Attendee Questions to Presenters

• Will we receive copy of presentation or link to?
  Yes, it will be posted on the DXP website along with responses to questions and link to the recorded session.  http://hawaiidxp.org/resources/data-summit

• Interesting data! What do you think accounts for the difference in new Medicaid applications by county? Why are the numbers for Maui and Kauai so high, but Big Island much lower? Thank you!
  Our growth percentages by county trend with county unemployment rates. Additionally, the type of employment per island as well as the shortage of other types of employment available per island, may likely account for the higher applications for medical insurance assistance.

You may be interested in a UHERO survey which describes how different business revenue is being unevenly impacted by COVID-19 (see: https://uhero.hawaii.edu/covid-19s-uneven-impact-on-businesses-and-workers-results-from-a-uhero-chamber-of-commerce-hawaii-survey/).

• Mentioning the increase of needs, are DHS staff given time for self-care, etc.? Staff that take care of themselves lead to better work environments & better service to the people. I live on Maui & have experienced DHS interactions where it seemed they were overworked. :) Thank you!
  We recognize we are all living and surviving through a very stressful time. DHS leadership recognizes that our staff have been working at capacity, and like many others are experiencing increased stress both at work and home, are learning how to telework, and are navigating and worrying about themselves and family members when going into public spaces such as grocery stores, and health care facilities, etc. Many are also trying to assist their school aged children with on-line school or juggling child or kupuna care. For residents with prior trauma or who have been impacted by other events, there is an intense amount of triggering.

From the outset of the pandemic, DHS Director’s office increased communication with staff offices and division administrators and has worked with program administrators to provide DHS staff with current information on COVID 19 mitigation practices (along with necessary PPE). Additionally, DHS Director’s office has provided current information on programmatic changes, including various emergency related benefits and services, CRF and CARES Act funding information to media and the public. Open communication and transparency are crucial at a time like now where there is an abundance of misinformation.
Prior to the pandemic, DHS funded and encouraged staff participation in mindfulness webinars offered through the Office of Youth Services, particularly the Forgive for Good program with Dr. Fred Luskin from Stanford University. Many state employees including DHS and other state department agencies have participated and continue to participate in these webinars. Dr. Luskin has adapted the sessions to the pandemic conditions covering topics of resiliency, compassion, and gratitude.

DHS staff are also encouraged to take leave for self-care as well as provide reminders of the different support programs available to state workers through the Department of Human Resources Development. As many have said about the pandemic: this is a marathon, not a sprint. We cannot keep up with the intensity and pace of work forever. We must take care of ourselves in order to care for others. It is a life-work balance for DHS staff. When DHS staff see and hear from residents in need, our staff want to respond and offer help. We want to do our jobs efficiently and well. We want the residents to walk away from DHS feeling respected, treated with dignity, and if eligible, in receipt of all necessary basic life needs for themselves and families. We recognize that there are individuals that may not be eligible for benefits and services and we strive to provide additional referral resources.

This is a great question and we are continuing to explore ways to support our employees’ mental health during this time.

- **What percentage of residents are on Medicaid, by county?**
  Additional data can be found at [https://humanservices.hawaii.gov/communications-2/](https://humanservices.hawaii.gov/communications-2/)

<table>
<thead>
<tr>
<th>City and County of Honolulu</th>
<th>Hawaii County</th>
<th>Kauai County</th>
<th>Maui County</th>
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<tbody>
<tr>
<td>MQD enrollment 10/19/2020</td>
<td>229,420</td>
<td>79,512</td>
<td>23,061</td>
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<tr>
<td>2019 Population by County (DBEDT)</td>
<td>974,563</td>
<td>201,513</td>
<td>72,293</td>
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<tr>
<td>Percent of county population enrolled in MQD</td>
<td>24%</td>
<td>39%</td>
<td>32%</td>
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- **Is there any indication from CMS of when the requirement to maintain enrollment will end? In other words, when can we expect to see people terminated?**
• Can you reflect on why Kauai and Maui Med-Quest and Medicaid enrollment percentages are so much higher than Oahu and Hawaii Island?
Please see the response to the second question on page 1.

• Are there plans to support our vulnerable populations if CARES Act monies run out - and no new stimulus - or it takes a few more months to get through?
Unless Congress appropriates additional COVID-19 related funds, federally funded programs that existed prior to the pandemic will remain available to vulnerable populations. Unspent Coronavirus Relief Funds will be returned to the State treasury and deposited to the Unemployment Insurance Trust Fund. We do not project any additional state funds to become available for new programs at DHS. Given the projected decrease in State funded revenues, we are very concerned about potential reductions to state funded programs.

• Regarding TANF and SNAP: did these programs have work requirements before the pandemic and, if so, were they relaxed due to the pandemic (as they were for SNAP during the Great Recession)?
The TANF work program participation requirement of attending job readiness as a condition of initial eligibility exited prior to the pandemic and was waived as part of the Governor’s proclamation so those applying for TANF are currently not required to attend to the 30 hours work participation requirement. The TANF federal work requirement of work eligible individuals meeting the 30 hours/week for single adult families, and 35 hours/week for 2-parent families is still required; however, staff have greater latitude in granting good cause for those TANF participants who are unable to meet these requirements. Good cause essentially excuses the participant for not meeting their weekly requirement so that recipient benefits are not negatively affected.

For SNAP, work requirements for Able-Bodied Adults Without Dependents (ABAWD) have been suspended at the start of the pandemic and will continue to be suspended during the federal emergency period.

• What would you tell folks who are looking at the eligibility criteria and think they don't qualify for SNAP even though they really need the benefit. Would you encourage them to apply anyway, just in case their own assessment is wrong?
Yes, absolutely apply! Allow our staff to make the determination based on the understanding of the federal rules. If anyone is in need, we encourage them to apply.
For the HINET program at UHCCs, we've seen similar patterns where increase in UI resulted in students losing SNAP eligibility, thus becoming ineligible to participate in HINET. We had a reduction of 60% in caseloads at certain campuses. The decrease in caseloads can be interpreted to mean that the need or value of the program has decreased. Using data, how can we provide a fuller and better picture of our community and student needs?

USDA FNS issued a nation-wide denial for waiver of work requirement for students, see:

Using the data mentioned, it may be argued that an increase in UI is the reason for the drop in caseloads and not because there is drop in the need for HINET’s services. Additionally, the increase in UI claims, coupled with the number of businesses closing and economic forecasts of declining revenues provide a picture of the increased need for retraining or upskilling of our displaced workforce and the providing them the supports needed to assist them with their economic recovery. There is a heightened need for programs such as HINET and the workforce community, to identify the employment trends and develop training opportunities for a changing and evolving economic recovery.

What is the difference between TANF and TAONF? What defines “other” needy families?

TAONF is the state funded program for mixed citizenship households that mirrors the federally funded TANF program for US citizens. The State funds for TAONF is part of the State’s Maintenance of Effort (MOE) required by the federal government for the State to receive TANF funds for US citizenship households.

TANF and TAONF are the time-limited (=60 months) programs for adults with children. These programs are designed to protect those who cannot work and to require those who are able to work to do so. The TANF and TAONF programs require work and promote self-reliance, responsibility, and family stability. Both TANF and TAONF offer a package of strong incentives and penalties, child care support for working parents, and restructured welfare benefits so that it “pays to work.” Households which include an adult who is not exempt from the work requirement, are allowed to receive TANF or TAONF cash benefits for a maximum of five years in their lifetime.

Please visit DHS website for more information.
https://humanservices.hawaii.gov/bessd/tanf/
A lot of services are geared toward families with children/dependents. Have you seen an uptick in need among ABAWDs (Able-bodied adults without dependents)? Is GA/SNAP the only assistance that is available for ABAWDs?

General Assistance is a 100% state funded cash assistance program for disabled adults without minor dependents, so it is not available to people who are able to work. Within DHS, Medicaid and SNAP are the only non-financial benefits available for able-bodied adults without dependents.

Within the SNAP program, DHS administers the Employment and Training (E&T) program, which is a statewide work program designed to assist able-bodied adults to become a part of the workforce. E&T serves SNAP recipients and puts emphasis on employment, work experience, training, on-the-job training, and limited job search activities. E&T also provides supportive services in the form of a participant reimbursement to cover work-related expenses and child care. Additionally, DHS also administers the Low-Income Home Energy Assistance Program (LIHEAP) to help pay for electric bills. We are very concerned with youth, young adults, and those individuals without enough work history to qualify for UI.

All residents who do not have health insurance are encouraged to apply for Medicaid coverage, including able-bodied adults without dependents.

Since the start of PHE:

<table>
<thead>
<tr>
<th>Adult enrollment growth from 3/2020 to 10/2020</th>
<th>28%</th>
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<tbody>
<tr>
<td>Adult enrollment growth from 1/2020 to 10/2020</td>
<td>29%</td>
</tr>
<tr>
<td>Adult enrollment growth from 1/2019 to 10/2020</td>
<td>26%</td>
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Does PAIS allow people to apply online for SNAP, TANF/TANOF and Med-Quest, or just SNAP? Will this online option continue post-pandemic?

PAIS (Public Assistance Information System) is where to apply online for SNAP/FA. Please go to https://pais.dhs.hawaii.gov/PAIS/#/ . The application will continue to be available after the pandemic. We’re excited to have PAIS and think it’s the future of the agency. In addition, we are working towards a combined application of SNAP/financial assistance, and Medicaid with completion expected in 2022.

Medicaid has a separate online application. To apply, please go to http://medical.mybenefits.hawaii.gov/ which is up 24/7, except for servicing. Over 90% of the
applications are received online. Paper applications are still accepted. Medicaid also has an outreach office and there are "Kokua" in the community (e.g., at community health centers) who may assist with the applications process.

• **Many states are currently offering an integrated platform, allowing clients to apply for Medicaid, SNAP, UI and other benefits in one place. Is there a plan for the Hawaiian agencies to develop a universal platform like that?**

  DHS is working towards an integrated platform for DHS administered programs allowing clients to apply for Medicaid, SNAP and financial assistance programs with an anticipated completion in 2022. We cannot speak to a universal platform for all Hawaii agencies at this time though we certainly see the necessity for an interoperable government system.

• **We have been noticing that scheduled telephone appts with DHS worker and client has been a problem. DHS worker has not been calling client at appointed time and they have been waiting at home. Clients (aged) tried to contact worker but no reply or message box was full so client although present for telephone interview was unable to go through the interview. What can be done to prevent this ongoing problem? Don't want the clients to worry about not getting the interview so therefore SNAP may be cut off. What are the recommendations to prevent that happening?**

  With the surge of applications for benefits, BESSD has reengineered its business processing model. While lobbies have closed, the processing centers remain open, and eligibility resources have moved to the phones to connect with clients. We continue to re-vamp our approach to call centers and devote more staff to the phones. Prior to the Pandemic, BESSD regularly handled ~100 live calls per day. Now, we often have 700 to 900 live calls per day. We are attempting to answer calls, rather than rely on call-back from voice messages left with our offices. The volume of calls is staggering, so please be patient.

  As it relates to existing SNAP beneficiaries, the USDA- Food and Nutrition Services (FNS) has provided “State Options” through the recent Continuing Resolution (see next question) that allows states to extend certification periods, eliminating the need to interview for recertification.
• If schools continue distance learning, will the P-EBT be a continued benefit for families?
The most recent Continuing Resolution (CR) that was passed by Congress authorized PEBT through September 30, 2021. However, we have been advised by USDA-FNS, the federal agency that is responsible for SNAP and Pandemic-Electronic Benefit Transfer (P-EBT), that States are to await further instructions from FNS before proceeding with any further P-EBT benefits beyond the month of September. In addition to distance learning, FNS may also support those students who receive instructions through a hybrid model as well, but until we receive further instructions from FNS we are not able to provide any further comments with certainty.

• Seniors don’t always have access computers to do online apps so are their plans for those who do not have this access? For the online app is there the capability to attach documents online as well?
Currently, BESSD accepts paper applications through the mail or drop off at any of our processing centers across the state. For seniors who do not have access to computers, they may call DHS and request an application be mailed to them. For the online application, applicants may upload additional verification documents to the PAIS site as well.

• There’s such a gap between loss of employment and ended unemployment benefits, and likely another gap between no income and gainful employment with re-opening of our local economy. Q: Can the CARES funds fill gap by increasing TANF and TAONF?
Unless Congress amends the CARES Act, it is unlikely that available CARES Act funds will be available to fill program funding gaps. While we are seeing dramatic application and caseload increases for TANF/TAONF, at this time we are not projecting funding shortfall for these two programs.