



## **Churn Toolkit: Gathering Data to Make a Case for Change**

### **What is the Scope of the Problem?**

We understand churn to be a significant burden on families and states, but it can be hard to identify the magnitude of the problem. States may not proactively report data that would help us to evaluate how much churn is happening, so a first step in many states might be reaching out to your Medicaid and CHIP program(s) to ask for information.

### **Data to Help Us Understand What's Happening**

To the extent they are available, these data points will help us to ascertain the scope of churn in a given state and understand some of the nuanced factors contributing to churn. Identifying these root causes will enable us to choose targeted policy solutions that address these issues and reduce the incidence of churn.

Depending on the question and what data is available to you, either numbers of individuals or percentages may be helpful. Your state's Medicaid agency might not collect data relevant to all questions; for additional suggested sources, please see [“Potential Resources in Your State,”](#) another document in [this toolkit](#).

- How many children leave Medicaid in a given year?
  - How many of those children leave Medicaid because of eligibility changes?
  - How many of those children leave Medicaid because of administrative problems with their renewal paperwork (i.e., a renewal is submitted but is deemed incomplete or unsatisfactory)?
  - How many of those children are still eligible but no renewal is submitted for them?
    - How many of these children have changed addresses at least once since their enrollment or last renewal? (How many have notified the state of a change of address? How many have renewed their coverage and listed an address different from the one on file?)
- When children leave Medicaid coverage, what happens to their coverage?
  - How many shift immediately into another source of coverage (employer-sponsored insurance, Marketplace plan, separate CHIP program, other)?
  - How many become uninsured?
- How many children enroll in Medicaid in a given year who have been enrolled in Medicaid previously?
  - How many have experienced a gap in coverage?
  - For those children who experience a gap in coverage, how long are these gaps (mean, median, minimum, maximum)?
    - Do these gap calculations include retroactive coverage? (Counting retroactive coverage would reduce the apparent length of gaps in coverage.)
- Who are the children who churn in and out of Medicaid coverage?
  - Are there specific ages at which more children experience churn?

- Where on the income spectrum is churn happening (e.g., among families at the top of the eligibility range, among the lowest income families, etc.)
- Where is churn happening (geographically)? Are there cities or neighborhoods where it is particularly frequent?
- What data is available on the primary language of children who experience churn?
- Do these children have siblings? Are the siblings also Medicaid eligible?

### **Qualitative Questions for State Officials**

Some nuances of this issue may be easier to address through conversations with state officials, families, or advocates who can talk about their impressions of retention stumbling blocks. Moreover, these conversations might provide additional context in which to evaluate data you collect or point toward policies that would reduce churn or mitigate its effects.

- What issues do you hear from families attempting to renew/recertify their children's Medicaid eligibility?
  - Are their documents or data they have trouble supplying?
  - Do they have trouble understanding the requirements?
  - How long does the process take? Do families express concerns that the process is onerous for them?
  - Do families report missing or not receiving renewal notices or other communications?
- How do you communicate with families?
  - Are notices and other communications sent by email, U.S. mail, other means?
  - What is the reading level of written notices? (If possible, it would be best to have these documents evaluated by an authority who can verify the reading level.)
  - What languages are notices available in? Can a family express a preference to receive notices in a language other than English?
  - What languages are forms available in (for families to complete)?
- When a child reapplies for Medicaid after having left the program, what is typically the event that triggers the process? For example, does the family go to the hospital and find out the child's coverage has lapsed; has the parent been working consistently to complete a renewal but missed the deadline; etc.?
- When a child reenrolls after having left Medicaid, does the child get reassigned to the same primary care physician they saw previously? (If the family has not moved, reassignment to a new doctor could potential disrupt continuity of care.)
- What approaches do we currently have in place to reduce or minimize churn?
- From your perspective, what challenges does your agency face in retaining eligible children in Medicaid?
  - Do you have trouble locating individuals to send notices or forms?
  - Do you have enough staff to complete all the work required of you? Do staff members have appropriate training and skills to function in their roles?
  - Are there technology issues that could impede the recertification process?

This document is part of a toolkit on churn. Visit [this page](#) for more information and resources.

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