



**Illinois Department of Human Services
and
Illinois Department of Healthcare and Family Services
Response to the Task Force on Access to Benefits and Services
Report**

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Task Force on Access to Benefits and Services

In order to address barriers in state policy and practice that limits access to existing benefits and services, the Illinois General Assembly passed a resolution (SR 218/HR 462) creating the Access to Benefits and Services Task Force during the 2005 legislative session. The stated goal of the Task Force was to thoroughly review and analyze policies and procedures concerning applications and redeterminations of eligibility for cash assistance, Food Stamps, and medical assistance provided under the Illinois Public Aid Code and the Children's Health Insurance Program Act. The appointed members of the Task Force and the Departments of Human Services (IDHS) and Healthcare and Family Services (IHFS) were charged with collaboratively developing recommendations for appropriate changes in law, rules, policy, or process to simplify, make uniform, or otherwise ease the processes by which potentially eligible persons may apply for and be found eligible for benefits and services.

The members of the Task Force include a diverse group of income support experts with decades of experience working with applicants and recipients at the local level, analyzing related state and federal policy and laws, administering programs within state government, advocating for change, and monitoring utilization and access trends across Food Stamp, medical and cash assistance programs. A full listing of Task Force members is included in the appendix of this document.

The Task Force prioritized various barriers that limit access to existing benefits and services and impede the progress of Illinois' working poor as well as the prosperity of Illinois families. Members of the Task Force began meeting in October 2006 and concluded their work in November 2007. A Steering Committee consisting of representatives from IDHS, IHFS and Task Force members provided oversight to the work of the Task Force.

Summary of Task Force's recommendations for policy and procedure change

The Task Force found that making income support benefits available to the working poor, or those unable to work due to disability, domestic violence, or other reasons, is a foundational anti-poverty strategy. Successful elimination of identified barriers will strengthen Illinois families and communities as well as the low-wage workforce across the state. Income supports translate into more eligible individuals and families meeting their basic needs for food, health care, and monthly income. This benefits those individuals and families by giving them added supports to maintain employment, improve child and family well being, and escape poverty. Communities benefit through the infusion of new dollars into the local economy. According to USDA, every \$5 spent on Food Stamps has an economic impact equal to \$9 in the community through additional spending and job creation. The state of Illinois also benefits through the efficient use of state resources for service delivery, maximizing opportunities to draw federal match, and through the taxes received from a more robust economy. Ultimately, Illinois benefits in both the short and long term.

By focusing on the following solution areas, Illinois can make wise investments in its income support programs and services for low-income individuals and families:

1. Integrate effective use of technology
2. Streamline and simplify existing policies
3. Utilize existing resources effectively and efficiently
4. Institute standardized quality control measures

Across these areas of recommendation, the Task Force strongly recommends that the state continue to pursue a system that offers multiple points of entry and access for applicants and recipients – in person at local state offices located in the community, via postal mail, phone, fax machine, email or other electronic communication, or through a local service provider that is working closely with an eligible family. For example, the local IDHS office continues to serve as a central contact point at the local level. While technology makes it possible that not every recipient will need to frequent a local office, there are some recipients who will always need and should have access to this local contact point. Similarly, there are some individuals and families that, given their specific circumstances and needs, will require a greater level of case management than others. These services should be made available to those who need them. At the same time, technology offers new ways to share information and streamline and simplify application processing, updates to case information, and other functions that increase efficiency for clients and caseworkers alike. These mechanisms should be pursued while maintaining consideration for those clients who do not have access to technology or the necessary computer skills. Likewise, many low-income people and low-wage workers have established relationships and regular contact with community-based organizations such as child care providers, family support programs, and job training programs who are a natural ally for assistance in outreach and initiation of applications. Effective use of technology and expanded relationships with local community-based organizations are strategies that should be integrated into the solutions pursued across problem areas.

This report summarizes the findings of the Task Force and presents the department's responses.

I. FACILITATE CONNECTIONS BETWEEN EXISTING ELECTRONIC APPLICATION SYSTEMS

TASK FORCE RECOMMENDATIONS

- a) Align existing electronic systems where possible to maximize efficiency, ease user access, improve accuracy, etc. State systems should be able to share information/data easily and automatically, without manual re-entry of data. Conduct periodic joint assessment and planning across agencies to facilitate connections between existing systems. (short term recommendation)

- b) Further develop the existing IDHS or IHFS applications/systems to create an aligned platform within the state agencies and to allow for electronic submission. Take the best from each system and use compatible systems. (short term recommendation)
- c) Link electronic application with electronic verifications that support eligibility determinations, e.g., Social Security disability/SSI for AABD Medicaid; Food Stamp eligibility for child care subsidy; online birth records. (long term recommendation)
- d) Using the aligned electronic application platform, add other programs (including some that go beyond IDHS and IHFS) that make sense due to related eligibility factors, e.g. LIHEAP, free and reduced school lunch. (long term recommendation)
- e) Expand functionality of existing IDHS online/phone systems to include GA, AABD, TANF and Medical cases as well. (long term recommendation)
- f) Create a tracking mechanism to allow clients and community-based partners to monitor the status of applications electronically.(long term recommendation)
- g) Employ industry-standard encryption to ensure security of electronic information and processes.(long term recommendation)

IMPLEMENTATION RECOMMENDATIONS:

- Enhance state infrastructure – Formalize IT collaboration across state agencies administering income support programs.
- Allocate funding to align and further develop existing state electronic application systems – allocate existing or request new funds in the FY09 budget.

IDHS RESPONSE:

IDHS agrees with the recommendation. Additional funding is required to enhance the State’s current IT mainframe. Enhancements are needed to support Web-based solutions that allow clients and providers to begin the application process from home and community-based locations; and to support the interactive use of existing client data stored in the Human Service and Client Data Bases. Additional funding will be required to 1) enhance the current IT system, 2) develop the business requirements needed to implement an integrated human services IT system, capable of supporting the recommendations of the Task Force, and 3) for the development of this system.

HFS RESPONSE:

HFS is committed to further use of technological solutions to simplify the application process, as it has been over the past several years.

II. CREATE A THIRD PARTY INTERFACE

TASK FORCE RECOMMENDATIONS:

- a) Enter into agreements with third party providers to allow for online submission of Medicaid, SCHIP, TANF and Food Stamp applications as well as the ability to track applications and produce performance-based data.
- b) Allow verification documentation to be scanned and submitted via digital bridge accessible to third parties.

IMPLEMENTATION RECOMMENDATIONS:

- Develop external partnerships with third party entities for electronic submission of applications for income supports.
- Allocate funding to facilitate external use of the existing data bridge - allocate existing or request new funds in FY09 budget.

IDHS RESPONSE:

Development of multiple access to a Web-based application system is a goal of IDHS. Through the use of technology and a volunteer system of community partners, clients will be able to access income support services through multiple points of entry. This model has been successfully implemented in Florida and other states. Planning and recruitment for this volunteer system of community partners should begin immediately. Funding is needed for the development of a technological infrastructure capable of supporting multiple points of customer access to the income support eligibility system.

HFS RESPONSE:

As time and resources permit, HFS concurs that development of system interfaces supporting third party involvement could improve access to benefits.

III. REPLACE PAPER-BASED DOCUMENTATION SYSTEM WITH ELECTRONIC

TASK FORCE RECOMMENDATIONS

- a) Create a centralized, electronic system for the State of Illinois where verification of required documents is maintained. Equip the system with scanning technology and make it accessible to staff across relevant state agencies to verify client compliance. If the client has submitted a document to one state agency (as verified by the State system) the client should be found to be in compliance with requirements for the same documentation at other state agencies. The system must ensure appropriate confidentiality protocols are in place – see Quality Control recommendations

IMPLEMENTATION RECOMMENDATIONS:

- Revamp state infrastructure specific to document verification – develop a centralized electronic system.
- Allocate increased level of funding to build technological capacity – allocate existing or request new funds in the FY09 budget to build/align/operate joint electronic systems to document and verify eligibility.

IDHS RESPONSE

IDHS agrees that a centralized electronic approach to collecting, maintaining and accessing client verification is needed. In partnership with CMS the State's current IT infrastructure needs to be enhanced to support the recommendations of the Task Force. Funding to implement this initiative is required.

HFS RESPONSE:

HFS concurs with DHS and further notes that work has already begun to replace paper files with imaged files in the Bureau of All Kids. HFS relies heavily on electronic verification of information whenever possible. Care must be taken to assure that electronically obtained verifications are as valid as hard copy to preserve audit trails.

IV. EXPAND LOCAL OFFICE BUSINESS HOURS

TASK FORCE RECOMMENDATIONS:

- a) Limit requirements for local office attendance of clients involved in activities during business hours to those requirements that fit with their activity schedule.
- b) Conduct needs/utilization analysis for extended office hours based on client activity – assess number of clients who would use local office beyond standard operating hours through survey of existing clients.
- c) Within the next fiscal year, institute pilot to provide expanded office hours in areas of indicated need with appointments to ensure clients are able to see workers.

IMPLEMENTATION REQUIREMENTS:

- Revise state policy – Revise requirements for local office attendance.
- Allocate new or existing funds to pilot the use of extended office hours in FY09 budget.

IDHS RESPONSE:

IDHS in FY'07 opened a Welcoming Center for immigrants and other seeking state services. This office has expanded hours including Saturday's. Utilization data from this office can be used to determine need for altering established hours of operation. Furthermore, through technology and an expanded system of community volunteers, clients will have access to services during non-traditional hours. The labor contract governs the work hours of caseworkers. Changes in the bargaining union contract need to occur before operating hours can be changed. Current provisions in policy and procedures allow for making special arrangement for employed clients whose work hours conflict with our office hours.

HFS RESPONSE:

Individuals are not required to appear in person to apply for medical benefits.

V. INCREASE FLEXIBILITY OF LOCATION OF APPLICATION SUBMISSION

TASK FORCE RECOMMENDATIONS:

- a) Create “No wrong door” by allowing applicants to submit initial applications for FS, Medical and/or TANF at any IDHS local office.
- b) Establish formal relationships with local community based agencies to partner with the state to initiate the application process (similar to AKAA model in place at IHFS). State staff will continue to serve in the role of determining eligibility, monitoring case activity and compliance with requirements, providing case management services, and related work. CBO staff will conduct outreach, screen clients for eligibility, and assist them in completing an application. (Short Term)

IMPLEMENTATION RECOMMENDATIONS:

- Revise state policy/procedure – submitting applications, partner with CBOs.
- Allocate new or existing funds to establish partnerships with community based organizations to assist with screening and application submissions in FY09 budget.

IDHS RESPONSE

We support a “No Wrong Door” approach to servicing clients. A technological solution is the most economical and preferred approach. Funding is needed for the development and implementation of an IT infrastructure to support the Task Force's recommendations.

HFS RESPONSE:

HFS concurs with DHS.

VI. PROVIDE LANGUAGE ASSISTANCE

TASK FORCE RECOMMENDATIONS

- a) Conduct annual analysis of applicant/client language services needs by local office, and eligibility-service entry point.
- b) Assess and publish current IDHS and IHFS capacity to meet LEP needs with existing local office/central unit staff/established CBO partnership, including the anticipated impact of “No wrong door” policy change.
- c) Hire additional bilingual staff as needed to adequately serve assessed client need in each local office and comply with related laws and consent decrees. Assure appropriate levels of bilingual supervisors as needed to oversee staff work.
- d) Increase partnerships with community based organizations that can provide language assistance via trained or qualified interpreters to non- and limited-English speakers as needed.
- e) Conduct annual assessment of client need vs. departments’ capacity.

IMPLEMENTATION RECOMMENDATIONS

- Direct state agency management to conduct periodic assessment of need.
- Revise state policy/procedure to ensure appropriate services for limited English customers.
- Allocate new or existing funds in the FY09 budget to employ adequate levels of bilingual staff to meet assessed need and to create partnerships with CBOs to provide translation and interpretation services.

IDHS RESPONSE

Through IDHS's Smart Path initiative a Limited English Proficiency work group has been established to address these issues. Some activities scheduled as a result of the workgroup are workshops on cultural competency, immigrant eligibility, and interpreter resources for staff. The workgroup developed a customer service plan for IDHS offices, addressing how to improve the delivery of services to limited English persons.

An annual assessment of needs is conducted by IDHS Office of Hispanic/Latino Affairs. With the involvement of the Limited English Proficiency work group, the assessment was expanded to include languages other than Spanish. The assessments were originally conducted at Family Community Resource Centers, but the workgroup expanded the use of the assessment to other IDHS Divisions. The workgroup also conducted an assessment to determine, in addition to Spanish, what were the top languages spoken by IDHS clients. IDHS forms, pamphlets, posters and other materials are now available in those languages.

IDHS Outreach and Interpretation Program works with CBOs to enhance access to benefits for immigrants. Through this program, we are working on expanding resources in Regions II and III, and translating program material for our new LINK phone service into Arabic, Chinese, Polish, Spanish and Urdu.

Finally, our Administrative Directives provide guidance on how workers can communicate with limited English customers in the most effective and efficient way. The recommendations of the Task Force will be forwarded to the Limited English Proficiency work group.

HFS RESPONSE:

HFS concurs with DHS and adds that HFS's client contact occurs primarily by phone. The department employs bilingual staff to communicate with Spanish speaking callers. The department uses three-way telephone interpreter calls to communicate with persons speaking languages other than English or Spanish.

VII. REPLACE JOINT CASE ASSESSMENT PROCESS

TASK FORCE RECOMMENDATIONS

- a) Institute electronic cross-matches with available data sources, including: IDES employment and wages, Social Security Administration, County birth records (where available).
- b) Create a three-step intake/assessment process for FS, Medical and TANF – Stage 1 is a simplified intake where basic information is consistently collected on the applicant; using the single application for all programs, they are screened for all, and applicants are asked to make informed choice of which to apply for; and applications are submitted for the programs of their choice; Stage 2 includes automated verification of various eligibility factors on all applications; Stage 3 involves assigning TANF applicants to caseworkers for service planning and FS and Medical only applicants to a central unit for ongoing redetermination.
- c) Create a central unit to process FS and Medical only applications and redeterminations, similar to the IHFS All Kids unit, as another point of entry into the IDHS/IHFS system. Central unit staff will be available via a 1-800 hotline and will be able to access client case files to input data submitted by the recipient and to provide case information, requirements, etc. to clients.

IMPLEMENTATION RECOMMENDATIONS

- Revise state policy/procedures – Address new application and intake process, partner with CBOs.
- State agency infrastructure - creation of electronic systems, creation of central unit.

IDHS RESPONSE

IDHS agrees that our service delivery system needs to be revamped. A technological approach will address many of the recommendations of the Task Force. We also agree that realignment and redistribution of staff are needed. We recommend that the labor contract be amended to eliminate geography as the mechanism for determining staff work sites and caseloads. This recommendation needs to be implemented in partnership with CMS and AFSCME.

HFS RESPONSE:

HFS already relies heavily upon electronic cross matches to verify data wherever possible and is always open to improving upon these processes as long as individual privacy protections and program integrity are adequately addressed.

VIII. ESTABLISH DATE OF APPLICATION AUTOMATICALLY

TASK RECOMMENDATION

- a) Create a system where all applications are registered electronically immediately at the time of submission (by the applicant or a representative) and a confirmation letter is generated and given or sent to each applicant or his/her designee (with a copy retained in the case file), including the date submitted, the local office and staff person involved, and the program (s) the applicant (s) is (are) applying for.

IMPLEMENTATION RECOMMENDATIONS

- Revise state policy/procedure – Include application confirmation step.
- Create electronic system to track submissions and automatically generate letter of confirmation.

IDHS RESPONSE

IDHS concurs with this recommendation, and we are moving in this direction, but as aforementioned, the State's IT infrastructure needs to be enhanced to support the recommendation and additional funding is required. We received funding from the federal government to design and test an online application. Our on-line application was designed to register an application automatically and give an automated confirmation when an application is submitted. It is currently not operating because of problems with the State's IT infrastructure.

HFS RESPONSE:

HFS already has a process in place to notify facilities as soon as applications are registered that result in a child being found presumptively eligible for All Kids, and generally concurs with the recommendation, although some of the specific information requested may not be available in all cases.

IX. STREAMLINE INCOME-COUNTING POLICIES

TASK FORCE RECOMMENDATION

- a) If Illinois has the opportunity, secure additional federal funding for health (including Illinois' future SCHIP allocation) with changes in the state plan.
- b) All Family Health Programs should use same income counting methods for earned income – using Work Pays as the standard. In effect this will count net instead of gross income, focusing on the income families actually have access to spend. The Task Force assumes that the state will pursue options that maximize revenue.
- c) Streamline TANF policy to count all earned income using the “Work Pays” methodology, whether at application or at redetermination.
- d) Attach the Work Pays methodology to the poverty level so that the level at which families are no longer eligible is, at a minimum, equivalent to the poverty level.

IMPLEMENTATION RECOMMENDATION

- State policy – income counting policy, TANF income eligibility threshold.
- State plan – include SCHIP changes as needed to secure additional federal revenue.

IDHS RESPONSE

A TANF Work Group chaired by the Assistant Secretary is reviewing this and other recommendations for the TANF Income Assistance program. The recommendations of the Task Force will be forwarded to this group for review and consideration. Any changes in this program will require funding and budgetary approval from the legislatures and/or the Governor's Office of Management and Budget.

HFS RESPONSE:

Given recent federal inaction on the reauthorization of the State Children's Health Insurance Program, the future availability of additional resources from that program is uncertain. HFS does not agree that it would be prudent to apply the Work Pays income counting policy to all Family Health Plans. This would, in effect, move many eligible families out of the income range eligible for SCHIP reimbursement and into the range eligible for Medicaid reimbursement. That would reduce the state's reimbursement from \$.65 to \$.50 for every dollar claimed. A better solution, and the one the Governor has already adopted, is to increase the income thresholds for All Kids and FamilyCare.

X. INCREASE OR ELIMINATE ASSET LIMITS

TASK FORCE RECOMMENDATIONS

- a) Eliminate the consideration of assets in determining eligibility for TANF/GA.
- b) Eliminate vehicles as countable assets with respect to the Food Stamp Program.

IMPLEMENTATION RECOMMENDATION

- State rules/policy – increase/eliminate asset limits.

IDHS RESPONSE

IDHS supports the elimination of certain assets in determining eligibility for TANF and General Assistance programs. In FY'06, the proposed administrative rule disregarding savings as an

asset was rejected based upon the projected increase in eligible clients and hence increase in funding required for these programs. With legislative and funding support these recommendations can be implemented. Furthermore, current TANF and GA asset disregard policies for a two person household exempts up to \$3,000 in savings, an applicant's home, clothing, household furnishing, automobile (one per unit) , donations from benefits for seriously ill clients, and savings accumulated from a child's earning. The above listing is not all inclusive but is representative of assets that are exempt.

In regards to the federal food stamp clients, IDHS utilizes the federal option to allow families to own a vehicle. IDHS automatically excludes one licensed vehicle per household. If a household has more than one vehicle there are 7 additional reasons that can be used to totally exempt the other vehicle(s).

HFS RESPONSE:

The recommendation does not apply to HFS.

XI. EASE DOCUMENTATION AND VERIFICATION REQUIREMENTS

TASK FORCE RECOMMENDATIONS

- a) Eliminate unnecessary, duplicative documentation requirements by defining the purpose and designating the best verification to achieve that purpose with preference for electronic cross match for verification.
- b) Align documentation requirements wherever possible – allowable forms, frequency, etc. , and utilize electronic systems.

IMPLEMENTATION RECOMMENDATIONS

- State policy/procedure – required verification documents.

IDHS RESPONSE

We agree that when feasible documentation requirements should be aligned across the various programs and that electronic cross-matches should be the primary source of documentation when available. IDHS currently uses electronic cross-matches to verify SSA, SSI, unemployment income, citizenship and in some instances identity.

HFS RESPONSE:

HFS concurs with DHS. In addition, the most imposing obstacle for documentation requirements may be those associated with citizenship and identity. As the federal government has recently established very tough new standards, Illinois must continue to request that applicants and recipients produce qualifying documents.

XII. ALLOW CLIENT TO CHOOSE LOCATION WHERE CASES ARE HOUSED

- a) Allow clients to self-identify the IDHS local office where they'd like their case to be housed, consistent with their residence, work location, child care location or related connection to a certain community. Once an office has been identified by the client, their case will continue to be housed at that office until their next redetermination period, unless individual/family circumstances change.

IMPLEMENTATION RECOMMENDATIONS

- State policy/procedure – case assignment to a local office.

IDHS RESPONSE

A technological solution is the preferred method for implementing this recommendation. Staff resources and current technology prohibit implementation of this recommendation without technological enhancements.

HFS RESPONSE:

The recommendation does not apply to HFS.

XIII. REDUCE FACE-TO-FACE INTERVIEWS

TASK FORCE RECOMMENDATION

- a) Implement federal waivers of face-to-face interviews for a broader group of applicants and clients; reducing local office caseworker time spent on face-to-face interviews would greatly enhance case management in the local offices, allowing staff to focus on critical tasks.
- b) Implement use of phone interviews whenever possible to reduce traffic in the local office.

IMPLEMENTATION

- Federal waiver implementation.
- Infrastructure improvements to local office phone systems.

IDHS RESPONSE

Face-to-face interviews in some instances serve to increase client accountability and program accuracy. In the case of the food stamp program, granting of such waivers are dependent upon the State's food stamp accuracy rate. IDHS does agree where feasible waiving face-to-face interviews and other efficiencies should be implemented. Some procedures consistent with this recommendation are currently in place, i.e., Food stamp telephone and earned income redeterminations and hardship circumstances. Furthermore, an antiquated telephone system limits staff's ability to service clients' via the telephone. Additional funding is required to improve the phone system infrastructure.

HFS RESPONSE:

The recommendation does not apply to HFS.

XIV. ELIMINATE EARNFARE MONTHLY RECERTIFICATION MEETINGS

TASK FORCE RECOMMENDATIONS

- a) Allow Earnfare clients to meet monthly responsibility for communication with caseworker by faxing or emailing in a copy of the employer verification form.
- b) Require Earnfare employers to issue transportation cards/transportation assistance as part of their role with the program.

IMPLEMENTATION RECOMMENDATION

- IDHS policy/procedure – Earnfare activity requirements, partner with employers.

IDHS RESPONSE

IDHS does not accept this recommendation. Client contact is an essential variable in assisting individuals overcome barriers impacting employment.

HFS RESPONSE:

The recommendation does not apply to HFS.

XV. SIMPLIFY SPEND DOWN PROCEDURES

TASK FORCE RECOMMENDATION

- a) Simplify spend down procedures by implementing pre-pay spend-down option enacted in Public Act 94-847.

IMPLEMENTATION RECOMMENDATION

- State rules/policy – implement pre-pay spend-down option.

IDHS RESPONSE

IDHS agrees with this recommendation, no other response.

HFS RESPONSE:

HFS and DHS have collaborated on the development of the Pay-In Spenddown Program. It is scheduled to take effect early in 2008.

XVI. PROVIDE ALTERNATIVE MEANS FOR REPORTING CASE INFORMATION

TASK FORCE RECOMMENDATIONS

- a) Create walk-in or phone scheduling of local office appointments.
- b) Create an express desk in each local office where clients can submit updates and related case information, to be entered at the point of contact and a confirmation document given to the client outlining the activity, information and date.
- c) Provide means for electronic communication with caseworkers - email addresses for clients to report changes, in-office kiosks that allow for case information change submission.
- d) Create multiple service points for clients to submit updated case information and complete redeterminations – Central unit and/or 1-800 number for -FS and Medical only redeterminations in addition to local offices.

IMPLEMENTATION RECOMMENDATION

- State policy/procedure – local office appointments, express process. Also see recommendations for Technology section 1.
- FY09 budget – allocate new or existing funds to expand current phone system, create email accounts.

IDHS RESPONSE

IDHS agrees with this recommendation. Funding for the retooling of the service delivery system as well as additional staff is needed to implement the recommendations of the task force.

HFS RESPONSE:

HFS concurs with DHS.

XVII. ALIGN TIMING OF REDETERMINATIONS

TASK FORCE RECOMMENDATION

- a) Align redetermination timeframes where possible.
- b) Allow redetermination for one program to count for related programs as well.
- c) Incorporate redetermination verification documents into electronic system accessible to various state agencies.

IMPLEMENTATION RECOMMENDATION

- State policy/procedure – redetermination timing and scope.

- FY09 budget – allocate new or existing resources to develop technology infrastructure.

IDHS RESPONSE

IDHS has aligned redetermination time-frames and documentation requirements across programs, when feasible. Additional funding is required to further develop the technological infrastructure needed to incorporate verification documents into an electronic system accessible to various state agencies. Implementation will also require a high level of collaboration and coordination between involved agencies.

HFS RESPONSE:

HFS agrees with DHS and further notes that medical eligibility redeterminations are already highly integrated with those of cash and food stamps.

XVIII. CAPTURE MAXIMUM FEDERAL MATCH FOR FOOD STAMP OUTREACH

TASK FORCE RECOMMENDATIONS

- a) Advertise availability of Federal reimbursement to CBOs and other agencies with vested interest in Food Stamp enrollment. IDHS and CBO negotiate a contract and seek approval from USDA.
- b) Extend USDA reimbursement for Food Stamp outreach to include funds spent by CBOs and schools involved in activities such as 1) public education, including distribution of information on potential Food Stamp eligibility, 2) pre-screening of individuals for potential eligibility, and 3) helping individuals fill out application forms and obtain verification documents.

IMPLEMENTATION RECOMMENDATIONS:

- State practice – Petition USDA to approve outreach initiatives undertaken by CBOs and schools and coordinated and approved with the Illinois Department of Human Services (IDHS).

IDHS RESPONSE

In November 2007, IDHS was recognized by the U.S. Department of Agriculture (USDA) for its effectiveness in reaching those families in need of assistance through the Food Stamp Program. The rate of participation in Illinois is up to 75 percent according to recent surveys, improving participation six percent from the previous year and 10 percent higher than the national average. IDHS will explore additional ways to expand food stamp outreach and receive federal reimbursement, including exploring operating a pilot program with specific food banks for information dissemination, pre-screening and application assistance. As USDA reimbursement for this outreach program would be fifty-percent, additional funding to implement and operate the initiative will be required.

HFS RESPONSE:

The recommendation does not apply to HFS.

XIX. SUPPORT SURVIVORS OF DOMESTIC VIOLENCE

TASKFORCE RECOMMENDATION

- a) Streamline the process to obtain and maintain a waiver of any TANF program requirement, including the work requirement, under the Family Violence Option/Domestic Violence Exclusion.
- b) Eliminate the need for monthly (or more frequent) reassessments/redeterminations and meetings - follow Federal law on the timing of reassessments/redeterminations and when waivers are available and the time of waivers granted. Federal law states that waivers be granted appropriately based on need, as determined by an individualized assessment by a person trained in domestic violence, and may be granted for as long as six months before a reassessment/redetermination is necessary.

IMPLEMENTATION RECOMMENDATION

- State policy/procedure - Streamline policies around FVO/DVE.

IDHS RESPONSE

As aforementioned, a TANF Work Group chaired by the Assistant Secretary is reviewing recommendations for the TANF Income Assistance program. The recommendations of the Task Force will be forwarded to this group for review and consideration.

HFS RESPONSE:

The recommendation does not apply to HFS.

XX. UPDATE STRUCTURE OF LOCAL OFFICE WORKFORCE

TASK FORCE RECOMMENDATION

- a) Identify agency goals and related model for key local office functions, e.g. clerical, intake, casework.
- b) Assess current staffing structure and formula for determining caseworker to client ratio compared to goals and data on current caseload, related trends, changes resulting from community partnerships, new staffing model utilizing key functions, and three-step intake process (See previous recommendation)
- c) Update local offices staffing structure/requests for key staff positions to reflect needs for various key functions, including bilingual caseworkers as well as supervisors.

IMPLEMENTATION RECOMMENDATIONS

- State agency infrastructure- update job functions and job descriptions, staffing structure, staffing formula development and monitoring.

- FY09 budget allocation of new or existing resources to update/implement local office workforce structure.

IDHS RESPONSE

In 2007, consultants completed an analysis of IDHS' staffing structure relative to its client ratio. As stated earlier, we agree that realignment and redistribution of staff are needed and recommend that the labor contract be amended in partnership with CMS and AFSCME.

HFS RESPONSE:

The recommendation does not apply to HFS.

XXI SYSTEMATIZE A QUALITY CONTROL SYSTEM

TASK FORCE RECOMMENDATION

- a) Establish effective quality control system of monitoring for local offices, central units, and CBOs involved with applications to ensure business integrity.
- b) Include specific processes to address heightened confidentiality issues with regard to domestic violence, sexual assault, HIV/AIDS and other sensitive areas.
- c) Monitor implementation of industry-standard encryption to ensure security of electronic information and processes.

IMPLEMENTATION RECOMMENDATION

- State agency management – design and implementation of monitoring system(s).

IDHS RESPONSE

IDHS recommends enhancing our current on-line application to a fully operational, multi-program electronic application system for submission, processing and monitoring, which would allow the local offices, CBOs and clients to track and review the application status as it goes through the different phases of the process. An encryption method to control access to data and enhance data security is also recommended. Improving the State's current IT mainframe to support this and other Web-based solutions, will require additional funding.

HFS RESPONSE:

HFS is committed to ensuring the integrity of the eligibility determination process and to fully protecting individual confidentiality as required by many state and federal laws - the most notable among these pertaining to health information being the Health Insurance Portability and Accountability Act.

Appendix 1 – Priority Recommendations

The following recommendations outline areas of priority where allocation of new or existing funds is needed to make the recommended changes. They have been organized in order of priority by members of the Task Force on Access to Benefits and Services, with 1 being the highest priority.

1. Build technological capacity – Build/align/operate joint electronic systems to document and verify eligibility (Section III, page 5)
2. Align and further develop existing state electronic application systems (Section I, page 4)
3. Update/implement local office workforce structure (Section XX, page 17)
4. Employ adequate levels of bilingual staff to meet assessed need (Section VI, page 7)
5. Expand current local office phone system, create email accounts (Section XVI, page 14)
6. Pilot the use of extended office hours at local offices (Section IV, page 6)
7. Facilitate external use of a data bridge for submission of electronic applications from 3rd parties (Section II, page 5)
8. Develop technology infrastructure (to allow alignment of redeterminations) (Section XVII, page 15)
9. Establish partnerships with community based organizations to assist with screening and applications submissions (Section V, page 7)

Appendix 2 – Introduction to Task Force report to the Departments

The following text was included in the final Task Force report submitted to the Departments in October 2007. It is included here to provide context to the Task Force's recommendations.

Background on income supports

The origins of many state administered income support or public benefit programs can be traced to the War on Poverty programs enacted by the Federal government beginning in the 1960s. Historically, the Federal government has played a central role in designing as well as funding public benefit and entitlement programs such as cash assistance, Food Stamps, and medical assistance for low-income people. For decades, the Federal government and state governments have shared responsibility for the programs, with increasing flexibility given to the states in the last two decades. State Governors and legislatures have utilized Federal block grants, waivers, and pilots to design and implement state programs. Thus, states play a critical role in establishing eligibility standards and benefit levels, and equally important, in designing and administering the systems by which eligible people access programs such as Temporary Assistance for Needy Families (TANF cash assistance), Food Stamps, and Medical Assistance (Medicaid and State Children's Health Insurance Program). Illinois – through its Governor, the legislature, and the administering state Department of Healthcare and Family Services and Department of Human Services – has consistently shown national leadership in taking the opportunity to make programs more effective and responsive to the needs of clients in their design. In many areas, Illinois is a leading state in moving adults receiving TANF into employment and in effectively expanding health care coverage.

In more recent years, Illinois policymakers wisely recognized that the old paradigm for income support programs was changing dramatically. Today the typical participant is an adult who is working or unable to work due to disability, survival of domestic violence, or care for a child. To effectively reach this different demographic, leaders in Illinois government understood and highlighted the importance of encouraging, supporting, and sustaining low-income individuals and families in their efforts to improve their economic status through employment. The Illinois General Assembly thus directed that low-income people and their families be determined eligible for and receive benefits, income supports, and services. Specifically, the Governor and the General Assembly have specified program designs, policy options, and eligibility standards for Illinois' public benefits programs intended to provide income and other support to low-income workers. Despite this leadership focus, many eligible people and families that state leaders intended to receive support do not access or receive the maximum possible benefits and services in a timely way. In part, this is due to disparate federal requirements and complex program rules. This is also due to complex and costly information systems requirements, a disconnect between the needs of an evolving caseload and the processes and approaches currently in place, and budgetary constraints.

Illinois' service delivery system, by which families attempt to access many of these programs, is a prime candidate for improvement for greater efficiency and effectiveness in achieving desired

outcomes. The application processes for income support programs used today are primarily the same as those used when the programs served mostly unemployed persons or families; they are not designed to accommodate a person on a working schedule. Technology systems and business processes in place at state agency local offices are outdated and inefficient. Communities and our state as a whole also suffer when these barriers prevent full utilization of available financial resources from the federal level. The effectiveness of the income support programs our state has put in place is being undermined by a service delivery system that too often serves as an unintended barrier rather than a vehicle to deliver support to the eligible worker, adult or child. Investments in technology, adequate state agency staff, expanded partnerships with community-based organizations, and streamlined policies can lead to significant gains in improving access and efficiency.

Critical supports for low-wage workers

In Illinois there are 476,787 working poor individuals - the number of 16 year olds or older who worked full-time, year-round or worked part-time or part-year, but still fell below the poverty line. There are nearly 2.5 million Illinoisans, 19.8% of the population, living at or below 150% of the Federal Poverty Line (\$24,135 for a family of three). The majority of these families are eligible for one or more income support programs such as Food Stamps, All Kids and FamilyCare health insurance, TANF, and Child Care. These programs provide families with critical supports that help them meet basic needs, maintain employment and escape poverty.

Income supports have value that extends beyond their dollar amount. Obviously, income supports help balance a family's monthly budget. In addition, research shows that supporting low-wage workers in meeting their families' needs produces other critical outcomes. Workers are more productive when family responsibilities are adequately addressed. Children do better in school when other aspects of their lives are stable. Employers benefit from added stability in the workforce. Communities experience the increased purchasing power of consumers. By strengthening Illinois' income supports system, more Illinois families and communities will realize economic stability. This has been and continues to be the goal of the Governor and the General Assembly in Illinois. It is a wise, family-supporting, health-promoting, community-strengthening, and cost-effective investment for the State of Illinois to make.

Utilization trends in Illinois

Over the past several years, Illinois has been successful at maintaining and expanding various income support programs. In the past 6 years there has been a 57% increase in the number of Illinois households receiving Food Stamp benefits, while there have been few changes made to eligibility criteria for the program. Illinois has led the nation in effectively expanding health insurance for children and low-income parents in recent years; the number of Illinoisans who are enrolled in government family health plans has nearly doubled – 668,560 additional Illinoisans. At the same time, Illinois has seen significant reductions in its TANF caseload since welfare reform was enacted. Illinois' pre-welfare reform caseload in January 1995 totaled 240,013 families/cases. By January 2007, Illinois' TANF caseload had dropped to 36,704 with the majority of the decline happening in the early years post welfare-reform.

As many of these heads of households entered the workforce and no longer were eligible for cash assistance, their incomes continued to be low enough that they and their families remained eligible for Food Stamps, healthcare coverage such as Medicaid, KidCare or All Kids, Child Care subsidies, and other income supports. Taken together, the health insurance, Food Stamps, and TANF related caseload shifts in Illinois have resulted in an overall increase in utilization. From 2001 to 2005, Illinois' public benefit programs have experienced a 43% increase in utilization. Yet many who are eligible are not applying – often due to health reasons, inability to get to an office to apply, or understandable reluctance to lose hourly employment earnings in order to visit the IDHS offices to become eligible. As a result, many apply for only one program because the provider with whom the individual is working can readily and efficiently take that application, but is unable or unauthorized by the State to take applications for additional income support programs for which the family may be eligible.

Recent data analysis indicates that the utilization growth Illinois has experienced falls short of the actual need and number of people eligible to receive income supports. According to the Center for Economic Policy Research, there remain substantial gaps between the numbers of Illinoisans who are eligible for various income support programs and those that are actually receiving them. For example, 75% of eligible Illinoisans received Food Stamps and only 21% of those eligible for temporary cash assistance actually receive the benefit. This data demonstrates a current and growing need to address the issue of access to income supports.

1. Integrate effective use of technology

Building a service delivery system with the technological capacity to implement efficient, modern business practices is essential to maximize scarce resources, deliver quality service, and ease client access to programs and services. The effective use of technology creates opportunities to simplify duties required of caseworkers and other state staff and to limit unnecessary administrative requirements placed on clients. Much of the technology in place in local offices is outdated or non-functional, impeding state operations, case management, and communication between clients and caseworkers. Clients must bring in multiple copies of the same documents as they are lost within the paper-based system. IDHS and IHFS have and are investing significant resources in electronic application systems to better serve clients and these efforts should be aligned or compatible in several key areas. Efficient and effective use of web based technology and state agency staff as well as the network of providers who interact with clients will greatly enhance Illinois' ability to meet the needs of its low-income and working poor residents.

2. Streamline and simplify existing policies

In general, the federal laws governing various income support programs allow flexibility in the design and implementation at the local level. Illinois has led the nation in creating innovative and effective policy in many areas, yet there are several areas of Illinois policy that do not maximize this flexibility and subject clients as well as caseworkers to complete unnecessary, duplicative requirements. Many groups are required to come in to the local office to complete a face-to-face interview at application as well as periodic redeterminations. Recipients are required to submit information and paperwork to their caseworker but often don't have reliable

access to caseworkers. Clients are often required to submit copies of documents on multiple occasions, even though much of the needed information is already present in one or more state systems, sometimes in a different file in the same local office. Recent changes in the TANF program have significantly reduced flexibility in terms of verification and work activities, creating new challenges. Streamlining this data gathering process and increasing efficiency are desirable and achievable goals. Changes in technology and new partnerships with community-based organizations will facilitate and support these needed changes.

Based on the outdated Federal policy assumption that low-income persons are not employed, many of the application policies and procedures in place at Illinois Department of Human Services (IDHS) local offices, where families apply for most income support programs, create barriers and a disincentive to work, or barriers to those unable to work. Most offices are open during standard 8:30 to 5 business hours, when many recipients are on the job and have limited or no access to a phone. Applicants and recipients are required to use the IDHS local office assigned to their home address, even if another local office is more conveniently located near their workplace or child care provider. The local service delivery infrastructure has not kept pace with the technology available to simplify and streamline business practices, thus making things harder for working recipients and caseworkers alike. Likewise, income and asset counting policies are confusing and often serve as a disincentive to behavior that promotes long-term economic success – namely increased earnings and saving. In other words, there is room to improve, based on the changing utilization and demographics plus the advances in technology, to make significant improvements in customer service not only possible, but easy to accomplish.

3. Use existing resources effectively and efficiently

Illinois has a network of local offices across the state where low-income families go to apply for and access income supports, yet the vision of an integrated, efficient, accessible, and helpful human services agency has yet to be fully realized. Clients experience long waits to see a caseworker or even submit an application for benefits. Families and service providers alike express problems trying to get and stay in touch with local office staff. Changing demographics and language requirements further complicate communication. Existing staff resources are not configured in a way to meet the current needs of the caseload. These gaps in how resources are allocated create unnecessary barriers and inefficiencies for clients and state caseworker staff alike. Given the unpredictable nature of demographic and eligibility changes, the operations and processes of application taking and eligibility determination need to be streamlined and made more responsive and effective. Illinois can and should strive to do better.

4. Institute standardized quality control measures

One of the state's primary areas of responsibility in administering public benefit programs is ensuring the intended, appropriate and efficient use of taxpayer funds. In recent years Illinois has received awards for improvements to quality, such as a multi-million dollar award IDHS received for improving accuracy in the Food Stamp program. Illinois must continue to focus on ensuring accurate and consistent implementation of policy, especially in those areas that lie beyond the scope of Federal monitoring but are nonetheless important to access for the client and efficiency for the state. Additional recommendations above, such as use of innovative

technology, will require new quality control mechanisms.

Conclusion

The solutions outlined in this document combine the efficient use of today's limited resources with the investment that is necessary for longer-term cost and staffing efficiencies. These solutions build on existing systems and infrastructure, both within the local offices and by leveraging the relationships that CBOs have with the working poor, to reduce and remove the access barriers that currently exist. Renewed investment is needed to fully realize the potential of Illinois' programs for the working poor, those that have earned Illinois national attention such as FamilyCare and All Kids, the child care subsidy program, and the Work Pays policy under TANF, as well as Food Stamps and federal tax credits.

A strong service delivery system, one that maximizes efficiency and existing resources, is critical to ensure that Illinois residents are able to fully benefit from these valuable programs. It is in our collective best interest as a state to ensure that low-wage workers and working poor families are able to access timely the maximum possible benefits and services that can help meet day-to-day needs while remaining engaged in the workforce. To that end, the Task Force on Access to Benefits and Services respectfully submits these recommendations to the State of Illinois.

Appendix 3 – Members of the Task Force on Access to Benefits and Services

The members of the Task Force include a diverse group of income supports experts with decades of experience working with applicants and recipients at the local level, analyzing related state and federal policy and laws, administering programs within state government, advocating for change, and in monitoring utilization and access trends across Food Stamp, medical and cash assistance programs. *Indicates Steering Committee Member.

Appointed Members

Joseph Antolin *
Heartland Human Care Services

Diane Doherty *
Illinois Hunger Coalition

Michael Lelys
Springfield Community Federation

Diane Fager
Chicago Public Schools

Robyn Gabel
Illinois Maternal and Child Health Coalition

Laura Gallagher-Watkin
Health and Disability Advocates

Lucia West Jones
Northeastern Illinois Area Agency on Aging

Rose Karasti
Chicago Jobs Council

So Young Kim
Korean American Community Services

Candace King
DuPage Federation on Human Services Reform

Angel L. LaLuz, Jr.

Greater Chicago Food Depository

Maria Esther Lopez
El Valor

Henry H. Martinez
Illinois Latino Research Institute

Ron Melka
United Way of Illinois

Joan Palmer
The University of Chicago School of Social Service Administration

Eli Pick
Ballard Healthcare

Wendy Pollack
Sargent Shriver National Center on Poverty Law

Tony Quinn
Lake County

Benny Rubio
Lawndale Christian Health Center

Phyllis Russell
Work, Welfare and Families

Gregory Washington
Grand Boulevard Federation

**Illinois Department of Human Services
Participants**

Marva Arnold *

Nancy Crossman

Michelle Hare

Sharon Dyer-Nelson

**Illinois Department of Healthcare and Family Services
Participants**

Jacquetta Ellinger *

Victoria Nodal

Jamie Ursch

Glenda Mason

Ginny Hill-Shannon

Debbie Watkins

Kathy Chan

Other Participants

Gina Guillemette*
Heartland Alliance for Human Needs & Human Rights

Nelson Soltman
Legal Assistance Foundation of Metropolitan Chicago

Appendix 4 – Resolution creating the Task Force

This appendix contains the full text of HR 462, the House Resolution that created the Task Force on Access to Benefits and Services. Senate Resolution SR 218 was its companion bill in the Senate. Both resolutions were passed by the General Assembly in 2005.

WHEREAS, The General Assembly has created a number of programs that provide benefits and services to low-income people and families designed to encourage, support, and sustain their efforts to improve their economic status through employment, including cash assistance, food stamps, and medical assistance; and

WHEREAS, These programs are administered by either the Department of Human Services or the Department of Healthcare and Family Services; and

WHEREAS, A significant number of low-income people and families who are eligible for these benefits and services are served by both the Department of Human Services and the Department of Healthcare and Family Services; and

WHEREAS, Many eligible people and families may not access these benefits and services in a timely way because of disparate federal requirements, complex program rules, agency staffing challenges, and other administrative infrastructure issues; therefore, be it

RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE NINETY-FOURTH GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that there is hereby established a Task Force on Access to Benefits and Services to thoroughly review and analyze policies and procedures concerning applications and determinations of eligibility for cash assistance, food stamps, and medical assistance provided under the Illinois Public Aid Code and the Children's Health Insurance Program Act; and be it further

RESOLVED, That the Task Force shall be jointly appointed and convened by the Secretary of Human Services and the Director of Healthcare and Family Services no later than October, 1, 2005, shall meet at least 4 times during each State fiscal year, and may be comprised of members of existing advisory bodies and other appropriate individuals; and be it further

RESOLVED, That at a minimum, the review and analysis conducted by the Task Force shall encompass (1) barriers encountered by applicants, (2) requirements for face-to-face interviews, (3) locations where applications may be made, (4) locations where open cases may be maintained, (5) methodologies for counting income, (6) requirements for documenting or otherwise verifying eligibility criteria, (7) establishing the earliest possible date of application, (8) coordination of redeterminations of eligibility, including the frequency of redeterminations, and (9) acceptable methods for submitting information and required documentation whether in person or by phone, facsimile, or electronic transmission; and be it further

RESOLVED, That (i) the Task Force and the departments, based on the review and analysis, shall collaboratively develop recommendations for appropriate changes in law, rules, policy, or process that will simplify, make uniform, or otherwise ease the processes by which potentially eligible persons may apply for and be found eligible for benefits and services and (ii) such recommendations shall include proposed timelines and priorities for implementation; and be it further

RESOLVED, That in making recommendations, the Task Force and the departments shall take into account and balance the following factors: (1) the need to comply with federal law and regulations to maximize federal financial participation; (2) the need to minimize administrative tasks for applicants, recipients, employees, medical providers, and authorized agents of the departments while maintaining program integrity; (3) the costs and potential savings associated with proposed changes; (4) the preservation of existing benefit levels for the substantial majority of recipients; and (5) the appropriateness and feasibility of obtaining waivers of federal law and regulations to maximize the goals of simplification and uniformity without the loss of federal financial participation; and be it further

RESOLVED, That the departments shall work in good faith to implement the recommendations to the extent they are appropriate and feasible given available time and resources; and be it further

RESOLVED, That the departments (i) shall jointly prepare a

written report of the review, analysis, and recommendations of the Task Force and the departments and any administrative changes developed by the departments as a result of the work of the Task Force, (ii) shall make a draft of the report available to the Task Force for review and comment, and (iii) shall prepare a final report to be submitted jointly by the departments to the General Assembly and to the Governor no later than January 1, 2007; and be it further

RESOLVED, That a copy of this Resolution shall be delivered to the Secretary of Human Services and the Director of Healthcare and Family Services.