

Eligibility Processing Reports

# Utah Monthly Eligibility Processing Report (June 2025)

## Information

Print

Start Date: **June 2025**

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Submission Date: **07/08/2025**

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Original Last saved date and time: **Tuesday, 07-08-2025 - 11:34**

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

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Submitted status: **Yes**

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### UPDATED RENEWALS AND OUTCOMES

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Update Date	10/07/2025
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As of Date	09/30/2025
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The as of date reflects the state's updated renewal data and is correct as entered.	Yes
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5. (Updated) Total beneficiaries due for renewal in the reporting period	26385
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**Metric 5 (Updated) Notes**

{Empty}

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5a. (Updated) Of the beneficiaries included in Metric 5, the number renewed and re-tained in Medicaid or CHIP (those who remained enrolled)	18104
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5a(1). (Updated) Number of beneficiaries renewed on an ex parte basis	10762
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5a(2). (Updated) Number of beneficiaries renewed using a renewal form	7342
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**Metric 5a (Updated) Notes**

{Empty}

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5b. (Updated) Of the beneficiaries included in Metric 5, the number determined ineligi- ble for Medicaid or CHIP	1198
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**Metric 5b (Updated) Notes**

{Empty}

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5c. (Updated) Of the beneficiaries included in Metric 5, the number terminated for pro- cedural reasons (i.e. failure to respond)	7083
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**Metric 5c (Updated) Notes**

{Empty}

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5d. (Updated) Of the beneficiaries included in Metric 5, the number whose renewal was not completed	0
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**Metric 5d (Updated) Notes**

{Empty}

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

## RENEWALS INITIATED

4. Total beneficiaries for whom a renewal was initiated in the reporting period	25706
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**Metric 4 Notes**

{Empty}

## RENEWALS AND OUTCOMES

5. Total beneficiaries due for renewal in the reporting period	26385
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### 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)	15474
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5a(1). Number of beneficiaries renewed on an ex parte basis	10762
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5a(2). Number of beneficiaries renewed using a renewal form	4712
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### Metric 5a Notes

{Empty}

5b. Of the beneficiaries included in Metric 5, the number determined ineligible for Medicaid or CHIP	789
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### Metric 5b Notes

Although 789 unique individuals were closed, only 430 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)	6351
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### Metric 5c Notes

{Empty}

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5d. Of the beneficiaries included in Metric 5, the number whose renewal was not completed	<b>3771</b>
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**Metric 5d Notes**

{Empty}

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6. Month in which renewals due in the reporting month were initiated	<b>2025-04</b>
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**Metric 6 Notes**

{Empty}

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7. Number of beneficiaries due for a renewal whose renewal has not yet been completed	<b>3863</b>
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**Metric 7 Notes**

{Empty}

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**MEDICAID FAIR HEARINGS**

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8. Total number of Medicaid fair hearings pending more than 90 days at the end of the reporting period	<b>0</b>
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**Metric 8 Notes**

{Empty}

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