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CARING FORWARD:

Paving the Way Toward Streamlined Social Services

UNDERWRITTEN BY:

EQUIFAX[®]

Easy, efficient, instantaneous. Not exactly words you would have linked to benefits programs in the good old days of paper-based applications — but with the continued adoption of new technologies, data, and analytics, organizations are increasingly making the leap to more accurate and streamlined eligibility verification processes.

The federal government is aiding that transition. For example, The U.S. Department of Agriculture recently updated its policy on how states can leverage modern technologies when administering Supplemental Nutrition Assistance Program (SNAP) benefits to improve customer service and integrity— providing clarification on use of proven technologies that help automate identity and income verification.

So how can organizations harness this momentum? To find out, Government Business Council (GBC) interviewed state health and human services (HHS) leaders from Kentucky, Pennsylvania, Utah, Washington, and Wyoming about their ongoing priorities, challenges, and lessons learned in the quest for streamlined eligibility determinations.

Architecting Program Infrastructure for Real-Time Eligibility

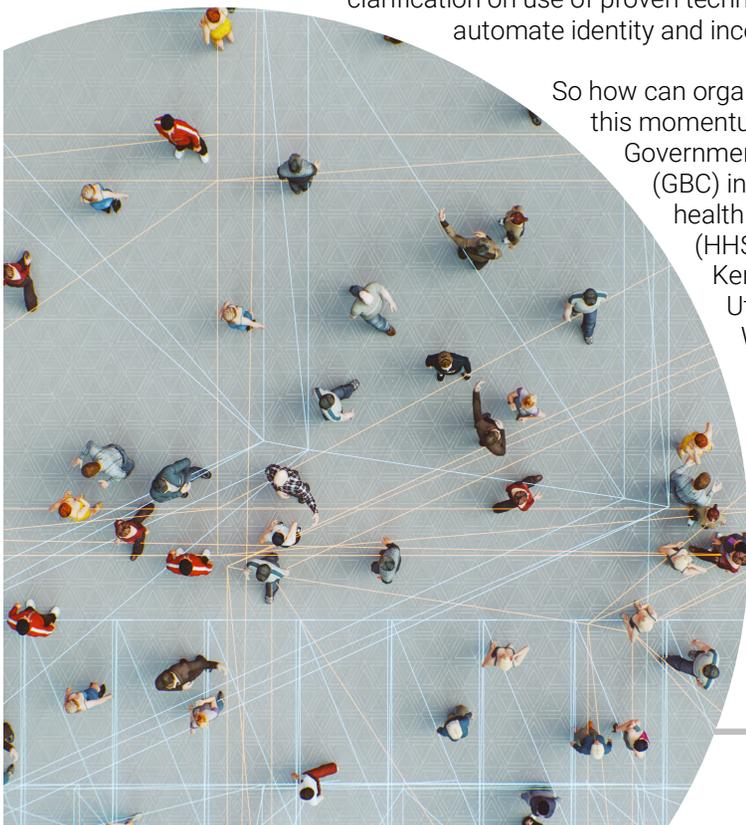
System Integration

For many states, the path toward streamlined eligibility decisions builds off of an integrated system that incorporates multiple benefits programs into one.

Pennsylvania was an early adopter of this model. According to Joel O'Donnell, Director of the Bureau of Program Support within the Department of Human Services, combining their eligibility systems for Medicaid, cash assistance, and food stamps has been hugely beneficial: "We try to eliminate the burden on the client's end. So we try to at least have the electronic sources. It makes things very advantageous for the data exchanges we use for eligibility verification, because if someone records a change in one program, we're able to use that for everything. We get the information as quickly as possible, and we apply it to all programs."

Utah took integration even further. In 2010, the state created the Department of Workforce Services (DWS), which was tasked with building and administering a single system for all of Utah's public assistance programs.

"Years ago, when we first became a department, an average worker was handling about 150 cases," says Muris Prses, Assistant Director of Systems and Policy at DWS. "That was a lot of footwork — from verifying everything, to getting customers' spending information, to waiting for information to come back. Currently, we



are averaging about 400 cases per worker, and our accuracy is better and we're saving when it comes to cost."

Rules Engines

At the core of any efficient system is a robust rules engine that helps automate the varied and complex eligibility rules across health and non-health programs. This minimizes the amount of time caseworkers have to spend on the minutiae of program rules and reduces opportunities for human error.

According to Jan Stall, Client Services Administrator for the Wyoming Department of Health, the switch to a rules-based system substantially decreased the number of inappropriate eligibility determinations.

"As long as you enter the correct information into the system, the system makes the determination," she says. "Previously, it was all manual processes by individuals who were more prone to making human error."

Similarly, Washington is leveraging complex rules to facilitate the state's "reasonable compatibility determination."¹ "We recently implemented another step in the reasonable compatibility determination," says Amy Dobbins, Section Manager of the Medicaid Eligibility Policy Office. "Our systems talk to each other, and we're able to look at the system and say, 'If the person's on this program and they meet these rules — we wrote some very specific business rules in the system — then they can pass as being compatible.'"

¹ States have flexibility to define reasonable compatibility for income by establishing a percentage or fixed dollar amount difference between the applicant's self-attested amount and the income reported through electronic data matches

Data exchanges

While implementing a rules-based engine is critical, the success of any state's eligibility system ultimately hinges on its access to timely and accurate information. States connect with several other electronic data interfaces to verify applicant-submitted information. All states have access to the Federal Data Services Hub — an electronic resource developed and maintained by the Centers for Medicaid and Medicare Services that provides data verification services. Data sources provided through the hub include those from relevant federal agencies — such as the Social Security Administration, the Department of Homeland Security, and the Internal Revenue Service — as well as proprietary data sources that support real-time determinations.



"When we have used incorrect data to make a decision...it creates workload for us in investigations, collections, and fraud. Not to mention that using wrong data to make a decision may deny benefits to somebody who is eligible."

— Muris Prses, Assistant Director of Systems and Policy within the Department of Workforce, Utah



“Some data elements are permanent verifications, like citizenship or identity verification,” Prses explains.

“However, for some of the more fluctuating data elements — like income, expenses, and assets — it’s fairly crucial for us to have that information be recent, because that is the basis on which we make our decisions, he adds. “If the data is not available instantly and you’re taking time to make your decision, the client population served often changes circumstances — we have to verify that information prior to making a decision.”

For a range of reasons, the information states consistently have the most trouble accurately verifying is income. In fact, according to Stall, in Wyoming “the most difficult income for us to actually get processed would be the self-employment income. People don’t always keep great records, depending on what that self-employment is, so these tend to be a little more difficult to obtain what we need.”

In Washington, Dobbins explains that one income error commonly found during eligibility review is the system incorrectly flagging an applicant due to a mismatch between their self-attested income and their income according to the Federal Data Services Hub.

“Say I report my income, it’s under the income standard, and the IRS flag comes back as not reasonably compatible. I’m going to get pulled, even if the state match says I am compatible — and that could be because the most recent data that the IRS has on file is from my last tax records. Between that time and today, I could’ve had a change in income — I could have changed jobs, or just have fewer hours than what I reported on my taxes last year.”

— Amy Dobbins, Section Manager of the Office of Medicaid Eligibility Policy, Washington State

To help mitigate this blindspot, many states utilize data exchanges that can provide wage information as recent as an individual’s last pay stub. Utah utilizes new hire data. Prses explains: “We get alerts on existing cases that a customer started working, which triggers a request for information if we cannot get it electronically.”

Streamlining Eligibility Verification with Data-Driven Insights from Equifax

We spoke with Mike Bromley, Vice President of Enterprise Government Solutions at Equifax, who shared: “Having access to current data, direct from the source is so important to the eligibility determination process – we hear this over and over. It’s where Equifax has been able to step in to help with the efficient delivery of public assistance programs.”

“We know from twenty-plus years of working with government agencies that decisions have to be made based on the world we live in. People move. They get married. They get in and out of trouble. They work multiple jobs. All of that impacts benefit determinations, which should be made with information that is accurate and up to date in order to get benefits to people in need. So, we continue to innovate by adding other unique data sets into a single, automated system.”

“Consider the impact people’s life changes have on a social service benefit program operating at scale. For example, when we analyzed the 2018 income data in The Work Number® database, we saw that the median monthly income of individuals changed as much as 20% month-over-month. That has real-world impact not only on that family, but also on the social service organizations designed to help them. Having automated access to the most current data, 24/7, is critical not only for program integrity, but also for speed to benefit decision making.”

Ultimately, he says, the goal is to make it easier for government clients to quickly verify applicants and help them get the right benefits to the right individuals at the right time. “Today, through strategic partnerships with leading payroll providers and other data sources, we provide access to 10 times more verification data than was available in 2018. This gives applicants working in small, medium or large businesses, the same opportunity to participate in an accelerated decision process to receive benefits in their time of need.”

- Mike Bromley, VP of Enterprise Government Solutions, Equifax



Balancing timeliness, accuracy, and accountability

The optimal solution is one that effectively balances timeliness and accuracy – and Prses cautions leaders not to prioritize one at the expense of the other.

“If a state is struggling with accuracy, they might put their needs for timeliness on the back burner. And I think it’s important to always keep your eye on the ball and make sure you’re paying equal attention to both,” he says. “We have gone through issues with accuracy ourselves; we focused on taking more time on a decision to get benefits out accurately. Well, that’s great, but when you’re taking more time, an applicant’s situation often changes, and your decision becomes inaccurate. And, every time we have to ask the customer for anything, it adds mailing costs, and it adds seven days to decision-making ability.”

Similarly, Douglas Beard, Director of Kentucky’s Department of Family Support, emphasizes the need to balance these factors not only to facilitate correct eligibility determinations, but also to build and maintain public trust in the agency. “You want to strike a balance between verifying as much as you can for the good of program integrity, but also streamlining,” he asserts. “Simplify, but then, on the other hand, the more you verify and the more you match, the more the the public feels like it can trust the integrity of the program. So that’s the line you walk.”

Remaining Obstacles

While the issues that states confront vary depending on their unique context — geography, the demographics of the populations they serve, the resources and human capital at their disposal — there is one problem that transcends those differences and impacts states at all levels of eligibility system maturity: complex program requirements at the state and federal levels.

According to Beard, this challenge has manifested at each stage of the process: “It created challenges during the development stage, when we would have subject matter experts from each program involved in application design sessions and outline what those requirements are and what data elements will need to be collected. And it remains a challenge and, in fact, may be an even bigger challenge now, as different policies change over time and we have to make those change requests for the system. If a policy changes for SNAP, when we go to change that in the system, we have to include all of those other programs, and get everybody at the table to talk about that change and how it affects those other programs.”

Prses faces a similar issue in Utah.

“Because we administer various programs, all of those programs are basically checking the same data elements, but almost all of them utilize it differently,” he says. “So, the challenge has been, how do we train our staff in a concise fashion — one that they can retain — on the administration of all the different program requirements.”

Taylor Linke, Washington’s Director for the Division of Medicaid Eligibility and Community Support, sees this more as an opportunity for federal agencies. “One of the opportunities for our non-CMS federal partners, like the IRS and Social Security Administration, is to better coordinate and communicate amongst themselves so that we don’t end up caught in the middle trying to resolve discrepancies or inconsistencies in their own federal regulations.”

Research Methodology

GBC and Equifax launched a qualitative research campaign in August and September of 2019 that included a series of 30-minute interviews with state health and human services agency leaders regarding their efforts to streamline eligibility verification. The list of featured interviewees is as follows:

- Amy Dobbins -- Section Manager of the Office of Medicaid Eligibility Policy, Washington State
- Taylor Linke -- Director of the Division of Medicaid Eligibility and Community Support, Washington State
- Joel O’Donnell -- Director of the Bureau of Program Support within the Department of Human Services, Pennsylvania
- Muris Prses -- Assistant Director of Systems and Policy within the Department of Workforce, Utah
- Douglas Beard -- Director of the Department of Family Support, Kentucky
- Jan Stall -- Client Services Administrator for the Department of Health, Wyoming

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