**READINESS ASSESSMENT: KEY CONSIDERATIONS WHEN ADDRESSING MEDICAID CHURN**



 Purpose

This tool will help program staff identify the current challenges and inform action steps, with the goal of increasing agency readiness to address churn. Understanding readiness is critical to ensuring agency leaders and staff at all levels are willing and able to put new policies and practices in place for churn reduction efforts to succeed.

This readiness assessment is organized into two core components:

1. Leadership Awareness & Overall Motivation for Change

2. General Capacity & Resource Availability

Upon completion, your team will better understand current levels of willingness to address Medicaid churn within the agency and the capacity to do so. This includes knowing what resources are available to move proposed work from conceptualization to implementation. It is unlikely a state will have strong agreement or be fully ready to go in all areas, so don’t worry if there is a lot of opportunity for change to be made – this is exactly why you are completing this exercise. Once you understand the current landscape, there are steps your state can take to develop motivation and capacity for change which will be explored using additional tools in this kit.



 Instructions

This planning tool will be most useful for state or local office policy staff member(s) interested in addressing churn with support from team members working in policy development and implementation, eligibility and enrollment, and data and technology. If possible, we suggest consulting with individuals from across the agency who have relevant expertise, as well as involving external stakeholders who may be affected by potential changes including, but not limited to, representatives from Medicaid beneficiaries with lived experience of churn and community-based organizations (CBOs). Using the table below, discuss each statement with your team and then indicate where your stakeholders fall on the spectrum of strongly agree to strongly disagree. For each statement, use the notes column to document the rationale for the rating, and list any related strengths, barriers or concerns. All this information will be helpful for your team as you use the next sections of the toolkit to plan to address churn.

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| --- | --- |
| **State:** |       |
| **Completed By:** |       |
| **Date:** |       |

Readiness Assessment Table

Strongly Disagree

1

Disagree

2

Agree

3

Strongly Agree

4

|  |  |  |
| --- | --- | --- |
| Statement | Strongly Disagree-1, Disagree-2, Agree-3, Strongly Agree-4 | Notes on strengths, existing barriers, and action steps needed to increase readiness (if known) |
| **Leadership Awareness & Overall Motivation for Change** |
| Churn is often broadly defined as the process by which Medicaid enrollees cycle on and off Medicaid coverage, resulting in coverage disruption. A standard definition of churn should include the maximum duration of coverage loss/disruption that counts as a single episode of churn.**TIP** |
| 1. There is a common understanding of Medicaid churn and its impact within the Medicaid agency.
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| 1. There is interest and/or support from leadership within the state Medicaid agency in addressing Medicaid churn.
 |       |       |
| 1. There is an executive sponsor who can support efforts to reduce churn.
 |       |       |
| 1. There are mid-level managers with the capacity, interest & expertise to lead efforts to reduce churn.
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| 1. Addressing Medicaid churn aligns with current state and/or agency priorities.
 | If leadership’s support/interest for addressing Medicaid churn does not already exist, it may take several conversations to gain buy-in. As such, you may consider gathering evidence that can help make a strong case for supporting this work such as: **TIP*** 1. Disruptions in Medicaid coverage leads to gaps in access to and continuity of care resulting in poor health outcomes.
	2. Medicaid churn results in higher healthcare cost resulting from delayed access to health care services.
	3. Reducing Medicaid churn can reduce administrative costs. A 2015 analysis estimated the administrative cost of one-person disenrolling and reenrolling, to cost between $400 and $600.

For more information on the impact of Medicaid churn visit the “**Medicaid Churn Overview & FAQ**” document within the toolkit. |
|       |       |
| 1. There is interest and support from internal stakeholders (i.e., state and local office staff responsible for the development and implementation of policy, eligibility and enrollment processes, and data and technology systems) to implement new and/or advance existing efforts to reduce churn.
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| 1. There is interest and support from external stakeholders to implement new and/or advance existing efforts to reduce churn.
 | The right stakeholders, engaged at key times, can bring invaluable expertise and resources that can determine the success and sustainability of an initiative including, but not limited to, funding, data collection & analysis, and outreach & education. For more information on strategies to engage stakeholders in efforts to reduce Medicaid churn visit the “**Stakeholder Engagement Tool**” in the toolkit.**TIP** |
|       |       |
| 1. Current state policies exacerbate Medicaid churn.
 |       |       |
| 1. Current state or local practices/processes exacerbate Medicaid churn.
 | Before pursuing new strategies to reduce Medicaid churn, it is beneficial to understand current polices/processes that can advance or hinder efforts to reduce churn. If this information is unknown the Planning Worksheets within this toolkit can be used to document the current landscape and inform future work.**TIP** |
|       |       |
| **General Capacity & Resource Availability** |
| 1. There are opportunities /existing structures to engage with the external stakeholders needed to inform/support churn reduction activities.
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| 1. There is a standard understanding /process for measuring churn.
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| 1. Intentional strategies/initiatives aimed at reducing Medicaid churn currently exist within the agency.
 |       |       |
| 1. Processes to evaluate the efficacy of current strategies aimed at reducing Medicaid churn currently exist within the agency.
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| 1. There is a shared understanding of what data are needed to measure churn. (e.g. data sets, variables, etc.)
 |       |       |
| 1. Data are currently available, collected , tracked, and reported to measure the rate of churn.
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| 1. The available data can be disaggregated across demographics (e.g. race, gender, zip code, etc.) to identify the populations most impacted by churn.
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| 1. Data are available to measure the impact of churn on healthcare costs
 |       |       |
| 1. Data are available to measure the impact of churn on health cost outcomes/ healthcare utilization.
 | Understanding what the data says about the burden and impact of Medicaid churn is important for a successful initiative. Good data can be utilized to:1. Gain leadership buy-in
2. Identify populations with the highest need
3. Evaluate the success of current churn efforts to identify opportunities for improvement
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|       |      **TIP** |
| 1. There are sufficient resources (e.g. staff time, funding) to advance existing churn reduction efforts and/or implement new policies and practices?
 | Finding sufficient resources to launch this work can be a barrier; however, leveraging external stakeholders may provide opportunities to commence this work. For more information on strategies to engage external stakeholders in efforts to reduce Medicaid churn visit the Stakeholder Engagement Tool in the toolkit.**TIP** |
|       |       |



 Next Steps

Remember, a low (i.e., 1 – 2) readiness score on a statement does not mean you are not ready or able to address churn. You are already on the right track simply because your team is taking steps to identify possible issues and opportunities and using this toolkit will help you to establish and/or advance efforts to reduce Medicaid churn. You should use the information gathered above to:

* Inform conversations around area(s) of need
* Identify possible challenges to churn-focused work and opportunities to improve readiness
* Specify area(s) where existing churn-related work can be leveraged to improve success in other areas

Subsequent tools in this toolkit include resources to increase a state’s readiness for action plan development and implementation of churn reduction policies and processes. The tools can be used as standalone pieces or collectively.

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