

Unwinding Eligibility and Enrollment Data Reporting Template

The ongoing COVID-19 outbreak and implementation of federal policies to address the public health emergency (PHE) have disrupted routine Medicaid, Children's Health Insurance Program (CHIP), and Basic Health Program (BHP) eligibility and enrollment operations. Medicaid and CHIP enrollment has grown to historic levels due in large part to the continuous enrollment requirement that states implemented as a condition of receiving a temporary 6.2 percentage point federal medical assistance percentage increase under section 6008 of the Families First Coronavirus Response Act (P.L. 116-127) ("continuous enrollment condition"). States will have a large volume of eligibility and enrollment actions to complete when the PHE ends, and the Centers for Medicare & Medicaid Services (CMS) released State Health Official letter #22-001, "Promoting Continuity of Coverage and Distributing Eligibility and Enrollment Workload in Medicaid, the Children's Health Insurance Program (CHIP), and Basic Health Program (BHP) Upon Conclusion of the COVID-19 Public Health Emergency," which outlines timelines and guidance for states to restore routine operations in a manner that promotes continuity of coverage for eligible individuals and facilitates seamless coverage transitions for those who become eligible for other insurance affordability programs (e.g., Marketplace).

CMS will require states to report on specific metrics described in this "Unwinding Eligibility and Enrollment Data Reporting Template" (Unwinding Data Report). These metrics are designed to demonstrate states' progress towards restoring timely application processing and initiating and completing renewals of eligibility for all Medicaid and CHIP enrollees consistent with the guidance outlined in SHO #22-001. States will complete a baseline and subsequent monthly Unwinding Data Report and submit these reports to CMS using the same portal in which states enter their Performance Indicator (PI) data and which is set up to accept submissions from those with PI submission credentials. States may use the Unwinding Data Report excel workbook as a planning tool to review the metrics before submitting their baseline and monthly reports through the PI portal.

We realize that states may have questions or need help as they review the metrics in the report and reporting specifications². States can access help anytime by emailing UnwindingMetricsTA@mathematica-mpr.com. CMS will also be hosting an all-state webinar in which they will review the metrics and how to submit their Unwinding Data Report; the webinar will be recorded and posted on Medicaid.gov so that states can access it at any time.

¹ https://sdis.medicaid.gov/user/login

² https://www.medicaid.gov/resources-for-states/coronavirus-disease-2019-covid-19/unwinding-and-returning-regular-operations-after-covid-19/index.html

CMS Baseline Unwind Metrics Submitted March 2023

Report submitted March 2023

APPLICATION PROCESSING	NUMBER	STATE NOTES/ADDITIONAL INFORMATION ABOUT THE DATA							
1. Total pending applications received between March 1, 2020 and the end of the month prior to the state's unwinding period (1a + 1b)	3,605								
1a. Pending MAGI and other non-disability applications		Unable to report; Data cannot be reported for the breakout between disability and non-disability applications until after processing.							
1b. Pending disability-related applications	N/A	Unable to report; Data cannot be reported for the breakout between disability and non-disability applications until after processing.							
RENEWALS	NUMBER	STATE NOTES/ADDITIONAL INFORMATION ABOUT THE DATA							
2. Total beneficiaries enrolled as of the end of the month prior to the state's unwinding period	392,334								
STATE'S POLICY FOR COMPLETING RENEWALS	DESCRIPTION OF STATE'S RENEWAL TIMELINE POLICY								
3. State's timeline for the renewal process	Up to 90 days	If permissions have been granted, Nebraska Medicaid requests information from trusted data sources 90 days prior to the renewal due date through an automated request process. 60 days prior to the renewal date, an eligibility worker will attempt to complete the renewal based on information available. If additional information is needed, a pre-populated renewal form is sent, providing 30 days for the beneficiary to return the form.							
MEDICAID FAIR HEARINGS	NUMBER	STATE NOTES/ADDITIONAL INFORMATION ABOUT THE DATA							
4. Total number of Medicaid fair hearings pending more than 90 days at the end of the month prior to the state's unwinding period	32	There is one eligibility appeal							

Please note the CMS metrics rearresent the renewal data for each month during the unwind per																							
Month Report Submitted	Agr-22		sc-23 Jun-23		Jul-23		Aug-23	Dec-23 ¹ Sep-2	2 Dec-23	Oct-23	Jan-24*	Nov-23 Feb-24	Dec-23	Mar-24	Jan-24	Apr-24 ³ 2/1	1/2024*	May-24	2/1/2024	Jun-24	4/1/2024	May-24	Jun-24
ARRITON DROCKSCING	Mar-23		221 221 23	May-23	AP 44		mag-as		Aur.22	Ca		Oct-23		v-23	Dec		110-74		Esh.24		Mar.24	Acc.24	
		npr-as																		-			
 Total pending applications received between March 1, 2020 and the end of the month prior 		605 3605	N/A	1,605	/A 3,605	N/A	3,605	N/A	3,605 NJ	3,605	N/2	1,605 NA	3,605	N.O.	3,605	N/A	3,605	N/A	3,605	N/A	2,605	3,625	3,605
to the state's unwinding period (1a + 1b)																-							
	Unable to report; Data cannot be																						
1a. Total MAGI and other non-disability applications (Za+Ze)	reported for the breakout between	N/A	N/A	N/A	CA N/A	N/A	N/A	N/A	N/A N/	N/A	N/3	N/A NA	N/A	N/A	N/A	N/A	N/A	N/A	N.O.	M/A	N/A	N/A	N/A
and the same of th	disability and non-disability				1					1	141	- 1	1										
	applications until after processing																						
	Unable to report; Data cannot be																						
1b. Total disability-related applications (2b+3b)	reported for the breakout between			N/A			2010		N/0			8/4			91.59		N/A		N/A		N1.59	N/A	N 44
10. Total disability-related applications (20+40)	disability and non-disability	N/A N/A	N/A	10/1	/A	N/A	nin.	N/A	N/A N/	4	N/s	N/A N/A	4 100	N _C (A)	ni/o	N/A	N)N	NA	INCOM.	N/A	nin.	III,ON	N)N
	applications until after processing																						
2. Of those applications included in Monthly Metric 1, the total number of applications	3			2514	2522		3590		2004	3605		3605	3606		3000		3696		3606		2000	3695	3000
completed as of the last day of the reporting period (2a+2b)		012	N/A	****	/4	N/A	2390	N/A	and a		N/V	N,O		N _C (A)	3003	N/A	3923	NA	2003	N/A	1001	3003	3403
2a. Completed MAGI and other non-disability related applications as of the last day of the				2000	200	20.00	3631		2001	2681		3681 N.O.	3691		VIII		2691		2681		3681	2681	3/81
reporting period	4	290	N/A	2400	/4	N/A	240.2	N/A	2002	4 2001	N/s	N/A	4 2001	N _C (A)	2002	N/A	2001	NA	2002	N/A	2004	2002	2481
The Completed disability colleted confinations as of the last day of the reporting period		745 804	N/A	908	/A 913	N/A	919	N/A	923 NJ	4 924	N.73	924 NA	4 924	N/A	926	No. Co.	924	N/A	924	N/A	926	924	924
3. Of those applications included in Monthly Metric 1, the total number of applications that				01		20.00	45																
remain pending as of the last day of the reporting period (2a+3b)		594 176	N/A	**	/A /A	N/A	15	N/A	- NJ	٩ .	N/3	NA ™	4	N,GA		N/A		N/A		N/A			
	Unable to report: Data cannot be																						
	reported for the breakout between	1	1	N/A	.1					1	1	N/A N/A					N /A		N/A			N/A	
2a. Pending MAGI and other non-disability applications as of the last day of the reporting period	disability and non-disability	N/A N/A	N/A	N/A	/A N/A	N/A	N/A	N/A	N/A N/	A N/A	N/3	N/A N/A	A N/A	N _c (A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N,GA	N/A
	applications until after processing																						
	Unable to report; Data cannot be																			-			
	reported for the breakout between																N /A		N/A			N/A	
2b. Pending disability-related applications as of the last day of the reporting period	disability and non-disability	N/A N/A	N/A	N/A	/A N/A	N/A	N/A	N/A	N/A N/	A N/A	N/3	N/A N/A	A) N/A	N,GA	N/A	N/A	N/A	N/A	NA	N/A	N/A	N _c (A	N/A
	applications until after processing																						
BENEWALS IMMATED																							
4. Total beneficiaries for whom a renewal was initiated in the reporting period	21	617 26 409	N/A	1.929 h	/A 37,052	N/A	41,321	N/A	43.702 N	40.345	N/3	23.485 NA	27,250	N/A	25.915	N/A	27.589	27,589	30.882	30.882	22.492	24,709	28,342
RENEWALS AND OUTCOMES																							
C. Total beneficiaries due for reseased in the reporting period (Cas Du Cru Cd)		8,849	8.849	5.342 26.34	29.598	29.598	39,610	39,610	29.114 29.114	43.530	43.530	41.756 41.756	36,029	36.029	21,579	31.579	23,723	23,733	27.121	27.121	24.792	27,221	22.027
Sa. Of the beneficiaries included in Metric 5, the number renewed and retained in					6 15.524							14,869 23,002				17.313			10.795	-		11.641	
Medical or Citiz those who remained excelled (Self) a Selfit		5,454	7,372	1759 18,80	6 15,524	20,286	18,175	25,301	16,691 24,621	17,716	24,763	14,869 23,002	12,088	18,088	11,146	17,313	9,058	14,096	10,795	16,850	10,436	11,641	12,138
Sa(1) Number of beneficiaries renewed on an exporter basis		1.795	1.882	9.63	1 10.072	20.318	12.488	12.724	11.425 11.728	12,799	12.824	11.376 11.927	9.961	10,078	9,200	9.853	7.196	7,839	8.157	9.664	7,749	8.725	8.822
Sa(2) Number of beneficiaries renewed using a pre-populated renewal		3,659	5,490	5,234 9,18	5,452	9,968	5,687	12,577	5,366 12,893	4,917	11,939	2,492 11,175	2,127	8,010	1,946	7,460	1,862	6,257	2,628	7,196	2,687	2,916	1,115
Sb. Of the beneficiaries included in Metric 5, the number determined ineligible for				2.153 2.86		3,532	3.135		2.213 4.281	3.273		3.122 5.740			2,810			3.117	2.586	-	2.585	2.733	
Moderate a Citible and transferred to Moderate and		548	779	2,153 2,86	2,476	3,532	3,135	4,815	2,213 4,281	3,273	5,117	3,122 5,740	3,292	4,749	2,810	4,132	1,988	3,117	2,586	3,805	2,585	2,733	1,506
Sb(1) Does not meet Medicaid eliability or financial requirements		281	411	1,399 1,90	1.623	2.391	2.177	3.292	1.617 3.063	2.337	2,594	2,314 4,269	2,372	3,454	2,334	3.144	1,623	2,388	2,017	2.731	2.137	2.097	1042
Sb(2) Client request to be removed from Medicaid		6	90	202 27	0 235	291	246	327	149 797	297	221		244	422	120	222	16	163	162	352	121	132	61
Sp (3) Client moved or is not considered a Nebraska resident		120	227	436 56		606	544	271	202 663				426	610	262	420	200	325	292	490	207	264	202
Dr. (100day)		24	61	76 15	1 134	234	166	325	48 259	84	256	125 309	100	252	93	285	79	241	115	222	120	240	
Sc. Of the beneficiaries included in Metric 5, the number terminated for procedural																							-
reasons in a failure to respondi"		249	592	1,581 3,33	7 1,910	4,244	2,806	7,565	2,006 7,722	2,947	9,200	1,985 8,833	948	4,467	991	3,451	576	2,433	783	2,785	654	834	779
			343	1.293 2.07	5 1 222	3 968	3.663	7.284	1.885 7.496	2,671	8.827	1.851 8.471	3/3	4100	922	3176	477	2,244	608	2,400	633	696	"
Sc(3) Unable to complete case review Sc (2) Client death		130	120	130 15		181	160	197	95 150				117	194	72	161	75	149	129	220	96	66	
		30	20	ra r		or	46		36 36	- 21	31	33 663			00	114	24	40	46	- 0	31	22	- 0
Sc (3) Other Sci Of the beneficiaries included in Metric 5: the number whose renewal was not		2.598	106	7.549 1.32	7 9,600	1536	15 404	1 929	19 304 2 490	19 694	4 550	21.790 4.181	19 901	8.725	16.632	6683	12111	A097	12,957	3.681	11.107	12.013	7604
AC OT THE DESIGNATION OF THE PARTY AND ADDRESS	If permissions have been granted.	4,000		200		4,000	**,***	2,000	2000			11,100				4,000							1,000
	ir permissors nave been granted, Nebraska Medicaid requests																						
	Information from trusted data sources																						
	90 days prior to the renewal due date																						
	through an automated request															No.	lovember and		December 2023.				
6. Month in which renewals due in the reporting month were initiated	process. 60 days prior to the renewal N	/A March and April 2023	N/A March, April, a	nd May	/A April, May, and June	N/A N/A	tay, June, and July	N/A June, July, a	d August N.	A July, August, and	N/2	August, September, N.O.	September, October,	N.O.	October, November,		ber 2023, and		ary and February	N/A	January, February, and	February, March, and	March, April, and Mar
	date, an eligibility worker will attempt		-	2023	2023		2022	-	2023	September 2027		and October 2022	and November 2023	1	and December 2022		January 2024		2024		March 2024	April 2024	202
	to complete the renewal based on																						
	Information available. If additional																						
	Information is needed, a pre-populated																						
	renewal form is sent, providing 30 days	1	1	1	1				1	1	1	1	1										
	for the beneficiary to return the form			_						1		l	1							\longrightarrow			
		2,598		1,332 N/	A 11,882	N/A	19,646	N/4	25.093 N/A	30.929		35.964 N/A	42,781	M/A	43.772	N/A	38.233	N/A	29.489		40,129	36,168	30,677
7. Number of beneficiaries due for a renewal since the beginning of the state's unwinding																							
period whose renewal has not yet been completed		2,598	N/A	1,242 NJ	. 22,882	njn.	20,010	N/A	23,000 10/2	80,829	N/A	22,000	42,781	alia.	40,772	N/A	10,211	N/A	21/127	N/A	40,129		
period whose renewal has not vet been completed MEDICALD FAIR HEARINGS		2,568	N/A	1,112 N)	,,,,,	njn.	19,010	N/A	2,000	2,27	njn	22,000	4,41		4072	N/A	16,211	N/A	30,037	N/A	40,129	3,4.0	
period whose renewal has not yet been completed		200	N/A	4 5	/A 2	N/A	2	N/A	1 N	3	N/A	2 N/A	2	N/A	2	N/A	2	N/A	3,433	N/A	40,129	6	6

To grain and the final file having parties (and the ha