Web-Based Benefits Access Tools: Mitigating Barriers for Special Needs Populations

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Final Report

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I. WEB-BASED BENEFITS ACCESS TOOLS

The explosion of web-based technologies in recent years has been reinventing the way government delivers services and connects with potential benefit program applicants and participants. Increasingly, public and private organizations are using the Internet rather than traditional paper application methods to bring people into public assistance programs. Public and private entities have developed three key types of web-based technologies intended to help people apply for benefit programs in which they do not currently participate: (1) online screeners and benefit calculators with interactive software to help people assess their eligibility for programs and estimate their level of benefits; (2) online applications that can be filled out, printed, and then delivered to the program office(s); and (3) online applications that can be submitted electronically, relieving the pressure of relying on mail delivery or delivering applications to program offices not conveniently located or open during convenient times. Many efforts offer some combination of the above.

Most web-based benefits access tools developed recently are intended for self-service use by potential recipients, but certain barriers prevalent among the low-income population, such as lack of access to computers and the Internet and low levels of literacy and computer literacy, may limit their utility. Some subgroups of the low-income population may face unique barriers that further limit the utility of these tools. Examples include homeless and disabled individuals who often lack the documentation necessary to verify information submitted in an online application or noncitizens who may be confused about eligibility rules or fear that accessing government benefits will jeopardize their residency or citizenship status.

In this paper, we discuss specific barriers and needs among various segments of the low-income population with respect to access and use of web-based benefits access tools, and provide examples of strategies intended to mitigate these problems. It is the fifth and final component of a project Mathematica Policy Research conducted under contract to the Office of the Assistant Secretary for Planning and Evaluation at the Department of Health and Human Services (HHS) with funding from the Administration for Children and Families, and the HHS Center for Faith-Based and Neighborhood Partnerships. The first component of the project was a national scan of web-based benefits access efforts, through which we identified and summarized 86 efforts (Kauff et al. 2011a). The second component of the project involved case studies of a small subset of the efforts identified in the national scan. The third and fourth components were an issue brief (Sama-Miller and Kauff 2011) and a report (Kauff et al. 2011b) that summarized findings from the case studies.

In this paper, we draw on the data collected during the case studies. To supplement information from the case studies, we also conducted a limited literature review and draw on other Mathematica projects. There have been no rigorous evaluations of the strategies presented in this paper; thus, we describe potentially promising practices used by public and private entities to reach some of the most vulnerable low-income individuals and families. In this introductory section, we describe the case studies. In Section 2, we discuss barriers to access and the unmet needs of specific subpopulations. In Section 3, we detail several strategies for mitigating these barriers. Finally, in Section 4 we discuss the implications of this research for the future development and implementation of web-based benefits access tools.
A. Web-Based Benefits Access Efforts

Primary data used in this paper were collected from case studies of a small subset of 86 web-based benefits access efforts identified by a national scan of web-based benefits access tools completed under the contract (Kauff et al. 2011a). All 86 efforts used web-based technology to interface with potential program applicants to help them access multiple federally funded benefit programs for which they qualify but in which they do not participate. Some were developed and are managed by public agencies, some by private organizations, and some by a combination of these. Some of the administering entities intentionally developed strategies to mitigate barriers to use of web-based tools among vulnerable subgroups of the low-income population, and some did not. Their approaches were largely driven by whether their intention in developing the effort was to increase program access, increase program efficiency, or a combination of both. The case studies featured efforts with more complex, interactive features—such as an online screening tool and electronic application submission—and different types of management structures. The case studies included the following efforts:

**ACCESS NYC.** ACCESS NYC is a screener for 35 programs and benefits application portals for five programs in New York City. It was spearheaded by the Deputy Mayor for Health and Human Services and is managed by HHS-Connect, an initiative administratively located within the City’s Department of Information Technology and Telecommunications. HHS-Connect spearheads technology solutions for integration among city human service agencies. ACCESS NYC is available to the public for self-service use in seven languages. The screener consists of two levels. Users complete an initial screen that provides general information about the kinds of programs that might be available for their households. They then have the option to provide more detailed information that will help determine their potential eligibility for specific programs. At any time, users may submit online applications for school meals, the Supplemental Nutrition Assistance Program (SNAP), Medicaid recertifications, and the state Senior Citizen and Disability Rent Increase Exemption.

**Benefits CalWIN.** Benefits CalWIN is an online tool that enables screening, online application submission, and online program recertifications for SNAP, Medicaid, and Temporary Assistance for Needy Families (TANF) in a consortium of 18 counties (including San Francisco) in California. The Benefits CalWIN website is publicly available through https://www.benefitscalwin.org or the state and county websites, and offers language options in English, Spanish, and Chinese. The tool and its name are linked to the California Welfare Information Network (CalWIN), the consortium’s eligibility determination, benefit calculation, enrollment, and case management system. Users may create an account that saves screening data and provides access to all other features on the site, including the benefit application. Information from the screener does not prepopulate the application, and there is no requirement to screen before applying. Users may choose the programs for which they want to apply; the final page of the application requires an electronic signature and lists the required verification documents to upload or send to the office. Scanned images may be attached to the application. After submission, clients receive a printable final summary with a tracking number that they can use as a reference if they call to track the progress of their application. As of April 2011, clients may also recertify and submit quarterly reports online for SNAP through Benefits CalWIN.

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1. Screening and online application functionalities are available for SNAP, Medicaid, and TANF. Online recertification and quarterly reporting are available only for SNAP at this time. The CalWIN consortium is planning to implement online redetermination and periodic reporting for TANF and Medicaid by first quarter 2012.
Benefits Enrollment Network (BEN). Single Stop USA is a national nonprofit organization that funds approximately 80 community-based organizations (CBOs) and community college sites in New York, New Jersey, California, Florida, and New Mexico to implement and operate its model of service, which includes four components: benefits screening and application assistance, tax preparation, legal counseling, and financial counseling. For the screening and application assistance, Single Stop counselors use BEN, an online tool, on behalf of clients to determine their potential eligibility for a range of federal, state, and local benefits and tax credits. In each site, BEN includes core federal programs such as SNAP and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), child care assistance, TANF, Medicaid, Children’s Health Insurance Program (CHIP), and federal tax credits. The number and types of programs included in the tool vary at each site, however; in some sites, the tool includes only the core programs, while others include more than 40 programs. BEN can use data entered for the screening to prepopulate benefit applications that clients can submit on their own. While BEN is capable of allowing electronic application submission, this feature was not available in any operational sites at the time of the case studies. BEN data do not feed into any federal or state agency portal, so data must be re-entered into other online application tools if clients want to apply online for benefits. Single Stop counselors can assist clients through this process.

Delaware Application for Social Services and Internet Screening Tool (ASSIST). Delaware ASSIST was created by the Division of Social Services (DSS), housed within the Delaware Department of Health and Social Services. DSS is responsible for administering and determining initial and ongoing eligibility for TANF, SNAP, most Medicaid programs, General Assistance, and child care assistance. ASSIST is a self-service tool that helps users determine potential eligibility and enables them to complete and electronically submit applications with electronic signatures for these programs. Online application data are automatically downloaded into the state mainframe eligibility system. ASSIST is based on Pennsylvania’s online screener and application tool, The Commonwealth of Pennsylvania Access to Social Services (COMPASS).

EarnBenefits®. EarnBenefits was developed and is operated by the national nonprofit organization Structured Employment Economic Development Corporation (Seedco). The initiative promotes work support through education about available benefits, facilitated access to benefits, and benefits management. Access to benefits is achieved through an online screener for a variety of federal, state, and city programs used by trained counselors on behalf of clients. While the tool is capable of allowing electronic application submission, this feature is not currently in use in any of the sites. Instead, online applications are prepopulated and printed for submission by the client, and counselors at CBOs and other local organizations implementing EarnBenefits guide clients through the application process. The number and types of benefit programs included in the tool vary by locality. At the time of data collection for the study, EarnBenefits was operational in select areas in New York, Tennessee, Georgia, Maryland, Kentucky, Oklahoma, Massachusetts, and Connecticut. EarnBenefits is also preparing to launch in Illinois and Louisiana and, as of October 2011, will no longer be operational in Kentucky or Buffalo, New York. In New York City, where we focused our data collection, the tool includes almost 20 programs.

One-e-App. One-e-App is a self-service tool that allows users to screen and electronically submit applications for a range of benefit programs according to the locality in which it is implemented. Social Interest Solutions, a nonprofit organization dedicated to making public benefits enrollment easier through technology, owns and operates One-e-App and tailors and licenses it to state agencies to implement. It is currently in use under different names in Arizona (Health-e-Arizona, or HEA), California (One-e-App), Indiana (Ind-e-App), and Maryland (Health-e-Link). HEA, which was the focus of our data collection, allows users statewide to screen and electronically
submit a single combined application or individual applications for TANF, SNAP, Medicaid, CHIP, and the Medicare Savings Program. Individuals may also recertify for those programs through HEA.

The Benefit Bank (TBB). TBB is an online tool that can be used to help individuals and families screen for benefit eligibility and prepare and submit tax returns, benefit applications, and the Free Application for Federal Student Aid for Pell grants. TBB exists in some form in Ohio, Arkansas, Florida, Indiana, Kansas, Maine, Mississippi, North Carolina, Pennsylvania, South Carolina, and Texas. The number and types of programs included in the tool vary by locality. In Ohio, where the tool is called the Ohio Benefit Bank (OBB), it includes approximately 20 programs, the largest number among all states. In each state where TBB exists, online access to it is available through trained benefit counselors at community based organizations. Counselors use the computerized tool in conjunction with educational outreach to raise awareness of available tax credits and benefit programs. In some states (including Ohio, where we focused our data collection), the public may also access a self-service version of TBB. Where supported by the appropriate state or federal agency, applications may be filed electronically through TBB.

Utah Helps/myCase. The electronic Resource and Eligibility Product (eREP) is the Utah Department of Workforce Services’ rules-based eligibility determination system, which encompasses approximately 30 programs. The state Department of Technology Services runs eREP and the public-use online tools that allow customers to interact with eREP data. First, Utah Helps allows customers to screen for benefits and complete and submit online applications for 13 programs (data must later be rekeyed into eREP by a worker). MyCase allows customers to receive (but not submit) information about active cases; it is currently being enhanced to replace and improve the functionality of Utah Helps to allow customers to update cases online and automatically populate eREP with online data.

B. Case Study Information Collection

We collected information for the case studies primarily through on-site discussions with individuals and small groups. Key contacts within each site assisted us in identifying the appropriate individuals with whom we could discuss various aspects of each benefits access system. Discussions were held with administrators and staff (policy, program, and information technology) of federal, state, and local government agencies; software developers; training and technical assistance providers; and administrators and staff at nonprofit or for-profit partners involved in the development, operation, or use of the initiative. Discussions were guided by protocols tailored to each unique site and respondent type. The protocols were designed to be flexible enough to inspire free-flowing conversation but structured enough to capture similar information across sites in an average of 60 to 90 minutes. Protocols focused on the design, development, implementation, operations, funding and costs, outputs and outcomes, and sustainability and replicability of the web-based benefits access efforts.2

For web-based benefits access efforts that are operational in multiple sites, we selected one site to visit in person and supplemented the site visit data with telephone interviews in additional sites. Table I.1 identifies the sites in which we collected data. Findings presented in this report reflect implementation and operations of efforts in all of these sites at the time we collected the data in spring 2011.

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2 No more than nine people were asked the same questions.
Table I.1. Data Collection Sites for Case Studies

<table>
<thead>
<tr>
<th>Effort</th>
<th>In-Person Interviews</th>
<th>Telephone Interviews</th>
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<tbody>
<tr>
<td>ACCESS NYC</td>
<td>New York City, NY</td>
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<tr>
<td>Benefits CalWIN</td>
<td>San Francisco, CA</td>
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<tr>
<td>BEN</td>
<td>Las Cruces, NM</td>
<td>New York City, NY</td>
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<td>Delaware ASSIST</td>
<td>State of DE</td>
<td>-</td>
</tr>
<tr>
<td>EarnBenefits</td>
<td>New York City, NY</td>
<td>Atlanta, GA; Memphis, TN</td>
</tr>
<tr>
<td>One-e-App</td>
<td>State of AZ&lt;sup&gt;a&lt;/sup&gt;</td>
<td>State of CA</td>
</tr>
<tr>
<td>TBB</td>
<td>State of OH&lt;sup&gt;b&lt;/sup&gt;</td>
<td>State of SC</td>
</tr>
<tr>
<td>Utah Helps/myCase</td>
<td>State of UT</td>
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</tr>
</tbody>
</table>

<sup>a</sup> In Arizona, One-e-App is called Health-e-Arizona (HEA).

<sup>b</sup> In Ohio, TBB is called the Ohio Benefit Bank (OBB).
II. BARRIERS AND NEEDS AMONG SPECIAL POPULATIONS

The utility of web-based benefits access tools is contingent upon user access to and familiarity with the Internet. The National Telecommunications and Information Administration (NTIA) reports that, although Internet use has risen sharply in the United States in the last decade, disparities persist in computer and broadband access and usage (NTIA 2011). While data show that this “digital divide” is narrowing; lower levels of family income and education, as well as employment status, household type, and disability status, continue to negatively affect households’ likelihood of having broadband access. Caucasian households are also more likely to have broadband access than African American and Hispanic households (NTIA 2011).

Respondents to the U.S. Census Bureau’s Current Population Survey Internet Use Supplement who did not have Internet access at home reported that cost was the main reason they were nonsubscribers (NTIA 2011). Furthermore, populations with low levels of literacy and digital literacy may experience greater difficulties in understanding web-based materials. NTIA reports that individuals who have some high school experience but no diploma and those with only elementary school experience have a 29.5 and 15.2 percent adoption rate, respectively, compared to individuals with at least a bachelor’s degree, who have an 84.2 percent adoption rate (NTIA 2011). The National Assessment of Adult Literacy (NAAL) reports that 11 million adults are not literate in English, with more than 4 million who could not take the test because of language barriers (NAAL 2003).

The “digital divide” may disproportionately affect certain segments of the population with low-income. For example, seniors with low-incomes are more likely to have lower levels of digital literacy. A national Kaiser Family Foundation survey of older Americans found that less than one-third of all seniors 65 and over have gone online, and less than half of all seniors have ever used a computer (Rideout et al., 2005). Additionally, rural populations are less likely than their urban counterparts to have broadband connections at home. In 2010, 60.2 percent of rural households compared to 70.3 percent of urban households reported having a broadband connection (NTIA 2011).

Various segments of the population eligible for benefits face other barriers to accessing and using web-based benefits access tools. Some barriers are related to individual characteristics, such as language, literacy, or effects of aging, while others are situational or structural, such as lack of stable housing or distance from the nearest library or benefit office that offers Internet connections. In this section, we describe some of the barriers and potential needs among these groups with respect to web-based benefits access tools.

A. Limited English Speakers and Noncitizens

Language barriers prevent many limited English speakers from accessing and understanding information available on web-based benefits access tools. Studies suggest that the complexity of benefit application rules and confusion about eligibility can negatively affect the up-take of benefits (Remler and Glied 2003). In a study by Stuber et al., 2000 applicants confused by eligibility rules were 1.8 times less likely to apply for Medicaid services. Printable online applications can be between 10 and 20 pages in length. Furthermore, technical language required to describe human service and health benefits is often difficult to understand and is above the third- to sixth-grade reading level that many sites strive to achieve. For limited English speakers, confusion about eligibility may be magnified by a lack of English proficiency and comprehension. Technical language, however, can be difficult to translate into some languages.
Limited English speakers and noncitizens also are often hesitant to seek benefits due to misperceptions about their eligibility and fears about deportation and public charge issues. Indeed, it is often difficult for noncitizens to determine whether they are, in fact, eligible for certain benefits due to rules and regulations regarding length of time spent in the U.S., and asylee, refugee, or trafficking victim status (Crosnoe et.al., 2012). Because rules vary across programs, web-based tools that promote access to multiple benefits might yield screening results that may not seem intuitive to users. In addition, noncitizens may associate some of the procedures involved in benefit application, including interviews and finger imaging, with procedures conducted by the Immigration and Naturalization Service³ (Holcomb et al., 2003). A study by the Urban Institute reports that many noncitizens access benefit services in non-welfare settings, including hospital emergency departments and community health clinics, due, in part, to greater access to translation services and fewer fears of disclosing immigration status (Holcomb et al., 2003). Indeed, while only 17 percent of applications submitted through Benefits CalWIN overall are from non-English speakers, 46 percent of applications submitted through Benefits CalWIN with the help of a CBO are from non-English speakers.

Given these barriers and needs, limited English speakers and noncitizens might benefit from the following:

- Translation of web-based tools and associated material into multiple languages
- Culturally sensitive marketing and application materials that address the cultural as well as linguistic needs of specific populations
- Use of images to pictorially describe difficult language related to eligibility
- Targeted outreach and application assistance in non-welfare settings and through organizations trusted by the community
- Education to dispel myths about eligibility and citizenship
- Use of application procedures with an “opt-out” mechanism for non-applicant family members that makes it clear that only those who will be receiving the benefit are required to have their immigration status verified.

B. Homeless/Unstably Housed Individuals and Families

Homeless and unstably housed individuals face several barriers to accessing and using online benefits access tools, including lack of documentation, lack of a stable address, fragile support networks, and feelings of stigma and distrust (Kauff et al. 2009). For example, homeless and unstably housed individuals frequently move among shelters, the street, and friends’ and relatives’ homes without carrying the identification or other documentation required for the benefits application process. Because these individuals do not have a stable address, they often have no way of receiving correspondence regarding benefits. Furthermore, they may have limited support networks to rely on for help in connecting to benefit services. Families who are homeless or unstably housed face similar challenges.

³ In March of 2003 the Immigration and Naturalization Service was transferred to the newly created U.S. Department of Homeland Security and its name was changed to Immigration and Customs Enforcement.
The mental health and substance use problems that many in this group face may further compromise their ability to navigate the benefits application process. As many as 77 percent of adults who are homeless report a chronic health condition (Kauff et al. 2009), and on any given night in January 2010, 26.2 percent of all sheltered persons who were homeless had a severe mental illness, while 34 percent of all sheltered adults who were homeless had chronic substance use issues (Paquette 2010). The most common mental health disorder among the homeless population is substance abuse (Fazel et al. 2008). Indeed, a systematic review of the prevalence of mental illness and substance abuse among homeless populations reports that these populations are substantially more likely than the general population to have alcohol and drug dependence (Fazel et al. 2008). These problems limit physical and cognitive functioning and impair an individual’s ability to make decisions and keep appointments (van der Plas et al. 2009), both of which may be necessary to complete an online benefits application process. In addition, approximately 23 percent of individuals who are homeless have been incarcerated (Kushel et al. 2005), which often contributes to the populations’ general distrust of other types of agencies, including health and social service agencies (Nichols and Cazares 2011).

Recognizing these challenges, one of the objectives in “Opening Doors: Federal Strategic Plan to Prevent and End Homelessness,” the nation’s first comprehensive federal strategic plan to address homelessness, is to improve access to mainstream programs and services to reduce people’s financial vulnerability to homelessness. The federal government is supporting this objective by documenting, disseminating, and promoting the use of best practices in expediting access to income and work supports, including online consolidated application processing and electronic submission.

Additionally, given their barriers and needs, homeless/unstably housed individuals might benefit from the following:

- Intensive outreach strategies focused on engagement and allaying distrust of case or social workers
- Screening and application assistance through an authorized representative who can receive program communication on the applicant’s behalf
- Electronic verification of application information for those who lack physical documentation of identity, income, assets, expenses, and other program eligibility parameters
- Assistance obtaining an email address for sending and receiving electronic communication

C. Reentering Prisoners

Research suggests that many reentering prisoners are released with only enough money to support them for a few days (Richards and Jones 1997) and are often likely to become homeless (Hals 2005). Reentering prisoners also face barriers similar to those among the homeless population, including mental health and substance abuse problems, fragile support networks, and lack of stable housing. Approximately 16 percent report problems with mental illness, and up to 75 percent report having a history of substance abuse (Roman and Travis 2004; Coley and Barton 2006). Reentering prisoner populations also have generally low levels of education. One study reports that the median level of educational attainment for reentering prisoners is 11th grade (Urban Institute LIWF Fact Sheet 2008), while others estimate that 41 percent of incarcerated adults have less than a high school education (Coley and Barton 2006).
Prisoners are not eligible to receive most public benefits during the time they are incarcerated (see [http://www.prisonlaw.com/pdfs/BenefitsLetter_Aug2011.pdf](http://www.prisonlaw.com/pdfs/BenefitsLetter_Aug2011.pdf) for examples of benefits available to prisoners and parolees in one state). However, although there are exceptions, once paroled or discharged, they are usually eligible for benefits based on the eligibility criteria that apply to the general population.⁴

Prisoners can prepare program applications during incarceration to submit upon their release. Access to web-based applications, however, poses a problem for prisoners as well as their case managers. Access to computers, and especially web-based applications, often is limited or not available within correctional institutions. Thus, authorized individuals may need to download paper applications and submit them by mail on prisoners’ behalf or enter information online from paper forms prisoners complete. This labor-intensive process reduces the efficiencies associated with web-based applications. Additionally, although they may become eligible for programs and benefits once paroled or discharged, applications that prisoners submit during incarceration might be denied even if their release is imminent because of state-specific rules and requirements. Prisoners face the same problems of limited access to web-based screening tools as for web-based applications.

When there are opportunities to access online screening tools, these efforts could be an important part of discharge planning. Even without entering data online, a process through which case managers or discharge planners review with prisoners the screener questions and the kinds of information required for applications could substantially improve access. Failure to leverage web-based screening and application tools and provide assistance to prisoners in their use may result in missed opportunities for linking individuals to critical benefits that could help this vulnerable population reenter the workforce and limit recidivism and homelessness.⁵ Providing web-based access to eligibility screening and application assistance through halfway houses and work release programs or immediately upon release, as part of probation and parole activities, might also help reentering prisoners meet their immediate and long-term needs. This is being explored in some states.

Given these barriers and needs, reentering prisoners might benefit from the following:

- Discharge planning and correctional supervision that entails benefit screening and assistance in preparing web-based applications for submission on the date of release or shortly thereafter
- Discharge planning that entails communication with program agencies to determine whether online applications may be submitted and placed in pending status until the date of release
- Education prior to release and during correctional supervision regarding program eligibility criteria for prisoners and parolees

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D. Rural Populations

Rural populations experience barriers to accessing benefit services due to limited availability of computers and broadband service and distance to locations that provide these services. Data from NTIA show that rural residents are less likely than urban residents to adopt broadband Internet, even after adjusting for socioeconomic factors (NTIA 2010). Eligible rural populations without broadband access are unable to enroll in benefit programs from home and may also struggle to access locations that provide Internet access due to geographic barriers. Indeed, lack of public transportation in many rural areas limits residents from traveling to locations where computers and Internet services are available, or to CBO or welfare offices that can assist individuals in the application process. Only 32 percent of all rural counties have full access to public transportation services, 28 percent have limited access, and 40 percent have no public transit options at all (Stommes and Brown 2005). The United States Department of Agriculture’s (USDA) Economic Research Service rural development economist Dennis M. Brown and USDA sociologist Eileen S. Stommes state that, “for low-income rural residents, long commutes and lack of transportation are barriers to working. Limited transportation options also isolate the rural poor from government services and programs designed to lift them out of poverty” (Brown and Stommes 2004).

Given these barriers and needs, rural populations might benefit from the following:

- Mobile outreach and application assistance units (equipped with laptop computers, wireless service, scanner/printer/fax machines, and other necessary technology) that are able to visit low-income rural communities and provide on-site benefit application service assistance
- Access to marketing and education materials that includes dates when mobile outreach vans will visit the area

E. Students

Studies show that students from families with low-income are less likely than students from families with higher-income to complete postsecondary education (Purnell et al. 2004; Muraskin et al. 2004). Students from families with low-incomes often lack the financial resources necessary to complete postsecondary education, and are often unable to rely on their families for any financial assistance or support. As a result, those who do enroll often leave their degree program to earn an income and support themselves and their families (Muraskin et al. 2004). Furthermore, students from families with low-incomes may receive lower-quality K-12 education because they are more likely to attend K-12 schools with fewer resources (Muraskin et al. 2004). In turn, lower-quality K-12 education can limit students’ potential for merit-based financial scholarship or aid (Muraskin et al. 2004).

Recent increases in the overall level of funding available for student financial assistance, in particular the availability of Pell grants for low-income students, increases the saliency of developing better mechanisms to help students take advantage of federal resources.\(^6\) While the number of

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\(^6\) Between FYs 2008-09 and FYS 2012-13 student financial aid rose from $18.3 billion to $36 billion and the number of recipients increased from 6.1 million to 9.6 million. The maximum amount available for each grant in FYs 2010-2012 was $5,550. (Department of Education, Student Financial Assistance Request, FY 2012 Budget Request. Document accessed at [http://www2.ed.gov/about/overview/budget/budget12/justifications/p-sfa.pdf](http://www2.ed.gov/about/overview/budget/budget12/justifications/p-sfa.pdf))
students applying for and receiving Pell grants has substantially increased since 2007, there remains a significant proportion of potentially eligible students who have not applied for federal aid or whose federal aid package does not include a Pell grant (Mahan, 2011). Earlier research indicates that students often do not take advantage of benefits because of lack of information or because they think their families make too much money to qualify (Choy and Bobbitt 2000). They may also lack strong support systems or mentor figures who can assist and encourage them in seeking services that may help them afford their education. Furthermore, students that are low-income who are receiving financial aid are often still unable to cover costs of living and studying (Choy and Bobbitt 2000). In a study of low-income undergraduate students enrolled in full-time and full-year degree programs, 87 percent experienced unmet need (Choy and Bobbitt 2000). A more recent report (Mahan, 2011) indicates that for low-income students, financial aid, including loans, on average covers about 60 percent of the cost of attending. Students who are low-income and who are parents may be in particular need of child care assistance so that they can attend classes regularly, as well as other benefits that provide income support.

Research suggests that students gather information about financial aid programs through various techniques, such as online searching, informal conversations, and structured programming (Waters 2009), but many need assistance in completing the application because they have questions throughout the process (De la Rosa and Tierney 2007). Whether web-based tools that promote access to other benefits are useful to low-income students may then depend on the extent to which assistance is offered in their use.

Given these barriers and needs, low-income students may benefit from the following:

- Web-based benefits access tools prominently featured on computers in libraries and other public spaces on campus
- Application assistance accessible on site at postsecondary institutions through trained academic and financial aid advisors, faculty, and other staff
- Marketing and education campaigns focusing on eligibility criteria and benefit services available to students

F. Veterans

Veterans returning home from combat may be eligible for a broad range of public benefits, but the transition from service member to veteran can be emotionally and psychologically challenging for some. Veterans returning from war may have debilitating physical and/or mental health problems, making it difficult to navigate the complex web of public benefits, especially disability benefits. Furthermore, every veteran has an individual experience of the transition to civilian life, during which time it may be difficult for veterans and their families to seek the services they need. For example, some veterans may not be ready to schedule appointments with benefit service application assistants while they are still working to return to their daily routines. Veterans at this stage in their reentry may also find it difficult to read and digest large amounts of materials related to benefit services or make decisions about what benefits they would like to receive. Some returning

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7 Cost of attending includes the sum of tuition and fees; an allowance for books, supplies, transportation, and miscellaneous personal expenses; and an allowance for room and board.
veterans may also lack a sound support network to help engage them in the benefits application process (Overton et al. 2010).

Veterans’ families could also be eligible for a vast array of programs but might not be aware of them. Many veterans, especially those in the National Guard, earn more while in the military than they can earn in civilian employment, leaving their families especially vulnerable. Even when veterans and their families are aware of and ready to access benefits, tools may not exist to help them do so. Many programs specific to the needs of veterans and their families are not incorporated into existing web-based benefits access tools. Of the 86 web-based benefits access efforts identified in the scan completed under this contract, only 6 specifically included any veterans benefit programs; only one of the case study efforts (ACCESS NYC) included any veterans benefits, but access through the online tool was limited to a city and state of New York Individual Property Tax Exemption for veterans.

In addition, returning and older veterans face barriers to engaging in benefit services similar to those of many of the other populations discussed in this paper, including lack of stable housing, geographic barriers, issues related to stigma, and mental health disorders and substance abuse problems. Veterans with mental illness and substance abuse disorders made up 15.4 percent of all veterans using the Veterans Health Administration in 2007 (Watkins et al. 2011). Further, a study in the New England Journal of Medicine on mental health disorders and barriers to care for soldiers who served early in the Iraq and Afghanistan conflicts reported that only a small percentage of soldiers reporting mental health disorders had received mental health care services (Hoge et al. 2004).

The U.S. Department of Veterans Affairs (VA) estimated that in 2009, 131,000 veterans were homeless on any given night (Khadduri et al., 2010), and that as many as 260,000 veterans experienced homelessness over the course of that year. Indeed, in 2010, 13 percent of all adults living in shelters were veterans and 16 percent of homeless adults (i.e., persons living on the street, in transitional housing or shelters) were veterans (Khadduri et al. 2010). Veterans living in rural areas frequently experience geographic barriers to services (Schooley et al. 2010). A study of metropolitan and nonmetropolitan veteran facilities used by homeless veterans showed that, overall, nonmetropolitan homeless veterans access care less than their metropolitan counterparts (Gordon et al. 2010). The VA, a member of the United States Interagency Council on Homelessness (USICH), has developed a five-year plan to expand existing services available to veterans, develop new initiatives to keep veterans from entering homelessness, and treat those currently homeless (Dougherty and Smits 2009). The five-year plan focuses on developing services in six strategic areas, including outreach and education, treatment, prevention, housing and supportive services, income and employment benefits, and community partnerships. This initiative, included in “Opening Doors: Federal Strategic Plan to Prevent and End Homelessness,” aims to connect veterans with services at any point of contact they make with service agencies, be it a regional office or community organization.

Given these barriers and needs, veterans and their families might benefit from the following:

- Application assistance provided by any organization with which veterans make contact, be it a veterans organization or other community organizations
- More comprehensive tools, such as the Veterans’ Benefits Online Tool Project being developed by Disability Benefits 101 Information Services (DB101) with funding from
the California Health Incentives Improvement Project (this tool provides veterans with a specific and individual summary of available benefits by filling out a short web-based survey; this type of tool, used on its own or in tandem with a counselor, can help to link veterans to individualized services (Overton et al. 2010))

- Outreach and application assistance to families at VA Yellow Ribbon educational events and training for family assistance counselors

G. Seniors

The eligible senior population faces significant barriers to accessing and using web-based benefits access tools and has had historically lower rates of participation in benefit programs than non-senior adults. For example, according to the latest (2009) USDA estimates, about one-third of eligible elderly persons participate in SNAP—compared to 72 percent of all eligible individuals (Leftin 2010). Seniors with low-income are also less likely to have computer and broadband access at home that allows them to access web-based benefit tools, and seniors may experience greater difficulty in accessing services outside of the home due to decreased mobility and the need for transportation assistance (Chu et al. 2009). Health issues, including hearing and vision problems, can limit their ability to use web-based benefits access tools even when they are physically accessible (Chu et al. 2009). In addition, seniors with low-income are likely to have low levels of digital literacy and may require assistance using computer and Internet technology (Rideout et al., 2005).

Seniors also face many other barriers to benefits application in general. For example, research suggests that seniors participate in SNAP at lower rates than others, in part because they doubt their eligibility for benefits (McConnell and Ponza 1999). Studies also suggest that gaps in knowledge about available benefits, fear of stigma and other psychological reasons, program administration, and complexity of the enrollment process are significant reasons for nonparticipation by the senior population (Summer 2009; McConnell and Ponza 1999).

Given these barriers and needs, seniors might benefit from the following:

- Mobile outreach and application assistance units (equipped with laptop computers, wireless service, scanner/printer/fax machines, and other necessary technology) that visit seniors in their homes, community centers, or places of worship, and provide them with on-site benefit application assistance
- Ability to submit documentation, including signatures, electronically
- Outreach and education strategies that increase knowledge of unmet need for benefit services among the low-income senior population and explain web-based options for accessing benefits applications
- Web-based benefits access tools available for the blind and deaf

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8 Principals of the DB101 Core Team are ECONorthwest, Eightfold Way Consultants, and the World Institute on Disability.
III. STRATEGIES TO MITIGATE BARRIERS TO WEB-BASED ACCESS

Some public agencies and private organizations have intentionally developed strategies to mitigate barriers to accessing web-based benefits access tools among vulnerable subgroups of the low-income population. The extent to which they do so may be driven by the initial objectives of the tool. Entities develop and implement web-based tools for two key reasons—to increase client access to benefits and to increase public program efficiency. Entities that develop web-based tools primarily to increase access are more likely to develop strategies that target particularly vulnerable subgroups than those that develop tools primarily to create greater efficiencies in state government.

Strategies to mitigate barriers to access for particularly vulnerable populations differ in design and scope. In this section, we present strategies used in the case study sites. Some address one particular barrier to access, while others address several simultaneously. Thus, some may be useful for one particular subgroup, while others could be useful across multiple subgroups. Although some of the sites from which we collected data have begun to collect outcomes data and anecdotal evidence of the success of the strategy, no experimental or quasi-experimental evaluations have been conducted to shed light on how well any of the strategies presented here work; rather, they represent approaches that public and private entities have tried to reach the most vulnerable low-income individuals and families.

A. Partnerships with Community-Based Organizations (CBOs)

CBOs are local organizations that provide specific types of services to a community or a targeted subset of the community and, as such, are typically well-integrated into and trusted by the community. Some entities that administer web-based benefits access tools partner with CBOs to capitalize on their knowledge of and relationships with their client base. They rely on CBOs to different extents and in different ways, as described below.

Requiring Clients to Receive Assistance from a CBO. Some entities administering web-based benefits access tools require that clients seek assistance from a CBO to use the tool. In this model, the public at large may not access the tool directly; rather, trained staff members at public or private organizations input and retrieve information on a client’s behalf. Staff must have a user identification number and password to access the system, often provided only after they complete a training course on the tool.

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**EarnBenefits: Requiring Assistance from a CBO**

*Seedco works with CBOs and other local organizations around the country to screen clients for benefits using EarnBenefits; the software is password protected and may be accessed only by individuals who have received training in the use of the tool. Users (site staff members or volunteers) input client information during a client interview, the system rules engine determines potential eligibility for multiple benefits, and users inform clients of their potential eligibility for identified benefits. In New York City, EarnBenefits operates at several CBOs and one of two workforce centers Seedco manages (Seedco is hoping to bring EarnBenefits to the second one soon). The workforce centers are co-located with the New York State Department of Labor to serve a large number of dislocated workers. EarnBenefits is being used in child care settings in Tulsa and Atlanta; in Memphis, it is being used in child welfare agencies, community health care facilities, and other social service programs.*
Offering Clients Assistance from a CBO. Other entities merely offer assistance from a CBO. In this model, anyone with an Internet connection may access the tool at any time and from any location, but clients also may seek assistance from trained staff at CBOs who can help them use the tools. CBO staff can answer clients’ questions about program benefits, provide translation, navigate Internet programs on behalf of clients, or assist them through the process.

Benefits CalWIN: Offering Assistance from a CBO

Benefits CalWIN was designed for self-service use by the public. However, county office or CBO staff may assist clients in completing and submitting applications through Benefits CalWIN. Some county offices have self-service centers in which clients can use public computers to complete online applications. Caseworkers may help clients complete applications, including providing translation services, and may conduct intake interviews immediately, thus speeding up the intake process that traditionally requires clients who come into an office to return for interviews at a later date. San Francisco County uses CBOs in the community to increase use of Benefits CalWIN. The county works with more than 45 CBOs and contracts with 10 organizations to provide clients with assistance using the online application tool, as well as help them schedule interviews with the county office; previously, interviews sometimes were conducted using Skype, a free video chat service that uses a webcam linked to a computer. Skype was particularly important when a face-to-face interview was required. Because California now has a waiver that allows interviews to be completed by phone, webcam interviews currently are not emphasized.

Providing Clients Options Regarding Levels of Support. Although HEA and OBB began as tools accessible only with assistance from staff at a public or private service organization, both are now publicly accessible. The entities managing them, however, continue to coordinate with local organizations to train counselors who can help clients use the tools. In Arizona, HEA has a network of approximately 70 subscriber organizations in 220 locations throughout the state that assist clients with the online tool and can help follow up on cases with the caseworker. Most subscribers are medical providers, but Department of Economic Security (DES) staff have worked with a network of churches to reach out to the Latino community to let them know about the Spanish version of HEA. OBB is available in three models: Counselor Assisted (in which trained counselors assist individuals using the tool), Professional (in which trained counselors use the tool on behalf of clients and serve as their authorized representative), and Self Serve (in which clients use the tool totally on their own). The first two are offered at CBOs and other sites in conjunction with educational outreach to raise awareness of available tax credits and benefit programs. The intermediary organization that operates OBB employs five Regional Coordinators to recruit organizations to become OBB sites in their regions and markets OBB to CBOs in other ways. Many different types of organizations serve as OBB sites, including churches, food pantries, and prisons and prisoner reentry facilities.

Informing a Tool’s Development. Finally, some entities seek assistance from CBOs to inform initial development of their tools with an eye toward addressing at the outset the barriers that their clientele may face. For instance, input from the community helped shape Benefits CalWIN and its precursor, Benefits San Francisco. The consortium developing the tool contracted with 10 geographically and culturally diverse CBOs to participate in the development and use of the tool. CBO staff participated in focus groups and also hosted focus groups that included potential SNAP clients. Input from both groups affected the language and navigation on the website. During development of the eREP system, the Department of Workforce Services (DWS) consulted with a variety of stakeholders to inform the development of the tool. A representative from DWS was
assigned as a liaison with CBOs in Utah, provided them with information about the creation of the tool, and gave them the opportunity to provide comments.

B. Partnerships with Community Colleges

Partnering with community colleges may be one way to increase awareness about benefits among students and address unmet financial need. Single Stop is designed to connect low-income individuals and families with government funds and services. It aims to provide more holistic services to clients in locations they already visit for assistance. It began in New York City at a jail, as well as One-Stop centers, food pantries, and other CBOs. As part of an effort to meet their mission of replication, scale, and impact, Single Stop USA created a new strategic plan to focus on expanding nationally to community college sites. By establishing sites at community colleges, it hopes to link students struggling to stay in school to public benefits and supports so they can graduate and reap the rewards of higher education.

Single Stop USA employs a comprehensive evaluation of potential partners and works closely with the Association of Community College Trustees (ACCT) to identify new community college partners. ACCT provides strategic advice and counsel to Single Stop USA as it works to identify strong visionary leaders and institutions in need. Once a new site is confirmed, Single Stop USA enters into a contract with the school, which states that, with funding from the former, it will hire at least one full-time coordinator to run the program (ideally, Single Stop USA would like at least two dedicated staff members at each site). Single Stop USA then contracts directly with a financial counselor, a legal provider, and a tax assistance provider in the area to bring those services to the campus. Coordinators are immediately encouraged to develop relationships with other organizations on the ground, including the local human services agencies.

Other entities have also recognized the potential of integrating benefits access efforts into the community college setting. Recently, a consortium of foundations funded an initiative, managed by the Center for Law and Social Policy (CLASP) and the American Association of Community Colleges (AACC), to help seven colleges design and implement models that assist low-income students in acquiring public benefits. Through this project, institutions may undertake the following types of activities:

- Developing or expanding a benefits access screening program, including working with state agencies to establish Memoranda of Understanding (MOUs) and other agreements to facilitate information sharing, cost sharing, and other partnerships
- Training college staff and relevant faculty to use benefits access screening software and/or engage in benefits access outreach and screening activities
- Aligning existing technology that will support increased benefits access for students
- Providing training and services related to ensuring that staff and faculty conducting benefits screenings are well versed in data systems and public benefits eligibility and how to help students gain access to services
- Informing the student body within the community through outreach/advertising to make students aware of services and supports to help them complete community college programs
- Integrating benefits access/benefits screening into the community college system and planning for sustainability of changes that streamline benefits access for students
The Request for Proposal (RFP), which provided funding requirements for the individual community colleges, highlighted the importance of working with local and state agencies around benefit access. The RFP stated, “While community college sites will be the locus of most of the Initiative activity, colleges will need to focus some initiative support at the local and state level because local and/or state benefits and postsecondary policies provide the context within which community colleges operate and create or limit options and opportunities available to colleges under the Initiative. A portion of the planning and implementation grants for each site will be dedicated to state-level activities. At the state level, supported activities may include:

- State-provided training for community college staff on use of online benefits application systems and changes in state and federal policies
- Planning for enhancements to online benefits application systems, including additional programs and linkages between benefits access and financial aid calculators and applications, as well as integrating with required state health care exchanges to be implemented by 2014
- State assistance to solve problems that arise and, as needed, modifications to policy or procedures that fix problems
- State assistance with identifying strategies for taking benefit access in the community college to scale after the project completes.”

C. Mobile Outreach and Application Assistance

Mobile outreach and on-site application assistance initiatives are intended to reach low-income populations with transportation or mobility problems, or those not inclined to visit a program office or CBO, including rural populations, homeless individuals, seniors, and prisoners and reentering populations. Through this strategy, outreach staff travel to venues where concentrations of the target population reside and station themselves at various locations throughout the community where they are visible, there is substantial foot traffic, and/or members of the target group are likely to seek other services. Three prominent examples include:

- **OBB.** OBB uses a mobile van—staffed by OBB outreach workers and equipped with satellite Internet, eight laptops, two work stations, and a generator—to reach vulnerable populations that may not be able to travel to a local office or partner organization. The van travels to various locations, providing application assistance and enrolling clients in programs. The van is also used when there is a natural disaster or economic downturn, such as a plant closing, to get benefits to clients quickly.

- **Project Bread’s Reaching the Latino Working Poor in Massachusetts Demonstration.** Massachusetts received a grant from USDA’s Food and Nutrition Service to design and implement a demonstration to help overcome barriers to program participation faced by Latinos, including misconceptions and fears of interacting with a government agency and difficulty in communicating with English-speaking workers. The state contracted with Project Bread, a nonprofit anti-hunger organization, to carry out the demonstration. Project Bread hired two outreach workers (one for each of two demonstration pilot communities in the state) to provide application assistance to the target population using the state’s online application tool, the Virtual Gateway. The workers carry computers with air cards (which provide access to the Internet even when they are not in range of a wireless Internet hotspot). Workers also bring with them any
other technology they need to submit program applications during in-person meetings with a client. Application assistance occurs at community organizations that are often visited by the Latino working poor and is provided by appointment and on a walk-in basis.

- **Supplemental Security Income (SSI)/Social Security Disability Insurance (SSDI) Outreach, Access and Recovery (SOAR).** The SOAR model, funded by the Substance Abuse and Mental Health Services Administration in the Department of Health and Human Services, targets homeless individuals in an effort to link those with disabilities to SSI or SSDI benefits. Case managers, outreach workers, and other front-line staff are trained to engage individuals and facilitate the benefits application process on their behalf. Trained staff can meet with individuals in any location—including a shelter, a food pantry, or the street—to collect information necessary for the application. SOAR encourages staff to become an applicant’s authorized representative and submit the SSDI application and certain components of the SSI application online. SOAR is now being offered within some prisons and jails, especially to individuals with mental illness or co-occurring disorders, to facilitate enrollment prior to release.

**D. Remote Outreach and Application Assistance**

Another way of reaching low-income populations that may not know they are eligible for benefits, have transportation or mobility problems, or fear the stigma of appearing in person at a program office is to offer remote outreach and application assistance using technology in addition to, or instead of, in-person contact. Populations served using this strategy might include rural populations, seniors, eligible noncitizens, veterans, and returning prisoners. In this strategy, staff initiate contact or respond to client contacts from a remote location instead of visiting with potential applicants in person. Using this strategy, applicants are able to complete the application process over the phone without having to leave their homes, or from a location more convenient and comfortable than the program office. Two examples include the following:

**BenePhilly.** Benefits Data Trust (BDT) is a nonprofit organization based in Philadelphia that focuses on increasing access to public benefits for low-income Pennsylvanians. In collaboration with the Department on Aging and the Pennsylvania Department of Public Welfare, BDT operates BenePhilly, a program that provides screening and application assistance to seniors for a range of federal and state assistance programs. Programs include SNAP, the Medicare Low Income Subsidy, the state’s Property Tax and Rent Rebate program, and medical prescription drug plans—called Pharmaceutical Assistance Contract for the Elderly (PACE) and PACE Needs Enhancement Tier. BenePhilly uses the following two key strategies to identify, contact, and educate limited-income seniors and help them apply for multiple state and federal benefit programs:

- **Targeting through list strategies.** BDT develops specific MOUs with regional, state, and federal agencies that allow these agencies to share program enrollment lists while ensuring the protection and regulating the use of these data. When cross-referencing these lists, it is possible to identify individuals who are very likely eligible for benefits having similar income limits but who are not yet enrolled in those programs. Through a list-cleansing process, BDT eliminates individuals ineligible for or already enrolled in specific benefit programs. What remains is a list of individuals very likely eligible for, but not receiving, one or more specific benefits.
• **Communication through call center and other technologies.** BDT uses direct mail and a highly trained call center to reach out to likely eligible individuals. Direct mail letters are sent by a trusted source, such as the Pennsylvania secretary of aging or the City of Philadelphia’s mayor. The text of the letter is written at a fifth-grade literacy level to ensure effective communication. Letters use a simple outreach message and provide one phone number to call—the BDT Call Center. BDT has Spanish bilingual capabilities on staff as well as access to a language line, so that individuals can communicate in more than 70 different languages. Call Center staff are highly trained to communicate complex benefit information in a user-friendly manner. They handle both inbound and outbound calls, receive ongoing coaching, and are monitored on a continual basis. Call Center staff are trained to work with clients, caregivers, powers of attorney, and others to help individuals in need get connected to benefits. While on the phone, they screen individuals and help them apply for multiple benefits, using telephonic signature and electronic transmittal of applications to program agencies. A web-based telephone system allows BDT to record, store, and retrieve every telephone call made or received.

**ACCESS NYC.** The Paperless Office System (POS) is an electronic case record system serving New York City. Application forms may be completed and documents scanned at remote locations and electronically transmitted to public benefit offices. POS is also now available at approximately 85 CBOs in New York City; in 2005, a USDA grant provided for its expansion to noncash assistance SNAP centers. CBOs, job centers, and SNAP centers have an electronic signature pad that allows clients to submit their signatures electronically, eliminating the need for applicants to appear in person at a public benefits program office.

**E. Strategies to Improve Comprehension**

Strategies to improve comprehension are intended to aid limited English speakers and individuals with low levels of literacy and digital literacy. Through these strategies, sites design and maintain tools that can be used by speakers of a variety of languages, as well as individuals with different levels of reading and cognitive skills. Strategies include designing tools using simple language, providing information on tools in a variety of languages, and providing customer support for individuals who have difficulty understanding the content of web-based benefits access tools and navigating through the website.

**Literacy.** Web-based benefits access tools often use simple language and language targeted to low reading levels intended to make sites user friendly and readable for those with low levels of literacy. For example, ACCESS NYC strives for a third-grade reading level, eREP for a fifth-grade reading level, and Benefits CalWIN and HEA for a sixth-grade reading level. Many administrators of web-based benefits access tools also strive for uncluttered screens with graphical displays or easy point-and-click options, as well as dynamic functioning that skips unnecessary questions based on answers to previous questions.

**Benefits CalWIN: Simple, User-friendly Text**

県と契約業者のスタッフは、利益CalWINのオーバーフェースを独自で説明することを目的としている。To meet this objective, they made significant changes to the wording of the online application questions to make them simple and user friendly. They also added “encouragement” throughout the screens—for example, “Nice Job <NAME>, only a few more questions to go!”—and built in skip patterns to help clients avoid questions that do not apply to their households.
Language. Tools may also provide information in multiple languages, usually chosen to represent the ethnic make-up of the community. For example, ACCESS NYC is available to the public for self-service use in seven languages. New York City’s Local Law 73, enacted in 2003, mandates that no individuals seeking benefits and services, specifically those with limited English proficiency, be discriminated against based on the language they speak. Thus, in addition to English, information about services must be made available in Arabic, Chinese, Haitian Creole, Korean, Russian, and Spanish. Benefits CalWIN offers language options in English, Spanish, and Chinese, and had plans to provide Russian, Vietnamese, and Farsi language options in the future.

Support. Tools can also provide customer support to users who have questions regarding the content of eligibility information available on the website or who may be unsure how to use the web-based tool. Customer support may involve providing translation assistance to a user or providing more detailed information about eligibility for a particular individual. Customer support may also include helping customers to access web-based application information while being sensitive to specific customer cultural issues and needs. Customer support may also involve usability support in navigating through the site. For example, at any time, eREP users can click an icon on the screen to get help through an online chat feature or call a hotline for assistance. The Arizona Medicaid agency, which together with the DES manages HEA, also maintains an HEA call center to help public users.

F. Marketing and Education

Marketing and education campaigns can help to dispel myths about the relationship between citizenship status and program eligibility, or preconceptions or stigma about the concept of public assistance. Noncitizen populations with fears about deportation and public charge issues may benefit from marketing materials that explain their specific eligibility for benefits. Marketing and education campaigns can also help to target populations located in specific geographic areas, including rural populations and community colleges. For example, low-income students may benefit from campaigns that inform them of benefits for which they may be eligible and apply assistance located on campus. Three types of marketing strategies used by the case study sites include the following:

Media Campaigns. Several case study sites developed media campaigns to increase awareness of their tools. DSS staff in Delaware used public service announcements (PSAs) to convey the message that ASSIST is “easy, quick, and free.” OBB also created a comprehensive marketing campaign that included a wide-scale media campaign with PSAs on cable access TV and radio, billboards, and newspaper ads. One of Project Bread's key objectives in the Reaching the Latino Working Poor in Massachusetts Demonstration was to dispel myths about the relationship between citizenship status and public assistance. Project Bread developed print materials, including postcards, brochures, and posters, to distribute at community events and to CBOs. They also developed and placed PSAs on local Spanish-language radio and public cable television shows and in Spanish-language newspapers.

Marketing Materials. The Single Stop USA national office provides outreach assistance and materials to each site to help it publicize its services. Each site has access to posters and a flyer template. The site manual also includes an outreach section that provides ideas about how to reach the target population. For example, at community colleges, the manual suggests contacting the academic affairs office to get permission to go into classrooms to inform students about the campus
site. OBB staff also disseminate information through business cards, posters, and pencils that include a 1-800 number and a website address for more information. For instance, one series of flyers focuses on the message “File Your Taxes for Free!” and describes OBB’s services and how to access them. Each flyer shows a person or a family representing a range of ages and races.

**Marketing Teams.** ACCESS NYC hired a five-person team to inform the public about its online resource. Staff conducted trainings and presentations on ACCESS NYC for city and CBO staff and worked with city agencies and CBOs generally to encourage them to place the ACCESS NYC logo on their own websites. In addition, staff conducted train-the-trainer sessions at each workforce center in the city so that center staff could pass on knowledge of ACCESS NYC to other staff in their own and partner organizations.
IV. IMPLICATIONS FOR THE FUTURE

As technologies advance at ground-breaking speed, it is difficult to imagine what the future holds for web-based benefits access tools and how their implementation will specifically affect vulnerable subgroups of the low-income population. The next generation of efforts will likely include applications for smart phones that provide benefit program information, screeners, calculators, and electronic application forms. The seeds for benefits access efforts using smart phones have already been planted through initiatives such as text4baby, a free mobile information service designed to promote maternal and child health. According to promotional materials (see http://www.text4baby.org/index.html), “Mobile phones have potential to play a significant role in health care by delivering information directly to those who need it most…and can be particularly helpful in reaching underserved populations. While not everyone has access to the Internet, 90 percent of Americans have a mobile phone.” Mathematica is conducting an evaluation for the HHS Human Resources and Services Administration that will look at the characteristics of women who used text4baby, assess their experience with the initiative, and determine whether it is associated with timely access to prenatal care and healthy behaviors. The results could have implications for mobile information services designed to increase access to varied public benefit programs among other specific audiences, such as veterans, limited English speakers, and low-income students. Furthermore, mobile information services could also be used in outreach efforts to provide populations with limited access to broadband connections easier physical access to the benefits application process. For example, outreach workers carrying mobile information services could assist homeless populations, rural populations, and seniors to apply for programs through those devices.

The next generation of web-based benefits access efforts will undoubtedly be influenced by the Patient Protection and Affordable Care Act of 2010, which allows for the expansion of Medicaid coverage to include millions of previously ineligible Americans and establishes state exchanges for purchase of private insurance. This piece of legislation presents states with tremendous opportunities to reach and more holistically serve previously untapped low-income populations. While focused on Medicaid and CHIP, the Affordable Care Act encourages states to streamline access to human services as well as health programs. The extent to which states take advantage of these opportunities may be driven by resources (both financial and time), state priorities, and existing context within a state (for instance, whether health and human services programs currently share eligibility systems, and the history of administrative collaboration). The opportunities will also be shaped by the regulations issued by the HHS Centers for Medicare & Medicaid Services. For instance, the Affordable Care Act requires states to use either a single streamlined application for Medicaid and CHIP developed by HHS, or their own application with supplemental forms approved by HHS.

Engaging the millions of newly eligible individuals in Medicaid and other services presents enormous challenges. Web-based benefits access tools may become important methods of engaging the newly eligible population. This population will most likely include many of the vulnerable subgroups discussed in this paper, who face specific barriers in using web-based benefits access tools. Currently, the uninsured relative to the insured population are more likely to be young adult males, unmarried, childless, high school dropouts, Hispanic, and foreign-born noncitizens (O’Neil and O’Neil 2009). About a third of the uninsured nonelderly population comes from low-income families; about two-thirds have no college education, and more than one-quarter did not graduate from high school. About half of the uninsured are racial and ethnic minorities (Kaiser Commission on Medicaid and the Uninsured 2006). In order to take advantage of web-based tools, many of the newly eligible individuals, as well as currently eligible people, will need web-based tools that take
these population characteristics into account, and even so may need consumer assistance available through various channels.

Entities working to engage the newly eligible population in benefits services may do well to consider some of the strategies discussed in this paper to help target specific subgroups of this population. While there are no rigorous evaluations proving that any of the strategies presented in this paper work, they do represent some of the most widespread and potentially promising methods used for engaging vulnerable subpopulations. Broadly speaking, three strategies appear to have considerable potential for engaging vulnerable subpopulations. These strategies, which follow, can be used alone but may be more beneficial when used together.

- **Partnerships with CBOs.** Because of the greater challenges that many subgroups of the low-income population experience (the most pervasive being low levels of digital and general literacy), it is helpful for trained counselors to walk clients through the web-based application process.

- **Linguistically Appropriate Tools.** Web-based benefits access tools that are culturally and linguistically representative of the populations they serve and written at the appropriate level of user literacy may be more successful in engaging the increasing population of limited English language speakers and others with lower levels of literacy.

- **Mobile Outreach.** Many vulnerable subgroups of the low-income population—including rural populations, homeless populations, and home-bound seniors—lack access to the Internet. Mobile outreach and application assistance can bring web-based benefits access tools to those who, for various reasons, may not be able or willing to engage with other service providers.
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