

What's Next in Virtual Human Services

June 9, 2021



**INFLUENCE
BUILD
CONNECT**

Who We Are



WE REPRESENT

The cabinet-level leadership of state and local health and human services agencies and the subject matter experts that help execute their missions.



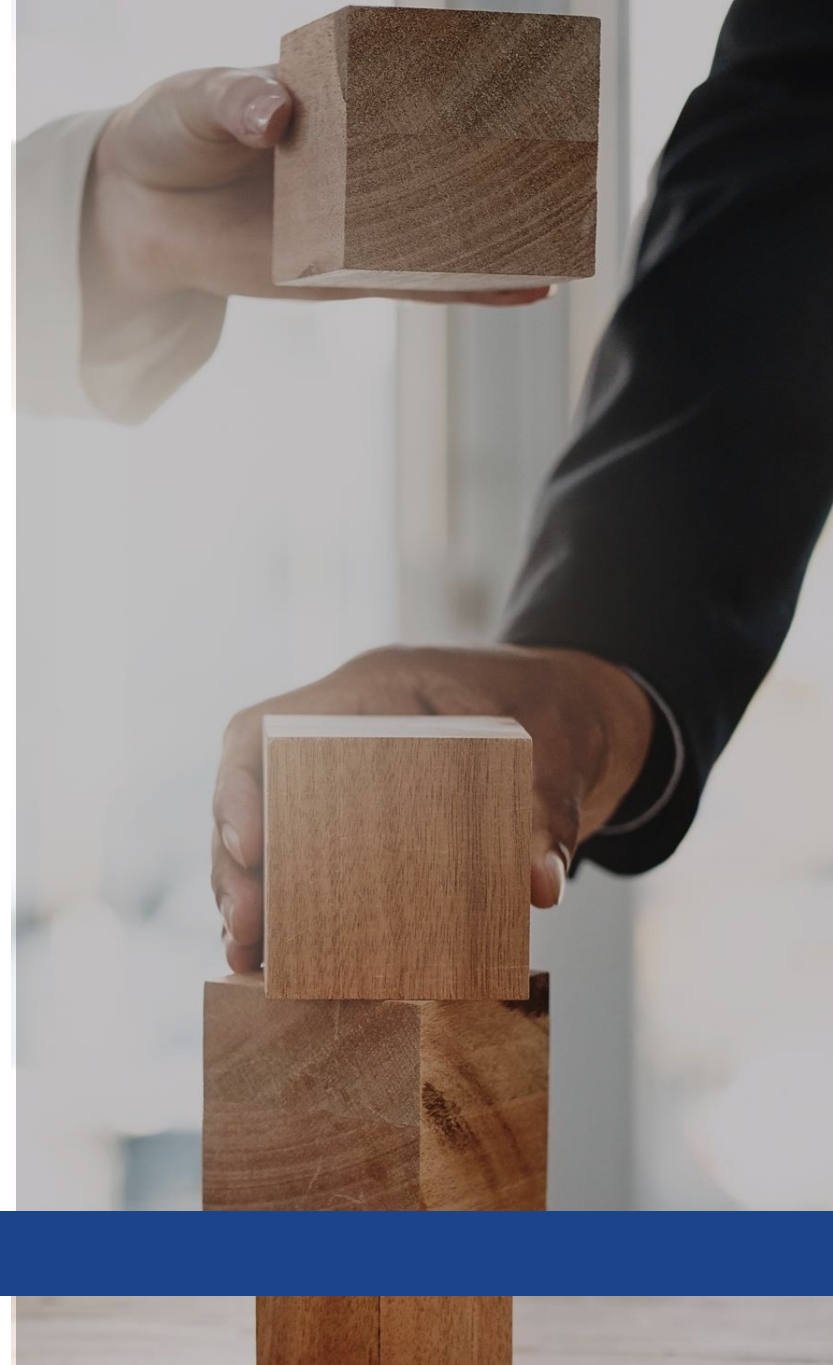
MEMBER EXPERTISE

Our members administer and align services that build resilience and bolster family well-being through access to food, health care, employment, child care, and other key building blocks. They are also leading experts in performance measurement and data analysis, IT systems, workforce development and training, and the legal dimensions of the health human services field.



WE SEEK TO

Influence modern policies and practices, help our members *build* capacity for their teams, and *connect* them to other human-serving organizations and policymakers.



We build well-being from the ground up.

Affinity Groups

Accelerate Peer-to-Peer Exchange

Expertise within member agencies also includes:

- Aging
- Behavioral Health
- Children's Health
- Child Support
- Disability
- Early Childhood Development
- Housing / Homelessness
- Medicaid
- Refugees



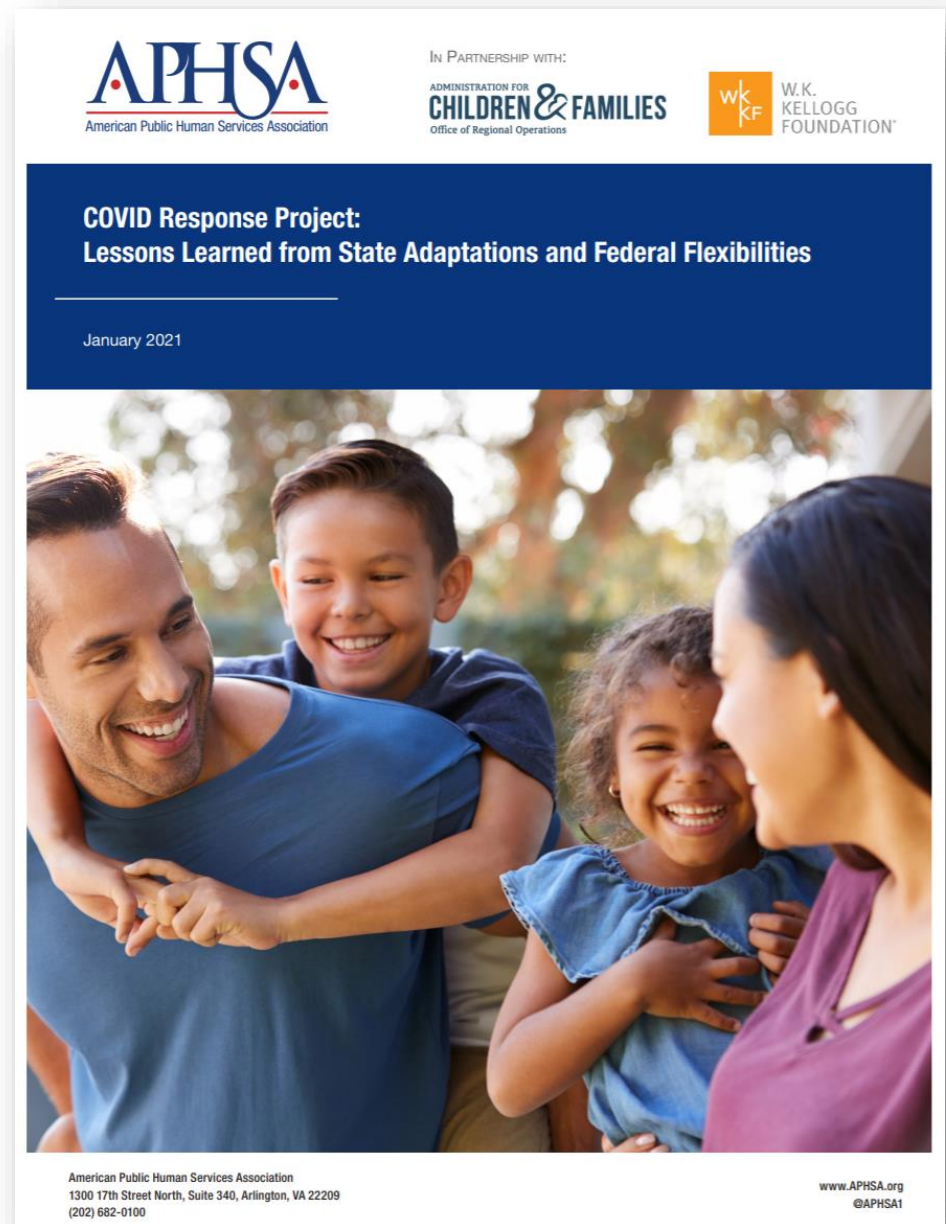


Lessons Learned from State Adaptations and Federal Flexibilities

Washington DC Metro Area

[View the Report](#)

- Use of Waivers and Other Flexibilities
- [Shift to Virtual Services](#)
- Partnerships and Whole Family Approaches
- Resiliency and Emergency Planning



II. Shift to Virtual Services



This transformation involved both...

- Significant investment in the *tools and infrastructure* used to deliver services (VPN, laptops, etc.), and
- A *cultural shift* in the norms and organizational practices followed by state and local agencies (telework, virtual case work, etc.).

What's worked well...

- Enhanced efficiency by moving to document upload via cellphone & other such benefits,
- Enhanced live customer support (via chatbot, phone centers, etc.), and
- Reduced travel time for workers meant more time to spend virtually with families.

What needs enhancement...

- Access to broadband,
- Lack of digital literacy in communities, and
- Determining the efficacy and risk of moving certain services to virtual.

Child Welfare

- Virtual visitations and home inspections
- Virtual court hearings
- Purchase of cell phones and laptops for families, youth, and birth parents
- Modification of IV-E prevention services for a virtual environment

TANF

- Significant uptick in virtual employment and training services
- Modifications to interviews
- Adjustments to Work Participation Rate requirements

Shift to Virtual Services: Mississippi

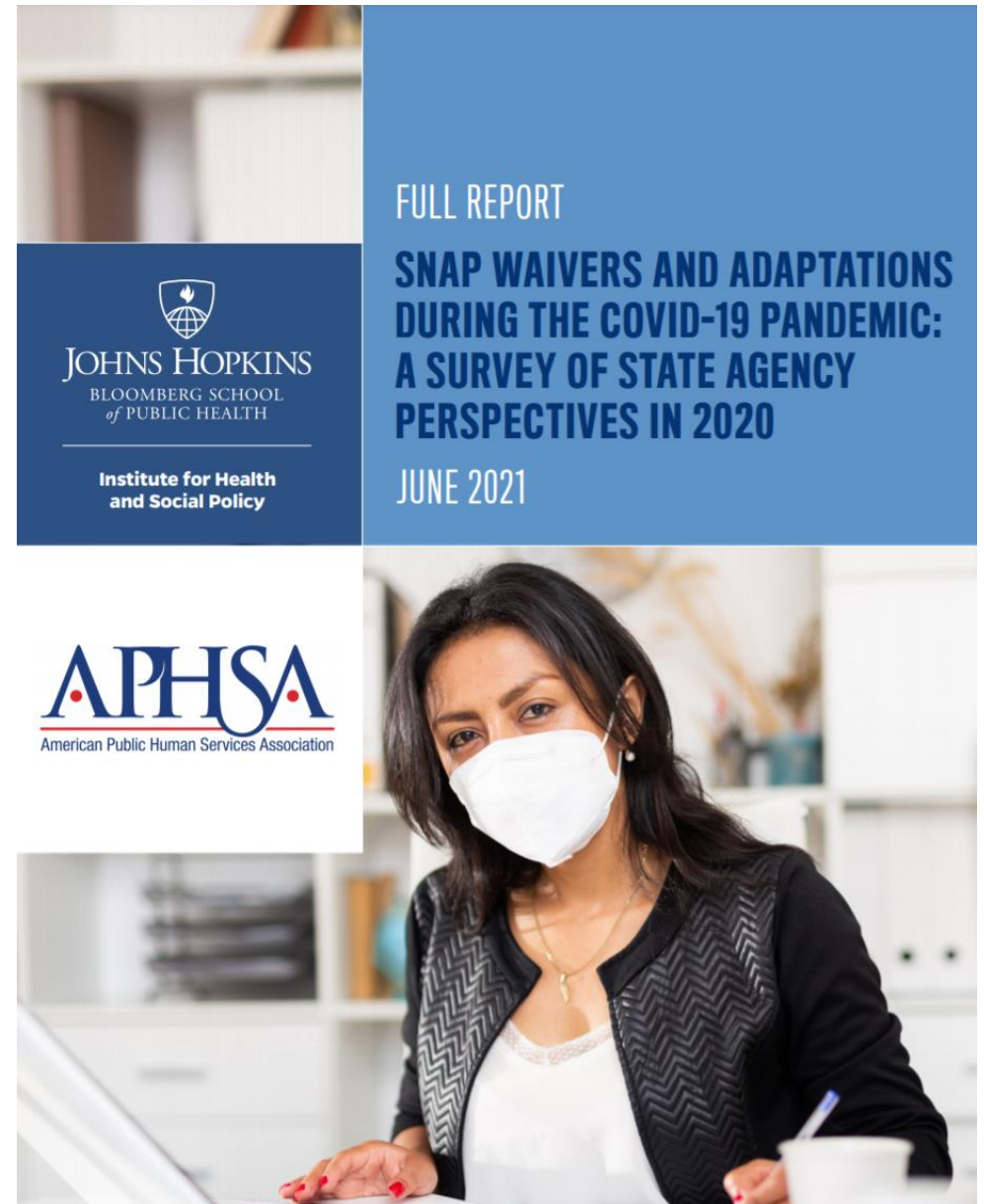
At the onset of the pandemic, all of Mississippi's 82 county offices shut down. Leadership quickly pivoted to move Department of Human Services (MDHS) staff to remote work, procuring more than 400 cell phones for staff to enable them to work outside the office and conduct phone interviews for people applying for benefits. The state IT team worked to connect their 35-year-old eligibility system to the Cloud so that staff could get remote access to their eligibility and case management system. The state also shifted to a unified case management model where SNAP staff from any county could help process incoming applications. This meant that when one county had a surge in applications, staff from surrounding counties could help support that workload. At one point in time, the state's adapted virtual services operations allowed MDHS staff to process more than 60,000 new SNAP applications in a single month (April 2020).



SNAP Waivers and Adaptations During the COVID-19 Pandemic: A Survey of State Agency Perspectives in 2020

[Full Report](#) [Executive Summary](#)

- Certification Periods and Interview Adjustments
- Application Support and Case Resolution
- Food Assistance and Food Purchasing
- Communications and Community Engagement



Methods of SNAP Case Processing



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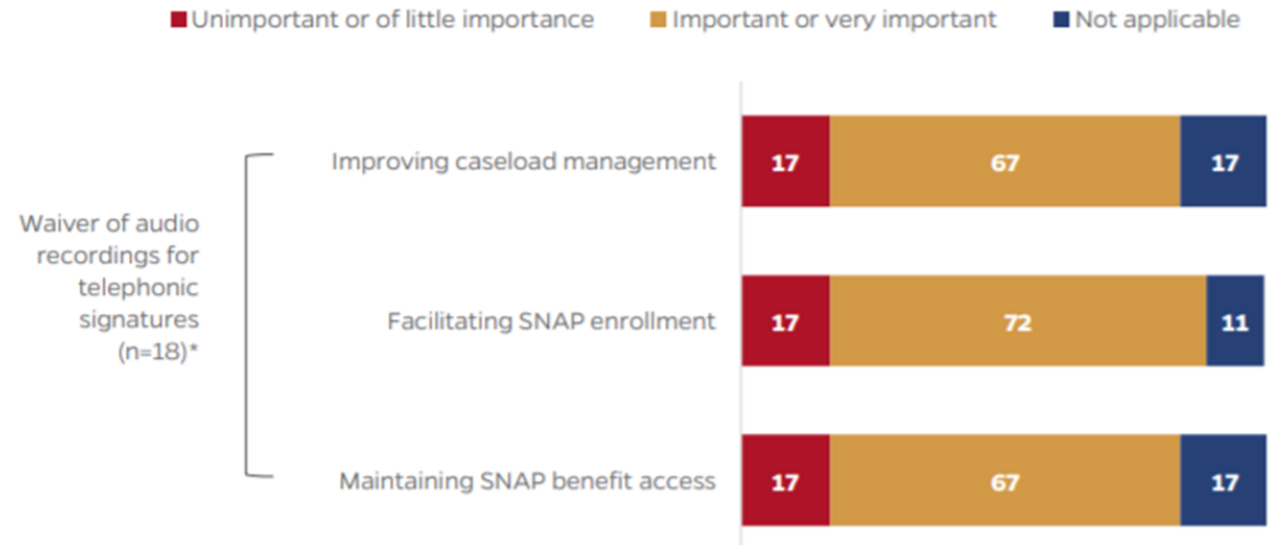
EXHIBIT 2.4.1. Options Offered Pre-Pandemic and Added or Expanded During the Pandemic to Support Core Case Functions (N=43)

Option to support case functions	Available pre-pandemic n (%)	Added n (%)	Expanded n (%)
Telephone			
Applications	17 (40%)	6 (14%)	1 (2%)
Recertifications	17 (40%)	6 (14%)	0 (0%)
Periodic reports	9 (21%)	2 (5%)	0 (0%)
Interview scheduling	29 (67%)	0 (0%)	3 (7%)
Overpayment claims	4 (9%)	0 (0%)	0 (0%)
Fair hearings	29 (67%)	3 (7%)	3 (7%)
Online			
Applications	38 (88%)	2 (5%)	7 (16%)
Recertifications	36 (84%)	1 (2%)	5 (12%)
Periodic reports	19 (44%)	1 (2%)	1 (2%)
Document submission	35 (81%)	3 (7%)	5 (12%)
Interview scheduling	6 (14%)	2 (5%)	1 (2%)
Overpayment claims	5 (12%)	1 (2%)	0 (0%)
Fair hearings	11 (26%)	1 (2%)	0 (0%)
Mobile-Friendly			
Applications	14 (33%)	1 (2%)	2 (5%)
Recertifications	13 (30%)	1 (2%)	2 (5%)
Periodic reports	7 (16%)	1 (2%)	1 (2%)
Document submission	15 (35%)	2 (5%)	3 (7%)
Interview scheduling	1 (2%)	0 (0%)	0 (0%)

Telephonic Signatures



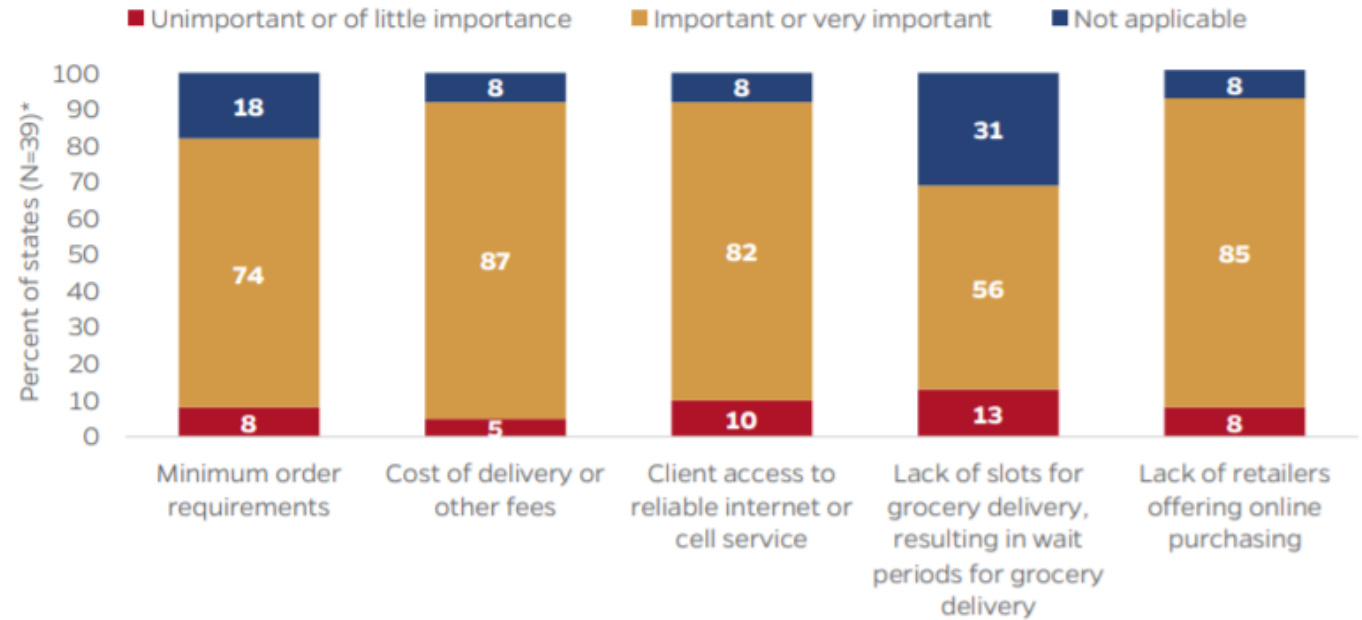
EXHIBIT 2.5.1. Perceived Importance of Waiver of Audio Recordings for Telephonic Signatures, Waiver to Temporarily Suspend Overpayment Claims Collection, and Waiver of Fair Hearings for Improving Caseload Management, Facilitating SNAP Enrollment and Maintaining SNAP Benefit Access During the Pandemic



SNAP Online Purchasing



EXHIBIT 3.2.4. Perceptions of Client Barriers to Utilizing Online Purchasing



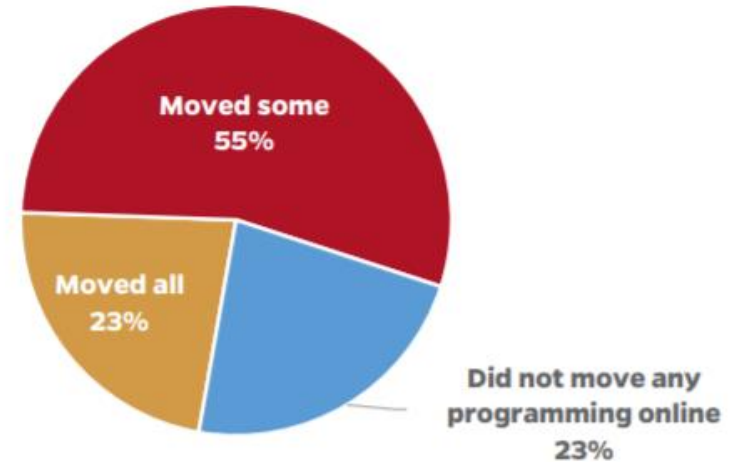
SNAP-Education



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EXHIBIT 4.3.1. Proportion of States That Moved SNAP-Ed Programming Online During the Pandemic (N=40)*



*States missing responses not included in denominator (n=2).
Note: Pie chart does not sum to 100% due to rounding.

“Many SNAP-Ed agencies did not actively use social media prior to the pandemic, so there was a significant transition, particularly in building a following with the qualifying SNAP-Ed audience.”

-State Survey Respondent

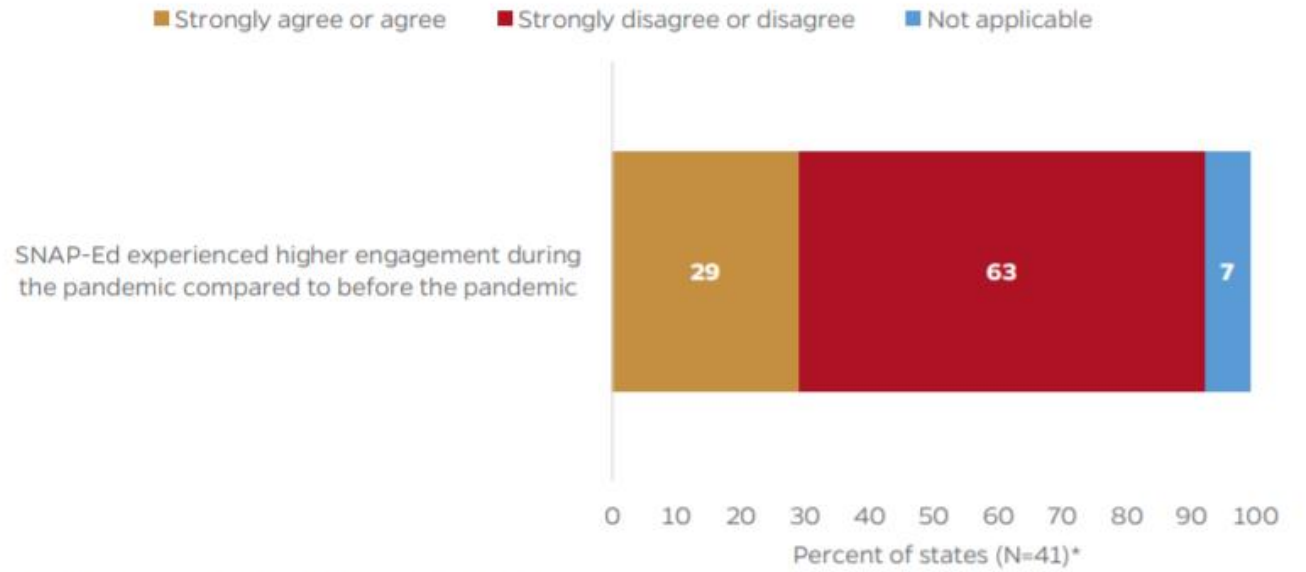
SNAP-Education



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EXHIBIT 4.3.4. Agreement That SNAP-Ed Experienced Higher Engagement During the Pandemic Compared to Prior to the Pandemic



*States missing response not included in denominator (n=2).
Note: Bar does not sum to 100% due to rounding.

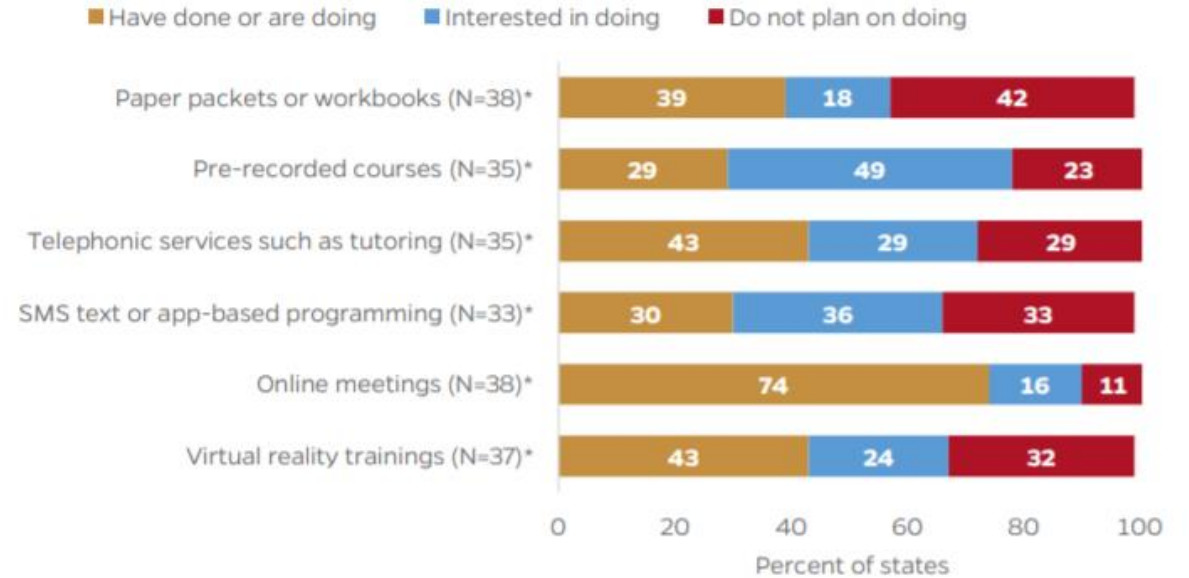
SNAP Employment & Training



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EXHIBIT 4.4.3. Resources Used by States During the Pandemic to Address the Need for Remote SNAP E&T Services



*States missing responses not included in denominator (n=5 for paper packets or workbooks, n=8 for pre-recorded courses, n=8 for telephonic services such as tutoring, n=10 for SMS text or app-based programming, n=5 for online meetings, and n=6 for virtual reality trainings).
 Note: Other resources included (1) virtual job fairs; (2) remote case management; (3) job readiness sessions; (4) occupational training; or (5) education. Not all bars sum to 100% due to rounding.

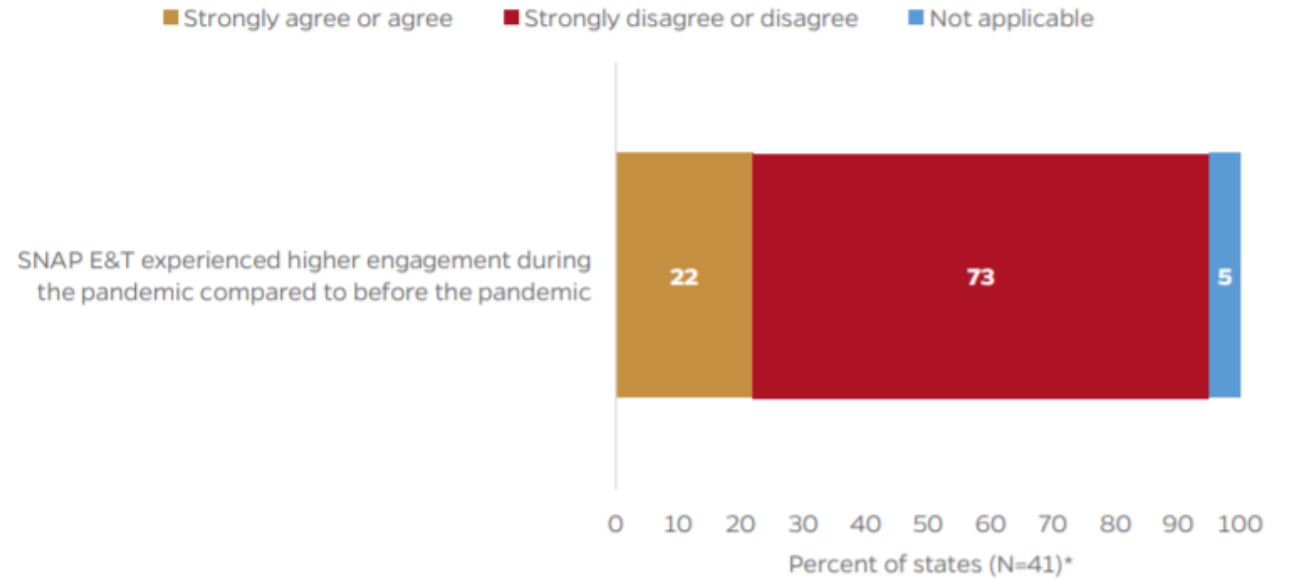
SNAP Employment & Training



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EXHIBIT 4.4.4. Agreement That SNAP E&T Experienced Higher Engagement During the Pandemic Compared to Before the Pandemic



*States missing response not included in denominator (n=2).

What's Next

- Further modernization to support virtual **application and case management functions**
- Additional research and technical assistance in virtual **education and training services** as one of many paths to client engagement
- Increased understanding of how **adapting evidence-based practices** to virtual services impacts fidelity
- Modernized food purchasing through expanded **SNAP online purchasing and mobile EBT**
- **Shifting case management models and IT investments** to ensure resiliency of human services systems

The logo for the American Public Human Services Association (APHSA) is centered within a circular graphic. The graphic consists of a white outer ring with a red and blue inner ring. Below the ring are several grey gears of varying sizes. The APHSA logo itself features the acronym 'APHSA' in a large, blue, serif font with red dots above the 'A' and 'S'. Below the acronym, the full name 'American Public Human Services Association' is written in a smaller, blue, sans-serif font.

APHSA

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Questions?

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