

Churn, Churn, Churn

Strategies to Boost Member Retention

Children's Health Insurance Summit

November 2, 2011



Who We Are

- Incorporated as an HMO in 1994
- Medicaid plan serving over 91,000 members
- Largest Medicaid Managed Care Health Plan in Rhode Island (66%)
- Rated Excellent by NCQA since 2001
- Ranked among the top 10 Medicaid Health Plans by *U.S. News/NCQA* since rankings began (2004)
- Nearly 800 PCPs; Over 2,500 Specialists

Medicaid in Rhode Island

- Rite Care = CHIP + Medicaid
- 2 health plans- NHPRI & UHC
- Cumbersome application process (12 pages)
- Paper, no automation
- FRCs (Family Resource Counselors) = out-stationed eligibility workers in community; assist with > 30% of applications
- 12-month recertification; pre-populated renewal forms.
- Lack of ex parte process

Churn's Impact on Quality of Care

“Do Gaps in Children’s Health Coverage Make a Difference?”

Children with intermittent health insurance:

- ✓ Have less access to care and face more barriers and experience more unmet health care needs.
- ✓ Their parents are more likely not to have health insurance, have changed jobs, moved, not to have a phone and unable to pay rent.
- ✓ Children with gaps in coverage are more likely to be minority race (especially Hispanic).
- ✓ Less likely to have a usual place of care but get the same average number of primary care visits.

RI Department of Human Services (2005)

Why Members Churn:

Multiple Issues

Poor Communication:

- Members did not know they had to recertify.
- They did not receive recertification mail due to bad addresses.
- They did not understand notifications because of form legalese/complexity.
- Language barriers and literacy issues.
- Complicated reapplication process.

Systemic Issues:

- Members no longer eligible for cash benefits - unaware of continued eligibility for RIte Care.
- Cannot afford premiums – highest in the country for 1 child.

Fear:

- Noncompliance with child support enforcement.
- Documentation requirements.

Neighborhood Survey Data, 2000 & 2007

Neighborhood Churn

- In the last 12 months, over 32,000 members re-enrolled after having a break in coverage (43% of members).
- Of these members, **6 of 10** re-enrolled within 90 days.
- We believe this group was programmatically eligible, despite losing coverage
- Significant improvement over the past few years

Health Plans commitment Renewal

- NHPRI has been working on strategies to improve the member renewal process for a decade
- Barriers
 - Marketing Rules
 - No role in enrollment process
 - Health plan can't provide renewal assistance in RI
 - Up to date contact information
- Members respond to gaps in coverage
 - Hundreds of call every month
 - Receive a termination letter from both DHS and Health Plan
 - Pharmacy represents major point of service disruption when member churns off plan

Partnering with DHS and Advocates to Drive Change

★ RItE Care Consumer Advisory Committee = 17 years strong.

Achievements Over Time:

- ✓ Simplified pre-populated RItE Care Renewal form.
- ✓ Health plan logos added to the DHS renewal envelope.
- ✓ DHS and Neighborhood piloted improving “Change of address” project with local offices. Fully implemented address change form process at each health plan.
- ✓ DHS provides health plans with a monthly list of members up for recertification **8 weeks & 3 weeks** before termination (lengthy process).

Small improvements seen with each change.

Community Collaboration

✓ Community and Health Plans work together:

– Collaboration with community agencies

1. Recognize common goals (continuity of coverage)

2. Recognizing common needs

1. Simplified renewal process

2. DATA = names of members due to renew and at-risk for losing coverage

3. Develop proactive interventions (health plans receive State data and have resources to do mailings/other interventions)

Community Collaboration (cont'd)

- ✓ Maximize/leverage ability to drive change using a powerful venue (RIte Care Consumer Advisory Committee meetings)
 - Community agency (collaborative partner) requested simplified renewal application
 - Community agency made the retention data request
- ✓ Strategy –Retention efforts can be cost effective
 - Saves administrative resources/lessens burden of application processing after coverage gaps

Neighborhood Interventions: Multiple Contacts

- Monthly postcards “Don’t Lose It” to all households due to renew (cut # of terminations by 50%, 2001).
- All member newsletters contain an ad to renew your RItE Care once a year.
- Provide site-specific recertification and termination lists to Family Resource Counselors for outreach to their patients.
- All Customer Service calls end with a reminder to renew RItE Care every year.
- Dedicated Customer Service Specialist calls members during the day who have not responded and are most at-risk to lose coverage in three weeks.
- Care Management reviews member termination lists to identify high risk members.

Interventions (continued)

- Five tips flyer - information distributed at outreach events, schools and healthcare facilities.
- Monthly automated outreach calls to members - reminder to renew your RItE Care this month.
 - TeleVox conducts evening calls to all households due to renew.
 - Successful contact rate increased from 48% to 77% (includes leaving a message).

Impact: TeleVox intervention results show those contacted are 11% more likely to remain on-Plan (2011 data).