The Michigan Benefits Access Initiative

Findings Report
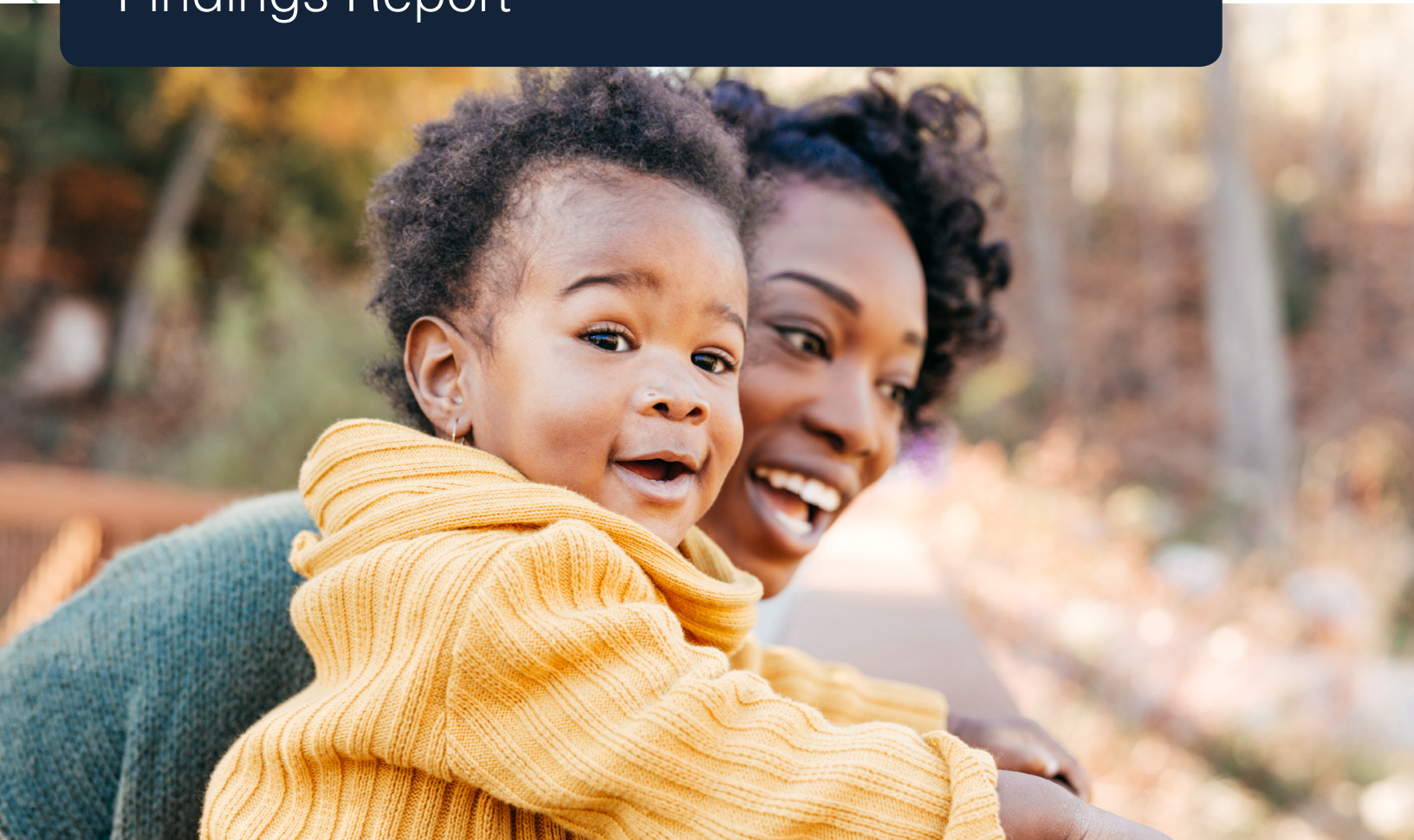
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Overview

Introduction

The temperature outside hit 90 degrees during the summer of 2008 as hundreds of people lined up outside benefit offices across Michigan, waiting to apply for food stamps and other benefits to carry their families through tough times. Many of the hot, frustrated people in the crowd were attempting to navigate the complex system of accessing public benefits for the first time, only to be met with wait times of over eight hours, and sometimes to be told that the offices were closed when they finally reached the front of the line. There were reports of people fainting and getting into fights. In some communities, local sheriffs were called in to keep the peace.

The Great Recession was about to grip the United States, yet in Michigan, economic trouble had been brewing for a long time. From 2000 to 2009, Michigan lost 805,000 jobs overall, including 219,000 in the automotive industry.[1] Dubbed Michigan's "Lost Decade," the state experienced unprecedented and overwhelming demand on its social services system even before Michigan-based automakers General Motors and Chrysler received a combined $80.7 billion government bailout to remain afloat in December of 2008. GM subsequently filed for bankruptcy and closed 14 factories in the state in June 2009.[2]
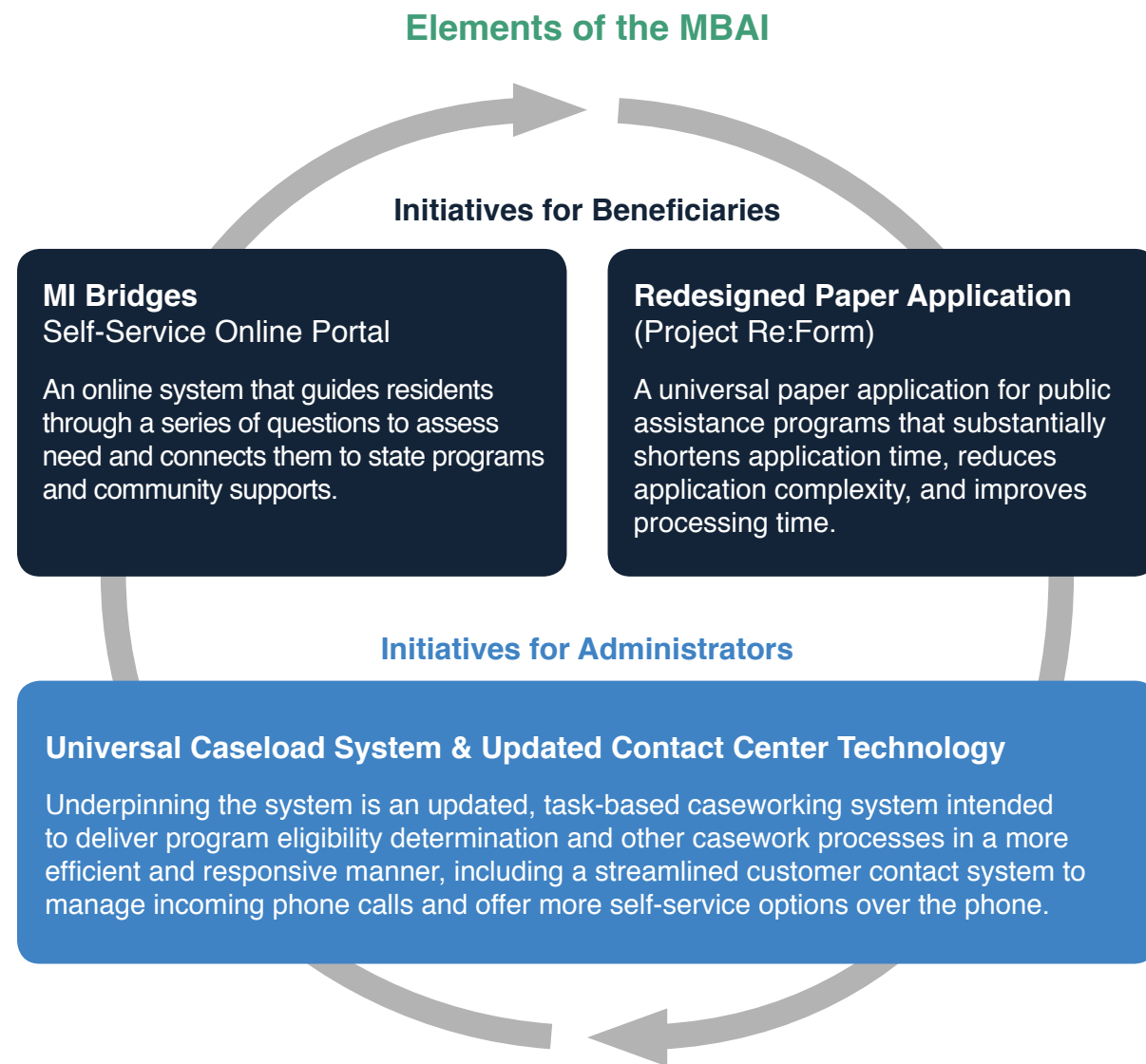
By 2008, 1.8 million people required public assistance, up from 1.6 million two years prior.[3] Yet, the Michigan Department of Health and Human Services (MDHHS), the department responsible for administering a range of healthcare, nutrition, income, child care, and emergency relief services, had almost $1 billion of allocated, but unclaimed, benefit funds each year.[4]

Despite there being long lines at MDHHS offices and overwhelming need in communities across the state, the department estimated as many as 75% of Michiganders seeking benefits were denied due to barriers in the complex application process. The paper form, known as Form 1171, was 42 pages, 18,409 words, and 1,204 questions—the longest in the country.[5] Despite taking hours to fill in, the state's unwieldy application form was only 72% complete on average when it was submitted, which meant case workers often had to spend time reaching out to applicants for additional info or outright denying the application.[6]

The stress on the system had reached a breaking point and something had to change. The state's Democratic Governor Jennifer Granholm vowed to come up with an improved online process for determining eligibility for benefits. Over the next decade, a series of initiatives were developed to support Michiganers in accessing and administering social services.
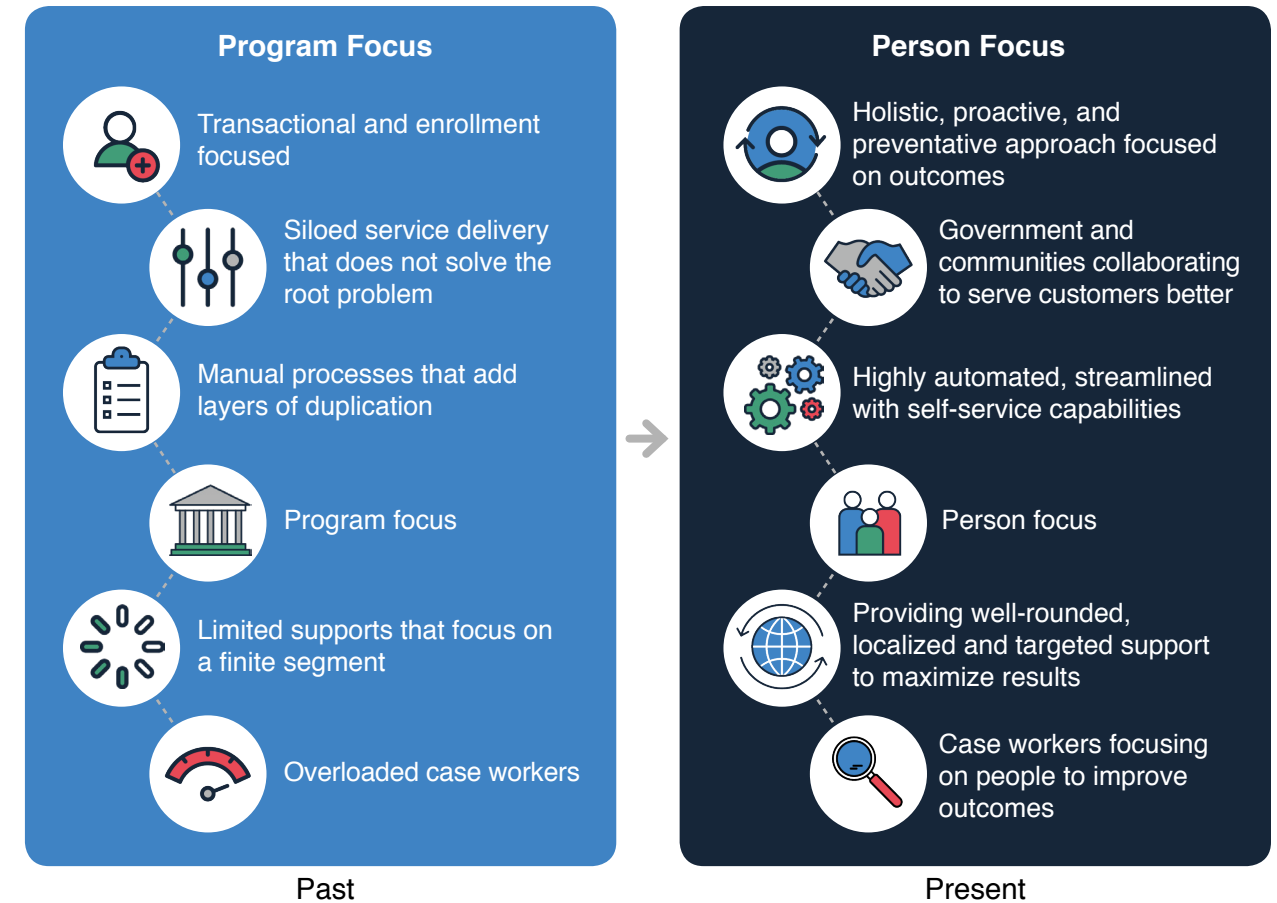
The Michigan Benefits Access Initiative (MBAI) – – – – – – – – – – – – –

In response to the crisis, government, philanthropy, and the private sector came together to enact the Michigan Benefits Access Initiative (MBAI), a public/private, multi-project initiative created to streamline the benefits application process, increase online access to DHS programs, and coordinate local support services.

Elements of the MBAI

Initiatives for Beneficiaries

MI Bridges
Self-Service Online Portal

An online system that guides residents through a series of questions to assess need and connects them to state programs and community supports.

Redesigned Paper Application
(Project Re:Form)

A universal paper application for public assistance programs that substantially shortens application time, reduces application complexity, and improves processing time.

Initiatives for Administrators

Universal Caseload System & Updated Contact Center Technology

Underpinning the system is an updated, task-based caseworking system intended to deliver program eligibility determination and other casework processes in a more efficient and responsive manner, including a streamlined customer contact system to manage incoming phone calls and offer more self-service options over the phone.

This report, prepared by VIVA Strategy & Communication on behalf of the Heising-Simons Foundation in July 2019, reviews the work Michigan has done to achieve these goals in the past eleven years, shares insights from systems builders, and case studies of families who have interacted with the integrated service delivery system.

Michigan Benefits Access Initiative (MBAI) Theory of Change – – – – – – – – – –

Program Focus

- Transactional and enrollment focused
- Siloed service delivery that does not solve the root problem
- Manual processes that add layers of duplication
- Program focus
- Limited supports that focus on a finite segment
- Overloaded case workers

Past

Person Focus

- Holistic, proactive, and preventative approach focused on outcomes
- Government and communities collaborating to serve customers better
- Highly automated, streamlined with self-service capabilities
- Person focus
- Providing well-rounded, localized and targeted support to maximize results
- Case workers focusing on people to improve outcomes

Present

Key Partners and Roles –

Michigan Department of Health and Human Services (MDHHS)
The government agency responsible for administering benefits such as food and housing assistance, child development and care, Medicaid, and other critical services.

Michigan Department of Education (MDE)
The MDE Office of Child Development and Care supports low-income working families by providing access to affordable, high quality early care and afterschool programs. To achieve this end, the office supports Great Start to Quality, an effort designed to assess and improve the level of quality across the Michigan's early learning and care settings.

The Office of the Foundation Liaison (OFL) at the Council of Michigan Foundations
A non-partisan office housed in state government with the mission to broker strategic partnerships between the State and the philanthropic sector. OFL partnered with the state to bring private philanthropic investment to finance a portion of the work to streamline eligibility, redesign the paper application, and build the MI Bridges platform.

Michigan Association of United Ways
The administrator of the Michigan 2-1-1 service that connects Michigan residents with community based organizations (CBOs), health and human services agencies, and other resources. The Michigan 2-1-1 system is integrated into MI Bridges via an API.

Deloitte
A consulting firm hired by the Michigan Department of Technology, Management, and Budget to develop the MI Bridges online portal.

Civilla
A Detroit-based social impact design studio that took a human-centric approach to developing a new paper application for services.

Funding the Michigan Benefits Access Initiative – – – – – – – – – – – – – – – –

In 2008, the development of MI Bridges required funding and collaboration between the Michigan Department of Human Services, the Department of Technology, Management and Budget, the Department of Community Health, and the State Auditor's office. The state invested almost $200 million to create the original MI Bridges.[25]

During this time, the OFL served as the convener for funders interested in making supplemental investments to support the MBAI. The philanthropic community was able to make up the shortfall so the project could fulfill its potential. Ali Webb of the W.K. Kellogg Foundation described, "We provided resources for the last mile to get things done. We made up the gap and provided those last millions of dollars that would allow this to go forward."[26]

In 2011, shortly after the passage of the Affordable Care Act, the Centers for Medicaid and Medicare Services (CMS) authorized an enhancement to the Federal Medicaid matching rate for eligibility and enrollment systems modernization—increasing the level of Federal support from 50% to 90% for new systems builds and from 50% to 75% for maintenance and operations. The Office of Management and Budget (OMB) also offered a waiver of OMB Circular A87 cost allocation rules. This allowed states to invest in integrated eligibility systems for health and human services programs.[27]

Under the A87 waiver, for every $1 Michigan contributed to the development of MI Bridges, CMS contributed $9. These funds were called down in 2017 to further develop the MI Bridges platform with upgrades including the improved user interface and multi-lingual translation; integration with the 2-1-1 and Great Start to Quality child care databases; CBO dashboard; and proactive referral functionality.

The federal A87 waiver sunset in December 2018, meaning that federal funding returned to pre-2011 rates, and the state must resume financing 50% of the system. Fortunately for Michigan, the updates to MI Bridges were complete and the ongoing maintenance costs are much lower.

Project Re:Form, the process the state undertook with design firm Civilla, cost $830,000.[28]

MI Bridges Upgrade Funding	
2017: Redevelopment of MI Bridges **$15 million**	$500,000 Grant from Michigan Health Endowment Fund
	$1,000,000 from MDHHS General Fund
	$13,500,000 from CMS
2018: Launch, support, and ongoing development of MI Bridges **$21 million**	$250,000 Michigan Health Endowment Fund
	$1,850,000 from MDHHS General Fund
	$18,900,000 from CMS
2019: Operations and support of MI Bridges **$7 million**	$3,500,000 from MDHHS General Fund
	$3,500,000 from CMS

MBAI Evaluation –

Evaluation for the overall MBAI project has not been conducted, and is complicated by multiple aspects of the program being rolled out simultaneously, with some aspects of the initiative being more successful than others. Because of this overlap of influences, evaluating the impact of each individual change is difficult.

The improved paper application and the introduction of the new MI Bridges has led to dramatic improvements in the time to complete an application, the completion rate, and the accuracy of applications.

The MI Bridges online application is supported by the Internet Protocol Locator Project, which was created to give the Michigan Office of the Inspector General the capability to identify the physical location of individuals using MI Bridges to apply for Michigan public assistance benefits online. This capability increases the chances of identifying people who are residing outside Michigan and are improperly applying for public assistance benefits in Michigan. From 2016-2018, the IP Locator Project resulted in nearly $3 million in cost avoidance.[29]

The MI Bridges platform's CBO dashboard also allows organizations to track if the needs of people referred through the platform were met. The state has recently started to evaluate referrals data to trace outcomes and share success rates with CBOs at the local level during quarterly Community Partner Advisory Group calls where CBOs are also invited to share feedback on MI Bridges.

Timeline
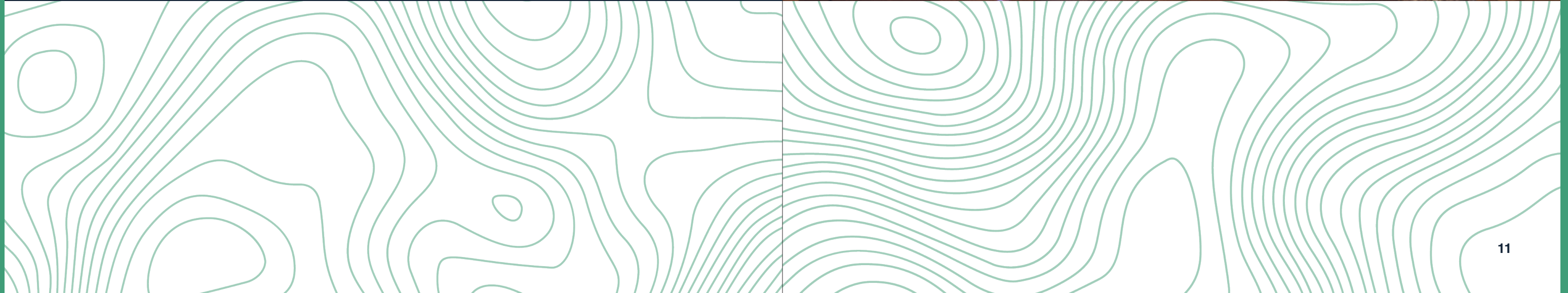
The Great Recession

- After years of steady job loss, the bankrupt American auto industry severely impacted Michigan's economy.
- There was unprecedented demand for public assistance, but the system was unequipped to cope with the demand.
- Medical, housing, food, and energy benefits were administered by different state agencies, and had different data systems, different eligibility requirements, and no interface.
- People who had not previously relied on public assistance were unable to see if they were eligible.
- Governor Jennifer Granholm challenged her administration to develop an online system for checking benefit eligibility within six months.

Source: Spencer Platt/Getty Images

Affordable Care Act (ACA)

- Further emphasis was placed on a holistic view of health and linked services.
- The ACA provided money to address social determinants of health and additional resources for Medicaid's integrated service model delivery system.
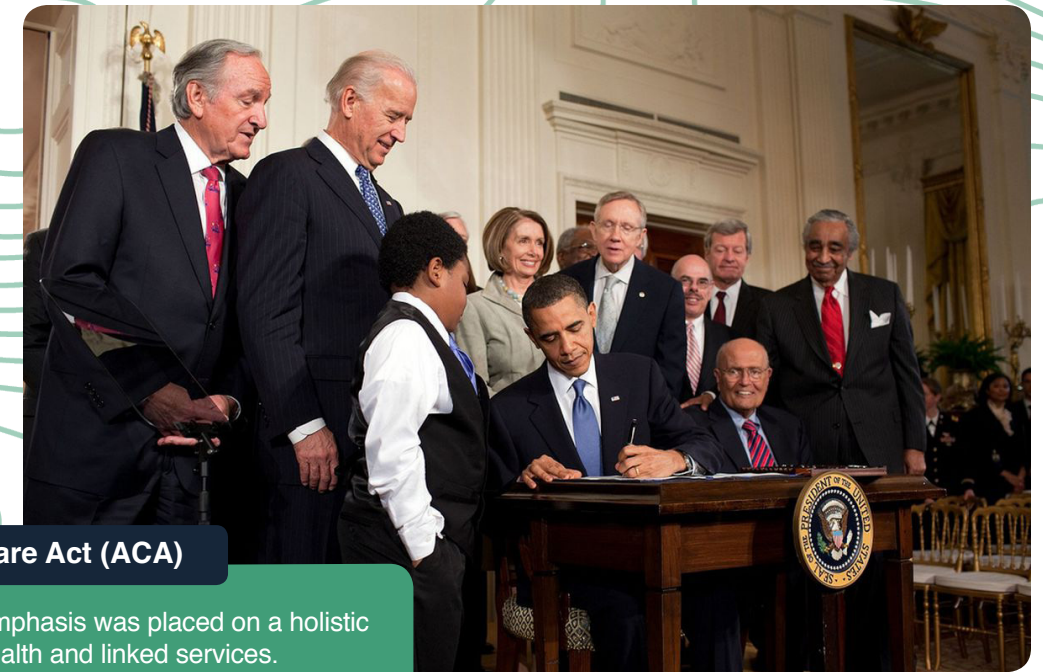
Source: Pete Souza/Vox

2008-2009

2009

March 2010

November 2010

- Ten foundations, including the W.K. Kellogg Foundation, the Open Society Foundations, the Kresge Foundation, Consumers Energy Foundation, the DTE Foundation, the Ford Foundation, the McGregor Fund, and the Max and Marjorie Fisher Foundation, among others, committed to working with the OFL to address the growing problem.[7]
- Initially, the philanthropic community and the state disagreed over the best way to build an online platform to address the growing crisis.
- The OFL facilitated the parties to agree to build MI Bridges, a customized platform to meet the unique needs of the state.

### The OFL Brings Together Philanthropy and State

- Incumbent Democratic Governor Jennifer Granholm was prohibited by the state's Constitution from seeking a third term.
- Republican Rick Snyder was elected to office, a position he held from 2011 to 2019.
- During a time of great budget cuts, the MI Bridges portal needed additional funding to be completed.
- The politically-neutral OFL staff were able to make the argument that the MBAI, "has significant foundation investment, and is a perfect example of a public-private partnership… We believe it can transcend administrations due to the foundations and nonprofits that are supporting it."
- The Governor was convinced that MBAI would save the state money while providing qualified individuals access to resources more efficiently and continued to fund the initiative.

Source: Brett Carlsen/Getty Images

Gubernatorial Change

MI Bridges First Launches

- The first iteration of MI Bridges, a bundled benefits access portal for all MDHHS programs including Medicaid, cash assistance, child development and care, and non-energy state emergency relief was released.

- Outreach began to train community-based organizations (CBOs) to act as navigators on the MI Bridges platform.

- Federal funding was increased to encourage the modernization of eligibility and enrollment systems under the A87 waiver.
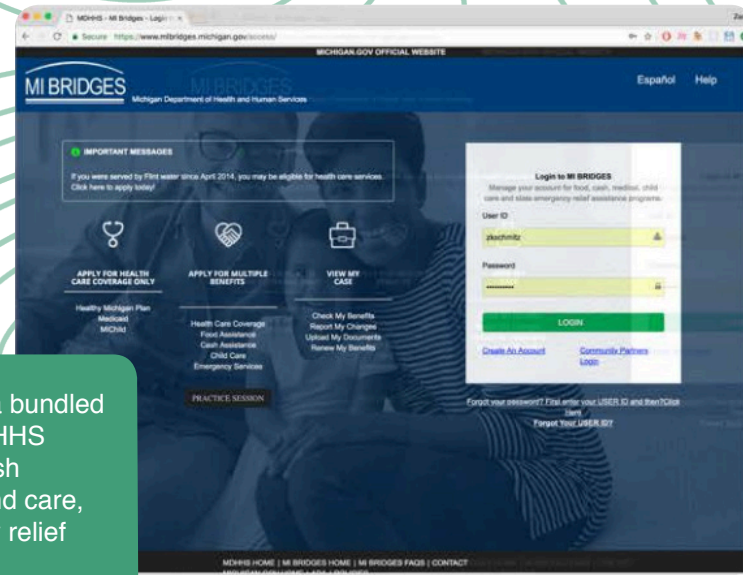
Project Re:Form

- Civilla partnered with MDHHS to update the paper benefits application.

- The organization took a human-centric design approach to develop a modular application that provided a single point of entry for residents applying for Michigan's largest assistance programs: healthcare, food, child care, and state emergency relief.

- The application was reduced in length by 80% while still meeting all administrative rules, state laws, and federal regulations.[8]
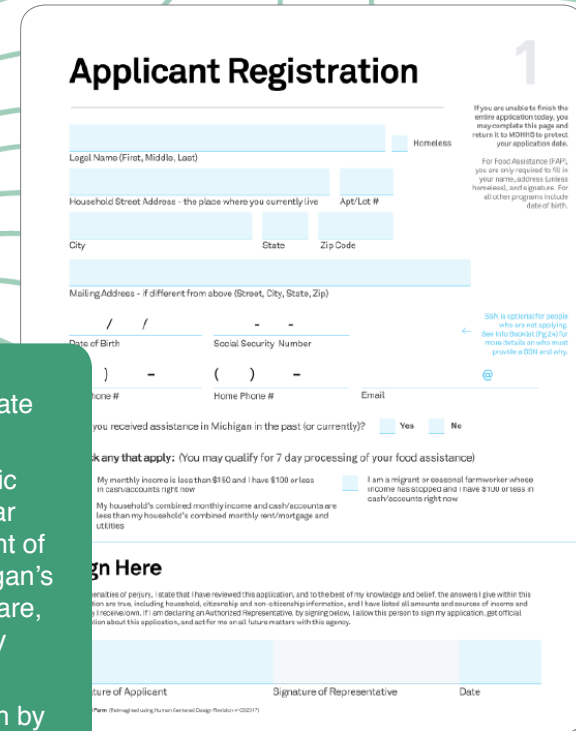
2011

2014-2016

2015-2017

2018

- Though unrelated to the MBAI, this event is notable as MDHHS was consumed in scandal after the drinking water source for the city of Flint, Michigan was compromised.

- Several former MDHHS employees were convicted of related conspiracy and willful neglect of duty charges.

Flint Water Crisis

- The Re:Form project launched statewide, making the application available to the state's 2.6 million residents who utilized public assistance in 2018.

- An updated, mobile-friendly version of MI Bridges included integration with the Michigan 2-1-1 system and Great Start to Quality, the state's early childhood quality rating and improvement system. MI Bridges also introduced proactive referral functionality to identify additional services a person might be eligible to receive.

- Universal caseworking system and updated call center technology was introduced in 50 counties.

- The federal A87 waiver was removed, meaning that federal funding for developing integrated service delivery platforms returned to pre-2011 rates.

A Year of Rollouts

Source: Rebecca Cook/Reuters

Insight from MBAI Systems-Builders & Community-Based Organizations

Insight from MBAI Systems Builders & Community-Based Organizations

Research for this report included interviews with individuals from MDHHS, OFL, and CBOs who actively contributed to the development, rollout, and refinement of the MBAI.

Systems Builders

MDHHS
Paula Kaiser Van Dam
Bureau Director,
Michigan Department of Health and Human Services

Jonathan Breems
Policy Analyst,
Michigan Department of Health and Human Services

Michigan Department of Education
Lisa Brewer-Walraven
Director of Child Development and Care,
Michigan Department of Education (MDE)

CBOs
Alan Oman
Executive Director of Early Childhood Programs,
Washtenaw Intermediate School District

Annette Sobocinski, LMSW, JD
Executive Director,
Child Care Network

Jordan Blough-Orr
Early Childhood Specialist,
The Early Childhood Investment Corporation

OFL
Karen Aldridge-Eason
Foundation Liaison,
Office of the Foundation Liaison

Stephen Arellano
Foundation Coordinator,
Office of the Foundation Liaison

United Way
Nancy Lindman
Director of Public Policy and Partnerships,
Michigan Association of United Ways

Common themes and insights gleaned during interviews with these stakeholders is synthesized below.

Systems Building

Funding and implementing MBAI required a coalition of over ten foundation funders, the OFL, and multiple state agencies, including MDHHS, the Department of Technology, Management and Budget, the Department of Community Health, and the State Auditor's Office. Early on, the OFL was instrumental helping both sides overcome long-standing mistrust to generate buy-in to develop a single, universal application system integrated with other community services.

Simply coordinating the funders' and agencies' schedules to facilitate multi-party meetings was a challenge, not to mention documenting and adhering to each funder's different expectations and reporting requirements. Within state government, the multiple agencies responsible for medical, food, housing, and energy benefits also had different requirements and ingrained bureaucratic processes.

As Karen Aldridge-Eason, Foundation Liaison at OFL put it, MBAI was "really was about building relationships, keeping people talking together, transparency in the communications process, holding people accountable, having the discussions in the room, not outside the room...and, ultimately, reminding people that it wasn't about our individual agencies, foundations, territory. It was about the greater good for the citizens of Michigan and that we wanted to make sure children and families in Michigan had easier access to the benefits they needed."

Representatives from OFL, MDHHS, and the United Way all reported that an initiative as complex and long-lasting as the MBAI requires courageous leaders who demonstrate commitment and refuse to be discouraged in the face of inevitable setbacks.

User-Centric and Iterative Design Process

All of the systems builders interviewed for this report touted the user-centric design of the MI Bridges portal and the new paper application as the greatest success of the MBAI.

Teams from MDHHS, OFL, and Civilla spent time shadowing residents and administrators to understand what applying for and receiving benefits, or processing applications and administering benefits, required from those on the front-lines. However, documenting the process and identifying efficiencies was only the beginning. They continued to return to users to test assumptions, gather feedback, and refine requirements throughout the iterative design and development process.

Michigan systems builders recommend that others embarking on a similar project should conduct focus groups, surveys, and key informant interviews in order to shape the design, format, language, and distribution of information to best meet the needs of the given target audiences.

Early Childhood Care & Education

The state recognized that, like other social services, the reason many eligible applications for childcare subsidy were denied was due to improper documentation and the complex application process. Therefore, the inclusion of the child care subsidy benefit in the MBAI was intended to ease the administrative burden on families, MDHHS, and the Michigan Department of Education and to increase access to care.

The integration of the state's Great Start to Quality database, which includes information on program quality, makes it easier for families to make informed decisions when accessing local, high-quality care.

Additionally, the state is able to harness administrative data through MI Bridges. Lisa Brewer-Walraven of MDE is excited to be able to track the quality rating of the early childhood education program a child attends and analyze student progress to determine a correlation between school-readiness outcomes and quality ratings. This data is also used to calculate reimbursement rates and lobby policymakers in support of high-quality early childhood education.

Politics/Economics

The Michigan economic environment during the "Lost Decade" of the 2000's provided the impetus for MBAI, but the initiative continues to develop and evolve 11 years later. During that time, major political events have impacted the MBAI. In 2010, Democratic Governor Jennifer Granholm, who initiated the MBAI, was succeeded by Republican Rick Snyder. Then, in 2014, the MDHHS was embroiled in scandal due to the Flint water crisis. Because of these and

countless other external factors, there have been setbacks, funding cuts, and uncertainty during the development of MBAI.

Rather than seeing external forces as opposition, Nancy Lindman of the Michigan Association of United Ways advises that systems builders, "Take advantage of a crisis to follow the energy and find partners who are ready to address an issue with you."

The OFL's Karen Aldridge-Eason says, "It's about keeping the institutional knowledge and relationships that can drive across politics."

In Michigan, the severity of the economic conditions and the dramatic impact they were having on Michiganders served as the catalyst for the public and private sectors to overcome traditional mistrust and build a lasting partnership that has withstood changing political tides and challenging external circumstances.

Data Integration

The MBAI was also contingent upon streamlining and integrating data from across many state agencies. The differences in the format and integrity of the data available was vast. Nearly all the systems had been built in isolation and were, as Jonathan Breems of MDHHS put it, "antiquated," making data sharing complicated and time consuming.

Representatives from MDHHS and MDE both recommend keeping a strong vision of data integration front-of-mind from the beginning of a project and build systems with compatibility as a core requirement.

Technical

The MBAI was a complicated, unprecedented project that inevitably faced developmental challenges. When speaking with CBOs and end users, they are generally satisfied with the user experience, but report issues with glitches such as users receiving multiple duplicate text message alerts or CBOs having difficulties accessing the CBO-referral dashboard.

Jonathan Breems of MDHHS was emphatic as he explained the importance of building a comprehensive training plan for rolling out and supporting a new system, including ongoing training requirements and resources devoted to fostering feedback loops and continuous progress improvement post-launch.

Michigan used a phased, "pilot program" rollout that allowed selected community partners and families to use the platform in a "sandbox" to test assumptions, model training materials, and ensure quality before a wider rollout. This approach helped them uncover issues, such as the ones plaguing the universal caseworking and updated telephone systems, early and address them before introducing new technology or processes across the state.

Evaluation

Jonathan Breems of MDHHS concedes that, in hindsight, they would have structured the rollout of the MBAI differently to allow for clearer evaluation of the various elements without conflating the data by introducing multiple changes to the system at the same time.

His advice would be to, "Set comprehensive evaluation plans before launch that include reliable baseline statistics on the key performance indicators related to goals."

Michigan Family Case Studies

The success of the MBAI is largely attributed to the human-centric design approach adopted by the systems-builders. Yet, there is little public documentation available on about how families experience the integrated system. This leads to questions such as: If families were the systems designers, how would they create the support systems they are relying upon?

VIVA Strategy & Communications conducted interviews with four families who have used MI Bridges to understand gather qualitative feedback on how the system did or did not meet their needs, as well as gather their insights about how they would design a support system to meet their family's needs. In this report, the respondents have been referred to by their first initial and last name to protect their privacy.

Michigan
Family Case Studies

Name: A. James

Age: 29

Location: Ann Arbor, Michigan

Services used: Childcare vouchers, WIC, housing assistance, cash assistance, and Medicaid

Meet A. James

Twenty-seven-year-old A. James did not have an easy start to becoming a mother. She was living in Arizona when she found out she was pregnant with twins, and knew instantly that the abusive relationship she was in would not be safe for her and the babies. Throughout her pregnancy, things went from bad to worse. James was diagnosed with preeclampsia and lost one of her twins during pregnancy. Then, on January 20, 2017, her first child, a daughter, was born over a month premature.

After fleeing from her partner, the person she was living with kicked her out, forcing James and her daughter into a series of shelters. Finally, she decided she had no choice but to move back to her home state of Michigan to nurse herself and her baby back to health.

Upon arrival at her cousin's house in Detroit, James took up her passion for hairdressing, but was struggling to find reliable childcare and make ends meet. Once again, she found herself in an environment that wasn't suited for a baby, particularly one suffering from ongoing health issues, and she ended up bouncing between the homes of acquaintances before ending up in a shelter.

Not giving up, she relocated her little family to Ann Arbor. There, a friend showed her how to use the MI Bridges online portal to apply for services and she was quickly approved for childcare vouchers, WIC, housing assistance, cash assistance, and Medicaid. All these services make a big difference for the James family, but it's the housing and childcare that bring the most stability to their lives.

"I personally just want a safe environment. So these systems help a lot, you know, keeping her healthy and keeping me strong."

What positive experiences have you had applying for or accessing services?

"I use MI Bridges often. It's really helpful - It's like a portal, you check your benefits. If I get a letter in the mail, I actually get the letter [on the portal] first. And they'll text you or they'll email you. When I have to fill out documentation, I can take a picture and send it to my caseworker and the document gets approved in, like, five minutes."

That's quite an improvement given James' experience when she last lived in Michigan in 2014, "I faxed stuff over in the past and it'd go to the main fax machine where everybody's [documents] go to and it'd get lost. Or sometimes my document would be considered late and it wasn't late. Or if I mailed it in, I'm never good at mail... Stuff in the past would just take, oh my God, forever! And then my benefits would be off and I'd not have food or something like that."

In addition to the efficiency of the new MI Bridges system, James also speaks highly of her caseworkers, who she feels are supportive and have been able to triage her to services beyond state or federal benefits, such as therapy, domestic violence support groups, job training programs, food pantries, and even a free laundry service.

"I'm a humble person, but I'm not a passive person. And I'm not going to let everything fall apart. So I use my caseworkers. I know that they're knowledgeable, and I trust them."

What have been your challenges applying for or accessing services?

There are times when services she found in MI Bridges were too far for her to conceivably get to without transportation, or haven't been able to serve her when she arrived. "When I was in Detroit, it was so hard. Everything was so far away from where I was and [my daughter] was so little. It was snowing and, with the weather being so bad, I didn't want to take her on the bus. And I know how Detroit city buses are, they're really full…."

In another instance, a friend took her to a WIC appointment downtown, but it was overbooked and she was unable to be seen to get the things she needed for her daughter. Because her friend was not able to take her again, James had to brave the cold with the baby on the bus to go back to the WIC office the following week. Fortunately, that time, she was able to have her needs met.

How would you design a benefits system to better meet your needs?

If James had to build a system for service delivery, she would be sure to include transportation accommodations for people who need to attend in-person meetings or doctors appointments, particularly in areas where public transportation is not readily available in the cold Michigan winter. She'd also make sure that support groups and job training programs provide childcare and are offered during hours that make sense for people who are also trying to work or study. She also recommends building in ongoing prompts to help people remember when to turn in their documentation to avoid getting benefits turned off.

Name: N. Rios

Age: 37

Location: Ypsilanti, Michigan

Services used: Childcare vouchers, SNAP, WIC, housing assistance, cash assistance, early childhood home visiting, and Medicaid

Meet N. Rios

N. Rios is tired. She works six or seven days a week at a manufacturer of truck bed covers and accessories. After a long day on the production line, she cuts through traffic across town to her other job cleaning homes.

When Rios finally gets home to her two sons, one age 17 and the other just 10 months, she is exhausted. In her native Spanish she says, "Me voy a dormir cuando el bebe lo hace. [I go to sleep when the baby does.]" She hits the pillow as soon as her youngest is put down, knowing she has another full day ahead of her.

This is the way it's been for Rios since she first came to Ohio in 2007, and later relocated to Michigan in 2018. Some days, particularly when battling postpartum depression, the weight of it all can be overwhelming.

"I get frustrated and I want to cry. Sometimes I feel like giving up and dropping everything and either returning either to Ohio or Puerto Rico. But I can't do that because I have my two children and I don't have the money to do so. I can't leave my job. My mother has told me to return to Puerto Rico, but the situation is not good there. I have no home, no car, no furniture, nothing…."

So for now, Rios and her two sons are doing the best they can in Michigan.

What positive experiences have you had applying for and/or accessing services?

Echoing others interviewed for this report, Rios attributes her most positive experience applying for or accessing services not to the platform or process, or even to the benefits she received, but to a particular person. She says, "The programs are very good, but it depends on who your agent is. If the agent really wants to help, they will provide you with all of the information you need."

Rios' speaks highly of April Scanlon, the only Michigan caseworker who has used an interpreter to communicate with her. Miss April, as Rios calls her, has helped the family arrange supports ranging from bus passes to Christmas presents. "Me ha extendido la mano sin esperar nada a cambio [She has given me a hand and has not expected anything in return]," she says.

Rios is also is appreciative of the WIC program, saying "WIC is a great program, it has Spanish-speakers in the office and I have not had any problems with them. On the contrary, they have gifted me necessities for the baby and done home visits, as well as informing my doctor when they noticed symptoms of my depression."

What have been your challenges applying for and/or accessing services?

Language has been Rios' greatest barrier to accessing services. There have been multiple times where she has been treated rudely and felt discriminated against because she was unable to communicate with English-speaking caseworkers. "[Because of the language barrier] I have come out of meetings with a caseworker having only understood part of the conversation and not another part and it has made me be close to tears," she said.

"A lot of people just do not have compassion in their hearts. They do not have the professionalism to be doing the work they are doing. They do their work for the salary, to maintain their home. They are not there to help lift you and help you succeed in the States."

Though there is a Spanish-version of MI Bridges, Rios reports that it has been difficult for her to navigate and some documents are hard to understand, even after they have been translated. Because of this, Rios is committed to learning English in an attempt to "become more independent."

How would you design a benefits system to better meet your needs?

Given her experience navigating the system in a foreign language, it is unsurprising that Rios mused, "If I could change the program, I would put a couple of employees in every center who would function as translators. Place three Spanish speakers, two Chinese speakers, and an Arabic speaker in the centers because there are people who have the need for the services, but cannot apply for them because they do not understand the paperwork and there are not people who can help them."

Name: L. Hamby

Age: 29

Location: Grand Rapids, Michigan

Services used: Medicaid, housing vouchers, Head Start, VA (disability and rent assistance)

Meet L. Hamby

Twenty-nine-year-old L. Hamby joined the Navy immediately after high school and was stationed at Naval Base San Diego. There, she served as a seaman for six years before her military career was cut short due to injury.

Hamby returned to her home state of Michigan and welcomed a son in 2014. Now, as an active and rambunctious five-year-old, he keeps his mother on her toes: "He is the only child and is used to being the center of attention everywhere he goes."

When asked what her dreams are for her son, she says,

"That he lives his life to the fullest, satisfied. That he can do whatever he wants, no matter what it is…." Then, laughing, she added, "Just don't tell him that right now!"

What has been your experience applying for and/or accessing services?

Hamby struggles to name just one benefit that helps her family most. "There's the VA, and my son's schooling, and us having a place to live, and his health insurance…. It is all important to me as a mother."

When asked about MI Bridges, Hamby effuses, "I use it all the time when I need to access the government portal to talk to somebody about my public assistance services. I'm able to take pictures of documents like my ID card. If I miss something in the mail, I check my correspondence tab, so I can see what came in the mail that might have got missed or got put in somebody else's box. So just the ease and accessibility of the online portal is what I like, that's the best experience ever because it's so easy to keep track of paperwork."

She continued, "It is, like, so easy. As easy as social media. It's so user friendly—even if you're illiterate, it has pictures and everything so I think you'd be okay."

What have been your challenges applying for and/or accessing services?

Balancing her earnings with the strict eligibility requirements for services is Hamby's biggest challenge. "I make about $17,000 a year, so trying to access childcare services in my state was hard because you can only make so much money and still have free child care. But where I live childcare is $12 an hour, and you pay for a full week at a time. So it's expensive."

She continued, "But if I make $15 an hour and I work 40 hours a week, I make too much money to qualify for childcare. So, if I did that, when I'd get done paying for childcare at the end of the week, I basically went to work just to pay for my son to have childcare while I only have $200 and still can't afford to live because that won't cover rent, groceries, gas, utilities, and the needs of my child."

How would you design a benefits system to better meet your family's needs?

When asked what she would do if she was to design the system, Hamby was excited, "Oh, I'd love to build a strong system of family resources that helps people feel supported, empowered.

"I would make it work like this: [Income limits are] not standard across the board to where somebody might get a job and make $2 over the limit only to struggle more, then become devastated and lose a job and go right back into public assistance. I feel like public assistance could be a little bit more customizable when it comes to things like people's household composition and the cost of living in their town."

Name: C. Bland

Age: 29

Location: Detroit, Michigan

Services used: Medicaid, SNAP, WIC (formerly)

Meet C. Bland

When C. Bland dreams of her two young daughters' future, she says,

"Hopefully both of them graduate from high school and college...and allow me to travel worry free!"

Her girls, age four and six, are the light of Bland's life. "Without my babies, I wouldn't have anything to live for and that's the truth," she declared.

"My littlest has sickle cell. We found out she had it when she was born, but she didn't get sick until she was about four months old." Since then, managing her daughter's illness has been at the top of Bland's and her family's priority list.

What has been your experience applying for and/or accessing services?

When asked about the services that make the biggest difference in her life, Bland doesn't name just one. "I'm very grateful for the food stamps. But I definitely appreciate the medical because I don't have to pay for any prescriptions. I believe that it is designed for the family. You know, even if your child doesn't have a disability or anything. They even offer transportation. If you call two days ahead of time, they'll take you to your appointment, and it's free of charge."

Bland also shared her experience with the Work First program, which she explained as, "a program where the state helps us find jobs. They help you with your resume. They have a lot of different employers to a site where they interview people, and they give you a bus ticket to get there…. Also, if you're in a program for, like, two months, they'll help you buy a car!"

Though she had not yet applied for assistance buying a car, she had spoken her caseworker about the benefit and was hopeful that she would be eligible if she did.

To manage her family's benefits, Bland uses MI Bridges. She says, "I actually like it, it is very useful."

When describing the ability to email a caseworker through MI Bridges, she continued, "I believe it's better than mailing paperwork. And because when you have it like that, you have proof on both sides that we received something. And now everyone can see things that you don't normally know about, like all your work information. It is very helpful all together. They're doing a faster, better practice with helping people get assistance."

What have been your challenges applying for and/or accessing services?

Balancing the amount of income she earns while maximizing the amount of state assistance she is eligible for is important to the Bland family's economic stability. Bland is currently working, but her biggest complaint with the system is that, "if they feel like you make too much money—it could be five more dollars—than what they want you to make, they'll cut your benefits. And I don't think that's fair because, realistically, I don't think a family of three could live off, you know, maybe $2,000 a month."

How would you design a benefits system to better meet your needs?

Though Bland likes the efficiency of MI Bridges, she said, "There's nothing wrong with everything being online, but sometimes we want to talk to an actual live person."

Like other interviewees, Bland spoke of the impact a dedicated social worker can make and of the importance of interpersonal skills for people in that role. "I would just give them better techniques on how to deal with certain people and certain cases. Because, you know, sometimes they ignore people. They're very rude. Anything that can improve the service…."

Michigan's User-Centered Approach to Universal Benefits Administration

Michigan's User-Centered Approach to Universal Benefits Administration

MI Bridges Self-Service Online Portal – – – – – – – – – – – – – – – – – –

In 2008, Michigan Governor Jennifer Granholm vowed to come up with an improved online process for determining benefits eligibility for benefits within six months, starting a ten-year project of development leading to the current iteration of the MI Bridges self-service online portal.

The MI Bridges system was significantly updated in 2018. In alignment with Michigan's "mobile first and cloud first" strategy, the platform is built on the Salesforce lightning cloud platform and hosted on secure FedRAMP certified Salesforce Government Cloud.[9] It is now mobile friendly and available in English, Spanish, and Arabic.

MI Bridges Key Concepts[10]

Cohesive Connection
Leveraging multiple programs, services, and community resources within a consistent customer experience to support residents' needs holistically.

Customer Empowerment
Leveraging modern technological design and user experience to simplify processes and provide a platform that supports residents in achieving their goals.

Analytical Understanding
Looking beyond traditional programmatic data to capture and utilize resident needs, goals, experiences, and outcomes to improve effectiveness.

Community Collaboration
Embracing community partners and providers as collaborators in service delivery by equipping partners with new tools and insights.
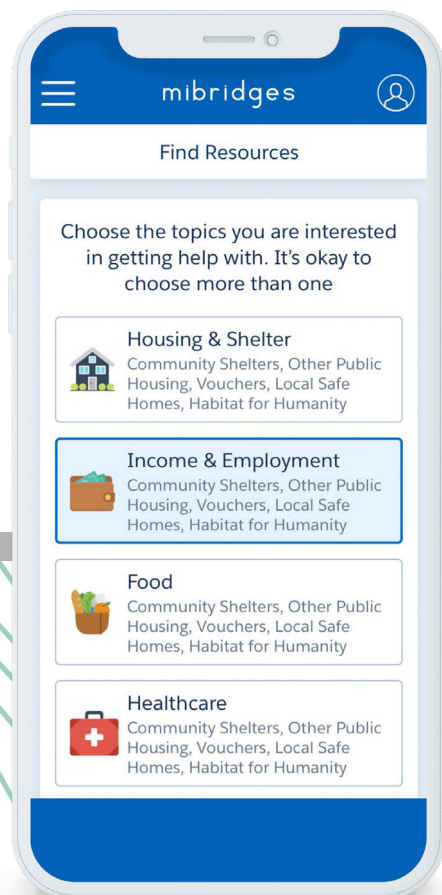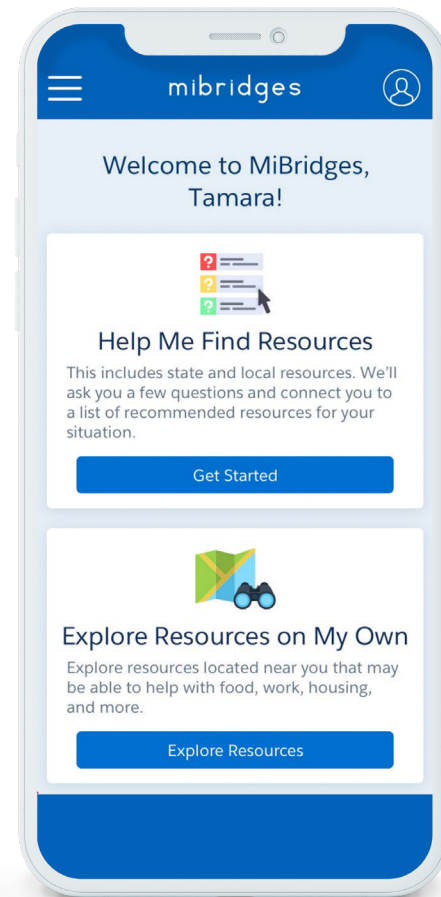
Outcome Orientation
Assessing and orienting solutions toward root causes rather than symptoms through intentional business process and system design.
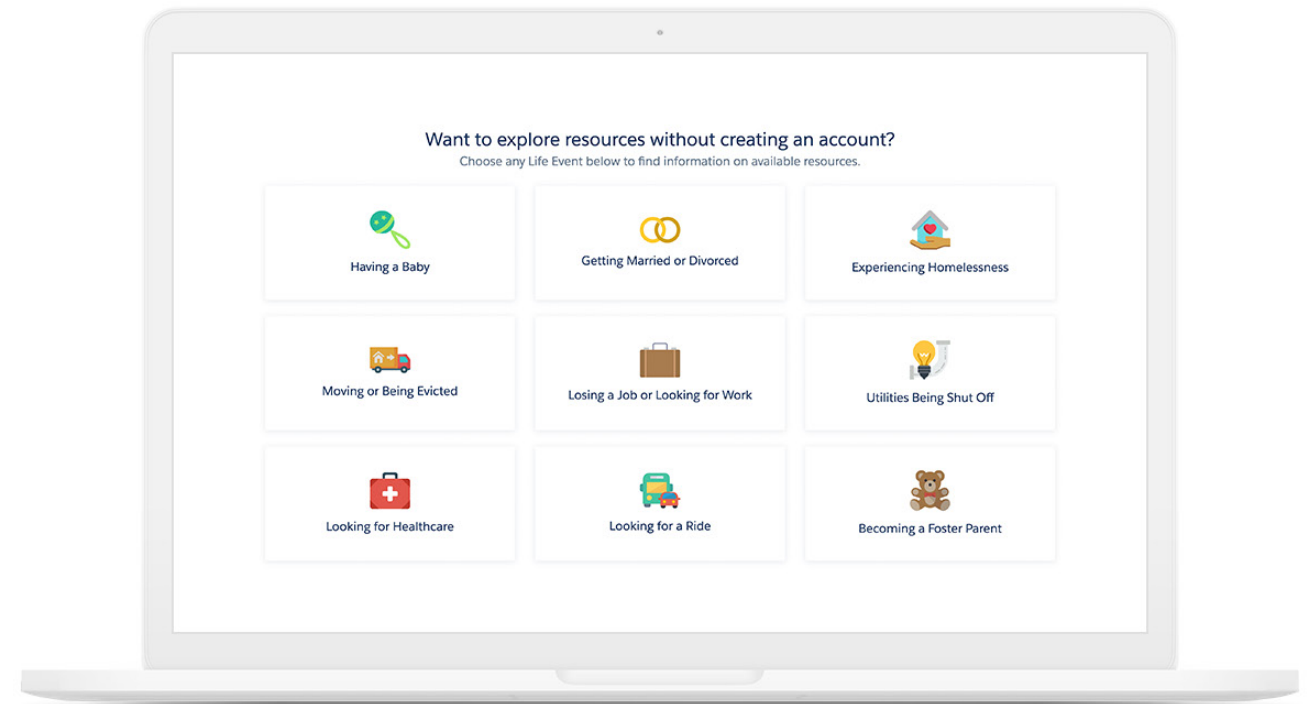
Using the new MI Bridges, customers can:

Explore resources offered by local community organizations throughout Michigan and save them to their MI Bridges profile.

Welcome to MiBridges, Tamara!

Help Me Find Resources
This includes state and local resources. We'll ask you a few questions and connect you to a list of recommended resources for your situation.

Get Started

Explore Resources on My Own
Explore resources located near you that may be able to help with food, work, housing, and more.

Explore Resources

Find Resources

Choose the topics you are interested in getting help with. It's okay to choose more than one

Housing & Shelter
Community Shelters, Other Public Housing, Vouchers, Local Safe Homes, Habitat for Humanity

Income & Employment
Community Shelters, Other Public Housing, Vouchers, Local Safe Homes, Habitat for Humanity

Food
Community Shelters, Other Public Housing, Vouchers, Local Safe Homes, Habitat for Humanity

Healthcare
Community Shelters, Other Public Housing, Vouchers, Local Safe Homes, Habitat for Humanity

Apply for benefits using a simplified and easy-to-understand application. Benefits include:
- Health Coverage
- Food Assistance
- Child Development and Care
- Cash Assistance
- State Emergency Relief

Want to explore resources without creating an account?
Choose any Life Event below to find information on available resources.

Having a Baby | Getting Married or Divorced | Experiencing Homelessness

Moving or Being Evicted | Losing a Job or Looking for Work | Utilities Being Shut Off

Looking for Healthcare | Looking for a Ride | Becoming a Foster Parent

Find services based on life events, such as:
- Having a Baby
- Getting Married or Divorced
- Experiencing Homelessness
- Moving or Being Evicted
- Losing a Job or Looking for Work
- Utilities Being Shut Off
- Looking for Healthcare
- Looking for a Ride
- Becoming a Foster Parent
- Going to School (Children)
- Going to School (Adults)
- Becoming a Senior Citizen
- Having a Disability or Special Need
- Losing a Family Member or Close Friend

Take pictures of required eligibility documents with a mobile phone or tablet and instantly upload the document.
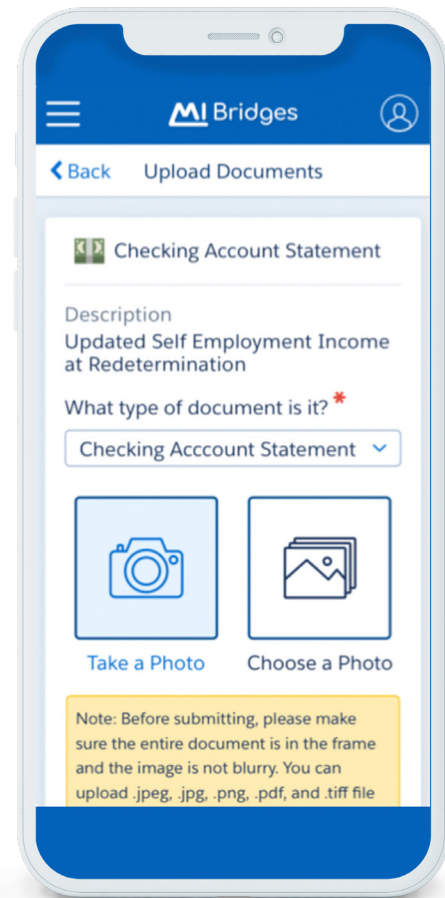
View verifications requested by MDHHS.
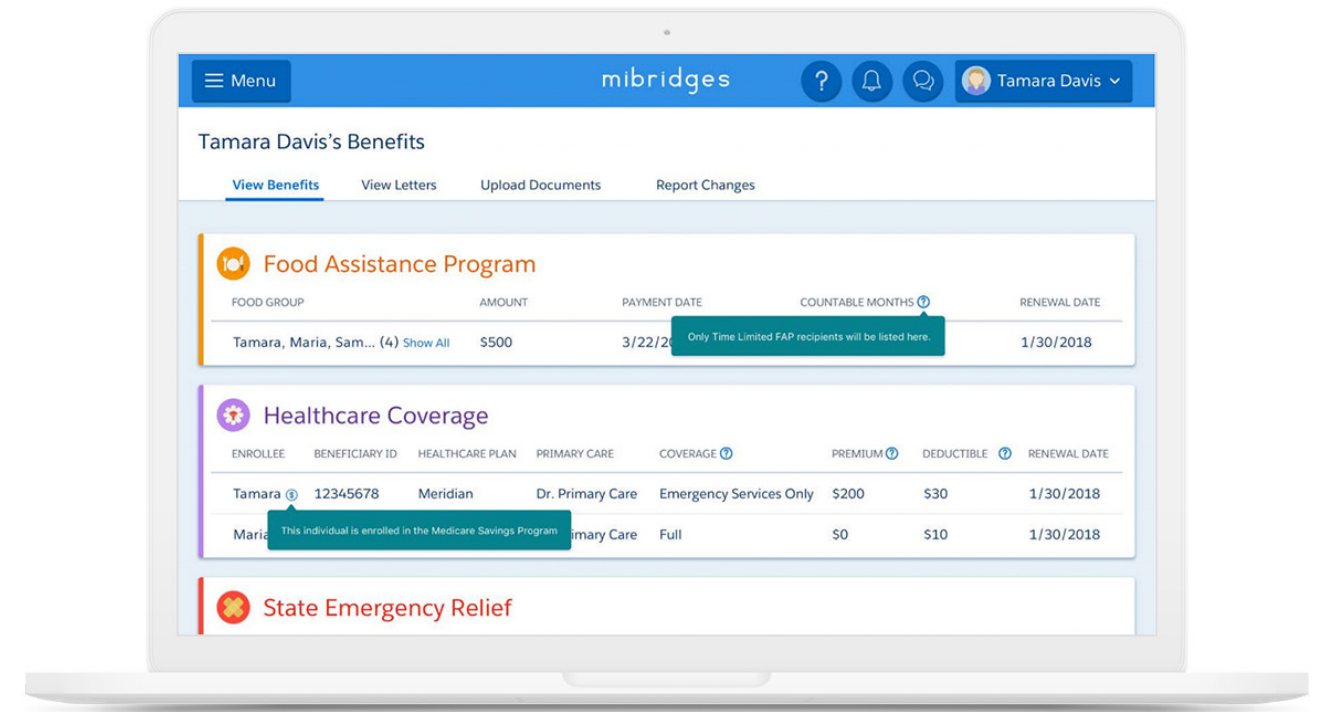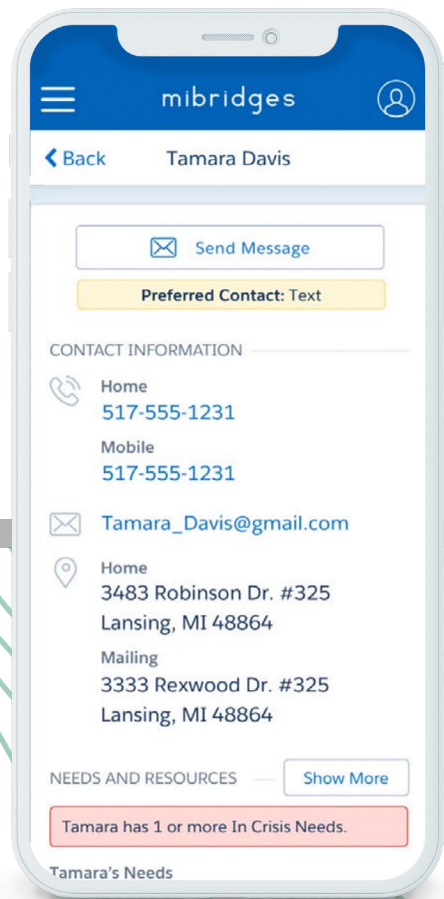
Report case changes and renew benefits.

MI Bridges enables residents to identify their needs and connect to community resources (including 30,000 community programs and organizations through a partnership with 2-1-1) that meet those needs to improve stability over time. The system also integrates with the Women, Infants & Children (WIC) program, the Michigan Energy Assistance Program, and the Great Start to Quality child care database to provide additional resources and referral options for customers.

Notably, despite its integration with the Great Start for Quality database and the state child care subsidy program, the MI Bridges system is not linked to the application system for Head Start and state-funded preschool. To access those services, families must complete a separate digital application process.

Success of MI Bridges

The rollout of the new MI Bridges in 2018 brought the average time required to successfully complete a digital universal benefits application down 50% to 17 minutes. Additionally, using the increased self-service functionality, users have checked their benefits through the online platform more than 725,000 times, which MDHHS reports has reduced the number of calls to caseworkers.[11]

The platform also received several notable awards, including:
- IT Solutions Management 2018 Recognition Award for Excellence in Health and Human Services Technology in the Best Use of Technology for Customers category
- International Data Group's 2019 Digital Edge 50 Awards
- The Excellence in Technology Award for Best Citizen Centric Experience
- Information Communications Technology Innovations category from the National Association of State Chief Information Officers 2018[12]

MI Bridges & Community-Based Organizations (CBOs)

MI Bridges helps CBOs play a more significant role in helping residents access resources. MI Bridges has specialized features to support CBOs, such as the ability to send a referral directly to a CBO and providing CBOs with a dashboard of clients who have been referred, on which they can track client outcomes. All CBO participation is voluntary and based on an alignment of mission, rather than any incentives offered by the state. To date, over 680 CBOs are registered as MI Bridges partners.[13]

Organizations can register for one or more of the following levels of engagement:

Access Partner: An Access Partner is an organization that agrees to promote MI Bridges by displaying promotional materials and providing a computer, tablets, or mobile devices for individuals to use to access MI Bridges. The computer does not have to be exclusively for MI Bridges use. As an MI Bridges Access Partner, an agency will offer individuals without access to a computer, tablet, mobile device, or the internet a way to use MI Bridges. Examples of agencies that serve as MI Bridges Access Partners include libraries, community centers, and schools.

Referral Partner: A Referral Partner is an organization that agrees to receive referrals sent from customers using MI Bridges. Clients can identify their needs using the "Help Me Find Resources" feature and local organizations will be listed as recommended resources if they can help meet one or more needs. When a client would like to use a resource offered by a Referral Partner, the partner organization receives an electronic referral on their MI Bridges dashboard and can contact the client to provide services.

Navigation Partner: A Navigation Partner is an agency that agrees to promote MI Bridges by providing one-on-one assistance to MI Bridges users. The assistance provided may vary from simply answering user questions to helping them complete a needs survey, finding local resources, or applying online for a MDHHS benefit program. Navigation assistance typically includes supporting users with multiple MI Bridges features and teaching individuals to use the MI Bridges system so they are empowered to use MI Bridges on their own over time.

Administrative data gathered from MI Bridges also helps maps the needs of Michigan residents and, through the CBO dashboard that tracks referral rates and outcomes, the level of support that a resident is receiving. Utilizing the framework and data feedback loop built within the new MI Bridges, MDHHS is able to identify and target gaps in service availability within specific communities.[14]

MI Bridges Navigation Points of Access

Three areas where CBOs are serving as MI Bridges Navigation Partners helping Michiganders use the platform to apply for and manage benefits are examined below. Other areas include jails and community colleges.

Health Systems
Due to reimbursement rate structures, there is a financial incentive for health systems to ensure that a person is enrolled and receiving all eligible benefits in order to support their overall health and stay out of the hospital, particularly at costly points-of-service, such as emergency rooms.

The Community-Clinical Linkages project is an initiative designed to increase utilization of community medical providers and decrease the use of the ER as a primary source of health care, in addition to mapping patients to other community services. Nurse navigators identify patients who have high emergency room use, as it is often a sign that there may be health or social needs preventing them from accessing appropriate care in alternative settings.

The nurse navigator will work with the patient to identify and attend to physical, mental, or dental health needs. They may also use MI Bridges to refer the individual to other services addressing housing, transportation, utilities, food insecurity, and interpersonal violence.

Early Childhood Education
For families seeking early childhood care and education, the MI Bridges platform is integrated into the state's quality rating and improvement system database, which allows families to find high-quality programs in their area. Once a family has selected a program, MI Bridges creates a referral to alert the program to the family's interest. Families can also apply for and manage child care subsidy through MI Bridges.

As of 2018, the MI Bridges also offers proactive referrals, bringing additional services to families' attention. For instance, if a family uses the platform in search of infant care and is eligible for, but not utilizing the Women, Infants, and Children (WIC) program, MI Bridges will identify the gap and make a referral to the local WIC office.

Once a family is enrolled in a child care program, staff at many childcare facilities have been trained as navigators, or offer access points to allow families a computer and internet to use MI Bridges.

The Early Childhood Investment Corporation (ECIC), the implementing body of the state's quality rating and improvement system, trains all its embedded coaches to become certified as MI Bridges navigators. The organization realized that coaches often serve wide areas of the state and would not be personally familiar with all CBO services in their territory. Accessing MI Bridges allows them to quickly identify appropriate supports in the local communities they serve.

Jordan Blough-Orr, ECIC Early Childhood Specialist, reports that their coaches often use the MI Bridges platform to help underpaid child care providers access services. In 2015, Michigan child care providers earned an average of $19,620, making it one of the lowest-paid professions in the state. Nationally, nearly half of child care providers are themselves eligible for some form of public assistance.[15]

Employers
Employers in Michigan recognized the impact that the lack of healthcare, housing, transportation, child care and other social services has on the workforce and, ultimately, the bottomline. To address these issues, Michigan-based employers banded together to create Employee Resource Networks, which embed workplace-based employee success coaches into local businesses. These coaches use MI Bridges to generate real-time referrals to community resources.

Employers see the benefit of investing in success coaches/navigators through improved employee retention rates, increased employee engagement, increased family financial stability, and improved employee health and wellbeing.[16]

Redesigned Paper Application –

Civilla, a social impact design studio based in Detroit, partnered with MDHHS to take a human-centric approach to developing a new paper benefits application. Internally, the project was called Project Re:Form.

Civilla recognized that the state's existing, 40+ page form was only 72% complete when it was turned in, which meant case workers often had to spend time reaching out to applicants for additional information or denying the application. Civilla researchers spent more than 4,000 hours (beginning in September 2015) studying the experience of applying for benefits, learning all the ways they could help the state streamline the process to reduce administrative headaches for both applicants and administrators.

The process involved interviewing applicants for public benefits in their homes, as well as shadowing and interviewing relevant public servants responsible for processing their claims. The iterative design and development process took in to account multiple rounds of feedback, with users modeling prototypes to identify bugs or additional improvements.

The solution was a modular application that provided a single point of entry for residents applying for Michigan's five largest assistance programs: healthcare, food, cash, child care, and state emergency relief. The new form, released state-wide in 2018, boasted an 80% reduction in length while still meeting all administrative rules, state laws, and federal regulations.

In addition to anecdotal praise, early indications show that the new human-centric designed form has been widely embraced by residents who report that they can complete the application more quickly, more confidently, and more independently. In a study conducted after the state-wide role out, nearly 90% of people were able to apply in less than 20 minutes, and 90% felt confident they could correctly fill out the application by themselves. For caseworkers, the new design resulted in more complete and accurate applications - which decreased processing times overall. Caseworkers spent 75% less time correcting errors, and saw a 22% increase in completion rates. In total, processing times improved by 42%. With that additional time, caseworkers reported being able to engage in higher value conversations and activities with their clients.[17]

Past   Present

Universal Caseload System & Updated Contact Center Technology – – – – – – – – – –

Universal caseload (UCL), or task-based processing, is a different way of handling public assistance cases. In non-UCL benefits administration, each client is assigned a caseworker who they contact directly, often leaving a voicemail if the caseworker is unavailable.

UCL and updated contact center technology is intended to allow "a pool of caseworkers to handle pooled cases," meaning that rather than reaching a specific caseworker assigned to an individual's case, MDHHS implemented new technology to provide one phone number for most customer questions and interactions. The call center offers self-service options or operators route customer calls to the most appropriate team or a caseworker located in the same geographic area as the client.[18,19]

Michigan rolled out UCL to 50 counties in 2018, because it promised several benefits:

- **Faster and more reliable service:** Clients don't need to leave voicemails, which may be dropped if a caseworker is unavailable.
- **Greater efficiency:** When work is shared across counties, capacity can swing based on level of need.
- **More visibility:** The shared system allows supervisors to observe client experience and caseworker interactions more easily.

However, the results of UCL's implementation have been disappointing to MDHHS. As of February 2019, the counties that switched to UCL were delivering benefits far less promptly than in non-UCL counties. In non-UCL counties, the application backlog was about 4%. In UCL counties, the backlog post-rollout was 32%, with some UCL offices working through a backlog of applications as high as 48%.[21]

MDHHS Director Robert Gordon remains committed to making UCL work. He notes that, "a shared service model has great potential to provide better service to Michiganders—no more waiting for return calls, faster service, better response to emergencies, and greater specialization among caseworkers."[22]

He also believes that, "A good 'shared services' model can allow caseworkers to provide personalized service to individuals who most need it, while also allowing for many individuals to get the benefits they want quickly and efficiently." Yet, Gordon acknowledges that the implementation has been unacceptable to both clients and caseworkers.

Instead of reverting to the old system, MDHHS has committed further resources and expertise to the effort. Redirecting staff, breaking up a large service region in the Upper Peninsula, and limiting the times people can call caseworkers so that they can spend time progressing cases at the beginning and end of the workday are a few of the strategies MDHHS deployed.[23] As of July 2019, the application backlog gap had closed significantly, with UCL counties averaging about 6%, compared to 4% in non-UCL counties.[24]
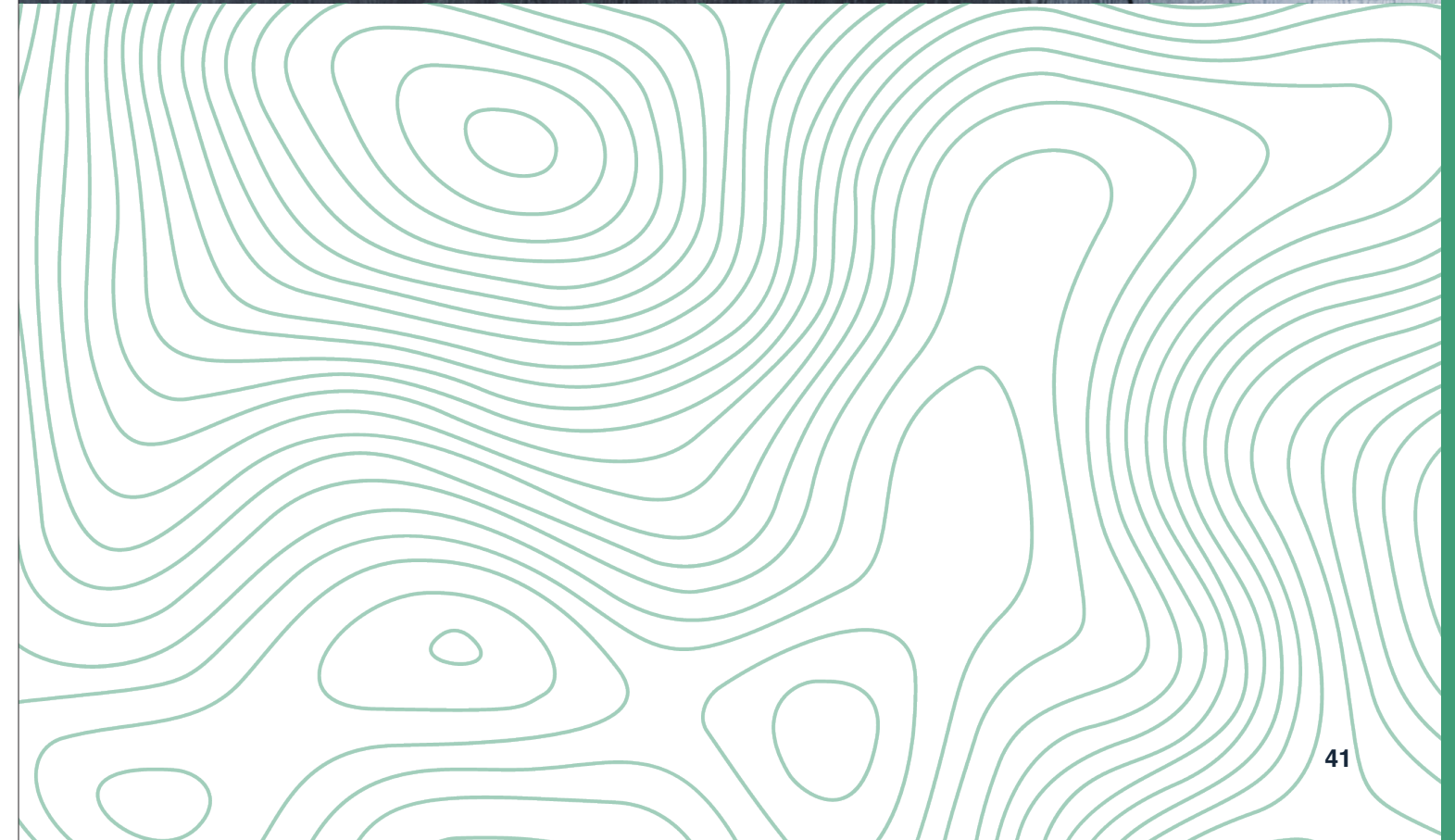
Conclusion

Conclusion

The process of developing a human-centered social safety net that meets the complex needs of residents takes time, partnership, investment, and perseverance. The MBAI has come a long way in the 11 years since the sweltering summer of 2008, yet the work continues as many of the elements of the project continue to evolve.

In the coming months and years, MBAI systems builders will continue to look for opportunities to improve processes within the application and administration of benefits, with an immediate emphasis on overcoming challenges associated with the rollout of new caseworking and telephone systems.

They are also committed to prioritizing investments in the quality and comprehensiveness of 2-1-1 data, leveraging CBOs to support Michiganders in navigating MI Bridges, and utilizing the administrative data framework and feedback loop built into MI Bridges to better target gaps in community services and track family outcomes over time.
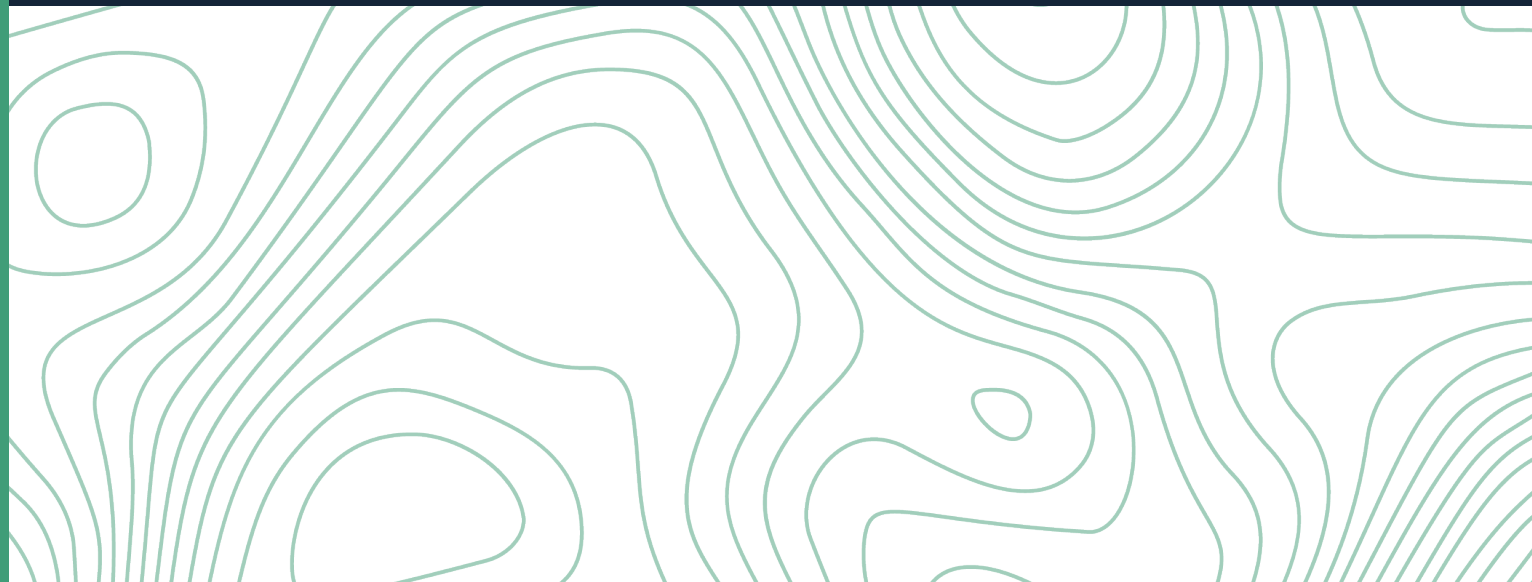
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