

October 21, 2011

Will Lightbourne
Director, California Department of Social Services
BY EMAIL

RE: Modernization Options for CalFresh

Dear Director Lightbourne,

Thank you for convening stakeholders in CalFresh last month for a meaningful discussion of Modernization Options to effectively increase participation. We greatly appreciate the preparation you did to develop the possible options and to bring the diverse group of stakeholders together at one table.

At the conclusion of the meeting, you invited further input. We are sharing with you now three over-arching principles shared by the five state and two county-based organizations who founded the Alliance to Transform CalFresh: the California Association of Food Banks, the California Family Resource Association, the California Food Policy Advocates, Catholic Charities of California United, the Western Center on Law and Policy; the San Francisco Food Bank; and Los Angeles Regional Food Bank (several of whom will also submit individual comments to the Department).

1. Uniformity & Excellence. We strongly support the State taking a leadership role to ensure uniformity and excellence in county policies and practices, as the Department, in partnership with the Counties, is now moving more to do. While some local variation is understandable and appropriate, **the State can and must set parameters for CalFresh operations that are known to increase access and effectiveness.** For example, we support the first option, a statewide policy for waiving face-to-face interviews, in favor of telephone and other communication. Further, we encourage the Department to pursue a range of strategies to support county accountability for increased participation, including technical assistance to share best practices, transparent performance-data from counties, and, where necessary, corrective action.
2. Clear Goal. **We believe the Administration, led by the Department and in partnership with the Counties, must articulate a State goal for its modernization and other reforms, in order to ensure focused, measurable progress.** This benchmark should build on the common ground we all share: 1) CalFresh, though growing in response to the recession, is not reaching its full potential and 2) we can make changes that will allow CalFresh to serve more people, more effectively. In setting a benchmark, the discussion should *not* devolve into debates over methodology, however important those issues might be in other contexts. Our recommendation would be to use the most well-known metric, the USDA Program Access Index (PAI) -- even with its well-discussed limitations -- and aim for a *relative* increase on that scale. **For example, DSS could set a goal of an increase in the PAI by 10% points in 18 months.** This does not necessarily mean that one accepts the current PAI level cited by

USDA as accurate or fair, either as a measure internal to California or comparative to other States. It simply means that, if we are successful together in our policy, process, and outreach initiatives, we should move the needle of that scale by 10 points. Of course, other benchmarks currently collected by the State, Counties, or USDA could be utilized as well; the most important point is to have a specific, measurable, attainable, relevant and time-bound goal.

3. Integration with Health Care. Health care and nutrition are the two major benefits provided to low-income families and serve the same goals of wellness and family stability. State health care, including Medi-Cal, is currently being dramatically “modernized” by the implementation of the Affordable Care Act of 2010 and the launching of new state health portal in 2014. As part of that process, integration of health and human services is both encouraged and largely funded by the federal government. Therefore, any proposals to modernize CalFresh should not be examined in isolation. Instead, **all CalFresh modernization proposals must be evaluated for how they integrate with the portal for health care, and specifically Medi-Cal, to most effectively improve access**. For example, how will the portal create another “door” not just for Medi-Cal, but also for CalFresh applicants? Will the portal’s use of electronic verifications also be usable with CalFresh applications? Will the portal accept electronic updates and reports for Medi-Cal, and will that information be shared with CalFresh (and vice-versa)? What does the portal’s on-line access mean for the SAWS’ on-line applications, telephone support, in-office experience and other “doors” into CalFresh? Will a call center for the portal be also able to support CalFresh cases? Asking and answering these kinds of questions – at the portal, DSS, and county levels -- is essential to effectively modernizing CalFresh.

Thank you again for the opportunity to dialogue about priorities for CalFresh. We look forward to working with you to advance these proposals and, ultimately, increase access to nutrition for all Californians.

Sincerely,

Alliance to Transform CalFresh

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