

## South Dakota Medicaid Unwinding: April 2023

### Summary

Medicaid enrollment has increased 32% since March 2020 when the continuous coverage requirement of the Public Health Emergency (PHE) was instituted by CMS. DSS began the process of unwinding from the continuous coverage requirement in February and is following the recommendation of CMS to review no more than 1/9 of its monthly caseload during this initial month of unwinding.

### Unwinding Data as of April 1, 2023

The following table reflects information regarding renewals initiated in **February 2023** and whose determinations took effect on April 1, 2023:

Metric	Recipients	% of Total Enrolled
<b>Total Medicaid/CHIP enrolled in March 2023</b>	157,334*	100%
<b>Medicaid/CHIP recipients disenrolled on April 1, 2023</b>	16,078	10%
Recipients disenrolled who went through the renewal process	8,002 <sup>Ⓞ</sup>	5%
Recipients disenrolled who were only eligible due to receipt of another benefit they no longer receive ( <i>i.e.</i> SSI recipients, children formerly in CPS custody, <i>e.g.</i> )	2,772	2%
Recipients disenrolled outside of a renewal period for other reasons ( <i>i.e.</i> timeframe for category expired, death, moves out of state, requests for closure, exceeds income limit, ineligible for any other category, <i>e.g.</i> )	5,304	3%
<b>Unwind into Expansion</b>		
Disenrolled recipients who, based on information gathered during renewal process, appear will be eligible for expansion	1,747	

\*Data does not reflect new enrollments in April. These will become available in May 2023.

<sup>Ⓞ</sup> 5,264 became disenrolled due to lack of response to mailings from DSS.

### Medicaid Expansion

If Medicaid expansion had been available at this time, approximately 11% of the disenrolled population would have been able to transition to that coverage group. DSS is notifying the 11% who are likely eligible for expansion and sharing information about the availability of Medicaid Expansion in July 2023.

### Historical Context

Approximately 6,000 people per month were disenrolled from Medicaid before the PHE took effect (“churn”). The continuous coverage created a backlog of individuals who would have traditionally cycled off the program. These situations are particularly reflected in the 2,772. Examples from this subcategory include women previously receiving breast and cervical cancer coverage who no longer require treatment and individuals previously receiving Supplemental Security Income (SSI) who are no longer receiving this benefit.

There has also been a significantly higher non-response rate from Medicaid recipients. Prior to COVID, the program typically experienced 30% -35% non-response rates. In the first month of unwinding, that rate is roughly 65%. It is DSS’s observation that this phenomenon can be attributed, at least in part, to the fact that DSS front-loaded this first wave of renewals with households prioritized for review due to non-responses in previous attempts to correspond.