



# Improvements in Public Programs' Customer Service Experiences Could Better Meet Enrollees' Needs and Help Build Trust in Government

Eleanor Pratt, Marla McDaniel, Heather Hahn, Jennifer M. Haley, Dulce Gonzalez, Soumita Bose, Sarah Morriss, and Laura Wagner

January 2023

## Study Overview and Summary of Findings

When people in the US have difficulty meeting basic needs, they may turn to public benefits, such as cash assistance through Temporary Assistance for Needy Families (TANF) or public health insurance through Medicaid or the Children's Health Insurance Program (CHIP). Whether they receive the assistance they are eligible for, and how they feel about it, may depend in part on the application processes and their customer service experiences. Many studies have shown that applications for public benefit programs can be challenging, with unclear requirements that can feel arbitrary and demanding (Hahn, Katz, and Isaacs 2017; McDaniel et al. 2022; Schweitzer 2022; Winston et al. 2021). In addition, people can feel like they are not treated with fairness or respect when applying for benefits (Barnes and Henly 2018; Gonzalez et al. 2021; Pratt and Hahn 2021). These experiences have real costs, including applicants delaying or not receiving needed benefits (Pratt and Hahn 2021).

In recognition of the importance of customer service experiences in getting people the services they need, the White House released the Executive Order on Transforming Federal Customer Experience and Service Delivery to Rebuild Trust in Government in December 2021. The executive order (EO) states that governments should design and deliver services with a focus on the people served, striving for services that are effective, efficient, fair, protective of customer privacy, and transparent. All of this, the EO argues, will build public trust in government.

To better understand the experiences of people applying for public benefit programs and their perceptions of good and bad customer service within those programs, in 2022, we interviewed 27 adults who had applied for or received TANF cash assistance or Medicaid/CHIP in 2021 and reported at least one of four specified enrollment challenges. Some of their experiences may reflect the unusual

circumstances of the COVID-19 pandemic. For instance, applying for Medicaid/CHIP and TANF benefits by phone and online became more common, particularly in the first few months of the pandemic when government offices in many states were fully closed to the public. During this period, there was also a pause in involuntary disenrollment from Medicaid/CHIP under the public health emergency (Wagner and Solomon 2020); anyone enrolled in Medicaid/CHIP before or during the public health emergency was allowed to remain enrolled regardless of changes in their personal circumstances and without having to complete periodic renewal processes. Many people we spoke with had also applied for or received benefits before the pandemic and reflected on those experiences as well. Key questions and findings include the following:

- How did people learn they might qualify for assistance, to what extent did applicants seek help from others in completing the application process, and how long did the application process take?
  - People we interviewed had varied levels of knowledge about the programs before trying to enroll. They learned about the programs and eligibility requirements through various sources, including other public programs. Some applicants reported learning about eligibility and/or seeking help with application processes from other people, but most applied on their own. Many people felt there was a lack of clarity around eligibility requirements and whether they met them.
  - » About half of interviewees reported having a disability, and several discussed finding out they were eligible for Medicaid when applying for Supplemental Security Income. Qualifying based on disability may have affected their enrollment processes.
- What challenges did people describe when applying for or renewing Medicaid/CHIP or TANF?
  - People reported several challenges applying for, enrolling in, and renewing Medicaid/CHIP or TANF, including difficulties finding information about how to complete applications, unclear documentation requirements, long waiting periods and tight timelines to submit documentation, and frustrating renewal processes.
  - » Some people reported that these challenges caused delays in obtaining needed help and had negative consequences on their lives.
- What advantages and disadvantages did people report about various ways of interacting with the program?
  - » Applicants reported various experiences with phone, online, and in-person systems, identifying several advantages and disadvantages of each. No one way was preferred by everyone.
- How did people characterize good and bad customer service when interacting with public benefit programs?
  - » People described both good and bad customer service experiences and their ideas of good customer service. In particular, they highlighted staff characteristics like kindness,

friendliness, patience, empathy, and understanding. They also wanted staff and agencies to be free of errors and to provide clear communication about program rules.

- To what extent did application processes and program rules seem fair, and how did applicants' customer service experiences affect their perceptions of government more generally?
  - » Applicants had mixed feelings about the fairness of eligibility and program rules and of the impact of their experiences on their perceptions of government more generally. Applicants described an array of positive and negative impacts as well as no impact at all.

Learning about the experiences of people facing enrollment difficulties can provide insights into the effect of such experiences on applicants and can help identify promising strategies for improving application processes. Overall, we found that negative experiences with public programs can have real impacts on applicants and enrollees, including on their immediate health, emotional state, or well-being. Such experiences can also sometimes contribute to reduced trust in government more generally. People we interviewed also identified several ways public programs can improve customer service, including by reducing paperwork requirements, increasing automatic enrollment or joint applications between programs, improving state agency websites and online application systems, and hiring and training staff to be empathetic, nonjudgmental, and committed to resolving applicants' questions and issues.

## Background

In the following sections, we provide more context on the motivations behind this study.

### **Conceptualizing Customer Service**

We sought to understand the customer service experience, which we define as any interaction with an agency or program, not only direct communication with program staff. The customer service experience can include procedures, like the steps someone must take to figure out if they are eligible, and the paperwork and documents they must provide. The customer service experience also includes people's perceptions of a program and their level of satisfaction with the program. In short, we define the customer service experience as much more than interactions with staff; it is the entire experience of learning about a program, determining eligibility, applying, and then interacting with the program or service.

# **Executive Orders on Customer Service and Racial Equity and the President's Management Agenda**

This paper was motivated in by part by the release of two EOs in 2021. In December 2021, the White House released the Executive Order on Transforming Federal Customer Experience and Service Delivery to Rebuild Trust in Government, which laid out several goals. Specifically, it clearly articulated that governments should design and deliver services with a focus on the experiences of the people served by engaging customers in the design and improvement of services. Ultimately, the customer

service experience should be effective, efficient, fair, protective of customer privacy, and transparent. All of this, the EO argues, will build public trust in government. To improve the customer service experience, the EO identifies the need to better understand customers, minimize administrative burdens, and move away from compliance-oriented processes.

In January 2021, the White House released the Executive Order on Advancing Racial Equity and Support for Underserved Communities through the Federal Government,<sup>2</sup> which articulated a whole-of-government approach to advancing equity for people of color, historically underserved groups, and people marginalized and adversely affected by persistent poverty and inequality. The EO defined equity as consistent and systematic, fair, just, and impartial treatment. In addition, it called for conducting equity assessments in federal agencies, including exploring barriers to accessing benefits and services.

Our research was also influenced by the "Draft Learning Agenda in Support of the President's Management Agenda" (OMB 2021a), which raised important questions about how the federal government can better deliver programs to build trust. In particular, the learning agenda raised the question, "In what cases do people need individual support to navigate a complex Government process, and when can an automated or virtual process achieve a similar outcome?" We were interested in understanding the level of complexity of the application process, the reasons why people do not complete applications, and the main reasons for rejected applications. We also sought to understand the variation in process between in-person and online applications.

In addition, the learning agenda asked, "How do various touch points between a person and government services affect trust in Government? Is it speed (e.g., short hold times for a phone call), transparency (e.g., open data with accessible dashboards), or knowledgeable service (e.g., staff with expertise to solve a problem)? In those contexts, how do different modes or styles of communication (e.g., live chat, in person, or over the phone) affect trust?" In our interviews, we explored individuals' opinions about the key components of good customer service, how their customer service experience varied by way of communicating, and how these experiences shaped their perception of government.

Taken together, these EOs and the learning agenda informed our research questions as we sought to understand the customer service experience in the public benefits context.

## Research Approach

In this study, we aimed to better understand both the actual customer service experiences of applicants and how applicants think good customer service looks and feels. In the context of the EOs on improving customer experience and advancing racial equity, we wanted to understand the range of customer service experiences and learn ways to improve those experiences. We focused on the following questions:

- What are applicants' customer service experiences when applying for public benefits?
- How do customer experiences vary by way of communicating (i.e., in person, by phone, online)?

- What is "good" customer service and what would improve applicants' customer service experiences when applying for public benefits?
- How do experiences interacting with benefits programs affect applicants' views of government more generally?

Our primary goal was to understand the customer service experience when applying for Medicaid/CHIP or TANF, especially how experiences varied by way of interacting (in person, by phone, or online). Our secondary goal was to hear directly from people who applied for public benefits programs about how that experience could be improved and what a good customer service experience would look like to them.

#### Who We Interviewed

We conducted semistructured interviews with 27 nonelderly adults who had previously participated in the December 2021 Urban Institute Well-Being and Basic Needs Survey (WBNS). The WBNS asked about customer service through questions about challenges figuring out eligibility, providing documentation, and not getting benefits in time and about the level of courtesy and respect provided by program staff. Our interviews included people who reported in the WBNS that they had applied for or received TANF or Medicaid/CHIP. In addition, we selected people who reported at least one of the following enrollment challenges on the survey:

- responded yes to, "Thinking about your and your family's experiences with [program] in the past 12 months, was there ever a time when you had trouble figuring out if you or your family member were eligible for the program?"
- responded yes to, "Thinking about your and your family's experiences with [program] in the past 12 months, was there ever a time when you had trouble providing required documentation or completing other paperwork?"
- responded yes to, "Thinking about your and your family's experiences with [program] in the past 12 months, was there ever a time when you did not get benefits as soon as you needed them?"
- responded never or sometimes to, "Thinking about your and your family's experiences with [program] in the past 12 months, how often did the program staff treat you with courtesy and respect?"

Overall, more than 4 in 10 adults with incomes below 400 percent of the federal poverty level in the survey reported at least one of these challenges in TANF, and about 3 in 10 adults reported at least one of these challenges in Medicaid/CHIP (McDaniel et al. 2022).<sup>3</sup> Our follow-up interviews allowed us to explore these challenges in much greater depth. The interviews allowed us to see the arc of someone's full experience from determining their eligibility and applying to receiving benefits and participating in the program.

5

Interviews took 25 minutes and were conducted between June and July 2022. We asked participants about their experiences applying for TANF and/or Medicaid/CHIP, including how they found out if they were eligible and the steps they took to apply. We asked about their experiences interacting with the program in person, over the phone, and online, the kinds of documentation they needed to provide, and the rules and requirements they had to meet. We also asked participants to describe what they think makes for good customer service and how their experiences with these programs shaped their perceptions of the government. While all interviewees had applied for or received TANF or Medicaid/CHIP in 2021, many discussed application experiences both during and before the pandemic.

All but 1 of the interviewees applied for or received Medicaid/CHIP, and 10 interviewees applied for or received TANF. Of the 17 women and 10 men we interviewed, most (21) lived in an urban area and many (15) indicated either on the survey or in their interview that they have a disability. The sample included 18 non-Hispanic white respondents, 4 non-Hispanic Black respondents, 4 Hispanic respondents, and 1 multiracial respondent.

Study methods received approval from the Urban Institute's Institutional Review Board. In addition, input from the Urban Institute Health Policy Center's Medicaid/CHIP and health equity community advisory board informed the direction of this project during research design and findings interpretation and included the suggestion of a broad conceptualization of customer service to include structural factors.

### How We Analyzed the Interviews

We interviewed each person individually in teams of two interviewers, with one asking questions and the other taking detailed notes. We recorded the audio of each interview for transcription with participants' permission. Based on our interview guide, we developed a coding structure that allowed us to systematically review interview transcripts and identify key themes. We used NVivo 12, a qualitative coding software program, to code each transcript. The following sections discuss prominent themes and provide illustrative examples from individual interviews.

#### Limitations

Of course, these 27 interviewees represent only a small sample of the people who have interacted with Medicaid/CHIP or TANF and provide limited insights into the programs, not generalizable results. We know that experiences can vary by program, state, and time, with different policies and practices in place. We also note that we spoke only with WBNS respondents who reported at least one of four enrollment difficulties during 2021; experiences may differ for those without any enrollment difficulties. This study also could not assess variation by state or subgroup (e.g., by gender, race, ethnicity, or disability status). Nonetheless, our findings are consistent with those of other similar studies (Hahn, Katz, and Isaacs 2017; Hahn et al. 2016). Future research could include more focus on the demographics of customers, either comparing across groups or diving into the experience of specific

groups (e.g., LGBTQIA+ individuals, people of color, people with disabilities, people living in urban/rural areas).

A little more than half (55 percent) of our sample indicated either on the survey or during the interview that they have a disability. This is a higher share than among nonelderly adults overall; about a quarter of Medicaid enrollees nationally have a disability (Musumeci and Orgera 2020). The 2021 WBNS found that people with disabilities were more likely to report trouble getting Medicaid/CHIP benefits when needed and were never or only sometimes treated with courtesy or respect by Medicaid/CHIP staff (McDaniel et al. 2022). Our interviews did not show a discernible difference between the experiences of those who indicated a disability and those who did not.

### What We Learned

In this section, we describe what we learned about the ways people learned they might quality for assistance, their experiences and challenges with the application and renewal processes, their experiences and understanding of good and bad customer service, their perceptions of fairness in the application process, and how their experiences might have influenced their perceptions of government more broadly.

# How Did People Learn They Might Qualify for Assistance, and to What Extent Did Applicants Seek Help from Others in Completing the Application Process?

Learning about and deciding to apply for a public benefit program can cost time and energy. Overall, a significant share of 2021 WBNS respondents with family incomes below 400 percent of the federal poverty level whose families applied for or participated in programs in the past 12 months reported having trouble figuring out if they were eligible: 19 percent in Medicaid/CHIP and 35 percent in TANF (McDaniel et al. 2022). Among the adults we interviewed who reported having problems enrolling in either Medicaid/CHIP or TANF, several people described not wanting to waste time on a burdensome application if they were unlikely to be found eligible for benefits. We were interested in understanding what led people to these programs, how they heard about them, and the challenges they faced in applying. We also asked people if they worked with any organizations to help them complete their applications and ease challenges. People told us about experiences applying for these programs both during and before the COVID-19 pandemic. People described an array of ways in which they learned about these programs, including

- finding out about eligibility for Medicaid through their enrollment in Supplemental Security Income, which they received because of a disability;
- seeking coverage for chronic health conditions online and learning about Medicaid;
- seeking Medicaid/CHIP after losing health insurance coverage because of a job loss or divorce;
- hearing about Medicaid/CHIP through health care providers and community case workers;

- returning to Medicaid because of the pandemic after having pregnancy-related Medicaid coverage in the past;
- having a pediatrician suggest various benefits, including TANF, the Supplemental Nutrition Assistance Program (SNAP), and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC);
- seeking TANF cash assistance after job loss; and
- learning about potential eligibility for TANF after applying for Medicaid/CHIP and SNAP.

Several people found **eligibility requirements difficult to navigate**. They regularly expressed confusion about why they were found ineligible. For example, one person was told by SNAP program staff to apply for health care online through healthcare.gov, but at the end of the application, she was told she was ineligible because she was not a recent mother or a person with disabilities over age 65. Another person did not understand why she was denied TANF in her most recent application but had qualified for TANF three years prior. Another applicant described her experience applying for both SNAP and TANF and feeling deeply unsure if she qualified, saying, "Can I apply for both? Is that something you can get for both? It didn't really make it that clear...I believe I just ended up doing it and saying, 'Well, they'll figure it out on their side and tell me what's what."

Another person who applied for TANF but was denied wished the application form could provide more detail on the eligibility requirements and cut-off levels so potential applicants could have a better idea if they might be eligible. This person suggested having "maybe...a 5- or 10-minute thing you fill out and then it's like, 'Yes. You might be eligible, so go ahead and fill it out,' or it'll just tell you up front that you're not going to be eligible...to give you a sense of the likelihood that you might be eligible before you do all the work."

It was **relatively uncommon for people to report receiving application assistance**. Some did not seek support because of stigma; one applicant said, "We didn't really want people to know we were applying, so we didn't ask." Another applicant described seeking assistance with his applications through a community action organization and explained he would continue to do so since it was "a lot easier" and "done on the spot."

# How Long Did the Application Process Take and Did Applicants Apply for Multiple Programs at Once?

Most people we spoke with reported a **multistep enrollment process**, **involving an initial application and follow-up phone calls**. The length of the enrollment process varied significantly. A few people were able to enroll within a few days, but others had to wait weeks and months.

Some of this variation may owe to variation in applicants' circumstances; for instance, some people qualifying on the basis of a disability mentioned needing paperwork to document health challenges as part of the application process, whereas such requirements may not apply for other applicants.

Some people applied for multiple programs at once. Among these applicants, some found out they could apply for other programs when applying for Medicaid/CHIP or TANF, whereas others were automatically enrolled in more than one program. Different states and localities have different processes, with some automatically enrolling participants, some offering joint applications, and some offering referrals but requiring separate applications. Most people who were automatically enrolled or were able to submit one application for multiple programs felt the application process was easier because they could provide all their information at once. As one applicant said, "It was way easier because it's just one step. You know what I mean? It wasn't, 'Let's do this, and then you come back tomorrow or next week, and we'll do the other.' No. It was just right there. They even filled out my paperwork for heat [assistance]."

Others who had to submit multiple applications separately found it just as difficult to apply for multiple programs at once as applying for only one, given all the program requirements. One applicant said, "I don't think it was very easy...Different programs have different people you have to talk to. On occasion, different programs have you sending things to another place. It's like going two different directions for the same thing." Another said, "They would all ask for, basically, the same information, but you'd be typing it over and over again...It just gets tedious."

# What Challenges Did People Describe When Applying for or Renewing Medicaid/CHIP or TANF?

In the 2021 WBNS, some respondents reported having trouble providing required documentation or completing other paperwork when applying for TANF (27.0 percent) and Medicaid/CHIP (13.2 percent) (McDaniel et al. 2022). In our interviews, applicants described having difficulty finding information about the application, answering application questions, and determining what documentation to submit. Some also described a long application process, including multiple rounds of document submission. Additionally, several described their experiences renewing Medicaid/CHIP. There was no discernible difference in the challenges people described when applying for Medicaid/CHIP or TANF.

These challenges had repercussions: some people described a sense of fear that they would not receive needed benefits; others described being denied benefits or losing months of benefits after staff errors. For example, one person who had applied for CHIP for their children said the following:

I'd have to wait multiple months to actually find out, it's just—it makes you sort of depressed, sort of nervous, sort of concerned that, well, hopefully, in these two months, nothing's going to happen that we have to go get medical services for because we're going to be in between and what happens then?...You get charged extreme amounts of money.

#### DIFFICULTIES FINDING INFORMATION ABOUT HOW TO COMPLETE THE APPLICATION

**People often found the application process difficult to navigate.** Several people highlighted challenges locating applications and program information. One person found the government website so difficult to navigate that she turned to an online forum for help, saying, "They told us to go through the state government website, which was completely disorganized and was very difficult to find. I eventually

found it [the application]. I actually had to get on some Reddit forums to figure out how to navigate their website to find the questionnaire."

Many people said the application questions were unclear or not applicable to their situation and often required guesswork. Applicants shared the same sentiment about determining which documents to submit. One person who applied for Medicaid/CHIP and TANF said, "You just had to guess and submit what you had and hope that it was the right thing that they were looking for." Another person found some questions on the application challenging to answer because of her living situation:

They asked a lot of, just, basic questions of household size, what kind of assets you had. Some of the descriptions, I think, could have been worded better because there were times I wasn't sure if I needed to include certain bills or what it was asking as far as what we paid in utilities. We were in base housing, government housing, at the time. The way our rent worked was that they just automatically take it out of my husband's pay. We don't see that amount. We don't pay utilities out of that amount either. There was really no option to submit that through their questionnaire. I had to do the best I could just by guessing, which is probably why they had someone call you afterwards to try and figure out because it was—some of the questions were very vague and didn't fit our situation.

Many people also felt that it was **challenging to get help** with their application. As one person explained, "You don't know the answer or you don't have the documentation, and you're just kind of on your own. You have to basically just fill in something and hope that it's what they were looking for because there's no one to ask. There's no way to confirm."

# CHALLENGES WITH TIMING: LONG WAITING PERIODS AND EXTENSIVE PAPERWORK REQUIREMENTS

Many applicants felt the application process took longer for them to complete than it should have. Some felt that the process took so long because program staff kept asking for more paperwork, even sometimes asking for the same information. Several highlighted mistakes made by the state agency, like losing paperwork, or clerical errors, like entering the wrong amount for their child support order, which slowed down their receipt of benefits. As a result, several people described making sure they got receipts when they turned in paperwork, whether in person or through an online portal, so they could prove they submitted their applications on time. As one applicant shared, "The waiting time. How would I explain it? Sometimes you would drop off papers and the papers would disappear. They would not get there. Then it will make it more difficult to get benefits."

One person who found out he was eligible for Medicaid when applying for Supplemental Security Income noted it took two years to receive Medicaid benefits because he had to wait for his Supplemental Security Income application to be approved. Another person who applied for TANF described the process of applying and waiting for benefits as follows:

After she called and took down Social Security numbers and, just, all of our basic info, they had us mail copies of birth certificates and photocopies of driver's licenses and the Social Security cards to the state building. That took several weeks to just arrive. Then it took several more weeks to

get looked at and approved. We waited, I want to say, about a month and a half between actually applying before we actually could start using our benefits because it was a bit slow.

A few people also described a **tight timeline** to submit documentation. One person commented that it was a "pain" to provide the documentation, and that the programs did not give people enough time to submit. One person said, "If I had to do it again, I would just make sure I gave myself enough time to get all the paperwork done."

#### **CHALLENGES WITH RENEWAL**

Though people automatically remained enrolled in Medicaid/CHIP during the COVID-19 public health emergency, a few people described their experiences renewing their Medicaid/CHIP benefits before the pandemic. Some expressed frustration about having to provide information that the program could already access. One person said that it was a "headache" when staff had to look through files to find previously submitted information. They expressed frustration at having to repeatedly provide the Medicaid/CHIP office information that had not changed or that the agency should have access to:

The verification request, it's like the only thing that has changed from last year to this year is my Social Security DI [disability insurance] income level. Because they are a state agency that handles this sort of thing, they—and I'm on their roll—they automatically get a copy of the increase—well, of the balance, how much money I'm receiving from Social Security—because they can legally request that information. It's like, why do I have to keep giving them the same information?

Another person noted that even though she submitted her report on time, she frequently receives messages informing her that her recertification for Medicaid has not been received or is not yet processed. She said, "I'm making phone calls to make sure, 'Hey, I turned it in. You guys tell me, you emailed and said you haven't received it. Have you received it yet?'"

# What Advantages and Disadvantages Did People Report about Various Ways of Interacting with the Program?

Accessing Medicaid/CHIP and TANF services can happen several ways: in person, over the phone, or in an online automated process. Because of the pandemic, applying for Medicaid/CHIP and TANF benefits by phone and online became more common, particularly in the first few months of the pandemic when government offices in many states were fully closed to the public. Everyone we spoke with had applied for or received benefits in 2021, though many had also applied for or received benefits previously, so many people discussed interactions with programs both before and during the pandemic. Across interviews, no two participants had the exact same experience and no way of interacting was favored by all participants. Different ways of interacting were best for different people depending on their needs and preferences. One person described the dynamic in this way:

I feel like there are ways for the state to anticipate problems for low-income families. Not everyone has access to printers. Not everyone has access to fax machines. Some people aren't able to get to this website. Some people just may not even understand where to get their own pay stub, and I think the programs kind of make assumptions that people already know how to do

those things. When they have a family who's trying to apply, and they're not able to meet those expectations, there's not a whole lot of options to help them. If they made assumptions that not everyone is able to meet those expectations, then they should have more solutions to resolve those problems, instead of being taken by complete surprise when someone goes, "Oh, I can't fax that to you. I don't know how to do that," or "I don't know where to access that piece of information." Yeah. More solutions would have been nice.

Table 1 summarizes the advantages, disadvantages, and suggestions people offered about telephone, online, and in-office interactions with public programs.

TABLE 1
Advantages and Disadvantages of Various Ways of Interacting with Public Programs

Telephone	Advantages  Suitability for issues not easily solvable through a single office visit or online (e.g., "They took my report over the phone, for the update, for my account. That was fairly easy.")	Disadvantages  Long wait times (e.g., "I've been known to stay on the phone for two hours.")  Difficulties reaching staff who are familiar with their case  Encounters with rude and unhelpful staff on occasion (e.g., "[The] person was very rude on the other line.")	Suggestions for improvement  Ensure staff are nonjudgmental and supportive (e.g., "They need to understand that when people are calling them, they need help. They're not calling them to waste their timeand being unfriendly does not work.")
Online	Speed, simplicity, and ease, especially after pandemicrelated improvements (e.g., "[Systems are] much more cohesive now.")  Maintenance of personal records of submissions to hold the program accountable by verifying receipt  Efficiency of online submission (instead of fax) through apps/screenshots (e.g. "You can literally just take a screenshot of your paperwork and then upload it to their app.")	Difficulties remembering user names and passwords, requirements to generate new accounts for each renewal sometimes  Challenges finding/navigating websites (e.g., "I feel like it's a screening process in itself just trying to find the website.")  Potential websites crashes and application losses (e.g., "You're supposed to be able to save it online, but then it wouldn't let me go back into it.")	Improve website design, making it easier to both find the correct website and navigate the application process  Create applications that autosave and allow applicants to complete in multiple sessions  Provide a text chat option for applicants to get help while completing applications online  Autofill information provided for one program to applications for other programs (e.g., "You've already typed in your address and all your information once. Why do you have to type it all again?")
In office	Availability of real-time help Verification by staff that there are no mistakes with applications to help applicants feel more secure	Negative effects of the process of traveling to the office, the conditions of the physical office, and the other people present (e.g., "There'll be fights in therelt can be a little uncomfortable.")	Maintain clean, welcoming spaces with adequate space for private interactions  Ensure staff are nonjudgmental and supportive

Advantages	Disadvantages	Suggestions for improvement
Efficiency of finding information and completing application process in one trip	Heightened potential for stigma discouraging people from going to the office (e.g., "It's just embarrassing going in thereIt made me feel ashamed.")	Ensure staff have appropriate paperwork for each case on hand

**Source:** Study interviews with applicants who had difficulty accessing Medicaid/the Children's Health Insurance Program and/or Temporary Assistance for Needy Families.

# How Did People Characterize Good and Bad Customer Service When Interacting with Benefit Programs?

We aimed to better understand applicants' actual customer service experiences and how they think good customer service looks and feels. Notably, even though we asked about customer service broadly and defined customer service as all the steps someone has to take to find out if they are eligible, provide paperwork and documents, and ultimately receive benefits, most people focused their descriptions of good customer service around staff characteristics. This speaks to the importance of face-to-face and phone interactions in a person's experience with a program.

#### EMPATHETIC, PATIENT, AND UNDERSTANDING STAFF

When asked to describe good customer service, many people led with their own experiences interacting with staff. They frequently used words such as kind, friendly, patient, empathetic, and understanding. Many people described applying to public programs as overwhelming and explained how stressful situations led them to apply for these programs. In addition, several described facing stigma when deciding to apply and going through the process. Because this experience can be stressful and overwhelming, the friendliness, patience, and nonjudgmental attitudes of staff can make a difference in an applicant's experience. Similarly, impatience, rudeness, and a lack of understanding can be especially difficult for applicants to manage in what is already a stressful situation. As one person said, "Obviously, when somebody is in that position, they are there under duress. The fact that [staff] don't care or it feels like [staff] don't care makes it an even harder situation to deal with."

One applicant expressed appreciation for staff who did not "shame you because you're in there." Several described an expectation of judgment and a strong sense of relief and gratitude when they did not feel judged. One person had a particularly positive experience with a staff member:

He was incredibly down to earth. He didn't want to pass judgment. He was friendly, personable, nice on the phone. He said, "Yeah. Everyone needs help sometimes. There's no shame in applying for these things. It's something that everyone goes through at some point sometimes." Yeah. He was just super nice and made me feel like I wasn't—you get in these places sometimes and you feel like you're in the wrong or you're less than everyone else, and you're taking something that maybe you shouldn't be. I don't know. You semi-feel like you're worthless, or it's not always easy because of the stigma that's attached to it, so he just made it a lot nicer to hear from someone

that was like, "You're doing what's best for your family. This is here to help you. It's not something that you should be feeling upset about doing."

Feeling understood can transform the experience of applying to public assistance programs. One person described, "I felt like the TANF representative felt more human, if that makes sense. She totally understood our situation. She was very respectful. She was even cracking jokes the whole time. It was actually kind of a joy to get to sit and talk to her while we went through the paperwork." In contrast, this person said, "The WIC lady had no sense of humor whatsoever. I got the feeling we were just a number to her." Many people stressed the importance of being treated like a human being.

#### HIGH-QUALITY AND ERROR-FREE WORK

Some people described how they did not trust state agencies (or their staff). Many of the negative customer service experiences people described **involved errors made by state agencies** and the difficulty of getting those errors resolved. Many people told stories of agencies losing paperwork, inputting information like birth dates and income incorrectly, or not processing applications quickly enough, resulting in erroneous unenrollment from programs or lengthy resolution processes, often involving difficulty reaching staff members over the phone or receiving calls back. Several people described this process as a nightmare.

#### CLEAR COMMUNICATION ON PROGRAM RULES AND REQUIREMENTS

People also described **confusion about rules and difficulty getting a straight answer from staff**. One person said about the eligibility rules that resulted in their denial from the program, "It's the miscommunication, the lies they tell." Another person described the process: "It's a runaround. You cannot get a clear and concise answer."

Because of these negative experiences, a **sense of resignation** emerged from some of the people we talked with. Some people expressed the sentiment that "sometimes, you just have to wait." One person said, "It's like you're on their time. It's not about you when you're dealing with that, which is understandable, but, like I said, they need to understand there are some people that can't really be on their time either for whatever reason."

### To What Extent Did Application Processes and Program Rules Seem Fair?

The EO on customer service and rebuilding trust states that government services should be "fair." We asked people if the rules and requirements were clear to them and if they seemed fair and reasonable. People we interviewed described mixed perceptions of fairness, with many saying that the rules and requirements seemed fair, even though the process was too lengthy or complicated, as described previously. For some, the process also felt too intrusive and burdensome (such as requirements to determine the value of assets like vehicles). Some people equated fairness with clarity in the application process, with having clear upfront information about the rules and requirements. As one person said, "The rules and requirements were clear in the paperwork; it was easy and seemed fair. Basically, it was for everybody, and there was no discrimination, I should say, for anybody."

Among some who felt the application and rules were unfair, several expressed frustration with the public benefits system overall and what can feel like arbitrary income thresholds to qualify. In this context, a few articulated the double-edged sword they faced—barely making enough to get by but being just over the income threshold for benefit eligibility. One person who applied for but did not receive TANF noted that she felt it unfair that her family barely had enough income and only one working adult but still could not qualify. Similarly, one person shared that while program eligibility looks at income or job status, even if you have a job, you may not have enough money to get by. Another person reflected on this issue:

I know there's a lot of times people get stuck in that range where they have, "This is the X cutoff." Maybe you're making \$1,000 more than that cutoff, and so you get stuck into this gray area where you're not making enough to actually live very reasonably at all, but you're...not able to get anything in assistance. You're just stuck in this limbo area where it's still really hard to get by, but you're not making so little that they say it's okay for you to get anything in assistance.

# How Did Applicants' Customer Service Experiences Affect Their Perceptions of Government More Generally?

The EO on customer service argues that better customer service in public programs will build trust in government. We asked people how their experiences with Medicaid/CHIP and TANF shape how they think about the government and whether and/or how they can count on it to help support their needs.

Overall, whether experiences with public benefit programs affected people's perceptions of the government varied, with people expressing both positive and negative impacts as well as no impact at all.

In several cases, people felt the application experience did not have any influence on how they felt about the government, or vice versa. One person shared that while they were unsure about how they felt about the government, they thought that Medicaid had been "very helpful." Similarly, another person commented that they were "appreciative" of the government's work on these programs, but they separated their experiences and opinions between programs, sharing, "I'm appreciative of what the government has done with these programs that helped me when I needed them—unemployment, TANF—they do very well with it. There are other things that they don't do well; I don't let it affect my perspective."

Some people shared how their experiences interacting with their state's Medicaid/CHIP or TANF programs have also **positively affected how they view the government**. People also mentioned that they were appreciative and grateful to receive these benefits and described how public benefits have supported them. They described how Medicaid/CHIP and TANF helped them get by during difficult times like the pandemic, periods of unemployment, or after an injury. One person said, "Well, it's helping me because, otherwise, I would be on the street. That, to me, the government did good on that part, I think, because it helped me, because I can't work anymore."

Some people reflected on how the challenges they encountered while interacting with the Medicaid/CHIP or TANF programs **negatively affected how they view the government**. People shared examples of the onerous requirements that they needed to complete to be eligible for benefits, such as needing to hire a lawyer to prove disability or to legally document that they required health care. One person shared that their negative experiences interacting with the program felt like "getting slapped in the face when I was trying to get help."

Some people discussed feeling like they had to "jump through hoops" and how that has affected their feelings about government. One person shared that they "just did not want to deal with any of it right now" because "it's too bothersome." Others shared that while they have been able to navigate these challenges, others may be dissuaded from enrolling public benefits because of these complexities. One person said, "It's not easy to navigate. You just have to find the strength within to get through and navigate through these programs. I'm okay now, but I know it wasn't easy. I have a friend who needs to apply for them, but she won't because she's already thinking she would not get them."

Another person, who experienced an overpayment in SNAP and was required to pay back their benefit, described their fear in interacting with the program and other government programs broadly: "They fail the community...I won't even apply for food stamps or Medicaid because I'm scared that they may say they overcharge me. 'You have to pay this back or we're going to lock you up for this.' That's how I feel about them. It's scary."

While most people did not discuss race or racism, one person shared how racial inequities have led to different experiences accessing health care, welfare benefits, and job searching: "Everybody needs to talk about that elephant in the room, too, because [the state] ain't necessarily that kind to Black people."

The **feeling of resignation** that people shared while reflecting on their experiences with customer service was sometimes mirrored in how they felt about the government as a whole. One person said, "It is what it is, our government is broken," after sharing how they had gone through court three times to obtain disability paperwork. Another shared, "I know every time you deal with a state agency, there's just always going to be a long process, so my expectations were already pretty low, and they met them." Another indicated that following their experiences interacting with the Medicaid program, their trust in the government's ability to fulfill their needs decreased. One person shared the following:

I don't trust the government to help support me on absolutely anything. They took a third of my husband's paycheck, and then I have to go through a lengthy process to get crumbs given back...I don't really trust them to do anything to help because I feel like if they wanted to actually help people, they wouldn't make people jump through those kinds of hoops. They would just have things that were automatic, you know?

Another theme that emerged from our conversations was the impact of paying taxes on how people assessed whether they deserved to receive public benefits. For example, one person expressed that they were initially hesitant or "ashamed" to apply for benefits but felt better after recognizing that they had paid into the program through taxes: "I'm appreciative that we do have these benefits in the United States. It really helps when you are down and out. For me, myself, I try to tell myself not to feel bad

about having had to apply because I worked most of my whole life. I know I paid my taxes, and I paid into these programs." Another person highlighted the unfairness of having to work so hard to receive benefits when they pay taxes to support these programs, saying, "They put me through the wringer to get support, so that doesn't sit well with me in terms of how I feel about the government. Why make it difficult? We're paying you to help us."

Many also felt that state and federal **governments do not do enough** for their constituents and that programs do not provide sufficient resources. People highlighted how they do not receive enough in benefits to cover their costs. One person said, "They don't give you enough to make it, and if I'm having to pay for doctor visits that Medicaid and Medicare won't pay, it's very hard." Another person who felt the TANF program did not provide enough benefits for them also expressed how broader government programs do not provide enough support: "Honestly, I don't think the government does enough for the people, especially the seniors. The money that they're giving, it's not enough at all, especially with the rents rising here." One person who was denied Medicaid shared their frustration in not qualifying for the program, saying, "I don't trust them. I think they need to do a little bit better for the community out here...put more out in the community rather than taking more in."

### **Discussion and Conclusions**

The Biden administration's EO on customer service said customer service experiences with the government should be effective, efficient, fair, and transparent. Further, the government should work to better understand customers and how they engage with services to ensure that those interactions build trust in government. Our research explored the ways in which people did not find the application process for Medicaid/CHIP or TANF particularly effective, efficient, fair, or transparent. While no two experiences were the same and people preferred myriad ways of interacting with public programs, several considerations emerged for improving customer service and building trust in government.

First, this study highlights the administrative burdens, or costs, that applicants face when interacting with a program (Herd and Moynihan 2018), including time spent figuring out eligibility, time and energy spent gathering documentation and completing paperwork, and psychological costs of interacting with judgmental or rude staff. Excessive administrative burdens can result in fewer eligible people receiving benefits and a delay in benefits to those who do apply (Schweitzer 2022). These administrative burdens also often fall hardest on those with the fewest resources and the most need. Further, research has shown that these administrative burdens are often created by design, with safety net programs steeped in racist narratives that focus on compliance and fraud (Floyd et al. 2021; Ray, Herd, and Moynihan 2022).<sup>4</sup>

Second, negative experiences due to administrative burdens and poor treatment by staff have real consequences for applicants and their families. They may not receive benefits in a timely way, or at all. As we heard in interviews, people worried about getting sick and needing health care while they waited for their benefits to arrive. Others lost months of benefits because of staff errors on their application forms. Others described not wanting to apply for benefits again because they had such a bad

experience. We know that a significant share of those who feel they have been treated or judged unfairly when applying for benefits end up not getting the benefits they need (Pratt and Hahn 2021).

In addition, the psychological costs of dealing with these administrative burdens can reduce trust in government (Michener 2018), as we also heard from some people we spoke with. Several people described keeping their receipts because they feared the office would lose their paperwork and deny them benefits. Others described feeling like the staff assumed they were lying. Some felt that the language used in program documents and by caseworkers was threatening. As one person said, it felt like government agencies seemed to say, "'We're going to lock you up for this.' That's how I feel about them. It's scary."

The EO on customer service calls on government agencies to move away from compliance-oriented processes. Shifting from an assumption of fraudulent intention and a focus on rooting out fraud would allow for more attention to getting people their benefits (Gilkesson 2022), as well as improving trust in government programs. As one of our study reviewers—a member of our community advisory board who had personal experience with public benefits—explained, to trust the government, you must feel that the government trusts you.

### What Can Be Done to Improve the Customer Service Experience?

Broadly, applicants want these programs to meet them where they are. People applying for services may be in the midst of extremely stressful situations as they seek to meet their basic needs. Applicants we interviewed described the challenges of "being on the office's time," as one person stated, when they were facing many difficulties in their own lives. Program staff may only see an applicant for a moment but could better recognize that many applicants are experiencing hardship when they apply for public programs.

One way to recognize this reality is to minimize administrative burdens as much as possible. In response to the EO on advancing racial equity, the Office of Management and Budget identified a list of known drivers of burdens and potential solutions, addressing many of the challenges raised by people in this study (OMB 2021b). Some promising strategies listed there and in the broader literature include the following:

- changing incentives for state agencies and their staff to shift away from a focus on fraud (Gilkesson 2022)
- investing in outreach and enrollment assistance from trusted community members (Corallo and Artiga 2020), which can be especially helpful to people who do not speak English, people with disabilities, and people without reliable internet access (Cahill and Lane 2020)
- allowing joint applications for Medicaid/CHIP, TANF, SNAP, and other programs (Corallo and Artiga 2020)
- improving online application processes by developing online application and web portals,
   creating online applications that can be accessed and completed easily on mobile devices, using

- autosave functions for online applications, allowing document uploads, and using electronic data verification (Hahn and Adams 2022; Wilke et al. 2022)<sup>5</sup>
- creating better calling and texting systems by fully staffing help lines, providing two-way texting, and allowing applicants to leave a callback number (Wagner 2019)
- allowing in-person interviews to be done by phone or virtually (e.g., allowing video appointments for WIC; Neuberger 2020)
- allowing continuous eligibility (Wilke et al. 2022)<sup>6</sup> and lengthening certification periods (Hahn and Adams 2022; Hahn, Katz, and Isaacs 2017; Neuberger 2020)
- allowing self-attestation whenever possible, as opposed to requiring documentation (Corallo and Artiga 2020)

### **Notes**

- <sup>1</sup> Exec. Order No. 14058, 86 CFR 71357 (2021).
- <sup>2</sup> Exec. Order No. 13985, 86 CFR 7009 (2021).
- <sup>3</sup> Among adults who applied for or received Medicaid/CHIP, almost 20 percent reported trouble figuring out if they were eligible, about 13 percent reported trouble providing required documentation, about 16 percent reported they did not get benefits as soon as needed, and 18 percent reported program staff never or only sometimes treated them with courtesy and respect. Among adults who applied for or received TANF, almost 35 percent reported trouble figuring out if they were eligible, 27 percent reported trouble providing required documentation, about 27 percent reported not getting benefits as soon as needed, and about 40 percent reported program staff never or only sometimes treated them with courtesy and respect.
- <sup>4</sup> Angela Guo, "Addressing Structural Racism in Social Impact: Lessons from the Social Safety Net," Georgetown University, August 28, 2020, https://beeckcenter.georgetown.edu/addressing-structural-racism-in-social-impact-lessons-from-the-social-safety-net/.
- 5 State Health Access Data Assistance Center, "Addressing Persistent Medicaid Enrollment and Renewal Challenges as Rolls Increase," State Health Access Data Assistance Center blog, September 2, 2020, https://www.shadac.org/news/addressing-persistent-medicaid-enrollment-and-renewal-challenges-rolls-increase.
- Joan Alker, Genevieve Kenney, and Sara Rosenbaum, "The Biden Administration Should Approve Oregon's Request to Cover Children until Their Sixth Birthday," *Health Affairs Forefront*, July 13, 2022, https://www.healthaffairs.org/do/10.1377/forefront.20220711.14370.

## References

Barnes, Carolyn Y., and Julia R. Henly. 2018. "They Are Underpaid and Understaffed: How Clients Interpret Encounters with Street-Level Bureaucrats." *Journal of Public Administration Research and Theory* 28 (2): 165–81. https://doi.org/10.1093/jopart/muy008.

Cahill, Rachel, and Hope Lane. 2020. "Prioritize Customer Needs in Ohio Benefits System: Findings and Recommendations from the Ohio Benefits User Experience Study." Cleveland, OH: Center for Community Solutions.

Corallo, Bradley and Samantha Artiga. 2020. "How Can Lessons from Medicaid Help Connect People to Unemployment Insurance?" San Francisco: Kaiser Family Foundation.

- Floyd, Ife, Ladonna Pavetti, Laura Meyer, Ali Safawi, Liz Schott, Evelyn Bellew, and Abigail Magnus. 2021. TANF Policies Reflect Racist Legacy of Cash Assistance. Washington, DC: Center on Budget and Policy Priorities.
- Gilkesson, Parker L. 2022. SNAP "Program Integrity": How Racialized Fraud Provisions Criminalize Hunger. Washington, DC: Center for Law and Social Policy.
- Gonzalez, Dulce, Genevieve M. Kenney, Marla McDaniel, and Laura Skopec. 2021. "Perceptions of Unfair Treatment or Judgment Due to Race or Ethnicity in Five Settings." Washington, DC: Urban Institute.
- Hahn, Heather, and Gina Adams. 2022. "Strategies for States to Improve Safety Net Program Access and Efficiency." Washington, DC: Urban Institute.
- Hahn, Heather, Linda Giannarelli, David Kassabian, and Eleanor Pratt. 2016. *Assisting Two-Parent Families through TANF*. OPRE Report #2016-56. Washington, DC: US Department of Health and Human Services, Office of Planning, Research and Evaluation, Administration for Children and Families.
- Hahn, Heather, Michael Katz, and Julia B. Isaacs. 2017. "What Is It Like to Apply for SNAP and Other Work Supports? Findings from the Work Support Strategies Evaluation." Washington, DC: Urban Institute.
- Herd, Pamela, and Donald P. Moynihan. 2018. *Administrative Burden: Policymaking by Other Means*. New York: Russell Sage Foundation.
- McDaniel, Marla, Michael Karpman, Genevieve M. Kenney, Heather Hahn, and Eleanor Pratt. 2022. "Customer Service Experiences and Enrollment Difficulties Vary Widely across Safety Net Programs." Washington, DC: Urban Institute.
- Michener, Jamila. 2018. Fragmented Democracy: Medicaid, Federalism, and Unequal Politics. Cambridge, UK: Cambridge University Press.
- Musumeci, MaryBeth, and Kendal Orgera. 2020. "People with Disabilities Are At Risk of Losing Medicaid Coverage without the ACA Expansion." San Francisco: Kaiser Family Foundation.
- Neuberger, Zoë. 2020. "Streamlining and Modernizing WIC Enrollment." Washington, DC: Center on Budget and Policy Priorities.
- OMB (Office of Management and Budget). 2021a. "Draft Learning Agenda in Support of the President's Management Agenda." Washington, DC: Office of Management and Budget.
- ——. 2021b. Study to Identify Methods to Assess Equity: Report to the President. Washington, DC: Office of Management and Budget.
- Pratt, Eleanor, Heather Hahn. 2021. "What Happens When People Face Unfair Treatment or Judgment When Applying for Public Assistance or Social Services?" Washington, DC: Urban Institute.
- Ray, Victor, Pamela Herd, and Donald Moynihan. 2022. "Racialized Burdens: Applying Racialized Organization Theory to the Administrative State." *Journal of Public Administration Research and Theory*, 1–14. https://doi.org/10.1093/jopart/muac001.
- Schweitzer, Justin. 2022. How to Address the Administrative Burdens of Accessing the Safety Net. Washington, DC: Center for American Progress.
- Wagner, Jennifer. 2019. "Leveraging Text Messaging to Improve Communications in Safety Net Programs." Washington, DC: Center on Budget and Policy Priorities.
- Wagner, Jennifer, and Judith Solomon. 2020. "Medicaid Coverage Protections in Families First Act: What They Require and How to Implement Them." Washington, DC: Center on Budget and Policy Priorities.
- Wilke, Suzanne, Jennifer Wagner, Farah Erzouki, and Jennifer Sullivan. 2022. "States Can Reduce Medicaid's Administrative Burdens to Advance Health and Racial Equity." Washington, DC: Center on Budget and Policy Priorities and CLASP.
- Winston, Pamela, Nina Chien, Rachel Gaddes, and Rachel Holzwart. 2021. *Complex Rules and Barriers to Self-Sufficiency in Safety Net Programs: Perspectives of Working Parents*. Washington, DC: US Department of Health and Human Services, Office of Planning, Research and Evaluation, Administration for Children and Families.

### About the Authors

**Eleanor Pratt** is a research associate in the Center on Labor, Human Services, and Population. Her work focuses on racial equity, the social safety net, and policies related to poverty and family well-being broadly. Pratt is a skilled qualitative researcher and project manager. Before rejoining Urban, Pratt translated research to policy at the Institute for Research on Poverty, wrote and managed grants with Heartland Alliance, and worked in the Office of the Mayor of the City of Chicago. She started her career as a research assistant at the Urban Institute. She holds a BA in sociology and anthropology from Swarthmore College and an MPA from the University of Wisconsin–Madison.

Marla McDaniel is a senior fellow in the Center on Labor, Human Services, and Population. Before joining Urban, she was a postdoctoral fellow at the Columbia University School of Social Work. McDaniel has researched, written about, and spoken about racial inequity and disparity; low-income children, youth, and families; and the programs and policy environments that touch families' lives. She is interested in examining how inequity across domains—including health, education, and employment—has a compounding effect on overall health and well-being. McDaniel earned a bachelor's degree in psychology from Swarthmore College and worked as a case manager for youth in foster care before earning a doctorate in human development and social policy from Northwestern University.

Heather Hahn is associate vice president for management in the Center on Labor, Human Services, and Population. She is a national expert on Temporary Assistance for Needy Families (TANF) with two decades of experience conducting nonpartisan research on policies affecting the well-being of children and families, including TANF, the Supplemental Nutrition Assistance Program (SNAP), child care subsidies, child support, and other supports for families with low incomes. She coleads Urban's From Safety Net to Solid Ground initiative, providing timely and rigorous analyses of state and federal policy changes, and the Kids' Share project, examining federal spending and tax expenditures on children. Hahn also co-led the Work Support Strategies evaluation of state efforts to modernize families' access to nutrition assistance, child care, and Medicaid. She has extensive experience leading projects, designing and conducting case studies, and listening to the people administering and participating in programs supporting families experiencing poverty. Hahn has authored dozens of reports and has considerable experience disseminating research to diverse audiences. She has testified before Congress and has been interviewed and quoted by major print and radio media, including NPR, the Washington Post, the New York Times, National Review, the Atlantic, and USA Today. Before joining Urban, Hahn was an assistant director for education, workforce, and income security issues at the US Government Accountability Office. She received an MPP from Duke University and a PhD in political science from Stanford University.

**Jennifer M. Haley** is a senior research associate in the Urban Institute's Health Policy Center. Haley's current work includes assessing ways states and communities can improve health equity in response to the COVID-19 pandemic, barriers to enrollment in publicly subsidized health insurance coverage, coverage gaps for postpartum women, and challenges to accessing the safety net for children in immigrant families. She also conducts research on other issues related to Medicaid, the Children's

Health Insurance Program, and coverage and care for children and families. Haley holds an MA in sociology from Temple University.

**Dulce Gonzalez** is a research associate in the Health Policy Center. She forms part of a team working on the Urban Institute's Well-Being and Basic Needs Survey. Gonzalez conducts quantitative and qualitative research focused primarily on the social safety net, immigration, and barriers to health care access. Her work has also focused on the impacts of the COVID-19 pandemic on nonelderly adults and their families. Before joining Urban, Gonzalez worked at the Georgetown University Center for Children and Families and at the nonprofit organization Maternal and Child Health Access. Gonzalez holds a BA in economics from California State University, Long Beach, and a master's degree in public policy from Georgetown University.

**Soumita Bose** is a research analyst in the Center on Labor, Human Services, and Population. Her research focuses on early childhood and child welfare policy, immigration, and programs for children and families. Before joining the Urban Institute, Bose completed her MPH at the Johns Hopkins Bloomberg School of Public Health, where she focused on child and adolescent health, humanitarian health, and health policy. During her time as an MPH student, she interned at the Association of State and Territorial Health Officials and the International Rescue Committee. Bose holds a BA as a double major from the University of California, Berkeley, in molecular and cell biology (neurobiology) and cognitive science.

Sarah Morriss is a research assistant in the Health Policy Center. She analyzes data and provides assistance with questionnaire development for Urban's Health Reform Monitoring Survey and Well-Being and Basic Needs Survey. She also contributes to policy briefs and papers on topics related to health equity, health care access, and families' experiences with federal safety net programs. Her research interests include disability and mental health policy issues. Morriss has a bachelor's degree in economics and public policy from the University of Chicago.

**Laura Wagner** is a research assistant in the Center for Labor, Human Services, and Population. She graduated with high honors from Swarthmore College, where she majored in political science and economics. At Swarthmore, Wagner's research focused on the economics of education in Chester, Pennsylvania.

## Acknowledgments

This brief was funded by the Robert Wood Johnson Foundation. The views expressed do not necessarily reflect the views of the Foundation.

The views expressed are those of the authors and should not be attributed to the Urban Institute, its trustees, or its funders. Funders do not determine research findings or the insights and recommendations of Urban experts. Further information on the Urban Institute's funding principles is available at urban.org/fundingprinciples.

We are grateful to our colleague Genevieve M. Kenney for her comments on this brief. We also thank Rachel Kenney for editorial assistance.



#### ABOUT THE ROBERT WOOD JOHNSON FOUNDATION

The Robert Wood Johnson Foundation (RWJF) is committed to improving health and health equity in the United States. In partnership with others, we are working to develop a Culture of Health rooted in equity, that provides every individual with a fair and just opportunity to thrive, no matter who they are, where they live, or how much money they have.



500 L'Enfant Plaza SW Washington, DC 20024

www.urban.org

#### **ABOUT THE URBAN INSTITUTE**

The nonprofit Urban Institute is a leading research organization dedicated to developing evidence-based insights that improve people's lives and strengthen communities. For 50 years, Urban has been the trusted source for rigorous analysis of complex social and economic issues; strategic advice to policymakers, philanthropists, and practitioners; and new, promising ideas that expand opportunities for all. Our work inspires effective decisions that advance fairness and enhance the well-being of people and places.

Copyright © January 2023. Urban Institute. Permission is granted for reproduction of this file, with attribution to the Urban Institute.