Baseline Medicaid Continuous Coverage Unwinding Report for North Carolina as of April 1, 2023

APPLICATION PROCESSING	NUMBER	ADDITIONAL INFORMATION
1) Total pending Medicaid applications received between March 1, 2020 and March 31, 2023.	44,774	An application is considered "Pending" if a final determination of eligibility has not yet been made.
a) Pending MAGI and other non- disability applications	27,079	MAGI = Modified Adjusted Gross Income. This methodology is used to determine eligibility for most Family & Children's Medicaid programs. Non-disability applications would include any Medicaid program other than Medicaid for the Disabled.
b) Pending disability-related applications	17,695	Disability-related applications are for applicants who are disabled or attest to having a disability.
MEDICAID ENROLLMENT	NUMBER	ADDITIONAL INFORMATION
2) Total beneficiaries enrolled as of April 1, 2023.	2,900,485	This number includes all individuals enrolled in Medicaid,
		regardless if the benefit is full coverage or limited coverage (e.g., Family Planning Program). This number excludes individuals who were given a Reasonable Opportunity Period (ROP).
		Family Planning Program). This number excludes individuals who

		The person applying for Medicaid can get Medicaid while they gather the needed documents. The ROP may be used only once in a lifetime.
STATE'S TIMELINE FOR THE RENEWAL PROCESS	90 days	Medicaid renewals (recertifications) begin approximately 90 days prior to the end date of a beneficiary's certification period. Certification periods are the exact dates of a beneficiary's eligibility and typically last 6 - 12 months (e.g., July 1, 2022 - June 30, 2023).
MEDICAID FAIR HEARINGS	NUMBER	ADDITIONAL INFORMATION
 Total number of Medicaid fair hearings pending more than 90 days as of April 1, 2023. 	1	A Medicaid fair hearing occurs when a person appeals, or challenges, a decision related to their Medicaid eligibility. For example, when someone applies for Medicaid and is determined ineligible but disagrees with this decision, they may ask for a fair hearing.

PRA Disclosure Statement

The Centers for Medicare & Medicaid Services (CMS) is collecting this mandatory report under the authority in sections 1902(a)(4)(A), 1902(a)(6) and 1902(a)(75) of the Social Security Act (the Act), 42 CFR § 431.16 to ensure proper and efficient administration of the Medicaid program and section 2101(a) of the Act to promote the administration of the Children's Health Insurance Program (CHIP) in an effective and efficient manner. This reported information will be used to assess the state's plans for processing renewals when states begin restoring routine Medicaid and CHIP operations after the COVID-19 public health emergency ends. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148 (CMS-10398 #66). The time required to complete this information collection is estimated to average 17 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.