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**Unwinding Reports** 

# South Carolina Unwinding Monthly Report (May 2024)

## **Information** Print Unwinding Period Start Date: May 2024 Submission Date: **06/07/2024** Last saved date and time: Friday, 06-07-2024 - 18:46 Submitted by: Submitted status: Yes APPLICATION PROCESSING 1. Total pending applications received between March 1, 2020 and the end of the 14323 month prior to the state's unwinding period Unable to report No

1a. Total MAGI and other non-disability applications

7218

Unable to report	No
1b. Total disability-related applications	7105
Unable to report	No
<b>Metric 1 Notes</b> [Empty]	
2. Of those applications included in Monthly Metric 1, the total number of applications <b>1</b> completed as of the last day of the reporting period	4315
Unable to report	No
2a. Completed MAGI and other non-disability related applications as of the last day of the reporting period	7217
Unable to report	No
2b. Completed disability-related applications as of the last day of the reporting period	7098
Unable to report	No
<b>Metric 2 Notes</b> [Empty}	
3. Of those applications included in Monthly Metric 1 the total number of applications the remain pending as of the last day of the reporting period	nat 8

Unable to report	No
Ba. Pending MAGI and other non-disability applications as of the last day of the repor- period	ting <b>1</b>
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)	

#### **RENEWALS INITIATED**

4. Total beneficiaries for whom a renewal was initiated in the reporting period 144194

Unable to report No

### **Metric 4 Notes**

{Empty}

#### **RENEWALS AND OUTCOMES**

5. Total beneficiaries due for renewal in the reporting period

114697

<b>Metric 5 Notes</b> This includes full and limited benefit members (ex. individuals who are enrolled in tles amily Planning Limited Benefit Program).	ne state's
5a. Of the beneficiaries included in Metric 5, the number renewed and retained in Medicaid or CHIP (those who remained enrolled)	7357
Jnable to report	N
5a(1). Number of beneficiaries renewed on an ex parte basis	6166
Jnable to report	N
5a(2). Number of beneficiaries renewed using a pre-populated renewal form	1191
Jnable to report	N
<b>Metric 5a Notes</b> Empty}	
5b. Of the beneficiaries included in Metric 5, the number determined ineligible for Medicaid or CHIP (and transferred to Marketplace)	1416
Jnable to report	N

5c. Of the beneficiaries included in Metric 5, the number terminated for procedural reasons (i.e. failure to respond)	1907
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	789
Unable to report	N
Metric 5d Notes [Empty]	
6. Month in which renewals due in the reporting month were initiated	2024-0
Unable 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	6513
Unable to report	N
Metric 7 Notes (Empty)	

3. Total number of Medicaid fair hearings pending more than 90 days at the end of the reporting period	23
Jnable to report	No
Metric 8 Notes Empty}	