

# INCREASING PARTICIPATION IN



# Plan for Today

- National Perspective on California
- Areas for improving access to and participation in Cal-Fresh
- Targeted strategic opportunities
- Brainstorm!

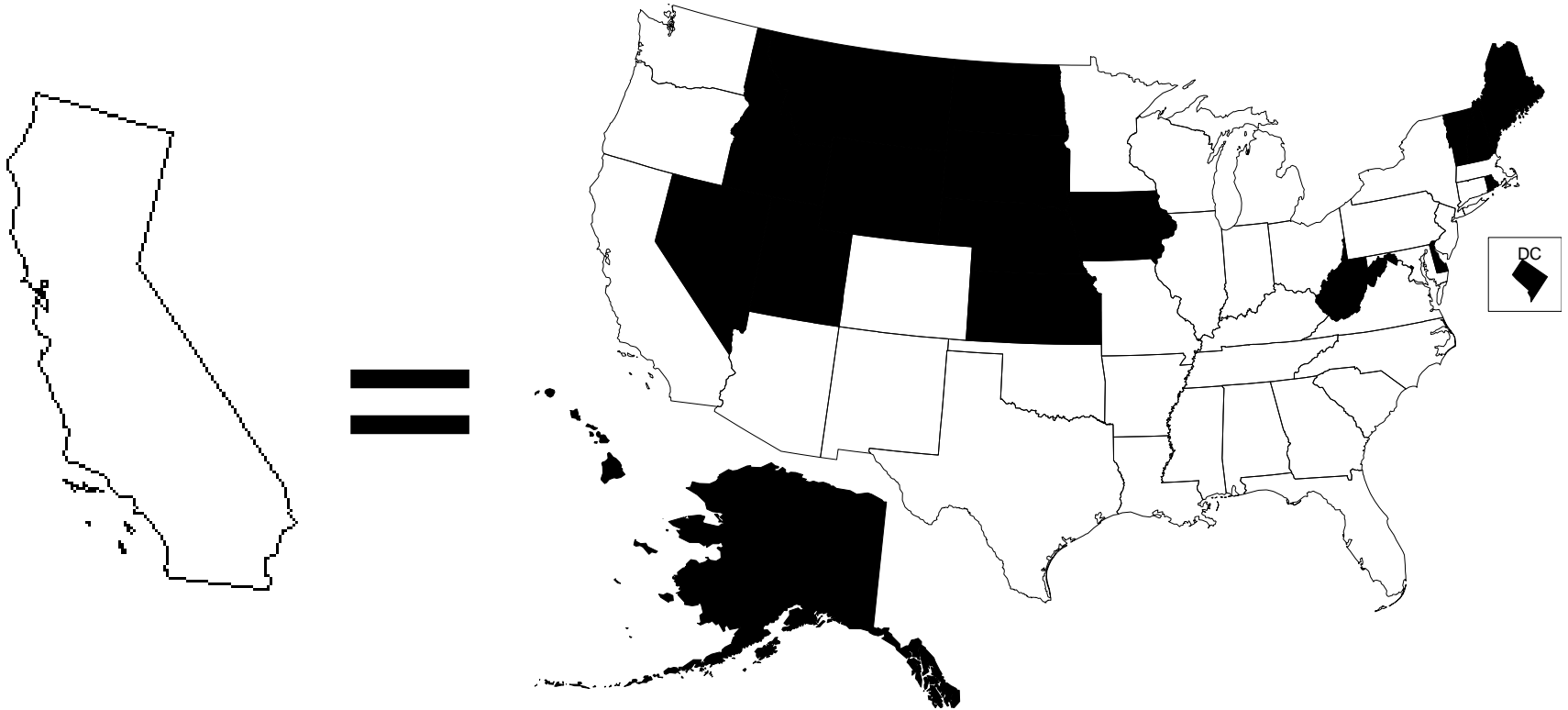
# What Are People Saying About CA?



# Quick Overview of SNAP/CalFresh

- Helps more than 46 million low-income Americans, 3.9 million Californians, afford a nutritionally adequate diet.
- More than 75% of all SNAP participants are in families with children; nearly one-third of participants are in households that include elderly people or people with disabilities.
- Income below 130 % of FPL or about \$24,000 a year for a three-person family.
- In 2011, the average CA monthly per person benefit = \$147.12 (or \$4.90 a day).

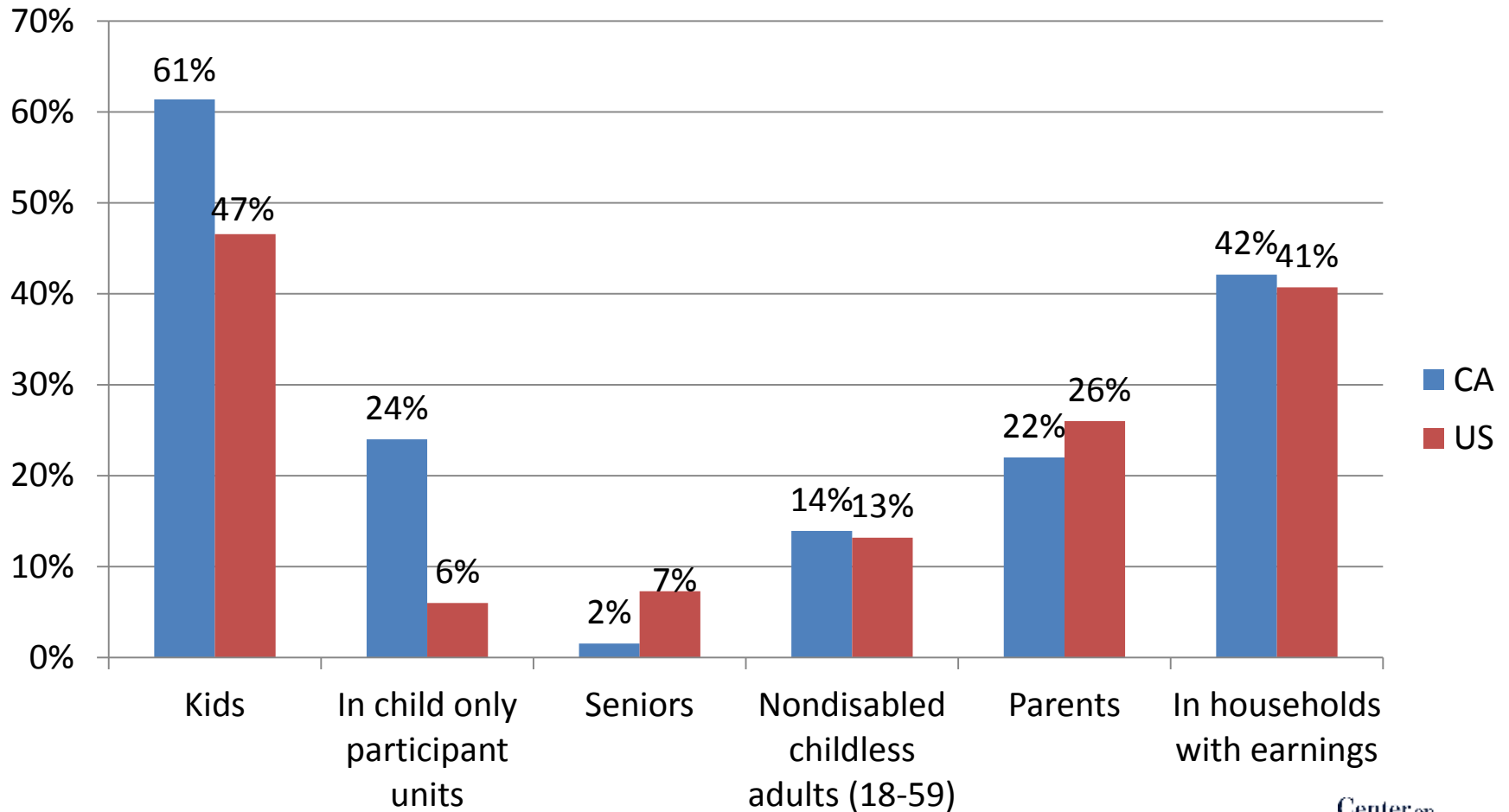
# California is Big!



# CA is Unique

- Cool name!
- Relatively strong Cal Works program — 2<sup>nd</sup> highest TANF-poverty ratio in country
- Cash-out of SSI
- Diverse population — 27% foreign-born, compared to 13% in U.S.
- Relatively high cost per case
- Large State Deficit: 27% of overall budget; 3<sup>rd</sup> largest
- Many heavily engaged stakeholders

# California Has More Children But Fewer Seniors Participating in SNAP Compared to the U.S.



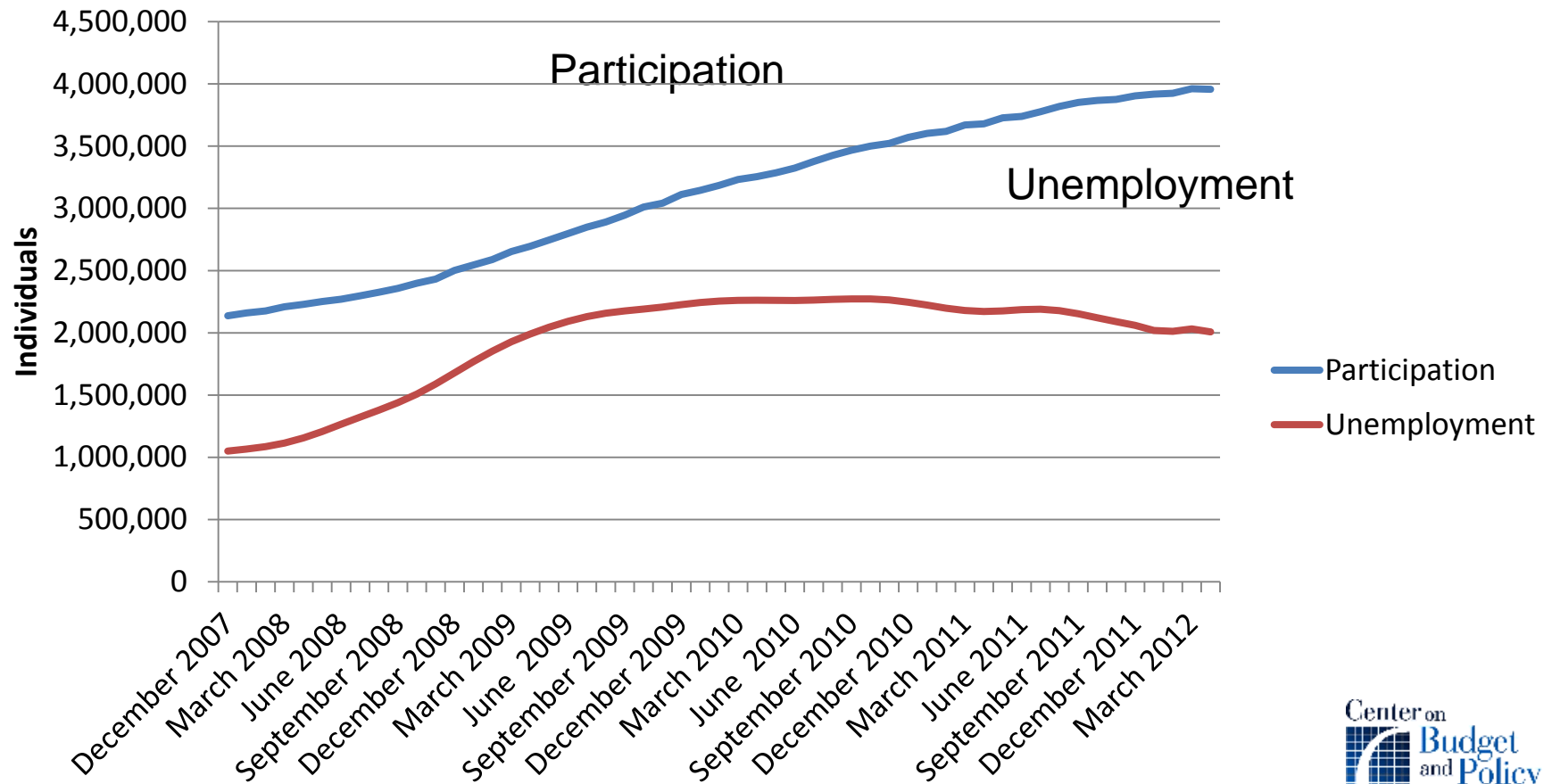
# Other States' Experience Still Relevant

- SNAP = Cal Fresh
- NY, FL and TX are of a similar size.
- Programs co-administered
- Numerous county-administered states  
(e.g. NY, NC, CO, OH, WI)
- Lots of recent innovation and policy change!
- Performance during recession

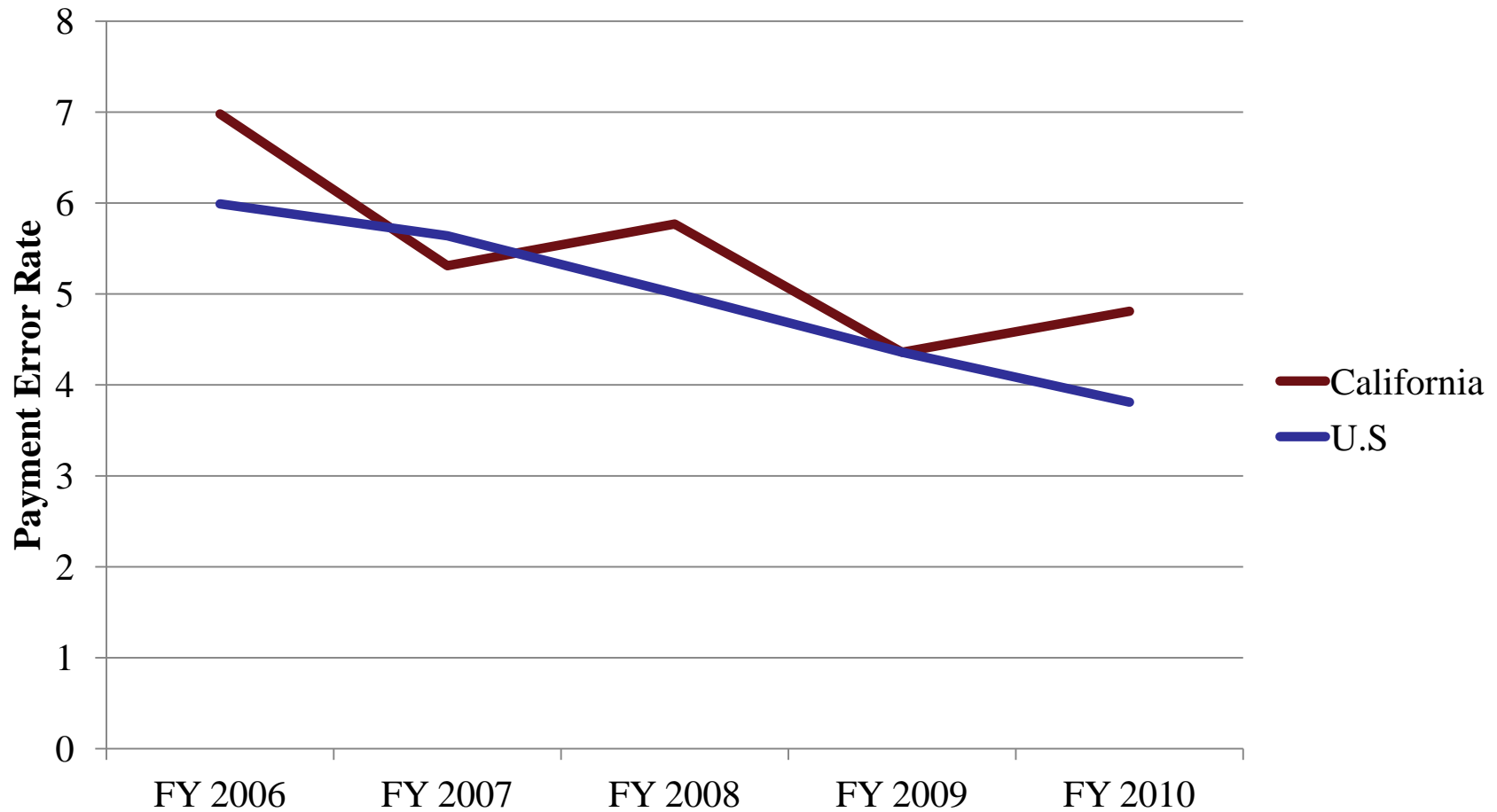


# Cal Fresh Has Grown Dramatically in Response to the Recession

## SNAP Participation and Unemployment in California, Dec 2007-April 2012

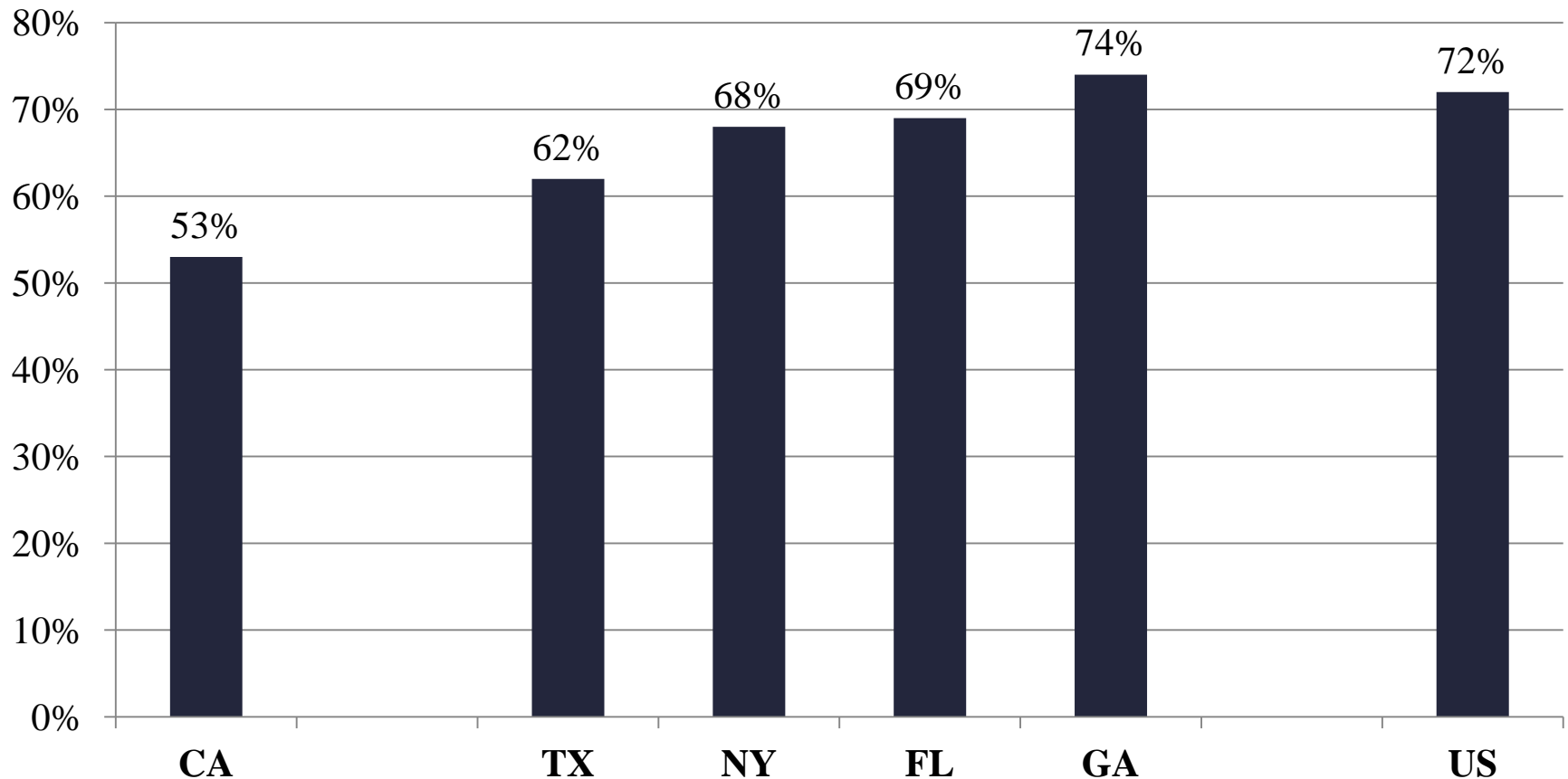


# CA's Growth Coincides with Declining Error Rates

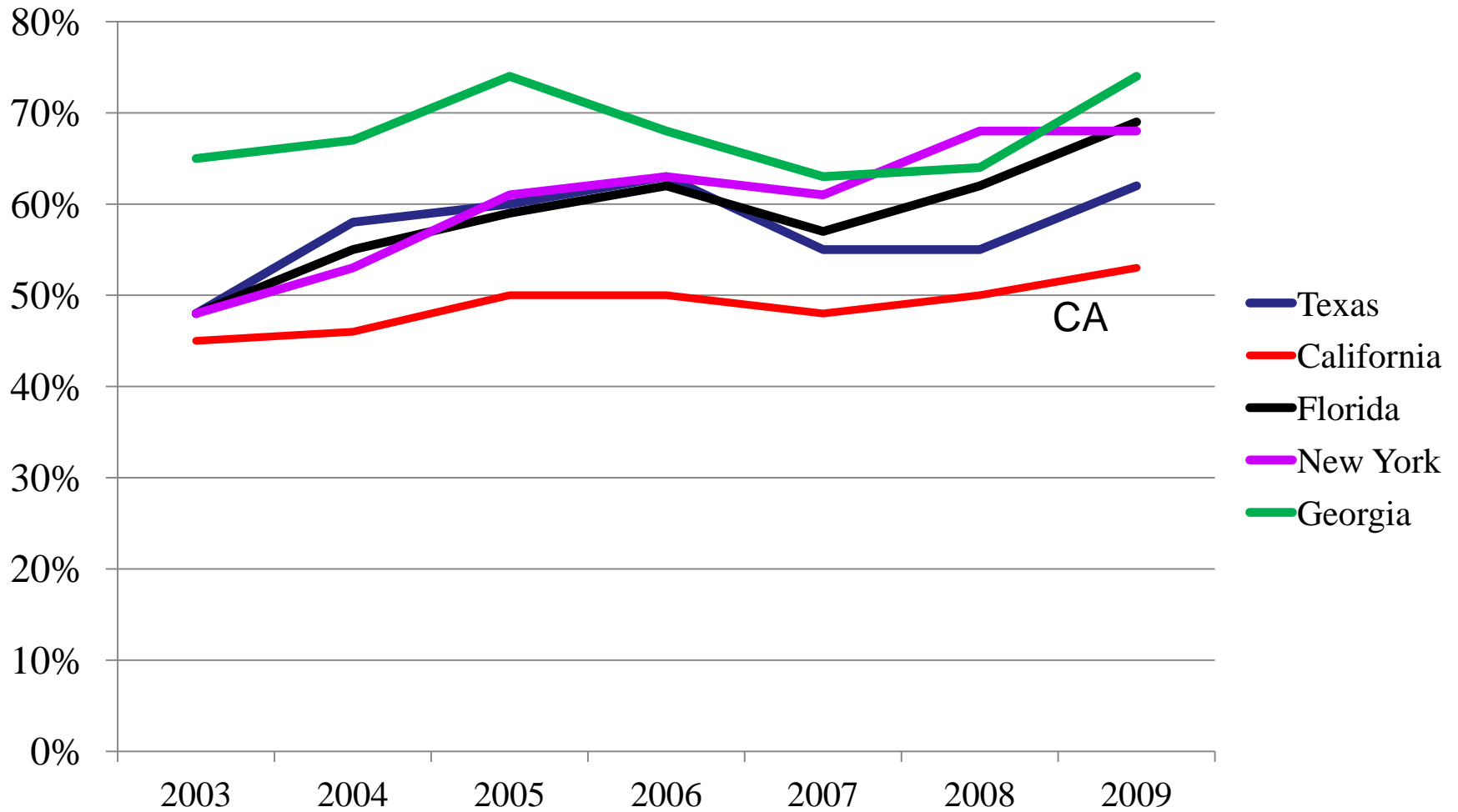


# CA's Participation Rate Trails Other Large States

State Participation Rates, 2009



# Trends in Participation Rates



# Snapshot of CalFresh

**Other Observations?**

# Improving Participation

Leadership

Policy



Process

Outreach



Ongoing Assessment

Strategic Opportunities

# Business Process Improvement

- What is the best way to process the work that supports staff and helps clients?
- A number of states have undertaken business process re-engineering efforts within and across programs.
  - AZ, AK, FL, ID, NM, UT, WA are a few multi-program efforts.
- CO and NC promoting business process work with their counties.

# Renewal Retention Rates

Impacts participation – don't lose eligible families!

## Getting it right pays off

- A huge share of state workload is renewing eligible household's benefits.
- Continuous coverage can create more financial stability for families.

## Stopping the revolving door

- Eligible people who lose benefits just come back, creating more work for clients and staff.





# What is Churn?



- Eligible clients do not complete the renewal process, typically a procedural denial, and quickly re-enroll.
- Break in enrollment is typically short – 0 to 90 days.
- No fixed definition – will vary by state.

# Impacts on Productivity and Food Security

- Poor families lose food benefits.
- Caseworkers (not always the same person) have to spend more time keeping eligible households connected.
- Lobbies and phone lines get clogged with unhappy former clients



# Possible Causes

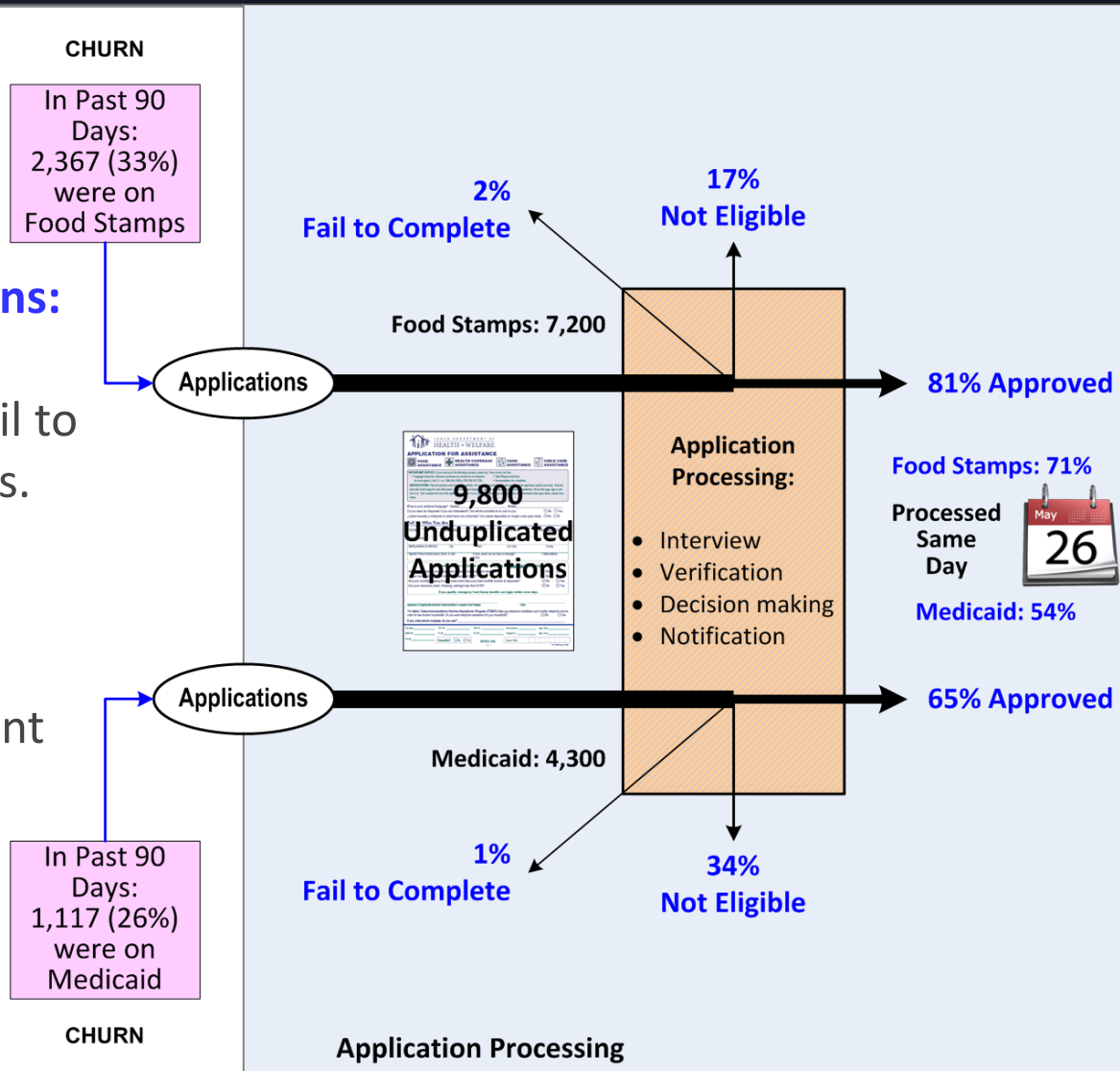
- States are backlogged and overwhelmed
  - Ex. recerts scheduled after end of cert date
- Paperwork or verification doesn't arrive timely
- Confusion about what is required
- Disconnects across programs
- Recertification timeliness not historically a management focus
- Systems set to auto-close cases on renewal date – states and feds do not assess

# Idaho's Assessment of Churn

## For Initial Applications:

- Only 1-2 percent fail to complete the process.

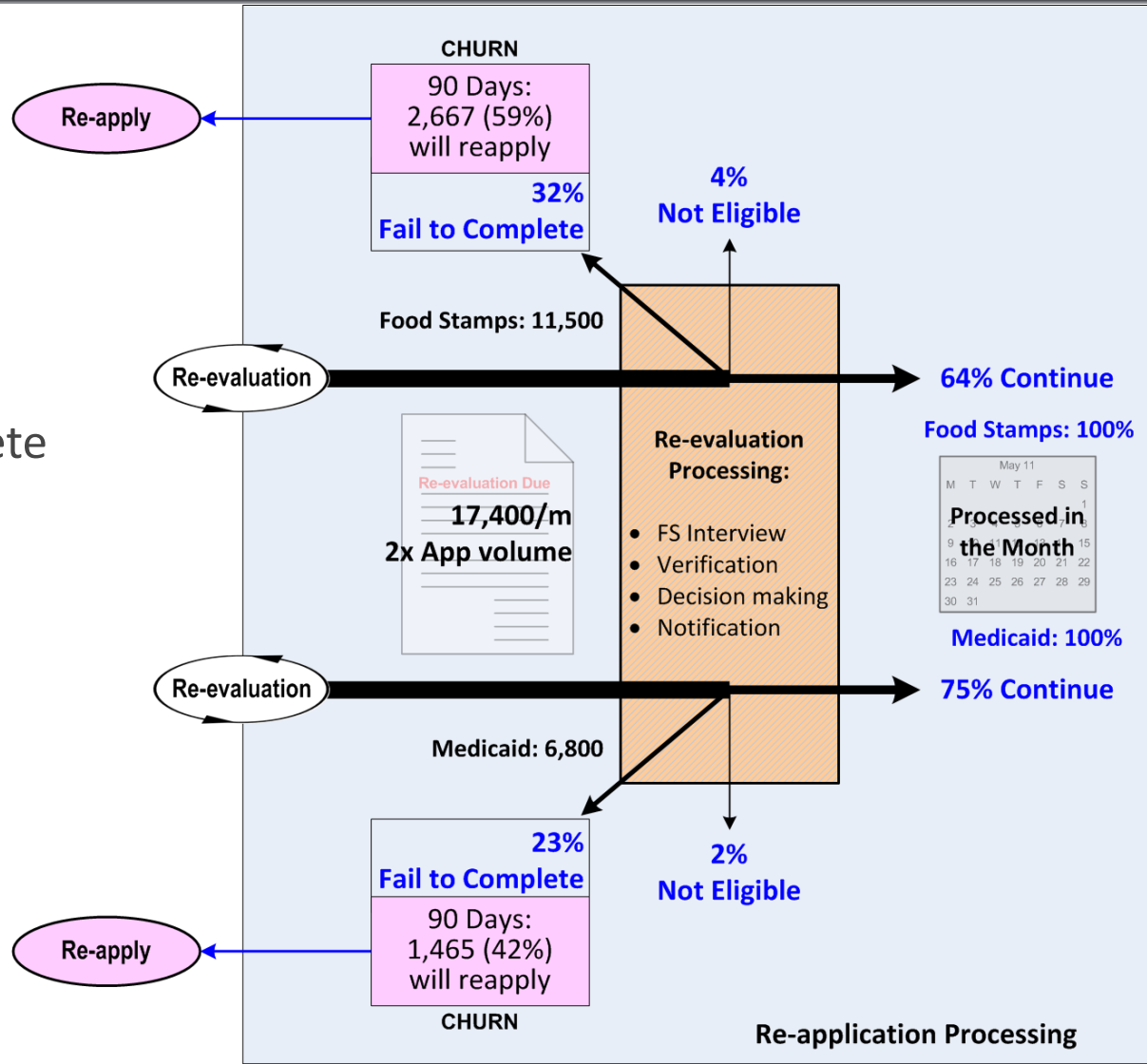
- But 1/3 of new applicants were recent participants.



# Idaho's Assessment of Retention and Churn

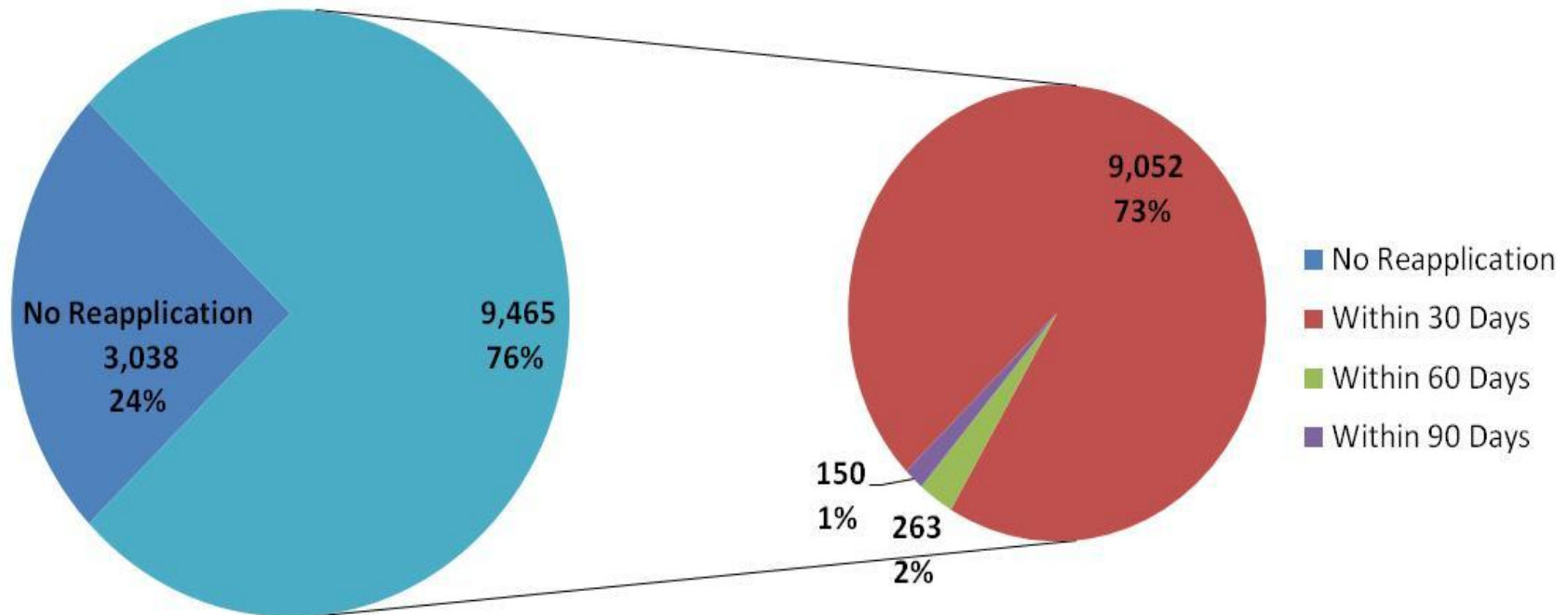
## For Re-evaluations:

- 23-32% fail to complete
- 40% to 60% of these will reapply.

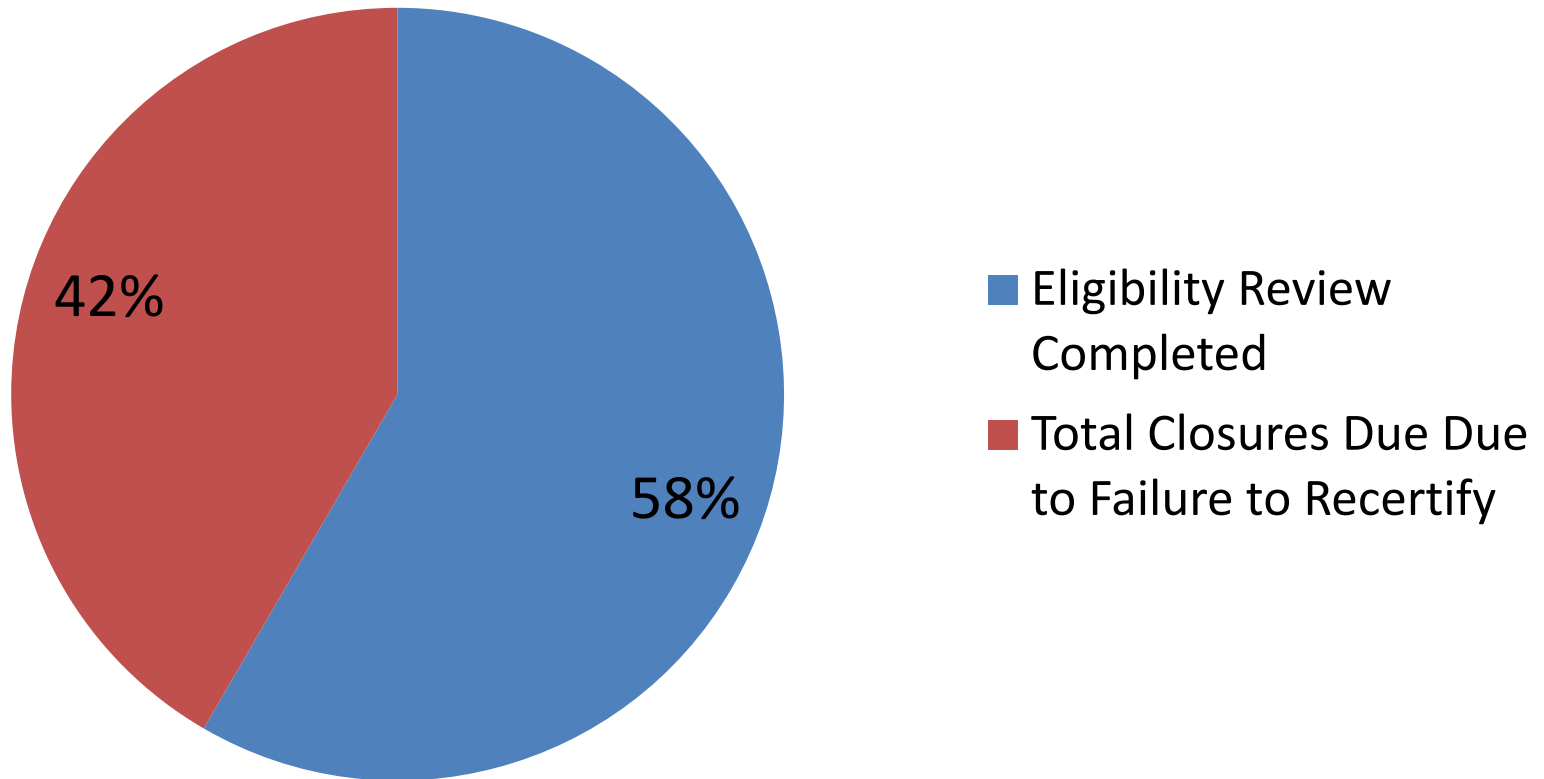


# What Share of Closures Return?

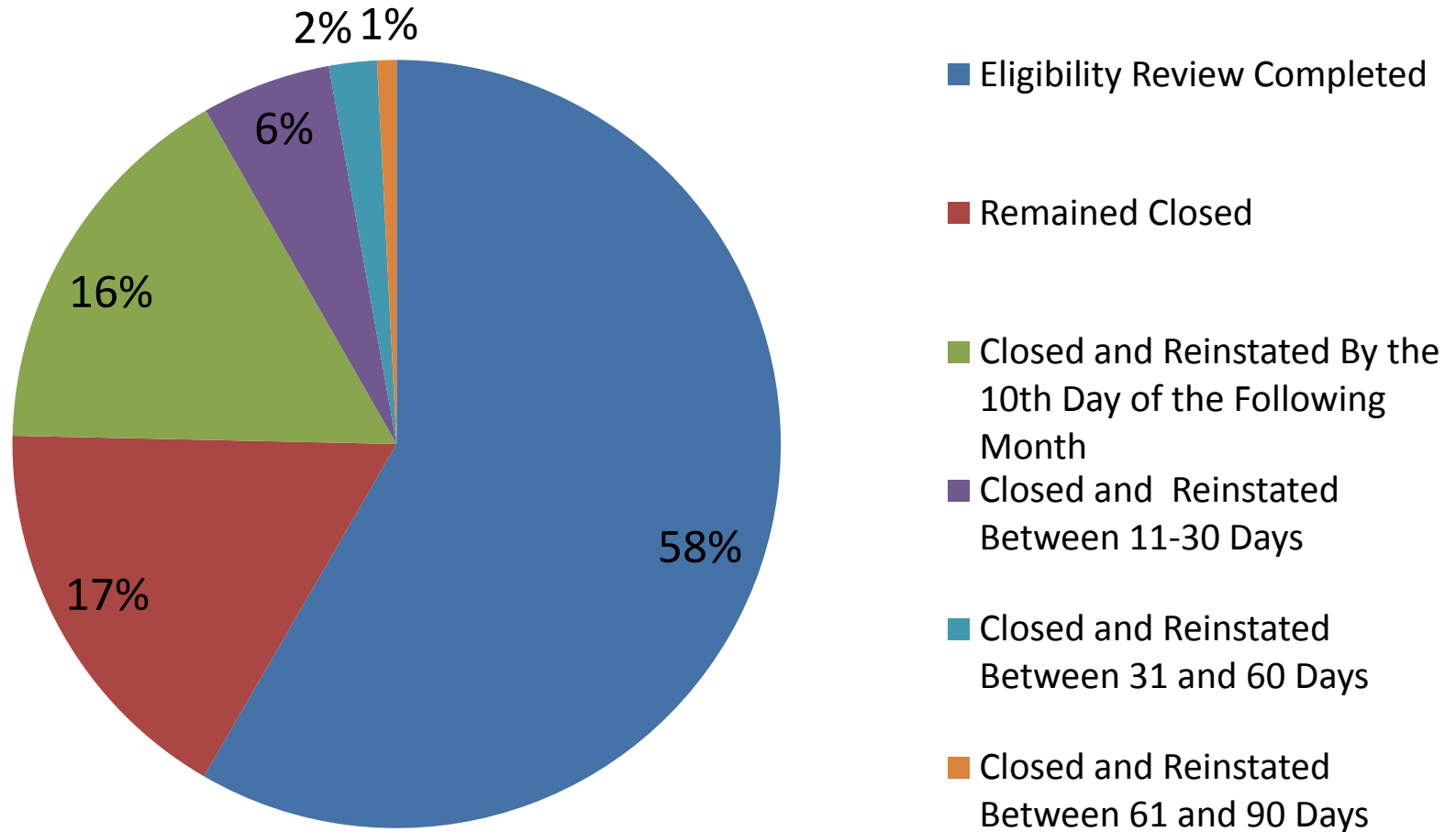
## Share of Closed SNAP Cases that Reapply within 90 Days



# Case Study: WA State Recertifications



# Case Study: WA State Recertifications

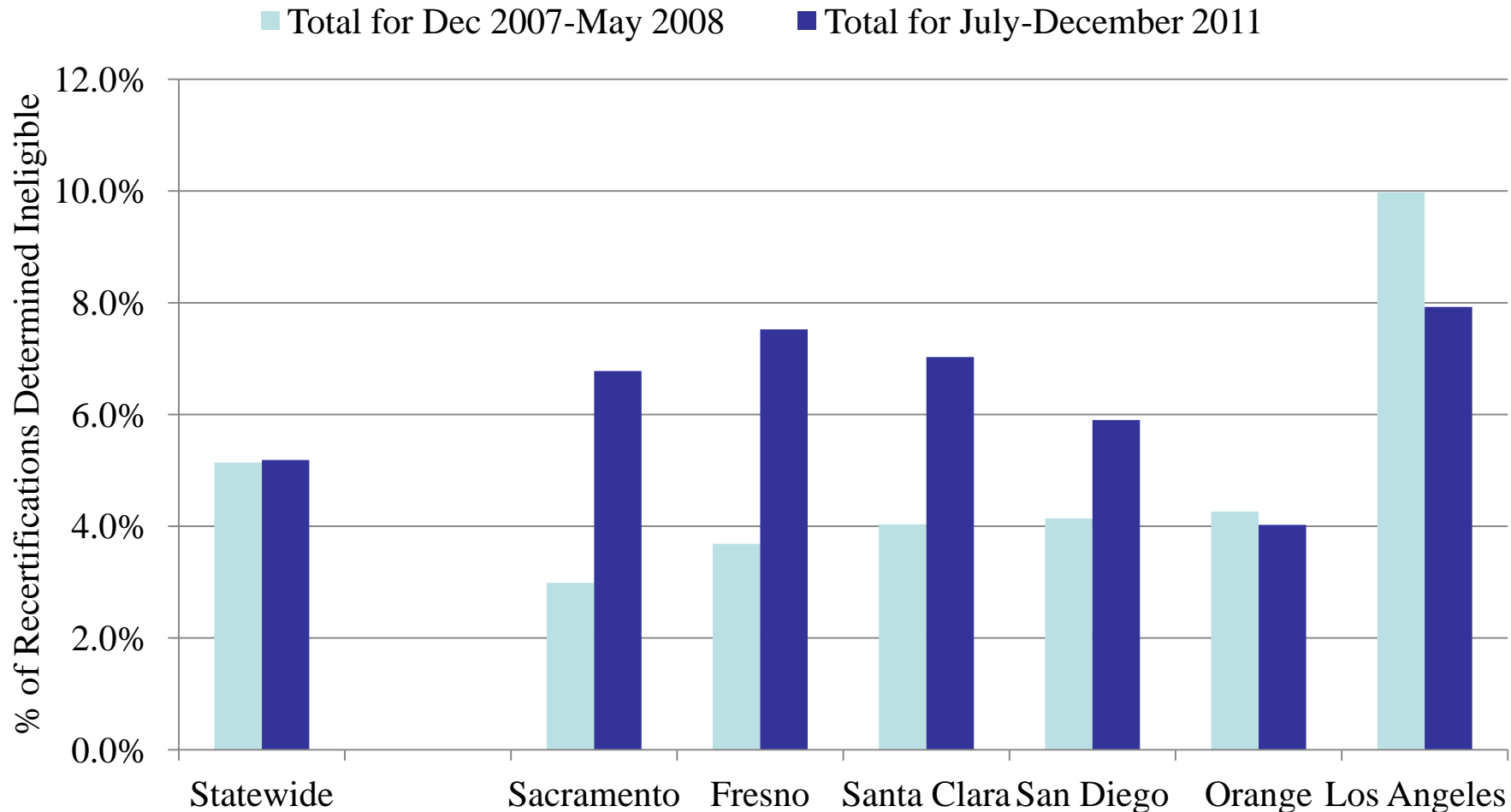




# Reducing Churn

- Reduce Preventable Closure Risks
  - Use the longest certification periods available
  - Reconnect quickly — break-in service options
  - Combine, align, cross leverage across programs
- Address Gaps
  - Dedicated staffing or renewal unit – be flexible!
  - Focus on the pieces of the process:
    - autoclosure
    - returned mail
    - reconsider forms, including pre-populating
  - More options: phone and internet
- Set a Goal and Measure Success

# Recertification Determined Ineligible for the 6 largest counties in California



# Assessing Renewals

- Rethink success — is it getting clients to finish *your* process or redesigning a process that's easier for them and for staff?
- Measure and diagnose —
  - How big is the problem?
  - Where are the issues?
  - Consider autoclosures!
  - State vs. county role



# Supporting Process Changes in a County Administered State

- CO – using foundation funds, CO hired a consultant to work with the 10 largest counties on improving renewal process.
- NC – creating a “practice model” to facilitate communication, cross county exchange and the establishment of shared performance benchmarks.

# Thoughts/Questions about Process Changes?

*Anything you'd like to share?*

# Assessment: The Role of Data and Evaluation

1. Setting clear goals
2. Diagnosing policy/procedure issues and solutions
3. Use in monitoring / improvement

# Setting Shared Performance Goals and Metrics

- NC: Families will tell their story once and get the help they need.
- CO:
  - Increase participation rate by 10% within three years.
  - Improve timely processing.
    - YR1: 65% of all new and renewal applications are processed within 7 business days.
    - YR2: 90% of medical-program (MAGI population) applications are processed on the same day received.
    - YR 3: 90% of all applications are processed within 7 days.

# What Might Work in CA?

- Ideas around goals for program be?
- What would key performance metrics be?
  - Daily vs. monthly?
- Agreement to improve  $\neq$  agreement on process to achieve improvement.



# Timely Opportunities for Monitoring and Improving Policy

Finger-  
imaging  
(impact on  
denials?  
Caseload  
composition?)

Telephone  
interviews  
(do they  
happen, do  
they help?)

Simplified  
reporting  
(reduced  
denials from  
reports?)

# Targeted Opportunities

99'ers

Seniors

Health Reform

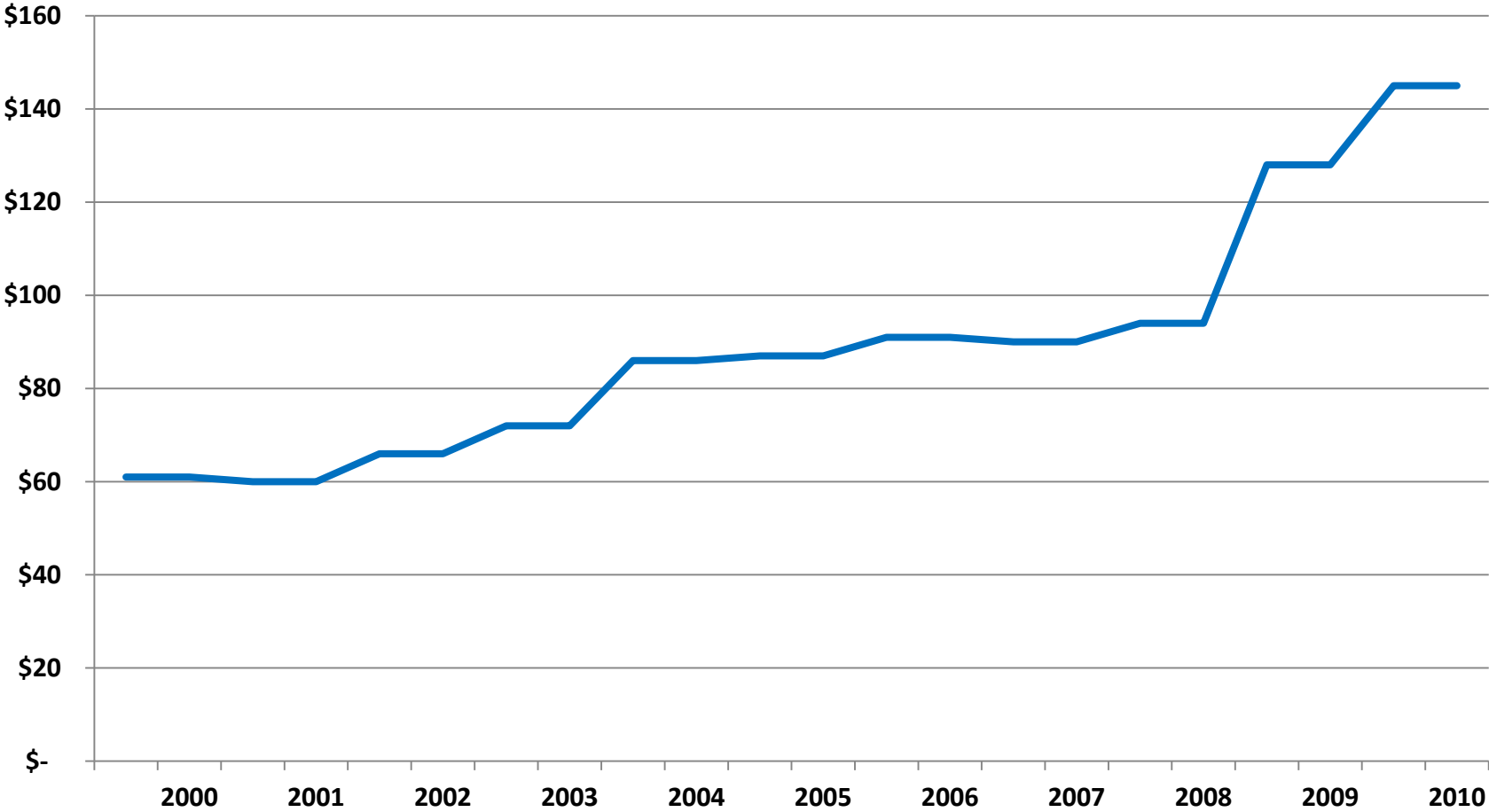
# 99'ers

- In May, 94,400 people cut off of unemployment insurance in CA because extended benefits ended.
- More will lose UI every month.
- What steps can DSS take to connect eligible unemployed households to Cal-Fresh and other supports?
  - MA sends an outreach letter
  - Work with community partners and stakeholders?

# At Least 3 Different Groups of Seniors

- SSI recipients:
  - Income below 50% of poverty
  - Almost always qualify for and get Medicaid
- Over 65, no SSI:
  - Have Social Security and Medicare
- Under 65 years old:
  - Often qualify for very little help other than SNAP

# Average Benefit for Households With Seniors is \$145



# The Package of Benefits is Dramatic!

MSP Part B premium:  
**\$1,157** a year

MSP also covers additional  
Medicare cost sharing



Typical  
Food Stamp  
Benefit:  
**\$960** a year

Annual Income  
of a Typical  
Low-income  
Social Security  
Recipient  
**(\$10,000)**

LIS Average Value:  
**\$3,900** a year

+

**+39% of income**

# SNAP and Medicare Part-D Pilots in 3 States

- Washington – outreach in 2 counties
- Pennsylvania – “deemed eligibility”
- New Mexico – “deemed elig. w/ standard benefit”

# Action: What Can States Do?

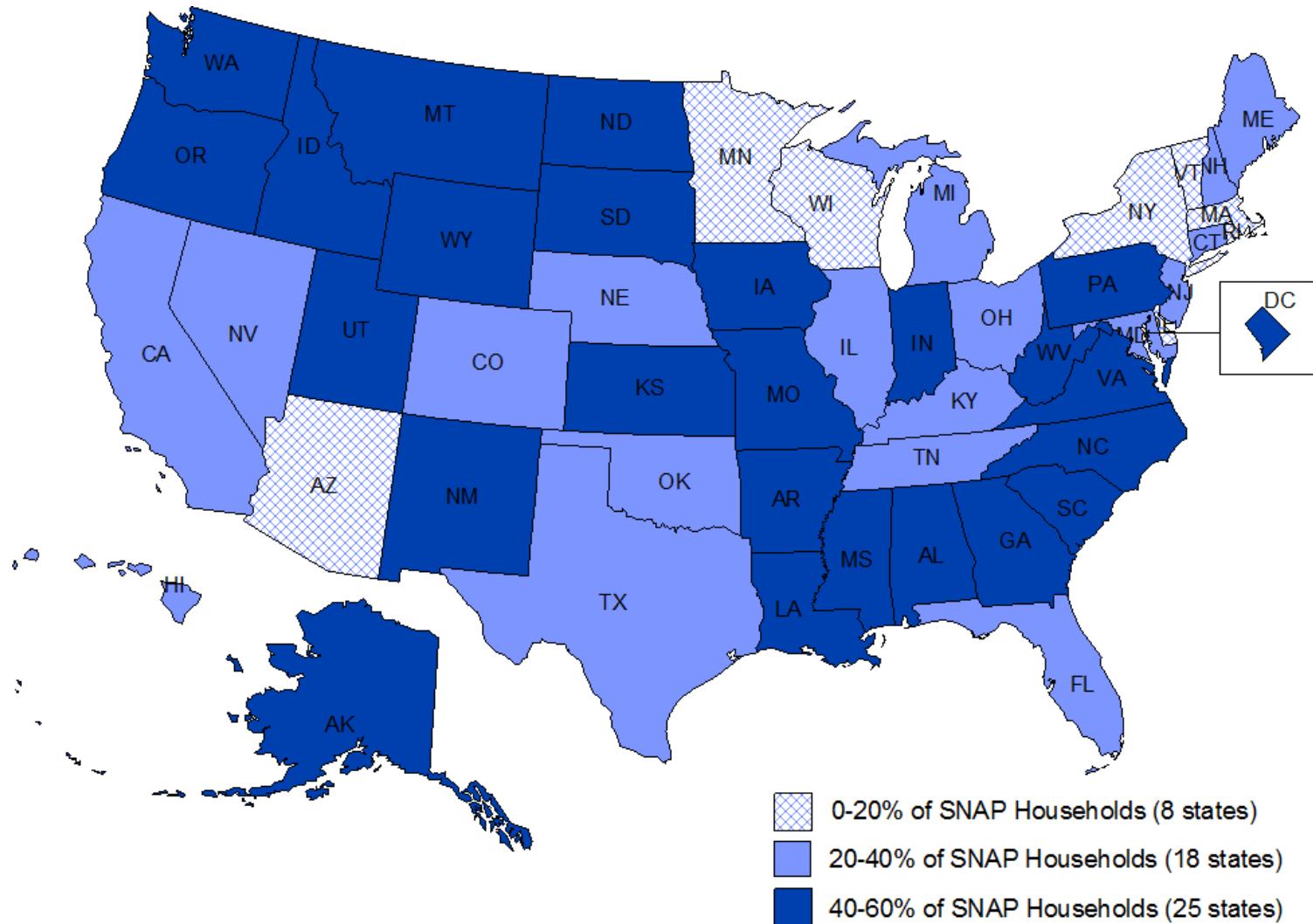
- Identify strategies to reach low-income seniors already participating in other programs
- Remove/lessen procedural hoops
  - 1 page application
  - Medical expense waiver
  - Self-attestation of other expenses
- Collaborate with other groups
  - MA and AL



# 2014: ACA Has Huge Potential for Cal-Fresh

- Medical will expand minimum coverage group:
  - 138% of FPL income eligibility floor for children, parents and childless non-elderly adults.
  - No asset tests.
  - States with higher eligibility must maintain it.
- Simple, easy application and enrollment systems are required under the law.
- Enhanced federal matching available (including for integrated systems)

# In Half the States, 40-60% of SNAP Households Will Include Newly Medicaid Eligibles



# Making the Connections: From SNAP to Medicaid

- Some 300k people on Cal-Fresh will gain Medi-Cal eligibility.
- 2 million Californians will gain Medi-Cal eligibility – many of them working poor and CalFresh eligible.
- How well do Medi-Cal and CalFresh work together now?
- What opportunities does this redesign offer?

# Foundation Partnerships

- California Endowment, Kaiser Foundation, Sierra Health Care Foundation, Children's Partnership, California Health Care Foundation....
- IL, CO, NY, SC, NC, ID, RI, NM, have used foundation funding to support special projects – including efforts to enhance data analysis and streamline eligibility and enrollment processes.

# The Alliance to Transform CalFresh

- Goal: Boost participation to 75% by 2016
- Members: CA Association of Food Banks (Convener), CA Family Resource Assoc, CA Food Policy Advocates, Catholic Charities of CA, Western Center on Law and Poverty
- To Join “CalFresh Allies”  
email: [kim@mccoywade.org](mailto:kim@mccoywade.org)
- To learn more:  
[www.cafoodbanks.org/transformcalfresh.html](http://www.cafoodbanks.org/transformcalfresh.html)

# Wrap Up

- National interest in CalFresh
- Other states have much to offer – use state exchange (to go or to bring)!
- Potential to improve participation through process
- Goals, benchmarks and data plays a key role
- Numerous strategic opportunities
- Think big!

# Additional Questions? Thoughts?

Stacy Dean

[dean@cbpp.org](mailto:dean@cbpp.org)

202-408-1080

