<table>
<thead>
<tr>
<th>State</th>
<th>Processing Ex Parte Renewals</th>
<th>Percentage of Renewals Conducted Using Ex Parte Processes:</th>
<th>Sending Pre-Populated Renewal Forms if Unable to Process Ex Parte</th>
<th>Method for Conducting Renewals</th>
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<td>&lt;25% 25%-50% 50%-75% &gt;75%</td>
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</table>

SOURCE: Based on a national survey conducted by KFF with the Georgetown University Center for Children and Families, 2023; table presents rules in effect as of January 1, 2023.
Table 13 Notes

Under the Affordable Care Act (ACA), states must seek to re-determine eligibility at renewal using electronic data matches with reliable sources of data prior to requiring enrollees to complete a renewal form or submit documentation. This process is technically called *ex parte* but is often referred to as administrative renewal. Although *ex parte* renewals are also known as automated renewals, not all state systems are programmed to process *ex parte* renewals without worker action. Any process that allows renewal of coverage without the individual completing a form or providing documentation, including express lane eligibility and using SNAP information to verify Medicaid eligibility, are included as types of *ex parte* renewals. States were encouraged, but not required, to continue processing *ex parte* renewals while the continuous enrollment provision was in place.

Under the ACA, when a state is unable to process an automated renewal, it is expected to send the enrollee a renewal notice or form pre-populated with data on file. Although states may be conducting *ex parte* renewals while the continuous enrollment provision has been in effect, some have chosen not to follow-up with a renewal form if the renewal cannot be completed via *ex parte*. *Ex parte* renewals may be conducted automatically through the eligibility system or require manual process, or are conducted through a mix of manual and automated actions.

NR indicates the state did not report or was not able to provide the share of ex parte renewals.