

Improving Medicaid renewal outreach: Evidence from rapid-cycle testing in New Jersey

Executive summary

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Following the end of the COVID-19 Public Health Emergency, states resumed Medicaid eligibility redeterminations, raising concerns about coverage loss due to both eligibility changes and procedural barriers. In New Jersey, four community-based, nonprofits designated by statute as **Regional Health Hubs** (RHHs) and partners with the NJ Medicaid program (called NJ FamilyCare) were tasked with conducting outreach to households at risk of losing Medicaid coverage. These teams were also charged with testing and refining outreach protocols to reduce procedural disenrollment. Given the scale and month-to-month consistency of this outreach, the Camden Coalition and partner RHHs implemented rapid-cycle A/B testing to identify operational improvements that could increase outreach effectiveness. This analysis focuses specifically on whether sequencing a brief SMS message prior to phone outreach improves call success rates and downstream Medicaid renewal outcomes within an active, large-scale redetermination workflow.

An early evaluation by the Camden Coalition found that households with successful telephonic engagement experienced significantly lower relative risk of Medicaid termination than households that could not be reached despite outreach attempts. The analysis presented in this report builds on these findings by investigating the impact of sending a brief SMS message prior to a phone call. Because successful contact is a necessary precursor to renewal assistance, our primary analytic focus was on improvements in live phone contact, with Medicaid renewal assessed as a secondary outcome. Households on monthly Medicaid red lists across seven South Jersey counties were randomized to receive either a phone call alone or an SMS followed by a phone call. Outcomes were assessed using intent-to-treat and per-protocol approaches, with propensity matching used to maintain balance across key covariates.

Across analyses, households receiving an SMS prior to a phone call experienced higher rates of successful phone contact, particularly when the SMS was confirmed to be successfully delivered. In per-protocol analyses, successful phone contact increased by approximately two to three percentage points (from roughly 20% to 23%) compared to call-only outreach, a statistically significant and operationally meaningful improvement. When extrapolated annually, this increase corresponds to roughly 1,000 additional at-risk households successfully contacted within the Camden Coalition's data catchment area. Improvements in Medicaid renewal rates were modest and not statistically significant.

Additional analyses identified county-level variation in effects and highlighted SMS delivery failure as a key limiting factor. Approximately 23% of households assigned to receive an SMS experienced delivery failure, with higher failure rates among households with multiple phone numbers on file; this may serve as an indicator of outreach difficulty and elevated risk for coverage loss.

Overall, this analysis demonstrates that when delivery is successful, SMS is a low-cost, effective tool to enhance phone-based outreach. While the analysis does not explicitly provide evidence on SMS delivery's ultimate impact on renewal rates, incorporating SMS as a precursor to phone calls can meaningfully increase contact rates for Medicaid redetermination and other outreach-dependent initiatives. The road to renewal includes many steps, and at least in terms of outreach success, future efforts should focus on identifying and addressing contact information and phone number issues earlier in the process.

[Read the full report](#)

About the Camden Coalition

The Camden Coalition works to improve care for people with complex health and social needs in Camden, NJ, and across the country. The organization implements person-centered programs and pilots new models that address chronic illness and social barriers to health and well-being. Supported by a robust data infrastructure, cross-sector convening, and shared learning, its community-based programs improve outcomes for some of society's most vulnerable individuals. The Camden Coalition's National Center for Complex Health and Social Needs (National Center) connects complex care practitioners with each other and with data, tools, and other resources.



The National Center
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