

ACCESSING THE SAFETY NET:

ADMINISTRATIVE BARRIERS

TO PUBLIC BENEFITS

Acknowledgements

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Chicago Coalition for the Homeless
Chicago Jobs Council
Health and Disability Advocates
Illinois Caucus for Adolescent Health
Illinois Coalition for Immigrant and Refugee Rights
Illinois Hunger Coalition
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Accessing the Safety Net: Administrative Barriers to Public Benefits in Metropolitan Chicago is dedicated to the memory of Andrew J. Cohen, Supervising Attorney of the Public Benefits Hotline. Andy's hard work and dedication helped make the Public Benefits Hotline a source of inspiration and hope for low-income people throughout the Chicago area.

May 2005

We are pleased to present *Accessing the Safety Net: Administrative Barriers to Public Benefits in Metropolitan Chicago*.

This study is based on data collected from people who called the Public Benefits Hotline at the Legal Assistance Foundation of Metropolitan Chicago (LAF) between August of 2000 and July of 2001. In that time period - three years into the process of moving poor families from welfare to work - "welfare reform" should have been operating relatively smoothly. The rules for the various benefit programs had stabilized. The Illinois Department of Human Services (IDHS) as well as its clients had time to grow accustomed to new rules and procedures. Federal and state governments were operating with surpluses.

Unfortunately, *Accessing the Safety Net* shines a light on a system beset with problems:

- Work requirements misinterpreted to penalize adults caring for young children or family members with disabilities.
- People routinely sanctioned for missing appointments about which they never received notice.
- Frequent redeterminations of eligibility plagued by lost paperwork and resulting in erroneous cut-offs.
- Students and trainees told to drop out of programs designed to improve their job skills and instead required to take low-wage, dead-end jobs.
- People with jobs sanctioned for not attending job-training programs.
- And over and over again, a system unable to acknowledge or correct administrative mistakes.

Since 2000-2001, the situation has gotten worse as there has been growing pressure on the IDHS system. Food Stamp and Medicaid cases have been growing significantly in recent years, with Temporary Assistance for Needy Families (TANF) caseloads beginning to rise more recently. At the same time the number of caseworkers in the local offices has plummeted so that caseloads of 1200-1500 cases per worker have become common. In 1997, the Public Benefits Hotline handled 1500 calls; by 2004 it was handling more than five times that number - many from people who could not get through to their caseworkers, no matter how hard they tried. Phones in the IDHS local offices are not answered; voice mailboxes are full; fax lines are busy; and walk-ins are told they cannot be seen, even to drop off documents or fill out an application form. The needs of the caseload have grown while resources to meet those needs have dwindled. Growth in the number of families who report having "no work and no welfare" also contributes to concerns that the system is not responsive to client needs.

Accessing the Safety Net is a snapshot view of the public benefits system in Illinois, taken at a time when conditions for fair, accurate, and timely determinations were significantly better than they are now. Even then, the chance that an eligible family would be denied benefits, or a family receiving benefits would have them cut arbitrarily, was much too high. It often took experienced Hotline advocates multiple phone calls to get anyone to look at, much less resolve, problems. Since then, the system has deteriorated.

The problem is not with individual recipients who "game" the system, nor with individual caseworkers that make mistakes in handling particular cases. The problem is with the system itself - its inability to function in an efficient manner and its inability to correct mistakes and ensure benefits to eligible people. The recommendations from *Accessing the Safety Net* - from improving local office procedures and the administrative infrastructure to using external monitors as agency watchdogs - are as valid and critical today as they have ever been.



Sheldon Roodman
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**ACCESSING THE SAFETY NET:
ADMINISTRATIVE BARRIERS TO PUBLIC BENEFITS IN
METROPOLITAN CHICAGO**

By Evelyn Z. Brodtkin, Carolyn Fuqua, and Elaine Waxman

A Report of the Public Benefits Hotline Research Project

May 2005

The Public Benefits Hotline Research Project is supported by a grant from the Joyce Foundation and was conducted in cooperation with the Public Benefits Hotline Steering Committee and the Legal Assistance Foundation of Metropolitan Chicago.

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1. INTRODUCTION

Public benefits are the centerpiece of the social safety net. For lower-income families and individuals in the Chicago area, access to benefits helps them keep a roof over their heads, put food on the table, and obtain medical care for themselves and their children. When potentially eligible individuals cannot access these benefits, they and their families are placed at risk, and programs created to assist those in need cannot fulfill their promise.

Accessing the Safety Net presents a portrait of a year in the life of the public benefits system in metropolitan Chicago (Cook County) from the perspective of individuals trying to navigate within it. It analyzes the record of calls made to the Public Benefits Hotline by area residents reporting difficulties in obtaining access to benefits. It reveals systematic difficulties that Chicago-area residents have experienced in accessing safety-net programs. The record of calls also illuminates some of the rarely seen day-to-day realities of a complex administrative system at work.

Background

In 1997 the State of Illinois began to implement wide-ranging changes in policies that provide a safety net for families and individuals. These changes were initiated under the rubric of welfare reform in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The major federal programs affected by these developments were Temporary Assistance for Needy Families (TANF), which provides income support to poor families; the Food Stamp Program, which subsidizes food purchases for lower-income families and individuals; and Medicaid, which provides health insurance to lower-income families and individuals.

These policy changes complicated state administration of federal safety-net programs. For example, new TANF work rules made state welfare agencies responsible not only for financial eligibility procedures but also for the implementation of complicated requirements concerning work and the provision of work-related services and supports. The Food Stamp Program and Medicaid became less closely linked to public assistance and required new procedures to provide benefits to lower-income families no longer receiving TANF.

The challenge for Illinois and other states has been to adapt administrative systems to manage these safety-net programs such that they maintain program integrity and reach those whom they are intended to help. Established in 1997 as part of a state reorganization to improve coordination and delivery of programs assisting lower-income families and individuals, the Illinois Department of Human Services (IDHS) is the key administrative agency responsible for providing benefits. Though playing a role in the distribution of Medicaid and child support payments, the Illinois Department of Public Aid has limited direct involvement in determining whether families and individuals have access to benefits.

The Public Benefits Hotline was created by service providers and advocates in 1997, the first year of welfare reform's implementation, in order to provide a centralized,

accurate source of information and legal representation for Cook County residents.¹ Operated by the Legal Assistance Foundation of Metropolitan Chicago, the Hotline assists individuals encountering difficulties in navigating the state's public benefits system. Individuals experiencing problems or simply seeking advice about program rules or their eligibility can call the Hotline's toll-free number about their questions and problems. On a case-by-case basis, the staff provides advice, administrative advocacy, or legal representation. (See additional details about the Hotline in Section 2.) In its first five years of operation, the Hotline received more than 26,000 telephone calls and handled more than 10,000 cases.

The Public Benefits Hotline Research Project was designed to analyze the record of these cases in order to identify administrative barriers impeding access to public benefits provided by law. The record documents not only problems reported by callers but also the results of the Hotline staff's investigation of the callers' problems.

This report analyzes Hotline cases for the one-year period between August 1, 2000, and July 31, 2001. This period—three years after major changes were initiated under the rubric of welfare reform—was selected in part to exclude unique start-up difficulties that might be expected in the first years of implementation. The study year also excludes subsequent changes, particularly extensive IDHS downsizing that in recent years has increased the workload of frontline staff and thus increased the potential for administrative error. This project was designed to offer a view of an "ordinary" year, when researchers could get a sense of basic administrative practices relevant to periods preceding and postdating the study.

Significantly, the study year targets the midpoint of a dramatic decline in TANF caseloads. In the five years following the 1997 implementation of welfare reform in Illinois, TANF caseloads declined 69 percent statewide and 65 percent in Cook County.² During the year of the Hotline study, the Cook County caseload declined approximately 15 percent, accounting for nearly one-quarter of the five-year caseload decline.

There has been considerable speculation, but limited evidence, as to whether administrative barriers might be associated with this caseload decline—that is, whether and to what extent caseloads might have been reduced by preventing access to potentially eligible families. Although this project was not specifically designed to examine this question, Hotline data offer new insights into the role that administrative obstacles might have played in bringing the caseload down.

¹The Hotline's Steering Committee includes representatives from the Sargent Shriver National Center on Poverty Law, Health and Disability Advocates, Chicago Jobs Council, Chicago Coalition for the Homeless, Illinois Hunger Coalition, Illinois Caucus for Adolescent Health, Catholic Charities, Metropolitan Family Services, Illinois Coalition for Immigrant and Refugee Rights, Action for Children, Mid-America Institute on Poverty of Heartland Alliance, and Ounce of Prevention Fund.

²Cook County includes the city of Chicago and nearby suburbs. Cook County TANF caseloads declined from 119,526 in the 1998 fiscal year to 41,494 in the 2002 fiscal year; statewide TANF caseloads declined from 180,312 in the 1998 fiscal year to 56,191 in the 2002 fiscal year. (See Figures 1.1A and 1.1B.)

FIGURE 1.1A. ILLINOIS TANF CASELOAD: FY 1998–2002³

| Fiscal Year | Average Total Caseload | Annual Decline | % Annual Decline | Cumulative Annual Decline | % Cumulative Annual Decline |
|-------------|------------------------|----------------|------------------|---------------------------|-----------------------------|
| FY 98 | 180,312 | | | | |
| FY 99 | 135,704 | 44,608 | 24.74% | 44,608 | 24.74% |
| FY 00 | 97,079 | 38,625 | 21.42% | 83,233 | 46.16% |
| FY 01 | 72,279 | 24,800 | 13.75% | 108,033 | 59.91% |
| FY 02 | 56,191 | 16,088 | 8.92% | 124,121 | 68.84% |

FIGURE 1.1B. COOK COUNTY TANF CASELOAD: FY 1998–2002⁴

| Fiscal Year | Average Total Caseload | Annual Decline | % Annual Decline | Cumulative Annual Decline | % Cumulative Annual Decline |
|-------------|------------------------|----------------|------------------|---------------------------|-----------------------------|
| FY 98 | 119,526 | | | | |
| FY 99 | 94,676 | 24,850 | 20.79% | 24,850 | 20.79% |
| FY 00 | 72,389 | 22,287 | 18.65% | 47,137 | 39.44% |
| FY 01 | 54,187 | 18,202 | 15.23% | 65,339 | 54.67% |
| FY 02 | 41,494 | 12,693 | 10.62% | 78,032 | 65.28% |

Access and Administration: What Is at Stake?

The central concern of this research project is to draw attention to the ways in which administrative systems interact with individuals to facilitate or impede access to public benefits. In general, benefits administration walks a fine line between prudent protection and prohibitive practices. Prudence is necessary to protect against misuse of public funds. However, practices become prohibitive when they discourage or deny access to those whom the programs are intended to serve.

Obstacles to access may occur for a variety of reasons. They may be an intentional part of policy design—for example, imposing work requirements to discourage welfare use. By contrast, the administrative barriers that are the focus of this report are those created not directly as a matter of policy but indirectly as by-products of routine IDHS practices that discourage or deny access regardless of formal policy or legal eligibility.

³Illinois Department of Human Services, Bureau of Performance and Outcomes Measurement, *Monthly TANF Historical Data Updates* (Aug. 2000–Sept. 2001). The state fiscal year runs from July 1 through June 30.

⁴See note 3.

Under certain conditions, benefits administration can itself become a barrier to access. This can occur when procedural requirements are overly burdensome, confusing, or misapplied. For example, Hotline records offer evidence of cases in which caseworkers demand documents repeatedly or demand more documents than the law requires. Individuals may be impeded in their efforts to navigate the benefits system because of administrative disorganization. Case records show that disorganization blocks access when, for example, documents are lost or misplaced, record keeping is faulty and uneven (e.g., failing to maintain accurate records regarding eligibility, income, or addresses), information to clients is inadequate or incorrect, and IDHS staff fail to respond to client questions and concerns. Hotline data document barriers in the form of delay, unresponsiveness, and administrative confusion. This occurs, for example, when staff fail again and again to answer the telephone and respond to inquiries or when requests get "lost in the shuffle" among different parts of IDHS.

When these problems occur occasionally, as a matter of individual error or unique circumstances, they constitute a problem for that individual but not for the system itself. The only systemic issue is whether IDHS is responsive when it needs to correct individual case errors. However, these problems constitute systemic barriers to access when they occur routinely and become virtually embedded in day-to-day practice.

One way to get a sense of how these mundane administrative difficulties can confound individuals seeking public benefits is to consider what it takes for consumers to sort out errors in their telephone or utility bills, obtain benefits from their medical or auto insurance carrier, or get responses from their cable company or computer-tech line. Working one's way through long and convoluted voice mail systems, finding someone with both the knowledge and authority to correct problems, collecting documents to prove one's claims, waiting for service appointments—all of these commonplace experiences can leave consumers frustrated and, except for the most skilled and dogged, without much hope of satisfaction.

In the case of public benefits, far more is at stake, namely, access to the safety net that may be the last recourse for lower-income families and individuals. When administrative inadequacies and hassles grow beyond a mere nuisance to become structural obstacles, they work against the intent of safety-net programs. In practical terms, they block access to benefits by making the processes of obtaining or retaining benefits so complicated, difficult, and uncertain that individuals cannot navigate through them.

Organization of This Report

The analysis is presented in the following sections:

- Section 2 presents background on this research project and a profile of the caller database.
- Section 3 gives an overview of the administrative issues examined in this report. The section describes the character of administrative obstacles to access and key evidence from the Hotline on those obstacles.
- Section 4 looks across the three major categories of benefit programs (TANF, Food Stamp, and Medicaid groups) to assess the prevalence of different types of administrative-problem reports.
- Section 5 examines program-specific data, divides callers into groups, and identifies differences in reported access problems among those in the TANF, Food Stamp, and Medicaid groups.
- Section 6 analyzes differences in problems reported in gaining access to benefits by applicants and in retaining access by recipients.
- Section 7 examines evidence on administrative problem solving and the effort required to obtain responses to problems.
- Section 8 uses calls to the Hotline as an indicator of the prevalence of administrative problems and develops a statistical model testing the relationship between administrative problems and TANF caseload decline.
- Section 9 discusses key findings, their implications, and recommendations.

In addition to its quantitative analysis of Hotline data, this report draws on case examples from the Hotline's files to demonstrate how administrative problems play out in the everyday experience of Chicago-area residents seeking access to benefits. Client names and specific details have been altered to protect confidentiality.

A Reader's Guide. This report may be read in its entirety or selectively. Readers who want a general understanding of the issues and key findings may turn directly to Sections 3, 4, and 9. Major points are highlighted in the text.

Readers interested in specific aspects of the public benefits system may turn directly to the relevant section. Detailed tables and a discussion of the project's methodology, its advantages and limitations, are presented in the appendices.

2. BACKGROUND ON THE PUBLIC BENEFITS HOTLINE PROJECT

This report presents an analysis of calls received by the Public Benefits Hotline, operated by the Legal Assistance Foundation of Metropolitan Chicago (LAF), between August 1, 2000 and July 31, 2001.

A caller to the Hotline is initially asked questions to determine the nature of the problem and general demographic information. If the caller's problem is one that involves programs administered by the Illinois Department of Public Aid or IDHS (TANF; Transitional Assistance (TA); Aid to the Aged, Blind, and Disabled (AABD); Food Stamps; Medicaid; or child support enforcement), a specially trained paralegal working with the supervisory attorney contacts the IDHS caseworker or supervisor to remedy the problem. If informal advocacy is not successful, representation may be provided at an administrative hearing and, in some cases, in circuit court.

How Were the Data Compiled?

Callers were asked for permission to use their case records for research purposes. Information for each call was recorded in a case file, including demographic data, the problems reported, and details of Hotline staff's investigation into the case. The case records were used to develop a database of problem reports. The database was designed to protect client confidentiality and restricted information that could be used to identify specific individuals. Cases were coded by a three-person coding team using a protocol that identified caller information, administrative problems reported, and problem-solving processes. The coded data were then tabulated and analyzed by a separate research team, this report's authors.

The analyses that follow include all calls to the Hotline between August 1, 2000 and July 31, 2001 regarding TANF, Food Stamps, and Medicaid. Note that these calls cannot be assumed to constitute a representative sample of all individuals seeking access to public benefits in metropolitan Chicago. Problems reported to the Hotline may either understate or overstate the extent to which the administrative difficulties reported by callers were experienced more generally. Readers also should recognize that the analysis focuses on "problem reports," offering the perspective of individuals calling about difficulties in navigating the public benefits system.⁵ Within these limitations, the Hotline data offer a unique perspective on public-benefits administration that extends over a one-year period and across Cook County. (See Appendix 1 for a more detailed discussion of the research methodology, its strengths and limitations.)

⁵The case records include both self-reports of callers and evidence assembled by Hotline staff members in the course of their investigation.

How Were the Data Organized?

This analysis focuses on problems reported to the Hotline involving access to any of the three major federal safety-net programs: TANF, Food Stamps, and Medicaid. Among the calls made to the Hotline during the study year, Hotline staff opened 1,733 cases, of which 1,556 (88 percent) raised problems involving one or more of these three programs.⁶ The remainder raised problems with other benefit programs. Figures 2.1A and 2.1B show the distribution of calls by program.⁷

FIGURE 2.1A
ALL CALLS TO THE HOTLINE BY BENEFITS PROGRAM

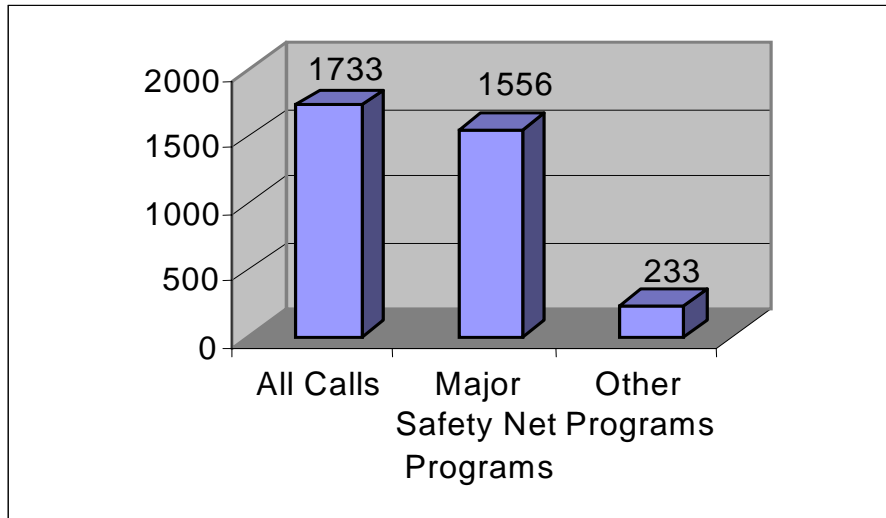
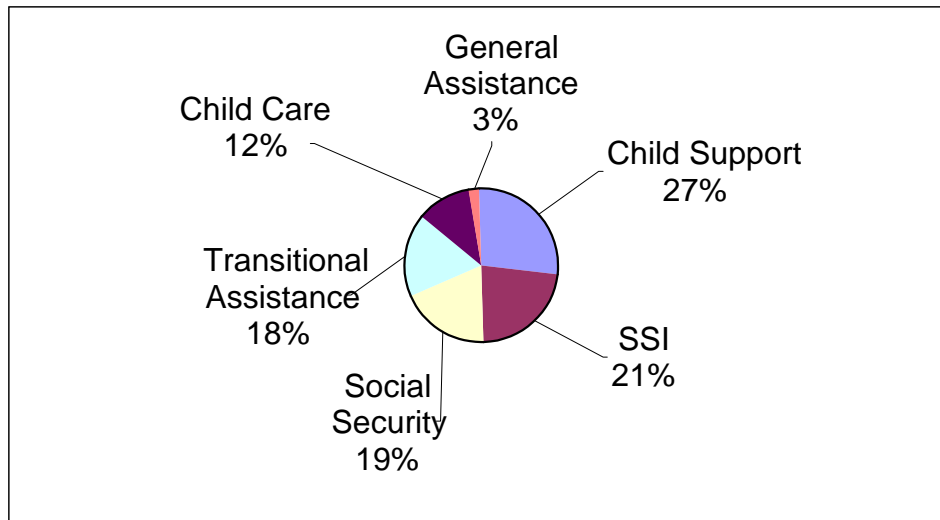


FIGURE 2.1B
CALLS TO THE HOTLINE FOR "OTHER" PROGRAMS



⁶The total number of calls to the Hotline includes calls concerning other programs and calls seeking general information and advice. Those calls are not included in this analysis.

⁷Because some callers reported problems both with the major safety-net programs and with other programs, the totals by program add up to more than 1,733 when organized by program concern.

When reviewing the numbers of reported problems, which are more than the total number of calls, one should keep in mind the multifaceted nature of callers' concerns. Any single call could include reports of one or more administrative problems. In fact, 49 percent of the 1,556 calls included in this analysis indicated more than one problem, producing a total of 2,406 problem reports.

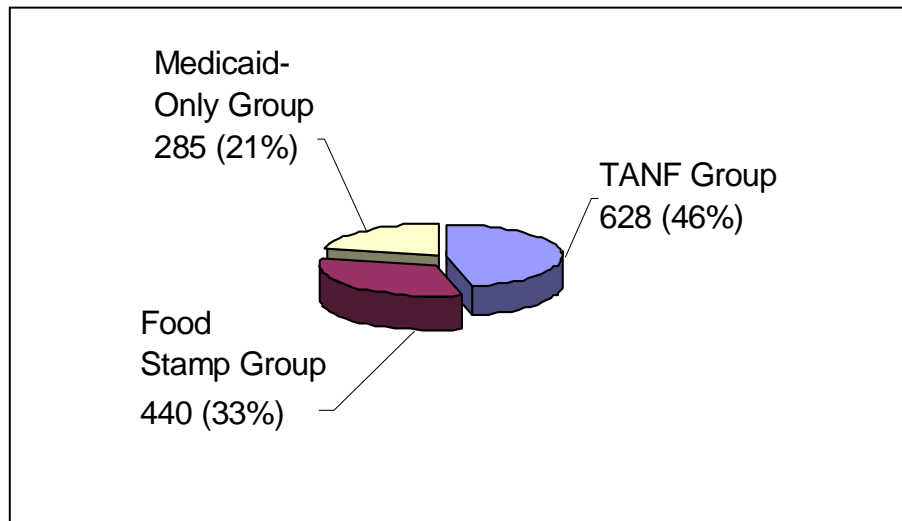
For this analysis, calls were grouped by benefits program, as follows:

- **TANF group:** callers reporting problems with access to TANF alone or TANF combined with Food Stamps and Medicaid;
- **Food Stamp group:** callers reporting problems with access to Food Stamps alone or combined with Medicaid; and
- **Medicaid-only group:** callers reporting problems with access to Medicaid only.

These groups allow for analysis of program-specific problems, as well as analysis of administrative issues that crosscut programs. For example, record-keeping difficulties were significant across program groups. By contrast, the administration of work requirements was a major issue for TANF but not relevant to Medicaid.

The largest share of callers to the Hotline reported problems with TANF or TANF combined with other benefit programs. They constituted 46 percent of callers in the three major program groups. The Food Stamp group comprised 33 percent and the Medicaid-only group 21 percent of callers in the three major program groups. (See Figure 2.2.)

FIGURE 2.2.
HOTLINE CALLERS BY PROGRAM GROUP



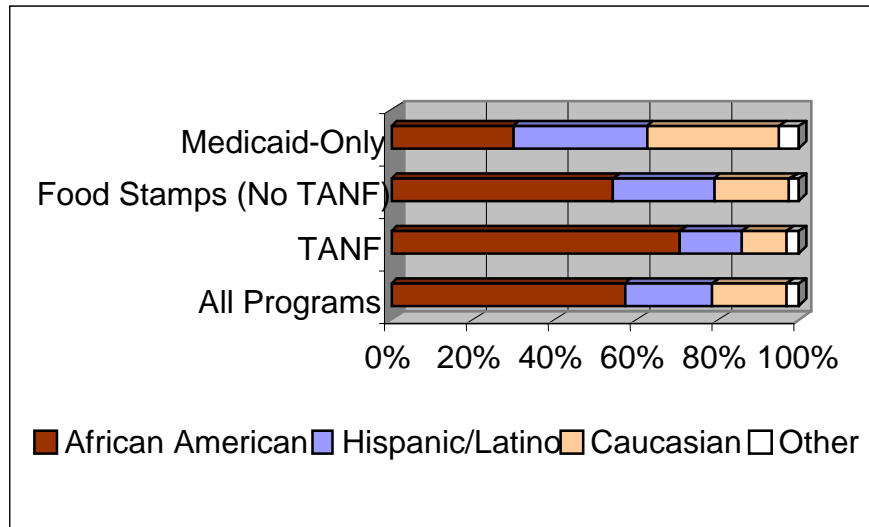
Who Called the Hotline?

Figures 2.3A and 2.3B show a demographic snapshot of individuals calling the Hotline.

FIGURE 2.3A.
CALLER DEMOGRAPHICS: GENDER AND AGE BY PROGRAM GROUP

| | All Major Programs | TANF Group | Food Stamp Group | Medicaid-Only Group |
|-----------------------|--------------------|------------|------------------|---------------------|
| Percent Female | 84.17% | 93.6% | 77.9% | 72.7% |
| Age (in years) | | | | |
| Median | 38 | 33 | 41.5 | 47 |
| Minimum | 15 | 15 | 17 | 18 |
| Maximum | 98 | 88 | 85 | 98 |

FIGURE 2.3B.
CALLER DEMOGRAPHICS:
RACE AND ETHNIC IDENTIFICATION
BY PROGRAM GROUP



Across the three major benefit programs, a majority of callers were female (84 percent), and ages ranged from 15 years to 98 years, with a median age of 38 years. The median age for callers in the TANF group was slightly lower (33 years), while callers in the Food Stamp group (median age 42) and Medicaid group (median age 47) were older.

African Americans represented slightly more than half of all callers (57 percent) but were underrepresented relative to their share of program caseloads. Individuals identifying themselves as Hispanic/Latino and Caucasian each represented about one-fifth of all calls and were overrepresented with respect to their share of TANF and Food

Stamp caseloads. Caucasians were also overrepresented with respect to their share of the Medicaid caseload, but Hispanic/Latino callers somewhat more closely tracked caseload share. African Americans constituted 71 percent of callers in the TANF program group and 54 percent of callers in the Food Stamp group. Caucasian and Hispanic/Latino callers had greater representation among those in the Medicaid group (32 percent and 33 percent, respectively).⁸ (See Appendix 2 for additional caller characteristics.)

⁸The composition of the Cook County TANF caseload for the study period was 6 percent Caucasian, 83 percent African American, and 10 percent Hispanic/Latino. The Food Stamp caseload was 11 percent Caucasian, 73 percent African American, and 14 percent Hispanic/Latino. The Medicaid caseload was 16 percent Caucasian, 54 percent African American, and 25 percent Hispanic/Latino. (IDHS Quarterly Reports, Sept. 2000–2001.)

3. THE ISSUES: AN OVERVIEW

What Are Administrative Barriers to Public Benefits?

Problems reported to the Hotline were grouped into three general categories of benefits administration, each of which is briefly described below. These categories are case processing, administration of work requirements, and verification. Within each category, subcategories of administrative activity that involve related issues were also grouped together. (See Appendices 4–6 for additional details.)

Case Processing.

Routine case processing includes a variety of tasks necessary to ensure proper access to benefits, among them checking documents to verify aspects of eligibility, giving information to clients, applying the correct policy to the case, managing paperwork and case records, scheduling local office appointments, and interacting with clients. Breakdowns in case processing can make it difficult for families and individuals to access benefits, discouraging potential applicants from obtaining them and preventing recipients from retaining them.

- **Case-processing difficulties accounted for 72 percent of all problems reported. However, nearly one-quarter of these involved problems processing verification requirements. Because this constitutes a major area of difficulty, this analysis separated verification issues into an independent problem category. Case processing, excluding verification issues, accounts for 59 percent of problem reports.**

Verification issues are complex and, as noted, highly significant. In order to take a closer look at verification problems, this study examines this element of case processing as a separate area of administrative practice (as discussed below).

- **Hotline reports indicate that, within the case-processing category, record keeping is one of the most mundane but crucial administrative functions affecting access to benefits in the Chicago area. More than one-fifth of all reported problems and one-third of case-processing problems involved aspects of records management (when verification issues are treated separately).**

Hotline cases are consistent with evidence from federal agency reviews indicating that weaknesses in the state's management information and computer systems make it difficult for caseworkers to manage complex cases, keep up to date with ordinary changes in client status, and share information among the various staff and units that may have a hand in a single case. (See discussion in Section 9.) This is important in that records that are lost, incomplete, or not kept current create barriers to access. They interfere with retention of benefits when documents that prove a recipient's eligibility are misplaced, resulting in new processing demands or even a loss of benefits.

Record-keeping problems also jeopardize access when changes of address are improperly recorded and notices are mailed to the wrong address, leading to sanctions against recipients for missing meetings or failing to respond to other demands. Hotline data indicate that when cases are transferred to new workers or offices, misplaced records or documents may lead to delayed access or even loss of benefits. Such administrative disorganization creates hazards for Chicago-area residents seeking access to benefits. In some cases, for example, individuals who change residence find themselves in a virtual case-transfer purgatory, where no local office or individual caseworker accepts responsibility for handling the case.

Denial by Disorganization

Ms. Lake received Medicaid for herself and her infant. When they moved to a shelter, she requested that her case be transferred to a local office nearer the shelter. She went to her original office to apply for TANF and Food Stamps, but was told that she could not apply at that office or at the new one until her case had been formally transferred.

Contacted by a Hotline advocate, an IDHS supervisor acknowledged that the application should have been taken and agreed to do it herself—but not before Ms. Lake received a letter indicating that her case had been transferred to yet another office. When she went to that office to apply for benefits, her application was again refused because her file had not yet been transferred. Over the course of the next week, in response to repeated calls from the Hotline advocate, caseworkers attempted to track the file in four different local offices. Eventually, a supervisor in one of them agreed to take the application even though the file had still not arrived.

- **Giving information to clients was the second most commonly reported case-processing difficulty, accounting for more than 10 percent of all reported problems and nearly 20 percent of case-processing problems. Incorrect or inadequate information about requirements for eligibility or case status was frequently reported for both applicants and recipients across program groups. It was disproportionately high among the Medicaid-only group, accounting for more than one-quarter of reported difficulties.**

Confusing and sometimes contentious interaction with caseworkers was associated with information problems and itself comprised 10 percent of reported case-processing problems. Case records indicate that individuals call the Hotline when they are frustrated in efforts to reach their caseworker or obtain information on their status in the benefits process. These reports were particularly significant among callers in the TANF group, where they ranked fifth among all problems reported.

Getting Information

Ms. Weldon has three children. She had been working but was laid off. She successfully applied for TANF and participated in job search and job program activities. However, she stopped receiving benefits and could not reach her caseworker to find out why. She finally went to her local IDHS office and waited until her caseworker would see her. She called the Hotline to report that her caseworker told her she had simply forgotten about the case. Ms. Weldon was upset and concerned that her caseworker might not correct the problem and make sure her benefits were provided. A Hotline advocate called IDHS and left messages for the caseworker and her supervisor but did not receive a response. The next day the advocate called again and was able to reach the caseworker and supervisor, both of whom assured her that the problem would be corrected and benefits provided.

Among callers reporting information problems related to Medicaid, confusion around spend-down requirements (that is, payments that must be made before Medicaid assumes coverage for medical costs) was common. Hotline records indicate that complicated spend-down provisions were troublesome to both caseworkers and clients.

Misinformation and Medicaid

Ms. Harris received a kidney transplant and has been required to take antirejection medication ever since. She called the Hotline when her caseworker could not explain the spend-down requirements to her satisfaction. Examining the case, the Hotline advocate determined that the spend-down requirement had been set too high and that the caseworker had failed to take account of pharmacy bills that Ms. Harris submitted and that should have counted toward meeting the spend-down requirement. After six weeks and many telephone calls, the caseworker and her supervisor changed the spend-down requirement and accounted for the appropriate credits.

Verification of Eligibility.

Applicants and recipients must be able to document aspects of their eligibility in order to qualify for public benefits. The number of verification requirements can go beyond a dozen, including birth information for each child, rent receipts, wage stubs, employer letters, evidence of school attendance, medical records, and family arrangements. Verification requirements, although necessary for documenting eligibility, become an administrative barrier when they exceed policy requirements or are beyond the capacity of the applicant or recipient to meet.

The state's TANF policy manual and federal Food Stamp regulations recognize that at times individuals may be unable to obtain documents on their own, especially when the cooperation of other agencies or third parties is required. Under these circumstances, the regulations require caseworkers to help but do not fully specify when and how caseworkers are expected to intervene. Regulations also allow caseworkers to extend deadlines for submitting verification documents when clients must obtain them from a third party (for example, a doctor, a school, or a landlord). But they do not specifically require caseworkers to inform clients that they may request extensions or

obligate caseworkers to help clients obtain verification documents unless directly requested.

- **The single most frequently reported problem jeopardizing access to benefits involved general verification requirements (that is, verification of individual circumstances other than those relating to work or medical issues). Difficulties with general verification requirements comprised 11 percent of all problem reports and occurred in over one-fifth of TANF and Food Stamps cases and in nearly 30 percent of Medicaid-only cases. When specialized requirements (medical verification documents for Medicaid clients and work-related verification documents for TANF and some Food Stamp clients) are included, verification difficulties accounted for 23 percent of all problem reports.**

Verification is nominally a part of case processing, both for purposes of general eligibility and for the monitoring of compliance with work requirements. For purposes of analysis, this report first shows verification problems as part of the general categories of case processing and administration of work requirements. Second, because verification issues constitute the single most significant administrative problem reported overall, they are analyzed as a separate category.

Finding Proof

Ms. Snow reported losing her TANF benefits because she was unable to prove that her child's father did not live with her. She had given information about the father's identity to the child support collection caseworker. But the caseworker insisted that Ms. Snow supply evidence disproving his presence in the home. Ms. Snow called the Hotline for help when she was unable to find evidence of her husband's whereabouts. Although IDHS regulations provide that caseworkers must assist clients unable to secure verification on their own, particularly when the documents are not within their personal control, the caseworker offered no assistance and refused to continue Ms. Snow's benefits. Caseworkers may accept as verification a statement, signed under oath, that the client does not have information on the father's residence. In this instance the caseworker followed neither of the appropriate rules. Only after intervention by a Hotline advocate were benefits restored.

Verification issues can combine with record-keeping problems to confront those seeking benefits with repeated demands to replace lost or misplaced documents. They can result in denial of benefits for "noncompliance" when caseworkers do not locate verification documents in time to meet processing deadlines. Hotline records reveal that missing verification documents were a major bone of contention between clients and caseworkers, producing a standoff in which counterclaims could not be proven, but access to benefits could be blocked. Disputes about missing documents produced contentious "he said/she said" conflicts between clients and caseworkers. Although most of these disputes could not be independently assessed, investigation by Hotline staff at

times produced evidence that the missing documents had been submitted. At other times the verification documents simply turned up at IDHS during the course of the investigation.

Lost Verification Documents: "He Said/She Said"

The Bradley family's Food Stamps were terminated due to "failure to comply with verification requirements." Ms. Bradley insisted that she had supplied the required document, but both the caseworker and supervisor insisted that the client was at fault. After a month, during which the family lost access to Food Stamps, the supervisor subsequently acknowledged that the missing document had "reappeared." Benefits were restored.

Administration of Work Requirements. All TANF and some Food Stamp recipients are required to comply with work rules or receive exemptions from them. In order to receive benefits, TANF recipients must sign a Responsibility and Services Plan (RSP) setting out the activities required for continued eligibility. Failure to adhere to the RSP can result in the imposition of sanctions or termination of benefits. The administration of these requirements is particularly complex, involving decisions about what kinds of activities meet work requirements, who is exempt from work, what kind of work recipients must do to retain their benefits, verification of participation or exemption from work activities, and case management for working clients.

Work requirements add a layer of complexity to case handling, often creating administrative hazards for individuals attempting to navigate the benefits system. Individuals who are working, participating in work activities, or entitled to exemptions from work requirements report a variety of barriers to obtaining and retaining access to benefits.

- **Difficulties involving the administration of work requirements (including verification issues) constituted nearly 40 percent of TANF problem reports. They accounted for 28 percent of problems reported to the Hotline overall. Callers cited, among key issues, difficulties with verification of work activities, the administration of job search/job program requirements, and problems relating to employment and work rules.**

Problems in the administration of work rules is compounded by procedural and policy complexity that introduces uncertainty into what both caseworkers and claimants are expected to do. This is evident in the administration of job search and work activities, which may be required as a condition for receiving TANF. Hotline records indicate that administration of these requirements may be a matter of confusion or conflict—for example, when a client agrees to attend a job program but discovers that it does not offer what she expected or was led to expect. In the course of such a dispute, an individual may lose access to benefits. Individuals also lose access when their participation and work status are incorrectly recorded and work income is improperly calculated.

An issue of particular interest involves the difficulties reported by individuals working in lower-wage jobs that commonly have high turnover rates as well as frequent changes in job hours and status. Hotline records indicate that access to benefits for working parents is jeopardized when the administrative infrastructure—particularly its filing and computerized record-keeping components—cannot adequately accommodate frequent changes required by work arrangements.

Unstable Jobs, Unstable Benefits

- ◆ Ms. Allen was informed that her cash benefits were being cancelled, but she was unable to determine why. Eventually the caseworker indicated that her projected income was too high, based on the hourly wage she was receiving from a shipping service where she had been hired. However, Ms. Allen had reported to work many times and was repeatedly sent home because there was not enough work available for her to do. The hourly wage was not a reliable indicator of her income because she could never get any hours. The Hotline advocate worked with the caseworker to clarify Ms. Allen’s work situation, and her benefits were continued.

- ◆ Ms. Moore was employed as an “on-call” security guard for \$7.60 per hour. When she worked a full 40-hour week, she was not eligible for TANF benefits. But her employer usually limited her to considerably fewer hours (less than 30 and as low as 8 hours in a week). Although her income varied with the availability of work hours offered by her employer, Ms. Moore's caseworker based her benefits on the assumption that in a given month she would average 35 hours of work each week. The caseworker also told Ms. Moore that a 35-hour workweek disqualified her for Food Stamps. Ms. Moore contacted the Hotline. After the advocate explained to the caseworker that Ms. Moore would qualify for Food Stamps even if she worked 35 hours per week, the Moore family was able to obtain them. However, the fluctuations in income continued to present a problem in obtaining access to TANF and in maintaining the Food Stamps at the correct levels.

Records indicate difficulties in processing exemptions from work requirements. Problems were most likely to occur in the case of exemptions for health reasons or for parents with babies under a year old. Exemptions for individuals with medical problems frequently require approval of a central Client Assessment Unit (CAU). Hotline records show that the steps required to obtain approval and have it processed by a local office caseworker can lead to delay, confusion, and lost access to benefits. As in the case of office transfers discussed earlier, the shifting of responsibility for case handling among IDHS units appears to create hazards for beneficiaries. These difficulties may be compounded if there is confusion or reluctance on the part of a caseworker.

Processing Exemptions for Health Problems

Ms. Cruz, a TANF recipient, worked part-time as home health aide for two disabled women. Ms. Cruz also attended job club sessions part-time to meet IDHS' 30-hour work requirement. She advised her caseworker that she would need to quit her job because of intense back pain that made her unable to continue to lift her patients—a health problem common among many home health workers. Ms. Cruz gave medical information about her condition, and, as far as she understood, her request for a medical exemption was pending with CAU.

Ms. Cruz called the Hotline because her caseworker, despite receiving a letter from Ms. Cruz's doctor, threatened to terminate TANF benefits if she quit her job. A Hotline advocate found that CAU had exempted Ms. Cruz from work because of her medical condition. Nevertheless, the caseworker continued to insist that Ms. Cruz was not exempt. Presented by the advocate with direct evidence of the CAU decision, the caseworker conceded that Ms. Cruz could stop working as a home health aid. However, the caseworker warned Ms. Cruz that when she did quit her job, she would have to give prompt notice of the change in her job status, or her benefits would be terminated.

Parents with a child under a year old are exempt from work requirements but may be assigned to other "activity requirements." Hotline records indicate that the administration of this exemption leads to confusion and case-processing difficulties. For example, when parents of newborns are wrongly required to attend a job club before their exemptions are processed, they may be caught between job club and eligibility caseworkers, neither of whom will accept responsibility for recording the exemption. As previously discussed, the hazards to beneficiaries appear to multiply when records must move between IDHS units and there is no single locus of responsibility for case processing.

Processing Exemptions for Parents with Newborns

Ms. Merlo was sent to a job club, although, with an infant at home, she was exempted from work activities. In fact, at the job club, she was informed that she should be exempt because she had a child under a year old. Ms. Merlo called the Hotline after she received a letter denying benefits. When a Hotline advocate contacted her caseworker, the caseworker said that she denied the application because she had not been notified by the job club worker of the exemption decision. When the advocate suggested checking the file, the caseworker said she did not have it and was not responsible for it. After tracking down the job club caseworker, the advocate was told that the file indicating an exemption had been sent to the caseworker. In this interagency version of the "he said/she said" record-keeping problem, an additional phone call to the supervisor revealed that the file was missing. After negotiating with the advocate, the supervisor agreed to process the case.

4. ACCESS TO PUBLIC BENEFITS: PROBLEM REPORTS FOR ALL PROGRAMS

Hotline records document the most common administrative problems reported by Chicago-area residents attempting to access TANF, Food Stamps, and Medicaid. These problems may be assessed in terms of overall frequency, type of administrative activity, and specific benefits program. Each of these perspectives offers a distinctive view but reveals common themes. This section reviews the prevalence of specific types of problems reported for the benefits system across the three major program groups. Separate analyses for each program are presented in the next section.

Top Ten Problems Reported

During the study period, a total of 2,406 administrative problems were reported concerning access to TANF, Food Stamps, and Medicaid. Only ten types of problems accounted for nearly two-thirds of these reports. The top ten problems are listed in Figure 4.1.

FIGURE 4.1. TEN MOST COMMONLY REPORTED PROBLEMS
(ALL MAJOR BENEFIT PROGRAMS)

| | Frequency | Share of All Reported Problems |
|-----------------------------------|-----------|--------------------------------|
| 1. General verification | 254 | 10.56% |
| 2. Paperwork processing | 209 | 8.69% |
| 3. No/inadequate information | 201 | 8.35% |
| 4. Medical verification | 149 | 6.19% |
| 5. Communication/delay | 143 | 5.94% |
| 6. Treatment by caseworker | 141 | 5.86% |
| 7. Verification of employment | 139 | 5.78% |
| 8. Missed redetermination | 101 | 4.20% |
| 9. Work activity | 101 | 4.20% |
| 10. Other case-processing problem | 89 | 3.70% |
| Total | 1527 | 63.47% |

General verification requirements (for example, submitting birth certificates, proof of address, and utility bills) topped the list, constituting more than 10 percent of all problem reports. This figure understates the prevalence of verification problems, however, as it does not include specialized verification requirements relating to medical status and employment. These specialized verification requirements also ranked among the top ten problem reports, each comprising close to 6 percent of all reported problems. Together these three verification issues accounted for more than one-fifth of administrative problems reported to the Hotline.

Other types of case-processing issues also emerged as commonly reported obstacles to those seeking access to benefits. Paperwork processing arose in more than 8 percent of problem reports. Communication difficulties and problems with caseworkers each comprised close to 6 percent of the reports. Together these case-processing issues accounted for nearly one-fifth of the problems reported across all three categories of benefit programs.

Issues related to the administration of work requirements also figured among the top ten. This is noteworthy given that these requirements did not apply to Medicaid (which represented nearly one-fifth of callers) and did not routinely apply to Food Stamps (where work requirements are not universally mandatory, as they are in TANF). Work verification (6 percent) and issues involving work activities (4 percent) were among the top ten reported problems. Administrative difficulties related to work requirements constituted 28 percent of problem reports overall.

Problems by Category of Administrative Activity

Case-processing problems dominated across the three groups of benefit programs. Issues identified with case processing constituted 72 percent of all problems reported, with verification included. (See Figure 4.2.) The top three case-processing difficulties reported to the Hotline were problems with records management (30 percent), problems with non-work-related verification (18 percent), and problems with inadequate or incorrect information (16 percent).

FIGURE 4.2. ADMINISTRATIVE PROBLEMS INVOLVING
CASE PROCESSING
(ALL MAJOR BENEFIT PROGRAMS)

| | Problems | Share of Case-Processing Problems | Share of All Reported Problems |
|--|-------------|---|--------------------------------------|
| Records management | 520 | 30.04% | 21.61% |
| Paperwork processing | 209 | 12.07% | 8.69% |
| Communication/delay | 143 | 8.26% | 5.94% |
| Office transfer | 88 | 5.08% | 3.66% |
| Lost paperwork | 80 | 4.62% | 3.33% |
| | | | |
| Nonwork verification | 317 | 18.31% | 13.18% |
| General verification | 254 | 14.67% | 10.56% |
| Nonwork medical verification | 63 | 3.64% | 2.62% |
| | | | |
| Information | 273 | 15.77% | 11.35% |
| No/inadequate information | 201 | 11.61% | 8.35% |
| Misinformation | 72 | 4.16% | 2.99% |
| | | | |
| Appointments | 184 | 10.63% | 7.65% |
| Missed redetermination | 101 | 5.83% | 4.20% |
| Call-in notification | 79 | 4.56% | 3.28% |
| Conflict with call-in request | 4 | 0.23% | 0.17% |
| | | | |
| Application of policy | 144 | 8.32% | 5.99% |
| Other policy misapplication | 87 | 5.03% | 3.62% |
| Incorrect income calculation | 50 | 2.89% | 2.08% |
| Incorrect categorization | 7 | 0.40% | 0.29% |
| | | | |
| Client-staff interaction | 144 | 8.32% | 5.99% |
| Treatment by caseworker | 141 | 8.15% | 5.86% |
| Privacy violation | 3 | 0.17% | 0.12% |
| | | | |
| Other case-processing problem | 89 | 5.14% | 3.70% |
| | | | |
| Diversion/application discouraged | 60 | 3.47% | 2.49% |
| | | | |
| Total | 1731 | | 71.95% |

Difficulties with work requirements, including work verification issues, constituted 28 percent of all problem reports. (See Figure 4.3.) The top three work-related problems involved verification (35 percent), administration of job search/job program requirements (22 percent), and monitoring and adjustments related to employment (17 percent).

FIGURE 4.3. ADMINISTRATIVE PROBLEMS INVOLVING
WORK REQUIREMENT
(ALL MAJOR BENEFIT PROGRAMS)

| | Problems | Share of Work Requirement Problems | Share of All Reported Problems |
|---|------------|--|--------------------------------------|
| Work-related verification | 236 | 34.96% | 9.81% |
| Verification of employment | 139 | 20.59% | 5.78% |
| Medical verification | 86 | 12.74% | 3.57% |
| Education verification | 11 | 1.63% | 0.46% |
| | | | |
| Job search/program | 150 | 22.22% | 6.23% |
| Work activity | 101 | 14.96% | 4.20% |
| Pre-TANF work activities | 40 | 5.93% | 1.66% |
| Job search support services | 6 | 0.89% | 0.25% |
| Job search conflict | 3 | 0.44% | 0.12% |
| | | | |
| Employment | 116 | 17.19% | 4.82% |
| Change in employment status/hours worked | 56 | 8.30% | 2.33% |
| Work absences | 23 | 3.41% | 0.96% |
| Transportation to work | 14 | 2.07% | 0.58% |
| No record of job change | 13 | 1.93% | 0.54% |
| Schedule conflict with work requirement | 6 | 0.89% | 0.25% |
| Problem with employer | 4 | 0.59% | 0.17% |
| | | | |
| Application of work rules | 108 | 16.00% | 4.49% |
| Exemption (child under 1) | 35 | 5.19% | 1.45% |
| Child care exemption (other than for infant) | 12 | 1.78% | 0.50% |
| Medical exemption | 37 | 5.48% | 1.54% |
| RSP unclear | 20 | 2.96% | 0.83% |
| RSP disputed | 4 | 0.59% | 0.17% |
| | | | |
| Other work problem | 65 | 9.63% | 2.70% |
| | | | |
| Total | 675 | | 28.05% |

Even with verification issues treated as a separate category, analysis of problems for all three benefit programs indicates that difficulties navigating mundane aspects of case processing were reported more than twice as often as each other type of problem. (See Figure 4.4.) Case-processing issues, excluding verification, constituted 59 percent of problem reports. Records management difficulties accounted for more than one-third of these case-processing problems (37 percent). The second and third most often reported case-processing problems involved giving information to clients (19 percent) and scheduling appointments (13 percent).

FIGURE 4.4. ADMINISTRATIVE PROBLEMS INVOLVING CASE PROCESSING, EXCLUDING VERIFICATION PROBLEMS (ALL MAJOR BENEFIT PROGRAMS)

| | Problems | Share of Case-Processing Problems | Share of All Reported Problems |
|--|-------------|-----------------------------------|--------------------------------|
| Records management | 520 | 36.78% | 21.61% |
| Paperwork processing | 209 | 14.78% | 8.69% |
| Communication/delay | 143 | 10.11% | 5.94% |
| Office transfer | 88 | 6.22% | 3.66% |
| Lost paperwork | 80 | 5.66% | 3.33% |
| | | | |
| Information | 273 | 19.31% | 11.35% |
| No/inadequate information | 201 | 14.21% | 8.35% |
| Misinformation | 72 | 5.09% | 2.99% |
| | | | |
| Appointments | 184 | 13.01% | 7.65% |
| Missed redetermination | 101 | 7.14% | 4.20% |
| Call-in notification | 79 | 5.59% | 3.28% |
| Conflict with call-in request | 4 | 0.28% | 0.17% |
| | | | |
| Application of policy | 144 | 10.18% | 5.99% |
| Other policy misapplication | 87 | 6.15% | 3.62% |
| Incorrect income calculation | 50 | 3.54% | 2.08% |
| Incorrect categorization | 7 | 0.50% | 0.29% |
| | | | |
| Client-staff interaction | 144 | 10.18% | 5.99% |
| Treatment by caseworker | 141 | 9.97% | 5.86% |
| Privacy violation | 3 | 0.21% | 0.12% |
| | | | |
| Diversion/application discouraged | 60 | 4.24% | 2.49% |
| | | | |
| Other case-processing problem | 89 | 6.29% | 3.70% |
| | | | |
| Total | 1414 | | 58.77% |

Verification issues, involving work and more general types of verification, constituted the second most frequently reported category of problem (23 percent). Nonwork verification problems amounted to 57 percent of this category, and work-related verification problems amounted to 43 percent.

FIGURE 4.5. VERIFICATION PROBLEMS
(ALL MAJOR BENEFIT PROGRAMS)

| | Problems | Share of Verification Problems | Share of All Reported Problems |
|----------------------------------|------------|--------------------------------|--------------------------------|
| Nonwork verification | 317 | 57.32% | 13.18% |
| General verification | 254 | 45.93% | 10.56% |
| Nonwork medical verification | 63 | 11.39% | 2.62% |
| | | | |
| Work-related verification | 236 | 42.68% | 9.81% |
| Verification of employment | 139 | 25.14% | 5.78% |
| Medical verification | 86 | 15.55% | 3.57% |
| Education verification | 11 | 1.99% | 0.46% |
| | | | |
| Total | 553 | | 22.98% |

Work requirements, excluding verification issues, constituted 18 percent of all reported problems, with administration of job search/job program requirements (34 percent), case management of employed clients (26 percent), and application of work rules (25 percent) ranking as the most significant work-related issues.

**FIGURE 4.6. ADMINISTRATIVE PROBLEMS INVOLVING WORK
REQUIREMENT, EXCLUDING VERIFICATION PROBLEMS
(ALL MAJOR BENEFIT PROGRAMS)**

| | Problems | Share of Work Requirement Problems | Share of All Reported Problems |
|---|------------|---|--------------------------------------|
| Job search/program | 150 | 34.17% | 6.23% |
| Work activity | 101 | 23.01% | 4.20% |
| Pre-TANF work activities | 40 | 9.11% | 1.66% |
| Job search support services | 6 | 1.37% | 0.25% |
| Job search conflict | 3 | 0.68% | 0.12% |
| | | | |
| Employment | 116 | 26.42% | 4.82% |
| Change in employment status/hours worked | 56 | 12.76% | 2.33% |
| Work absences | 23 | 5.24% | 0.96% |
| Transportation to work | 14 | 3.19% | 0.58% |
| No record of job change | 13 | 2.96% | 0.54% |
| Schedule conflict with work requirement | 6 | 1.37% | 0.25% |
| Problem with employer | 4 | 0.91% | 0.17% |
| | | | |
| Application of work rules | 108 | 24.60% | 4.49% |
| Medical exemption | 37 | 8.43% | 1.54% |
| Exemption (child under 1) | 35 | 7.97% | 1.45% |
| RSP unclear | 20 | 4.56% | 0.83% |
| Child care exemption (other than for infant) | 12 | 2.73% | 0.50% |
| RSP disputed | 4 | 0.91% | 0.17% |
| | | | |
| Other work problem | 65 | 14.81% | 2.70% |
| | | | |
| Total | 439 | | 18.25% |

5. ACCESS TO PUBLIC BENEFITS: ADMINISTRATIVE PROBLEMS BY BENEFIT PROGRAM

Each of the three major programs analyzed in this report—TANF, Food Stamps, and Medicaid—involves different policy provisions, creating specialized administrative requirements particular to each program. As previously noted, Chicago-area residents experiencing difficulties with access to TANF constituted the largest group of callers to the Hotline (42 percent). This section assesses problem reports for each of the three major benefit groups, looking first at the most frequently reported problems and then analyzing difficulties in terms of categories of administrative activities.

TANF Problem Reports

Top Five Issues. Difficulties with verification and the administration of work requirements featured significantly among the top five issues reported by callers in the TANF program group, as shown in Figure 5.1. Verification (both general and work-related) and paperwork processing accounted for slightly more than one-fifth of problem reports in this group.

FIGURE 5.1.
FIVE MOST COMMONLY REPORTED TANF PROBLEMS

| | Frequency | Share of TANF Problems |
|-------------------------------|-----------|------------------------|
| 1. General verification | 115 | 8.54% |
| 2. Work activity | 98 | 7.28% |
| 3. Paperwork processing | 90 | 6.68% |
| 4. Verification of employment | 89 | 6.61% |
| 5. Treatment by caseworker | 86 | 6.38% |

Categories of Administrative Activity. For callers in the TANF group, case processing produced the greatest number of problem reports, accounting for almost 60 percent of the total. Records management arose more than twice as often as most other case-processing problems, except for general verification, which accounted for 15 percent of non-work-related case-processing problems. (See Figure 5.2.) Problems with the administration of work requirements accounted for 41 percent of TANF-related problems. Among work-related problems, 31 percent involved difficulties with verification, followed closely by problems with the administration of work activities (26 percent).

FIGURE 5.2. ADMINISTRATIVE PROBLEMS INVOLVING
CASE PROCESSING AND WORK REQUIREMENT
(TANF GROUP)

| | Frequency | Share of TANF Problems |
|-----------------------------------|------------|------------------------|
| Case processing | 799 | 59.32% |
| Records management | 229 | |
| Nonwork verification | 126 | |
| Information | 111 | |
| Appointments | 97 | |
| Client-staff interaction | 89 | |
| Application of policy | 64 | |
| Diversion/application discouraged | 47 | |
| Other case-processing problem | 36 | |
| | | |
| Work requirement | 548 | 40.68% |
| Work-related verification | 169 | |
| Job search/program | 144 | |
| Application of work rules | 99 | |
| Employment | 86 | |
| Other work problem | 50 | |

When verification problems are categorized separately, the overarching significance of both records management and the administration of work rules becomes more apparent. (See Figure 5.3.) Case processing accounts for nearly half of TANF problem reports, with records management problems comprising more than a third of that category. Treated as a separate category, verification issues arose in 22 percent of TANF problem reports, and more than half (57 percent) of those problems involved work-related verification.

**FIGURE 5.3. ADMINISTRATIVE PROBLEMS INVOLVING
CASE PROCESSING, WORK REQUIREMENTS, AND VERIFICATION
(TANF GROUP)**

| | Frequency | Share of TANF Problems |
|-----------------------------------|------------|------------------------------|
| Case processing | 673 | 49.96% |
| Records management | 229 | |
| Information | 111 | |
| Appointments | 97 | |
| Client-staff interaction | 89 | |
| Application of policy | 64 | |
| Diversion/application discouraged | 47 | |
| Other case-processing problem | 36 | |
| | | |
| Work requirement | 379 | 28.14% |
| Job search/program | 144 | |
| Application of work rules | 99 | |
| Employment | 86 | |
| Other work problem | 50 | |
| | | |
| Verification | 295 | 21.90% |
| Work-related verification | 169 | |
| Nonwork verification | 126 | |

Administration of work requirements (excluding verification issues) accounts for more than one-quarter (28 percent) of TANF problem reports. The administration of job search/job program requirements and the application of work rules (particularly exemptions) represent nearly two-thirds (64 percent) of work-related problems. Difficulties in monitoring and adjusting for employment were also noteworthy, constituting more than one-fifth (23 percent) of problem reports in this category.

Looking for Work, Losing Benefits

Ms. Noonan attended job club and interviewed for a job with a shipping company. She went to the company's orientation, where she learned that the only opening was for the "graveyard" shift. Ms. Noonan was unable to accept the job because her child care provider did not render services overnight. Ms. Noonan returned to job club and continued to look for work. In the meantime she was informed by her caseworker that her TANF and Food Stamp benefits would be terminated because she made too much money. When the caseworker was told that Ms. Noonan did not, in fact, have a job, he demanded that she obtain a statement from the shipping company verifying that she did not work there. Ms. Noonan obtained the statement.

She continued to look for work and accepted a job at a Chicago airport. This time her caseworker insisted that she earned too much money to continue to qualify for TANF. Ms. Noonan called the Hotline, which determined that, with earnings at \$5.15 per hour, she did qualify for assistance. The Hotline advocate contacted Ms. Noonan's caseworker to explain the correct calculation of benefits. Even after the calculation was corrected, the caseworker insisted that he could not reinstate TANF benefits. This time he said that he must see the pay stubs from the new job, although the client had worked there only a few days and had not yet been paid. The client asked her employer for a statement verifying her hourly wage. After she obtained the statement, benefits were reinstated.

TANF was somewhat distinctive in the frequency with which problems dealing with caseworkers were reported. As previously noted, these problems ranged from conflicts over requirements to frustration with procedural and record-keeping hurdles or simple confusion about what caseworkers were doing while processing benefits. Records indicate that complex, changing policy and case-processing requirements could be confusing to caseworkers as well. Difficulty in dealing with caseworkers was the fifth most prevalent problem reported by the TANF group; this accounted for 11 percent of case-processing problems (with verification included in that category).

Confusion Over Policies and Processes

Ms. Woods was expecting her first child and told by her physician that she needed to quit her job and stay off her feet for the remainder of her pregnancy. She submitted the doctor's information with her request for TANF. A caseworker told Ms. Woods that she did not qualify for TANF because she had to be at least seven months pregnant. Ms. Woods called the Hotline. An advocate contacted the caseworker and informed her that there was no seven-month pregnancy requirement before a woman is eligible for TANF. The caseworker then said that Ms. Woods did not qualify for benefits because there was a statement in the file that the child's father was supporting the child and had been since its birth. However, Ms. Woods had not yet given birth and the father was not providing support. After further investigation, the caseworker acknowledged that she had misread the file. Ms. Woods' TANF application was approved.

Food Stamp Problem Reports

Top Five Issues. Verification and paperwork difficulties accounted for nearly one-third of problem reports for the group of callers reporting problems with Food Stamps only or Food Stamps and Medicaid. Significantly, problems in obtaining information ranked third in this program group, accounting for nearly 10 percent of reported problems. Work requirements, as one might expect, figured far less significantly in this program group than it did in the TANF group, where work activities are required for all recipients (unless specifically exempted). However, issues regarding verification of employment arose in some 7 percent of problem reports for this program group. (See Figure 5.4.)

FIGURE 5.4. FIVE MOST COMMONLY REPORTED FOOD STAMP PROBLEMS

| | Frequency | Share of Food Stamp Problems |
|-------------------------------|-----------|------------------------------|
| 1. General verification | 99 | 13.11% |
| 2. Paperwork processing | 88 | 11.66% |
| 3. No/inadequate information | 72 | 9.54% |
| 4. Communication/delay | 67 | 8.87% |
| 5. Verification of employment | 50 | 6.62% |

Categories of Administrative Activity. Case-processing difficulties (including verification) accounted for 83 percent of problem reports in this program group. Records management and verification accounted for more than half (52 percent) of these case-processing problems. Work requirements, as expected, were far less significant, accounting for less than 17 percent of problem reports. (See Figure 5.5.)

**FIGURE 5.5. ADMINISTRATIVE PROBLEMS INVOLVING
CASE PROCESSING AND WORK REQUIREMENTS
(FOOD STAMP GROUP)**

| | Frequency | Share of Food Stamp Problems |
|-----------------------------------|------------|------------------------------|
| Case processing | 628 | 83.18% |
| Records management | 224 | |
| Nonwork verification | 103 | |
| Information | 84 | |
| Appointments | 73 | |
| Application of policy | 53 | |
| Client-staff interaction | 43 | |
| Other case-processing problem | 40 | |
| Diversion/application discouraged | 8 | |
| | | |
| Work requirement | 127 | 16.82% |
| Work-related verification | 67 | |
| Employment | 30 | |
| Other work problem | 15 | |
| Application of work rules | 9 | |
| Job search/program | 6 | |

Even when verification issues are excluded from this category, case processing remains the dominant obstacle to benefits for this program category, accounting for more than two-thirds of problems reported. (See Figure 5.6.) Records management, constituting 43 percent of problems for this group, far outweighs any other case-processing issue.

Lost in the Shuffle

Ms. Swanson learned that her Food Stamp benefits would be terminated because she had not submitted a check stub for one of her biweekly pay periods. She faxed the missing stub to her caseworker. When she called to check on the fax, her caseworker said she could not find it because someone had rearranged her desk. Ms. Swanson faxed the information again. When she called again to check, her caseworker confirmed that she had received the fax but now could not find the client's monthly income reporting form. Ms. Swanson spoke the following day with a supervisor, who informed her that she would have to come to the office to resubmit the lost form. Concerned that she would lose her Food Stamps in the interim, Ms. Swanson contacted the Hotline. The Hotline advocate was unable to reach Ms. Swanson's caseworker and eventually discovered that the caseworker had been transferred with no replacement assigned. After three weeks of effort, the Hotline advocate was able to get a new caseworker to correct the record and process the Swanson family's Food Stamps.

Verification issues, as in the TANF group, constituted about one-fifth of all reported problems, as shown in Figure 5.6. Hotline records indicate that individuals called for help in cases in which they had been asked to supply the same documentation several times, were asked for documentation that they believed was unnecessary, or did not receive help from caseworkers in obtaining documents that were particularly hard to get.

Accessing Food Stamps: Verification Hurdles
 Ms. Murphy, a working mother, contacted the Hotline after more than a month had passed since she applied for Food Stamps for her family. When she did receive benefits, the amount was \$140 less than expected. A Hotline advocate contacted Ms. Murphy's caseworker, who indicated that he had not processed the full allotment because the client had not documented her employment earnings. Ms. Murphy claimed that she had submitted documentation and had retained a copy. The advocate pointed out that the caseworker could directly verify employment information through an electronic link to another government agency. The caseworker agreed but said that doing so would take too much time of his time. Also, Ms. Murphy's Food Stamp benefits were underbudgeted because her caseworker had not asked for, or taken account of, child care expenses. When the advocate gave him the information, the caseworker still resisted allowing the expenses; he claimed that all providers had to be state-certified for expenses to be considered. This was not the case. After the advocate made additional calls to the caseworker and supervisor, Ms. Murphy reported no further problems.

FIGURE 5.6. ADMINISTRATIVE PROBLEMS INVOLVING CASE PROCESSING, VERIFICATION, AND WORK REQUIREMENTS (FOOD STAMP GROUP)

| | Frequency | Share of Food Stamp Problems |
|-----------------------------------|------------|------------------------------|
| Case processing | 525 | 69.54% |
| Records management | 224 | |
| Information | 84 | |
| Appointments | 73 | |
| Application of policy | 53 | |
| Client-staff interaction | 43 | |
| Other case-processing problem | 40 | |
| Diversion/application discouraged | 8 | |
| Verification | 170 | 22.52% |
| Nonwork verification | 103 | |
| Work-related verification | 67 | |
| Work requirement | 60 | 7.95% |
| Employment | 30 | |
| Other work problem | 15 | |
| Application of work rules | 9 | |
| Job search/program | 6 | |

Problems with verification can also be associated with difficulties in obtaining information from caseworkers about administrative requirements and case status. Information problems ranked third among problems reported by the Food Stamp group. Callers turned to the Hotline when they were unable to obtain action, or even information, necessary to protect their access to Food Stamps.

Accessing Food Stamps: Obtaining Information

Ms. Reese called the Hotline on the first of the month after she received an IDHS letter stating that her Food Stamps would be reduced because her income had increased. However, Ms. Reese was receiving disability payments, which had not increased, and, because of her disability, she was not working. Ms. Reese had been unable to find out why she received the letter. From the 5th of the month until the 28th, a Hotline advocate tried repeatedly to contact a caseworker or a supervisor but could not get anyone to answer the phone or return a call. Not until the first of the following month did the advocate finally reach the caseworker and receive assurances that IDHS' error would be resolved and correct benefits restored.

Medicaid-Only Problem Reports

Top Five Issues. For this program category—callers reporting Medicaid-only concerns—information and communication problems accounted for nearly 30 percent of problem reports. Other major difficulties involved medical and general verification (29 percent) and paperwork processing (10 percent). (See Figure 5.7.) Note that overall the Medicaid-only group represented only 22 percent of calls to the Hotline regarding the three major benefit programs.

FIGURE 5.7. FIVE MOST COMMONLY REPORTED PROBLEMS (MEDICAID GROUP)

| | Frequency | Share of MA-Only Problems |
|---------------------------------|-----------|---------------------------|
| 1. No/inadequate information | 69 | 22.70% |
| 2. Nonwork medical verification | 48 | 15.79% |
| 3. General verification | 40 | 13.16% |
| 4. Paperwork processing | 31 | 10.20% |
| 5. Communication/delay | 20 | 6.58% |

Categories of Administrative Activity. All of the administrative issues relating to Medicaid involve case processing since there is no work requirement for benefits. Verification issues (including medical, general, and other) constituted nearly 30 percent of problem reports. (See Figure 5.8.) In this group, as in the others, records management figured significantly. When verification problems are treated as a separate category, difficulties with records management account for 31 percent of reported case-processing difficulties.

**FIGURE 5.8. ADMINISTRATIVE PROBLEMS INVOLVING
CASE PROCESSING AND VERIFICATION
(MEDICAID GROUP)**

| | Frequency | Share of Medicaid- Only Problems |
|-----------------------------------|------------|---|
| Case processing | 216 | 71.05% |
| Information | 78 | |
| Records management | 67 | |
| Application of policy | 27 | |
| Appointments | 14 | |
| Other case-processing problem | 13 | |
| Client-staff interaction | 12 | |
| Diversion/application discouraged | 5 | |
| | | |
| Verification | 88 | 28.95% |

The Medicaid group, like the Food Stamp group, reported frequent difficulties in obtaining accurate information from IDHS staff. As discussed earlier, Hotline records reveal that information problems were often related to considerable confusion over complicated spend-down provisions, which appear to be problematic for IDHS as well as for its clients.

Medicaid Spend-Down, Unstable Work Hours

Ms. Sanchez works two part-time jobs to make ends meet. Her hours varied with her employer's needs. She applied for Medicaid for herself and her son. She received Medicaid for her son but not for herself. She called the Hotline because she did not understand the IDHS letter which said that she had an \$800 spend-down to meet before receiving Medicaid for herself. She was concerned that the record might be in error since IDHS had previously confused her with another client also named Sanchez. The Hotline contacted Ms. Sanchez's caseworker, who confirmed that Ms. Sanchez's work income made her ineligible for benefits until she met the spend-down. However, Ms. Sanchez said that the information on her income was based on information before her employer had cut back her work hours. The Hotline advisor suggested that Ms. Sanchez contact her caseworker with the corrected income information and call the Hotline about any further problems. There were none.

6. ACCESS TO PUBLIC BENEFITS: ADMINISTRATIVE PROBLEMS FOR APPLICANTS AND RECIPIENTS

Applicants and recipients may encounter different types of administrative barriers to access, and these difficulties may vary with the program under which benefits are sought. Problem reports from recipients constituted the majority of calls to the Hotline about the three major benefit programs (73 percent).⁹ We may reasonably assume that recipients facing the loss of benefits are more likely than applicants to contact the Hotline for help. However, we cannot know the extent to which applicant problems may be underreported.

Administrative Barriers to Application

Across all program groups, general verification constituted the biggest single category of problems reported by applicants (13 percent). Different forms of verification collectively accounted for nearly one-quarter of problem reports. Communication and information problems were also among the most frequently reported problems, accounting for over 15 percent. Although these types of administrative obstacles may effectively divert applicants, specific instances of diversion, or practices explicitly discouraging individuals from applying for benefits, were cited in only about 6 percent of problem reports. (See Figure 6.1.)

FIGURE 6.1. MOST COMMON APPLICATION PROBLEMS¹⁰
(ALL MAJOR BENEFIT PROGRAMS)

| | Frequency | Share of Application Problems |
|-----------------------------------|-----------|-------------------------------|
| General verification issue | 72 | 12.83% |
| Time lag/inactivity | 47 | 8.38% |
| Medical verification | 45 | 8.02% |
| No/inadequate information | 39 | 6.95% |
| Pre-TANF work activities | 38 | 6.77% |
| Treatment by caseworker | 37 | 6.60% |
| Paperwork processing | 36 | 6.42% |
| Diversion/application discouraged | 35 | 6.24% |

Application-related problems occurred most frequently in the TANF program group: 32 percent of reported TANF problems occurred at application compared to 19 percent for the Food Stamp group and 21 percent for the Medicaid-only group. The administration of work requirements and processing difficulties figured heavily in reports of application problems in addition to verification.

⁹This does not include 123 calls that contained both applicant and recipient issues and therefore were excluded from this part of the analysis.

¹⁰“Most common” problems include all those issues that constituted 5 percent or more of the given category, in this case, application problems for all three of the major benefit programs.

TANF Group. For TANF applicants, difficulties with the administration of work requirements (nearly 30 percent of problem reports) outnumbered verification problems (just over one-fifth of reports), although both were substantial. (See Appendices for details.) The single biggest problem for the TANF group involved general verification (11 percent). It was followed closely by "pre-TANF work activities," indicating problems with administration of the state's regulation allowing caseworkers to require that applicants participate in job search activities before their applications are processed (10 percent). As shown in Figure 6.2, difficulties with case processing, information, and interaction with IDHS caseworkers also figured significantly among problems reported in gaining access to TANF.

FIGURE 6.2.
MOST COMMONLY REPORTED APPLICATION PROBLEMS
(TANF GROUP)

| | Frequency | Share of TANF Application Problems |
|-----------------------------------|-----------|------------------------------------|
| General verification issue | 40 | 10.70% |
| Pre-TANF work activities | 37 | 9.89% |
| Diversion/application discouraged | 28 | 7.49% |
| Medical verification | 25 | 6.68% |
| Paperwork processing | 24 | 6.42% |
| Treatment by caseworker | 23 | 6.15% |
| Communication/delay | 22 | 5.88% |
| Misinformation | 21 | 5.61% |
| No/inadequate information | 19 | 5.08% |
| Other policy misapplication | 19 | 5.08% |

The third-ranking problem concerned either explicit diversion efforts by IDHS staff or more subtle attempts to discourage TANF applications (7 percent). This category includes instances in which callers reported that caseworkers attempted to persuade them to apply only for Foods Stamps and Medicaid rather than TANF (formal diversion) or in which they were incorrectly turned away when attempting to apply (informal discouragement). It also includes cases in which applicants were told that the office would take applications only during limited hours (contrary to Food Stamp regulations) or that no staff was available to take an application. It does not include other kinds of informal procedural obstacles to access that are identified throughout this report. In a sense, any administrative practices that impede access might be regarded as a form of diversion or discouragement. However, for purposes of analysis, this report limits this specific category to the types of activities described above.

Food Stamp and Medicaid Groups. Administrative barriers to application for the Food Stamp and Medicaid groups were dominated by verification and communication/information problems. Paperwork processing also ranked among the top ten issues for the Food Stamp group. (See Figures 6.3 and 6.4.)

FIGURE 6.3.
MOST COMMONLY REPORTED APPLICATION PROBLEMS
(FOOD STAMP GROUP)

| | Frequency | Share of Food Stamp Application Problems |
|-----------------------------|-----------|--|
| General verification issue | 22 | 17.46% |
| Communication/delay | 20 | 15.87% |
| No/inadequate information | 11 | 8.73% |
| Treatment by caseworker | 11 | 8.73% |
| Other case-processing issue | 9 | 7.14% |
| Other policy misapplication | 7 | 5.56% |
| Verification of employment | 7 | 5.56% |

FIGURE 6.4.
MOST COMMONLY REPORTED APPLICATION PROBLEMS
(MEDICAID GROUP)

| | Frequency | % of Medicaid-Only Application Problems |
|-----------------------------------|-----------|---|
| Medical verification | 15 | 24.59% |
| General verification issue | 10 | 16.39% |
| No/inadequate information | 9 | 14.75% |
| Paperwork processing | 6 | 9.84% |
| Communication/delay | 5 | 8.20% |
| Office transfer | 5 | 8.20% |
| Diversion/application discouraged | 4 | 6.56% |

Administrative Barriers to Benefits Retention

Across all program groups, verification (22 percent), information (10 percent), paperwork processing (10 percent), and administration of work requirements (6 percent) were among the four most frequently reported problems for recipients. (See Figure 6.5.)

FIGURE 6.5.
MOST COMMONLY REPORTED RECIPIENT PROBLEMS
(ALL MAJOR BENEFIT PROGRAMS)

| | Frequency | Share of Recipient Problems |
|----------------------------|-----------|-----------------------------|
| General verification issue | 152 | 9.68% |
| No/inadequate information | 151 | 9.61% |
| Paperwork processing | 150 | 9.55% |
| Verification of employment | 104 | 6.62% |
| Work activity | 89 | 5.67% |
| Communication/delay | 87 | 5.54% |
| Medical verification | 84 | 5.35% |
| Treatment by caseworker | 80 | 5.09% |

TANF Group. However, there are substantial differences among the program groups. For the TANF group, work-related issues (namely administration of work activities and verification of employment) constituted the two most frequently reported problems for recipients (18 percent). Verification (general, work, and medical) and paperwork processing ranked among the top four, accounting for more than one-fourth (27 percent) of problems reported by TANF recipients. As in the case of applicants, problems dealing with caseworkers figured noticeably, arising in 6 percent of problem reports.

FIGURE 6.6.
MOST COMMONLY REPORTED RECIPIENT PROBLEMS (TANF GROUP)

| | Frequency | Share of TANF Recipient Problems |
|----------------------------|-----------|----------------------------------|
| Work activity | 87 | 11.03% |
| Verification of employment | 63 | 7.98% |
| General verification issue | 56 | 7.10% |
| Paperwork processing | 53 | 6.72% |
| Treatment by caseworker | 47 | 5.96% |
| Medical verification | 43 | 5.45% |

Food Stamp and Medicaid Groups. For the non-TANF groups, retention of benefits was more frequently jeopardized by case-processing and verification problems. (See Figures 6.7 and 6.8.) For the Food Stamp group, paperwork and general verification each accounted for slightly more than 12 percent of problem reports. Information and communication problems ranked fourth and fifth, accounting for 18 percent of recipient

reports. For the Medicaid group, information problems ranked first, amounting to more than 25 percent of problem reports. Combined with communication, which ranked fifth, these related issues constituted nearly one-third of problems reported by Medicaid recipients. Medical verification was the second-ranking issue, accounting for 13 percent of recipient reports. Combined with general verification problems, this subcategory accounted for more than one-fifth of recipient reports.

FIGURE 6.7.
MOST COMMONLY REPORTED RECIPIENT PROBLEMS
(FOOD STAMP GROUP)

| | Frequency | Share of Food Stamp Recipient Problems |
|-----------------------------|-----------|--|
| Paperwork processing | 72 | 13.09% |
| General verification issue | 70 | 12.73% |
| No/inadequate information | 57 | 10.36% |
| Communication/delay | 43 | 7.82% |
| Verification of employment | 41 | 7.45% |
| Missed redetermination | 35 | 6.36% |
| Lost paperwork | 28 | 5.09% |
| Other case-processing issue | 28 | 5.09% |

FIGURE 6.8.
MOST COMMONLY REPORTED RECIPIENT PROBLEMS
(MEDICAID GROUP)

| | Frequency | Share of Medicaid-Only Recipient Problems |
|-----------------------------|-----------|---|
| No/inadequate information | 60 | 25.86% |
| Medical verification | 31 | 13.36% |
| General verification issue | 26 | 11.21% |
| Paperwork processing | 25 | 10.78% |
| Time lag/inactivity | 15 | 6.47% |
| Other policy misapplication | 13 | 5.60% |
| Other case-processing issue | 13 | 5.60% |

7. CORRECTING ADMINISTRATIVE ERRORS: WHAT DOES IT TAKE?

Any complicated administrative system inevitably makes mistakes. Consequently identifying and correcting errors are key elements of benefits administration. As reviewed in the previous sections, certain types of problems occur repeatedly and appear to be systematic rather than a matter of random or occasional error. Other problems tend to be more case-specific. Efficiency and responsiveness depend on the administrative system's ability both to identify and to correct individual case errors and to recognize and remedy systemic problems (for example, updating the filing and computer systems to reduce disorganization and record-keeping errors).

The record of the Public Benefits Hotline indicates that over a five-year period Chicago-area residents made some 26,000 calls to the Hotline to seek advice or help in dealing with government agencies responsible for benefits administration. This study examines the case records of 1,556 callers who contacted the Hotline with problems involving the three major federal benefit programs administered by IDHS.¹¹ In some cases they called only for advice and did not ask Hotline staff to intervene on their behalf. In other cases individuals who were unable to remedy problems on their own received staff assistance in the form of consultation, research, letter writing, faxing, and phone calls. In a small number of cases, callers were provided representation at administrative hearings and in circuit court. In nearly 40 percent of the cases, Hotline staff became directly involved in administrative advocacy that included calls to IDHS recorded in case documents.

The record of these telephone calls is a very rough proxy for the effort required to remedy individual administrative problems in this subset of cases. In fact, this record understates effort since it does not indicate steps other than telephone calls to IDHS taken by Hotline staff (as noted above). However, the record does offer a partial indicator of what is needed to overcome administrative barriers to public benefits. More specifically, the record shows what it takes to remedy problems for skilled advocates with legal expertise and other significant resources not generally available to lower-income households (for example, faxes, copy machines, computers, voice mail, and a full library of IDHS rules and regulations). Qualitative evidence from Hotline records further illuminates the challenges of administrative problem solving.

¹¹This does not include callers who reported problems with other public benefit programs or who called only for information.

Responding to Clients

Ms. Clark is a working mother who received Food Stamps to supplement her wages. She informed her caseworker that she had to leave her job because of sexual harassment. Ms. Clark submitted a copy of a court order of protection that she had received against her employer in order to verify the reason she had to leave her job. When Ms. Clark failed to receive Food Stamp benefits adjusting for the job loss, she tried unsuccessfully to resolve the problem on her own. In frustration, she called the Hotline to report that her caseworker had apparently left IDHS and the new caseworker would not respond to her inquiries. It took the intervention of a Hotline advocate, who over the course of nearly a month placed ten calls to caseworkers, supervisors, and the local office administrator, before IDHS agreed to act in this case and adjust benefits to cover the change in job status.

Overall somewhat less than half of these cases (47 percent) required only one or two phone calls by advocates. More than half, 53 percent, involved three or more calls; 23 percent involved six or more calls; and 6 percent involved more than eleven calls. (See Figure 7.1.)

FIGURE 7.1.
CORRECTING ADMINISTRATIVE PROBLEMS:
TELEPHONE INTERVENTION BY HOTLINE STAFF

| | Frequency | % of Cases with Calls | % of All Cases ¹² (Including Advice Only) |
|---|------------|-----------------------|---|
| Cases with calls made by Hotline staff | 609 | | 39.14% |
| 1–2 calls | 284 | 46.63% | |
| 3–5 calls | 188 | 30.87% | |
| 6–10 calls | 100 | 16.42% | |
| 11 or more calls | 37 | 6.08% | |

The highest share of calls overall were made on behalf of clients in the TANF group. As shown in Figure 7.2, calls were recorded for 44 percent of TANF clients, 40 percent of clients in the Food Stamp group, and 28 percent of those in the Medicaid group. (See Figure 7.2.)

¹²Cases include only those involving one or more of the major benefit programs (TANF, Food Stamps, and Medicaid).

FIGURE 7.2.
TELEPHONE INTERVENTION BY HOTLINE STAFF:
BREAKOUT BY PROGRAM GROUP (“HIGHER EFFORT” CASES IN ITALICS)

| | All Cases with Calls Made by Hotline Staff | Cases with 1–2 Calls | 3–5 Calls | <i>6–10 Calls</i> | <i>11 or More Calls</i> |
|--|--|----------------------------|-----------|-----------------------|---------------------------------|
| TANF cases (N=700) | | | | | |
| Frequency | 306 | 133 | 101 | <i>55</i> | <i>17</i> |
| Share of TANF cases with calls | | 43.46% | 33.01% | <i>17.97%</i> | <i>5.56%</i> |
| Share of all TANF cases | 43.71% | | | | |
| Food Stamp cases (N=511) | | | | | |
| Frequency | 208 | 100 | 67 | <i>26</i> | <i>15</i> |
| Share of Food Stamp cases with calls | | 48.08% | 32.21% | <i>12.50%</i> | <i>7.32%</i> |
| Share of all Food Stamp cases | 40.12% | | | | |
| Medicaid-Only cases (N=345) | | | | | |
| Frequency | 95 | 51 | 20 | <i>19</i> | <i>5</i> |
| Share of Medicaid-Only cases with calls | | 53.68% | 21.05% | <i>20.00%</i> | <i>5.26%</i> |
| Share of all Medicaid-Only cases | 27.54% | | | | |

An examination of higher-effort cases (those involving 6 or more calls) reveals differences by program group. Higher-effort cases amounted to nearly one-quarter of those in the TANF group, nearly one-fifth of those in the Food Stamp group, and one-quarter of those in the Medicaid-only group. Although the proportion of higher-effort cases was greatest in the Medicaid group, the actual number of higher-effort cases was largest in the TANF group, where three times as many cases required direct intervention by Hotline staff. Notably there were 72 higher-effort cases in the TANF group and 17 cases requiring 11 or more telephone calls by Hotline advocates.

The qualitative record is perhaps even more instructive. The count of telephone calls does not necessarily represent conversations addressing a client’s problem. It also includes calls attempting unsuccessfully to reach any staff person, find the staff person responsible for the case, or follow up on prior messages to which staff did not respond. In some ways the experience of Hotline advocates mirrors the experience of their clients in terms of difficulty in obtaining information. It also confirms the more limited findings of federal reviewers, who have criticized long delays in answering telephone calls placed to

local welfare offices and have pointed out that even the state's toll-free Food Stamp hotline number was busy for extended periods.¹³

No Answer

Ms. Garcia works part-time and receives TANF and Food Stamps. One month, no benefits appeared on her Link card (an electronic benefits transfer card). She contacted the caseworker, who told her to submit missing pay stubs. Ms. Garcia had previously submitted the originals without retaining copies, so she had to return to her employer for additional copies. She submitted the documentation and was told that her benefits would be restored. The following chronology (with minor changes to protect identity) is taken from the Hotline case notes:

Day 1: Client was to receive benefits by last week—still not available on Link card as of today.

Days 2-3: Called local IDHS office main number more than 20 times; no one answered. When main line was finally answered, I was transferred before I could get caseworker's direct line. Caseworker wasn't there.

Day 4: No one answered the main IDHS office line all day.

Day 7: Finally reached someone through the main office line and located caseworker's direct line. There was no answer.

Day 8: Reached caseworker but was told that I must speak to her supervisor.

Day 9: Left two messages for supervisor. No response.

Day 10: Left four messages for supervisor. When finally reached supervisor, I was told that benefits would be available to client within 3 days.

Day 16: Client is still not able to access benefits. Called supervisor again and stayed on phone with him until he corrected benefits on the computer. Says client will receive her benefits in two more days. Ms. Garcia reported no further problems.

When Obstacles Converge

An analysis of specific obstacles to access would be incomplete without taking account of the many ways that, in practice, they converge. For some families attempting to navigate the public benefits system, procedural hurdles, disorganization, and misinformation hazards do not occur singly but in multiples. Moreover, efforts to solve problems, correct records, and remedy incorrect practices may also be confounded by unanswered telephones, unreturned calls, and shifting responsibility for IDHS decision making. When hazards multiply, they can produce a nearly impenetrable administrative obstacle course. In these circumstances, access to benefits may require an extraordinary level of expertise, skill, and persistence—even for professional advocates. These problems are illustrated in the Hotline case summarized below.

¹³Food and Nutrition Service, U.S. Department of Agriculture, Program Access/Customer Service Review: Illinois (2000, 2001).

The Raymond Family

David and Maria Raymond are factory workers, each with part-time jobs at the same employer. They have three children at home.

Month 1. The Raymonds went to their local welfare office to apply for Food Stamps and Medicaid to supplement their income. They were told that they were not eligible for Food Stamps because Mrs. Raymond had left her job that month, due to problems with day care for their children. They did not challenge that advice. However, Food Stamp rules permit individuals who need to care for children under 6 years old to quit work and still retain benefits.

Month 2. The Raymonds reapplied for benefits. This time they were told to return the following day for an intake interview. When they appeared for the interview, they were told that the caseworker was in a meeting, and they were sent home. They left verification documents for the caseworker. They called for another appointment. When they arrived, they were told that the caseworker had left the office. They asked the supervisor for help, but she told them that there was nothing she could do. When the Raymonds reached the caseworker by telephone the next day, they were told that their application had been denied. They appealed the decision.

Month 4. The Raymonds applied again and were denied again. This time they called the Hotline for help. A Hotline advocate contacted their caseworker, who said that the Raymonds were ineligible for benefits because Mrs. Raymond had quit her job. The advocate explained that a parent with a child under 6 years old was allowed to leave her job. The caseworker replied that the Raymonds could appeal her decision. After three calls to try to contact the supervisor, the advocate was put in touch with another supervisor, who agreed to review the case. That supervisor indicated, for the first time, that the application had not been denied because of Mrs. Raymond's job but rather for "failure to provide verification." The advocate, after being referred to another caseworker (the second), explained that the clients had tried to supply verification. The caseworker said he would need written verification that Mrs. Raymond had stopped working.

Month 5. The advocate obtained all of the requested documents and after two telephone calls reached the Raymonds' new caseworker (the third). The caseworker agreed to reopen the case, but he said that he would have to send it to a caseworker in a different unit for processing. The new caseworker (the fourth) agreed to process the application, but she said that she would need more verification documents, this time from two former employers indicating the dates the Raymonds had worked there, what they had been paid, and whether they had medical benefits.

Mr. Raymond, after several attempts, was able to get his former employers to fax the documents to the advocate who sent them to the local welfare office. The caseworker agreed to process the application. But two days later he had not yet done so. In the meantime, the family attended an appeal of the previous denial (from month 2). At the appeal, the caseworker said that he needed an additional verification, documenting Mr. Raymond's earnings going back to month 1. The advocate called the hearing examiner to point out that IDHS' rules allow clients to make self-reports on their prior employment without additional verification. The hearing examiner said that she would have to ask the central office policy unit to rule on this question.

Month 6. The advocate made four attempts before reaching the hearing examiner who said that she had not received a response from the policy unit. She also said that the Raymonds' case had been transferred to yet another caseworker (the fifth). The advocate contacted the new caseworker, who knew nothing about the case. She also contacted the policy unit, which could not locate the request to address the verification question. After a week of additional attempts to

reach a resolution, the advocate contacted the original caseworker, who agreed to accept a notarized statement of past employment from the Raymonds.

Month 7. The caseworker, after receiving the notarized statement, agreed to process the request for benefits. But five days later her supervisor blocked the application because it did not include employment verification. The advocate explained that a notarized statement with this information had been submitted. The supervisor asked that it be re-sent.

The next week the supervisor reported that Medicaid benefits had been approved. She also said that she had instructed the caseworker to process Food Stamps beginning with the date when she received all verification documents. The advocate explained that regulations required that benefits begin with the date of application. The supervisor said that she would submit the question of the start date to the central policy unit. The Raymonds received partial Food Stamp benefits.

Month 8. The advocate attempted to reach the caseworker to inquire about the status of request for retroactive Food Stamps. In the interim, Mr. Raymond's workplace burned down, and he lost that job. (He later found a new job.) This information was reported to the caseworker as part of a request for supplemental Food Stamps to adjust for the income loss.

Month 9. The Hotline advocate contacted the caseworker to inquire about the status of the Food Stamp requests. The caseworker said that she could not issue benefits back to the date of application, again citing earlier problems with verification. The advocate revisited the history of the case. Four days later, the caseworker approved Food Stamps going back to the date of application. Eight days later (and nine months from the initial attempt to apply for Food Stamps), the Raymond family received their full Food Stamp allotment.

Access and Answers

In addressing the issue of problem solving, this analysis does not attempt to judge what the "right" outcome should be. Rather, it seeks to come up with an indicator of the viability of IDHS problem-solving processes and, in particular, what it takes to obtain responses to administrative difficulties. On the whole, the picture is mixed.

On the one hand, an examination of lower-effort cases (those involving five or fewer calls) indicates that in many instances IDHS staff cooperated in investigating problems and sought to do so as quickly as possible. On the other hand, a look at higher-effort cases (those involving six or more calls) reveals that, in 15 percent of cases overall and nearly 40 percent of cases with direct Hotline advocacy, making contact, obtaining responses, or resolving problems was difficult. The difficulty is amplified when there is no single locus of accountability for case management and, as in the example of the Raymonds, decision making continually changes hands, from caseworker to caseworker, unit to unit, to supervisors, and to specialized central office units.

Overall the number of Chicago-area residents turning for help to the Hotline, the share of cases requiring direct intervention, and the record of experiences occurring in higher-effort cases suggest that the administrative system can be too difficult for individuals to navigate without professional assistance. In fact, Hotline records show that efforts to solve administrative problems can be daunting even for highly skilled and resourceful professional advocates.

8. ACCESS AND CASELOAD DECLINE: THE SPECIAL CASE OF TANF

Although smallest in caseload size of the three major benefit programs, TANF was distinctive in generating the largest share (42 percent) of calls to the Public Benefits Hotline regarding those programs. As described in previous sections, callers reporting problems in accessing TANF encountered administrative difficulties common among all three programs. But in addition they faced special hazards related to the complexity of program rules, especially the administration of work requirements.

TANF merits a closer look, not only because of the volume of calls associated with it, but also because Cook County TANF caseloads declined 25 percent in the five years after welfare reform and 15 percent in the Hotline study year alone. Despite the widely held view that caseload decline represents a positive achievement, there has been considerable speculation about the role of administrative practices in producing this caseload decline. Although the Hotline was not specifically designed as a test of this question, the data can help shed light on it. Using Hotline calls as a rough indicator of administrative difficulties experienced by Chicago-area residents,¹⁴ this section uses statistical modeling to explore whether administrative barriers may have contributed to the drop in welfare caseloads by excluding eligible families unable to surmount procedural obstacles and red tape.

The administrative processes that determine access to TANF and other benefits take place in IDHS offices located throughout the Chicago metropolitan area. These local offices vary widely in their administrative workload (caseload size), to some degree in the quality of their facilities and resources, and to an unknown degree in their staff practices. They also vary in the rate at which their TANF caseloads have declined. In order to examine whether administrative difficulties were associated with TANF caseload decline, Hotline call data were broken down by local office¹⁵ and variation analyzed controlling for differences associated with size and location.

Local Office Caseloads and Hotline Call Volume

One would expect that the number of Hotline calls reporting administrative problems would be strongly associated with the number of cases processed by each local office. If offices were implementing similar administrative procedures, then one would expect that the larger the caseload, the greater the number of calls. That is, the *rate* of problems reported for each office would be similar across Cook County. As shown in Figure 8.1, the number of Hotline calls (column *c*) appears loosely related to caseload size, whether measured in terms of average caseload size (column *a*) or as a percentage of Cook County's total caseload (column *b*). For example, the office responsible for the

¹⁴As previously discussed, it is not possible to say whether problems reported by Chicago-area residents overstate or understate the problems occurring in local IDHS offices.

¹⁵The analysis includes all Cook County offices, except for specialized units and offices that were not open through the entire year of this study (September 2000 through August 2001). This excludes the Medical Field Operations office, the Special Units office, and the Grand Boulevard local office.

greatest proportion of the Cook County caseload, Englewood (9.11 percent), also had the highest Hotline call volume in an absolute sense (70 calls). Offices that handled smaller caseloads shares, Kenwood and Uptown for example (1.19 percent and 0.95 percent, respectively), generated fewer calls (8 and 11 calls, respectively).

However, differences in caseload size do not account for all of the variation in call volume. Column *d* of Figure 8.1 reveals this best. Local IDHS offices are ranked by the number of Hotline calls reporting TANF problems as a percentage of their average caseload size. As shown, the volume of Hotline calls regarding problems at specific local offices varied from 7.4 percent of local office caseload to 0.4 percent. The mean value was 2 percent, with the bulk of offices falling in the 1 percent to 4 percent range.

FIGURE 8.1.
COOK COUNTY IDHS OFFICES:
AVERAGE CASELOAD, CALL VOLUME, AND CASELOAD DECLINE¹⁶

| Local Office | (a) Average Caseload (Sept. 2000–Aug. 2001) | (b) Share of Total Cook County Caseload | (c) Number of Hotline Calls | (d) Hotline TANF Call Volume as a Percentage of Average Caseload | (e) Drop in Caseload Over Study Period |
|----------------|--|--|--------------------------------------|--|--|
| Northern | 474 | 1.38% | 35 | 7.38% | 48.98% |
| Humboldt Park | 524 | 1.53% | 25 | 4.77% | 58.08% |
| Wicker Park | 433 | 1.26% | 20 | 4.62% | 46.55% |
| Lower North | 533.25 | 1.55% | 20 | 3.75% | 56.46% |
| Uptown | 325 | 0.95% | 11 | 3.38% | 26.74% |
| Northwest | 1695 | 4.93% | 51 | 3.01% | 42.79% |
| Garfield | 1382.5 | 4.02% | 38 | 2.75% | 27.35% |
| Western | 1578 | 4.59% | 38 | 2.41% | 24.93% |
| West Suburban | 918.25 | 2.67% | 22 | 2.40% | 41.35% |
| Michigan | 1339.5 | 3.90% | 31 | 2.31% | 31.73% |
| Austin | 1504.75 | 4.38% | 34 | 2.26% | 18.75% |
| Englewood | 3128.75 | 9.11% | 70 | 2.24% | 31.47% |
| Kenwood | 410 | 1.19% | 8 | 1.95% | 26.34% |
| Roseland | 1597.75 | 4.65% | 26 | 1.63% | 29.49% |
| Southeast | 2850.75 | 8.30% | 42 | 1.47% | 23.25% |
| Woodlawn | 1895.25 | 5.52% | 22 | 1.16% | 11.96% |
| Oakland | 1700 | 4.95% | 19 | 1.12% | 22.18% |
| Calumet | 1980 | 5.76% | 22 | 1.11% | 26.33% |
| Ashland | 1008.75 | 2.94% | 11 | 1.09% | 21.64% |
| Pershing | 1093 | 3.18% | 10 | 0.91% | 28.33% |
| Auburn Park | 2984.75 | 8.69% | 26 | 0.87% | 23.35% |
| Park Manor | 1900 | 5.53% | 16 | 0.84% | 15.19% |
| South Suburban | 2726.5 | 7.94% | 11 | 0.40% | 23.70% |

¹⁶Illinois Department of Human Services, Bureau of Performance and Outcomes Measurement, *Monthly TANF Historical Data Updates* (Aug. 2000–Sept. 2001). See Appendix for details as to how average caseload and caseload decline were calculated.

Understanding Variation in Call Volume: The Role of Administrative Practices

As indicated, there were marked differences in the local office share of Hotline calls—differences that are not explained by variation in office caseload size. As Hotline calls report problems with benefits administration, this raises the question of whether administrative barriers to access (as measured by call volume) might be associated with a reduction in local office caseload. That is, did administrative practices contribute to caseload decline by impeding access to benefits provided by law? In order to probe that possibility, the data were analyzed to examine whether there was, in fact, any relationship between the extent of caseload reduction and the volume of Hotline calls.

As shown in column *e* of Figure 8.1, local offices varied a great deal in the extent of their TANF caseload decline, measured in terms of the percentage difference between the local office TANF caseload at the beginning and the end of the study year. This variation in call volume among local offices can be examined to see if differences in call volume are associated with caseload decline. By examining this relationship, it is possible to explore, albeit indirectly, the role that administrative practices may have played in limiting access and thus reducing caseloads in local offices.

First, consider that caseloads can decline for any number of reasons affecting both entry and exit. For example, families are less likely to turn to TANF for support if they can get good jobs that make assistance unnecessary. Or they may leave TANF if they marry and their partner is able to support the family. Alternatively families may need financial assistance and potentially be eligible to receive it, but they may be unable to get benefits because of administrative practices that discourage or deny access.

To the extent that caseloads in Cook County offices declined as a result of improved family circumstances (whether through work, marriage, or other changes in the family), one would expect to find no relationship between caseload decline and Hotline call volume. That is, administrative obstacles would not be at issue. One might even expect diminishing local office caseloads to be associated with improved service, and thus fewer Hotline calls, if that reduced the administrative burden on caseworkers. However, to the extent that caseload decline is related to administrative practices that create barriers to access, one would expect local offices showing the greatest decline in caseload to generate a disproportionate share of Hotline calls.

In order to assess these possibilities, data for Cook County IDHS offices were analyzed by using regression models that included, as the dependent variable, the local office share of Hotline calls (column *d* of Figure 8.1) and, as explanatory variables, both caseload share (column *b* in Figure 8.1) and caseload decline (column *e* of Figure 8.1). The results of these regression models are summarized in Figure 8.2. (See Appendix 3 for a more thorough explanation of this analysis.)

FIGURE 8.2.
EXPLAINING VARIATION IN CALL VOLUME AMONG LOCAL OFFICES:
THREE MODELS

| | Explanatory Variables: Standardized Coefficients (P-Values) | | | Adjusted R² |
|---|---|------------------------------------|---|-------------------------------|
| | Share of Cook County TANF Caseload | % TANF Caseload Decline | Geographic Location (1=north/west) | |
| Model 1: Caseload size | .4557 (.09) | | | .21 |
| Model 2: Caseload size and caseload decline | .7275 (.02) | .5229 (.01) | | .35 |
| Model 3: Caseload size, decline, and region | .7293 (.01) | .5039 (.01) | -.1669 (.34) | .35 |

As shown in Model 2, the extent of TANF caseload decline is positively related to volume of TANF Hotline calls. That is, the greater the decline in local office caseload, the greater its share of Hotline calls. This relationship is statistically significant. For every 1 percent decline in caseload occurring over the study period, the local office share of Hotline calls increased by .10 percent.¹⁷ By adding caseload decline to Model 1, Model 2 increases the explained variance in call volume by 67 percent (from 21 percent to 35 percent).

¹⁷This figure is derived from the unstandardized coefficient. See Appendix 3 for details.

To summarize the results of the model:

- **Model 2 shows a positive and statistically significant relationship between decline in TANF caseload and the volume of Hotline calls reporting problems at local offices. This relationship holds even after controlling for variation in local office caseload share. This model explains 35 percent of the local office variation in Hotline call volume.**
- **These results are consistent with the possibility that deep declines in caseloads were partially achieved through administrative practices that made it difficult for potentially eligible families to access benefits.**

An example helps demonstrate this relationship. Imagine two offices, A and B with similar TANF caseloads. Office A experienced a 40 percent caseload decline, while Office B's rolls dropped by only half as much. On the basis of this model, Office A can be expected to generate 2 percent more calls reporting administrative difficulties than Office B.

Possible Alternative Explanations:

Regional Differences in People and Opportunities

Although Model 2 shows a statistically significant association between TANF caseload decline and the volume of Hotline calls, the variation may relate to unobserved differences in population or economic opportunities in different regions of Cook County. For example, residents living in some areas may be more familiar with or more likely to use the Hotline than residents of other areas, perhaps as a consequence of word of mouth or local norms. Also, North Side and West Side residents may have access to a somewhat broader range of job opportunities than those on the South Side. If so, they would be less likely to call the Hotline when encountering problems with the welfare office because they believe that they have a good chance of quickly securing adequate employment.

This analysis attempts to probe these alternative possibilities. At the time of this study, IDHS organized its Cook County offices into two geographic regions. Model 3 introduces these regions into the regression equation. Although an admittedly inadequate proxy for variation either in population or economic opportunity, variation between geographic regions that include largely South Side local offices versus North Side and West Side offices can be used to take account of unobserved regional differences. As shown in Model 3 (Figure 8.2), local offices on the North Side and West Side generated a lower volume of calls to the Hotline, the model controlling for both caseload share and decline. However, this relationship is not statistically significant and adds little to the variance explained by Model 2.

An additional analysis of interaction effects, comparing the association between caseload decline and call volume in each region, was used to test whether this association independent of region exists. Interaction effects were tested in a model that allowed the impact of caseload decline to vary between the geographic regions to take account of possible unobserved differences in demographic, social, and labor market conditions in these areas of Cook County. (See Appendix 3 for a more detailed look at this analysis.)

This analysis indicated no significant difference between the two areas in the strength of the relationship between caseload decline and call volume. This further confirms a relationship between the extent of caseload decline and Hotline reports of barriers to access.

Within the limits of the available data, this analysis suggests that the relationship between local office caseload reduction and calls to the Hotline reporting problems is not simply a matter of serving different populations or different communities.

Administrative Practices and Caseload Decline

This analysis of local office variation demonstrates a statistically significant relationship between TANF caseload decline and share of Hotline calls (after controlling for caseload size and for geographic region). Although Hotline calls are only a rough measure of the difficulties that Cook County residents have encountered in seeking access to benefits, this analysis points to the importance of looking more closely at administrative practices that may prevent families from securing assistance provided by law.

These findings should be interpreted with caution. Even after taking caseload share and decline into account, the models leave over half of the variance in call volume unexplained. Thus they offer an incomplete picture of factors associated with calls to the Hotline. Moreover, Hotline calls are far from a perfect measure of the extent of administrative barriers. Some people may not call the Hotline, no matter how deep their need or how severe the obstacles to access they encounter. Others may call with complaints that cannot be substantiated.

Yet, even with these caveats, this analysis suggests that at least some of the decline in Cook County caseloads was likely achieved through administrative practices limiting access to benefits. Administrative obstacles to access—encompassing the broad range of problems identified throughout this report—clearly merit far more careful scrutiny than they have received to date.

9. KEY FINDINGS FROM THE HOTLINE

Reports to the Hotline highlight difficulties experienced, during the period of this study, by Chicago-area residents seeking access to public benefits from IDHS. This study analyzed 1,556 calls reporting 2,406 specific problems accessing one or more of three major safety-net programs: TANF, Food Stamps, and Medicaid. The record of these calls offers a rare look at a year in the life of the public benefits system from the perspective of Chicago-area residents seeking access to assistance. As detailed in this report, the quantitative and qualitative record indicates that, for many of those who call the Hotline, routine problems of administrative disorganization, poor communication, and inconsistent application of program rules create a hazardous path that they are unable to navigate on their own.

There are some limitations to keep in mind in reviewing key findings from this study. Because the Hotline is used to report problems in the administration of benefits, it does not supply a means of assessing what the IDHS has done well. Nor does this analysis necessarily capture the full extent of difficulties occurring in benefits administration. The analysis is limited to those issues reported by Hotline callers.

Administrative Barriers to Access

Among these issues, a portrait emerges of an administrative system that imposes significant barriers to access.

- The most common barriers were associated with problems in record keeping, verification, and communication (including giving information to clients). Difficulties with these ordinary but fundamental aspects of benefits administration crosscut all major benefit programs.
- Communication problems and confusion over verification requirements were particularly confounding to applicants, accounting for 34 percent of reported application problems. Administrative practices impeded access by applicants when they received inadequate or incorrect information about criteria for eligibility and how to apply, or when applicants became entangled in complex and burdensome verification and paperwork demands.
- Problems with verification and information arose in more than one-third of calls in the TANF and Food Stamp groups. They also were particularly pronounced for applicants, arising in nearly one-half of calls among applicants in the Food Stamp group, and nearly two-thirds of calls among applicants in the Medicaid-only group.
- For recipients, retention of benefits was jeopardized by inadequate information, problems with communication, paperwork processing, and verification difficulties. These administrative hazards accounted for nearly half of recipient problem reports across the three program groups.

- Hotline cases reveal that even mundane aspects of administration—processing changes of address, work hours, and income—presented hazards to the retention of benefits, irrespective of financial eligibility or individual efforts to comply with requirements.
- When problems did occur, processes for correcting them could be cumbersome and at times as difficult to navigate as other aspects of the benefits system. More than 40 percent of callers with TANF and Food Stamp problems and nearly 30 percent of those with Medicaid problems required direct intervention by professional advocates. Although there were many cases of IDHS cooperation and responsiveness to Hotline advocates, in a significant number of cases the records indicate that reaching IDHS staff or receiving responses from them was difficult. Nearly one-quarter of cases involving TANF claims required six or more calls by advocates.

Hotline findings underscore and amplify issues raised by federal evaluators. Federal reviews have generally been limited to snapshots of a particular moment or observations in selected local offices. However, this report is able to shed new light on these issues by examining them countywide, across the three major benefit programs, and extending over a one-year period.

One set of problems clearly identified in the Hotline analysis involves giving information. Similar problems have been reported by Federal Food Stamp review teams making visits to local offices. They documented instances in which staff did not correctly or fully inform applicants about how to apply or the time frame for meeting application requirements.¹⁸ They also found that applicants were not always advised to complete, sign, and submit applications on the same day that they entered the office. The date of application is significant because, once approved, Food Stamp benefits are credited from that date.

Record-keeping problems, prominent in this analysis, were repeatedly highlighted by federal reviewers, who blamed inadequate computer and filing systems for creating obstacles to access in both the TANF and Food Stamp programs. They suggested that the IDHS record-keeping system contributed to the failure of caseworkers routinely to account for changes in income—especially important in the case of working recipients, whose earnings might vary from month to month.¹⁹ Federal reviewers also blamed the antiquated computer system for contributing to the incorrect loss of Food Stamps by families leaving TANF.²⁰ This is significant because barriers to accessing and retaining

¹⁸Food and Nutrition Service, U.S. Department of Agriculture, Program Access/Customer Service Review: Illinois (2000, 2001). Medicaid reviewers also found that staff were incorrectly requiring in-office interviews and repeat appointments, in contradiction with program rules. (U.S. Department of Health and Human Services, TANF/Medicaid State Review: Illinois (Dec. 2001).

¹⁹Food and Nutrition Service, U.S. Department of Agriculture, State Agency Operations Review: Illinois (Feb. 2000).

²⁰Food and Nutrition Service, U.S. Department of Agriculture, Program Access/Customer Service Review: Illinois (2000).

these supports work at cross-purposes with TANF's objective of replacing welfare with work.

Verification problems, which constitute an important issue among Hotline callers, were also highlighted by federal teams reviewing specific program practices at selected IDHS offices. Their reports criticized IDHS for making excessive verification demands and for failing to inform applicants that they were allowed alternative forms of verification. For example, a federal Food Stamp review criticized IDHS staff for requiring a photo identification and failing to inform applicants that they could document their identity in other ways.²¹ Federal Medicaid reviewers observed that adults applying on behalf of their children were routinely (and inappropriately) asked for Social Security numbers and the immigration status of household members who were not applying for Medicaid.²²

Hotline data underscore the systemic nature of the administrative deficiencies identified by federal reviewers at single points in time or in a small number of IDHS offices.

TANF: A Closer Look

- This analysis indicates that difficulties in accessing benefits were especially pronounced for callers in the TANF group. This group accounted for 42 percent of all Hotline callers and 46 percent of those in one of the three major program subgroups.

The disproportionate size of this group of callers is noteworthy for several reasons. First, this is the group most directly affected by welfare reform and state administrative practices developed to implement its provisions. Second, this group comprises families with children, in contrast with other programs that include a significant number of independent adults. Third, families seeking access to TANF are least likely to have other reliable sources of income or, if working, to have incomes that bring them above the poverty level.

Administrative barriers to accessing TANF hold particular interest in light of the sharp caseload decline occurring since the implementation of welfare reform. Studies to date have been unable to account adequately for this decline as a product of improved economic circumstances or work effort by those losing TANF or failing to gain access to it. This study used the volume of calls to the Hotline as an indicator of administrative problems. It then examined the relationship between call volume and caseload decline, looking at variation among IDHS offices in Cook County. It tested this relationship in a model that analyzed factors that might account for local office variation. (See Section 8.)

- The model showed a statistically significant association between the volume of Hotline calls and the extent of local office TANF caseload decline.

²¹Food and Nutrition Service, U.S. Department of Agriculture, Program Access/Customer Service Review: Illinois (2001).

²²U.S. Department of Health and Human Services, TANF/Medicaid State Review: Illinois (Dec. 2001).

This relationship held after controlling for caseload size and differences that might be associated with geographic region. This suggests that administrative obstacles to access have contributed to caseload reduction, independent of changes in formal policy or law.

➤ This finding is particularly striking given the widely held view that caseload decline represents a positive achievement. By contrast, the model suggests that caseload declines may have been achieved, at least in part, by administrative barriers that blocked access to benefits.

By bringing the administrative side of caseload dynamics into view, this finding can help explain other studies showing that loss of welfare benefits does not necessarily mean that families are better off and, in a troublesome share of cases, are instead plunged into deeper poverty without access to public benefits. Evidence of a significant association between caseload reduction and administrative difficulties should be of considerable concern to policymakers, IDHS staff, and citizens. It suggests that administrative practices may stand in the way of Chicago-area residents' ability to access the federal safety net.

➤ Callers in the TANF group encountered administrative difficulties common among all three programs. But they faced additional hazards related to the administration of work requirements. Problems in the application of work rules, administration of job search/job program, work verification, and other related issues accounted for 41 percent of problems reported in this group.

TANF callers also reported a disproportionate number of barriers to access at application. Difficulties with the TANF application process are documented in a recent federal report comparing the process in other states with that of two Chicago IDHS offices. The report suggests that the multiple steps involved in the application process (among them, IDHS demands for repeated appearances at the office, screening appointments, interviews, child support requirements, attendance at job club, job search requirements) and the waiting period for benefits (eligibility does not begin until 30 days after application) have made the application process in Cook County "burdensome" in both time and cost.²³

²³U.S. Department of Health and Human Services, Study of the TANF Application Process (April 2003). In contrast with the 30-day wait for TANF in Illinois, eligibility for Food Stamps is calculated from the date of application. The study suggested that "applicants seeking immediate support may be surprised at the mandatory waiting period and ultimately elect not to apply." It also noted: "In the site with the most stringent job search requirement (Cook County), 62 percent of the study sample either decided not to apply for TANF or did not complete the application process—a proportion nearly twice that of most other sites." Although the study did not find a measurable difference between the short-term incomes of families who failed to complete the application process and those who did, the analysis was very limited in duration and scope. It was based on samples taken in only two local offices at a specific moment in time. Nor did it directly examine the range of administrative practices or problems analyzed countywide for this report.

For the TANF group as a whole, administrative confusion introduced by work requirements emerged most noticeably with respect to additional verification burdens, administration of work activities, and the application of work rules.

- Hotline reports indicate special problems confronting lower-wage workers. They must navigate an administrative system apparently ill-equipped to manage information concerning ordinary changes in work hours and earnings. Lower-wage workers also face difficulties maintaining access to Food Stamps and Medicaid when they leave the TANF program, but still qualify for assistance to make ends meet.

Making Benefits Accessible

Access to public benefits depends on the administrative efficacy of the agencies that manage benefits provision. IDHS is the gatekeeper in Illinois to the three major federal programs (TANF, Food Stamps, and Medicaid) that provide a basic safety net for Chicago-area residents. Findings from the Public Benefits Hotline Research Project point to the hidden workings of a complex administrative system and the difficulties that it presents to those seeking access to these programs. It indicates that benefits made available by law may not be available in practice.

This report focused on a relatively "ordinary" year, midway through the first five years after welfare reform. However, that year did hold some special significance because it alone registered a 15 percent decline in welfare caseloads. Subsequently, TANF caseloads continued their general decline until a recent uptick; and there have been increases in Food Stamp and Medicaid caseloads. Recent years also have seen a marked rise in the state's poverty rate, from 10.7 percent of the population in 2000 to 12.6 percent in 2003.²⁴ The number of individuals living just above the poverty level (that is, up to 125 percent of the poverty line) rose from 13.1 percent to 16.3 percent. This includes individuals in households of lower-wage workers who may not qualify for TANF but may be eligible for Food Stamp and Medicaid benefits to help make ends meet. These general indicators of rising poverty underline the continuing importance of access to federal safety net programs for Illinois residents.

While caseloads have varied, there has been less change in the basic elements of benefits administration. If anything, some of the difficulties identified in this report may have been exacerbated by IDHS downsizing and layoffs (including a hiring freeze) that have generally increased the workload for individual caseworkers and the strains on the administrative system overall. Furthermore, complex policy requirements dictated by federal legislation continue to complicate state-level benefits administration in ways that put benefits at risk. TANF reauthorization legislation currently before Congress would add to this complexity.

²⁴U.S. Census Bureau, Historical Poverty Tables, tbl. 21, at www.census.gov/hhes/poverty/histpov/hstpov21.html (last revised Aug. 26, 2004).

Noteworthy in this context is that the average annual Hotline call volume rose nearly 50 percent, from an average of 5,200 calls a year during its first five years of operation to an average of almost 7,700 over the last three years.²⁵ Even if these figures offer only a rough indicator of administrative problems that continue to face Chicago-area residents seeking public benefits, they underscore the fundamental concerns raised in this report.

Accessing the Safety Net highlights the importance of taking steps to protect access to benefits in order to ensure that the safety net performs its intended functions. Improvements can be made in many areas of benefits administration, although no one "silver bullet" can remedy the systemic problems identified. That will take a plan for systemwide administrative reform, the details of which are beyond the scope of this report. Nonetheless, this report's findings point to three distinct areas in which IDHS can take action to protect access to benefits.

1. Improve administrative infrastructure in order to enable caseworkers to do a better job of managing complex case-processing functions.

Pointing the finger at caseworkers is all too easy when problems occur in benefits delivery. This has sometimes led to initiatives to increase training in procedures but with uncertain results for protecting access to benefits. Before blaming those at the lowest reaches of public agencies, we need to consider whether they have the tools needed to do the job well. Federal reviews of IDHS practices have repeatedly called for improvements in the basic elements of the administrative infrastructure, among them, computer systems, data management software, and telephone systems.

- ***Upgrade records management to reduce blockages to access by improving the availability of accurate and timely information and the integrity of case files.***

Although some aspects of case management are computerized, files are not always reliable or complete, and caseworkers still rely on paper records and antiquated filing systems that contribute to the types of case-processing and information problems identified here. Moreover, when records must be shared within different parts of IDHS or adjusted to account for changes in individual circumstances, the administrative system lacks the flexibility to efficiently accommodate routine record sharing, adjustments, and corrections.

- ***Identify a single locus of responsibility for each case.***

As Hotline data show, Chicago-area residents seeking information about their cases can run a frustrating gauntlet of transfers from caseworker to caseworker in search of records and answers. The data indicate that responsibility for a case may be dispersed among different organizational units and staff, thereby leaving no

²⁵Calls to the Public Benefits Hotline totaled 7,054 between August 2001 and July 2002; 8,418 between August 2002 and July 2003; and 7,579 between August 2003 and July 2004. These numbers represent all calls to the Hotline, including but not limited to those dealing with the three federal benefit programs that are the focus of this study.

single person fully accountable for case management. Those seeking benefits need a place where they can reliably obtain accurate information, answers to questions, and authoritative responses to administrative concerns.

- ***Structure the record-keeping system to accommodate common features of lower-wage work, especially shifting work hours, income, and child care expenses.***

Hotline records indicate that access to benefits is jeopardized when case management systems cannot adequately accommodate commonplace aspects of lower-wage jobs that have frequent changes in employment, work hours, wages, and child care expenses. Improvements in data management systems can protect access to benefits by enabling caseworkers to respond more rapidly and reliably to changes in client information and status.

2. Improve internal monitoring and feedback in order to advance accountability for protecting access to benefits.

Internal monitoring systems currently used by IDHS cannot track the administrative problems identified in this report. IDHS monitoring emphasizes, in the case of TANF, indicators showing numbers of individuals placed in work activities or removed from TANF caseloads, but it does not track individuals wrongly denied access to benefits. This approach to agency monitoring may even exacerbate the problems described in *Accessing the Safety Net* by creating perverse incentives for front-line workers. Internal performance measures hold caseworkers accountable for caseload reduction and work activity quotas but place no safeguards on how they do it. So long as caseloads go down and the quotas are met, administrative practices that incorrectly prevent access to benefits can escape recognition.

At times these problems were raised by caseworkers themselves. For example, testifying at public hearings, some caseworkers complained that they were pressured to call in large numbers of clients for extra appointments and use any failure to appear as a rationale to terminate benefits.²⁶ While IDHS has ended mass call-ins, this practice points to the importance of monitoring IDHS practices that now evade regular review.

²⁶Caseworkers described being instructed to call in clients who were exempt from work requirements. They claimed that they often gave clients only short notice and cancelled benefits even to those who called to reschedule (contrary to official policy). They said that they were allowed to reinstate only those who later made a personal appearance at the office. IDHS performance monitoring does not supply a means of determining whether these practices were unusual or widespread. "Testimony at Caseworkers' Rights Board Hearings Shows Common Interests and Concerns with IDHS," *Illinois Welfare News*, June 1999, p. 6.

- ***Monitor administrative practices that contradict policy or impede access to benefits.***

The development of more sophisticated quality assurance monitoring can help track administrative practices that contradict policy or impede access to benefits. It can yield more balanced feedback to caseworkers and local office managers and shift incentives toward ensuring that those who are eligible for benefits receive them.

- ***Reconsider the functions of the offices of ombudsman and inspector general.***

Although IDHS has both an ombudsman and an inspector general, neither office currently investigates whether administrative practices are consistent with IDHS responsibility for providing access to public benefits. In some other state agencies, the ombudsman and the inspector general take a more active role in monitoring administration, problem solving, and client advocacy.

- ***Consider improving and extending the IDHS Food Stamp hotline.***

IDHS' internal Food Stamp hotline, mandated by federal law, has been criticized by federal reviewers, who have pointed out long delays in answering the phones, among other problems. Records from the Public Benefits Hotline also indicate that difficulties locating information and records—similar to those documented in local offices—may limit the capacity of the Food Stamp hotline staff to respond to problems. The Food Stamp hotline should be upgraded to improve its effectiveness and possibly to include services to TANF and Medicaid recipients.

3. Use external monitors, advocates, and citizens as IDHS watchdogs to safeguard access to public benefits and help improve administrative accountability.

Access to benefits provided by law can be more strongly protected when there are external checks on administrative practices. As examples from the Hotline's files show, skilled advocacy is an important component of any effort to pursue remedies for administrative problems. For some who called the Hotline, information and advice were sufficient to address their concerns. For others, far more was needed. This report's analysis of the correction process indicates that at times the effort required to resolve administrative problems can be substantial and far beyond the capacity of individual citizens.

Just as there is no single solution to the administrative concerns raised in this report, so too there is no single strategy for improving IDHS accountability. A variety of efforts, including those suggested here, can contribute to addressing IDHS' complex administrative problems.

- ***Ensure the availability of skilled advocacy to support Chicago-area residents in overcoming barriers to accessing public benefits.***

In cases reviewed as part of the Hotline research project, skilled advocacy was often crucial to holding IDHS accountable for correcting administrative errors. Although a case-by-case approach cannot, on its own, address the problem of systemic obstacles, it is a crucial element in an overall reform plan.

- ***Conduct independent studies and reviews of IDHS practices.***

External studies and reviews should be considered as part of a multifaceted plan to protect access to benefits. Several strategies, among them federal reviews, studies of Hotline data or fair hearing records, field research studies of local office practices, and other independent research efforts, can help IDHS identify problems and improve the ability of advocates and citizen watchdogs to monitor and identify systemic problems preventing access to benefits.

- ***Experiment with innovative strategies to improve administrative performance and accountability.***

Strategies can include the use of citizen monitors to observe IDHS practices, the development of client advocates, or the creation of new approaches to IDHS oversight.

Administrative barriers stand between Chicago-area residents and access to federal safety-net programs that support lower-income families and individuals. This report reveals that public benefits, available by law, are not necessarily available in practice. The challenge for Illinois is to assure that its agencies protect access to public benefits for all of the state's residents.

APPENDICES

1. Research Project Methodology
2. Detailed Hotline Demographic Data
3. Modeling Variation: Statistical Analysis and Methods
4. Detailed Administrative Problem Reports: All Program Groups
5. Detailed Administrative Problem Reports: By Program Group
6. Detailed Administrative Problem Reports:
Applicants and Recipients
7. Acknowledgments

1. Research Project Methodology

This report is based on an analysis of calls to the Public Benefits Hotline between August 1, 2000 and July 31, 2001. The Hotline is housed at and operated by the Legal Assistance Foundation of Metropolitan Chicago. Individuals contact the Hotline through a toll-free telephone number.

For this research project, Hotline staff, including intake specialists and paralegals, recorded information on each call according to a protocol developed in collaboration with researchers. The protocol included provisions to protect lawyer-client confidentiality and to restrict information that could be used to identify individuals.

During a pilot test of the preliminary research protocol in the summer of 2000, the Hotline staff received training in recording case information. Callers were asked for demographic information, as well as details of their benefits status and problems. Callers were also asked for consent to use their records for research purposes. Consent was obtained for all of the cases used in this study. In the course of Hotline staff investigations, staff recorded a chronological account of their findings and their interchanges with clients and state agencies.

Case records were placed in a Foxpro database and coded according to a research protocol that permitted the identification of administrative issues involving access to public benefits.²⁷ This report is based on an analysis of coded case records. A separate research team, this report's authors, analyzed the coded data using SPSS and Stata to examine frequencies, distribution, and local office variation. The research team also conducted a full-text review of selected case records in each administrative category to develop a qualitative assessment of the issues raised by Hotline callers.

The database constructed for this project has both advantages and limitations. In several significant ways, it has advantages over other data sources that have been used to attempt to assess the performance of the public benefits system.

- First, it is a record of a large number of individual experiences over time, across different benefit programs, and across Cook County. This allows analysis to go beyond administrative reviews of a single program in order to examine how different programs interact and how administrative difficulties in one program can spill over into others. It offers a more comprehensive view than can be obtained from a point-in-time snapshot or review of selected local offices.
- Second, it permits examination of case records constructed through a fact-finding process that includes discussions with IDHS staff about the issues presented in the case and an examination of IDHS documents. This enables researchers to go beyond individuals' opinions obtained through surveys or focus groups.

²⁷Kevin Roy, assistant professor in the Department of Family Studies, University of Maryland, coded the cases with the assistance of Cathy Flynn, senior research associate, Center for Families, Purdue University, and Rebecca Sero Lynn, doctoral student in the Department of Child Development and Family Studies, Purdue University.

- Third, the Hotline data offer a basis for qualitative analysis of benefit problems experienced by individuals seeking to acquire or retain assistance from the state and allow examination of how common systemic problems play out in individual cases.
- Fourth, while any system is likely to make errors, an important dimension of administration performance involves the capacity to recognize and respond to errors. By tracking the problem-solving process, Hotline case data yield indicators of the corrective capacity and responsiveness of the public benefits system.

The Hotline data also have some limitations:

- First, the callers are a self-selected group of individuals seeking assistance with public benefit issues and thus cannot be generalized into the entire population of individuals seeking or receiving benefits.
- Second, the Hotline does not have data either on those clients who do not experience problems or on those clients who do not seek help from the Hotline. Thus this report cannot assess the extent to which problems are unreported or those areas in which the system is operating properly.
- Third, the analysis relies on caller problem reports. In many cases, the records show the results of investigations into these reports by Hotline staff. However, in other cases, there is limited or no independent evidence of the validity of claims. Thus the analysis focuses on difficulties accessing benefits from the perspective of individuals reporting problems.
- Fourth, the Hotline database incompletely documents individual cases and, in some instances, concludes with an advice, so that the outcome of the case is unknown. The identification of administrative problems is limited to what the record documents.

To address some of these data limitations, the analysis draws on other sources of evidence—specifically federal reviews of administrative practice in selected local offices—concerning public benefits administration in Cook County. As background for this project, analysts also reviewed the record of legal challenges brought in Illinois and other states and studies presenting snapshots of the system from various vantage points, including focus groups and onetime client surveys.²⁸ This background review was a basis for refining the analysis of administrative issues examined in this report.

²⁸The authors are grateful to Malay Majmundar for his research on these issues.

2. Detailed Hotline Demographic Data

All Callers

Age By Cohort

| | | Frequency | Percent |
|---------|-------------|-----------|---------|
| Valid | Under 18 | 5 | .4 |
| | 18–21 | 107 | 8.1 |
| | 22–30 | 303 | 23.1 |
| | 31–40 | 328 | 25.0 |
| | 41–50 | 286 | 21.8 |
| | 51–60 | 150 | 11.4 |
| | 61 and Over | 135 | 10.3 |
| | Total | 1,314 | 100.0 |
| Missing | | 39 | |
| Total | | 1,353 | |

Age Descriptive Statistics

| | | Age |
|-------------|---------|-------|
| N | Valid | 1,314 |
| | Missing | 39 |
| Mean | | 39.78 |
| Median | | 38.00 |
| Range | | 83 |
| Minimum | | 15 |
| Maximum | | 98 |
| Percentiles | 25 | 28.00 |
| | 50 | 38.00 |
| | 75 | 48.00 |

Ethnic Background

| | | Frequency | Percent |
|---------|------------------|-----------|---------|
| Valid | African American | 756 | 56.9 |
| | Hispano-American | 290 | 21.8 |
| | Caucasian | 236 | 17.8 |
| | Other | 46 | 3.5 |
| | Total | 1,328 | 100.0 |
| Missing | | 25 | |
| Total | | 1,353 | |

Gender

| | | Frequency | Percent |
|---------|--------|-----------|---------|
| Valid | Female | 1,123 | 84.1 |
| | Male | 212 | 15.9 |
| | Total | 1,335 | 100.0 |
| Missing | | 18 | |
| Total | | 1,353 | |

**Household Size
By Category**

| | | Frequency | Percent |
|---------|----------------------|-----------|---------|
| Valid | One Person | 342 | 27.2 |
| | 2-4 Persons | 671 | 53.3 |
| | 5-8 Persons | 235 | 18.7 |
| | 8 or More Persons | 11 | .9 |
| | Total | 1,259 | 100.0 |
| Missing | | 94 | |
| Total | | 1,353 | |

**Household Size
Descriptive Statistics**

| | | Household Size |
|-------------|---------|-------------------|
| N | Valid | 1,259 |
| | Missing | 94 |
| Mean | | 3.00 |
| Median | | 3.00 |
| Range | | 14 |
| Minimum | | 1 |
| Maximum | | 15 |
| Percentiles | 25 | 1.00 |
| | 50 | 3.00 |
| | 75 | 4.00 |

TANF Group

**Age
By Cohort**

| | | Frequency | Percent |
|---------|-------------|-----------|---------|
| Valid | Under 18 | 4 | .6 |
| | 18-21 | 68 | 11.0 |
| | 22-30 | 194 | 31.3 |
| | 31-40 | 182 | 29.4 |
| | 41-50 | 112 | 18.1 |
| | 51-60 | 40 | 6.5 |
| | 61 and Over | 19 | 3.1 |
| | Total | 619 | 100.0 |
| Missing | | 9 | |
| Total | | 628 | |

**Age
Descriptive Statistics**

| | | age |
|--------------------|---------|--------|
| N | Valid | 619 |
| | Missing | 9 |
| Mean | | 34.43 |
| Median | | 33.00 |
| Standard Deviation | | 11.790 |
| Range | | 73 |
| Minimum | | 15 |
| Maximum | | 88 |
| Percentiles | 25 | 25.00 |
| | 50 | 33.00 |
| | 75 | 41.00 |

Ethnic Background

| | | Frequency | Percent |
|-------|------------------|-----------|---------|
| Valid | African American | 438 | 70.8 |
| | Hispano-American | 94 | 15.2 |
| | Caucasian | 66 | 10.7 |
| | Other | 21 | 3.4 |
| | Total | 619 | 100.0 |
| | Missing | | 9 |
| Total | | 628 | |

Gender

| | | Frequency | Percent |
|---------|--------|-----------|---------|
| Valid | Female | 582 | 93.6 |
| | Male | 40 | 6.4 |
| | Total | 622 | 100.0 |
| Missing | | 6 | |
| Total | | 628 | |

**Household Size
By Category**

| | | Frequency | Percent |
|---------|----------------------|-----------|---------|
| Valid | One Person | 56 | 9.5 |
| | 2-4 Persons | 377 | 64.2 |
| | 5-8 Persons | 150 | 25.6 |
| | 8 or More Persons | 4 | .7 |
| | Total | 587 | 100.0 |
| Missing | | 41 | |
| Total | | 628 | |

**Household Size
Descriptive Statistics**

| | | Household Size |
|--------------------|---------|-------------------|
| N | Valid | 587 |
| | Missing | 41 |
| Mean | | 3.58 |
| Median | | 3.00 |
| Standard Deviation | | 1.789 |
| Range | | 14 |
| Minimum | | 1 |
| Maximum | | 15 |
| Percentiles | 25 | 2.00 |
| | 50 | 3.00 |
| | 75 | 5.00 |

Food Stamp Group

Age By Cohort

| | | Frequency | Percent |
|---------|-------------|-----------|---------|
| Valid | Under 18 | 1 | .2 |
| | 18–21 | 19 | 4.4 |
| | 22–30 | 83 | 19.2 |
| | 31–40 | 97 | 22.5 |
| | 41–50 | 117 | 27.1 |
| | 51–60 | 65 | 15.0 |
| | 61 and Over | 50 | 11.6 |
| | Total | 432 | 100.0 |
| Missing | | 8 | |
| Total | | 440 | |

Age Statistics

| | | Age |
|--------------------|---------|--------|
| N | Valid | 432 |
| | Missing | 8 |
| Mean | | 42.53 |
| Median | | 41.50 |
| Standard Deviation | | 14.407 |
| Range | | 68 |
| Minimum | | 17 |
| Maximum | | 85 |
| Percentiles | 25 | 31.00 |
| | 50 | 41.50 |
| | 75 | 52.00 |

Ethnic Background

| | | Frequency | Percent |
|---------|------------------|-----------|---------|
| Valid | African American | 236 | 54.4 |
| | Hispano-American | 106 | 24.4 |
| | Caucasian | 81 | 18.7 |
| | Other | 11 | 2.5 |
| | Total | 434 | 100.0 |
| Missing | | 6 | |
| Total | | 440 | |

Gender

| | | Frequency | Percent |
|---------|--------|-----------|---------|
| Valid | Female | 339 | 77.9 |
| | Male | 96 | 22.1 |
| | Total | 435 | 100.0 |
| Missing | | 5 | |
| Total | | 440 | |

**Household Size
By Category**

| | | Frequency | Percent |
|---------|----------------------|-----------|---------|
| Valid | One Person | 144 | 35.2 |
| | 2-4 Persons | 200 | 48.9 |
| | 5-8 Persons | 59 | 14.4 |
| | 8 or More Persons | 6 | 1.5 |
| | Total | 409 | 100.0 |
| Missing | | 31 | |
| Total | | 440 | |

**Household Size
Descriptive Statistics**

| | | Household Size |
|--------------------|---------|-------------------|
| N | Valid | 409 |
| | Missing | 31 |
| Mean | | 2.76 |
| Median | | 2.00 |
| Standard Deviation | | 1.928 |
| Range | | 12 |
| Minimum | | 1 |
| Maximum | | 13 |
| Percentiles | 25 | 1.00 |
| | 50 | 2.00 |
| | 75 | 4.00 |

Medicaid-Only Group

**Age
By Cohort**

| | | Frequency | Percent |
|---------|-------------|-----------|---------|
| Valid | 18–21 | 20 | 7.6 |
| | 22–30 | 26 | 9.9 |
| | 31–40 | 49 | 18.6 |
| | 41–50 | 57 | 21.7 |
| | 51–60 | 45 | 17.1 |
| | 61 and Over | 66 | 25.1 |
| | Total | 263 | 100.0 |
| Missing | | 22 | |
| Total | | 285 | |

**Age
Descriptive Statistics**

| | | Age |
|--------------------|---------|-------|
| N | Valid | 263 |
| | Missing | 22 |
| Mean | | 47.86 |
| Median | | 47.00 |
| Standard Deviation | | 17.57 |
| Range | | 80 |
| Minimum | | 18 |
| Maximum | | 98 |
| Percentiles | 25 | 34.00 |
| | 50 | 47.00 |
| | 75 | 61.00 |

Ethnic Background

| | | Frequency | Percent |
|---------|------------------|-----------|---------|
| Valid | African American | 82 | 29.8 |
| | Hispano-American | 90 | 32.7 |
| | Caucasian | 89 | 32.4 |
| | Other | 14 | 5.1 |
| | Total | 275 | 100.0 |
| Missing | | 10 | |
| Total | | 285 | |

Gender

| | | Frequency | Percent |
|---------|--------|-----------|---------|
| Valid | Female | 202 | 72.7 |
| | Male | 76 | 27.3 |
| | Total | 278 | 100.0 |
| Missing | | 7 | |
| Total | | 285 | |

**Household Size
By Category**

| | | Frequency | Percent |
|---------|----------------------|-----------|---------|
| Valid | One Person | 142 | 54.0 |
| | 2-4 Persons | 94 | 35.7 |
| | 5-8 Persons | 26 | 9.9 |
| | 8 or More Persons | 1 | .4 |
| | Total | 263 | 100.0 |
| Missing | | 22 | |
| Total | | 285 | |

**Household Size
Descriptive Statistics**

| | | Household Size |
|--------------------|---------|-------------------|
| N | Valid | 263 |
| | Missing | 22 |
| Mean | | 2.08 |
| Median | | 1.00 |
| Standard Deviation | | 1.524 |
| Range | | 8 |
| Minimum | | 1 |
| Maximum | | 9 |
| Percentiles | 25 | 1.00 |
| | 50 | 1.00 |
| | 75 | 3.00 |

3. Detailed Administrative Problem Reports: All Program Groups

Reported Problems (All Program Groups)

| | <i>Problems</i> | <i>Share of All Problems</i> |
|---|-----------------|------------------------------|
| General verification | 254 | 10.56% |
| Paperwork processing | 209 | 8.69% |
| No/inadequate information | 201 | 8.35% |
| Medical verification | 149 | 6.19% |
| Communication/delay | 143 | 5.94% |
| Treatment by caseworker | 141 | 5.86% |
| Verification of employment | 139 | 5.78% |
| Missed redetermination | 101 | 4.20% |
| Work activity | 101 | 4.20% |
| Other case-processing problem | 89 | 3.70% |
| Office transfer | 88 | 3.66% |
| Other policy misapplication | 87 | 3.62% |
| Lost paperwork | 80 | 3.33% |
| Call-in notification | 79 | 3.28% |
| Misinformation | 72 | 2.99% |
| Other work problem | 65 | 2.70% |
| Diversion/application discouraged | 60 | 2.49% |
| Change in employment status or hours worked | 56 | 2.33% |
| Incorrect income calculation | 50 | 2.08% |
| Pre-TANF work activities | 40 | 1.66% |
| Medical exemption | 37 | 1.54% |
| Exemption—child under 1 | 35 | 1.45% |
| Work absences | 23 | 0.96% |
| RSP unclear | 20 | 0.83% |
| Transportation to work | 14 | 0.58% |
| No record of job change | 13 | 0.54% |
| Child care exemption—other than infant | 12 | 0.50% |
| Education verification | 11 | 0.46% |
| Incorrect categorization | 7 | 0.29% |
| Job search support services | 6 | 0.25% |
| Schedule conflict with work requirement | 6 | 0.25% |
| RSP disputed | 4 | 0.17% |
| Problem with employer | 4 | 0.17% |
| Conflict with call-in request | 4 | 0.17% |
| Privacy violation | 3 | 0.12% |
| Job search conflict | 3 | 0.12% |

4. Detailed Administrative Problem Reports: By Program Group

TANF Group

| | <i>Problems</i> | <i>Share of All Problems</i> |
|---|-----------------|------------------------------|
| General verification issue | 115 | 8.54% |
| Work activity | 98 | 7.28% |
| Paperwork processing | 90 | 6.68% |
| Work verification | 89 | 6.61% |
| Treatment by caseworker | 86 | 6.38% |
| Medical verification | 82 | 6.09% |
| No/inadequate information | 60 | 4.45% |
| Communication/delay | 56 | 4.16% |
| Missed redetermination | 52 | 3.86% |
| Misinformation | 51 | 3.79% |
| Other work problem | 50 | 3.71% |
| Diversion/application discouraged | 47 | 3.49% |
| Other policy misapplication | 43 | 3.19% |
| Office transfer | 42 | 3.12% |
| Lost paperwork | 41 | 3.04% |
| Call-in notification | 41 | 3.04% |
| Pre-TANF work activities | 39 | 2.90% |
| Other case-processing issue | 36 | 2.67% |
| Exemption—child under 1 | 35 | 2.60% |
| Change in job status/hours worked | 34 | 2.52% |
| Medical exemption | 30 | 2.23% |
| Work absences | 21 | 1.56% |
| RSP unclear | 18 | 1.34% |
| Incorrect income calculation | 17 | 1.26% |
| Child care exemption—other than infant | 12 | 0.89% |
| Transportation to work | 11 | 0.82% |
| No record of job change | 10 | 0.74% |
| Education verification | 9 | 0.67% |
| Schedule conflict with work requirement | 6 | 0.45% |
| Job search support services | 5 | 0.37% |
| Conflict with call-in request | 4 | 0.30% |
| Incorrect categorization | 4 | 0.30% |
| RSP disputed | 4 | 0.30% |
| Problem with employer | 4 | 0.30% |
| Privacy violation | 3 | 0.22% |
| Job search conflict | 2 | 0.15% |

Food Stamp Group

| | <i>Problems</i> | <i>Share of All Problems</i> |
|-----------------------------------|-----------------|------------------------------|
| General verification issue | 99 | 13.11% |
| Paperwork processing | 88 | 11.66% |
| No/inadequate information | 72 | 9.54% |
| Communication/delay | 67 | 8.87% |
| Work verification | 50 | 6.62% |
| Missed redetermination | 46 | 6.09% |
| Treatment by caseworker | 43 | 5.70% |
| Other case-processing issue | 40 | 5.30% |
| Lost paperwork | 35 | 4.64% |
| Office transfer | 34 | 4.50% |
| Other policy misapplication | 29 | 3.84% |
| Call-in notification | 27 | 3.58% |
| Incorrect income calculation | 24 | 3.18% |
| Change in job status/hours worked | 22 | 2.91% |
| Medical verification | 19 | 2.52% |
| Other work problem | 15 | 1.99% |
| Misinformation | 12 | 1.59% |
| Diversion/application discouraged | 8 | 1.10% |
| Medical exemption | 7 | 0.93% |
| Work activity | 3 | 0.40% |
| Transportation to work | 3 | 0.40% |
| No record of job change | 3 | 0.40% |
| Education verification | 2 | 0.26% |
| RSP disputed | 2 | 0.26% |
| Work absences | 2 | 0.26% |
| Pre-TANF work activities | 1 | 0.13% |
| Job search support services | 1 | 0.13% |
| Job search conflict | 1 | 0.13% |

Medicaid-Only Group

| | <i>Problems</i> | <i>Share of All Problems</i> |
|-----------------------------------|-----------------|------------------------------|
| No/inadequate information | 69 | 22.70% |
| Medical verification | 48 | 15.79% |
| General verification issue | 40 | 13.16% |
| Paperwork processing | 31 | 10.20% |
| Communication/delay | 20 | 6.58% |
| Other policy misapplication | 15 | 4.93% |
| Other case-processing issue | 13 | 4.28% |
| Treatment by caseworker | 12 | 3.95% |
| Office transfer | 12 | 3.95% |
| Call-in notification | 11 | 3.62% |
| Misinformation | 9 | 2.96% |
| Incorrect income calculation | 9 | 2.96% |
| Diversion/application discouraged | 5 | 1.64% |
| Lost paperwork | 4 | 1.32% |
| Missed redetermination | 3 | 0.99% |
| Incorrect categorization | 3 | 0.99% |

5. Detailed Administrative Problem Reports: Applicants and Recipients

Applicant Problems as a Share of All Problems by Program Group

| Program Group | Applicant-Only Calls | Recipient-Only Calls | |
|----------------------|-----------------------------|-----------------------------|--|
| All groups | 561 problems | 1,571 | Applicant problems represent 26% of reports from all groups ²⁹ |
| TANF group | 374 | 789 | Applicant problems represent 32% of TANF group reports |
| Food Stamp group | 126 | 550 | Applicant problems represent 23% of Food Stamp group reports |
| Medicaid-only group | 61 | 232 | Applicant problems represent 21% of Medicaid-only group reports |

²⁹All calculations in this table exclude the 274 problems referred to in the 123 calls which involved applicant *and* recipient problems.

Applicant Problems by Program Group

All Program Groups

| Applicant Problems | Frequency | % of Problems for Program Group |
|--|------------------|--|
| General verification issue | 72 | 12.83% |
| Communication/delay | 47 | 8.38% |
| Medical verification | 45 | 8.02% |
| No/Inadequate information | 39 | 6.95% |
| Pre-TANF work activities | 38 | 6.77% |
| Treatment by caseworker | 37 | 6.60% |
| Paperwork processing | 36 | 6.42% |
| Diversion/application discouraged | 35 | 6.24% |
| Misinformation | 26 | 4.63% |
| Other policy misapplication | 26 | 4.63% |
| Verification of employment | 25 | 4.46% |
| Office transfer | 20 | 3.57% |
| Other case-processing issue | 19 | 3.39% |
| Exemption—child under 1 | 16 | 2.85% |
| Other work problem | 16 | 2.85% |
| Lost paperwork | 13 | 2.32% |
| Medical exemption | 11 | 1.96% |
| Change in job status or hours worked | 9 | 1.60% |
| Call-in notification | 6 | 1.07% |
| Incorrect income calculation | 6 | 1.07% |
| Missed redetermination | 4 | 0.71% |
| Child care exemption—other than infant | 4 | 0.71% |
| RSP disputed | 2 | 0.36% |
| Job search conflict | 2 | 0.36% |
| Privacy violation | 1 | 0.18% |
| Education verification | 1 | 0.18% |
| No record of job change | 1 | 0.18% |
| Conflict with call-in request | 1 | 0.18% |
| RSP unclear | 1 | 0.18% |
| Job search support services | 1 | 0.18% |
| Transportation to work | 1 | 0.18% |

TANF Group

| Applicant Problems | Frequency | % of Problems for Program Group |
|--|------------------|--|
| General verification issue | 40 | 10.70% |
| Pre-TANF work activities | 37 | 9.89% |
| Diversion/application discouraged | 28 | 7.49% |
| Medical verification | 25 | 6.68% |
| Paperwork processing | 24 | 6.42% |
| Treatment by caseworker | 23 | 6.15% |
| Communication/delay | 22 | 5.88% |
| Misinformation | 21 | 5.61% |
| No/Inadequate information | 19 | 5.08% |
| Other policy misapplication | 19 | 5.08% |
| Verification of employment | 18 | 4.81% |
| Exemption—child under 1 | 16 | 4.28% |
| Lost paperwork | 12 | 3.21% |
| Other work problem | 12 | 3.21% |
| Office transfer | 10 | 2.67% |
| Other case-processing issue | 10 | 2.67% |
| Medical exemption | 8 | 2.14% |
| Change in Job status or hours worked | 7 | 1.87% |
| Call-in notification | 4 | 1.07% |
| Child care exemption—other than infant | 4 | 1.07% |
| Incorrect income calculation | 3 | 0.80% |
| Missed redetermination | 2 | 0.53% |
| RSP disputed | 2 | 0.53% |
| Job search conflict | 2 | 0.53% |
| Privacy violation | 1 | 0.27% |
| Conflict with call-in request | 1 | 0.27% |
| RSP unclear | 1 | 0.27% |
| Job search support services | 1 | 0.27% |
| Transportation to work | 1 | 0.27% |
| No record of job change | 1 | 0.27% |

Food Stamp Group

| Applicant Problems | Frequency | % of Problems for Program Group |
|--------------------------------------|------------------|--|
| General verification issue | 22 | 17.46% |
| Communication/delay | 20 | 15.87% |
| No/inadequate information | 11 | 8.73% |
| Treatment by caseworker | 11 | 8.73% |
| Other case-processing issue | 9 | 7.14% |
| Other policy misapplication | 7 | 5.56% |
| Verification of employment | 7 | 5.56% |
| Paperwork processing | 6 | 4.76% |
| Office transfer | 5 | 3.97% |
| Medical verification | 5 | 3.97% |
| Other work problem | 4 | 3.17% |
| Misinformation | 3 | 2.38% |
| Diversion/application discouraged | 3 | 2.38% |
| Medical exemption | 3 | 2.38% |
| Missed redetermination | 2 | 1.59% |
| Incorrect income calculation | 2 | 1.59% |
| Change in job status or hours worked | 2 | 1.59% |
| Lost paperwork | 1 | 0.79% |
| Call-in notification | 1 | 0.79% |
| Education verification | 1 | 0.79% |
| Pre-TANF work activities | 1 | 0.79% |

Medicaid-Only Group

| Applicant Problems | Frequency | % of Problems for Program Group |
|-----------------------------------|------------------|--|
| Medical verification | 15 | 24.59% |
| General verification issue | 10 | 16.39% |
| No/inadequate information | 9 | 14.75% |
| Paperwork processing | 6 | 9.84% |
| Communication/delay | 5 | 8.20% |
| Office transfer | 5 | 8.20% |
| Diversion/application discouraged | 4 | 6.56% |
| Treatment by caseworker | 3 | 4.92% |
| Misinformation | 2 | 3.28% |
| Call-in notification | 1 | 1.64% |
| Incorrect income calculation | 1 | 1.64% |

Recipient Problems by Program Group

All Program Groups

| Recipient Problems | Frequency | % of Problems for Program Group |
|---|------------------|--|
| General verification issue | 152 | 9.68% |
| No/inadequate information | 151 | 9.61% |
| Paperwork processing | 150 | 9.55% |
| Verification of employment | 104 | 6.62% |
| Work activity | 89 | 5.67% |
| Communication/delay | 87 | 5.54% |
| Medical verification | 84 | 5.35% |
| Treatment by caseworker | 80 | 5.09% |
| Missed redetermination | 77 | 4.90% |
| Other case-processing issue | 64 | 4.07% |
| Call-in notification | 64 | 4.07% |
| Office transfer | 57 | 3.63% |
| Lost paperwork | 53 | 3.37% |
| Other policy misapplication | 52 | 3.31% |
| Other work problem | 43 | 2.74% |
| Incorrect income calculation | 40 | 2.55% |
| Change in job status or hours worked | 40 | 2.55% |
| Misinformation | 37 | 2.36% |
| Work absences | 19 | 1.21% |
| Medical exemption | 19 | 1.21% |
| Exemption—child under 1 | 16 | 1.02% |
| RSP unclear | 15 | 0.95% |
| Diversion/application discouraged | 14 | 0.90% |
| No record of job change | 11 | 0.70% |
| Transportation to work | 10 | 0.64% |
| Child care exemption—other than infant | 8 | 0.51% |
| Education verification | 7 | 0.45% |
| Incorrect categorization | 6 | 0.38% |
| Schedule conflict with work requirement | 6 | 0.38% |
| Job search support services | 4 | 0.25% |
| Problem with employer | 3 | 0.19% |
| Privacy violation | 2 | 0.13% |
| Conflict with call-in request | 2 | 0.13% |
| Pre-TANF work activities | 2 | 0.13% |
| RSP disputed | 2 | 0.13% |
| Job search conflict | 1 | 0.06% |

TANF Group

| Recipient Problems | Frequency | % of Problems for Program Group |
|---|------------------|--|
| Work activity | 87 | 11.03% |
| Verification of employment | 63 | 7.98% |
| General verification issue | 56 | 7.10% |
| Paperwork processing | 53 | 6.72% |
| Treatment by caseworker | 47 | 5.96% |
| Medical verification | 43 | 5.45% |
| Missed redetermination | 39 | 4.94% |
| No/inadequate information | 34 | 4.31% |
| Other work problem | 33 | 4.18% |
| Call-in notification | 32 | 4.06% |
| Communication/delay | 29 | 3.68% |
| Office transfer | 27 | 3.42% |
| Misinformation | 23 | 2.92% |
| Other case-processing issue | 23 | 2.92% |
| Change in job status or hours worked | 23 | 2.92% |
| Lost paperwork | 21 | 2.66% |
| Other policy misapplication | 19 | 2.41% |
| Work absences | 18 | 2.28% |
| Exemption—child under 1 | 16 | 2.03% |
| Medical exemption | 15 | 1.90% |
| RSP unclear | 14 | 1.77% |
| Incorrect income calculation | 12 | 1.52% |
| Diversion/application discouraged | 9 | 1.14% |
| Child care exemption—other than infant | 8 | 1.01% |
| No record of job change | 8 | 1.01% |
| Transportation to work | 7 | 0.89% |
| Education verification | 6 | 0.76% |
| Schedule conflict with work requirement | 6 | 0.76% |
| Job search support services | 4 | 0.51% |
| Incorrect categorization | 3 | 0.38% |
| Problem with employer | 3 | 0.38% |
| Privacy violation | 2 | 0.25% |
| Conflict with call-in request | 2 | 0.25% |
| Pre-TANF work activities | 2 | 0.25% |
| RSP disputed | 2 | 0.25% |

Food Stamp Group

| Recipient Problems | Frequency | % of Problems for Program Group |
|--------------------------------------|------------------|--|
| Paperwork processing | 72 | 13.09% |
| General verification issue | 70 | 12.73% |
| No/inadequate information | 57 | 10.36% |
| Communication/delay | 43 | 7.82% |
| Verification of employment | 41 | 7.45% |
| Missed redetermination | 35 | 6.36% |
| Lost paperwork | 28 | 5.09% |
| Other case-processing issue | 28 | 5.09% |
| Treatment by caseworker | 25 | 4.55% |
| Office transfer | 23 | 4.18% |
| Call-in notification | 22 | 4.00% |
| Incorrect income calculation | 21 | 3.82% |
| Other policy misapplication | 20 | 3.64% |
| Change in job status or hours worked | 17 | 3.09% |
| Medical verification | 10 | 1.82% |
| Other work problem | 10 | 1.82% |
| Misinformation | 8 | 1.45% |
| Medical exemption | 4 | 0.73% |
| Diversion/application discouraged | 4 | 0.73% |
| Transportation to work | 3 | 0.55% |
| No record of job change | 3 | 0.55% |
| Work activity | 2 | 0.36% |
| Education verification | 1 | 0.18% |
| RSP unclear | 1 | 0.18% |
| Job search conflict | 1 | 0.18% |
| Work absences | 1 | 0.18% |

Medicaid-Only Group

| Recipient Problems | Frequency | % of Problems for Program Group |
|-----------------------------------|------------------|--|
| No/inadequate information | 60 | 25.86% |
| Medical verification | 31 | 13.36% |
| General verification issue | 26 | 11.21% |
| Paperwork processing | 25 | 10.78% |
| Communication/delay | 15 | 6.47% |
| Other policy misapplication | 13 | 5.60% |
| Other case-processing issue | 13 | 5.60% |
| Call-in notification | 10 | 4.31% |
| Treatment by caseworker | 8 | 3.45% |
| Office transfer | 7 | 3.02% |
| Incorrect income calculation | 7 | 3.02% |
| Misinformation | 6 | 2.59% |
| Lost paperwork | 4 | 1.72% |
| Missed redetermination | 3 | 1.29% |
| Incorrect categorization | 3 | 1.29% |
| Diversion/application discouraged | 1 | 0.43% |

6. Modeling Variation: Statistical Analysis and Methods

The Objective

The aim of the analysis was to explore the relationship between the Temporary Assistance for Needy Families (TANF) caseload decline experienced by local Illinois Department of Human Services (IDHS) offices in Chicago and reports of administrative barriers to the access and retention of TANF.

The Data

Data were drawn from two sources, the Public Benefits Hotline database and Illinois Department of Human Services Monthly TANF Historical Data Updates (prepared by IDHS Bureau of Performance and Outcomes Measurement). The database consisted of the number of TANF group calls by IDHS local office for the study period. The historical updates yielded information regarding other salient office characteristics, including the size of the TANF caseload for which each office was responsible and the office's location.

The Variables

The dependent variable ("per call") was operationalized as the share of all Hotline TANF calls with reference to a particular IDHS office.

Independent variables included:

1. "Per case" = the share of the overall Cook County caseload handled by each IDHS office over the study period
(An average value was calculated for each office, using four data points, one from each quarter of the study period. This value was then divided by the sum of the average values for all offices to come up with a percentage of all TANF cases.)
2. "Per dec" = the relative caseload decline experienced by each IDHS office
(Operationalized by differencing the first and last caseload data points for each office and then dividing this value by that of the first data point, to express decline as a percentage of initial caseload.)
3. "Sub reg" = a nominal variable with a value of 1 if local office was located on the North Side or the West Side, 0 if on the South Side

Figures A.1 and A.2 present the caseload/call values and descriptives for the variables.

FIGURE A.1. LOCAL OFFICE DATA

| Office | Midquarter TANF Caseload* | | | | Average Caseload | Share of Total Caseload | Caseload Decline | Calls*** | Share of All Calls |
|---------------|---------------------------|------------------|------------------|-----------------|------------------|-------------------------|------------------|----------|--------------------|
| | Qtr 1 (Sept 00) | Qtr 2 (Jan 01)** | Qtr 3 (March 01) | Qtr 4 (June 01) | | | | | |
| Western | 1829 | 1591 | 1519 | 1373 | 1578 | 0.0459 | 0.2493 | 38 | 0.0625 |
| Michigan | 1601 | 1406 | 1258 | 1093 | 1339.5 | 0.0390 | 0.3173 | 31 | 0.0510 |
| Oakland | 1930 | 1703 | 1665 | 1502 | 1700 | 0.0495 | 0.2218 | 19 | 0.0313 |
| Uptown | 389 | 325 | 301 | 285 | 325 | 0.0095 | 0.2674 | 11 | 0.0181 |
| Park Manor | 2061 | 1924 | 1867 | 1748 | 1900 | 0.0553 | 0.1519 | 16 | 0.0263 |
| Kenwood | 467 | 420 | 409 | 344 | 410 | 0.0119 | 0.2634 | 8 | 0.0132 |
| Ashland | 1123 | 1029 | 1003 | 880 | 1008.75 | 0.0294 | 0.2164 | 11 | 0.0181 |
| Englewood | 3743 | 3248 | 2959 | 2565 | 3128.75 | 0.0911 | 0.3147 | 70 | 0.1151 |
| Woodlawn | 2066 | 1927 | 1769 | 1819 | 1895.25 | 0.0552 | 0.1196 | 22 | 0.0362 |
| Calumet | 2279 | 2036 | 1926 | 1679 | 1980 | 0.0576 | 0.2633 | 22 | 0.0362 |
| Garfield | 1605 | 1414 | 1345 | 1166 | 1382.5 | 0.0402 | 0.2735 | 38 | 0.0625 |
| Wicker Park | 595 | 447 | 372 | 318 | 433 | 0.0126 | 0.4655 | 20 | 0.0329 |
| Southeast | 3222 | 2897 | 2811 | 2473 | 2850.75 | 0.0830 | 0.2325 | 42 | 0.0691 |
| South Sub | 3122 | 2792 | 2610 | 2382 | 2726.5 | 0.0794 | 0.2370 | 11 | 0.0181 |
| Lower North | 774 | 549 | 473 | 337 | 533.25 | 0.0155 | 0.5646 | 20 | 0.0329 |
| West Sub | 1139 | 1062 | 804 | 668 | 918.25 | 0.0267 | 0.4135 | 22 | 0.0362 |
| Humboldt Park | 780 | 536 | 453 | 327 | 524 | 0.0153 | 0.5808 | 25 | 0.0411 |
| Auburn Park | 3336 | 3070 | 2976 | 2557 | 2984.75 | 0.0869 | 0.2335 | 26 | 0.0428 |
| Northern | 639 | 511 | 420 | 326 | 474 | 0.0138 | 0.4898 | 35 | 0.0576 |
| Austin | 1675 | 1531 | 1452 | 1361 | 1504.75 | 0.0438 | 0.1875 | 34 | 0.0559 |
| Pershing | 1313 | 1104 | 1014 | 941 | 1093 | 0.0318 | 0.2833 | 10 | 0.0164 |
| Roseland | 1845 | 1698 | 1547 | 1301 | 1597.75 | 0.0465 | 0.2949 | 26 | 0.0428 |
| Northwest | 2220 | 1733 | 1557 | 1270 | 1695 | 0.0493 | 0.4279 | 51 | 0.0839 |

*Total caseload excluding child-only and pregnancy cases.

**Data for December 2000 not available.

***Cook County TANF program group Hotline calls for which office name is supplied by caller.

Denominator used to calculate share of total caseload is sum of office averages for all Cook County offices.

FIGURE A.2. REGRESSION VARIABLES: DESCRIPTIVE STATISTICS

| Variable | Observations | Mean | Standard Deviation | Minimum | Maximum |
|----------|--------------|----------|--------------------|---------|---------|
| Per call | 23 | .043487 | .0242795 | .0132 | .1151 |
| Per case | 23 | .0430087 | .02502 | .0095 | .0911 |
| Per dec | 23 | .3073652 | .1245532 | .1196 | .5808 |

The Model

The analysis utilized ordinary least squares regression. Robust standard errors were employed to account for heteroskedasticity (of particular concern in light of the small sample size). Exploratory analysis revealed that the relationships between all pairs of variables were linear. A substantial negative correlation (-.51) was found between two of the regressors, per case and per dec, but it was not sufficient to warrant concern over multicollinearity.

A bivariate model, regressing per call on per case, revealed a statistically significant association between the two variables at the 10 percent level. The greater an office’s caseload, the likelier the Hotline was to have received a call describing administrative difficulties at that office. See Figure A.3 for coefficients and variance explained for all models.

As the majority of variance in the dependent variable was still unexplained, per dec was added to the model. This multivariate model had markedly greater explanatory power. Adding the extent of caseload decline as a regressor increased the adjusted R² by 14 percentage points, which translates into an increase of 67 percent in variance explained.

FIGURE A.3. MODEL COEFFICIENTS AND EXPLAINED VARIANCE

| | Explanatory Variables: Standardized /Unstandardized Coefficients (P-Values) | | | Adjusted R ² |
|---------|--|---|--|-------------------------|
| | Share of Cook County TANF Caseload (per case) | % TANF Caseload Decline (per dec) | North Side/South Side Location (sub reg) | |
| Model 1 | .4557/.4422 (.09) | | | .21 |
| Model 2 | .7275/.7060 (.02) | .5229/.1019 (.01) | | .35 |
| Model 3 | .7293/.7077 (.01) | .5039/.0982 (.01) | -.1669/-.0079 (.34) | .35 |

Though an improvement, this model, with call volume explained in terms of caseload size and extent of caseload decline, still left more than half of the variance in the dependent variable unexplained. At this point, sub reg was added to the model in the hopes of improving its explanatory power. It was a means of testing whether unobserved regional differences (e.g., demographic, social, or economic differences) might influence the relative likelihood of calls reporting administrative difficulty. The geographic division applied in this analysis follows the regions used by IDHS in its administrative reports. With a p-value of .34, office location (North Side or West Side versus South Side) was ultimately rejected as a predictor of call volume.

Given the available data, the second model was chosen as the best fitting. However, to test further for unobserved differences, a fourth model was tested; this included an interaction between per dec and sub reg. By allowing the effect of caseload reduction to vary between the North Side/West Side and South Side of the city, this model was a means of addressing the concern that the apparent relationship between caseload decline and call volume could be the function of other differences among offices over clientele and location. The coefficient for the interaction proved to be statistically insignificant ($\beta = -.4514$, $p = .316$). This finding is evidence that the observed relationship between the extent of caseload decline and reports of administrative barriers is nonspurious.

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To download a copy of **Accessing the Safety Net:
Administrative Barriers to Public Benefits in Metropolitan Chicago,**
the Research Brief and the full report, visit www.povertylaw.org or www.lafchicago.org.