

Santa Clara's County's Benefit Service Center

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EXECUTIVE SUMMARY

The primary success of Santa Clara County's Benefit Service Center (BSC) is attributed to the management's active role in decision-making.

Responsibility for case management shifted from being worker-forced to becoming management-focused. Managers prioritize the tasks that need to be completed and assign them to workers. Workers are no longer in control of deciding what tasks will be completed. Managers prioritize and decide what work will be assigned, leaving them less vulnerable to tasks not completed in a timely manner. Managers rely on daily, weekly and monthly reports to manage the caseload. At a glance, managers can view the status of tasks that are being completed by office, by unit and by worker. They can identify a worker who has a high number of overdue assignments.

Along with the typical case management tasks (e.g., RRR, QR7 processing), managers also monitor the assignment and processing of:

- Appeals-related tasks
 - Processing of aid paid pending
 - Conditional withdrawals
 - Compliance with decisions
- Quality Control-related tasks

Lessons Learned

To resolve external and internal complaints, the BSC created two new staff functions:

- **Supervisor of the Day** The supervisor handles client issues at the lowest possible level.
- **Appeals Liaisons for the MediCal and Food Stamp Programs** The liaison handles hearings-related tasks and ensures timely completion of the tasks.

If Alameda County moves forward with task-based management, I recommend that decisions regarding case management shift from being worker-based to being manager-focused and driven. I also recommend that we take a close look at the challenges we faced and the successes we experienced during the seven years the county's Benefit Center was in operation.

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Task-based management is a case management model that many counties are opting for to manage their growing caseloads. In this economic climate, Alameda County is exploring the possibility of shifting to this model. With county caseloads increasing and staffing levels either decreasing or remaining status quo, is task-based management a viable option? By moving to this model, do counties sacrifice quality for quantity? Do they sacrifice service delivery for customer dissatisfaction? What impact will a task-based management model have on Appeal Filings and the Food Stamp Error Rate? To help answer these questions, I selected to conduct my Bay Area Social Service Consortium (BASSC) 15-day project in Santa Clara County.

In 2004, Santa Clara County opened its Benefit Service Center (BSC), which operates with a task-based management model. Since the implementation of the BSC, several Alameda County BASSC participants have completed their projects in Santa Clara County to explore the feasibility of this model for Alameda County. All past participants highly recommended this model for Alameda County. As a result of their recommendations, Alameda County formed a Task-Based Workgroup and drafted a proposal to implement the model.

As the Director for the Program Integrity Division for Alameda County Social Services Agency, my focus for this project was to identify lessons that were learned through the implementation of the BSC. My goal was to:

- Identify any impacts the Benefit Service Center had on:
 - appeals filings, and the
 - the Food Stamp error rate.
- Learn what steps the County took to address any issues that arose.

Every county's primary goal is service delivery. At the BSC, eligibility workers function as either Call Center staff or processing staff. The Call Center is staffed with fifty full-time equivalent employees. Call Center staff spend fifty percent of their work time on the phone, and fifty percent doing follow-up work from the phone calls. Depending on the volume of calls, additional workers are sometimes added: up to twenty additional eligibility workers may be assigned to answer phones for two hours per day and to process work for the remaining six hours of their shift. The primary goal of the Call Center is to take care of clients' needs in one phone call. Providing quality customer service is the primary focus, which eliminates or reduces the number of repeat phone calls. The remaining BSC eligibility workers serve as processing staff.

Before I discuss lessons learned, here is an overview of the Santa Clara County Benefit Service Center. In 2004, Santa Clara County opened its Benefit Service Center with 75,000 Medi-Cal cases and 246 employees to manage the banked caseload. Because of its success, the caseload has grown from 75,000 Medi-Cal cases to 86,438 Medi-Cal cases as of May 1, 2011. In 2009, Food Stamp cases and 51 additional eligibility workers were added to the BSC. As of May 2011, the BSC Food Stamp caseload was 21,144 cases. The increase in the caseload resulted in an increase in staffing levels, from 246 original employees to 320 employees, to manage the 107,582 cases at the BSC. Their staffing now consists of:

- 1 Division Director
- 3 Program Managers
- 2 Program Analysts
- 31 Supervising Eligibility Workers
- 248 Eligibility Workers
- 37 Clerical Support Staff

The success of the Benefit Service Center can be attributed to the management's active role in decision-making, written procedures, and use of a task management tool.

Decision-Making

Decisions regarding case management are made from the top and filtered down. The responsibility for case management shifted from being worker-focused to management-focused. Workers are no longer in control of deciding what tasks will be completed; management now assumes that responsibility. Managers rely on daily, weekly and monthly reports to identify the work that needs to be completed. Along with the typical case management tasks (e.g., RRR, QR7 processing, adding a program/person), managers also monitor the assignment and processing of:

- Appeals-related tasks
 - Processing of aid paid pending
 - Conditional withdrawals
 - Compliance with decisions
- Quality Control-related tasks

Managers prioritize the tasks that need to be completed and assign them accordingly. When a decision regarding case management is made, workers are informed of their assignments. Managers prioritize and decide what work will be assigned, thus leaving them less vulnerable to tasks not being completed in a timely manner. Program managers take an active role in identifying the volume of work that needs to be completed on a monthly, and sometimes daily, basis and assignments are made accordingly. For example, when I visited the county in March 2011, there were over 500 Quarterly Reports (QR7) that needed to be processed by the end of the calendar month. Management decided that this was a priority and that staff would process QR7's until they were all completed. After they were completed, staff could resume working on their other assigned tasks. Supervisors are actively involved in tasks assignments. An aspect of the supervisors' roles is to negotiate daily assignments for their staff based on the workers' schedules and to monitor the completion of assigned tasks.

Written Procedures

Santa Clara County has developed written procedures for most of their tasks. Detailed process workflows were created to identify action that must be taken when a task is received in the office. Process work flows identify all steps in a process and who the responsible party is for completing each step in the process.

Task Management Tool

The Task Management Tool is a tracking tool that allows managers to monitor tasks and assignments. The tool allows managers to view the status of all tasks. Task categorizations include: 1) pending; 2) expedited; 3) assigned; 4) urgent; 5) high; 6) overdue; and, 7) completed. At a glance, managers can view the status of tasks by office, by unit, and by worker. They can easily identify a worker who has a high number of overdue assignments. All tasks should be completed within nine days, unless otherwise noted. Tasks that are flagged as expedited, urgent, or high are given priority and must be completed by the due date.

In Santa Clara County, tasks are prioritized based on two premises:

- Tasks that are important to the client: this includes timely issuance of benefits and payment accuracy with the goal of ensuring service delivery and customer satisfaction.
- Tasks that have an impact on the error rate: this includes timely issuance of benefits, payment accuracy, and completed corrective actions.

The Implementation of the Benefit Service Center Impact on Appeals Filing

To assess the impact of the BSC on Appeals Filing, I met with Felipe Carrillo, Program Manager II for the Administrative Support Bureau (Appeals). During our meeting I learned that the number of hearing requests increased significantly during the initial implementation phase; however, the majority of these requests should and could have been resolved without resorting to the appeals process. Initially, service

delivery was impacted. This was attributed to several factors:

- Clients were not able to reach staff in the BSC to resolve their issue; therefore, hearing requests were filed out of frustration and an inability to resolve minor issues.
- When clients called the BSC main number (an 800 number), they felt they were trapped in a loop and unable to talk with anyone. This added to their anxiety and frustration level.
- In addition to client complaints, there were internal complaints. Employees from other district offices were not able to reach BSC staff.

Steps the County Took to Address This Issue

To resolve these issues the BSC created two new staff functions:

- Supervisor of the Day
- Appeals Liaisons for the Medi-Cal and Food Stamp (MC/FS) Programs

Supervisor of the Day is responsible for handling all client service issues between offices or departments. Eligibility supervisors perform this function. The role of the Supervisor of the Day is to resolve client issues at the lowest possible level. A monthly schedule that identifies the Supervisor of the Day and their phone number is created and posted on the county intranet. If any one in the county receives a client complaint regarding a BSC case, they can quickly notify the Supervisor of the Day. After implementing the Supervisor of the Day, appeal filings decreased.

MC/FS Appeals Liaisons are responsible for handling all calls from Appeals staff. Since the BSC houses Medi-Cal and Food Stamp cases, a liaison was created for each program. Eligibility supervisors are also assigned this function. Liaison duties are assigned on a monthly basis and the name and phone number of the MC and FS liaisons are listed on the monthly calendar and posted on the intranet. The role of the MC/FS Appeals Liaison is to ensure timely completion of follow-up work received from the Appeals Unit. Aid Paid Pending reviews, Preliminary Review Packets, Conditional Withdrawals, and

compliance with decisions are sent to the appropriate liaison. All Appeals follow-up work is marked as “high” priority. Liaisons are responsible for tracking these assignments and following-up with the appeals unit when the task is completed. The MC/FS Appeals Liaison helps ensure the timely processing of appeals-related tasks.

The Implementation of the Benefit Service Center Impact on the Food Stamp Error Rate

To assess the impact of the BSC on the Food Stamp error rate, I met with Naomi Aranda, Program Manager for the Corrective Action Bureau. During my meeting with Ms. Aranda, I learned that the Corrective Action Bureau experienced no major challenges after Food Stamps were added to the Benefit Service Center caseload. This was attributed to the County’s pre-established commitment to timely response and/or corrections to Quality Assurance/Quality Control errors that were cited. The existing process was sufficient. One change that was needed was to provide all BSC supervisors with the ability to view the entire BSC caseload rather than unit caseloads. The Corrective Action Bureau sends all case corrective actions through an in-house application so they can be assigned to a random worker for corrections, regardless of who initially made the error. When the person assigned to a worker number changes, it is difficult to identify the person who created the error. This issue is not unique to Santa Clara County: it is also a challenge in Alameda County. The random assignment of error corrections helps mitigate this issue.

Conclusion

After visiting Santa Clara County and learning more about the Benefit Service Center, I would recommend that Alameda County move in this direction. I recommend the Alameda County Task-Based workgroup be extended to include the Appeals Unit and the Quality Control Unit, if Food Stamps is going to be included in the BSC caseload. From my perspective, the success of Santa Clara County’s Benefit Service Center is attributed to its management’s

active role in case management. Decisions regarding case management are made from the top and filtered down to the worker level. If Alameda County moves forward with task-based management, I recommend that decisions regarding case management shift from being worker-focused to manager-focused and driven.

I would also like to mention that Alameda County was a pioneer in the task-based management model. In 1998 Alameda County opened the Benefit Center; this was a task-based concept. Similar to Santa Clara's model, one group of eligibility staff was responsible for processing the work, while another group was responsible for face-to-face contact with clients. Clerical staff was responsible for answering the phone calls and directing unresolved issues to the eligibility technician. I believe we were one of the first counties to implement a banked caseload/task-based management concept. If we move forward with this concept, I recommend we take a close look at the challenges we faced and the successes we experienced during the seven years our Benefit Center was in operation.

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