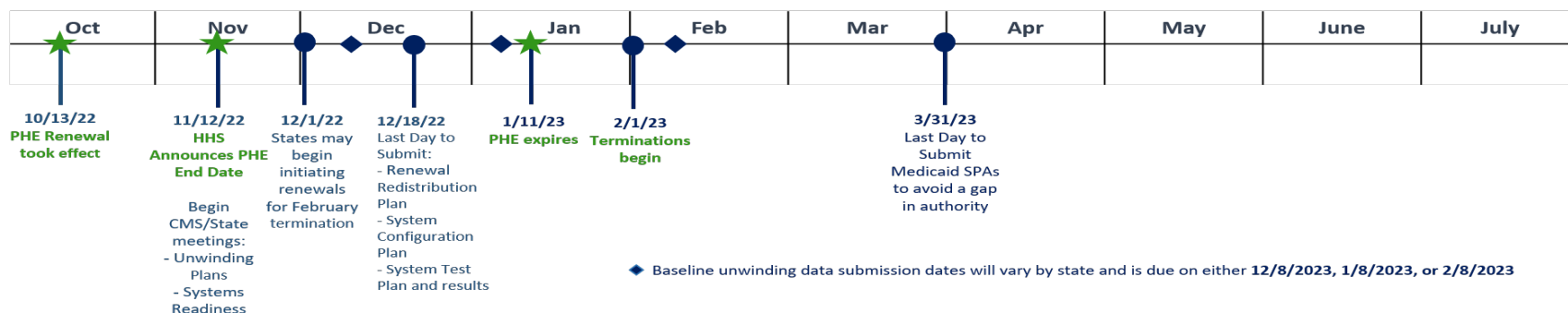


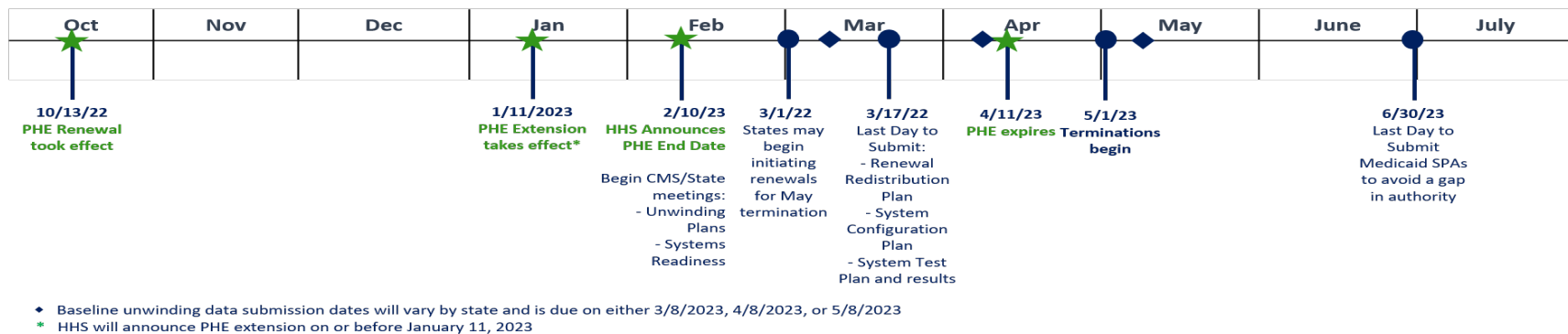
The Road to Unwinding: Key Dates and Activities for States (For Illustrative Purposes Only)

When the COVID-19 Public Health Emergency (PHE) and the Families First Coronavirus Response Act (FFCRA) continuous enrollment condition end, states must return to normal eligibility and enrollment operations. States will have up to 12 months to initiate a full renewal for all individuals enrolled in Medicaid, the Children’s Health Insurance Program (CHIP), and the Basic Health Program (BHP). Once the announcement that the PHE will end occurs, it will trigger the submission of required reporting and other documents to CMS. Below are two examples of timelines that outline the administrative actions states will need to take when the end of the PHE is announced.¹

Example #1: PHE ends on January 11, 2023



Example #2: PHE ends on April 11, 2023



¹ This document does not announce any new policies or guidance, or confirm the actual end of the PHE, but intends to reiterate actions states will need to take when the end of the PHE is announced. Please note that, with the exception of State Plan Amendments, where a submission due date falls on a weekend or holiday, states may submit the required document(s) (e.g. unwinding data, system testing plan, or renewal redistribution plan) on the following business day.

When the 60-day notice of the PHE end date is announced, States will need to:

- **Meet with CMS immediately after the 60-day notice.**
 - CMCS will contact State Medicaid Directors to schedule a meeting to discuss states’ final unwinding plans and states remaining questions
 - CMCS will contact your state’s Systems Lead to schedule a meeting to discuss systems readiness, testing, and any planned mitigations after the 60-day notice, with meetings to begin as soon as possible

- **Submit the following documents Please note that, with the exception of State Plan Amendments, where a submission due date falls on a weekend or holiday, states may submit the required document(s) (e.g. unwinding data, system testing plan, or renewal redistribution plan) on the following business day.**
 - **System Readiness artifacts** (Configuration plan, testing plan and test results) are due no later than two weeks before initiation of renewals or 45 days before the end of the month in which the PHE ends, whichever date is sooner, depending on when the state begins renewals
 - **Baseline Unwinding Data** is due the 8th of the month in which a state begins renewals
 - **Renewal Redistribution Plan** is due no later than 45 days before the end of the month in which the PHE ends (approximately one month after the 60-day notice)
 - **Medicaid State Plan Amendments (SPA)²** must be submitted by the end of the quarter in which the PHE ends to avoid a gap in authority for any disaster relief provisions the state intends to extend (temporarily or indefinitely) effective from the last day of the PHE
 - **CHIP SPAs seeking to extend particular authorities** must be submitted by the end of the state fiscal year

Submission	Example 1: If PHE ends on January 11, 2023, submit by:	Example 2: If PHE ends on April 11, 2023, submit by:
Systems Readiness artifacts (testing and configuration plans)	Varies depending on when state begins renewals (As early as November 17, 2022, but no later than December 18, 2022)	Varies depending on when state begins renewals (As early as February 15, 2023, but no later than March 17, 2023)
Baseline Unwinding Data	Varies depending on when state begins renewals (December 8, 2022, January 8, 2023, or February 8, 2023)	Varies depending on when state begins renewals (March 8, 2023, April 8, 2023, or May 8, 2023)
Renewal Redistribution Plan	December 18, 2022	March 17, 2023
Medicaid SPAs	March 31, 2023	June 30, 2023
CHIP SPAs	By the end of the state fiscal year	By the end of the state fiscal year

For additional information, states are encouraged to review guidance and other information posted to the [Medicaid.gov/Unwinding](https://www.Medicaid.gov/Unwinding) page. States may also submit questions directly to CMSUnwindingSupport@cms.hhs.gov.

² SPAs requiring an 1135 Waiver must be submitted before the end of the PHE