



The District's Dime

Going Beyond the Budget Book

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Making the Promise of a Strong Social Safety Net a Reality

By Wes Rivers

One year ago, the District began the formidable task of implementing the Affordable Care Act and modernizing the computer system used to help residents apply for and manage public benefits like Medicaid, food stamps (SNAP), and cash assistance (TANF). However, while these reforms aim to make it easier to get benefits and services, the [transition and implementation](#) have created barriers for many low-income residents, resulting in long delays or even inappropriate cancellation of benefits they need to meet their most basic needs.

A new [report](#) from DC Fiscal Policy Institute and Legal Aid Society of the District of Columbia, documents many of the common problems and offers recommendations to help ensure that families get the benefits they are eligible for in a timely way.

Ms. Lewis, [*name changed for anonymity*] a mother of two who applied for Medicaid for her children in February 2014, offers a real-life example:

After having problems with the website, Ms. Lewis sent these documents through email and fax several times, but received no response after several weeks. During that time, her son was injured and required emergency medical attention. Ms. Lewis was told she would be billed for treatment because she had no Medicaid coverage. Because she could not afford that, Ms. Lewis and her son left the emergency room without being treated. Later, it was learned that Ms. Lewis' Medicaid application had been denied without notifying her. None of Ms. Lewis's many faxes or emails had been successfully processed. Now, Ms. Lewis must reapply all over again, and her children remain uninsured.

The Affordable Care Act has required a comprehensive overhaul of public health insurance programs and development of a new information technology (IT) system for all public benefits. The agencies involved have devoted a lot of staff, time, and resources to these complex efforts, helping the District to perform well relative to other states. However, the sheer magnitude of the task, along with glitches in the new IT platform, have put tremendous strain on existing staff. This has led to clients experiencing:

- Long wait times at service centers;
- Inaccurate or incomplete information from agency staff;
- Violation of the “No Wrong Door” principle that should allow residents to apply for benefits, no matter how or where they complete an application; and
- Lost application and recertification documents.

Our new report, “Closing the Gap” recommends that policy makers and the agencies involved with health reform — the Department of Health Care Finance, the Department of Human Services, and DC Health Benefit Exchange Authority — take steps to address the problems faced by consumers, including:

- Hire more staff, deploy and train staff more effectively, and hold staff accountable for providing quality service to consumers;
- Improve and formalize procedures for handling mail and faxes, including the provision of receipts and other confirmation; and
- Continue to expand capacity at service centers and find ways to conduct business outside of service centers.

To read the entire report, click [here](#).