## **Unwinding Reports**

## Florida Unwinding Monthly Report (May 2023)

## Information

Unwinding Period Start Date: **May 2023** 

Submission Date: **07/10/2023** 

Last saved date and time: Monday, 07-10-2023 - 20:02

Submitted by: Daniel.Davis@myflfamilies.com

Submitted status: **Yes** 

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

Unable to report No

1a. Total MAGI and other non-disability applications 122904

Unable to report No

1b. Total disability-related applications 2946	57
Unable to report	lo
Metric 1 Notes {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	18
Unable to report N	lo
2a. Completed MAGI and other non-disability related applications as of the last day of the reporting period	38
Unable to report	lo
2b. Completed disability-related applications as of the last day of the reporting period 2828	30
Unable to report	lo
Metric 2 Notes {Empty}	
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	53
Unable to report N	10

3a. Pending MAGI and other non-disability applications as of the last day of the reporting period	1066
Unable to report	No
3b. Pending disability-related applications as of the last day of the reporting period	1187
Unable to report	No
Metric 3 Notes {Empty}	

4. Total beneficiaries for whom a renewal was initiated in the reporting period	408052
Unable to report	No

RENEWALS AND OUTCOMES	
5. Total beneficiaries due for renewal in the reporting period	408438
Unable to report	No

Metric 5 Notes This metric includes cases initiated in April that were due in May.	
ia. Of the beneficiaries included in Metric 5, the number renewed and retained in Medicaid or CHIP (those who remained enrolled)	288114
Jnable to report	No
ia(1). Number of beneficiaries renewed on an ex parte basis	106665
Jnable to report	No
ia(2). Number of beneficiaries renewed using a pre-populated renewal form	181449
Jnable to report	No
Metric 5a Notes Florida will update previous submissions of this report monthly. For up to date Ap please reference April's report submitted July 10, 2023.	ril data,

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

51128

Unable to report

No

## **Metric 5b Notes**

Florida will update previous submissions of this report monthly. For up to date April data, please reference April's report submitted July 10, 2023.

Unable to report	N
<b>Metric 5c Notes</b> Florida will update previous submissions of this report monthly. For up to please reference April's report submitted July 10, 2023.	o date April data,
5d. Of the beneficiaries included in Metric 5, the number whose renewal v completed	was not <b>2074</b>
Unable to report	N
Unable to report  Metric 5d Notes  Florida will update previous submissions of this report monthly. For up to please reference April's report submitted July 10, 2023.	
<b>Metric 5d Notes</b> Florida will update previous submissions of this report monthly. For up to	
<b>Metric 5d Notes</b> Florida will update previous submissions of this report monthly. For up to please reference April's report submitted July 10, 2023.	o date April data,
Metric 5d Notes Florida will update previous submissions of this report monthly. For up to please reference April's report submitted July 10, 2023.  6. Month in which renewals due in the reporting month were initiated	o date April data, <b>2023-</b> 0
Metric 5d Notes Florida will update previous submissions of this report monthly. For up to please reference April's report submitted July 10, 2023.  6. Month in which renewals due in the reporting month were initiated  Unable to report  Metric 6 Notes	o date April data, 2023-0

MEDICAID FAIR HEARINGS	
8. Total number of Medicaid fair hearings pending more than 90 days at the end of the reporting period	
Unable to report	N
Metric 8 Notes {Empty}	

{Empty}