

BASELINE REPORT		
California SUBMISSION DATE: 03/20/2023 UNWINDING PERIOD START DATE: 03/2023		
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)	220,999	
1a. Pending MAGI and other non-disability applications	203,479	
1b. Pending disability-related applications	17,520	
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	13,788,448	The total renewals (by individual-level) and as reported in the "CMS State Report on Plans for Prioritizing and Distribution Renewals" only includes Medicaid and CHIP counts (by individual-level) that is case managed at the state-level. Please note California's has updated this report measure by excluding the following populations: SSI Population: 1,545,735 PE Population: 447,211 State Funded Population: 390,294
STATE'S POLICY FOR COMPLETING RENEWALS	DESCRIPTION OF STATE'S RENEWAL TIMELINE POLICY	
3. State's timeline for the renewal process	California's timeline for the renewal process can be found in the DHCS Medi-Cal COVID-19 PHE Operational Unwinding Plan; August 22, 2022; page 37; Appendix A: Eligibility Sequencing Map	https://www.dhcs.ca.gov/Documents/PHE-UOP/Medi-Cal-COVID-19-PHE-Unwinding-Plan.pdf
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	California update (5/31/2023): This original reported number of 113 includes Scope of Benefit cases that are unrelated to Medicaid eligibility. California has corrected this data metric to reflect eligibility-related cases only that are beyond the 90-day period. Only 2 of the 32 cases reported are late, the remainder have time waivers due to claimant postponements, continued hearings or open record periods.

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 8 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.