	<b>8385</b>
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Unable to report	<b>No</b>
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**Metric 5d Notes**

Updated total for October reviews processed from 11/1/2023-1/31/2024. Change to 5d - 9,656 decrease.

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6. Month in which renewals due in the reporting month were initiated	<b>2023-08</b>
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Unable to report	<b>No</b>
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**Metric 6 Notes**

{Empty}

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7. Number of beneficiaries due for a renewal since the beginning of the state's unwinding period whose renewal has not yet been completed	<b>28382</b>
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Unable to report	<b>No</b>
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**Metric 7 Notes**

This is the total of June renewals remaining from updated data as of 9/30/2023, July renewals remaining from updated data as of 10/31/2023, August renewals remaining from updated data as of 11/30/2023, September renewals remaining from updated data as of 12/31/2023 and October renewals remaining as of 1/31/2024.

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## MEDICAID FAIR HEARINGS

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8. Total number of Medicaid fair hearings pending more than 90 days at the end of the reporting period **0**

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Unable to report **No**

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**Metric 8 Notes**  
{Empty}

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Days Delayed

**On Time**

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