

## June 10, 2020 Update

Before we get into updates specific to COVID-19, I wanted to discuss the demonstrations held around Pennsylvania and the country in response to the murder of George Floyd. As a white woman, I have never experienced the anxiety, fear, and generations of collective, community-wide trauma that many Black, indigenous, and people of color face every day in Pennsylvania and around the United States. However, treatment of these individuals is something I care deeply about both in my personal life and through DHS' work. I want to state unequivocally that we here at DHS will not tolerate racism, discrimination, or mistreatment of anyone. We are committed to using our work and our position to correct disparities and inequity created by generations of racism, segregation, unequal resources, and structural discrimination that most often hurts Black and other communities of color.

These protests and the murders of George Floyd, Breonna Taylor, and too many other Black lives are forcing us to have difficult but very overdue conversations. These conversations create a necessary opportunity to understand what role all of our services and supports play in communities of color and what we must do to lift these communities and actively reject the disenfranchisement and racism that has persisted for too long. We can begin to fill the gaps in resources and support that hold these communities in poverty. Twelve percent of Pennsylvanians identify as Black or African American, but Black and African American people are disproportionately enrolled in public assistance programs, accounting for 25 percent of our Medicaid enrollment, 29 percent of SNAP, and 53 percent of TANF. This is what happens from years of divestment of resources away from majority minority communities.

We must evaluate our presence in historically underserved and disadvantaged communities and do more to fill gaps that have grown for too long. Before COVID-19 – a virus that we must remember has disproportionately harmed communities of color -- many of our conversations and initiatives revolved around urban and extremely rural communities and what we could do to better serve people in these areas of the state. While these communities are often pitted against each other as political talking points, their needs are often more closely aligned than not. There are shortages in jobs that pay life-sustaining wages, a dearth of accessible post-secondary education or job training opportunities, and other barriers like availability of public transportation and child care.

It does not have to be this way, and we have the power to start to fix this. We can structure our health care system to address health inequities. We can invest in education and training that help people out of poverty. We can support equitable access to quality education. We can reject white supremacy by engraining cultural awareness and sensitivity to the effects of racism and structural inequities as core values in service delivery. We can uplift communities that have been overlooked for too long by building systems that are actively anti-racist.

These existing disadvantages will make recovery from this pandemic and the economic insecurity like we face now even more challenging. We must be responsive to this challenge and use this opportunity to be truly transformative in how we serve people in these communities. Our public assistance system should be a safety net and a resource to help people during difficult times. Our communities should not be starved for resources in a way that holds people in a level of poverty that requires them to try to live

off these programs. The challenges we currently face provide an opportunity to build partnerships between state and local governments, community organizations, and the private sector that can revitalize and bring more opportunity and hope into these communities.

DHS is committed to doing this, and these are conversations that we are now having more regularly and broadly. These conversations are necessary, and I hope all of you will join us in this effort. Governor Wolf has mentioned previously that there are two Pennsylvanias – prosperous, vibrant communities, and communities that have been forgotten through generations of divestment. We cannot accept that it has to be this way, and we must not lose the opportunity to create one Pennsylvania as it should be – equity and opportunity for all people. We cannot undo the consequences of generations of racism, segregation, and structural disenfranchisement individually, and we must come together to be a force that rejects racism ingrained in our health care and social services system. We are all uniquely positioned to bring the change necessary to do better for Black and other people of color in Pennsylvania. Black lives matter, but we cannot just say that – we must show that every day through our work and interactions with the people we serve. I hope you will join us as we look inward and not lose this opportunity.

### **CARES Funding Update**

Work continues to prepare for distribution of funds for providers from the Coronavirus Aid, Relief, and Economic Security (CARES) Act. At this point, we are on pace to begin distributing one-time gross adjustment funds to intellectual disability and autism service providers beginning next week through July 1. Payments to nursing facilities and other long-term care facilities like personal care homes will begin in early July.

It is important to note that Act 24 of 2020 requires these funds to be expended by November 30, 2020 or returned to the commonwealth. Additionally, these funds must be used for COVID-19 related expenses. Providers will need to keep documentation to prove that these funds were used for their response to the COVID-19 pandemic in case of an audit. Further information about reporting requirements for these funds will be sent to providers in the coming weeks.

### **Regional Response Health Collaborative (RRHCP)**

As we mentioned last week, Act 24 of 2020 establishes a Regional Response Health Collaborative (RRHCP), which essentially formalizes the existing Education Support and Clinical Coaching Program DHS established in partnership with the Jewish Healthcare Foundation and seven health systems to provide support to personal care homes, assisted living residences, and nursing facilities as they protect residents and staff from COVID-19.

The new RRHCP will be very similar but will operate under grant agreements, not a voluntary basis. The General Assembly allocated \$175 million to be awarded among selected grantees for that purpose. In addition to this, funding from the CDC will also be available to the collaboratives to support testing in long-term care facilities to include asymptomatic staff and residents in facilities to bolster public health surveillance. Specifically, the collaborative will provide operations, management, and administrative support to protect residents in facilities from COVID-19. The collaboratives will promote health and stabilize the economy of the region by directly supporting COVID-19 readiness and response in facilities and improve the quality of care related to infection prevention and other priority health care conditions

common to facilities. The network will also help long-term care facilities implement best practices in infection control, implement contact tracing programs in facilities, support clinical care through on-site and telemedicine services, provide remote monitoring and consultation with physicians, and enhance testing capability at facilities. Additionally, the collaboratives will provide alternate care arrangements for patients no longer requiring acute care but who are not ready to return to long-term care facilities.

We are close to issuing a Request for Applications to determine which health systems will be part of this partnership. This solicitation is available through [eMarketplace](#), and applications are due by June 25, 2020.

## **OIM Programs Update**

### **CAOs Reopening**

Work is still underway to prepare our County Assistance Offices (CAOs) for reopening. To make sure these offices are able to operate safely for both staff and clients, the following considerations are being made:

- Adjustments necessary to safely allowing customers entry into the CAO while controlling the number of customers in the office at any given time to follow social distancing;
- Instituting policies and procedures to mitigate risks for customers and staff where face-to-face transactions are necessary; and,
- Evaluating staffing needs to adequately staff offices for in-person services while allowing some staff to telework in order to facilitate office social distancing.

This is in addition to ensuring offices are regularly and properly cleaned and sanitized as well as equipping offices with additional protective measures like sneeze guards.

We recognize the important role in-person services play for our clients, and we expect to begin bringing these offices back online in the coming weeks. This will be a phased approach, and individual offices will have to make different processes and procedures for the considerations outlined above.

We appreciate your patience as we work to make the return of in-person CAO services safe for both our clients and staff. We will continue to communicate updates and a timeline as they become available.

### **EAP Extension**

When we first announced the Emergency Assistance Program (EAP), it was slated to end on June 12 or when funds were expended. Funds remain available and this program has been extended, and applications are now due by July 12. Families should be prepared to submit all necessary documentation with their application to expedite processing and avoid having to apply again. Applications are accepted at any time, and previously-rejected applications can be resubmitted. More information about EAP, including income limits, is available [here](#).

In order to qualify, families must have at least one person in the household who was employed as of March 11, 2020 and experienced an hour or wage reduction of at least 50 percent for two weeks or more, or who lost employment entirely due to the public health crisis. Eligible families can possess resources, such as money in checking/savings, of no more than \$1,000 as well.

As the commonwealth begins to reopen, we know that economic circumstances may still be a challenge for people. I encourage anyone feeling the hardships of this economic uncertainty to apply and see if this program can help them ease the weeks and months ahead.

### **SNAP Waivers**

Over the past few weeks, DHS has submitted requests to the United States Department of Agriculture's Food and Nutrition Services requesting extensions of waivers set to expire at the end of June. Thus far, we have not received responses on these waivers, which include:

- **Waiver of Face to Face Interview for Quality Control Case Reviews**

**Description:** States must perform a case review on a sample of SNAP cases each month. Under normal circumstances, a face-to-face interview must be conducted with the household during the review process. Due to COVID-19, a waiver option was provided that allows States to perform the interview via phone to accommodate social distancing concerns.

**Impact:** If this waiver is eliminated, staff will have to resume conducting face-to-face interviews with sampled households, resulting in higher risk of catching or spreading COVID-19. Households that refuse the interview, even if due to fear of becoming ill, are required to have their benefits closed.

- **Extended Certification Periods and Waiving Periodic Reporting**

**Description:** SNAP households are certified for a set period at which time they must complete a recertification. Most households are subject to a 12-month certification period and must complete periodic reporting every six months. In Pennsylvania, we refer to this as the renewal due date for recertification, and Semi-Annual Reporting (SAR) for periodic reporting. This waiver allows the State to push the renewal due date back six months and allows the state not to act on incomplete periodic reporting. If a household still has a verified change in income that impacts eligibility, the SNAP benefits are still adjusted.

**Impact:** If this waiver is eliminated, CAO staff will have to send renewals and process them in the Client Information System. They will also have to process SARs that are returned. Since many staff are still teleworking, minimal staff are onsite to open mail and scan documentation when it is returned. Losing this waiver will likely result in a higher number of closures for not completing the renewal or SAR and then the households will be forced to request reconsiderations, file appeals, or submit a new application resulting in an increased workload for the CAOs and a higher churn rate for the SNAP population.

- **Adjustments to Interview Requirements**

- This waiver was split into two parts: waiver of the interview requirement at application, recertification, and the requirement of interview prior to expedited issuance; and waiver of the requirement to provide a face to face interview if the household requests one.

**Description:** In order to be authorized to receive SNAP benefits, a household must have an interview conducted. The interview is required at application and recertification and also prior

to issuing Expedited SNAP benefits. This waiver allows the state to authorize the benefits or complete the recertification without the interview and based solely on provided verifications. **Impact:** If this waiver is eliminated, CAO staff will have to conduct interviews for all SNAP households. Losing this waiver would likely result in higher churn rates as more households are rejected for failing to have an interview. In addition, it makes it more difficult for a household with minimal income to get Expedited SNAP benefits because they must have an interview first. With the previous waiver, the waiver of recertification interviews is not necessary, but if the previous waiver is denied, the waiver of the renewal interview becomes more critical. Interview requirements also exponentially increase the workload for CAO staff.

- **Temporary Suspension of Claims Collections**

**Description:** Allows OSIG to stop recoupment of overpaid SNAP benefits, which subsequently prevents households that are not submitting their recoupments from being referred to the Treasury Offset Program (TOP), which pursues recoupment via other means, such as taking the amount owed out of the household's tax refund.

**Impact:** Recoupments would restart, resulting in SNAP households with a previous overpayment receiving less benefits during the COVID health emergency. It also complicates the process of issuing emergency allotments to households bringing them to the maximum SNAP benefit.

- **Extension of Emergency Allotments to Current SNAP Households**

- This is not a standard waiver. FNS provided a fillable PDF that states must complete with estimated benefit issuance amounts and dates only and submit to their Regional Office. It cannot be submitted until after the 15<sup>th</sup> of the month prior to the month of issuance. So, an emergency allotments request for July cannot be submitted to FNS until after June 15<sup>th</sup>.

**Description:** Allows DHS to issue a supplemental SNAP grant to households not receiving the maximum SNAP benefit for their household size. The grant is for the amount needed to bring the household up to the maximum for their size.

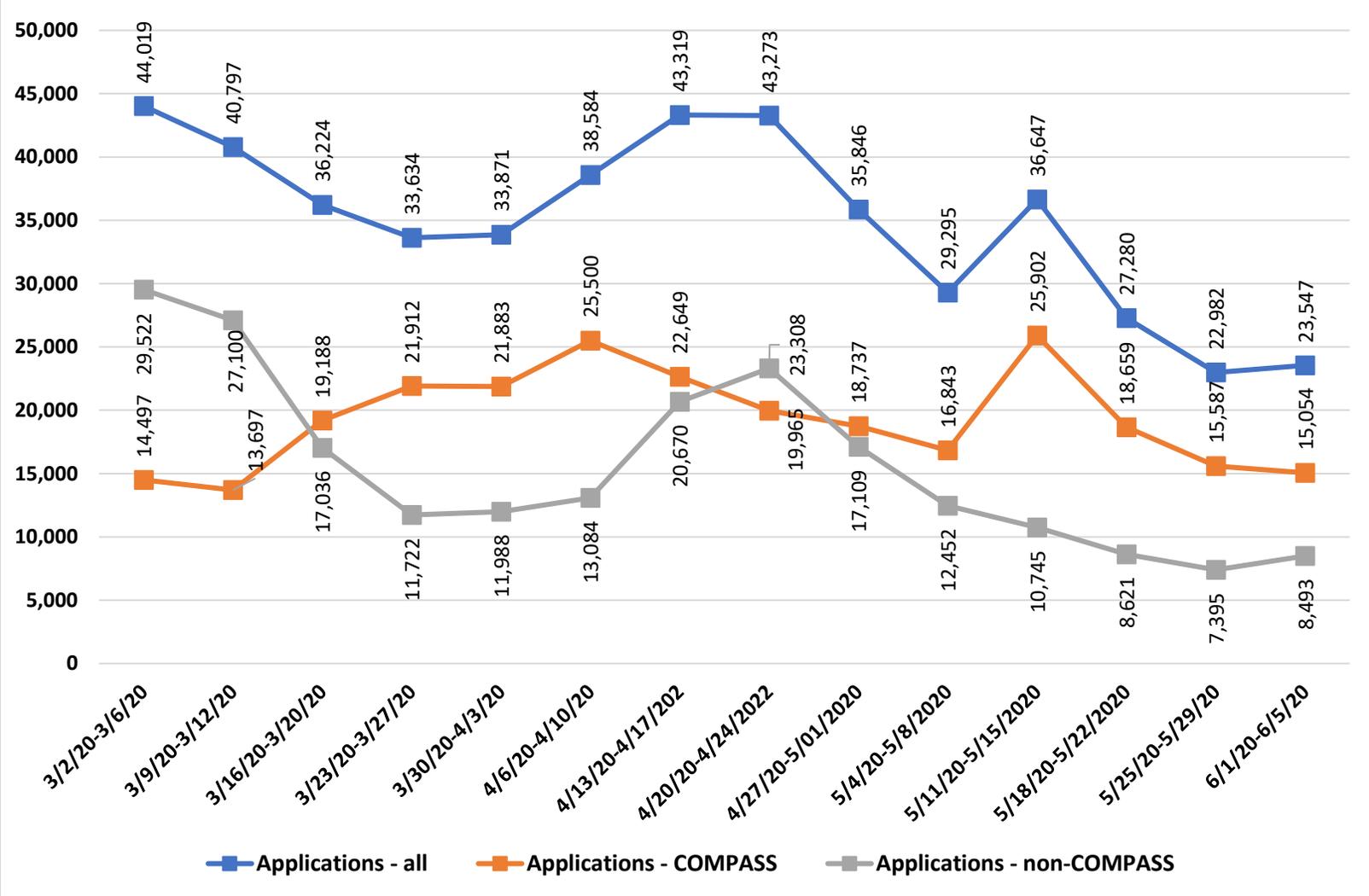
**Impact:** If FNS does not allow an emergency allotment in July, SNAP households would receive only the normal benefit amount.

These waivers have been an important tool to help ensure continuity of benefits during this crisis while also easing processes for both DHS staff and the people we serve. While we are beginning to reopen, this pandemic is not over. Cases are increasing in other states, and we are being very mindful of a potential surge in the fall. Continuing these waivers would allow us to continue to mitigate risk by minimizing face-to-face interactions and provide extra relief to clients who are likely feeling the economic uncertainty caused by this first shut down. If additional mitigation measures become necessary later this year, it would be helpful to have these flexibilities in place from the start.

We are continuing to work with the USDA and FNS to help them understand the value these waivers have played over the last few months, and I encourage you all to help get this message out. COVID-19 has leveled out in Pennsylvania, but the virus is not gone and we cannot move too quickly back to what was once business as usual.

**Public Assistance Applications Data**

**OIM - All Applications by Week**



We still are not seeing an upward trend in applications data, and at this point, we are confident that this is occurring because people are generally not being removed from programs like Medicaid and SNAP. Because of this we do not have the churn of people who lose coverage due to not recertifying but remain eligible and therefore return to the program even after being removed due to administrative requirements. Staff did recently compare Pennsylvania's April change in Medicaid enrollment compared to a number of other states, and what we are seeing is in generally line with those other states.

MA Enrollment % Change from Previous Month	Jan-20	Feb-20	Mar-20	Apr-20	May-20
FL	-	0.1%	-0.3%	4.1%	
MD	-	0.2%	0.5%		
MI	-	-0.1%	0.7%	1.4%	
NJ	-	-0.2%	0.1%		
NY	-	0.1%	0.0%	1.5%	2.7%
OH	-	0.0%	0.5%		
TX	-	-0.3%	0.0%		
VA	-	0.7%	0.5%	1.2%	3.3%
WV	-	1.2%	-0.5%	1.6%	1.9%
PA	-	-0.3%	0.4%	1.8%	

We expect to have an update on May's enrollment next week, and we will share takeaways at that time.

We received 23,547 applications last week, slightly up from 22,982 the week prior. In addition to the total application data, to date, 11,387 applications have been received for EAP and nearly 26,983 applications have been received for the LIHEAP Recovery Crisis Program. Of these applications, 3,937 people have been approved for EAP and 13,594 have been approved for LIHEAP Recovery Crisis. There's been a spike in LIHEAP applications and approvals because we are including LIHEAP recipients from this most recent season who submit a verbal request to a CAO rather than just COMPASS and paper application requests.

### **Stigma Stories**

I wanted to give another reminder of our standing ask for stories of people we all serve. I know a few of you got in contact with Ali after last week's call, so thank you so much for that. If you haven't yet or think of others, please get in contact with Ali.

Public assistance can be confusing, and many people don't see it as being an option for them. Our public assistance system should be a safety net and a resource to help people during difficult times, but it's only effective if people are using it. I want people to know about public assistance not just as a resource that could help them, but one that they could pass on or recommend to someone else. But it's one thing to tell people that these programs exist, it's another to show the impact.

Again, if you know anyone who would be willing to share their story, please contact our Communications Director Ali Fogarty at [alfogarty@pa.gov](mailto:alfogarty@pa.gov). Thank you again for your consideration and support.