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#### **Unwinding Reports**

# South Carolina Unwinding Monthly Report (June 2024)

## Information

Print

Unwinding Period Start Date: June 2024

Submission Date: 07/08/2024

Last saved date and time: Monday, 07-08-2024 - 20:22

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	14323
	Unable to report	No
	1a. Total MAGI and other non-disability applications	7218

able to report	No
Total disability-related applications	7105
able to report	Nc
e <b>tric 1 Notes</b> npty}	
Of those applications included in Monthly Metric 1, the total number of applications <b>1</b> npleted as of the last day of the reporting period	4316
able to report	Nc
Completed MAGI and other non-disability related applications as of the last day of reporting period	7217
able to report	Nc
Completed disability-related applications as of the last day of the reporting period	7099
able to report	Nc
e <b>tric 2 Notes</b> npty}	

Unable to report	No
3a. Pending MAGI and other non-disability applications as of the last day of the reportin period	ıg '
Unable to report	No
3b. Pending disability-related applications as of the last day of the reporting period	
Unable to report	No
<b>Metric 3 Notes</b> {Empty}	
RENEWALS INITIATED	
4. Total beneficiaries for whom a renewal was initiated in the reporting period	3923!
Unable to report	No
<b>Metric 4 Notes</b> {Empty}	

### **RENEWALS AND OUTCOMES**

5. Total beneficiaries due for renewal in the reporting period

153867

nable to report	Νο
<b>letric 5 Notes</b> his includes full and limited benefit members (ex. individuals who are enrolled i amily Planning Limited Benefit Program).	n the state's
a. Of the beneficiaries included in Metric 5, the number renewed and retained i 1edicaid or CHIP (those who remained enrolled)	n <b>9770</b> 5
nable to report	Nc
a(1). Number of beneficiaries renewed on an ex parte basis	78401
nable to report	Nc
a(2). Number of beneficiaries renewed using a pre-populated renewal form	19304
nable to report	Nc
<b>letric 5a Notes</b> Empty}	
b. Of the beneficiaries included in Metric 5, the number determined ineligible fo ledicaid or CHIP (and transferred to Marketplace)	or <b>23739</b>
nable to report	No

5c. Of the beneficiaries included in Metric 5, the number terminated for procedural reasons (i.e. failure to respond)	2995
Unable to report	N
<b>Metric 5c Notes</b> {Empty}	
5d. Of the beneficiaries included in Metric 5, the number whose renewal was not completed	246
Unable to report	N
<b>Metric 5d Notes</b> {Empty}	
6. Month in which renewals due in the reporting month were initiated	2024-0
Unable to report	N
<b>Metric 6 Notes</b> {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	6350
Unable to report	N
<b>Metric 7 Notes</b> (Empty}	

### **MEDICAID FAIR HEARINGS**

8. Total number of Medicaid fair hearings pending more than 90 days at the end of the reporting period **17** 

Unable to report

No

Metric 8 Notes {Empty}