Section II: Program's Strategic Objectives and Performance Goals

4. Please attach any additional studies, analyses or other documents addressing outreach, enrollment, access, quality, utilization, costs, satisfaction, or other aspects of your SCHIP program's performance. Please list attachments here and summarize findings or list main findings.

In SFY 2006, the EQRO conducted four special surveys and the Texas STAR Program and CHIP in Texas Renewal/ Non-Renewal Survey Report was produced as a result of those surveys. A random sample of families whose children did and did not renew coverage in STAR or CHIP was selected for the study. The EQRO used the monthly CHIP enrollment files for the CHIP samples. The CHIP samples were stratified to include representation from the 10 service delivery areas (SDAs).

Renewing enrollees were only selected for the sample if they met all of the following criteria:
1) Individuals were enrolled for at least six months in the previous year;
2) Their renewal cut-off date fell in either the month of January or February 2006;
3) For CHIP members, there was a "renewal flag" indicating that enrollment packets were sent to them;
4) Individuals were enrolled in the months following the January/February cut-off date; and
5) The subsequent month's enrollment file indicates the start of a new enrollment period for them.

Non-renewing enrollees were only selected for the sample if they met all of the following criteria:
1) Individuals were enrolled for at least six months in the previous year;
2) Their renewal cut-off date fell in either the month of January or February 2006;
3) For CHIP members, there was a "renewal flag" indicating that enrollment packets were sent to them;
4) Individuals were disenrolled in the months following the January/February cut-off date; and
5) For the CHIP population, the reason for disenrollment was either "failure to re-enroll at the conclusion of the six month eligibility period" or "renewal complete – child no longer CHIP eligible." Disenrollment caused by "aging out" and other reasons were not considered.

For CHIP, a target was set of 1,000 completed telephone surveys; 500 completed surveys for those who did renew enrollment and 500 completed surveys for those who did not complete the renewal process. There were 1,000 completed surveys for CHIP respondents. The renewal and non-renewal surveys are comprised of many different types of questions and the confidence interval information provided is based on selected items with uniformly distributed responses. The confidence interval for CHIP enrollee

responses is ±1.77 percentage points for those who renewed coverage and ±1.74 percentage points for those who did not renew coverage.

There are some specific findings which appeared to have an impact on the renewal process. These include findings that had a positive impact on the renewal process as well as those that had a negative impact on the renewal process.

There was a statistically significant difference between the percentage of single parent households renewing versus not renewing coverage in CHIP (35 percent and 28 percent, respectively).

The primary language spoken in the home was also a factor in the renewal process. In CHIP, 25 percent of those renewing coverage and 30 percent of those not renewing coverage spoke Spanish in the home. The differences were statistically significant for the CHIP population.

Parental education was a factor related to renewal, but only for families whose children were in CHIP. Among CHIP respondents, 23 percent of those renewing coverage had less than a high school education compared to 31 percent of those who did not renew; this was statistically significant.

The majority of respondents (over 75 percent for each category) stated the renewal packet instructions were "helpful" to "very helpful." There were differences in perceptions about the helpfulness of the renewal instructions based on whether or not the families renewed their children's coverage. For CHIP, 20 percent of those whose child did not renew reported instructions were only "somewhat helpful" or "not helpful at all," compared to eight percent of those whose children did renew coverage.

Over 90 percent of respondents in all four categories (STAR Program renewers and non-renewers and CHIP renewers and non-renewers) found the renewal materials easy to understand.

Eighty-five percent of those who had children in CHIP, but did not renew coverage recalled receiving a renewal packet.

The majority of respondents in both programs submitted a renewal packet if one had been received (89 percent in CHIP). However, these percentages are of those who reported receiving a renewal packet. When examining the entire population of those whose coverage was not renewed, only 76 percent of those whose children were in CHIP returned renewal packages.

A substantial percentage of respondents who submitted renewal packets but did not renew coverage for their child were told they had missing information in their renewal packet. For CHIP respondents, 60 percent of those who did not renew coverage for their children were informed of missing information.

Of the respondents who were told they had missing information, the majority reported they provided the missing information. Eighty-nine percent of CHIP respondents who did not renew coverage reported providing the missing information.

There are also some specific findings which do not appear to have had an impact on the renewal process. These findings are included to provide additional information to the Texas HHSC about the renewing and non-renewing CHIP and STAR populations.

The majority of respondents to the four surveys were Hispanic (CHIP renewal, 60 percent Hispanic; CHIP non-renewal, 61 percent Hispanic; STAR renewal, 63 percent Hispanic;

and STAR non-renewal, 62 percent Hispanic). No statistically significant differences were found between those renewing coverage and those not renewing coverage based on race and ethnicity for either program.

Few respondents whose child's coverage had not been renewed were able to secure additional insurance coverage for their child. Twenty-four percent of those who had been in Medicaid and 28 percent of those who had been in CHIP had health insurance coverage at the time of the interview.