Improving Access, Cutting Red Tape

By Elizabeth Lower-Basch

State Lessons from Work Support Strategies

Access to key benefit programs, like health insurance (Medicaid), nutrition assistance (the Supplemental Nutrition Assistance Program, or SNAP) and child care assistance (the Child Care and Development Block Grant, or CCDBG), reduces poverty,[1] supports stability and success at work,[2] helps people meet basic needs,[3] and improves low-income children's long-term health and economic well-being.[4] But despite the large and growing body of research demonstrating these successful outcomes, disadvantaged families frequently do not receive and keep the full package of benefits for which they are eligible. As many as a quarter of families eligible for both Medicaid and SNAP miss out on one or both. When capped programs such as child care or housing are considered, the participation rates are much lower.[5]

Recent evidence illustrates how several states achieved large-scale improvement in families' access to the full package of programs, using opportunities that exist today under Medicaid, SNAP, and the CCDBG. This evidence comes from a rich series of evaluation and technical assistance reports from the Work Support Strategies (WSS) initiative, a foundation-funded initiative led by the Center for Law and Social Policy (CLASP) and its national partners, the Center on Budget and Policy Priorities and the Urban Institute. The WSS provided funding, peer learning, and expert technical assistance from 2011 to 2016 to six diverse states (Colorado, Idaho, Illinois, North Carolina, Rhode Island, and South Carolina) to design, test, and implement more effective, streamlined, and integrated approaches to delivering key supports for low-income working families with two goals: ensuring that all families get and keep the full package of benefits for which they are eligible and reducing the burden of bureaucratic processes. Among the problems states targeted—which burdened both families and state workers—were overly complex policies and procedures, inadequate computer systems, and bureaucratic hassles such as confusing notices, long waits to meet with a caseworker, or duplicative verification requirements.

As Idaho Governor C.L. "Butch" Otter explains, "Idaho is committed to helping families find paths out of poverty and into the workforce. That means making smart investments in technology and integrating services not only to reduce the costs to taxpayers but more importantly to help people find the jobs they need to support themselves and their families.

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Key Publications from the Work Support Strategies Initiative

12 Lessons on Program Integration

Improving the Efficiency of Benefit Delivery

Changing Policies to Streamline Access to Medicaid, SNAP, and Child Care Assistance

Improving Business Processes for Delivery of Work Supports for Low-Income Families

Observations of Leaders Driving Change in State Government

Changes in Joint Medicaid/CHIP & SNAP Participation Rates, 2011–2013

More resources available at *http://www.clasp.org/wss*

This effort is aimed at increasing self-reliance and enabling success, not fostering entitlement and government dependence."

In reviewing the final evaluation, implementation, and technical assistance reports, we find five major lessons:

1. Significant improvements in key outcomes, including participation in the full package of benefits without loss of accuracy. Other accomplishments included much faster delivery of benefits (some states doubled and tripled same-day services) and in some cases, reduced "churn," or cycling on and off benefits.[6] Receiving benefits faster is crucial for families who frequently experienced hardships such as housing loss or food insecurity while waiting for a benefit determination.

Several of the WSS states set same-day service as a goal. In addition to the improved customer experience, states reported that this saved staff time and state resources by eliminating unnecessary interactions. For example, South Carolina Director of the Department of Health and Human

Services, Christian Soura explained that same-day service avoided the need to schedule and reschedule interview appointments.

States were able to make these major improvements while continuing to maintain program integrity. Some states had initially worried that attempts to speed benefit processing would result in increased errors, while others believed use of electronic verifications would reduce mistakes. The final evaluation report reviewed the data on SNAP error rates and concluded there was no consistent relationship between payment accuracy and improvements in timeliness.

2. Under the existing federal–state structure, states had the power to make the key policy changes[7] needed to achieve these outcomes. When they set out to integrate policy across programs and make service more family centered, state leaders were often surprised to learn that many problematic policies were the result of state choices, not federal requirements. As one state official discovered, "The more we study the steps in the application process, the more we learn that we have promulgated rules that are not mandated."
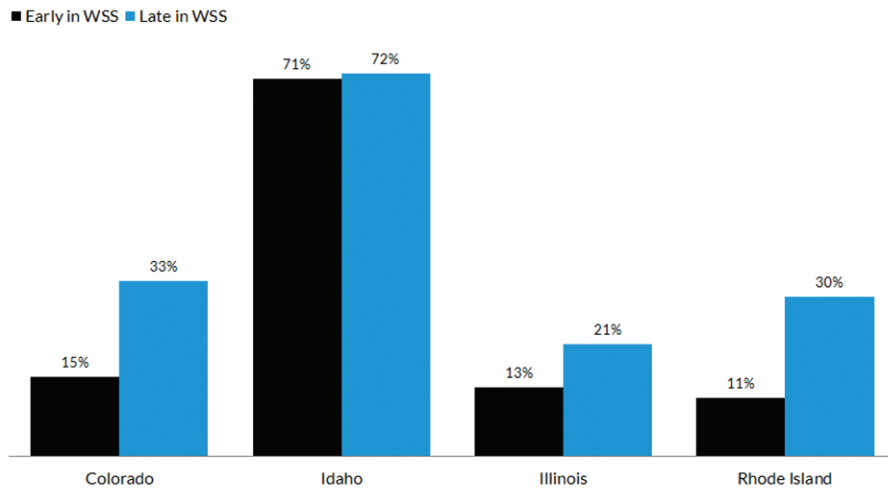
Many states learned that they were relying on paper verifications when electronic sources were available, or collecting verifications not needed by federal law. Every piece of paper a customer submits must be processed by a caseworker, so streamlining verification policies can both improve

"That means making smart investments in technology and integrating services not only to reduce the costs to taxpayers but more importantly to help people find the jobs they need to support themselves and their families."

C.L. "BUTCH" OTTER, IDAHO GOVERNOR

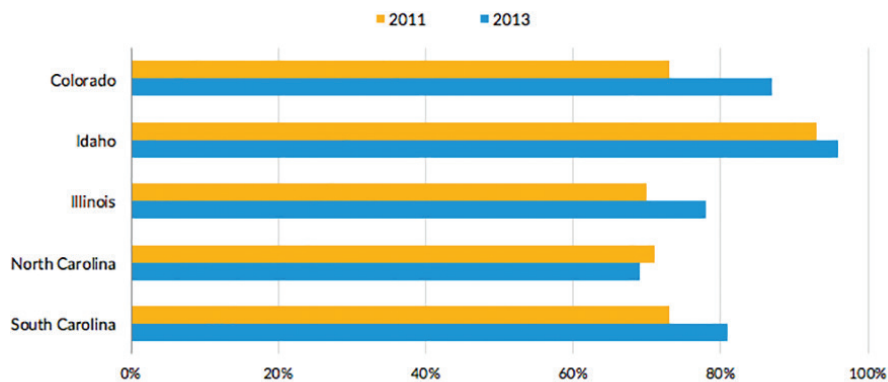## WSS States Saw Dramatic Increase in Same-Day SNAP Processing
Percent of SNAP applications processed same day in four states

■ Early in WSS   ■ Late in WSS

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SNAP and Medicaid/CHIP Joint Participation Rates for Individuals under Age 65

■ 2011   ■ 2013

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the customer experience and increase efficiency. For example, Rhode Island administrators learned their requirement for child care applicants to submit detailed work schedules caused major delays, especially for customers with fluctuating schedules. By eliminating this requirement, Rhode Island dramatically increased its timeliness in processing applications. In these cases, the primary federal role was simply to reassure states that, indeed, they had the authority to make the changes they desired.

In other cases, states took advantage of options or waivers allowed under federal law. One significant example is the opportunity to verify Medicaid eligibility using information customers already provided for SNAP. South Carolina used the express-lane eligibility option to maintain Medicaid health coverage for more than 140,000 children without the need for families to complete any Medicaid paperwork. Illinois used a waiver to enroll 40,000 nonelderly, nondisabled individuals in Medicaid based on SNAP receipt.

3. States needed a clear vision for where to go, as well as openness to learning the best ways to get there. Leaders across states widely cited the value of developing a concrete vision that catalyzed support among internal and external stakeholders and was specific enough to operationalize, yet broad enough to apply across agencies, programs, and priorities. For example, North Carolina's vision was that "families will tell their stories once and receive the services they need."

At the same time, states highlighted the importance of flexibility on the ways to achieve these goals. States committed to a culture of experimentation and use of data to provide feedback on what was working. As states listened to multiple stakeholders and identified problems, they piloted solutions at a small scale, allowing them to test their hypotheses. Sometimes this resulted in quick wins—and other times it allowed states to "fail quickly, and learn quickly." This nimbleness, commitment to taking risks, and humility to learn proved invaluable.

Data, a key part of this process, allow states to measure progress toward goals. However, participants highlighted the importance of defining the questions first and then building the data around those questions, rather than allowing the data to define the questions. Front-line staff and supervisors often needed training in order to become effective consumers of data, not just collectors. States also used caseworker perception or quick client surveys to assess their progress before formal evaluation data were available.

4. To achieve the goals, states had to change many aspects of their delivery systems at once—business process, technology, data, policy, leadership, and management structures. The WSS states upgraded their business processes, such as improving customer greetings and addressing workflow inefficiencies. Several states trained workers to process applications for multiple programs. States also made significant policy changes. There was no silver bullet, and every change had ripple effects in other areas of the project.

States highlighted the importance of thinking through business processes and knowing how technology would be used before delving into systems change, rather than expecting a new system to solve all their problems. States recommended taking the time

needed to test technological changes in advance, communicating clearly about delays and setbacks to those affected, and developing trouble-shooting guides.

5. Federal funding and partnership was crucial to state success. While states appreciated WSS's foundation funding, it was dwarfed by federal and state funding for the underlying programs. States and the federal government share in the cost of providing Medicaid coverage, while the benefits under SNAP are entirely federally funded. This gave states the flexibility to improve access to benefits without having to make cuts elsewhere. As Sherry Bradsher, former North Carolina Deputy Secretary for Human Services, explains, "the uncapped federal funding gave us the flexibility to focus on what made sense for improving families' long-term economic stability, not the short-term costs."

In addition, five WSS states built or are in the process of building integrated eligibility for both health and human services programs. These investments were made possible by Medicaid's 90/10 federal financial participation for the development of health eligibility and enrollment systems,[8] as well as the A-87 Cost Allocation Exception,[9] which allows human services programs to share in these systems and this enhanced match. This was a game-changing opportunity for states to reform service delivery and integrate across health and human services programs. Without this exception, most states would probably have chosen to build modernized systems for just Medicaid, leaving human services programs on the existing antiquated platforms, and making cross-program integration even more difficult.

Summing Up

Congress is now considering proposals to fundamentally change the funding structure of Medicaid; similar proposals for SNAP may follow. While the complexities of administering programs are often used to justify such changes, WSS shows that when

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states commit to an improved vision for delivery of services, build a culture of inquiry and learning, and bring together policy, business process improvements, and technology, they can make major improvements—and have real impacts—within the current legislative framework. Moreover, the capped federal funding and shifting of any incremental costs to states would constrain states' ability to improve their programs far more than the current legislative and regulatory structure. The CCDBG serves as an example of the difficult choices states face with block grants. While states have a great deal of flexibility to set policy parameters, flat funding forces states to constantly make tradeoffs, including between paying the rates needed to ensure minimal quality standards and serving more children and their parents. **P&P**

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