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**Unwinding Reports** 

# Vermont Unwinding Monthly Report (January 2024)

# Information

Unwinding Period Start Date: January 2024

Submission Date: 02/08/2024

Last saved date and time: Thursday, 02-08-2024 - 09:22

Submitted by: Luke.Titus@vermont.gov

Submitted status: Yes

#### **APPLICATION PROCESSING**

1. Total pending applications received between March 1, 2020 and the end of the month **1581** prior to the state's unwinding period

Unable to report

No

1a. Total MAGI and other non-disability applications

Print

1566

Inable to report	No
b. Total disability-related applications	15
nable to report	No
<b>fetric 1 Notes</b> Empty}	
. Of those applications included in Monthly Metric 1, the total number of applications ompleted as of the last day of the reporting period	1547
nable to report	No
a. Completed MAGI and other non-disability related applications as of the last day of ne reporting period	1532
Inable to report	No
b. Completed disability-related applications as of the last day of the reporting period	15
nable to report	No
<b>fetric 2 Notes</b> Empty}	

3a. Pending MAGI and other non-disability applications as of the last day of the reporting **34** period

Unable to report

No

3b.	Pending disability-re	lated applications	as of the last day	v of the reporting	period <b>0</b>
20.	i chang abability i c	acea applications	as of the last da	y of the reporting	

Unable to report

No

### Metric 3 Notes

Majority of pending applications are for LTC Medicaid due to customer-requested extensions or pending placement.

#### **RENEWALS INITIATED**

4. Total beneficiaries for whom a renewal was initiated in the reporting period **15407** 

Unable to report

**Metric 4 Notes** {Empty}

## **RENEWALS AND OUTCOMES**

5. Total beneficiaries due for renewal in the reporting period

12870

No

No

Unable 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)	9296
Unable to report	No
5a(1). Number of beneficiaries renewed on an ex parte basis	7887
Unable to report	No
5a(2). Number of beneficiaries renewed using a pre-populated renewal form	1409
Unable to report	No
<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)	400
Unable to report	No
<b>Metric 5b Notes</b> {Empty}	

5c. Of the beneficiaries included in Metric 5, the number terminated fo reasons (i.e. failure to respond)	or procedural 161
Unable to report	Ν
<b>Metric 5c Notes</b> [Empty}	
5d. Of the beneficiaries included in Metric 5, the number whose renew completed	val was not 155
Unable to report	Ν
<b>Metric 5d Notes</b> {Empty}	
6. Month in which renewals due in the reporting month were initiated	2023-1
Unable to report	Ν
<b>Metric 6 Notes</b> November for MABD due to 90-day renewal timeline. December for M renewal timeline.	ICA/LTC due to 60-day
7. Number of beneficiaries due for a renewal since the beginning of th unwinding period whose renewal has not yet been completed	ne state's 498
	Ν

### **MEDICAID FAIR HEARINGS**

8. Total number of Medicaid fair hearings pending more than 90 days at the end of the reporting period **11** 

Unable to report

No

Metric 8 Notes {Empty}

Days Delayed

On Time