CalFresh Outreach Plan



November 13, 2019

Report to Family and Human Services Committee (Revised)

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OVERVIEW

The CalFresh program, federally known as the Supplemental Nutrition Assistance Program (SNAP), is for people with low income who meet federal eligibility rules and want to expand their budget to put healthy and nutritious food on the table. The program issues monthly electronic benefits that are used to buy most foods at many markets and grocery stores.

In Contra Costa County, the Employment and Human Services Department (EHSD) administers the CalFresh program, serving about 33,000 households and 62,000 individuals monthly. In addition, CalFresh puts almost \$8 million into the local economy each month. As indicated by the U.S. Department of Agriculture, research shows that every \$1 provided in CalFresh benefits generates \$1.79 in economic activity. This economic stimulus – totaling about \$14.3 million a month in Contra Costa County last year – is almost exclusively Federal and State funded and provides an important boost to our local economy.

EHSD is committed to expanding and supporting participation in CalFresh for all who are eligible. In this report, we identify a number of steps we are advancing in order to bolster enrollment of CalFresh-eligible members in our community.

- Finalize Enrollment of Newly Eligible SSI/IHSS Population (CalFresh Expansion)
- Escalate Efforts to Maximize Dual Enrollment (Medi-Cal/CalFresh)
- Deepen Community Partnerships to Extend Reach and Increase Application Assistance
- Leverage Upcoming Opportunities from New Legislation

THE CALFRESH LANDSCAPE IN CALIFORNIA

For as beneficial as supplemental nutrition assistance is known to be, California has a low overall participation rate as a state (ranking 5th lowest in the country). In addition, participation is disproportionately spread among the regions and counties of the state, as measured by the California Department of Social Services (CDSS) Participation Rate Index (PRI).

Contra Costa County is situated in one of the lower PRI areas of the state, which include the Bay Area and Los Angeles. Based on CDSS data, seven of the nine Bay Area counties have participation rates lower than the state average. On the other hand, counties in the San Joaquin Valley and Inland Empire regions have disproportionately higher participation rates.

Although CDSS does not feature a map of PRI by county on their Web site, they have produced a map of Dual Enrollment (Medi-Cal recipients enrolled CalFresh) by county (attached). This shows a similar pattern to the PRI distribution; that is: relatively lower dual enrollment in the Bay Area and Los Angeles, relatively higher in the San Joaquin and Inland Empire regions.

There does not appear to be an accepted consensus on the factors causing these disparities. CDSS has been encouraged to review the accuracy of its Participation Rate Index (PRI), and we understand they are in the process of doing so now. If there are, indeed, elements of the formula that are not accurate or not equally relevant across the state, we hope they will be adjusted.



CONTRA COSTA COUNTY

We will welcome potential adjustments to the participation rate formula that may help us better understand how we are serving our community and, especially, how we can zero in on specific gaps.

However, we already know:

- The CalFresh participation rate in Contra Costa County is below where we want it to be.
- "Dual Enrollment" in Medi-Cal and CalFresh warrants improvement.
- There are tools that we can use some tried and true and some newly available to continue to reach and enroll more CalFresh-eligible members of our community.

Contra Costa County EHSD has engaged in efforts to increase CalFresh participation rates on an ongoing basis, mostly notably in collaboration with the CalFresh Partnership during the past several years. In addition, the Food Bank of Contra Costa & Solano used grant funding to support a number of mailings in 2018 to Medi-Cal clients without CalFresh. We have also tested sending letters and texts to existing CalFresh recipients, reminding them of their renewal dates to reduce disenrollment or "churn."

From the various CalFresh initiatives and pilots, we have learned:

- Mailings to Medi-Cal clients who were not enrolled in CalFresh resulted in positive response rates that averaged about 7%.
- There was a 6.2% improvement in CalFresh application success rates when a printed information sheet (packet wrapper) was wrapped around the set of papers given to an applicant when they walked into an EHSD service center to apply.
- Letters sent to CalFresh recipients as reminders to complete their renewals resulted in a 3.8% improvement in approval rates over the group that did not receive the letters. It is believed that the plain-language letters helped people better understand what was required of them for renewing their benefits, thereby reducing churn.

These experiences are consistent with findings reported by the SF-Marin Food Bank and the Alliance to Transform CalFresh, which have documented CalFresh enrollment strategies and results from several California counties, along with selected national research findings.

RESEARCH FINDINGS: INFORMATION, FOLLOW-UP AND ASSISTANCE

The Alliance to Transform CalFresh (ATC) is composed of leading non-profit organizations that have come together to advance the goal of moving California from a 66% participation rate in CalFresh to an 80% participation rate, with no county below 70% by the end of 2019. Founding members include the California Association of Food Banks, California Family Resource Association, California Food Policy Advocates



(CFPA), Los Angeles Regional Food Bank, SF-Marin Food Bank, Western Center on Law and Poverty, and the Catholic Charities of California.¹

In June 2017, the SF-Marin Food Bank, in partnership with the Alliance to Transform CalFresh and CFPA, prepared a paper entitled *Increasing CalFresh Participation through Medi-Cal In-Reach: Data & Practical Strategies*. A follow-up report was published by the Alliance to Transform CalFresh in February 2019, *Enrolling Medi-Cal Participants in CalFresh: What Works? Lessons from County-Level Experimentation in California and National Research*. A number of initiatives described in the papers have been tested in Contra Costa County, and there are additional ideas to try.

In the February 2019 ATC report, mailings, information and reminders continued to be noted as effective elements of the outreach mix. However, additional emphasis was placed on providing personal assistance

to CalFresh applicants as a way to increase the enrollment rate. This was especially true for seniors, who are under-represented in SNAP nationally and in Contra Costa (CalFresh) as well.

The Transform CalFresh paper describes an experiment conducted in Pennsylvania in which 30,000 seniors enrolled in Medicaid were randomly assigned to one of three equally sized groups. One group received no intervention; one received information only (a letter and follow up postcard); and the third group received the outreach materials with a phone number to call to apply for SNAP. If they called the number, they received application assistance by phone.

Case Study: Outreach to Medicaid Seniors in Pennsylvania

SNAP Enrollment Rates

•	No Intervention	6%
•	Letter and Postcard Mailings	11%
•	Letter, Postcard and	
	Application Assistance	18%

From "Enrolling Medi-Cal Participants in CalFresh: What Works?" Also see Footnote 2.

The control group (with no intervention) enrolled in SNAP at a 6% rate. Approximately 30% of those who received either type of outreach material called the number provided, but application and enrollment rates were twice as high when assistance was provided. For those who received information only in the mail, the enrollment rate was 11%; the "information plus assistance" group enrolled at a rate of 18%.²

In this case, the research which shows that households who received information about SNAP along with application assistance enrolled at a rate three times higher than those who received neither information nor assistance.³

² Finkelstein, A and Notowidigdo, M. Take-up and Targeting: Experimental Evidence from SNAP, May 2018. https://bdtrust.org/wp-content/uploads/2018/07/FN_maintext_May_18_2018-3.pdf

¹ Alliance to Transform CalFresh Web Site

³ Alliance to Transform CalFresh, Enrolling Medi-Cal Participants in CalFresh: What Works? February 2019



OUTREACH PLAN

Based on research and our own experience, we aim to increase and retain CalFresh participation by focusing on the following initiatives in the year ahead.

1. Finalize Enrollment of the Newly Eligible CalFresh Expansion Population

Our most immediate opportunity to increase CalFresh participation is to continue to enroll the SSI population that became eligible under CalFresh Expansion in June 2019. To date, we have enrolled about 5,000 of these individuals.

Approximately 4,700 In Home Supportive Services (IHSS) recipients are potentially eligible but not receiving CalFresh benefits. Once EHSD's new SSI Division (Aging & Adult Services Bureau) is fully staffed in November 2019, mailers will be sent to IHSS recipients, providing information on how to apply for CalFresh. For those who do not respond to the flyers, Social Workers will provide information about how to apply for CalFresh at their reassessment appointments. We expect that about 80% of these will successfully apply and become enrolled, or about 3,760 more individuals.

2. Escalate Efforts to Maximize Dual Enrollment (Medi-Cal/CalFresh)

The top priority in our general outreach effort is to foster Dual Enrollment of individuals who are eligible for both Medi-Cal and CalFresh. This is sometimes called "in-reach," as the concept is to cultivate CalFresh

Priority Target: Dual Enrollment

Currently in Contra Costa County, there are approximately 61,000 individuals (about 43,000 households) enrolled in Medi-Cal through the ACA Expansion who are not also enrolled in CalFresh. While not all of these people will be eligible for CalFresh, they represent a large target group with whom we have existing relationships and many natural touch points.

enrollment by eligible individuals and families who are already in the county system as Medi-Cal recipients (or applicants) but are not participating in CalFresh.

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We have identified a number of possibilities for CalFresh outreach to Medi-Cal applicants and Medi-Cal recipients. These include:

- Outreach and follow up to ACA Expansion Medi-Cal population not enrolled in CalFresh: mail, phone, e-mail, text and social media
- Identify under-represented demographic sub-groups to target, and develop new messages and materials tailored to them.



- Use texting and other social media for lead generation and recertification reminders.
- Provide EHSD staff with training and scripts to "cross-sell" CalFresh to the Medi-Cal population, including how to handle objections or concerns.
- Enhance and expand staff training to create a more effective eligibility process, including one-touch case management.

In addition to cultivating new enrollment, we will also focus on maintaining the participants we have, by reducing churn. To this end, for the past couple of years, we have been sending reminder texts for intake appointments, annual renewal/recertifications (RRRs) and semi-annual reports (SAR-7s). However, individuals must opt-in to receive emails and texts from us, and currently well under half of our Medi-Cal and CalFresh enrollees have provided the permission we need. In an effort to expand our electronic reach, EHSD executed a major mailing this month (November 2019) to Medi-Cal and CalFresh recipients, encouraging them to opt-in for text and e-mail notices.

In another recent effort to apply technology toward making the CalFresh application process easier for customers, InContact software has been uploaded for all EHSD intake staff so they can complete the entire CalFresh application over the phone.

Connect CalFresh to Medi-Cal at Every Touch Point

"Medi-Cal applicants should encounter frequent messages that applying for CalFresh is a good idea – online, in person at the county office, by mail or by phone." (Alliance to Transform CalFresh)

Ideas for Contra Costa County:

- Posters, flyers and videos in EHSD lobbies
- EHSD staff and partner staffs (Health Services, Community Clinics CBOs and IHSS Public Authority) will be trained to ask if Medi-Cal customers would like to apply for CalFresh.
- More assisters in EHSD district offices and CBO locations
- EHSD staff will follow up with Medi-Cal applicants to encourage applications to CalFresh
- Packet wrappers for new applicants and for renewals that explain process
- Mailings, phone and text follow-up to Medi-Cal recipients and applicants

Messaging will be tailored to specific audiences.

3. Deepen Community Partnerships to Extend Reach and Provide Assistance Services

Even with further involvement of EHSD staff in CalFresh enrollment and retention — and possibly additional EHSD staff — we will continue to rely on strong community partnerships to enhance our efforts in informing, following up and assisting applicants in enrolling in CalFresh. Activities may include:

- Train additional CBO staffs as Application Assisters, as we have with the Food Bank
- Strengthen coordination with the Health Services Department and Community Clinics
- Get the word out at Congregate Meal locations for seniors and provide CalFresh information for Meals on Wheels drivers to deliver
- Cultivate stronger relationships with business community organizations that serve populations we are targeting
- Participate in community-sponsored outreach and education events
- Coordinate with Workforce Development Board and America's Job Center to make sure Medi-Cal and CalFresh resources are featured, with flyers and links on on-site computers



4. Leverage New Legislation

Two new bills recently signed into law in California are aimed at reducing barriers and increasing access to CalFresh: AB 612 and AB 1377. They will require involvement by EHSD but should also provide support in the effort to increase CalFresh participation.

AB 612

Intended to help reduce food insecurity for students by removing legal barriers and logistical obstacles to California community colleges participating in the CalFresh Restaurant Meals Program and increasing student access to food aid.

New Legislation

Two new bills going into effect in 2020 are aimed at reducing barriers and increasing access to CalFresh.

- AB 612 Community Colleges
- AB 1377
 Free and Reduced Lunch Students

AB 1377

Requires the State Department of Education, the State Department of Health Care Services, and the State Department of Social Services to work together with specified stakeholders to develop a proposed statewide process for using data collected for purposes of the CalFresh program, Medi-Cal, and free and reduced-price school meal programs, and the electronic benefits transfer system to increase enrollment in the CalFresh program.

ESTABLISH REALISTIC EXPECTATIONS AND GOALS

It is important to keep in mind that there are no overnight solutions to CalFresh enrollment growth. In the California county examples cited in the SF-Marin and Transform CalFresh papers, and from our own experience, *net* enrollments from mailings and other outreach efforts often range from 2% - 5%. As an example, *CalMatters* recently reported that Los Angeles County spent two years (2017-2019) in targeted outreach, with a goal of adding 70,000 new CalFresh enrollees during the period. They implemented a variety of recognized methods, with a result of 3,000 additional households at the end of their project.⁴

Establish Realistic Expectations

Under today's Program Reach Index measurement, Contra Costa would need to add more than 20,000 new CalFresh enrollees to reach 75% PRI.

It will take data-driven experimentation, application of learnings, and continuous improvement to identify the best methods to reach our goals.

⁴ "Getting Food Stamps to Poor Californians is Surprisingly Difficult", CalMatters, September 3, 2019



As an order of magnitude, Contra Costa County would need to add more than 20,000 new CalFresh enrollees to reach a PRI of 75% as of today. Our goal will be to increase CalFresh participation and reduce churn as rapidly as possible by constantly evaluating the effectiveness of different methods we will implement and re-tooling accordingly. However, it will likely take a significant period of dedicated effort and continuous improvement to achieve our goal.

STAFFING AND FUNDING NEEDS

In order to implement the plan elements outlined above, we request consideration of additional staff to supplement our current capacity. To begin, we have identified the following position requests for the current fiscal year.

- Social Service Program Assistants (SSPAs)
 - 2 SSPAs for integrated program support through "4 Our Families"

The SSPA helps identify how community members' needs may be met with a multiprogram approach, and specializes in helping families enroll in appropriate programs. SSPAs can also support outreach by attending community-sponsored events, visiting Congregate Meal sites and coordinating EHSD efforts with community-trusted partners.

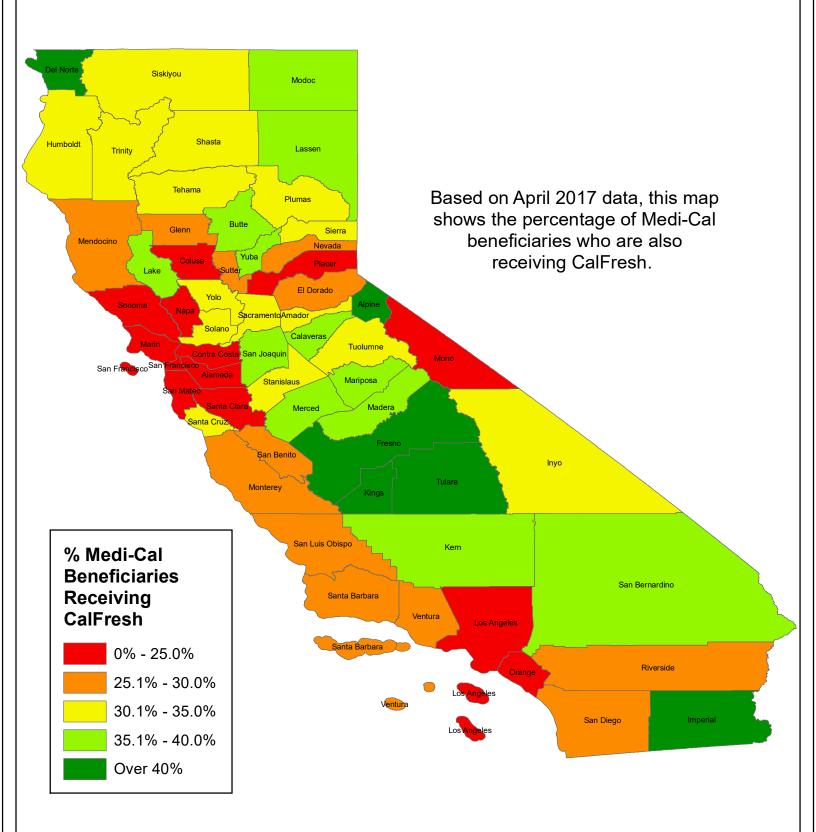
- CalFresh/Medi-Cal Data Analyst
 - 1 CalFresh/Medi-Cal data analyst

The data analyst will support demographic mapping and targeting for outreach, track and perform ongoing evaluation of outreach efforts so that we can continuously improve for increased success. The analyst will also work with CDSS and other county representatives to assure accuracy of participation measurements and to engage in the rollout of activities related to implementation of new legislation.

In addition, the data analyst will work on CalOAR, CalAIM and other initiatives that will involve more performance measures.

While the state provides some CalFresh outreach, there is no federal funding available. Outreach efforts by EHSD can go into our claim, but the county will need to assume a higher share as there will be no federal match. However, it is important to note that the return on investment to increasing CalFresh enrollment – in addition to serving the individuals and families – is the federal match that comes to EHSD and the economic activity resulting from benefit dollars spent in our community.

CalFresh and Medi-Cal Participation by County Percentage of Medi-Cal Beneficiaries Receiving CalFresh



Source: California Medi-Cal Eligibility System - Percent of Medi-Cal Recipients Receiving CalFresh Benefits with Selected Program Aid Codes

CDSS Research Services Branch