

# MISSOURI BENEFITS ENROLLMENT TRANSFORMATION

Transforming the Enrollment Process for End Users

2020 | Civilla + Missouri Department of Social Services + Missouri Foundation for Health

# PROJECT CREDITS

This project documents the work of Civilla and the Missouri Department of Social Services (DSS) to create a faster, simpler, and more human-centered enrollment process for Missouri's safety net programs. This project is one phase of a larger body of work led by DSS to create a better experience for participants as they interact with the department to access benefits.

# civilla

Civilla is a nonprofit dedicated to changing the way our public-serving institutions work through human-centered design.

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The Department of Social Services is dedicated to leading the nation in building the capacity of individuals, families, and communities to secure and sustain healthy, safe, and productive lives.



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# EXECUTIVE SUMMARY

This report documents the findings and outcomes of Civilla's partnership with the Missouri Department of Social Services (DSS) to modernize the application and enrollment process for Missouri's largest safety net programs. The project is part of a larger effort led by DSS to design a faster, simpler, and more efficient experience for participants and DSS frontline staff.

To set the foundation for a more human-centered enrollment process, Civilla and DSS conducted research with participants and frontline staff to identify the highest priority needs and opportunities for improvement.

## User Research

The Civilla team worked closely with participants and staff across Missouri to observe every step of the application and enrollment process. Through more than 250 hours of interviews and a survey that engaged more than 1,000 frontline staff across the state, the team collected information to identify the most pressing concerns for end users.

### For Participants

1. **There is no clear path:** the system feels like a secret and no one has the answer
2. **The system is dehumanizing:** participants feel like numbers and data in a mechanical process
3. **A system of fault vs. a system of dignity:** asking for help feels shameful and frustrating

### For Frontline Staff

1. **Servicing the task vs. servicing the person:** frontline staff feel part of an assembly line rather than connected to the people they serve
2. **It's a system of pieces and parts:** the work feels siloed and relationships are breaking down
3. **The system is built on workarounds:** people make their way through trial and error



## Recommendations

Based on the team's research findings, Civilla and DSS developed recommendations for designing a faster, simpler, and more efficient experience for participants and frontline staff:

### **An integrated application**

Combined, the current applications for Missouri's core programs are 63 pages long. Participants have to navigate complex legal language and redundant questions to enroll. By designing an integrated, streamlined application for benefits, DSS will enable faster, simpler, and more efficient benefit delivery.

### **A standardized interview guide**

High call volumes and long interviews are a burden for both participants and DSS. A standardized interview guide will decrease interview times and improve the accuracy of case processing.

### **Simplified verifications**

The verification process can be complex and time-consuming for both participants and frontline staff. Improving the verification process and retraining frontline staff to avoid over-verifying will simplify the enrollment process and increase accuracy while still fulfilling federal and state requirements.

### **Clear and consistent correspondence**

Many participants have difficulty understanding mail from DSS. The letters lack clear next steps and are marked by institutional language and

complicated legalese. Plain language and easy-to-follow instructions will increase participants' confidence and reduce Tier 1 calls.

### **Modernized case management**

Participants have a limited ability to manage their benefits online. Expanding online services and designing them to be easily accessible from a mobile phone will provide participants with greater control and knowledge about what is happening with their case, reducing Tier 1 calls and duplicate applications.

## Next Steps

Based on the findings, Civilla recommends that DSS design an improved application, simplify outbound communications, and use lessons to inform a user-friendly case management system. This work can be phased in over the next 18-24 months. These recommendations are expected to create large, quantifiable improvements for participants and frontline staff across the state.

Through this work, DSS and Civilla aim to show the impact human-centered design can have in creating a benefits system that is more compassionate, more effective, and less expensive to operate.

DEPARTMENT OF SOCIAL SERVICES

COLUMBIA RESOURCE CENTER



# 1

## THE CHALLENGE

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MODERNIZING THE APPLICATION AND ENROLLMENT PROCESS  
FOR MISSOURI'S LARGEST SAFETY NET PROGRAMS

# OVERVIEW

In Missouri, there are more than one million people that receive healthcare, food assistance, child care, and cash assistance benefits from DSS each year.

These benefits are distributed through the Department of Social Services, and eligibility is determined by eligibility specialists in more than 100 offices across the state.

Participants begin the enrollment process with an application, which they must submit separately for each benefit. Combined, the six primary applications contain up to 63 pages and 36,980 words.

Participants can submit applications to DSS at the Family Support Division (FSD) Resource Centers, by mail, fax, or online. Once FSD receives the application, frontline staff register it. Then one of the Processing Centers picks it up as a task. Depending on the program, eligibility specialists will either use FAMIS (a DOS-based system) or MEDES (a web-based enrollment system implemented after the Affordable Care Act). If an interview is required, participants will complete their application by speaking with an Eligibility Specialist through one of the Call Centers around the state.

Currently, the length and complexity of this application process hampers participants' ability to submit accurate and complete information and impacts the eligibility specialists' ability to make efficient determinations.

Over six months, Civilla conducted in-depth research on how to streamline and improve the application and enrollment process in Missouri — with a particular focus on understanding the needs of participants and frontline staff. The team then developed a set of recommendations for designing a faster, simpler, and more human-centered enrollment process for DSS.

## **For Participants**

Many Missouri residents find it difficult to navigate the current enrollment process. Participants applying for multiple programs can complete up to 63 pages of applications. Online, some participants are unsure whether DSS received their application and may submit duplicate applications. If a participant needs to call DSS with questions, they may wait between

15 and 60 minutes to talk to a worker. When faced with long wait times, participants often choose to visit a local Resource Center instead. In many cases, they encounter frontline staff who are busy or without the eligibility systems training needed to fully resolve their issues.

## **For Frontline Staff**

Due to recent shifts in business process, DSS workers specialize by program and use a task-based system to determine eligibility. Call Centers feel under-resourced to handle the 80,000 calls they receive each month. Resource Centers face challenges in processing the daily paperwork volume while also providing customer service to participants who are seeking additional help or information related to their case. Processing Centers feel disconnected from participants and lack training on one of the two different eligibility systems they must use daily. Across all centers, frontline staff report low morale, siloed workstreams, and stress in the face of a large task backlog.

This project focused on six different DSS programs. All programs share similar elements that can cause inefficient case processing and failed enrollments.



#### **Food Stamp Program**

Helps low-income individuals buy food. It is the second largest program with 309,923 households (657,317 individuals) currently enrolled.



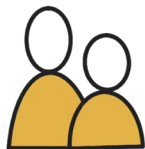
#### **MO HealthNet for Kids, Pregnant Women, Families, and Uninsured Women**

Provides help with paying for qualifying medical expenses. It is the largest program with 660,909 individuals currently enrolled.



#### **MO HealthNet for Seniors, Disabled, Blind or Visually Impaired, and Women with Breast or Cervical Cancer**

Provides help with paying for qualifying medical expenses. It is the third-largest program with 234,942 individuals currently enrolled.



#### **The Child Care Subsidy Program**

Assists eligible Missouri parents and guardians with payments for child care. It is the fifth largest program with 29,254 children currently enrolled.



#### **Temporary Assistance**

Provides cash benefits to low-income families for the household's children. It is the sixth-largest program with 9,105 households (21,286 individuals) currently enrolled.



#### **LIHEAP**

Helps low income households meet their immediate energy needs. It is the fourth largest program with 115,000 households served each year.





# 2

## METHODOLOGY

RESEARCHING THE APPLICATION AND ENROLLMENT  
PROCESS TO IDENTIFY USER NEEDS

# METHODOLOGY

In the fall of 2019, DSS and Civilla launched a research phase to identify opportunities to improve the application and enrollment process based on user needs.

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## For Participants

The goal is to create a better application process that is fast to complete and easy to understand.

## For Frontline Staff

The goal is to streamline the administrative burden so that so that determinations can be made quickly and accurately.

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During the project, the team conducted research at 19 DSS field offices across the state and collected feedback to improve the process for participants and frontline staff.

### Locations

DSS and Civilla selected 19 field offices for research in urban, suburban, and rural areas. This diverse set of locations helped the team gather data that would be relevant to offices statewide. In addition, Civilla visited WIPRO and community organizations to collect information that was relevant to processing and navigating the enrollment process. Civilla worked with 61 DSS staff at these locations including branch managers and frontline workers.

### Research

The team began the project by interviewing seven leaders and specialists at DSS involved in the administration of the state's largest assistance programs. They then conducted more than 250 hours of research to interview frontline staff, observe how they processed applications, and collect data on the current process. The team paired in-person feedback with a survey with more than 1,000 responses from staff and a handful of community partner organizations from across the state. Through DSS offices and community partner locations, the team interacted with 65 participants to explore the challenges they faced during the application process.

### Opportunity Areas + Recommendations

From the research, the team identified opportunities for impact and developed recommendations for streamlining and improving the application process for end users. The team created prototypes for each opportunity area and tested them with frontline staff and participants. In addition, the team collected baseline data on the existing process to estimate the impact of the proposed changes.



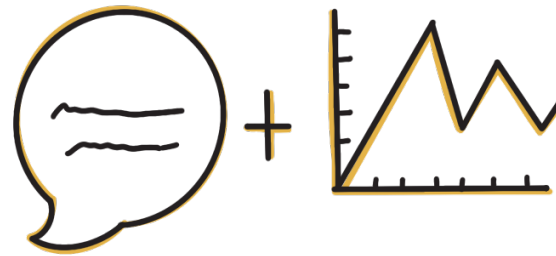
# APPROACH

To identify opportunities to streamline benefit delivery, Civilla went directly to the experts — participants and frontline staff that are central to the enrollment process.



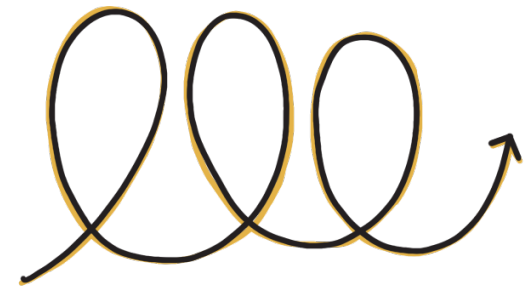
## Human-Centered Design

Civilla's work is rooted in human-centered design — a methodology that puts people at the center to ensure that solutions are designed to meet real needs. By learning directly from people deeply involved in the process, the team was able to focus their work on the highest-priority needs.



## Mixed-Methods Research

The team used mixed-methods research to collect input and measure success throughout the project, including one-on-one interviews, intercepts, observations, group feedback sessions, quantitative data collection, and case reviews.



## Iterative Development

Once Civilla defined pilot solutions, the team used iterative methods to develop working prototypes. This iterative approach was driven by short feedback cycles, with new updates made to the prototypes and final recommendations based on user input.



# 3

## FINDINGS

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UNDERSTANDING THE NEEDS OF  
PARTICIPANTS AND FRONTLINE STAFF



# PARTICIPANT NEEDS

More than one million Missouri residents use DSS benefit programs to support them in leading balanced, productive, and healthy lives.

Through more than 250 hours of interviews, Civilla saw how an enrollment process that didn't focus on the needs of participants jeopardized their ability to access benefits efficiently. When participants encounter difficult-to-follow forms, are unable to communicate with DSS effectively, and are given unclear next steps, they often make errors on their application or fail to fulfill the requirements. Using human-centered design techniques to observe participants at each stage of the enrollment process, Civilla uncovered three foundational needs that informed the recommendations.



# 1

## There Is No Clear Path

As a participant, the system feels like a secret and no one has the answer.

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Participants spend an unnecessary amount of time and energy navigating DSS benefit programs. As they move through the application process, participants feel in the dark about the location and status of their application and have difficulty finding frontline staff who are able to provide comprehensive support across all aspects of their case. When they call for help, they are often met with frontline staff who are unable to answer all of their questions. Participants who visit resource centers for in-person help are often directed to phone booths and back into the call center where they first encountered issues.

Overall, participants lack confidence when applying for benefits and rely on word of mouth and community organizations for help completing the process.

*“ It always feels like a loose end. I don’t understand why something happened or what’s coming next. ”*

— DSS Participant

*“ There is nowhere to get information. I don’t know what, who, or where to ask. ”*

— DSS Participant

# 2

## The System is Dehumanizing

As a participant, I feel like a number rather than a human who is able to arrive with my full story.

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With the reduction of face-to-face interactions, participants feel more and more disconnected from the people working their case. The highly specialized, task-based system means participants must repeat their situation, questions, and information to each specialist they interact with. Without a worker who has a comprehensive view of their case, participants can feel like they are navigating the system alone. This can increase stress and uncertainty about whether participants will be able to get the benefits they are eligible for or keep those they've already received.

*“ There’s no one to commune with, no one to have a conversation with. The process didn’t make me feel like a person, it made me feel like a number. ”*

— DSS Participant

*“ I’m sick and tired of being on hold for 3-4 hours at a time. But it’s not the workers’ fault. I’m not angry at them, I’m angry at the system. ”*

— DSS Participant

# 3

## A System of Fault vs. a System of Dignity

As a participant, asking for help feels shameful and frustrating.

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Participants applying for benefits said the process often made them feel shamed, shut down, or stereotyped when applying for benefits. Often times, it can feel hard to ask for help, and there's a risk of being seen as lazy, uneducated, or someone out to commit fraud. This is especially true of first-time applicants who may feel this way even before they begin the application process. Participants who are navigating a crisis want to feel a sense of respect and dignity while seeking the support they need to get back on their feet.

*“ Clients are scared of messing up. They think things are going to get worse. They worry about feeling shamed and shunned because they are asking for help. ”*

— DSS Staff

*“ If things were different for me out there, I wouldn't have to be in here. The process doesn't make you feel acknowledged...it feels terrible. ”*

— DSS Participant



# FRONTLINE STAFF NEEDS

DSS frontline staff are essential to creating a smooth and efficient enrollment process.

Civilla spent extensive time observing how frontline staff handle incoming applications and interviewed 61 staff members across the state about existing barriers to creating an efficient process. The team found workers that feel siloed within their highly specialized tasks, struggle to feel connected to fellow workers and participants, and encounter obstacles that make it difficult to complete applications in a timely and accurate manner. Across the board, workers in Resource Centers, Processing Centers, and Call Centers have a desire to help participants but continually come across missing or inaccurate information on applications and a lack of cross-training to navigate multiple programs and the two enrollment systems. Civilla identified three primary needs from frontline staff that informed the recommendations.



# 1

## Servicing the Task vs. Servicing the Person

As DSS frontline staff, I need to feel connected to the people I'm serving so I know I'm making a difference, not just completing a task.

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The current eligibility process is broken down into a series of individual tasks, each completed by a different frontline staff member. This task-based system means frontline staff are focused on single, repeatable tasks rather than helping individuals through the full process. Frontline staff reported feeling a lack of ownership over their work and a disconnect between their tasks and positive outcomes for participants because they only worked on one piece of the case.

*“ You have to remind yourself every day, this is an actual family. They are not just a set of numbers...these are people. ”*

— DSS Staff

*“ We are basically just bobble heads completing tasks. We’re not caseworkers anymore. We just do data entry. ”*

— DSS Staff

# 2

## It's a System of Pieces and Parts

As DSS frontline staff, it feels like work is siloed and relationships are breaking down

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Frontline staff report feeling isolated from each other, their managers, and the overall impact of their work. The combination of specialized tasks and an extensive backlog causes frontline staff to feel like they aren't deeply connected to the mission of the organization. In their day-to-day work, it's hard for frontline staff to see how their role fits into the bigger picture. They want to be part of a team instead of feeling isolated. Isolation among frontline staff also contributes to a feeling that there is less incentive for increased efficiency or going above and beyond to support a participant in a moment of need.

*" You don't get the whole picture anymore. It's all broken down into little pieces. It's like an assembly line. "*

— DSS Staff

*" I love my job and love providing good service to Missouri citizens. I just don't always feel like we are all on the same page, sadly. There's kind of a disconnect now — 20-30 people touching a case. "*

— DSS Staff

# 3

## The System is Built on Workarounds

As DSS frontline staff, it feels like I have to make my way through trial and error.

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DSS frontline staff need technology that is simple and reliable so they can focus on helping participants rather than creating workarounds to deal with inefficiencies or breakdowns in their case management software. Best practices vary by office, and frontline staff have developed independent ways of completing tasks. While the MEDES system has been improved over the last five years, missed communications mean some eligibility specialists are not taking advantage of improvements and may still be using unnecessary workarounds when processing applications.

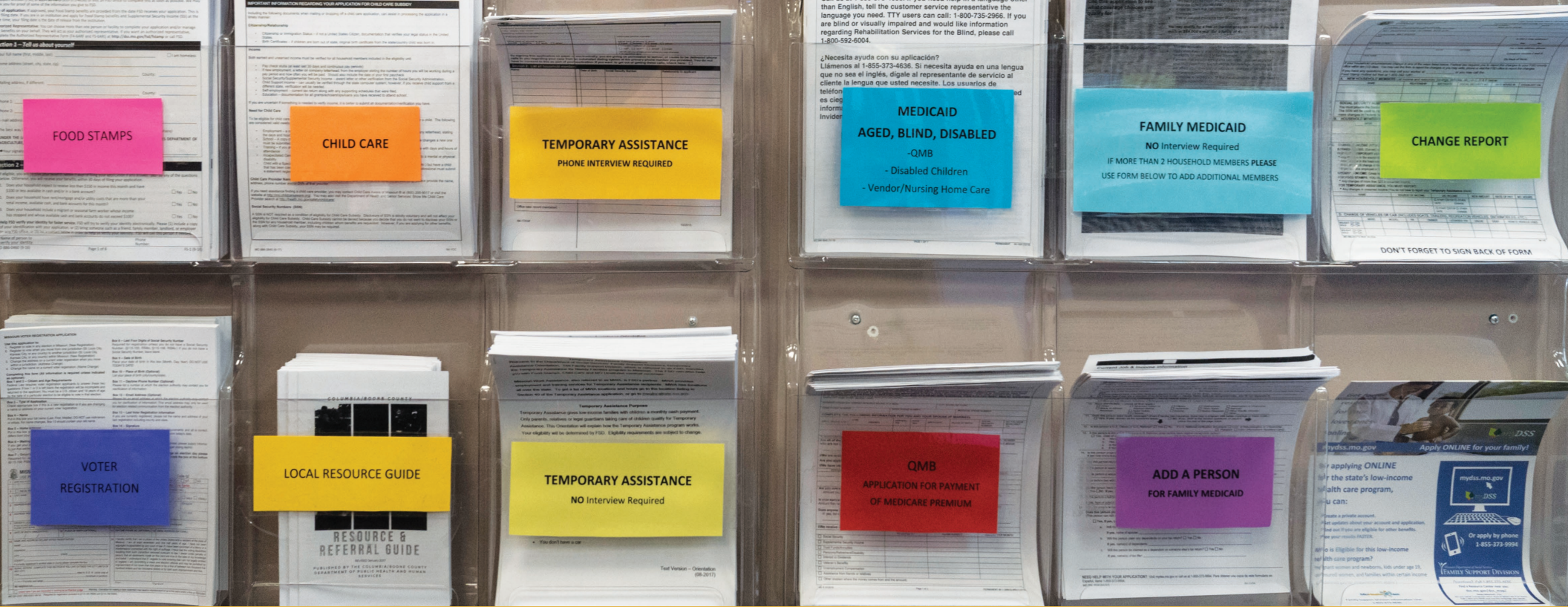
*“ I’m trying to get the system to go. Sometimes it’s more of a mind reading game. ”*

— DSS Staff

*“ Many of our systems are cumbersome and frustrating due to the work-arounds necessary to make them work like they should. ”*

— DSS Staff





# 4

# RECOMMENDATIONS

DESIGNING A FASTER, SIMPLER, AND MORE HUMAN-CENTERED ENROLLMENT PROCESS

# OPPORTUNITY AREAS

**1**

## **An Integrated Application**

Design an integrated, streamlined application for Missouri's primary assistance programs.

**2**

## **Standardized Interview Guides and Case Notes**

Implement a standardized interview guide and case notes to ensure speed and accuracy.

**3**

## **Streamlined Verifications**

Streamline verification requirements to decrease administrative burden and procedural denials.

**4**

## **Clear and Consistent Communications**

Develop clear and consistent communications to speed up feedback loops.

**5**

## **Modernized Case Management**

Refresh technology to empower participants to use self-service options.



# THE ENROLLMENT PROCESS

These five opportunity areas represent improvements across the full enrollment process. Individually, they're designed to meet the specific needs of participants and frontline staff while improving the efficiency and effectiveness of the programs overall.



## Apply

Participant fills out an initial application.



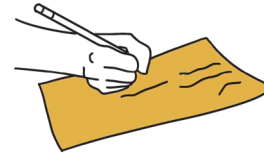
## Interview

Participant completes an interview if required by the program.



## Verify

Participant provides documents to prove the information on their application.



## Determine

DSS determines if the client is eligible and sends a decision notice.



## Renew

Participant renews their benefits, repeating a variation of these steps.

# 1

## An Integrated Application

### Design an integrated, streamlined application for benefits

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Civilla recommends restructuring and redesigning the application to be short, simple, and relevant. Today, frontline staff report that more than 50% of participants at resource centers apply for multiple programs. This is particularly true for food and medical applications. A streamlined application would integrate six separate benefit programs into a single application, including Food Assistance, Family Medical, Adult Medical, Cash Assistance, Child Care, and LIHEAP. The new application would have three components so participants would complete only the necessary information for their programs. This strategy would streamline DSS' processes while giving DSS the flexibility to add programs in the future. DSS can further simplify the application by writing clear questions, removing redundancies, using visual patterns that are simple and easy to understand, and orienting the application around the most common use case.

*“ Participants need easier-to-understand applications. Confusing language prevents people from getting the help they really need. ”*

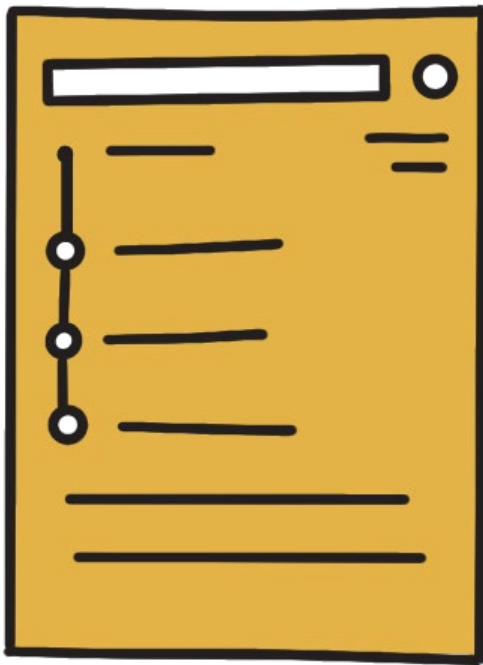
— DSS Community Partner

*“ This application is huge — it's full of our language that means nothing to our customers, trying to cover every possible thing. No one likes to get a book! ”*

— DSS Staff

# STRUCTURE

One application, six programs, three components.



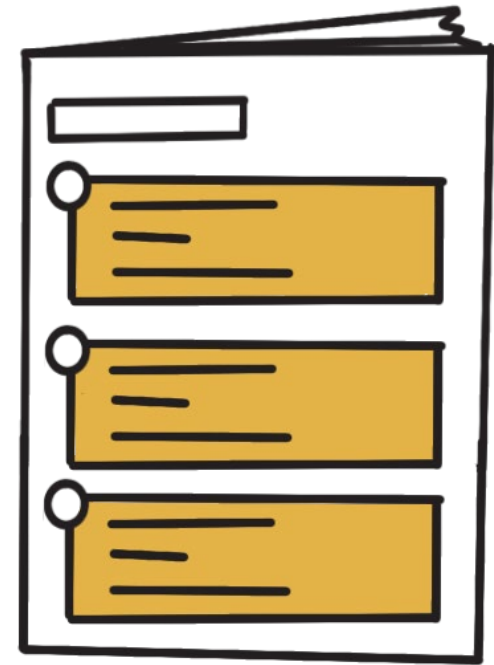
## Core Application

Every applicant completes a core application with information that is shared across programs, such as household composition, income, assets, and expenses.



## Supplements

Applicants complete supplements only for the programs that they are applying for, with information that is required by individual programs.



## Information Booklet

An information booklet contains participants' rights and responsibilities as well as important program information.

# 2

## Standardized Interview Guides and Case Notes

Implement a standardized interview guide and case notes to ensure quality and consistency

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Currently, the interviews for benefits range from 35-60 minutes per program. Specialization across frontline staff means that participants must conduct multiple interviews if they are applying for multiple programs. It also makes it difficult for frontline staff to apply best practices consistently across programs. A standardized guide that pairs with the application would provide a tool for eligibility specialists and create a more consistent experience across the state for participants while reducing the length of interviews. It would also allow eligibility specialists to ask the more complicated and confusing questions during the interview, rather than loading them into a one-size-fits-all application. A standardized template for case notes will ensure that frontline staff are documenting their interactions with participants consistently, decreasing opportunities for errors and making it easier for whoever picks up the case next.

*“ We would improve our accuracy if we could streamline our interview process. Today, application interviews take a long time because of all the FAMIS screens. Which questions are actually required? ”*

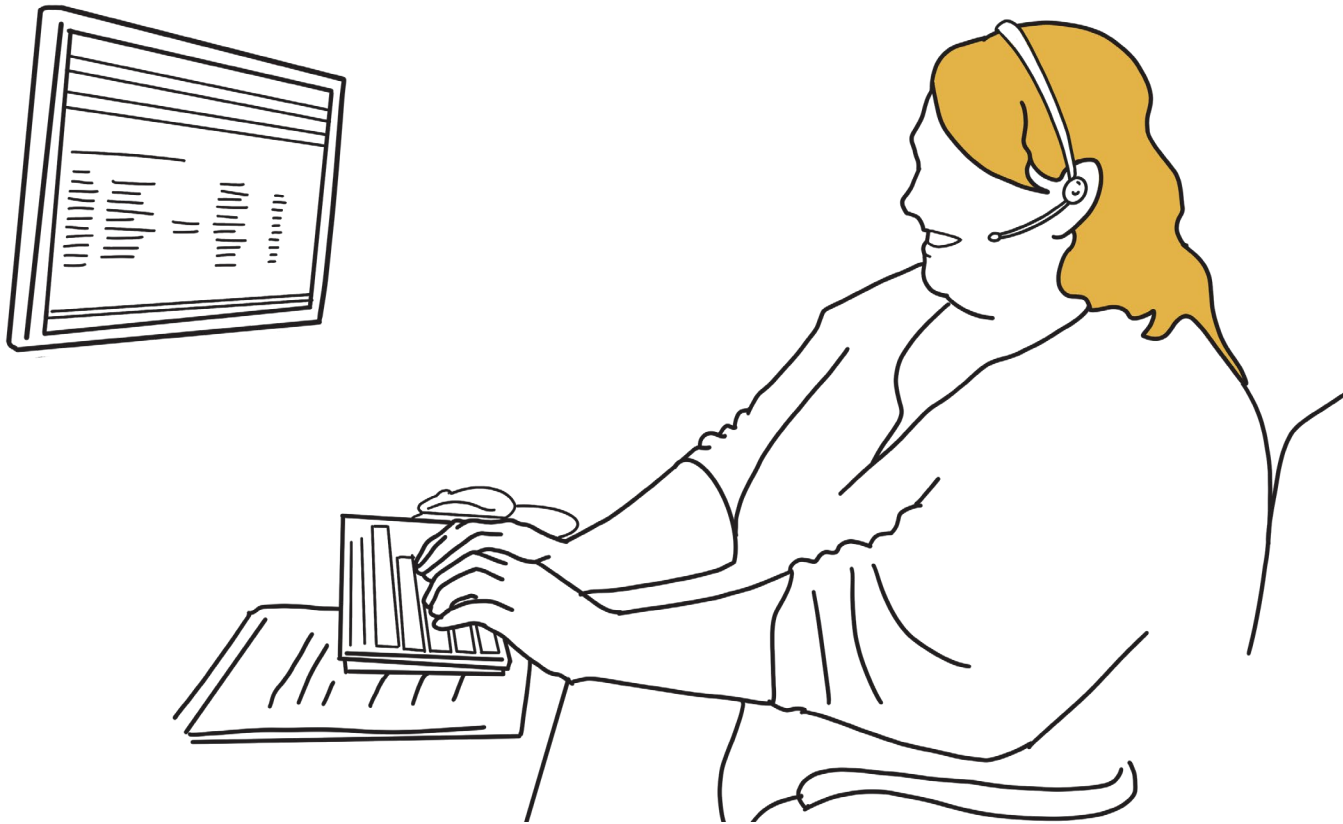
— DSS Staff

*“ The interview process needs improvement like making sure to not request unnecessary information and following the same set of notes for how to complete cases. ”*

— DSS Staff

# INTERVIEW GUIDE STRUCTURE

A simple guide to capture what's most relevant.



A standardized interview guide groups questions in a consistent and logical flow to improve efficiency and accuracy. Neutral and specific question structures guide eligibility specialists on best practices and ensure they collect quality information while addressing common errors across programs.

# 3

## Streamlined Verifications

### Clarify verification requirements to decrease administrative burden and procedural denials

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Verifications are the documents that participants provide state agencies in the form of pay stubs, bank statements, leases, IDs, and bills to prove their household information and financial standing. Verifications result in a significant burden for frontline staff and high error rates for the department. These documents are hard for many participants to provide — requiring them to travel, pick up documents, make copies, and either fax, mail, or submit them in person. When participants do manage to collect documents, they often don't contain all the details DSS needs or fall outside of the required date ranges causing them to be rejected. These challenges result in eligible participants being denied for procedural reasons, leaving participants to reapply. There are also cases of over-verification that cause eligible individuals to lose benefits and increase churn and workload for DSS. Improving the verification process and retraining frontline staff on department policies to ensure they are being applied consistently will alleviate stress on the Call Center and decrease the time it takes to determine eligibility.

*“ ‘Did you get my paperwork? What else do you need?’ I hear it all day long. ”*

— DSS Staff

*“ Workers are over-verifying cases, which causes eligible clients to miss out on benefits and increases churn and workload for the agency. ”*

— DSS Community Partner



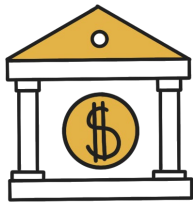
# VERIFICATION TYPES

Opportunities to improve the verification process for income, assets, and expenses.



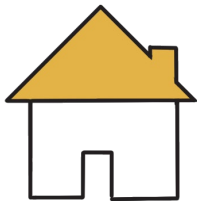
## **Income Verification**

Change DSS administrative policy to require eligibility specialists to verify income through electronic sources, such as the Work Number database, and collateral contacts. In Missouri, not having access to the Work Number has made it difficult for eligibility specialists to verify income electronically. More than 80% of survey respondents said that income verifications are the hardest to get. States like Washington and Idaho have already demonstrated how prioritizing caseworker-driven verifications can streamline case processing and improve the participant experience.



## **Asset Verification**

Clarify department policy for SNAP asset verifications through training to ensure frontline staff are only asking for asset verifications if the information provided by the client is questionable. This will decrease the amount of paperwork to be processed by frontline staff and reduce procedural denials for participants who are unable to collect the verifications.



## **Expenses Verification**

DSS policies currently allow for self-attestation of shelter and utility expenses. The Department also has waivers in place to enable standard deductions for utilities and medical expenses. Providing additional training for frontline staff will ensure they are applying this policy consistently across programs.

# 4

## Clear and Consistent Communications

### Develop clear and consistent communications to speed up feedback loops

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After participants submit an application, they must complete a set of requirements in order to enroll and maintain their benefits. Currently, the forms that communicate these requirements are confusing and poorly designed. This makes it hard for participants to complete the required actions and hampers eligibility specialists' ability to make efficient determinations on each case. When correspondence fails to give participants the information they need, it falls on eligibility specialists to fill in the gaps. Participants call the office or visit in person to ask questions about program requirements, deadlines, and confusing correspondence. These frequent interruptions cost eligibility specialists time they could spend processing and increase stress for everyone involved. By redesigning correspondence and enabling faster feedback loops through text message reminders, DSS could improve the participant experience and decrease the administrative burden.

*“ DSS notices need to clearly and accurately identify the reason for a case action. Notices don't tell participants what's missing or what they need to do. ”*

— DSS Community Partner

*“ People are constantly calling and asking me what they need to submit. They don't understand the letters we send them. ”*

— DSS Staff

# CORRESPONDENCE TYPES

While there are hundreds of pieces of correspondence that could be included in the redesign, Civilla’s research demonstrated that there is a core set of correspondence that would have the largest impact:



## Renewals

Renewal mailings look similar to other notices that require no response. As a result, participants often mistake their renewals as just another letter from DSS and fail to take necessary action. The current renewals have complex language and design similar to the applications. It can be hard for participants to understand what information they need to provide. When participants feel confused or unsure, they leave form fields blank so that they don’t get in trouble for providing false information.



## Case Action Notices

DSS case action notices are full of complex language and legal jargon that confuse frontline staff and participants. Currently, there is no distinction between informational case action notices and ones that require further action by participants. The notices for the medical programs can be especially confusing and vague. One notice arrives with the heading, “Great news!” only to say the participant has been denied benefits.



## Verifications

Verification notices lack simple steps for participants to follow and sometimes arrive blank when specialists send them out without the necessary details. This leads to participants being confused about what they need to submit. Some participants then call DSS or visit a Resource Center for help, resulting in an increased workload for frontline staff.

# 5

## Modernized Case Management

Refresh technology to empower participants to use self-service options

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81% of American adults own smartphones, and the majority of low-income Americans access the internet using a mobile device. DSS currently receives a high volume of phone calls and in-office visits from participants seeking information about their case. A simple, intuitive case management system designed to be accessed on a mobile device would allow participants to update their case and find important information on their own. Developing this mobile-first online case management service would also provide important worker relief for frontline staff by giving them an easy place to point participants for information.

*“ People should be able to apply, update their application, submit their documents, and do their annual renewals online. ”*

— DSS Community Partner

*“ Most of the calls we receive aren’t new applications or first time callers, but repeat calls for status updates. ”*

— DSS Staff

# KEY FEATURES

Based on the research, Civilla recommends focusing on a set of key features to streamline case management online:



## Application

An integrated, online application with a responsive design



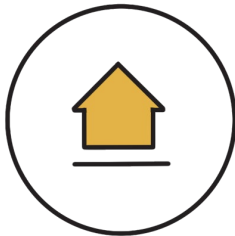
## Renewals

A streamlined renewal flow with pre-filled information that is easy to edit



## Report Changes

Submit changes to household status including changes to income, assets, and expenses



## Document Upload

Upload photos of documents and receive immediate confirmation



## View Letters

View all correspondence in a single place



## Text Message Reminders

Opt in to SMS to receive updates and reminders throughout the process



# 5

## ESTIMATED IMPACT

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STREAMLINING THE ENROLLMENT  
PROCESS TO IMPROVE OUTCOMES



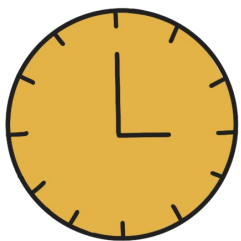
# ESTIMATED IMPACT

The team expects that together, these changes would have significant impacts on improving service delivery for participants and frontline staff in Missouri



## More Complete and Accurate Applications

The team expects these improvements to result in more complete and accurate applications. 79% of Eligibility Specialists report that one of their biggest barriers in processing applications is participants leaving questions blank. Eligibility Specialists must fill in missing information and correct form errors during the interview, slowing down the process. More complete and accurate forms would enable eligibility specialists to simply confirm the provided information and result in faster processing times.



## Reduced Application Time

On average, it takes a participant 25 minutes to fill out an application for food stamps, between 30-60 minutes to fill out applications for both medical programs and temporary assistance, and even longer when applying for multiple programs. An integrated application would eliminate redundant information, resulting in time and energy saved for participants and fewer applications for frontline staff to process.



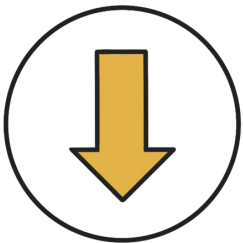
## Lower Error Rate

The SNAP payment error rate in Missouri was 9.07% for 2018, which was worse than the national average. A standardized interview guide, streamlined verification process, and clear communications are expected to decrease errors, which can in turn decrease processing time for frontline staff. In particular, standardized interview guides and case notes will ensure frontline staff are collecting information consistently and allow eligibility specialists to more quickly and accurately orient themselves to a new case.



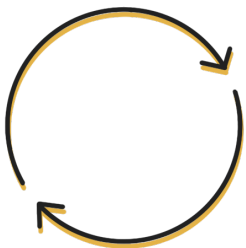
## Fewer Outbound and Inbound Calls

The team expects these changes to decrease the number of outbound calls by DSS processors and inbound calls from participants. 71% of Eligibility Specialists at Processing Centers say they make outbound calls because of missing information on applications. More complete and accurate information will streamline processing and decrease outbound calls. More than 50% of call center eligibility specialists reported that verifications were one of the top reasons for inbound calls from participants. Streamlining verification requirements would decrease call volume and provide significant time savings for both participants and eligibility specialists.



## Decreased Processing Time

By improving completeness and reducing client errors, the team expects an integrated and streamlined application would accelerate processing times. For frontline staff, complete applications will allow for faster and more thorough case preparation and help to streamline interviews with participants. Streamlining verification policies alone can turn multi-day follow up processes into an average processing time of 35-60 minutes if all necessary documents are attached.



## Decreased Procedural Denials and Churn

Churn happens when eligible participants do not complete the renewal process, usually because of the lack of verifications, and return to re-enroll. The cycling of families and individuals on and off benefit coverage is an expensive and repetitive burden for participants, frontline staff, and the state. Redesigning renewal forms and other DSS notices to be urgent and action-oriented will encourage participants to complete program requirements and maintain continuous coverage.





# 6

## CONCLUSION

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IMPLEMENTING HUMAN-CENTERED APPLICATIONS,  
RENEWALS, AND CORRESPONDENCE ACROSS MISSOURI

# CONCLUSION

Missouri has an excellent opportunity to create a more human-centered benefit system that can streamline the experience for participants and frontline staff.

Through research with 65 participants and 61 DSS staff across 19 field offices, plus more than 1,000 survey respondents, Civilla and DSS have identified targeted, high-potential areas for improvement.

By combining proven human-centered design techniques with insights gathered from those on the ground in Missouri, DSS can create a benefits system that is more compassionate, more effective, and less expensive to operate.

## Next Steps

Based on what the team learned from this project, Civilla recommends that DSS address the opportunity areas in three primary phases of work:

**Phase 1:** Redesign the application and renewal forms for DSS' six core programs, including Food, Adult Medical, Family Medical, Cash, Child Care, and Energy Assistance (LIHEAP). into a single, streamlined application.

**Phase 2:** Redesign benefits correspondence letters, including case action notices and verification request forms, to create a more human-centered experience.

**Phase 3:** Design a modern and mobile-first case management system to allow Missouri participants to complete the benefits application, manage their case, and renew their benefits online.

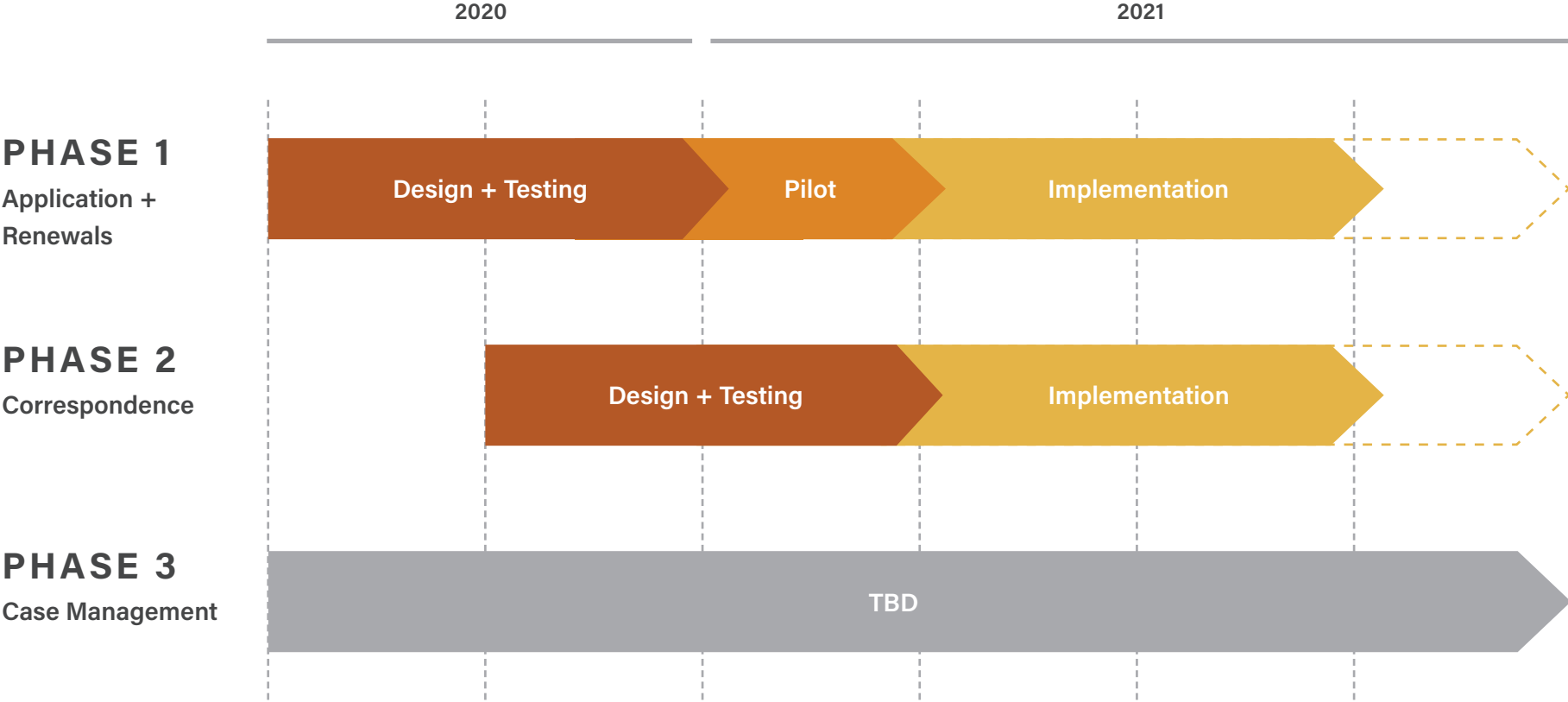
To navigate this work, Civilla recommends DSS put together three primary working teams to be engaged through the life-cycle of the project:

**Steering Committee** made up of executive leadership. Their primary role is to provide strategic guidance for the work and uphold project outcomes. This group would meet in person every 8-12 weeks.

**Core Team** made up of experts from FSD and Mo HealthNet who carry a high degree of knowledge of the various program areas and are responsible for the day-to-day execution of the project. This group would meet every 2-4 weeks with a mixture of remote and in-person collaboration.

**Subject Matter Experts** consisting of staff from policy, legal, and field operations who can provide guidance and input to the project as needed.

# IMPLEMENTATION ROADMAP





# PHASE 1

## Redesign applications and renewal forms

Phase 1 would be a 12-15 month process to redesign the application and renewal forms and create a standardized interview guide. These forms share policy and training requirements and would best be redesigned at the same time. This will result in efficiency gains and prevent change fatigue from staff.



## Design and Testing (6 Months)

The team would begin with extensive user testing with DSS participants and frontline staff to redesign and integrate the application and renewal forms. The new forms would then go through a review process by DSS policy and legal teams to bring the forms into alignment with all federal, state, and departmental requirements. During this process, the team would collect baseline data to assess the effectiveness of the new forms. Based on Civilla's experience in Michigan, FNS and CMS should be informed of the pilot but are unlikely to require formal approval until the implementation phase.

## Pilot (3 Months)

Civilla recommends beginning with a small-scale pilot involving 100-300 cases, primarily food assistance and medical, across a handful of offices. Making time for a pilot phase will ensure the new forms get crucial details correct and allow the team to uncover potential implementation issues before scaling statewide.

## Implementation (6-9 Months)

After the pilot, DSS will seek official approval from CMS and FNS for the new forms. The team anticipates DSS will need to make minor changes to back-end eligibility systems, such as updates to the application flow in MEDES and FAMIS, to ensure a smooth technical integration for the new forms.

Civilla recommends a broad engagement and communications effort beginning with small, in-person meetings with stakeholders including the legislature, advocacy groups, community partner organizations, unions, and other units of state government to ensure they feel heard and involved in the process. DSS will also need to communicate these changes internally from leadership down to frontline staff, preferably with in-person walkthroughs to provide an opportunity for staff to give input while learning the intent and context of the changes.

Call Center, Resource Center, and Processing Center staff will need in-person, peer-to-peer training on how to process the new application and use the standardized interview guide to ensure consistency across programs.

The team recommends that DSS roll out the new application and renewals at the same time, and have a team on the ground in the first 4-6 weeks to gather further feedback and quickly troubleshoot any issues that arise.

## PHASE 2

### Redesign benefits correspondence letters

Towards the end of Design and Testing for Phase 1, DSS can begin Phase 2, which focuses on a human-centered redesign of a core set of correspondence, including case action notices and verification request forms. Since many of these letters share similar design patterns, DSS can increase efficiency by redesigning and implementing them at the same time. DSS should create a style guide based on research findings to help staff apply similar design patterns to other sets of correspondence.





## Design and Testing (6 Months)

During this period, the team will redesign a core set of DSS correspondence based on feedback gathered through extensive user testing with DSS participants and staff. Similar to Phase 1, DSS will also need to complete legal and policy reviews to bring the new letters into alignment with all federal, state, and departmental requirements.

## Implementation (6-9 Months)

To implement the new correspondence letters, DSS will need to perform technical integration work on the correspondence engine to ensure the new forms can be collated, pre-populated, printed, and sent.

DSS will need to inform stakeholders of the changes to the correspondence letters and describe potential impacts so that individuals and organizations can provide continued support for participants.

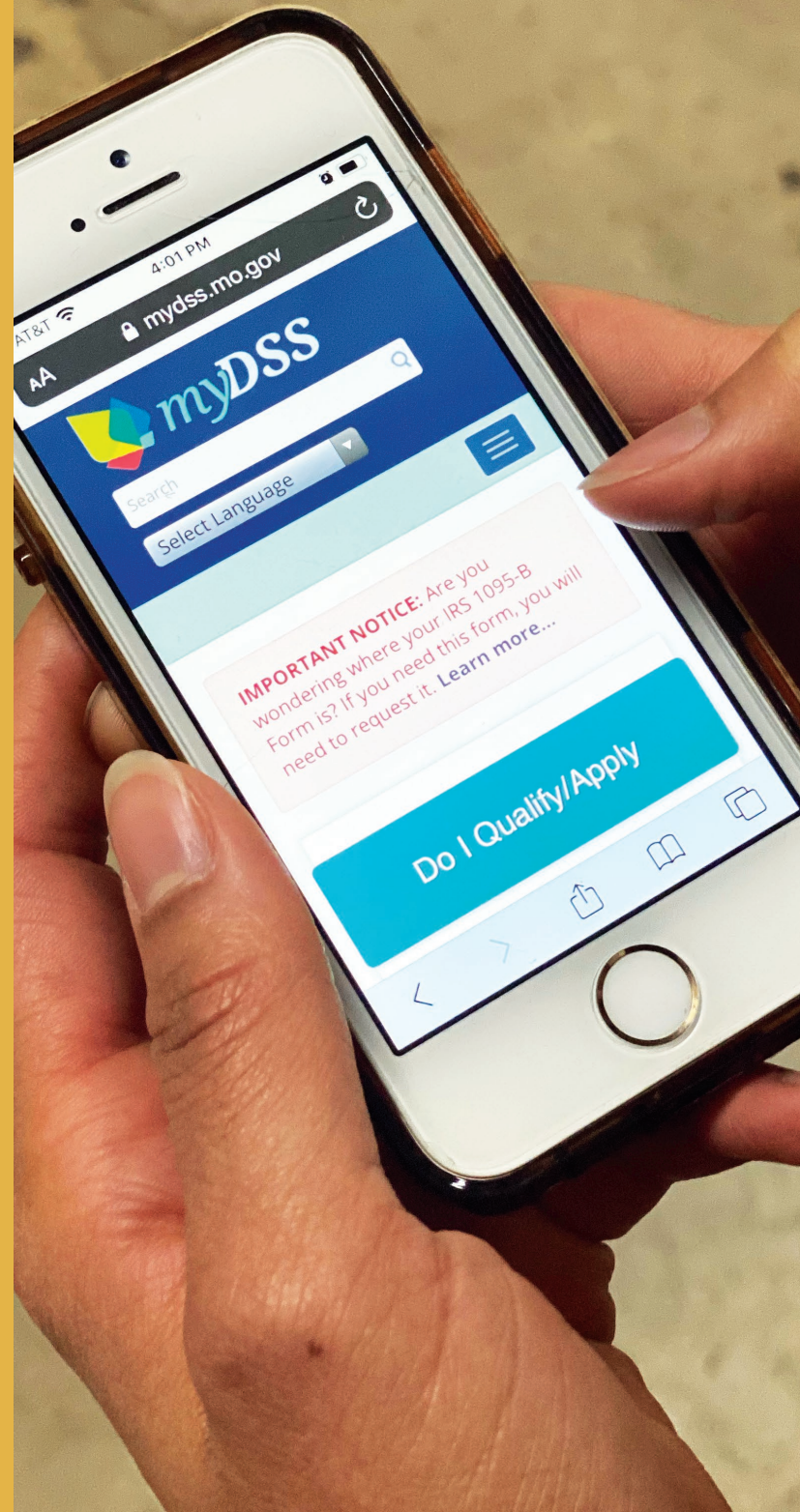
Before rolling out the new correspondence statewide, the team will need to talk with all levels of DSS from leadership to frontline staff about the new correspondence so they understand the impacts to their job and can guide participants through the process.

## PHASE 3

### Design a modernized and mobile-first case management system

While there are many details that still need to be determined, Civilla recommends some broad best practices that will help set DSS up for success in an area where many state governments have encountered serious difficulties.

Civilla recommends that DSS begin developing a modern case management system as early as Q1 of 2021. To maximize efficiency and the likelihood of success, DSS should simplify the application and renewals on paper first and use lessons from that work to inform the design, development, and prioritization of case management features. The team recommends that DSS start with the Food Stamp Program, Family Medical, and Adult Medical programs before expanding to Child Care, Cash, and LIHEAP.



## Gather the Right Team

To make this a successful project, it's critical that DSS gather a team with proven experience in modern government software development and give them the necessary authority to build a system designed for the needs of DSS users.

This team should be led by a Product Owner with experience in human-centered design and the necessary independence to decide what the team prioritizes and develops. The Product Owner should be accountable to an executive Steering Committee and supported by a small team of policy, field operations, and data experts from within DSS. The Product Owner should have experience leading complex technology products and understand how to balance competing needs to best serve end users, technology, policy, and organizational priorities.

DSS leadership and the Product Owner should select a modern digital services vendor with proven experience in agile development practices and human-centered design. The vendor should provide a Technical Lead and small team of developers and designers, and the vendor team should be paired with an independent user experience lead from within DSS or a separate partner that is responsible for ensuring continuity across the full user journey. This delineation of responsibilities ensures user needs will be surfaced throughout the process and trade-offs between policy, budget, technical constraints, user needs, and organizational priorities can be made by DSS leadership rather than the vendors. A collaborative partnership between everyone on the team and a shared vision of building a system that works for users will help set this team up for success.

## Best Practices for Design and Development

Civilla recommends that the DSS Product Owner break the development timeline and scope into small, manageable pieces that the entire team can focus on together. Given the research to date, Civilla sees at least seven distinct modules of work, though this number may change as the team begins working. These modules include: dashboard and navigation, application, renewals, document upload, change reporting, view letters/correspondence, and account creation/management. Any additional modules should be researched more thoroughly before being prioritized over these core system functions.

The team should begin work on each module with 4-6 weeks of discovery research to identify the needs of real users before building functionality. Then, the team should design wireframes and mockups they can test with real users before moving into development. The DSS Product Owner should plan for 3-4 rounds of testing per module.

As the team builds new features, they should release them in phases and test with users as they go. Initially, the team should test a limited set of functionality with a small number of users and then add in more complex functionality and a greater user base over time. This will help ensure the system is meeting user needs and is resilient enough to scale to meet statewide demand.

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This work would not have been possible without the contributions of dozens of participants, frontline staff, and state leaders who shared their knowledge and experiences. In particular, DSS and Civilla would like to thank all of the hard-working frontline staff in local offices who contributed to the success of this project.

## DSS

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Melody Webb  
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### DSS Offices

#### Bolivar

- *Resource Center*
- *MAGI Processing Center*

#### Columbia

- *Resource Center*
- *Call Center*

#### Jefferson City

- *WIPRO Call Center*

#### Kansas City

- *Resource Center*
- *TANF and Child Care Processing Center*

#### Kansas City Midtown

- *Resource Center*
- *Midtown Call Center*

#### Kennett

- *Resource Center*
- *Processing Center*

#### Ozark

- *Resource Center*
- *MAGI Processing Center*

#### Page

- *Resource Center*
- *Call Center*

#### Sikeston

- *Resource Center*
- *Processing Center*

#### Springfield

- *Sunshine Resource Center*
- *MHABD and MRT Processing Center*

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Legal Aid of Western Missouri  
Legal Services of Eastern Missouri  
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Northeast Missouri Health Council

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**Missouri Benefits Enrollment Transformation**

Transforming the Enrollment Process for End Users

A report from Civilla + Missouri Department of Social Services + Missouri Foundation for Health

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