

Summary of Redetermination Data for January 2024

- Total participants up for renewal with a January 31 coverage end date¹: 127,824
- Total participants auto-renewed in Maryland Health Connection: 73,457 (63.9%)
- Individuals who no longer qualify for Medicaid through Maryland Health Connection may qualify for coverage through a qualified health plan or Medicare.

	MAGI (Qualify for services on the basis of modified adjusted gross income through Maryland Health Connection)	Non-MAGI (Aged, blind, or disabled, or enrolled in a Home and Community-Based Services program).	Total (MAGI + non-MAGI)
Participants with coverage extended manually (not auto-renewed)	9,640	3,406	13,046
Participants auto-renewed with coverage extended	73,457	1,019	74,476
TOTAL COVERAGE EXTENSIONS	83,097	4,425	87,522
Participants disenrolled because they are no longer eligible for coverage	3,338	2,140	5,478
Participants disenrolled due to failure to submit application timely or renewal was incomplete ²	25,529	2,807	28,336
TOTAL DISENROLLMENTS	28,867	4,947	33,814
PENDING REVIEW ³	2,943	3,545	6,488
GRAND TOTAL (COVERAGE EXTENSIONS + PENDING APPLICATIONS + DISENROLLMENTS)	114,907	12,917	127,824

¹ Participants may report changes to the system, e.g., birth of a child, increases in income due to a new job, at any time during the year. Additional participants may have had their coverage extended due to reporting of a change. Disenrollment rates also reflect participants appropriately disenrolled from coverage due to reporting a change because they are no longer eligible for Medicaid coverage.

² Maryland resumed procedural terminations of Medicaid participants in November in accordance with <u>CMS guidance</u>. For MAGI populations, procedural terminations that were scheduled for the months of August and September were processed in November 2023. Procedural terminations that were scheduled for October were processed in December. For non-MAGI populations, procedural terminations resumed in December.

³ Pending review cases may differ here than in other publicly released data sets due to differences in measure specifications from CMS and timing of data generation.