

Nebraska State Legislature

SENATOR SARA HOWARD

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COMMITTEES

Vice Chairperson - Health and Human Services
Business and Labor
Urban Affairs

December 15, 2016

Clerk of the Legislature
State Capitol Room 2018
Lincoln, NE 68509

Dear Mr. Clerk,

This letter serves as a final report of the LR 418 ACCESSNebraska Oversight Committee. LR 418 is a continuation of both the LR 33 (2015) and LR 400 (2014) ACCESSNebraska Special Investigative Committees created to conduct extensive studies of Nebraska's public benefits delivery system known as ACCESSNebraska that exists in the Nebraska Department of Health and Human Services (DHHS). Goals of the previous committees included creating an inventory of the current process of determining eligibility and addressing responsiveness and accuracy issues that rose to the level of requiring legislative attention and oversight.

The Legislative Resolution introduced in 2016, LR 418, stepped down from an investigative committee to an oversight committee after the last two efforts resulted in notable improvement in ACCESSNebraska. As stated in LR 418, a report to the Legislature would only be released if the Committee deems it necessary. Because of the continued improvement of the ACCESSNebraska system, the Committee finds that an update to the Legislature in the form of a letter is sufficient.

Throughout the interim the Committee conducted the following in its role of oversight of the ACCESSNebraska system:

- An informal meeting was held on June 7, 2016 where committee members were provided an update on the improvements and state of affairs at ACCESSNebraska. Most notably, Director Courtney Phillips, CEO of the Department of Health and Human Services (DHHS) shared the "Top 10" issues that have been the focus for improvement at ACCESSNebraska. Her testimony with those issues and explanation is included as a supplement to this letter.¹

¹ Other testifiers included Nebraska Appleseed, Marshall Lux, Office of the Ombudsman. A letter was also submitted from the NAPE/AFSCME.

- Committee staff attended weekly meetings with ACCESSNebraska leadership to monitor and learn what steps were being taken to improve the quality and efficiency of delivery of benefits for those seeking service through ACCESSNebraska. Throughout the summer call wait times continued to fall and accuracy steadily increased. In September 2016, timely processing of all SNAP benefits reached 99.22 percent. This concludes eight consecutive months exceeding 96 percent.
- The Ombudsman's office conducted a third annual survey (prior years surveyed include 2014 & 2015) of ACCESSNebraska employees. This survey utilized the same questions as years prior in order measure improvement. In general, it is the goal of employees to provide high quality and consistent customer service and they feel that the improvements made over the past years at ACCESSNebraska are helping them achieve that goal more clearly.
- In cooperation with Nebraska Appleseed, a survey was conducted of area stakeholders who work with those trying to obtain benefits through ACCESSNebraska. These organizations assist those who utilize ACCESSNebraska, such as seniors and low income individuals. The overall message from those survey results noted steady improvement in the system. A recurring concern is that of staff available to assist customers at local offices. Surveyed stakeholders work with individuals who do not have computer access, need assistance in filling out paperwork and getting questions answered. Stakeholders ask that more staff be returned to local offices so that those who need assistance may receive it directly from DHHS employees.
- An information request was submitted to DHHS regarding the Overpayment mailbox, an email address provided for employees to send reports of suspected fraud and possible client overpayments for both Medicaid and Economic Assistance. This inbox was highlighted as a significant issue in the 2015 Comprehensive Annual Financial Report, which includes the Department of Health and Human Services due to the amount of funds yet unrecovered because of unaddressed emails. DHHS responded with a report highlighting the new protocol established to help continue recovering funds and how to deal with the current influx of new emails. The Committee found this process sufficient.

Another notable achievement is the settlement of the class action lawsuit filed against the Department of Health and Human Services by Nebraska Appleseed and the National Center for Law and Economic Justice, *Leiting-Hall v. Phillips*. This settlement includes an agreement that DHHS will keep the percentage of timely benefit processing to not less than 96% for a period of 25 of 28 months. At this time, DHHS has successfully complied with the terms of the settlement.²

² All documents referenced in this letter, including the terms of settlement of the above mentioned litigation are provided to you in an appendix to this letter.

The LR 418 ACCESSNebraska Oversight Committee commends the Department of Health and Human Services on the increased functionality and productivity of ACCESSNebraska. The Committee recommends that ACCESSNebraska continue to strive for improvement and increased functionality to provide the most efficient service possible to those Nebraskans who apply for benefits through this public benefits delivery system. The Committee recommends that full oversight of ACCESSNebraska be returned to Director Phillips, the Department of Health and Human Services and the Health and Human Services Committee of the Legislature.

On behalf of the LR 418 ACCESSNebraska Oversight Committee, we would like to thank the Department of Health and Human Services for their continued dedication in our collective efforts to ensure that ACCESSNebraska is a functional, efficient benefits delivery system for the State of Nebraska.

Sincerely,



Senator Sara Howard, Chair
District 9



Senator Matt Hansen, Vice-Chair
District 26



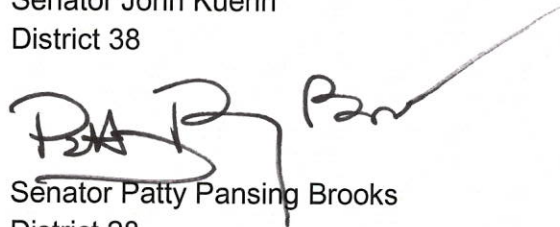
Senator Al Davis
District 43



Senator John Kuehn
District 38



Senator John McCollister
District 20



Senator Patty Pansing Brooks
District 28



Senator John Stinner
District 48

ACCESSNebraska Oversight Committee Meeting (LR 418)
June 7, 2016

Courtney Phillips, MPA
Chief Executive Officer
Nebraska Department of Health and Human Services

Good afternoon, Senator Howard, and members of the LR 418 ACCESSNebraska Oversight Committee. I'm Courtney Phillips (C-o-u-r-t-n-e-y P-h-i-l-l-i-p-s), Chief Executive Officer of the Nebraska Department of Health and Human Services.

Thank you for asking us to be here this morning. I value your interest and look forward to updating you on the progress we've made this this past year.

ACCESSNebraska has taken many steps forward in improving service delivery.

Our call wait times have been averaging five minutes or less since September. The average days to process an Economic Assistance application has declined from 17.8 days in May 2015 to 7.99 days in April 2016.

The SNAP program has met, or exceeded, the SNAP processing timeliness of 96% or better since February 2016.

ACCESSNebraska staff, and others in the Department who support ACCESSNebraska, are continually working on process improvement. Last year, we discussed with this Committee 10 focus areas that were identified as barriers to an efficient operation.

Those items and the updates include:

1. The first is our **Mail operations.**
Last year we discussed having mail delivered, scanned and indexed into clients files more quickly. In August, the staff began processing the daily mail at 2 a.m. Most days the mail is scanned into the system and available for staff viewing by 8 a.m.
2. We also addressed the **Interactive Voice Response (or IVR) call routing menus.**
As we discussed last year, an updated IVR system was released April 18th. Through self-service options, clients can now obtain the scan date of the last document we received, as well as the due date for their next program review. The Department encourages clients to utilize self-service information, which is available 24 hours a day, 7 days a week.

Additional changes included the ability to complete an application via the telephone for Economic Assistance. The ability to apply via telephone has been available for Medicaid and Long-Term Care clients since the implementation of the Affordable Healthcare Act.

3. **Recruitment and retention of employees** remains a priority.

Last year we planned to do a better job recruiting and retaining good employees. Work processes were changed to better train and prepare staff for their work in the Service Centers and Local Offices. The training process now includes more activities to be completed outside of the formal classroom training. The work site field learning experiences have increased interaction with the supervisor and work team during the training process. The Supervisor is more involved with classroom training and communicating with the trainers.

Human Resources also has improved the hiring processes to shorten the length of time a position is vacant. In February 2016 it took an average of 64 days from when the position was vacated to when the next person started work. In April 2016 it took 51 days from when a position was vacated until the next person started work.

The turnover rate for ACCESSNebraska is 3-4% in 2016. Experienced local office staff are retiring which is the main reason for turnover in those offices. The Customer Service Center's staff frequently leave to other promotional opportunities inside the Department. The team is working on a staff survey to assess employee satisfaction. The findings will be utilized to develop employee retention efforts.

4. Another area is **program polices**.

As discussed last year, many policies have been streamlined, and the verification processes have been simplified where possible. For example, in the Low-Income Home Energy Assistance Program, policy changes lead to a more efficient processing of heating season applications. The regulations were modified in regard to income verification, payment history and calculations required. Before these changes, applications were taking 30-45 days to process. These policy simplifications resulted in the case manager being able to process energy benefits the same day as receiving the application in many instances. Policy review and simplification is an ongoing process for all ACCESSNebraska programs.

5. We have done an **analysis of the reasons clients call**.

Benefits continue to be the primary reason clients call to check the status of an application, and to see if we have received their documents. Although the reason for most calls has stayed consistent, call volume decreases as the timeliness of processing applications improves. Economic Assistance call volume has been slightly over 30,000

calls monthly in February, March and April. This is about 25% lower than the previous 40,000 calls per month or higher in 2015. The lower call volumes can be attributed to the improvement in timeliness of application processing. The average processing time went from a high of 40 days in November 2014 to around 8 days in April 2016.

In May, phone volume increased to the 40,000 level. This is due to the end of the school year when many families have changes in income and child care expenses during the summer months. In addition, Economic Assistance implemented the ability to apply by telephone on April 18. This additional method of accessibility is part of the volume increase.

Medicaid and Long-Term Care phone volume has been steady at about 30,000 calls monthly.

6. We have also done an **analysis of after-call work.** Analysis continues on after-call work. Economic Assistance has lowered the time spent in after-call work from 15 minutes or more to around 12 minutes. Now, we have supervisors and lead workers walking the floor so they are readily available to staff needing assistance. In addition, staff is utilizing the electronic data sources such as TALX to verify income. Case managers are also telling clients what verification is needed and letting the client know that they can submit the verification by email after taking a picture with their phone. These changes have been key to reducing processing time.
7. **Communications** remain an important component of our work. Our website, some correspondence and major forms have been rewritten so they are easier to understand. Several client forms were added to the website. Services have been promoted to ease clients' interaction with ACCESSNebraska. Improving communication is an ongoing activity.

ACCESSNebraska still has a monthly conference call with Community Partners which is focused on keeping partners aware of recent policy and process changes in ACCESSNebraska. The call includes a question and answer portion to answer Partner's questions. Community Partners include: Community Action Agencies, Managed Health Care Providers, and service providers such as Aging Partners, Head Start, and Food Banks. Advocacy agencies such as Appleseed also participate.
8. **Workforce management and capacity planning** has made an impact. A Workforce Administrator, who joined the team in September, forecasts daily call volume for the Customer Service Centers. Time studies also have been completed on Economic Assistance case processing to forecast work production to know how many staff to have on certain tasks at certain times. Daily production forecasts are utilized to

assign staff to a particular task for the team to meet production goals. Tasks include: phone call volume, work tasks, and initial and recertification application processing. Production goals include: Average Call Processing time at 5 minutes; Longest Wait for a call to be answered at 10 minutes; and an average of 10 days for Application Processing. Workforce management forecasting has been very valuable for our planning efforts. The Administrator is training a team of people to assist in this activity going forward.

9. Another area is **work tasks.**

A year ago, the number of work tasks for Economic Assistance was over 50,000 and growing. The implementation of process improvements, and the use of daily huddles, has allowed Economic Assistance to achieve no work tasks in the system over five days since March. The number of work tasks fluctuates depending on the work volume, but is now usually less than 10,000. Work tasks include case changes received via electronic data source, online change report, and documents submitted via email, online and U.S. mail.

10. The last of the 10 items is **operational reporting and forecasting.**

In the past year, the operational data reporting has improved. Reports are now available that include the amount of work needing to be processed as well as the work that was processed the previous day, week, and month. Operational reporting and forecasting are essential tools to manage the work.

Communication and management have been keys to our improvement. Daily, a management huddle is held in Economic Assistance and Medicaid. During the huddles, discussion is held on goals for the day, amount of staff available and any issues or problems to completing the work.

Staff have done a good job keeping the average call wait time at or below five minutes for the last seven months.

Staff are now working toward a goal of the longest wait time for a client not to exceed 10 minutes. Progress has been made on this goal which had wait times over an hour in 2015 to May 2016 when the longest wait was 27 minutes.

Although improvements have been made, our work isn't done. Work groups continue to focus on process improvement and implementation of new systems. Development work continues on NTRAC, Medicaid and Long-Term Care's new eligibility system. The phone system is also being upgraded to increase productivity and is scheduled to be operational in fall/winter of 2016-2017.

ACCESSNebraska will continue to adjust to changes in the operating environment and economic conditions. Last year the Department mentioned a dashboard to publically measure how we're

doing. While we are sending you regular updates of the dashboard, we encourage you to go to our website at any time to view our latest performance. We also welcome feedback and ideas to improve our services.

Again, thank you for your support. I'm happy to answer any questions you may have.





June 7, 2016

Senator Sara Howard, Chair
ACCESSNebraska Special Investigative Committee
Room 1524, State Capitol
Lincoln, NE 68509

RE: LR 418

Senator Howard and Members of the ACCESSNebraska Special Investigative Committee,

My name is Molly McCleery, and I am a staff attorney in the Health Care Access Program at Nebraska Appleseed. Nebraska Appleseed is a nonprofit legal advocacy organization that fights for justice and opportunity for all Nebraskans. Since the beginning of the transition to the ACCESSNebraska system, our office has been involved in efforts to ensure clients interacting with the system are able to access services and effectively navigate the system.

Due to the critical nature of food assistance, federal statutory requirements exist to ensure that those eligible for SNAP are able to apply for and receive benefits in a timely way. After months of declining performance by the Department of Health and Human Services (DHHS) in the timely processing of SNAP applications, our office filed *Leiting-Hall v. Phillips*, a lawsuit challenging DHHS's systemic and persistent processing delays. This lawsuit, filed along with the National Center for Law and Economic Justice, was filed on behalf of two individuals who had experienced such delays. When the lawsuit was filed in August of 2014, these two individuals' applications were among the roughly 30% of applications that were not processed timely.

The case was certified as a class action, representing the widespread nature of the claimed delays. This spring, the parties were ultimately able to come to a settlement agreement. On April 1, 2016, after notifying potential class members of settlement terms and providing them with the opportunity to object, the parties had a hearing, and the settlement order was entered by the United States District Court for the District of Nebraska. The key terms of settlement include DHHS processing initial and renewal SNAP applications and deciding eligibility within the time frames required by federal law. DHHS must timely process 96% of applications for 25 out of 28 months, and the plaintiffs retain the right to enforce the order if DHHS does not meet these performance standards. Compliance with these performance standards will be determined based on monthly reports by DHHS that are

provided to plaintiffs' attorneys. Additionally, DHHS has selected a contact person to whom plaintiffs' attorneys can bring potentially delayed cases for investigation.

Ultimately, we are pleased that we were able to sit down with DHHS attorneys and staff to resolve this case. The terms of the settlement agreement both resolve our clients' claims and are also terms with which we believe DHHS can comply. Throughout the pendency of the lawsuit, DHHS made significant strides in the timely processing of applications, and we do not anticipate it will fail to meet the performance standards set out in the settlement agreement.

However, while we have come to a resolution on this one important issue, we appreciate the continued oversight of this committee to ensure that the ACCESSNebraska system is effective and efficient for clients. Last summer, when DHHS administrators briefed the LR 418 committee on its goals for ACCESSNebraska, a number of large, systemic priorities were described, including goals around recruitment and retention of staff. Such priorities are necessary; however, systemic change does not happen quickly. Consequently, it is important to ensure that improvements are sustainable and that DHHS staff has the resources needed to effectively serve clients.

Sincerely,
NEBRASKA APPLESEED

A handwritten signature in black ink, appearing to read 'Molly McCleery', written in a cursive style.

Molly McCleery, J.D.
Staff Attorney, Health Care Access Program



NEBRASKA ASSOCIATION OF PUBLIC EMPLOYEES

6/2/16

Dear Senator Howard and member of the LR 418 Committee,

Thank you for the invitation to appear before the committee. Unfortunately I have a previous commitment and will only be able to submit this letter.

First I would like to say, I do think things are getting better as far as processing applications. That said however I have a few issues at present.

One of my main issues is the lack of clear direction and communication statewide and how that affects the workforce in each location.

One example that, for me, shows a lack of proper communication to management around the state deals with a weather related issue on leave usage from February. It is being handled in many different ways at different offices. We are June still trying to fix the leave issue at some offices.

As I was preparing for this letter I contacted some of our stewards and activist and asked for their input. I will simply copy and paste some of their comment into this letter after I cover an issue that I have.

Many of these concerns were brought to me before and I asked for a meeting with Doug Weinberg to discuss them on May 6, 2016. Doug and I met and he did seem to be receptive to the issues I raised with him.

At the conclusion of my meeting with Doug, I asked for a state-wide labor management meeting and was told he needed to check with agency HR and get back to me on the meeting; I am still waiting for him to get back to me.

The issues that were raised when I asked workers for input are listed below in the workers own words. Just so you know, several refer to NOA's. Those are notice of allegations. These are issued to a worker before an investigative meeting to determine if discipline is warranted.

1. Change in "Goals" has increased quantities again. Measured by the recent successes in wait times and completing work tasks timely. Why are we going to work by the number instead of just working on each case until completion and making sure benefits are accurate? Seems to be taking steps backwards. Or a way to cull out the workforce again

2. We are still having people put on work improvement plans because their numbers aren't high enough for the state even though we've been told we aren't focusing on numbers. The people in economic assistance don't have the flexibility in using leave time now. Staff is micro managed
3. What I see is they are picking on staff that has been around for long periods of time. They are posting each employees stats, with their name for all staff to see. They are pushing quota, not accuracy. Staff in the NE City has no team work anymore. It is everyone for themselves mentality and if they can rat on another staff to make them look good they do. Staff morale is at an all-time low.
4. NOAs are out there for nonperformance or not getting enough production. The lion share of NOAs that I have heard about or been involved with all deal with older workers. Workers with the longest state life seem to be targeted. They also receive the least sympathy because the inference is that as a long time worker, you should already know.
5. I have been hearing that the new folks, once they learn that you have to make a quota and that folks have been fired for not making it, are looking for the door to leave. Employees are afraid to take vacation and in a number of cases bathroom breaks. Some of the NOAs reflect too many and to long of bathroom breaks. This bad for recruiting and retention for the above reasons.

In closing I think there is a disconnect between administrators in the field offices and what Lincoln is telling me about messaging that goes out. I believe a state-wide Labor/Management meeting is necessary to fix what appear to be communication issues. Upper management needs to hear from the workers what is being told to them in the field, and say that is the correct message or it is not. It is hard for me to believe the message is correct, because the message is not consistent from area to area.

I want to thank you again for the invitation to appear and for all the hard work you do on behalf of the citizens of Nebraska.

Sincerely,

A handwritten signature in black ink that reads "Mike Marvin". The signature is written in a cursive, slightly slanted style.

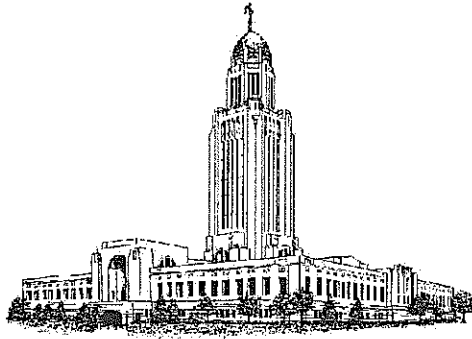
Mike Marvin, Executive Director.

Nebraska State Legislature

SENATOR SARA HOWARD

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COMMITTEES

Vice Chairperson - Health and Human Services
Business and Labor
Urban Affairs

June 28, 2016

Courtney Phillips, CEO
Nebraska Department of Health and Human Services
P.O. Box 95026
Lincoln, NE 68509-5026

Dear CEO Phillips,

Thank you for your attendance and testimony at the June 7th meeting of the LR 418-ACCESSNebraska Oversight Committee. The information you and your staff provided was both informative and helpful. We appreciate you being willing and open to share information with the committee regarding the progress of ACCESSNebraska.

One of the topics discussed after your testimony was in regard to the overpayment mailbox, an email address provided to employees to send reports of suspected fraud and possible client overpayments for both Economic Assistance and Medicaid. After further discussion with committee members, I would like to request the following information:

- Current number of emails/reports in the mailbox with the range of dates that they were sent that have not yet been or are currently being addressed;
- Number of fraud and overpayment incidences as a result of reports to the mailbox being addressed in the current fiscal year;
- Rules, regulations and procedures pertaining to collection of overpayments or recovery of benefits obtained fraudulently. This includes rules and regulations that are in "draft" status;
- Total of dollar amounts collected since July 1, 2015, amounts unable to be collected and an estimate of amounts that are expected or attempted to be collected in the current fiscal year.

As you know, this topic was highlighted in the LR 34-ACCESSNebraska Special Investigative Committee Report¹ that was issued to the legislature at the beginning of 2016 and in the findings of the 2015

¹ "LR 33-ACCESSNebraska Special Investigative Committee Report to the Legislature," Nebraska Unicameral Website, viewed 6/15/2016,
http://www.leg.ne.gov/pdf/reports/committee/select_special/lr400_2014/lr400_2014.pdf

Comprehensive Annual Financial Report, which includes the Department of Health and Human Services². The Committee hopes that this will help paint an accurate picture about the future of the ACCESSNebraska system. As always, please do not hesitate to contact me with any questions or concerns. I look forward to hearing from you.

Sincerely,



Senator Sara Howard, Chair
ACCESSNebraska Oversight Committee
Legislative District 9

CC: ACCESSNebraska Oversight Committee
Bryson Bartels, DHHS Legislative Liaison

² "7/1/2014-6/30/2015 DHHS Overpayments CAFR and Single Management Letter" Nebraska Auditor of Public Accounts Website, viewed 6/15/2016, http://www.auditors.nebraska.gov/APA_Reports/2015/SA25-09112015-July_1_2014_through_June_30_2015_DHHS_Overpayments_CAFR_and_Single_Management_Letter.pdf

July 18, 2016

Senator Sara Howard
Chair of Special Investigative Committee-ACCESSNebraska
State Capitol
PO Box 94604
Lincoln, NE 68509-4604

Dear Senator Howard:

Thank you for the opportunity to provide an update to the LR 418 ACCESSNebraska Oversight Committee regarding overpayments.

The total number of pursuable referrals awaiting an overpayment determination on June 30, 2016 was 7,550 with the oldest referral received in August 2015. Overpayment incidences addressed as a result of reports to the mailbox in state fiscal year 2016 totaled 2,510.

Program regulations allow for overpayments to be determined for one year after discovery. Once the overpayment is determined, attempts to collect the overpayment are made until probate on estate at the time of death.

The total amount collected since July 1, 2015 was \$1,813,047. The outstanding overpayment dollars increased by \$300,000 in the last state fiscal year. The team averaged \$151,087 per month in collections. We intend to meet or surpass that monthly average in state fiscal year 2017.

Strategies now taken to prevent the occurrence of an overpayment include: processing client changes, such as a new job, the same day the report is received by DHHS; improved communication to the client regarding reporting changes to the agency and the time frame to make the report; and the implementation of more electronic data sources to verify changes, such as the work number data source to verify employment status and income.

Strategies put in place to improve the determination of overpayments include: the assignment of 12 staff positions and a supervisor to work full time on overpayment determinations; additional training; streamlined work processes; standardized operating procedures including new referral forms and improved communication to clients; and overpayment appeals handled by the overpayment team who determines the overpayment, instead of by the eligibility staff.

Procedures put in place to improve the overpayment collection process include: recoupment and offset efforts taken unless prohibited by law; consideration of voluntary payments over time; issuance of monthly billing statements for all accounts receivable, except when prohibited by law; accounts receivable in excess of \$10,000 and more than 90 days delinquent referred to DHHS Legal Services for decision on further collection efforts; acceptance of reasonable settlement offers; interest charged as required by statute or court order; and criteria established for accounts deemed uncollectible and presented for write off.

IN THE UNITED STATES DISTRICT COURT
DISTRICT OF NEBRASKA

TAMI LEITING-HALL and ASHLEY)	CASE NO. 4:14cv3155
DANKLEFF, individually and on behalf of all)	
others similarly situated,)	(CLASS ACTION)
)	
Plaintiff,)	
)	
v.)	
)	
COURTNEY PHILLIPS, as Chief Executive)	
Office of the Nebraska Health and Human)	
Services, and DOUGLAS WEINBERG, as)	
Director of the Division of Children and Family)	
Services,)	
)	
Defendants.	

STIPULATION AND ORDER OF SETTLEMENT

Plaintiffs brought this action under 42 U.S.C. § 1983 alleging that Defendants COURTNEY PHILLIPS, as Chief Executive Officer of the Nebraska Department of Health and Human Services (or “DHHS”), and DOUGLAS WEINBERG, as Director of the Division of Children and Family Services, fail to provide Supplemental Nutrition Assistance Program (“SNAP”) benefits within the time frames mandated by federal law to eligible households who file initial or renewal applications because of policies and practices that a) unlawfully deny applicants the opportunity to comply with application procedures and thereby result in Defendants denying their applications; and b) otherwise unlawfully delay processing resulting in eligibility decisions beyond federally-mandated time limits.

Plaintiffs seek declaratory and injunctive relief against Defendants on behalf of themselves and members of a certified class to require Defendants to (1) ensure that SNAP applicants have the right to apply, including the right to apply for recertification, and to complete the application process in time to receive SNAP benefits within the federally mandated time frames; and (2) determine such

households' eligibility within the mandated time frames and provide SNAP benefits within the mandated time frames to those eligible. A class has been certified in this action.

Defendants filed an Answer to Plaintiffs' Complaint disputing Plaintiffs' allegations, raising various affirmative defenses, and contesting Plaintiffs' claims for declaratory and injunctive relief.

Plaintiffs later filed a Motion for a Preliminary Injunction, which both parties have briefed and which is pending before the Court.

Nevertheless, in the interest of avoiding the costs, burdens, and uncertainty of potential litigation, the parties have agreed to resolve all issues presented in this litigation without further proceedings and without Defendants admitting any fault or liability. Whereas the parties desire to settle this action, and good cause appearing,

IT IS HEREBY ORDERED:

I. DEFINITIONS

For purposes of this Stipulation and Order of Settlement (hereinafter "Order"), the following definitions apply:

1. **"Timely Denial"** means, as to initial applications for SNAP benefits, an action taken by the case worker or the data system to deny the initial application and to cause a notice to be generated on or before the 30th day after the application was submitted to the agency, unless the 30th day falls on a weekend or holiday. If the 30th day falls on a weekend or holiday, the denial of SNAP benefits shall be timely if the SNAP application is denied on the next business day after the weekend or holiday.

2. **"Timely Application Approval"** means a) as to applications eligible for expedited processing, that SNAP benefits are issued to the household no later than the 7th day following the

date on which the household submitted the application; and b) as to applications subject to 30 day processing, that SNAP benefits are issued to the household no later than the 30th day following the date on which the household submitted the application.

3. **"Timely Recertification Application Approval"** means a) as to households that have filed a timely recertification application pursuant to 7 C.F.R. § 273.14 (c), that SNAP benefits are issued not later than 30 calendar days after the date the household received its last allotment or no later than the household's normal issuance cycle in the month following the end of its current certification period as provided in 7 C.F.R. §§ 273.14 (d)(1) and (2); and b) as to households that have filed a timely recertification application after the 15th day of the last month of the certification period, but before the end of the certification period, that SNAP benefits are issued not later than 30 calendar days after the application was submitted.

4. **"Recertification Application Denial"** means a) a denial or termination of SNAP benefits at the end of a household's certification period that is a result of a worker action to deny or terminate benefits; and b) the automatic closure of a household's case at the end of the certification period.

5. **"Timely Recertification Application Denial"** means a) as to timely filed recertification applications, an action by the worker or the data system to deny and mail notice of such denial by the end of the household's current certification period; and b) as to recertification applications filed after the 15th of the last month of the certification period, but before the end of the certification period, an action by the worker or the data system to deny and mail notice of denial by the 30th day following the date the application was submitted, or in the cases where the 30th day falls on a weekend or holiday, the next business day following the 30th day.

6. **“Date of Issuance”** means the date that SNAP benefits are available to the household and such date is 1 day after the SNAP application (initial or recertification) is approved.

II. CLASS CERTIFICATION

7. During the term of the Court's jurisdiction, including any extensions, a class is certified consisting of all Nebraska residents who, since January 1, 2012, have applied, are applying, or will apply for Supplemental Nutrition Assistance Program (“SNAP”) benefits from the Nebraska Department of Health and Human Services through an initial and/or recertification application.

III. DEFENDANTS' OBLIGATIONS

8. Set forth in sub-paragraphs 8(a) to 8(j) are Defendants' obligations under federal statutes and regulations as to initial and expedited SNAP applicants, with which Defendants shall comply:

- a. Defendants shall screen applicant households to determine if the household is eligible for expedited service of their SNAP application at the time the household applies for benefits in accordance with 7 U.S.C. § 2020(e)(9) and 7 C.F.R. § 273.2(i)(2).
- b. Defendants shall provide expedited service of a SNAP application to households eligible for such expedited service no later than the seventh calendar day following the date the application is filed as set forth in 7 U.S.C. § 2020(e)(9) and 7 C.F.R. § 273.2(i)(3).
- c. Defendants shall provide eligible households that complete the initial application process an opportunity to participate in the SNAP program as soon as possible, but no later than thirty calendar days following the date the application was filed as required by 7 U.S.C. § 2020(e)(3); 7 C.F.R. § 273.2(g)(1).

- d. Defendants shall schedule interviews for all applicant households who are not interviewed on the day they submit their applications and shall schedule interviews to ensure eligible households receive an opportunity to participate within 30 days after the application is filed as required by 7 C.F.R. § 273.2(e)(3).
- e. As required by 7 C.F.R. § 273.2(e)(3), Defendants shall notify each household that misses its interview that it missed the scheduled interview and that the household is responsible for rescheduling a missed interview. If the household contacts Defendants within the 30 day application processing period, Defendants shall schedule a second interview. Defendants shall not deny a household's application prior to the 30th day after application if the household fails to appear for the first scheduled interview. If the household requests a second interview during the 30 day application processing period and is determined eligible, Defendants shall issue prorated benefits from the date of application.
- f. In accordance with 7 C.F.R. § 273.2(c)(5), Defendants shall give each household at the time of application a notice of the verification requirements that the household must meet as part of the application process. The notice, *inter alia*, shall inform the household of the agency's responsibility to assist the household in obtaining verification provided the household is cooperating with the state agency as specified in 7 C.F.R. § 273.2(d)(1).
- g. Defendants shall give households at least 10 days to provide the required verification in accordance with 7 C.F.R. § 273.2(f).
- h. For households that qualify for expedited processing, Defendants shall verify the

applicant's identity through a collateral contact or readily available documentary evidence as provided in 7 C.F.R. § 273.2(f)(1). Defendants shall make reasonable efforts to verify other eligibility factors specified in 7 C.F.R. § 273.2(f) within the expedited processing standards. However, Defendants shall not delay benefits beyond seven days solely because these eligibility factors have not been verified. 7 C.F.R. § 273.2(i)(4).

- i. Defendants shall certify households for a definite period of time as required by 7 C.F.R. § 273.10(f).
- j. Defendants shall provide each applicant with a notice of eligibility determination for SNAP, denial, or pending status, including notice of the right to a fair hearing, as required by 7 C.F.R. § 273.10(g)(1).

9. Set forth in sub-paragraphs 9(a) to 9(f) are Defendants' obligations under federal statutes and regulations as to recertification SNAP applicants, with which Defendants shall comply:

- a. Defendants shall give each household notice of the expiration of its certification period and the need to submit a new application in order to renew its eligibility for a new certification period. Defendants shall give this notice prior to the start of the last month of the household's certification period as required by 7 U.S.C. § 2020(e)(4) and 7 C.F.R. 273.14(b).
- b. Defendants shall provide the SNAP allotment to each household that files an application for recertification no later than fifteen days prior to the day upon which the existing certification period expires and, if found to be still eligible, no later than one month after the household received its last allotment issued pursuant to the prior

certification as required by 7 U.S.C. § 2020(e)(4).

- c. Defendants shall provide the household with a notice of required verification and the due date for such verification. Defendants shall give the household at least 10 days to provide the required information. Defendants shall also give each eligible household whose eligibility is not determined by the end of its current certification period due to the time period allowed for submitting any missing verification an opportunity to participate, if eligible, within 5 working days after the household submits the missing verification. 7 C.F.R. § 273.14(b)(4).
- d. Defendants shall provide eligible households an opportunity to receive SNAP benefits no later than 30 calendar days after the date the household received its last allotment or, as applicable, by its normal issuance date in the month following the end of its certification period as required by 7 C.F.R. § 273.14(d).
- e. Defendants shall provide households with a Notice of Expiration containing, *inter alia*, the date the certification period expires and the date by which the household must submit an application for recertification in order to receive uninterrupted benefits as required by 7 C.F.R. § 273.14(b).
- f. Defendants shall schedule interviews so that the household has at least 10 days after the required interview in which to provide verification before the certification period expires, as required by 7 C.F.R. § 273.14(b)(3)(iii).

10. Notwithstanding any other provision of this Order, Defendants shall fully comply with the timely processing requirements of the applicable SNAP statutes and regulations. For purposes of this Order, Defendants shall be deemed to be fully complying with the timely processing

requirements of the SNAP statutes and regulations so long as they meet a 96% timely processing standard with respect to each of the following categories of dispositions (including approvals and denials) each month: a) initial applications eligible for 7 day (expedited) processing; b) initial applications subject to 30 day processing; and c) all recertification dispositions, starting no later than the month following the date that this Order is so ordered and that Order is entered on the docket sheet of the Nebraska District Court. Any performance percentage over a half (.5) percentage point shall be rounded up to the nearest whole percentage number. For example, a timeliness percentage of 95.99% shall be considered 96% for purposes of this Order. The determination of Defendants' monthly performance percentage for each of the categories (a), (b), and (c) of this Paragraph 10 shall be by reference to the data reflected in the "Nebraska SNAP Processing Results" Report, described in paragraph IV (12(c)) of this Order.

11. Defendants agree that they shall enact any changes to policy to ensure that DHHS staff, employees, agents, and assigns comply with the terms and conditions of this Order. In addition, Defendants shall conduct such training as is necessary to ensure that DHHS staff, employees, agents, and assigns comply with the terms and conditions of this Order. Moreover, Defendants shall provide Plaintiffs' counsel with copies of any changed policy memos, procedures manuals, and internal directives upon issuance.

IV. REPORTS

A. Timeliness of Initial and Recertification Applications

12. During the term of this Order, Defendants shall provide Plaintiffs' counsel with the following monthly monitoring reports within fifteen ("15") calendar days of the end of the month

being monitored:

- a. “The Summary of Processed SNAP Applications for IMPAQ-Monthly” Report. This report contains whole population data which notes the number of applications processed monthly and whether those applications were processed timely. This data calculation is run on the first Monday after the first Sunday of every month.
- b. “The Access Nebraska Dashboard "SNAP- Key Performance Metrics" report. This report is run monthly and shows several SNAP and Economic Assistance performance metrics related to timely application processing and call center performance.
- c. The “Nebraska SNAP Processing Results” Report. This report is run monthly on the first of the month and reflects data from the last business day of the previous month. This report shows for each month: a) the number of initial 30 day applications processed timely and untimely; b) the number of initial 7 day (expedited) applications processed timely and untimely; c) the number of initial application (7 day and 30 day) approvals and denials; d) the number of recertification application approvals and denials; e) the timeliness percentages for initial 7 day applications, initial 30 day applications, and recertification applications; f) the number of pending applications, broken out by days pending; and g) the number of recertification applications pending, with recertification applications that will not be processed timely noted with an asterisk.

One copy of a model of each of the reports referenced in this paragraph 12 of this Order is annexed hereto. The models of the reports referenced in subparts (a) and (c) include explanatory handwritten

annotations reflecting the corresponding data on said reports and specifying the formulae underlying the percentages in the report referenced in subpart (c) of this paragraph.

B. Sampling

13. At least one statistically significant random or systematic sample shall be drawn by Defendants from a month to be designated by the Plaintiffs to determine the accuracy and reliability of the reporting set forth in Section IV(A) of this Order. The sample size shall be a number that is necessary to provide no greater than a 3% confidence interval (margin of error) at the 95% confidence level for that sampling frame. The parties shall meet and confer before the sample is drawn to discuss the sampling methodology; the sample size; the data recording instrument to be used for recording the information drawn from the sample; and the data sources for both the monthly reports and the sample. In the event the parties are unable to reach an agreement, the disputed issues will be referred to the Court for resolution.

C. Meet and Confer

14. If, during the term of the Court's jurisdiction, Defendants develops new reports which they believe may provide plaintiffs and the Court with the information required by Section IV(A) of this Order in a manner that is equally reliable and no less convenient, Defendants shall give notice to Plaintiffs' counsel regarding any such reports and meet and confer with Plaintiffs' counsel regarding whether Section IV of this Order should be modified to address the new reports.

15. Further, prior to making any substantive modification to the reports identified herein, Defendants shall provide Plaintiffs' counsel with any template or other information to explain the proposed modifications and provide Plaintiffs' counsel with the opportunity to evaluate whether the proposed modified report would continue to provide the information they believe is necessary for

monitoring compliance with this Order. Plaintiffs' counsel shall not unreasonably seek to oppose any such modification.

16. If the parties cannot agree on whether any new report or any modified report can be used for the purposes of monitoring Defendants' compliance with the terms of this Order, the disputed issues will be referred to the Court for resolution.

V. INFORMAL REVIEW PROCESS

17. Defendants agree to provide a mechanism by which Plaintiffs' counsel may bring to the attention of the DHHS those instances in which an initial or recertification application may not have been processed in accordance with applicable federal statutes and regulations cited herein:

- a. Defendants agree to review the issue and to take actions necessary to resolve the issue within five (“5”) business days. Sheila Bacon, DHHS Field Operations Administrator, will act as the contact person for Plaintiffs’ counsel. Defendants will provide Plaintiffs' counsel with the identity of any successor to the person responsible for resolving the issues within 5 business days of the date on which such a successor is named.
- b. Other ongoing communications include: (1) the ACCESS Nebraska Dashboard on the DHHS website; (2) bi-monthly meetings with Community Partners/Community Agencies to improve communication around eligibility determinations, and (3) regular meetings between Plaintiff’s counsel and Program Administrator to discuss service delivery issues.
- c. Additionally, Defendants agree to appoint a local office administrator as a contact person. Individual applicants may contact the DHHS appointed individual in their

local office, within 30 days, if they believe that their application may not have been processed in accordance with applicable federal statutes and regulations cited herein.

This meeting can be held telephonically or in person. This does not interfere with the individual's right to appeal.

VI. JURISDICTION

18. Unless otherwise extended by the Court, the Court's jurisdiction herein shall terminate upon Defendants achievement of a full compliance as defined in paragraph III (10) of this Order: ninety-six (96%) of a) initial applications eligible for 7 day (expedited) processing; b) initial applications subject to 30 day processing; and c) all recertification dispositions) for twenty-five (“25”) of twenty-eight (“28”) months. The determination of Defendants’ monthly performance percentage for each of the categories (a), (b), and (c) of this Paragraph 18 shall be reflected by reference to the data reflected in the “Nebraska SNAP Processing Results” Report, described in paragraph IV (12(c)) of this Order. For all applications, the first month that may be counted toward the twenty-five months shall be the month following the date that this Order is so ordered and that Order is entered on the docket sheet of the Nebraska District Court.

VII. FORCE MAJEURE PROVISIONS.

19. In any month(s) in which defendant(s)’ performance under paragraphs 8 and 9 of this Order is affected by natural disasters, terrorist attacks, or other similar circumstances beyond the Defendants’ control (hereinafter “Force Majeure”), Defendants’ non-complying performance for such month(s) shall be disregarded for the purposes of determining Defendants’ compliance pursuant to paragraph 18 of this Order, but the terms of this Order and the Court’s jurisdiction to enforce it shall be automatically extended by an equal number of additional month(s).

20. If any Force Majeure event occurs that causes or may cause defendants to invoke paragraph 19 of this Order, Defendants shall, as soon as practicable (but in no event later than fourteen (“14”) calendar days after Defendants knew, or should have known, of such event) notify Plaintiffs’ counsel, in writing. In such notification, Defendants shall report the anticipated length of the disruption, the precise cause or causes of disruption, the measure or measures taken and to be taken by defendants to prevent or minimize the disruption, and the timetable by which the measure or measures will be implemented. Defendants will adopt all reasonable measures to avoid or minimize any such disruption.

21. If Plaintiffs agree that a disruption has been or will be caused entirely by circumstances beyond the control of Defendants or any of its employees, agents, contractors or consultants, and that Defendants and its employees, agents, contractors and consultants could not, despite the exercise of their best efforts, have foreseen or prevented such violation, the time for performance of such requirement shall be extended for a period not to exceed the actual disruption resulting from such circumstance. In the event Plaintiffs do not agree, Defendants may submit the matter to this Court for resolution. If Defendants submit the matter to the Court for resolution, and the Court determines that a violation was caused entirely by Force Majeure circumstances beyond the control of Defendants or any employee, agent, contractor or consultant of the Defendants, then the terms of paragraph 27 operate as to the jurisdiction of the Court. If Defendants submit the matter to the Court for resolution and the Court determines that a violation was not caused entirely by Force Majeure, Force Majeure will not apply, and Defendants shall pay all costs and expenses incurred by the Plaintiffs, including attorney's fees, incurred in responding to Defendants’ petition to the court.

22. Defendants shall bear the burden of proving that any disruption or violation of any

requirement of this Order was caused entirely by Force Majeure. Defendants shall also bear the burden of proving the duration and extent of any disruption or violation attributable to such circumstances. Force Majeure shall not include increases in the number of applications, fluctuations in staffing levels, or acts of the state legislature in failing to appropriate funds that affect Defendants' ability to meet the federal time frames or other external causes that Defendants could have anticipated with reasonable business practices.

VIII. GENERAL PROVISIONS

23. Within forty-five ("45") days of entry of this Order, Plaintiffs' counsel may submit a request for attorney's fees and costs to Defendants through Defendants' counsel of record. If the parties are unable to agree to an award of fees and costs within sixty (60) days of Plaintiffs' submission of said request, Plaintiffs shall file a bill of costs and motion for attorney's fees and costs with the Court pursuant to 42 U.S.C. § 1988. In response, Defendants shall not challenge Plaintiffs' entitlement to fees and costs, but may only challenge the amount of the request.

24. The terms and conditions of this Order shall become effective upon so-ordering by the Court.

25. This Order is final and binding upon the parties, their successors and assigns. The parties recognize and acknowledge that the only consideration for signing this Order are the terms stated herein and no other promise, agreement, or representation of any kind has been made to any party by any person or entity whatsoever to cause any party to sign this Order.

26. This Order constitutes a compromise settlement of disputed and contested matters between the parties. It shall not be construed as an admission of any sort by any of the parties, nor shall it be used as evidence in a proceeding of any kind, except as necessary to administer and/or

enforce the terms of this Order.

27. This Order constitutes an integrated stipulation, containing the entire understanding of the parties with respect to the matters addressed herein and, except as set forth in this Order, no representations, warranties or promises, oral or written, have been made or relied on by the parties. This Order shall prevail over any prior communications between the parties or their representatives relative to matters addressed herein. This Order may not be changed unless the change is in writing and signed by the parties and the Court or the Court on its own.

28. The parties warrant and represent that they have read and understand the foregoing provisions of this Order and that they and their respective signatories are fully authorized and competent to approve and consent to this Order on their behalf.

29. Notwithstanding the provisions of this Order, Defendants reserve the right to seek to implement, change, or otherwise alter or amend the procedures and requirements of this Order if required by intervening changes in federal statute or regulation or State statute inconsistent with this Order. Defendants shall provide Plaintiffs' counsel written notification, by certified mail or by hand delivery with written acknowledgment of receipt, of a required change at least thirty (30) days prior to the commencement of implementation, unless Defendants are required to implement such a required change in less than thirty (30) days. If Defendants are required to implement a required change in less than thirty (30) days, Defendants shall provide notice to the Plaintiffs' counsel no later than seven (7) working days after learning of a required change. Plaintiffs may move to challenge whether the change is required by federal statute or regulations or state statute. Any such change shall be implemented as narrowly as possible to preserve as much of this Order as possible.

DATED this _____ day of _____, 2016.

JOHN M. GERRARD
UNITED STATES DISTRICT JUDGE

APPROVED AND CONSENTED TO BY:

TAMI LEITING-HALL and
ASHLEY DANKLEFF, individually and on
behalf of all others similarly situated,
PLAINTIFFS

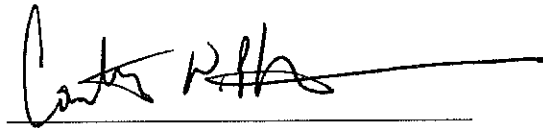
s/ Molly M. McCleery

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ANNEX

PART 1 OF 3

**“Summary of Processed SNAP
Applications for IMPAQ-
Monthly Report”**

ANNEX

PART 2 OF 3

“Access Nebraska Dashboard
‘SNAP- Key Performance
Metrics’ Report”



Dept. of Health & Human Services
(DHHS)
December, 2015

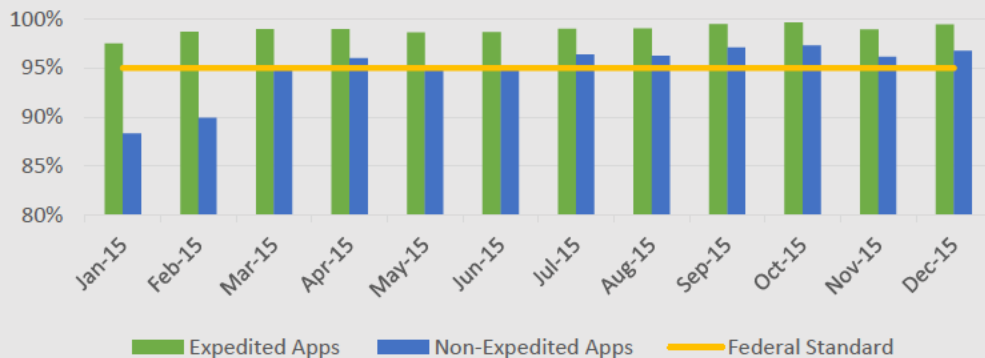
Performance Metrics
ACCESS NEBRASKA Program



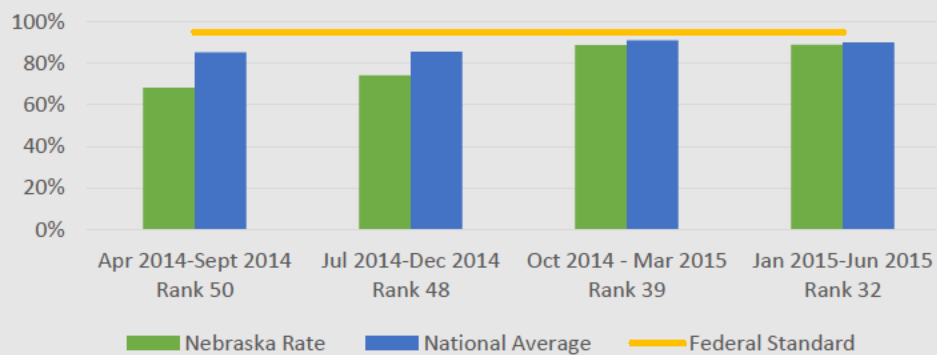
SNAP (Food Stamps) – Key Performance Metrics



State Reported SNAP (Food Stamps) Application Processing Timeliness



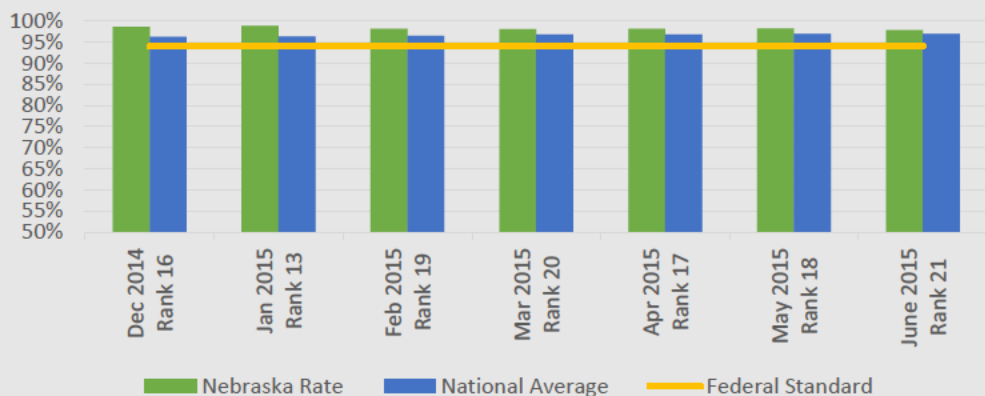
USDA Reported SNAP (Food Stamps) Application Processing Timeliness



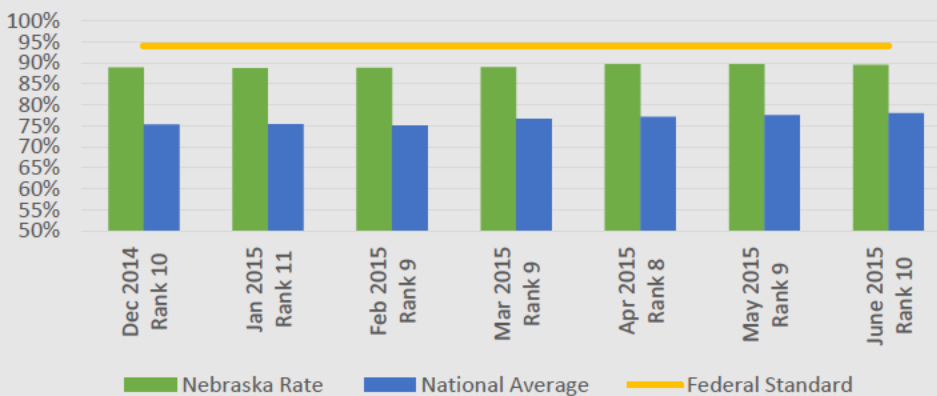
This is a DHHS generated report. Data is based on the percentage of SNAP initial applications received which were processed within SNAP federal timelines. In order to meet expedited timeliness, an application must be processed within 7 days. The timeline for non-expedited applications is 30 days.

Data is based on information provided to states from the USDA. Data is reported quarterly using a six month rolling average of SNAP Quality Control data reported by all states/territories. Quality control in Nebraska is conducted by staff within the division of Public Health.

USDA SNAP (Food Stamps) Payment Accuracy Rate



USDA SNAP (Food Stamps) Denial Accuracy Rate

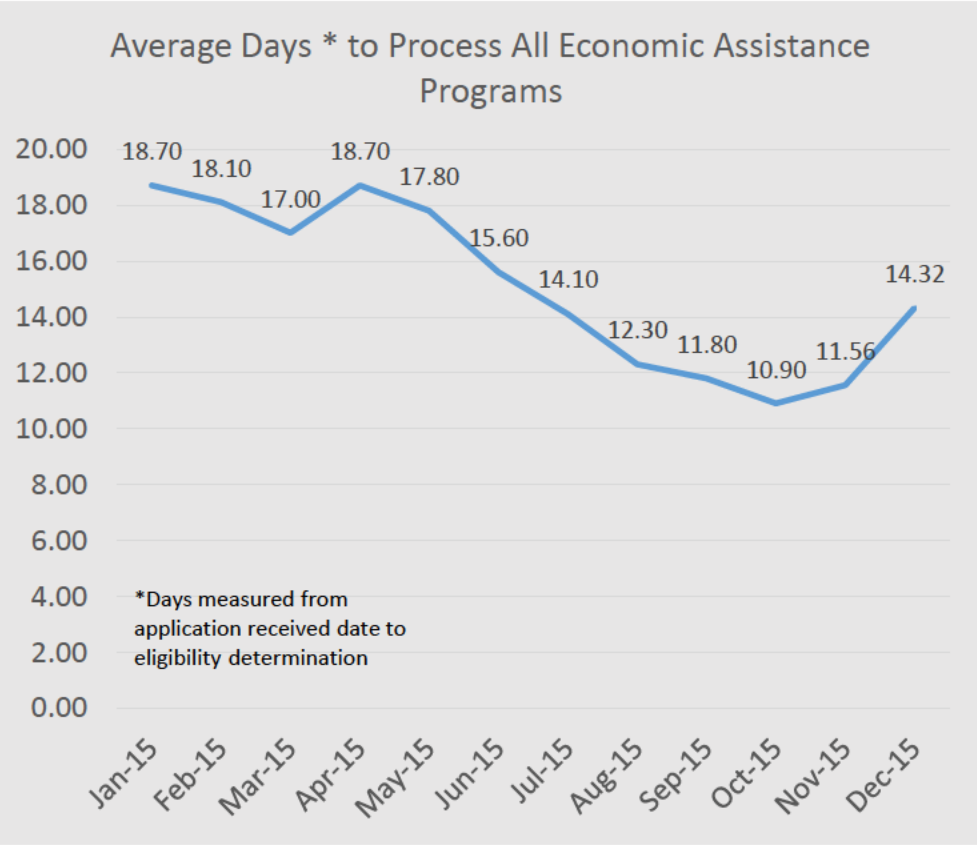
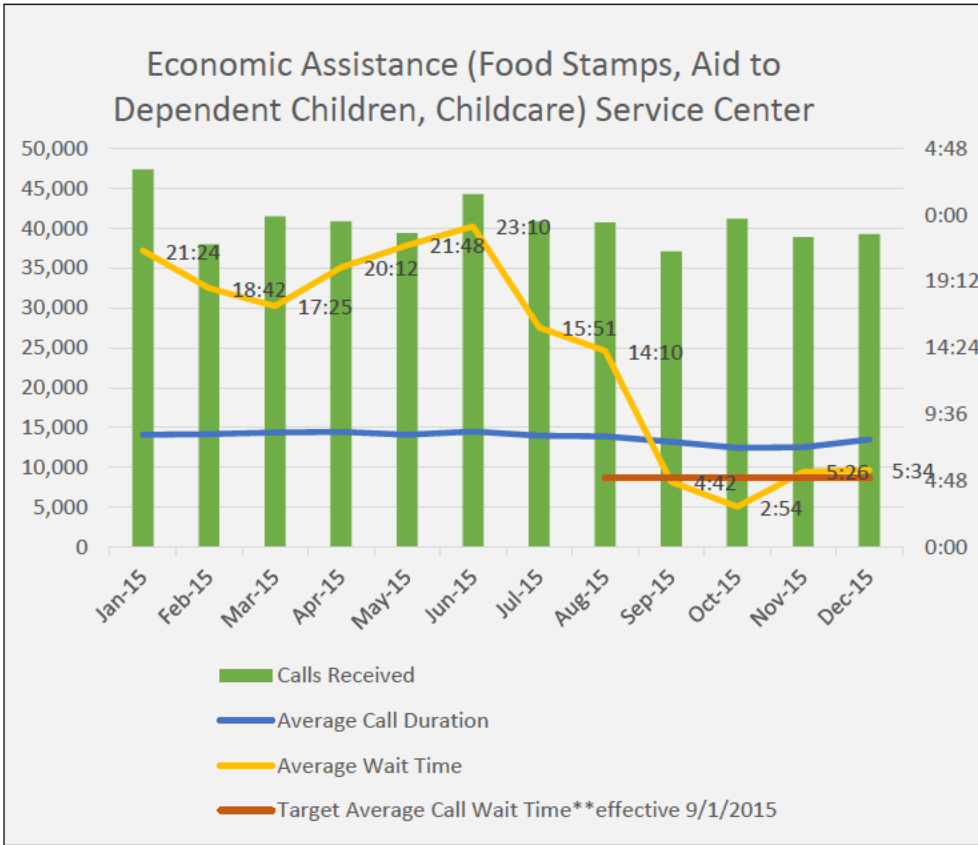


Data is based on information provided to states from the USDA. Data is reported monthly using SNAP Quality Control data reported by all states/territories. Payment accuracy rate measures the amount of correct SNAP benefits provided to households. Quality control in Nebraska is conducted by staff within the Division of Public Health.

Data is based on information provided to states from the USDA. Data is reported monthly using SNAP Quality Control data reported by all states/territories. Denial accuracy rate measures whether a household's SNAP benefits are correctly closed or denied, whether the household was informed of their ineligibility in a timely manner and whether the notice of action provided to households is accurate. Quality control in Nebraska is conducted by staff within the Division of Public Health.



Economic Assistance – Service Center Metrics



Nebraskans Enrolled in SNAP (Food Stamps) Program – 9% of Population

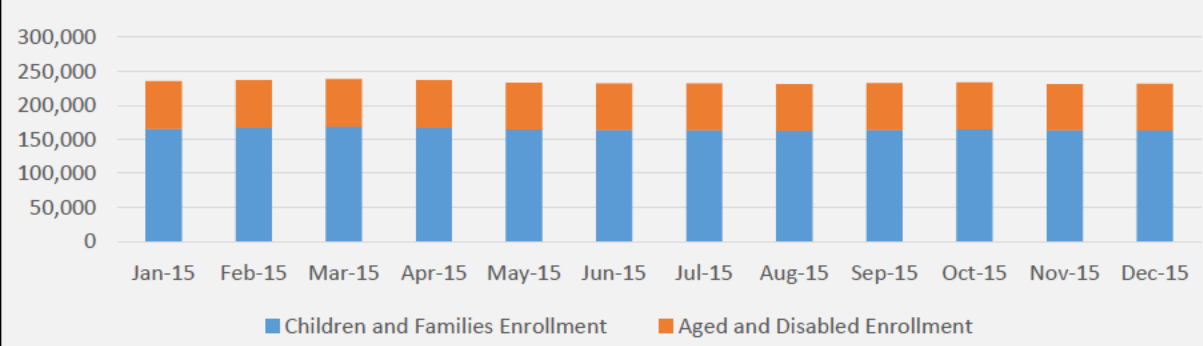
Economic Assistance Enrollment	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15
SNAP (food stamp) Households	77,774	77,644	77,808	77,449	77,616	77,887	78,264	78,781	78,742	78,596	77,976	78,438
SNAP (food stamp) Individuals	174,483	173,508	173,617	172,752	172,934	173,608	174,963	176,663	176,472	176,363	174,887	175,888
Aid to Dependent (ADC) families	6,140	6,052	5,917	5,775	5,654	5,723	5,705	5,721	5,766	5,844	5,772	5,840
Children in Child Care Subsidy	17,535	17,637	17,977	18,313	17,976	18,776	18,256	18,306	18,647	17,683	17,999	18,421



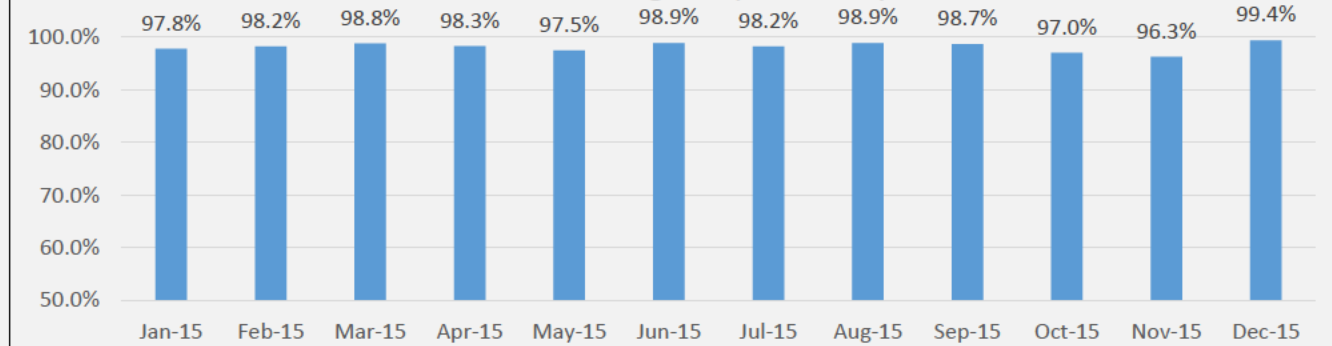
Medicaid – Key Performance Metrics



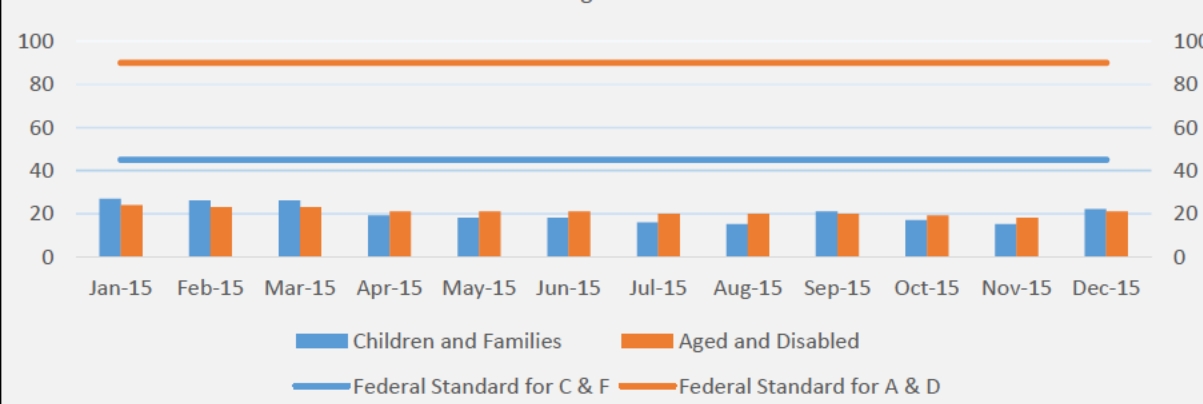
Nebraska - Medicaid Enrollment



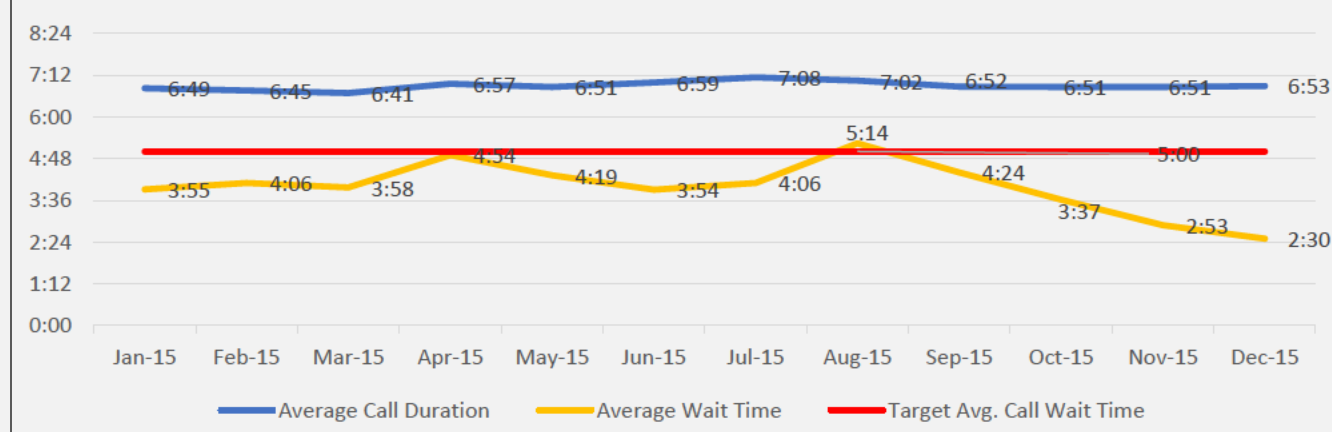
Medicaid Eligibility Accuracy



Application Timeliness to Federal Standards (Days): Below the line is exceeding the standard.



Medicaid Service Center



Nebraskans Enrolled in Medicaid – 13% of Population

Medicaid Enrollment	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15
Total Enrollment	235,523	236,754	238,380	236,853	233,112	232,359	232,088	231,269	232,574	233,410	231,344	231,596
Children and Families Enrollment	165,605	166,890	168,359	167,084	164,494	163,858	163,716	162,821	163,946	164,993	163,393	163,317
Aged and Disabled Enrollment	69,918	69,864	70,021	69,769	68,618	68,501	68,372	68,448	68,628	68,417	67,951	68,309

ANNEX

PART 3 OF 3

“Nebraska SNAP Processing
Results Report”

Nebraska SNAP Processing Results

January 2016

<u>Processing</u>	<u>Processed Timely</u>	<u>Processed Untimely</u>	<u>Timeliness Percentage</u>
SNAP Expedited (7 day) Approvals	1834	14	-
SNAP Expedited (7 day) Denials	398	3	-
SNAP Expedited (7 day) Total	1 2232	2 17	-
% SNAP Expedited (7 day)	-	-	99% $7 = \frac{B}{A}$
+ This group includes Initial Expedited application types			
SNAP Initial (30 day) Approvals	1802	17	-
SNAP Initial (30 day) Denials	1789	81	-
SNAP Initial (30 day) Total	3 3591	4 98	-
% SNAP Initial (30 day)	-	-	97% $8 = \frac{C}{C+D}$
+ This group includes Initial Non-Expedited Application types			
Recertification Approvals	6247	223	-
Recertification Denials	1329	171	-
Recertification Total	5 7576	6 394	-
% Recertifications	-	-	95% $9 = \frac{F}{E}$
+ This group includes Timely Recertification, Untimely Recertification, and Late Recertification application types			

As of February 11, 2016

<u>Initial Applications Pending</u>	<u>Expedited</u>	<u>Non-Expedited</u>
SNAP Initial 0-7 Days	159	615
SNAP Initial 8-14 Days	0	335
SNAP Initial 15-21 Days	0	166
SNAP Initial 22-30 Days	0	120
SNAP Initial Over 30 Days	0	5

As of February 11, 2016

Pending Recertification Applications

<u>For Certification Period Ending:</u>	<u>Application Type:</u>		
	<u>Filed Timely</u>	<u>Filed Untimely</u>	<u>Filed Late</u>
December 31, 2015	0*	0*	11
January 31, 2016	9*	24	235
February 29, 2016	1817	0	0

* Processing of these applications will not meet the Federal timeliness guidelines.

Timely Recertification Applications: applications filed on or between the date that is 60 days prior to the end of the certification period through the 15th of the month that the certification period ends.

Untimely Recertification Applications: applications filed on or between the 16th of the month that the certification period ends and the last day of the certification period.

Late Recertification Applications: applications filed within the first 30 days after the certification period ended.

Survey of ACCESSNebraska Employees

September 8, 2016

Prepared for

ACCESSNebraska Oversight Committee of the Legislature

Submitted by
Ombudsman/Public Counsel Office
State Capitol
P.O. Box 94604
Lincoln, NE 68509-4604
(402) 471-2035

I. Introduction

The Ombudsman's Office conducted its first ACCESSNebraska employee survey in 2014 following a request by Senator Annette Dubas, former Chairperson of the ACCESSNebraska Special Investigative Committee. The purpose of the survey was to gather opinions and suggestions for improvement from individuals who worked with the ACCESSNebraska system on a regular basis. The Office conducted a second ACCESSNebraska survey in 2015 and has completed one this year at the request of Senator Sara Howard, current Chairperson of the ACCESSNebraska Oversight Committee (Committee). In order to capture any changes in employees' perspectives of the system, this year's survey contained the same questions as the previous two ACCESSNebraska surveys.

As with the last two surveys, this year's survey will help to determine 1) whether there have been any changes in employees' perspectives of the system compared to the past two years; and 2) whether the ACCESSNebraska system is effective in serving Nebraskans. This Report will provide a summary of the survey responses as well as a comparison of this year's results to the past two years' results.

To facilitate the survey, we asked the Nebraska Department of Health and Human Services (DHHS) to provide a list of all current ACCESSNebraska employees, which resulted in a list of 860 individuals. On July 19, 2016, an invitation to participate in the survey was then sent by email from the Ombudsman's Office to those 860 employees. Of the 860 employees who received the survey invitation, 384 responded by the end of the survey deadline of August 2, 2016, for a 45% response rate.

The results of the survey can be interpreted in multiple ways, and certainly it is up to the Committee to draw the ultimate conclusions from these data. We believe the results of this survey are significant, particularly due to the fact that we received such a high response rate (45%). We would like to highlight some of the patterns we saw in the answers to a series of multiple-choice questions and open-ended questions. This report combines responses from the two ACCESSNebraska divisions, Economic Assistance (EA) and Medicaid and Long-Term Care (MLTC). We have highlighted major differences between the two divisions only when relevant.

II. Questions posed by the Survey

The questions asked were divided into two parts: multiple-choice questions and open-ended questions.

- a. The multiple-choice questions addressed the following topics:**
 - i. Employee background (length of time working for DHHS, job title, responsibilities, and work location).
 - ii. Training on public benefits programs, telephone skills, and computer system usage.
 - iii. Workload and time to perform work duties.

- iv. Client interaction on issues such as accuracy of work performed and clients' level of satisfaction.
- v. Serving the elderly population, people with disabilities, people with mental illness, Non-English speaking clients, families, clients in a crisis situation.

b. The open-ended questions addressed the following topics:

- i. Aspects of the ACCESSNebraska system that are working well, and aspects that need improvement.
- ii. Whether the ACCESSNebraska system is evolving/improving, and whether employees had suggestions for improvement.

III. What the Survey says about the ACCESSNebraska system

A. Employee Background (length of time working for DHHS, job title, responsibilities, and work location)

Similar to past results, this year's survey showed that the majority (65%) of ACCESSNebraska employees have worked at DHHS within two time periods: 2 to 5 years (32%), and 10 years or more (33%).

It should be noted that 8% of MLTC respondents, compared to 18% of EA respondents, reported having worked at DHHS for one year or less. Also, 38% of MLTC respondents, compared to 27% of EA respondents, indicated having worked at DHHS for 10 years or more.

Of the respondents who have worked at DHHS for 10 years or more, 47% of them work at a local office, whereas 15% of them work at one of the call centers.

As expected, and similar to the past two years' survey results, the majority of respondents (89%) work as either customer service center workers or local office workers.

B. Employee Training (public benefits programs, telephone skills, and computer system usage)

■ Training in public benefits programs:

Initial training: It appears the training that new ACCESSNebraska staff receive in the various technical aspects of public benefits programs prior to beginning their regular ACCESSNebraska responsibilities is generally satisfactory. About three-quarters (77%) of respondents stated that they thought that the training was either excellent, more than adequate, or adequate. This is a 3% increase from the 2015 results, and a 5% increase from the 2014 results.

Interestingly, 69% of MLTC respondents, compared to 85% of EA respondents, gave positive ratings (excellent, more than adequate, or adequate) to the initial training.

Despite a high rating on initial training, some respondents feel there is room for improvement. One MLTC respondent indicated that “[t]he training for new employees needs to be updated to match the actual work load and processing.” Another MLTC stated “[t]he training for new workers is inadequate. Basically it is up to the lead/supervisor to train new workers on how to do the job once they have finished training.”

Ongoing training: This year’s survey showed that 73% of respondents viewed the ongoing training as positive (excellent, more than adequate, or adequate). This is a 7% increase from the 2015 results, and a 13% increase from the 2014 results.

Similar to the initial training results, a higher percentage of EA respondents (82%) gave positive ratings to ongoing training, compared to MLTC respondents (64%).

Regardless of whether it was initial training or on-going training, respondents indicated the information they receive from training can differ from information they receive from their supervisors. Some felt that training needs to be comprehensive, as one respondent mentioned, “[d]ue to the training we are fixing a lot of mistakes. DHHS trains on policy and not a lot on procedure. I’ve been here for over a year now and because of the lack of training I learn by getting bad NEARS and that’s not fair to me to have to get a bad read on a case when I didn’t even know something existed.”

Training in phone skills and computer system usage (initial and ongoing): Similar to the 2015 survey results, this year’s respondents gave higher ratings for both the initial and ongoing training in telephone skills and computer system usage, as compared to the training in public benefits programs.

Many MLTC respondents reported looking forward to the new computer and telephone system with the thought that they will benefit both the workers and clients.

Some EA respondents commented that the computer system may be getting a little better, but many respondents felt the computer system is outdated.

When comparing to past years’ results, there was no change in the percentage of respondents who gave positive ratings for both initial and ongoing training in telephone skills and computer usage.

C. Work Duties (workload and time to perform work duties)

Although there continues to be a decline in respondents’ dissatisfaction with the volume of their work tasks in the past three years, the dissatisfaction level concerning work task requirements is still high. Nearly one-half (49%) of respondents indicated they have less than enough time to complete their work duties, and 32% of respondents indicated that

there is a consistent backlog of work duties. The MLTC call centers had the highest percentage of respondents who reported that they have less than enough time to complete their work duties (53%), and that there is a consistent backlog in work duties (46%).

It is notable that only 21% of EA respondents reported a consistent backlog in their work-tasks, as compared to 42% of MLTC respondents.

One MLTC respondent recommended eliminating work task quotas in order to “reduce errors, provide more attention to accuracy and eliminate rushing the client when addressing needs.” Many MLTC respondents commented that the daily work task quotas requirement is unrealistic.

Those MLTC respondents who have assigned caseloads indicated that too much is expected of them. One respondent indicated “there is an expectation to answer the many phone calls that come in a day & work that need immediately, maintain the case load, while staying on top of alerts and completing a large number of work tasks-- this is not humanly possible in a week's time.”

Resources needed to answer clients’ questions while on the phone: Over half (62%) of respondents reported “sometimes having” the necessary resources to answer clients’ questions while on the phone. As one MLTC respondent said, “[c]lients complain most about time spent on hold waiting for a worker to answer.” Another respondent explained, “[t]he format in which workers must find answers to their [clients’] questions is complicated. The answer could be in various trainings, Winks, etc. on sharepoint or it could be in one of the thousands of emails [workers] receive, which can be difficult to find even if the worker is highly organized.”

Thirty-four percent (34%) of respondents reported to “always having” resources needed to answer clients’ questions while on the phone. This is an increase of 6% from the 2015 results, and an increase of 4% from the 2014 results.

D. Client Interaction

Despite the reported stressful work environment and the constant need to meet quotas, many respondents enjoy helping people and truly love working with clients. One respondent indicated he/she “just want[s] to give them [clients] the best service.” Respondents continued to appreciate the social work aspects of the job and appreciated when their clients give them compliments for a job well done.

Accuracy of work performed: When asked about the accuracy of work completed, 89% of respondents (87% of EA respondents, and 91% of MLTC respondents) selected the response “my work is accurate most of the time.” This year’s results on this issue showed a slight increase over the past two years’ results.

Similar to last year's results, while only 1.6% of respondents noted uncertainty as to whether their work is accurate, many respondents commented in the open-ended section of the survey that if mistakes were made by an employee, then that specific employee would never be aware of the errors because other employees would end up making the necessary corrections. As one MLTC employee explained, "too many workers are doing work differently and there are way too many errors. Most of the work done throughout the day is fixing the mistakes of another worker. [It further] compounds the problem when workers are not being told of their mistakes."

Client satisfaction: Nearly all (95%) of the respondents perceived that the clients are either very satisfied, somewhat satisfied, or satisfied with the service that they receive. This is an increase of 9% in perceived client satisfaction from 2015, and an increase of 22% from 2014.

Serving the elderly population, people with disabilities, and people with mental illness: The results of the survey indicated that 36% to 44% of respondents experienced either "some," "significant," or "extreme" difficulties in serving the elderly population, people with disabilities, or people with mental illness. This is a slight decrease in the frequency of respondents reporting such difficulties, as compared to the 2014 and 2015 results.

Similar to the comment sections of the 2014 and 2015 surveys, many respondents in this year's survey mentioned that the ACCESSNebraska website and various options to communicate with DHHS (texting, skype, IM, etc) work well for those individuals who are already familiar with computers and the Internet. But when it comes to people who are elderly, disabled, or who have a mental illness, one respondent indicated that "local offices are a huge help with the elderly, disabled or those with poor reading skills as these groups have a hard time using computers and navigating through the phone system." Many respondents continued to hold the view that this high-needs population would be best served by assigned workers, rather than by the universal case model.

Serving non-English-speaking clients: Similar to the past two years, respondents continued to have difficulties in serving non-English-speaking populations, as compared to English speaking clients. Sixty-nine percent (69%) of respondents reported experiencing either "some," "significant," or "extreme" difficulties in serving the non-English-speaking population. The MLTC respondents reported more difficulties in this area than did the EA respondents.

When looking at all seven population groups (the elderly, people with disabilities, people with mental illness, non-English speaking, families, homeless, and others), the MLTC respondents reported having more difficulties in serving all of these groups than did the EA respondents.

E. Aspects of ACCESSNebraska that are seen as working well

Not surprisingly, the responses to the open-ended question that asked which aspects of ACCESSNebraska are working well were mixed. There were many comments which confirmed recent reports of ACCESSNebraska doing better with call wait times, timeliness of processing application, and the clients receiving benefits.

However, given that employees from the two divisions (EA and MLTC) are so unique in their responses, it is best to separate the EA and MLTC comments in order to fully capture which aspects of ACCESSNebraska are seen as working well.

■ **What is working well in the Economic Assistance Division:**

Telephone application: For the EA division, many respondents mentioned that having the option for clients to apply for public assistance by telephone has helped clients tremendously. One respondent commented, a view shared by many, that “the implementation of phone applications is doing well. SSWs are able to take all client information and are able to work a case from beginning to end in many situations.” Another respondent further explained that the phone application “helps reduce the clients’ frustration of waiting for notices to be sent to them.” Many respondents also pointed out that having phone application option is great for the population which does not have Internet access.

Universal caseload: Similar to the survey results of the past two years, some respondents continued to point out that it is to the clients’ benefit to be able to speak with someone at the Call Centers, instead of having to wait for the assigned worker to call back.

Various modes of communication between clients and DHHS: Respondents recognized the value of the many new options that are now available for clients and DHHS to use to communicate with each other. Some of these options are Skype, instant messaging, texting, and emailing. One EA respondent mentioned, “we are doing a good [job] in improving clients access to benefits through improved processing times and offerings like phone apps. and email and text messaging of notices. I have heard a lot of positive feedback from clients in these regards.”

EARL: The Economic Assistance Resource Library (EARL) is a SharePoint site with program and process guides and information to assist staff find answers to questions quickly. Some respondents indicated that EARL is a great addition to help them do their work. One respondent felt that information was easy to find in EARL. Another respondent appreciated the addition of EARL indicating it “ensures all SSW’s are on the same page across the state.”

Assigned workers: One respondent saw the benefit of having certain cases assigned to caseworkers by stating, “I believe that the specialized teams (PDSA’s) that are in place at this time have made a significant change in not only correct assistance, but timely assistance. The groups include the assigned ADC cases and the SSAD team in Scottsbluff. We have heard from clients time and time again that these groups have made it easy to get their benefits taken care of in a timely manner.”

■ What is working well in Medicaid and Long-Term Care Division:

Assigned cases: Similar to last year's survey results, many of the MLTC respondents mentioned that giving more complex cases to assigned workers has been helpful for both employees and clients. According to some respondents, assigning specific cases back to local workers is working very well. One respondent mentioned that "[b]eing a worker whom has an assigned caseload ...we get to know the people and then [it's] easier to work with them and help them. We then are also more knowledgeable in our area and this helps everyone involved from the client to the providers and public."

Universal caseloads: Similar to past years, some respondents like the universal caseloads because it is a benefit to both the clients and the workers. As one respondent pointed out, "[c]lients are able to call in and are able to speak to a worker the same day. This Universal System allows casework to be completed quicker and allows for faster processing times. [Also] workers are able to call in sick or take scheduled vacations without the worry of their workload piling up."

Various options for clients to communicate with DHHS: Similar to the EA side, many of the MLTC respondents recognize the benefits of having the options for communication; that phone/email/text are great for providing information in a convenient manner for all clients.

F. Aspects of ACCESSNebraska seen as needing improvement

Below are areas highlighted by respondents as "needing improvements."

- **Processes and procedures** continue to change too frequently. One respondent stated "[n]o time for SSW to carefully read e-mail though day and when processes change. This leads to great frustration, errors due to changes not fully aware of. Multiple changes from upper management cause confusion. Would be best to have 'all ducks in a row' before telling staff how now wanting procedures handled." Another respondent further explained that "[s]tandard operating procedures are not being followed across the state and this is in part that there are too many procedures in place. There are procedures for procedures, procedures for policy, policy information for each program and this is constantly changing. As the changes are taking placed, we are not always informed in a timely manner. [Sometimes], the procedures are not related to policy and staff are confused on what to follow."
- **Communication** among the different entities is still lacking. One MLTC respondent commented that due to the "[l]ack of communication between the customer service center and local office workers, no one is on the same page and everyone

interprets things differently. Clients get upset because they can't get straight answer." Another respondent pointed out that "[c]ommunication is still a huge issue, especially from the east end of the state to the west end of the state. The Scottsbluff CSC still has issues with receiving important information timely or even at all. Sometimes we find out about changes, issues, and events months after the fact." A respondent acknowledged that "[c]ommunication is a key to improvement, if there is no communication teams will be unaware of changes that could impact their work."

- **Quantity over Quality:** Respondents felt that administration is too focused on quantity over quality. One respondent viewed the work as a "9-5 job, rather than a passion." Another respondent added that "[t]he amount of negative feedback from supervisors is overwhelming at times. The focus on numbers is unfortunate, since we are here to help PEOPLE improve their quality of life." Overall, many respondents wanted to eliminate the "unrealistic" quotas altogether in order to reduce errors, provide more attention to accuracy, and eliminate rushing the client when addressing needs.
- **High turnover rates/Retention of workers:** Many respondents wanted administration to focus on improving employee retention because of the perceived high turn-over rate of experienced workers. One of the respondents pointed out that it is "[v]ery expensive to train new workers plus it takes several months to learn all of the complicated programs, rules & procedures."
- **Recognition and Appreciation:** Employees want to feel valued and recognized for a job well done in order to bring up morale and to create better work environment. One of the EA respondents explained that the "staff work so hard and it just doesn't seem to be enough. Staff really want to feel productive and successful, but it is hard when they are constantly being told they are not doing enough, or take another call before finishing a case, etc."

The following are new suggestions for improvements described by respondents in this year's survey. These were not mentioned by employees in last year's survey:

- Many EA workers were critical of the new policy to streamline public assistance processes for clients. One respondent indicated that "[p]eople on benefits need to have some responsibility. They [clients] need to have to go get their employment verified, they need to get their applications in on time, they need to call and update with changes. We [respondents] should not have to call them and babysit them to make sure things get done."
- Although some EA respondents recognized that the telephone application as a beneficial option for clients, others felt that this option takes a lot of time to complete and this takes workers away from working on other duties in the call centers.

Therefore, causing the agency to fall behind in other areas; like recertification. One respondent also indicated that “phone applications take away research and accuracy away from worker ... worker did not do proper research or upgrade information correctly in system due to the time they have to go through each question with client it takes away from accuracy.”

- Some of the EA respondents who did not feel that EARL was helpful, attributed it to the program being too complicated, clunky, and not user-friendly.

G. Whether the system is improving:

Similar to the results from the past two surveys, the comments to this year’s survey question of whether the ACCESSNebraska system is improving ranged from a resounding “No,” to an absolute “Yes.”

Of the EA respondents who stated “Yes,” one mentioned improvements in processing time, call wait times, and having the multiple options for clients to communicate with DHHS. Another respondent mentioned he/she has seen “much improvement since we opened.”

For some EA respondents who did not see any improvements in the system, they mentioned that the proof of burden for verification has transferred from the client to the worker, which they felt was too much hand-holding and further put more work on respondents which then threatens quality of work.

On the MLTC side, many respondents recognized that call wait times are down considerably compare to past years.

Some MLTC respondents who did not view the system as improving mentioned an un-supportive work environment, increased in workers’ errors, and as one respondent mentioned, “having too many chiefs making too many rules, but not being part of the agency long enough to know what’s really going on.”

IV. Conclusion

There is little doubt that ACCESSNebraska system has improved since its inception. However, there is always room for improvement in order to better serve Nebraskans, while keeping employees motivated to do what they do best...provide quality customer service.

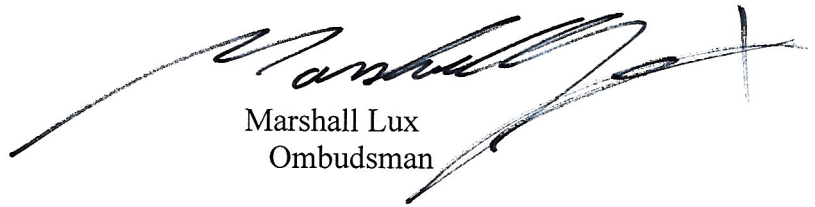
Our office reviewed all written comments submitted by employees. In this report we have endeavored to provide an accounting of the general trends and notable, unique perspectives. We hope we have done justice in conveying the ACCESSNebraska employees' opinions and suggestions about the ACCESSNebraska system.

We have also attached a summary of the responses to the multiple choice questions, but we did not include the written comments because of the sheer volume (100+ pages). We would like to express our sincere appreciation to all of the employees who completed the survey, both for their contribution here, and for their work for the citizens of the State of Nebraska.

Respectfully submitted,



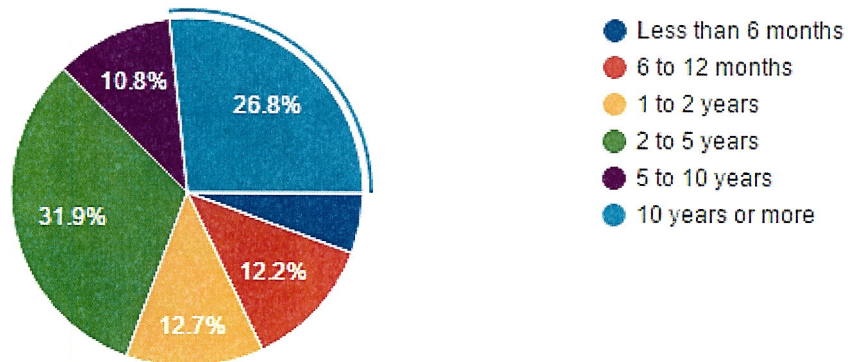
Julie Pham
Deputy Ombudsman
for Welfare Services



Marshall Lux
Ombudsman

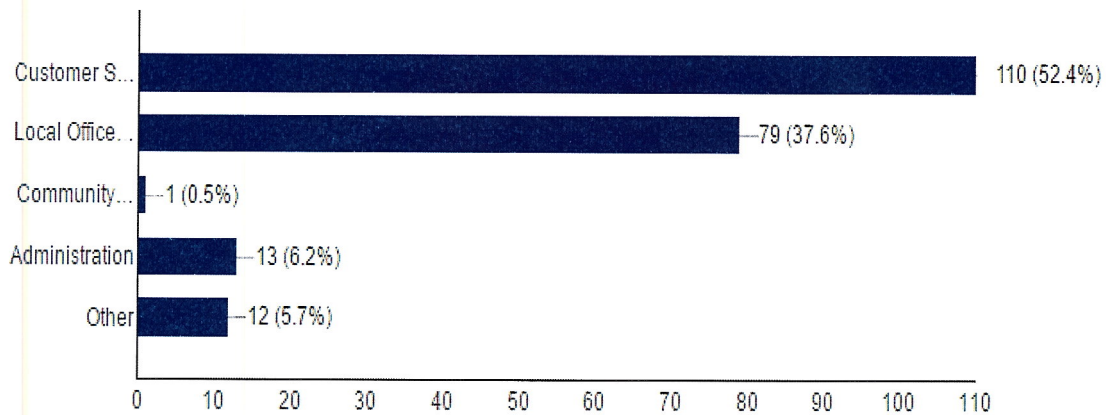
213 responses (Economic Assistance Division)

How long have you been employed by the Nebraska Department of Health and Human Services?

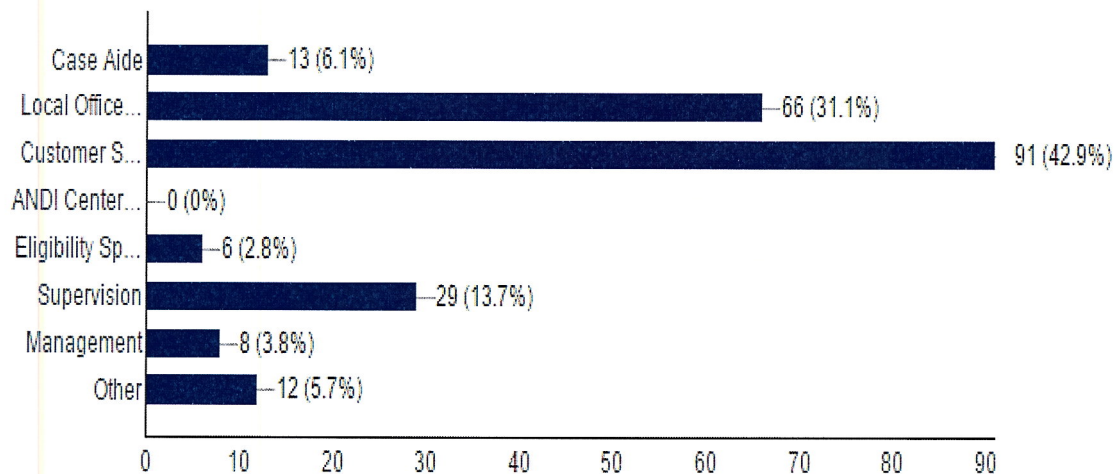


Less than 6 months	12	5.6%
6 to 12 months	26	12.2%
1 to 2 years	27	12.7%
2 to 5 years	68	31.9%
5 to 10 years	23	10.8%
10 years or more	57	26.8%

Which of the following best describes your title?

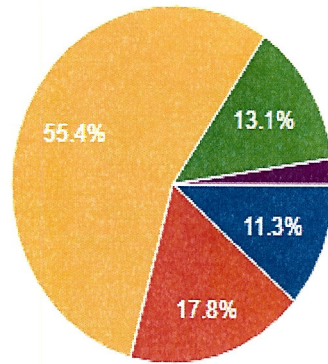


Which of the following best describe your responsibilities?



Training

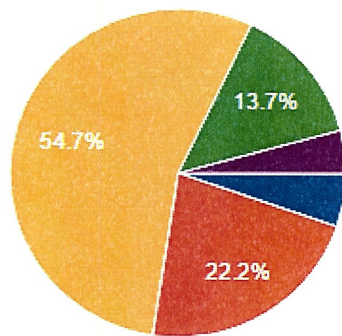
How would you describe the amount of training you received regarding public benefits programs (SNAP, ADC, etc.) before you began your responsibilities?



- Excellent
- More than adequate
- Adequate
- Less than adequate
- Poor

Excellent	24	11.3%
More than adequate	38	17.8%
Adequate	118	55.4%
Less than adequate	28	13.1%
Poor	5	2.3%

How would you describe the amount of training you continue to receive regarding public benefits programs (SNAP, ADC, etc.)?

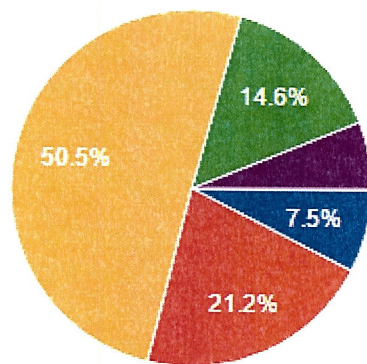


- Excellent
- More than adequate
- Adequate
- Less than adequate
- Poor

Excellent	11	5.2%
More than adequate	47	22.2%
Adequate	116	54.7%

Less than adequate	29	13.7%
Poor	9	4.2%

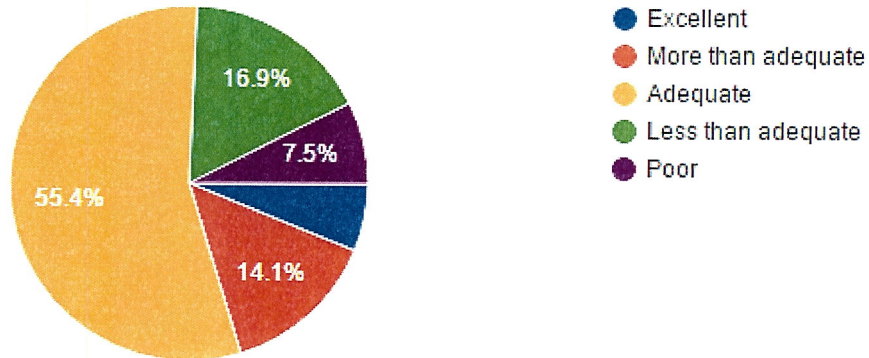
How would you describe the amount of training you received regarding the phone and computer system you use before you began your responsibilities?



- Excellent
- More than adequate
- Adequate
- Less than adequate
- Poor

Excellent	16	7.5%
More than adequate	45	21.2%
Adequate	107	50.5%
Less than adequate	31	14.6%
Poor	13	6.1%

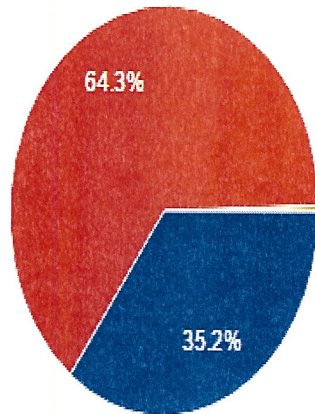
How would you describe the amount of training you continue to receive regarding the phone and computer system you use?



Excellent	13	6.1%
More than adequate	30	14.1%
Adequate	118	55.4%
Less than adequate	36	16.9%
Poor	16	7.5%

Work Duties

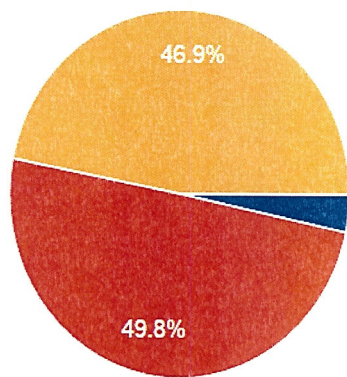
Which of the following best describes the number of work duties required by your position?



- Too many work duties
- Enough work duties
- Not enough work duties

Too many work duties	75	35.2%
Enough work duties	137	64.3%
Not enough work duties	1	.5%

Which of the following best describes the amount of time you have to perform your work duties?

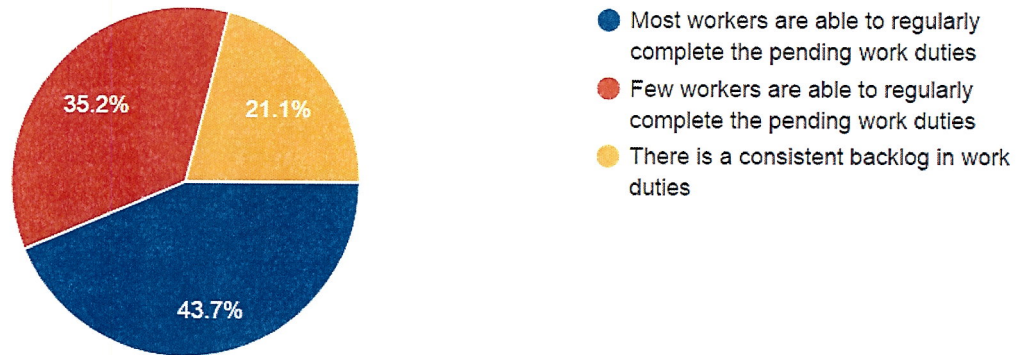


- I have more than enough time to complete my work duties
- I have about the right amount of time to complete my work duties
- I have less than enough time to complete my work duties

I have more than enough time to complete my work duties	7	3.3%
I have about the right amount of time to complete my work duties	106	49.8%

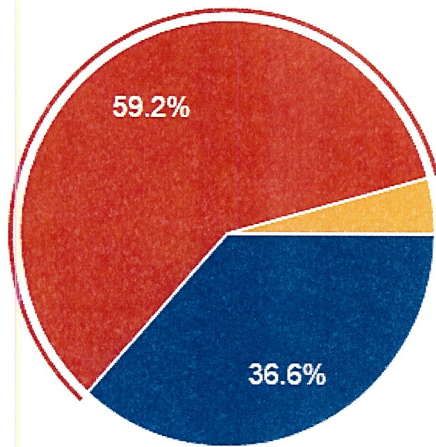
I have less than enough time to complete my work duties **100** 46.9%

Which of the following best describes the current workload across the system?



Most workers are able to regularly complete the pending work duties	93	43.7%
Few workers are able to regularly complete the pending work duties	75	35.2%
There is a consistent backlog in work duties	45	21.1%

Do you have the resources needed to answer clients' questions while on the phone?

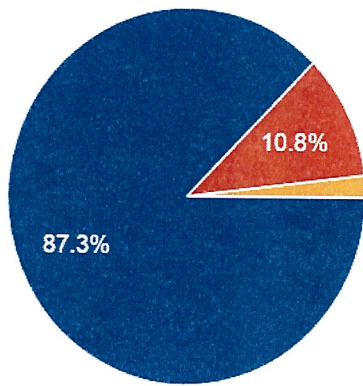


- Always
- Sometimes
- Rarely

Always	78	36.6%
Sometimes	126	59.2%
Rarely	9	4.2%

Client Interaction

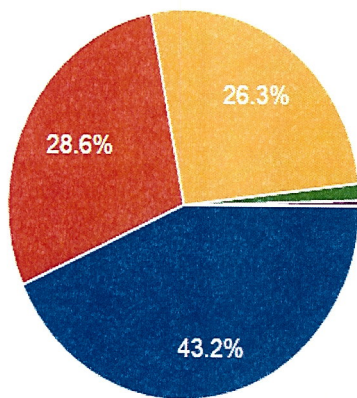
Which of the following best describes your opinion on the accuracy of your work?



- My work is accurate most of the time
- My work is accurate some of the time
- I am not sure whether my work is accurate

My work is accurate most of the time	186	87.3%
My work is accurate some of the time	23	10.8%
I am not sure whether my work is accurate	4	1.9%

Which of the following best describes your opinion on client satisfaction?

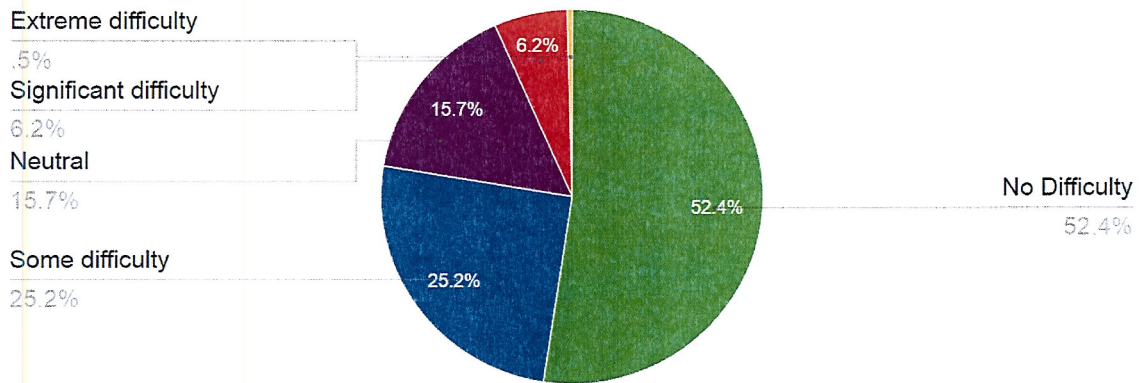


- I believe my clients are very satisfied with the service they receive
- I believe my clients are somewhat satisfied with the service they receive
- I believe my clients are satisfied with the service they receive
- I believe my clients are dissatisfied with the service they receive
- I believe my clients are very dissatisfied with the service they re...

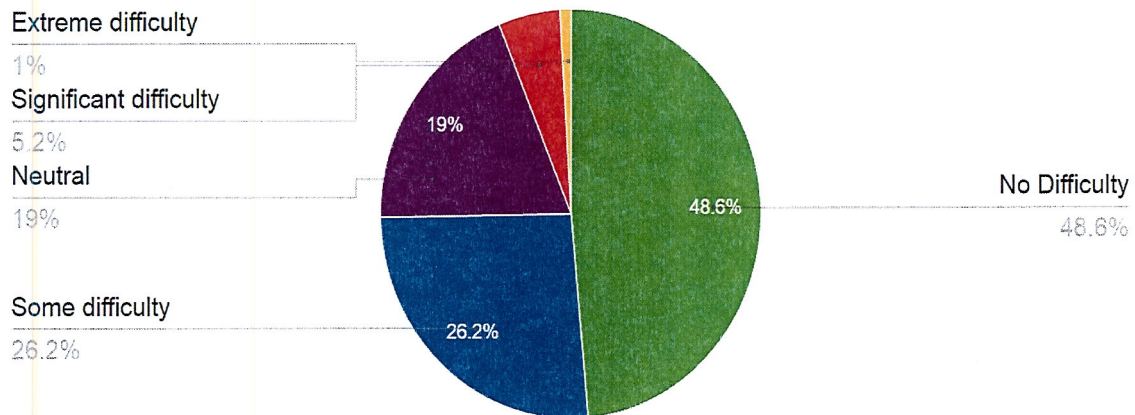
I believe my clients are very satisfied with the service they receive	92	43.2%
I believe my clients are somewhat satisfied with the service they receive	61	28.6%
I believe my clients are satisfied with the service they receive	56	26.3%

I believe my clients are dissatisfied with the service they receive	3	1.4%
I believe my clients are very dissatisfied with the service they receive	1	.5%

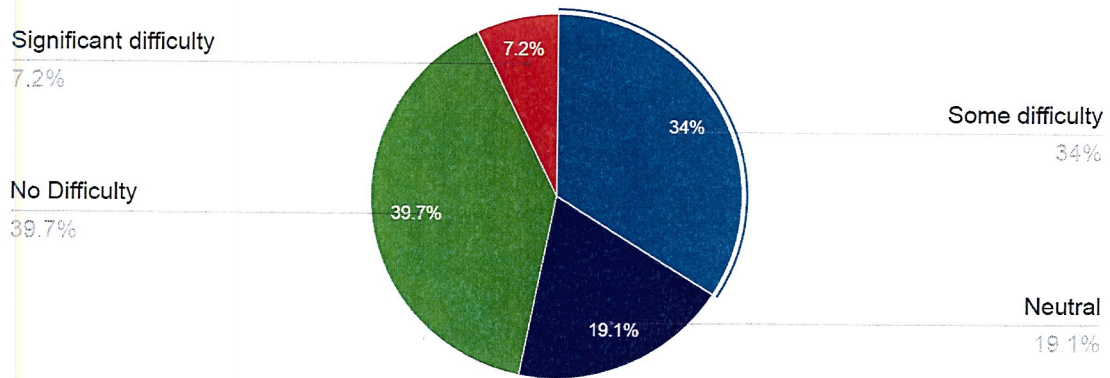
Do you experience any difficulty in serving the following client groups: Elderly



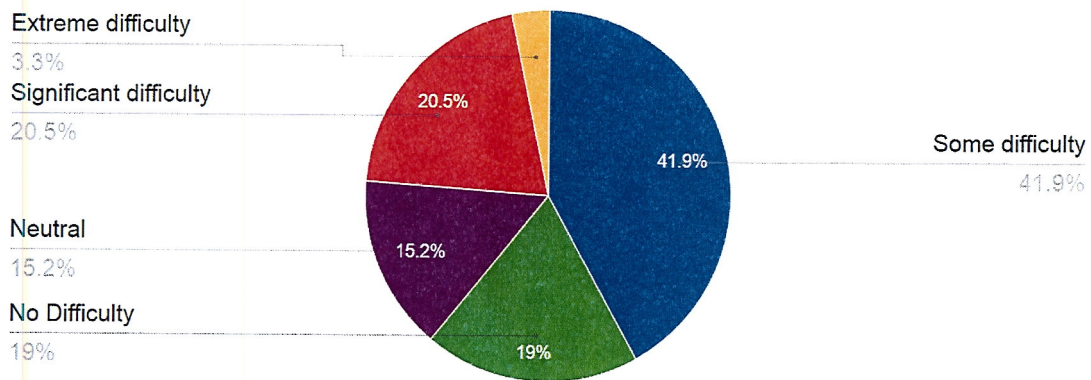
Do you experience any difficulty in serving the following client groups: People with Disabilities



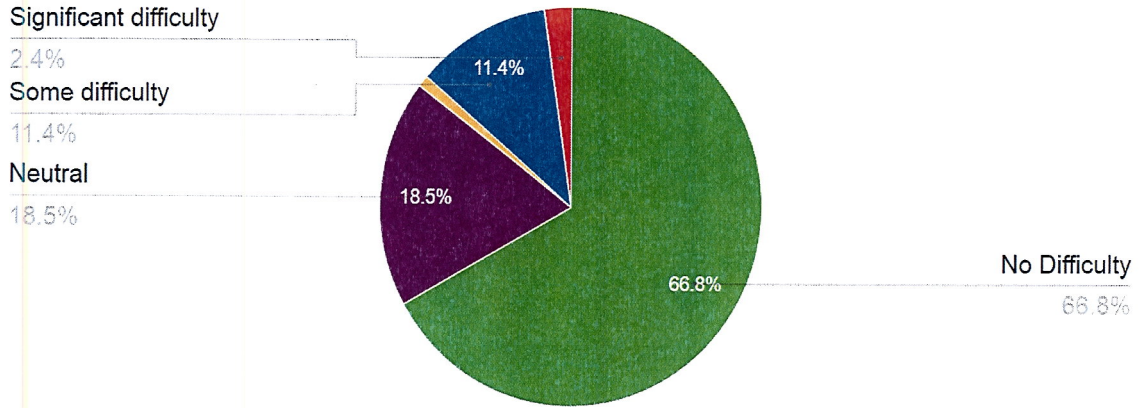
Do you experience any difficulty in serving the following client groups: People with Mental Illness



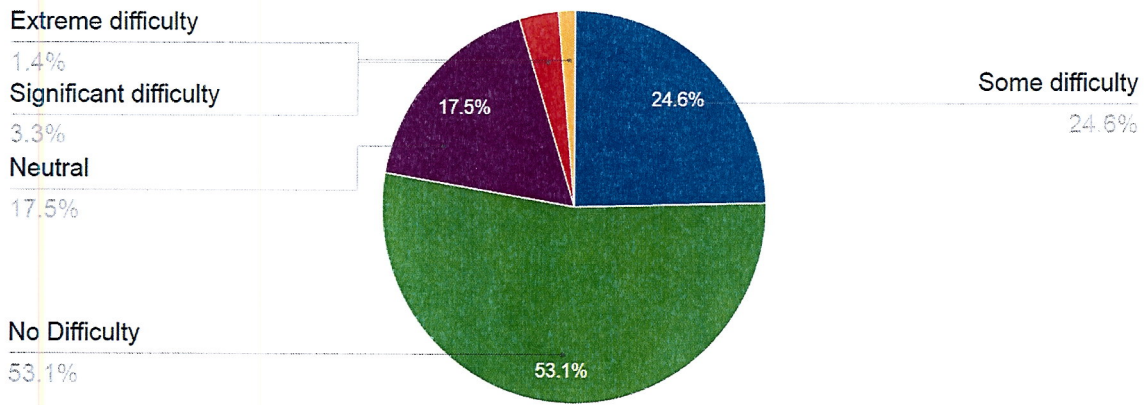
Do you experience any difficulty in serving the following client groups: Non-English Speaking Clients



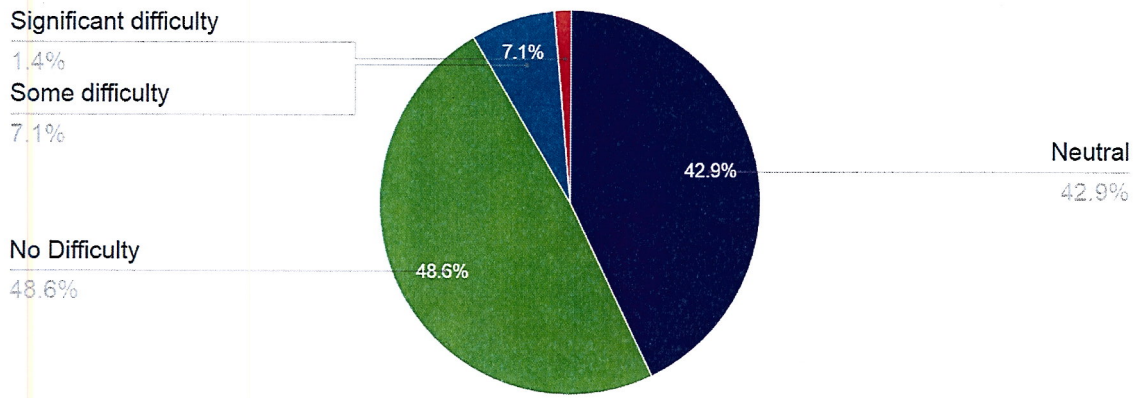
Do you experience any difficulty in serving the following client groups: Families



Do you experience any difficulty in serving the following client groups: Clients in a crisis situation (for example homeless)



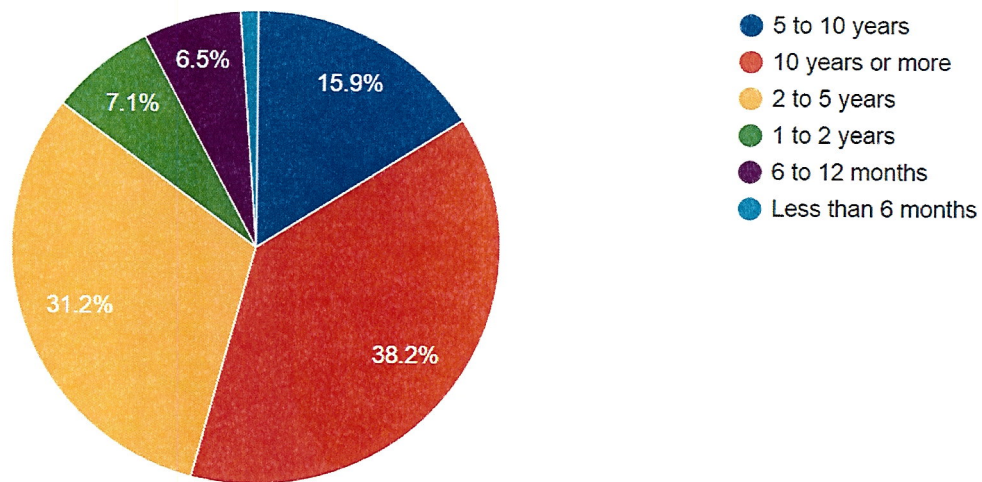
Do you experience any difficulty in serving the following client groups: Other



171 Responses (Medicaid & Long-Term Care Division)

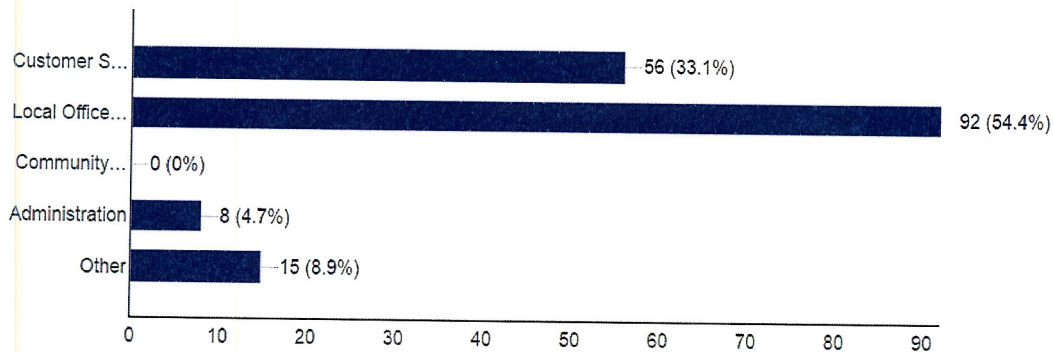
Employee Type

How long have you been employed by the Nebraska Department of Health and Human Services?

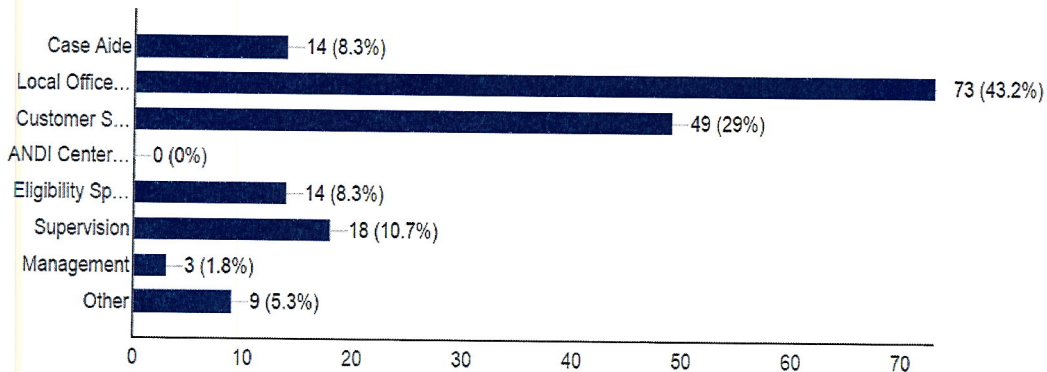


Less than 6 months	2	1.2%
6 to 12 months	11	6.5%
1 to 2 years	12	7.1%
2 to 5 years	53	31.2%
5 to 10 years	27	15.9%
10 years or more	65	38.2%

Which of the following best describes your title?

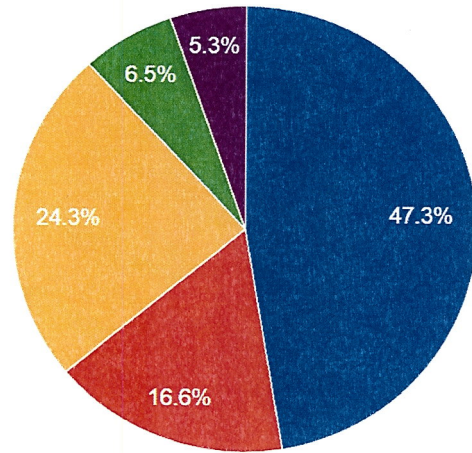


Which of the following best describe your responsibilities?



Training

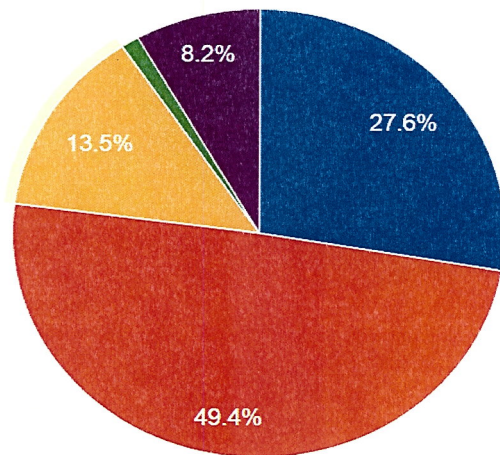
How would you describe the amount of training you received regarding public benefits programs (Medicaid, A&D Waiver, etc.) before you began your responsibilities?



- Adequate
- More than adequate
- Less than adequate
- Poor
- Excellent

Excellent	9	5.3%
More than adequate	28	16.6%
Adequate	80	47.3%
Less than adequate	41	24.3%
Poor	11	6.5%

How would you describe the amount of training you continue to receive regarding public benefits programs (Medicaid, A&D Waiver , etc.)?

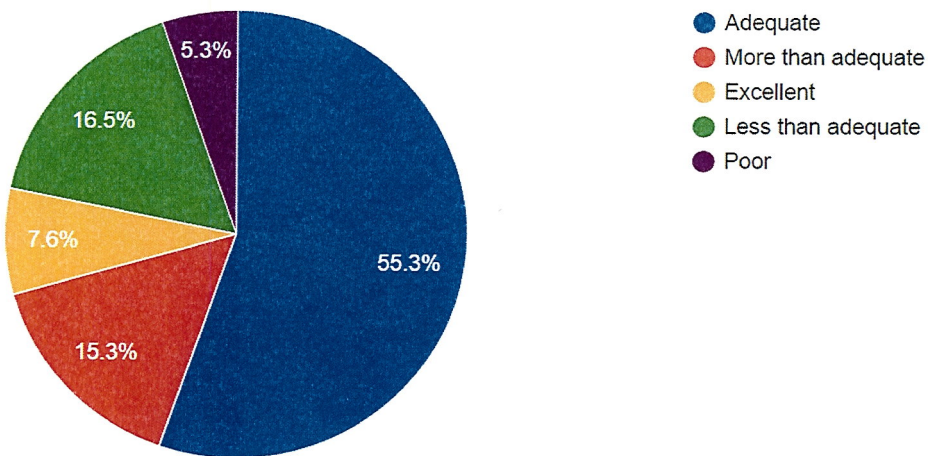


- Less than adequate
- Adequate
- More than adequate
- Excellent
- Poor

Excellent	2	1.2%
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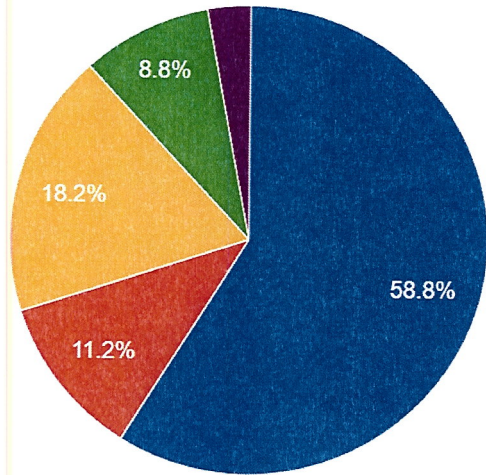
More than adequate	23	13.5%
Adequate	84	49.4%
Less than adequate	47	27.6%
Poor	14	8.2%

How would you describe the amount of training you received regarding the phone and computer system you use before you began your responsibilities?



Excellent	13	7.6%
More than adequate	26	15.3%
Adequate	94	55.3%
Less than adequate	28	16.5%
Poor	9	5.3%

How would you describe the amount of training you continue to receive regarding the phone and computer system you use?

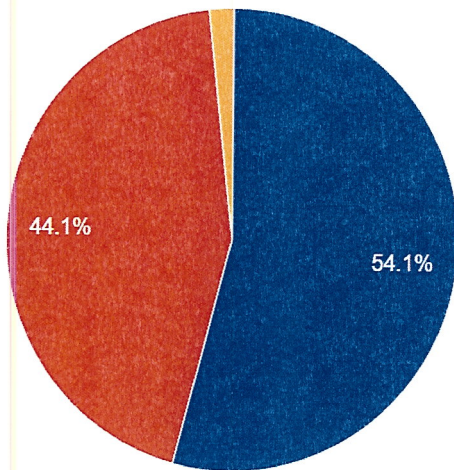


- Adequate
- More than adequate
- Less than adequate
- Poor
- Excellent

Excellent	5	2.9%
More than adequate	19	11.2%
Adequate	100	58.8%
Less than adequate	31	18.2%
Poor	15	8.8%

Work Duties

Which of the following best describes the number of work duties required by your position?

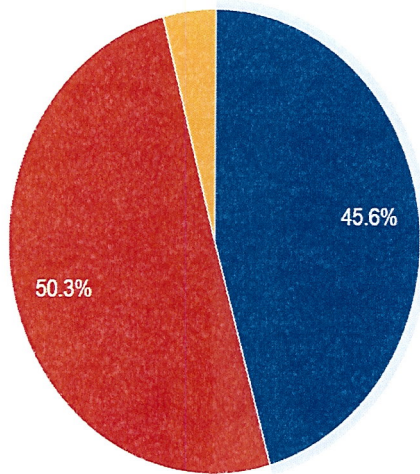


- Enough work duties
- Too many work duties
- Not enough work duties

Too many work duties	75	44.1%
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Enough work duties	92	54.1%
Not enough work duties	3	1.8%

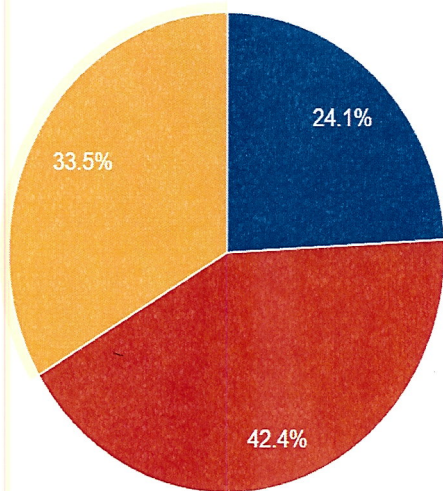
Which of the following best describes the amount of time you have to perform your work duties?



- I have about the right amount of time to complete my work duties
- I have less than enough time to complete my work duties
- I have more than enough time to complete my work duties

I have more than enough time to complete my work duties	7	4.1%
I have about the right amount of time to complete my work duties	77	45.6%
I have less than enough time to complete my work duties	85	50.3%

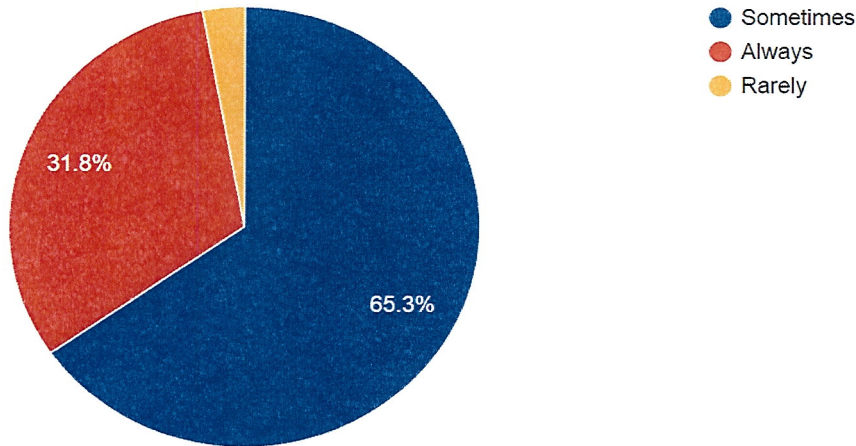
Which of the following best describes the current workload across the system?



- Most workers are able to regularly complete the pending work duties
- There is a consistent backlog in work duties
- Few workers are able to regularly complete the pending work duties

Most workers are able to regularly complete the pending work duties	41	24.1%
Few workers are able to regularly complete the pending work duties	57	33.5%
There is a consistent backlog in work duties	72	42.4%

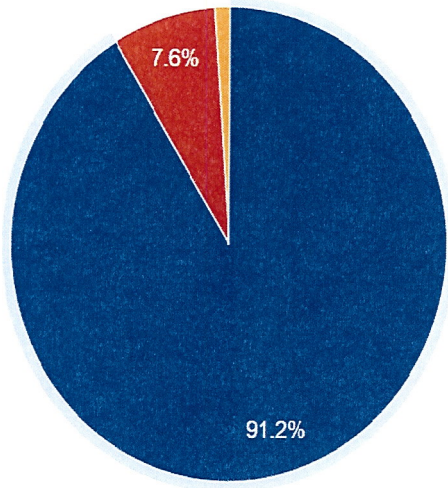
Do you have the resources needed to answer clients' questions while on the phone?



Always	54	31.8%
Sometimes	111	65.3%
Rarely	5	2.9%

Client Interaction

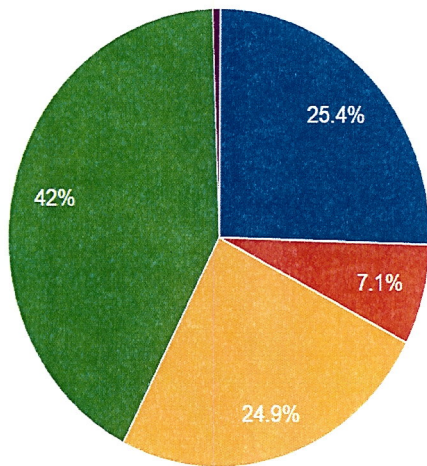
Which of the following best describes your opinion on the accuracy of your work?



- My work is accurate most of the time
- My work is accurate some of the time
- I am not sure whether my work is accurate

My work is accurate most of the time	155	91.2%
My work is accurate some of the time	13	7.6%
I am not sure whether my work is accurate	2	1.2%

Which of the following best describes your opinion on client satisfaction?

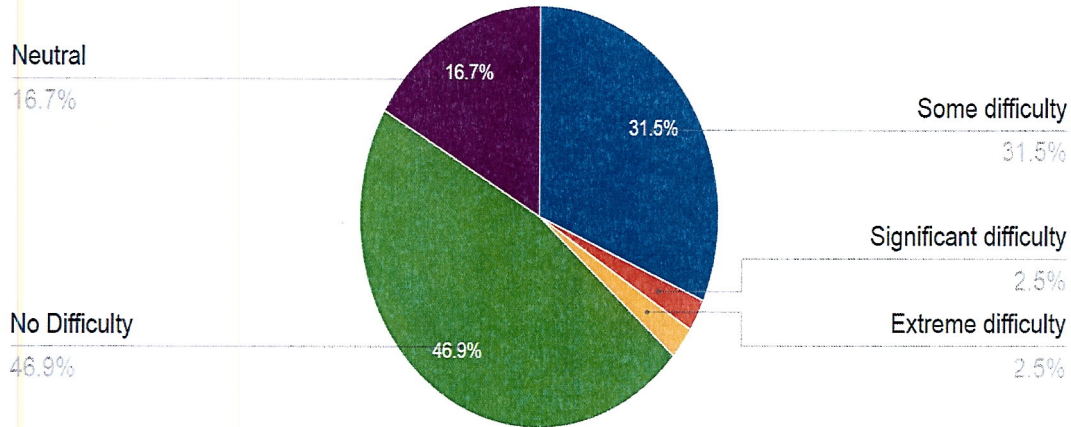


- I believe my clients are somewhat satisfied with the service they receive
- I believe my clients are dissatisfied with the service they receive
- I believe my clients are satisfied with the service they receive
- I believe my clients are very satisfied with the service they receive
- I believe my clients are very dissatisfied with the service they receive

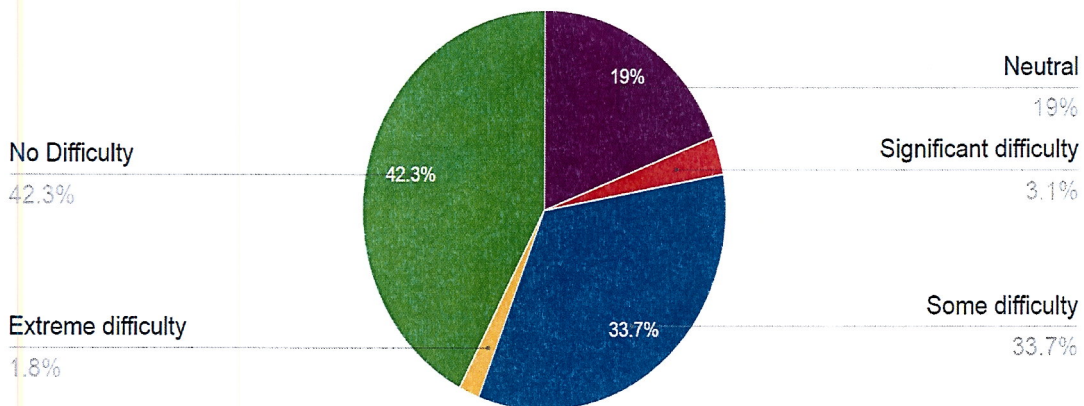
I believe my clients are very satisfied with the service they receive	71	42%
I believe my clients are somewhat satisfied with the service they receive	43	25.4%

I believe my clients are satisfied with the service they receive	42	24.9%
I believe my clients are dissatisfied with the service they receive	12	7.1%
I believe my clients are very dissatisfied with the service they receive	1	.6%

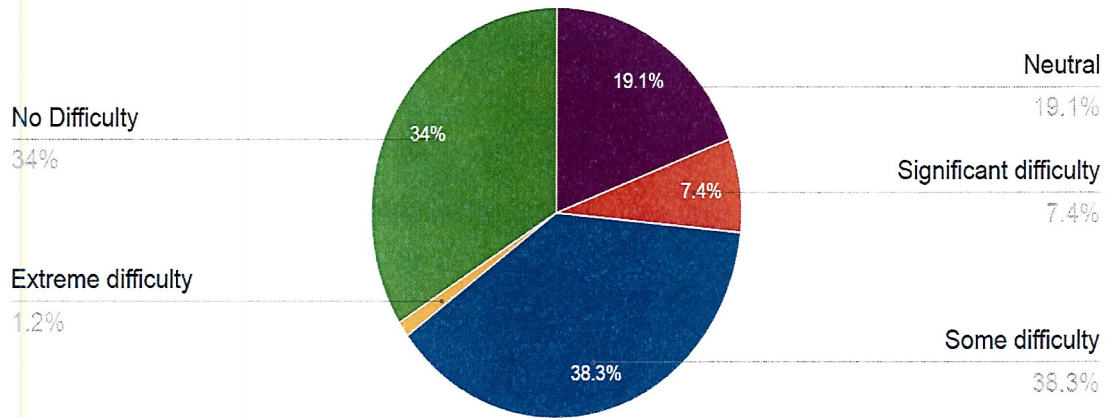
Do you experience any difficulty in serving the following client groups: Elderly



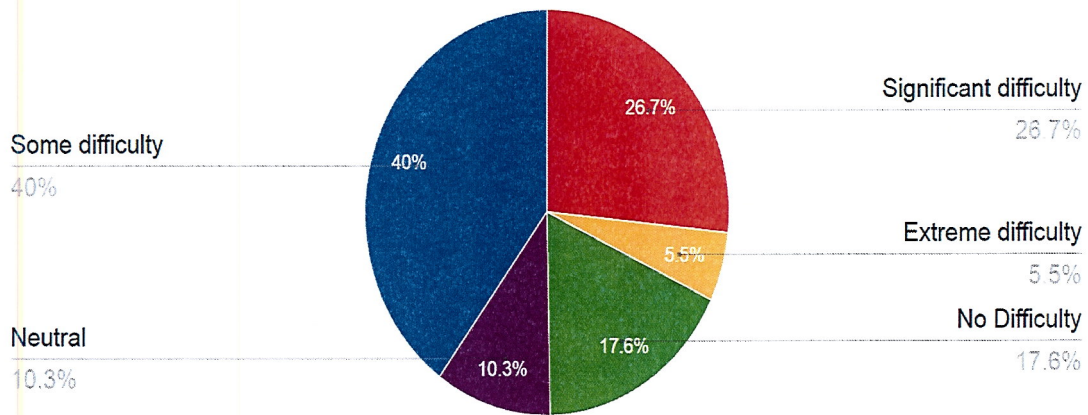
Do you experience any difficulty in serving the following client groups: People with Disabilities



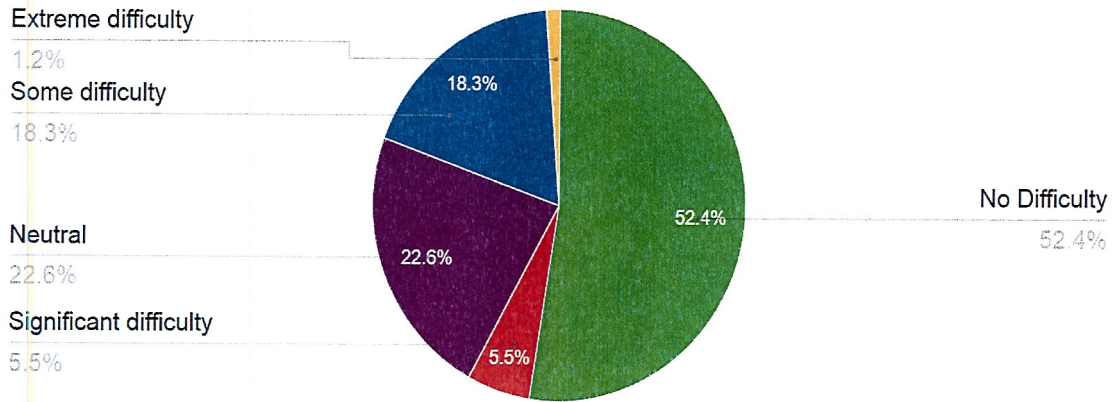
Do you experience any difficulty in serving the following client groups: People with Mental Illness



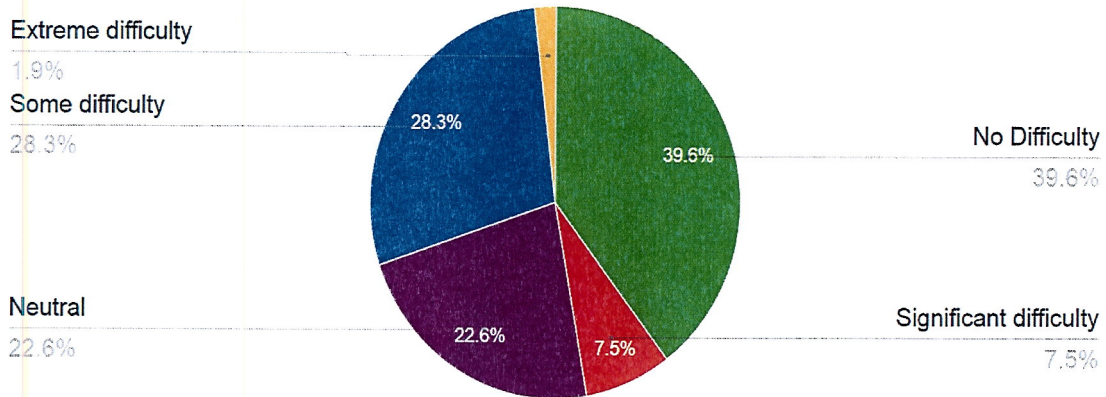
Do you experience any difficulty in serving the following client groups: Non-English Speaking Clients



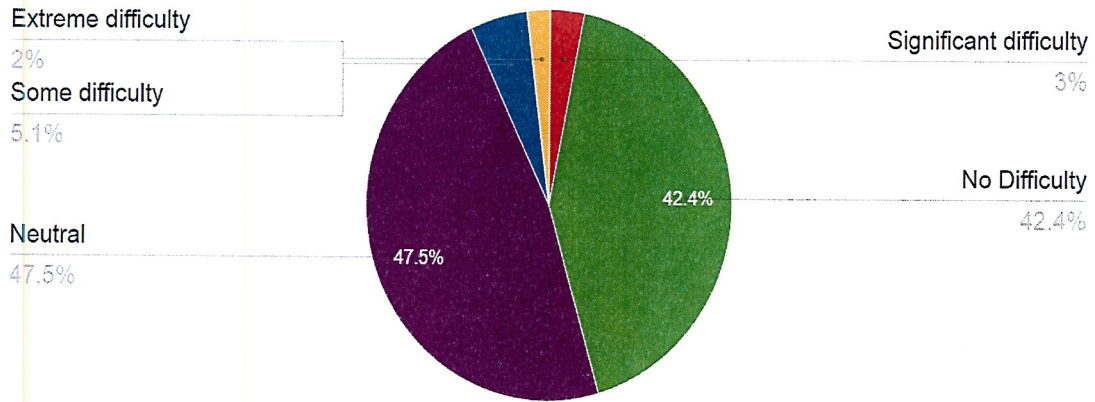
Do you experience any difficulty in serving the following client groups: Families



Do you experience any difficulty in serving the following client groups: Clients in a crisis situation (for example homeless)



Do you experience any difficulty in serving the following client groups: Other

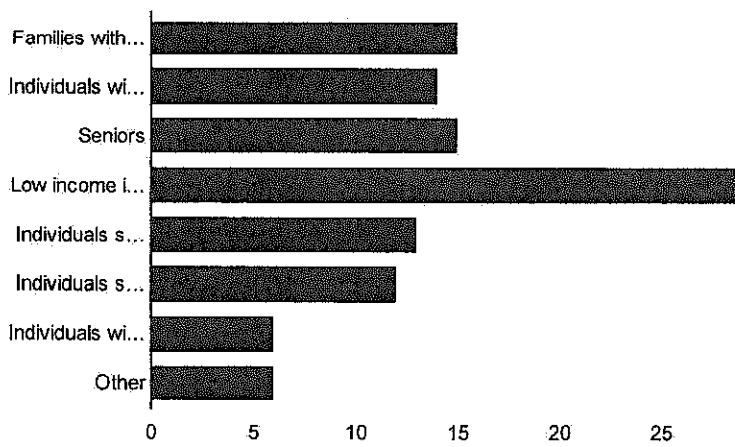


55 responses

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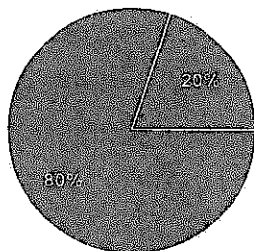
Summary

1) Please indicate the populations that you work with (please select one option that most closely describes the population you work with):



Families with children	15	27.3%
Individuals with disabilities	14	25.5%
Seniors	15	27.3%
Low income individuals	29	52.7%
Individuals seeking access to health care coverage	13	23.6%
Individuals seeking access to food assistance	12	21.8%
Individuals with limited English proficiency	6	10.9%
Other	6	10.9%

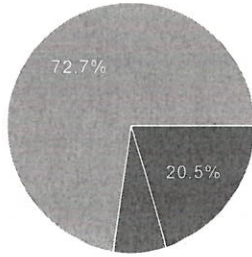
2) Have you or your clients experienced difficulty with the ACCESS Nebraska system in the last 6 months?



Yes (move to questions 3-6) **44** 80%

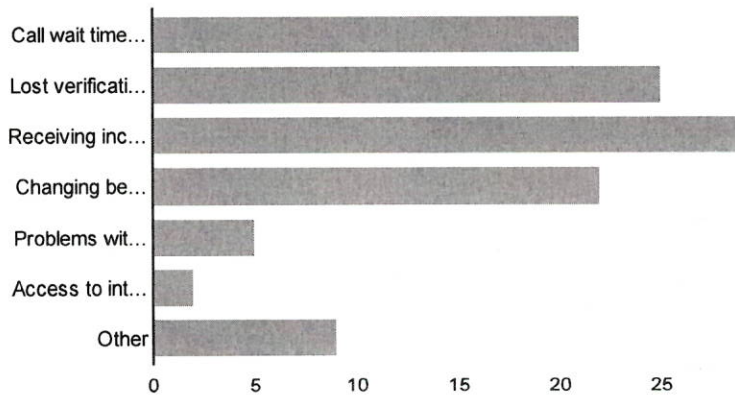
No (skip to question 6) 11 20%

3) With which part of the system have you or your clients experienced problems?



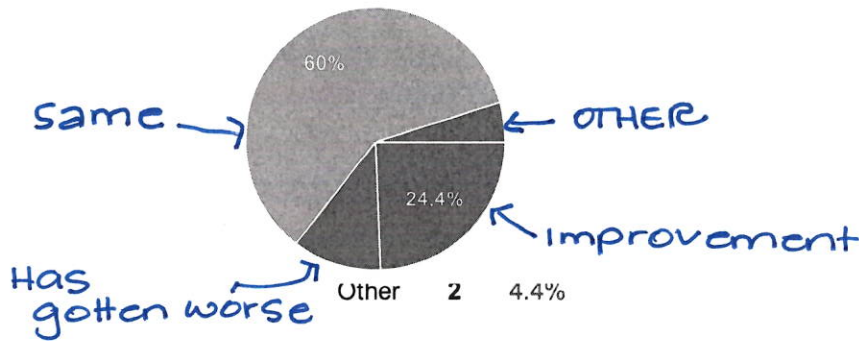
Medicaid and Long Term Care	9	20.5%
Economic Assistance (SNAP, child care, Aid to Dependent Children)	3	6.8%
Both of the above	32	72.7%

4) What problems have you or your clients faced (check all that apply)?



Call wait times that last longer than 15 minutes	21	48.8%
Lost verification documents (pay stubs, proof of employment, etc.)	25	58.1%
Receiving incorrect or inconsistent information from ACCESS Nebraska workers	29	67.4%
Changing benefit amounts (too much or too little SNAP, incorrect eligibility changes)	22	51.2%
Problems with accessing services in appropriate language (notices not sent in clients' preferred language)	5	11.6%
Access to interpreters or bilingual ACCESS Nebraska staff	2	4.7%
Other	9	20.9%

5) In the last 6 months, how has the ACCESS Nebraska system performed?



6) Are there any other things you would like to mention about the ACCESS Nebraska system?

- Still very difficult for elderly people, low functioning people to find assistance to apply. Not every community has the same resource and it is hard enough asking for help then when you have to go to 5 different places before you find someone who can help.
- The local office in Falls City, NE is not helpful at all and they are rude to people including myself as a "partner".
- I feel that there are a lot of repeat questions and questions that are not relative to what the individuals are applying for
- Procedures/policies makes it difficult for community organizations that are helping our clients to access the system. It's as if they only want individuals to contact them, and dislike the fact that organizations are helping clients.
- Better explanations for questions some are confusing.
- need local workers to handle more of paperwork. these individual need services for a reason. mostly that of not being able to track paper work, or inability, uneducated unavailability or unwillingness to work with computers. most low income are on limited minutes on their phones. WE NEED MORE FACE TO FACE WITH THESE PEOPLE! THEY NEED TO BE ABLE TO WALK IN AN OFFICE AND MEET FACE TO FACE WITH WORKERS THAT HAVE CONSISTENT INFORMATION! BRING ALL THE LOCAL OFFICES BACK! CREATE SOME MORE JOBS!
- Not at this time.
- We have seen significant changes in the timeliness and approval of applications. DHHS has worked to decrease the number of households required to submit verification and case workers have been much more helpful in getting these verification through non traditional means (such as calling employers). DHHS has also been willing to go with us to larger/high need outreach events in order to do the application on site. The improvement in their performance has impacted the cases with assist with from to see an increase of 66% approval rating of application to a 77% approval.
- Individuals we assist would benefit from face to face assistance if they are having complex issues, which most do. Calling in and getting a different answer every time from call center staff gets frustrating and does not help guide them towards a resolution to their issue. Our agency ends up helping quite a few people Navigate the system and we receive no compensation to do so. We are doing our own jobs and having to learn about DHHS programs so we can assist with them as well.
- HHS leadership with Courtney has been very responsive and actually addresses concerns raised by the deaf and hard of hearing community. It has been notice that ACCESS Nebraska has gotten better.

- ACCESS Nebraska works well for those who have a computer at home or have used a computer before, but many individuals don't have the basic knowledge about computers or how to use the Internet in rural areas. There have also been instances where staff at DHHS local offices have turned away clients from assisting them in-person, and stated the client needs to use the call center or do an application online. These people STILL need help in person. A call center and online application is great, but if a person has no idea how to get things started or how to work a computer, face-to-face application assistance is needed. The case load for DHHS caseworkers is quite heavy, and it's understandable because of the understaffed workforce. However, a call center and online application will NEVER take place of in-person assistance nor will it work effectively without on-the-ground caseworkers assisting with the application process as well as follow-up work such as submitting required documents and renewals. Thanks so much for the opportunity to submit this survey.
- I still believe it is very difficult when you have to deal with numerous workers with one issue. If you are not assigned a worker you have to call the Access Line & you never get same worker & some do not understand the issues that folks in rural NE face. There is a huge difference between Rural areas & the access we have to services & technology. We have a local office & they are not allowed to help even if it is a crisis situation. That is VERY frustrating. The local staff has always been amazing & now they have cases in Omaha.. & Omaha caseworkers have Scottsbluff clients. Does not make any sense to me. There are other issues but those are the most prominent.
- 1. Call wait times have gotten shorter. 2. It's still difficult to find knowledgeable people to talk to about complex questions. 3. We still find inconsistency in areas such as what verifications are required for eligibility, and occasional worker error in budgeting cases. We continue to have to monitor cases for errors while they are initially being opened or recertified. 4. Clients are notified only by mail when their case closes; for elders, it would be helpful to have a phone call reminder.
- We have Access Nebraska computers that allow our clients to apply when they are in our offices - that is a great feature
- The information received changes from worker to worker. When you work with a population that is aged, disabled or both it is frustrating and difficult to understand what exactly DHHS wants when you hear two different things. Some are easy changes over the phone while others take transferring to someone else or waiting for a notification in the mail.
- SNAP, Medicaid & EA program renewals should all be at the same time for the same client. Often clients ignore papers from one program because they 'just filled that out'.
- I think one of the biggest issues is the inconsistency amongst workers. I had one client I was working on Medicaid spend down and my client completed it properly, we turned in all the verification and it took me 7 phone calls to Medicaid and speaking with 5 different workers to finally get her on full Medicaid. People had entered information incorrectly into the budget, the workers didn't understand in the notes what the previous workers had done. I think each Medicaid case should be assigned to a worker while processing is occurring so there is only "one" person to communicate with.
- For awhile recently (within last year), the system seemed to be improving. Now it is as bad or worse than it was before. Verifications are "lost". Workers give conflicting information. Workers are not helpful, rude. Benefits change with no explanation.
- I have assisted several clients, with both the phone and internet access, and haven't had any problems. It seems to be going smoothly for me, so far! Thank you!
- Assigning caseworkers to certain populations has helped tremendously.

- There need to be more cultural humility by the system. When I look at the number of workers and people in leadership there are few folks who look like the client base, or Nebraskans of color.
- Higher income guidelines because of increased cost of living in this state
- Very difficult to navigate. Not user friendly. Takes hours to complete application. During difficult times when needing to apply for services, having a person to assist is vital and less frustrating than facing a computer.
- I would just like to note that I was very disappointed with one of the local offices when a client went to them for help. When he went to the office to ask for assistance he was told to fill out an application online, he does not have access to a computer nor does he know how to use one, so then he was handed a paper application (about 8 pages) to fill out. The gentleman's hand was in a cast and he was unable to write so he was told to do it over the phone because they couldn't help him fill out an application-seriously?? Had they ask him any questions at all they would have found out he was already in the system and simply had to update his information. He then returned to our office and we helped him do the app over the phone. I think we need to remember that there are clients that do not have computer access and I thought the prompts on the phone were very confusing especially to the elderly who have no idea which type of assistance they are needing. I know that caseloads are big and there are not enough staff but I do think they could take a few minutes out of the day to help clients! I see so many of the elderly that just fall through the cracks when they need assistance because nothing- in my opinion- is very user friendly about any application type with the Access Nebraska.

Number of daily responses

