

Eligibility Processing Reports

Utah Monthly Eligibility Processing Report (February 2026)

Information

Print

Start Date: **February 2026**

Submission Date: **03/09/2026**

Original Last saved date and time: **Thursday, 03-05-2026 - 15:16**

Submitted by: **mljones@utah.gov**

Submitted status: **Yes**

APPLICATION PROCESSING

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

Unable to report **No**

1a. Total MAGI and other non-disability applications **{Empty}**

Unable to report

No

1b. Total disability-related applications

{Empty}

Unable to report

No

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

{Empty}

Unable to report

No

2a. Completed MAGI and other non-disability related applications as of the last day of the reporting period

{Empty}

Unable to report

No

2b. Completed disability-related applications as of the last day of the reporting period

{Empty}

Unable to report

No

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

{Empty}

Unable to report

No

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

Unable to report

No

3b. Pending disability-related applications as of the last day of the reporting period **{Empty}**

Unable to report

No

Metric 3 Notes

{Empty}

RENEWALS INITIATED

4. Total beneficiaries for whom a renewal was initiated in the reporting period **25386**

Metric 4 Notes

{Empty}

RENEWALS AND OUTCOMES

5. Total beneficiaries due for renewal in the reporting period **30644**

Metric 5 Notes

{Empty}

5a. Of the beneficiaries included in Metric 5, the number renewed and retained in Medicaid or CHIP (those who remained enrolled)	16666
--	--------------

5a(1). Number of beneficiaries renewed on an ex parte basis	11233
---	--------------

5a(2). Number of beneficiaries renewed using a renewal form	5433
---	-------------

Metric 5a Notes

{Empty}

5b. Of the beneficiaries included in Metric 5, the number determined ineligible for Medicaid or CHIP	906
--	------------

Metric 5b Notes

Although 906 unique individuals were closed, only 511 were sent to the marketplace. This number includes individuals who have passed away, moved out of state, or requested closure; these closure reasons would not result in a transfer to the marketplace.

5c. Of the beneficiaries included in Metric 5, the number terminated for procedural reasons (i.e. failure to respond)	7517
---	-------------

Metric 5c Notes

{Empty}

5d. Of the beneficiaries included in Metric 5, the number whose renewal was not completed	5555
---	-------------

Metric 5d Notes

{Empty}

6. Month in which renewals due in the reporting month were initiated	2025-12
--	----------------

Metric 6 Notes

{Empty}

7. Number of beneficiaries due for a renewal whose renewal has not yet been completed

5659

Metric 7 Notes

{Empty}

MEDICAID FAIR HEARINGS

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

0

Metric 8 Notes

{Empty}
