

preparing for human-centered redesign

**a readiness guide for state and local
public benefits agencies looking to
improve applications, renewals, and
correspondence**

Fall 2021

A guide from Civilla and the Beeck Center for
Social Impact + Innovation at Georgetown University

project credits

This guide was written by Katie Sullivan and Sara Soka, Social Safety Net Benefits Fellows at the Beeck Center for Social Impact + Innovation at Georgetown University, in partnership with Lena Selzer, Co-Founder and Senior Director, and Gabriela Dorantes, Design Lead, at Civilla.

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beeckcenter social impact + innovation

This guide is part of a larger initiative by the [Beeck Center for Social Impact + Innovation](#) at Georgetown University to document innovations in social safety net benefits delivery driven by human-centered service design, data-informed practices, and responsive technology with a goal of spreading proven practices more widely.

civilla

[Civilla](#) is a nonprofit design studio dedicated to changing the way our public-serving institutions work through human-centered design.

To discuss anything in this guide further, feel free to reach out to us at beeckcenter@georgetown.edu and hello@civilla.org.

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about this guide

The social safety net supports roughly 1 in 4 Americans at some point each year.^{1,2} These programs—which include Medicaid, the Supplemental Nutrition Assistance Program (SNAP), and Temporary Assistance for Needy Families (TANF), among others—are meant to help people access healthcare, food, and other supports they need to improve their lives.

Complex application and renewal processes can often make it difficult for residents to secure and keep the benefits they're eligible for. These burdens have negative consequences for people who are supported by these programs, and also lead to inefficiencies for frontline staff.

Redesigning applications, renewals, and correspondence to meet the needs of residents and caseworkers is one of the most impactful things state and local government agencies can do to strengthen public benefits delivery. Taking a human-centered approach to redesigning the application process for its largest benefits programs, the Michigan Department of Health and Human Services (MDHHS) has slashed form length by 80 percent, reduced application times by more than 50 percent, and cut caseworker processing time in half.

¹ Irving, S. K. & Loveless, T. A. (2015). Dynamics of Economic Well-Being: Participation in Government Programs, 2009–2012: Who Gets Assistance? Current Population Reports, P70-141. United States Census Bureau. <https://www.census.gov/library/publications/2015/demo/p70-141.html>

² Moffitt, R. A. & Ziliak, J. P. (2020). COVID-19 and the U.S. Safety Net. Fiscal Studies, 41(3), 515-548. doi: [10.1111/1475-5890.12243](https://doi.org/10.1111/1475-5890.12243)

If you are a director or staff member at a state or local benefits agency interested in taking a human-centered approach to redesigning benefits delivery to be shorter, simpler, and more user-friendly, this guide is for you.

This guide provides practical insights to help you prepare for redesign, including:

- **Types of redesign you could take on**, depending on the problem areas you're trying to address
- **Examples of large-scale and smaller-scale redesigns** for applications, renewals, and correspondence that have been successfully implemented
- **Conditions and resources needed for each redesign** approach, including checklists to help you assess your readiness
- **Guidance on paths forward** to help you get started with your agency's redesign project

getting started with redesign



1ST SAW ONLINE

LIKE THE OTHER ONE BUT DIFFERENT

SOMETHING YOU ARE SUPPOSE TO BE KEEPING UPDATED

PERSONAL + WORK INFORMATION

SET ALARM + CALENDAR (SET 3 DAYS BEFORE)

SO MANY DIRECTIONS

OO LOOKS HERE

SHOULD BE SCHEDULE 1ST

WAYNE CO DHS HAMTRACK WOODY PLAZA
12140 JOSEPH CAMPBELL ST.
HAMTRACK, MI 48212

You can complete this form online!
Go to www.michigan.gov/rebrdge/
to renew your benefits and access your case.

It's time to Re new!

Prepared for:
Sylvia Wentworth-Farthington

If you do not complete the following requirements, your [Food Assistance Program] benefits will end on: [May 15, 2019]

- 1 Application and proofs due (April 26, 2019)
You are required to submit a completed application and proof documents. Complete, sign, and date this Redetermination Application. Collect necessary proof documents and make photocopies of them. Submit your completed application and photocopies of proof documents by April 26, 2019. You may submit the forms by mail, or by fax, or by bringing them into a local MDHHS office.
- 2 Interview on (April 31, 2019 at 11:15am EDT)
You are required to have an interview with a MDHHS Specialist. Interviews are not required for Healthcare or Childcare (CDC). A specialist will call you or meet you at a local office on (April 31, 2019) within 15 minutes of 11:15am EDT. Call your specialist (listed at the top of this page) before your interview date and time if you need to reschedule the interview.
- 3 Receive your results.

HE DIDN'T MISS PAPERS

ON PHONE OR IN PERSON?

WAYNE CO DHS HAMTRACK WOODY PLAZA
12140 JOSEPH CAMPBELL ST.
HAMTRACK, MI 48212

You can complete this form online!
Go to www.michigan.gov/rebrdge/
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Redetermination Application

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- 3 Receive your results.

If you need help, contact your local office before (April 26, 2019).

types of redesign

In this guide, we'll focus on the following three opportunities for human-centered redesign:

Applications

Redesigning benefit program enrollment forms and processes

Renewals

Redesigning benefit program recertification forms and processes

Correspondence

Redesigning notices, letters, and other communications for benefit programs

Within each of these categories, there are a range of different possibilities for redesign. The type of project you take on will depend on the problem areas you're trying to solve and the resources available to support your effort.



understanding problem areas

One of the first steps you'll want to take is identifying problem areas across applications, renewals, and/or correspondence that redesign could help address.

Contextualize these issues by spending time with core users (residents and frontline staff) to understand their experiences and needs. A few ways to do this:

- **Analyze baseline data** to identify potential issues and gaps—such as enrollment and renewal rates, reasons for application and renewal failure, application and renewal processing time, form lengths and time to complete, volume and reasons for calls, field office lobby visits, etc.
- **Observe frontline staff** processing benefit program applications and renewals, residents filling out application and renewal forms, and resident and staff interactions at field offices.
- **Connect with key informants** (such as benefit program administrators, field office managers, and community organization staff) who can provide insight on problem areas.
- **Interview residents and frontline staff** (caseworkers, lobby staff, registration clerks, call center staff, etc.) about their experiences with applications, renewals, and correspondence.
- **Complete application and renewal forms yourself** and read through correspondences to gain first-hand familiarity with the processes.
- **Create a journey map** of resident and caseworker experiences with applications, renewals, and correspondence.

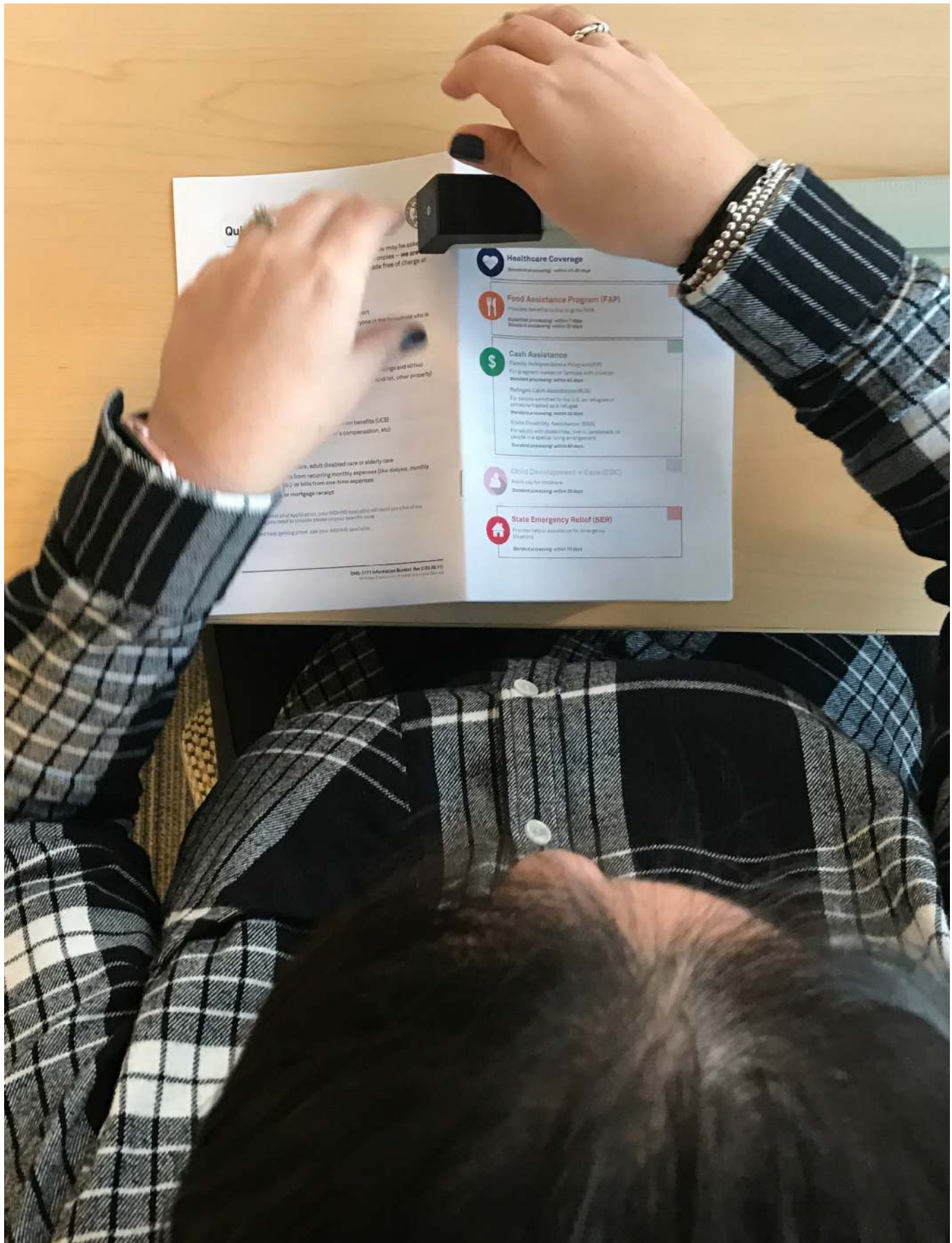
Check out [18F's Methods for human-centered design](#) and [Code for America's Qualitative Research Practice Guide](#) for best practices on conducting discovery research. For a primer on user research methods and real-life examples from Michigan and Missouri, head to [Civilla Practica](#) to access online courses on human-centered design and user research.

scoping your redesign effort

Once you've surfaced problem areas, you can begin brainstorming possible solutions with core users (residents and frontline staff) and key stakeholders. As part of this process, you'll want to think about your agency's capacity to effectively design and implement change.

Large-scale redesign efforts can significantly benefit residents, frontline staff, and government agencies. But they also require substantial resources to bring to life. For agencies that aren't yet ready to take on full-scale redesign, there are often incremental changes that can be accomplished more quickly and with fewer resources. These smaller efforts can still make an immediate difference and serve as a testing ground to build momentum toward a larger effort.

The next sections will provide an overview of what large-scale and smaller-scale redesign projects look like and help you determine the right size and scope for your initiative, based on the resources and conditions that exist within your agency. We encourage you to start with the large-scale redesign section and use the readiness checklist to assess whether you're ready to take on such an effort (and identify specific areas to address as you prepare) or are better positioned for a smaller-scale project.



large-scale redesign



case studies

Large-scale redesign efforts have the potential to catalyze big changes at the systems level that positively impact residents, frontline staff, and government agencies.

While your redesign initiative will be unique to your agency, below are examples of how the Michigan Department of Health and Human Services (MDHHS) is transforming social safety net benefits delivery through human-centered redesign.

Applications

In 2018, the MDHHS launched a [redesigned benefits application](#) which integrated the state's largest public assistance programs—including healthcare, food assistance, cash assistance, child development and care, and state emergency relief—for 2.5 million residents across the state into [one form](#).

Previously the longest public benefits application in the U.S., the combined forms across these five programs totaled 64 pages, 1,000 questions, and 18,000 words. Complex and vague language found in the forms could be overly confusing, and questions were often repeated across multiple forms or phrased in a way that made residents feel interrogated. For frontline staff, incomplete or inaccurate forms translated to substantial energy correcting errors, resulting in an average processing time of 50 minutes per application.

The redesigned application form removed redundant questions, streamlined content, and made forms more accessible by employing best practices in visual design and plain language. Caseworker interview scripts were also standardized and updated with questions for complex cases no longer covered in the application form.

To make sure changes were adopted and sustained, the agency used a peer training model to train 5,000 frontline staff across more than 100 offices on redesigned forms and processes and foster a sense of ownership among staff who would be implementing the changes. They also trained more than 3,000 staff from 600 community partner organizations who support residents with benefits program enrollment.

The application redesign effort has:

- **Slashed application length** by 80%, with a majority of residents able to complete the streamlined application in under 20 minutes;
- **Improved application completeness** by more than 20%;
- **Cut caseworker time** spent correcting errors by 75%; and
- **Halved processing time** for caseworkers.

On the heels of this initial success, MDHHS has since rolled out a modernized online enrollment and case management portal which enables residents to easily manage their benefits from their mobile phones with similarly impactful results.

The agency has also made policy and process changes to enable same-day benefits determinations, saving time for residents and caseworkers and reducing procedural denials due to inaccurate or incomplete applications.

Assistance Application

Submit this form by mail, fax, or bring it into a local MDHHS office

Find your nearest location at www.michigan.gov/ContactMDHHS or call 855-ASK-MICH

Apply online: www.michigan.gov/mbridges

← Refer to the Information Booklet for details on each program

Welcome!

Fill out the Assistance Application
Answer questions about you and your household.

Fill out Program Details:

- Healthcare Coverage
- Food Assistance Program (FAP)
- Cash Assistance: Family Independence Program (FIP), Refugee Cash Assistance (RCA), State Disability Assistance (SDA)
- Child Development + Care (CDC)
- State Emergency Relief (SER)

Submit your application for one or more programs
It will be sent to your local MDHHS office for review and follow-up.
You may need to interview with a MDHHS Specialist.

Receive your results

What language do you prefer?

Spoken Language Written Language

If you do not speak English, have a hearing impairment, or have a disability, let us know how we can help you (an interpreter, sign language, TDD/TTY phone number we should call, assistance listening device, etc.) or bring your own support.

إذا كنت لا تتحدث اللغة الإنجليزية، تعاني من إعاقة سمعية، أو لديك إعاقة، أخبرنا كيف يمكننا مساعدتك (مترجم فوري، لغة الإشارة، رقم هاتف TDD/TTY يجب أن تصل عليه، جهاز الاستماع للمساعدة، إلخ....) أو أحضر أجهزة المساعدة الخاصة بك.

Si no habla inglés, tiene una discapacidad auditiva o tiene una discapacidad, háganos saber cómo podemos ayudarlo (un intérprete, un lenguaje de señas, un número de teléfono TDD / TTY al que debemos llamar, un dispositivo de asistencia auditiva, etc) o puede traer su propio apoyo.

If you are refused help, call 855-275-6424.

Michigan Department of Health and Human Services

MDHHS-1171 (5-18)

Case #:
ID #:

Renewals

Residents enrolled in public assistance programs must go through a renewal process at least once per year to keep their benefits.

For residents, undelivered forms, complex directions and questions, and unclear due dates create a burdensome experience at best. At worst, these barriers can result in residents losing their benefits due to errors or failing to submit their forms on time.

These challenges have a direct impact on frontline staff, who must spend significant time providing guidance to residents in field offices and over the phone, correcting errors and tracking down missing information on forms, and processing new applications from residents who churned off the program and must reapply.

To address these pain points, MDHHS redesigned renewal forms and implemented them statewide in 2020, integrating renewals for healthcare, food assistance, cash assistance, and child care programs. Residents complete one core form, along with short supplements for specific programs. Similar to applications, renewal forms were redesigned to reduce length, simplify language, and highlight key information, due dates, and next steps.

To further streamline the process, forms come pre-filled with information from residents' case files, and the agency has enabled automatic verification using relevant existing documentation.

Data from the pilot found that redesign:

- **Increased renewal submissions** by 12%;
- **Increased renewal forms submitted on time** from 75% to 95%;
- **Cut resident errors** on renewal forms by 60%;
- **Decreased lobby visits** for renewals by 50%;
- **Saved caseworkers** a combined 200,000 hours per year; and
- **Improved successful renewals** by 15%.

MDHHS OFFICE
101 MICHIGAN STREET
ANYTOWN, MI 48123

Care Name: Jane Doe
Case Number: 6123456
Doc: 11/16/2021
MDHHS Office: Any County
Specialist: C. Nilla
Phone: (123) 123-4567
Fax: (123) 321-7654
Specialist ID: cvilla



Redetermination

Renew your benefits

JANE DOE
1234 WAY LANE
ANYTOWN, MI 48123

Full legal name:
Jane Doe
Your due date:
October 23, 2021

Your benefits will end if you do not submit the form for: Food Assistance

Here's what you need to do:

- 1 Answer the questions on the form.
- 2 Sign and date the form at the bottom of page 4.
- 3 Send the form to us by 10/23/2021. Don't wait!
 - Submit online at michigan.gov/mibridges
 - Mail your form in the envelope we sent you
 - Turn in your form at your local MDHHS office

You're required to have an interview with a MDHHS specialist, unless you are renewing for Healthcare or Childcare (CDC).

Type of interview:	Interview date and time:	Appointment location:
Phone	9:00am on 11/1/21	N/A

A MDHHS specialist will contact you if you are scheduled for a telephone interview. You are responsible for calling your specialist before your interview date if you need to reschedule or would like an in-person interview. If you do not keep your appointment, submit your completed form and submit all required proofs by the due date your benefits may be expired, canceled, delayed, or reduced.
Your Food Assistance Program (FAP) benefits will end on 10/30. You must submit your redetermination form or filing form by 11/15/21 in order to receive uninterrupted FAP benefits.

? If you need help, contact your local office before your due date.

Michigan Department of Health and Human Services

MDHHS-1010 (Rev. 4-20)

Send these proofs

Please provide proof of all **income** for your household and any changes you write down. Some examples include:

Income (Last 30 Days)

Employment Income

- Pay stubs
- Employer statement

Stopped/Started/Changed

- Employer statement

Additional Income

- Pension
- Child support

Self-Employment Income & Expenses

- Tax return
- Expense receipts
- DHS-431

Assets

Proof of Current Assets

- Bank statements
- Property deeds
- Copy of Direct Express card & ATM receipt

← Not required for Child Care (CDC) or Healthcare (unless on a deductible, older than 64, disabled or in need of long-term care services)

Only required for FAP and Cash if requested

Expenses (Last 30 Days)

Proof of Expenses

- Proof of rent/mortgage
- Utility bills
- Child support

← Not required for Child Care (CDC)

How to submit

Submit proofs online (michigan.gov/mibridges), by mail, or turn them in at your local MDHHS office. When you submit documents provide copies - we are not able to return original documents.

If you need help getting proof, contact your local office.

Correspondence

Building on the momentum from applications and renewals, MDHHS has directed its energy toward addressing another pain point for residents and frontline staff: correspondence.

The notices and letters that Michigan sends to inform residents about benefits updates and actions are often hard to understand for the people receiving them. Institutional language and poorly designed correspondence (e.g., notices that are long and dense, use complex legal language, unclear due dates, etc.) can result in people missing important actions on their case or needing to seek assistance through lobby visits and calls, all of which create avoidable burdens for frontline staff. Poorly designed correspondence also impedes trust with residents.

MDHHS OFFICE
101 MICHIGAN STREET
ANYTOWN, MI 48123

Case Name: Jane Doe
Case Number: 6123456
Date: 9/1/2021
MDHHS Office: Any County
Specialist: C. Nilla
Phone: (123) 123-4567
Fax: (123) 321-7654
Specialist ID: civilla

Child Development + Care (CDC)

Provider verification needed

JANE DOE
1234 WAY LANE
ANYTOWN, MI 48123

Name: **Jane Doe**
Your due date: **November 1, 2021**

Before MDHHS can pay your child care provider, you must complete this form.

Here's what you need to do:

- 1 Choose a child care provider.
 - If you need help, search for licensed providers online at [Greatstarttoquality.org](#) or call 877-614-7328 for assistance.
 - If your child care provider is a License Exempt provider, they must complete the Child Development and Care (CDC) License Exempt Provider Application. The application can be found online at: [Michigan.gov/childcare](#).
- 2 Sign and submit this form to MDHHS.
 - Submit online at [Michigan.gov/MiBridges](#)
 - Mail your form in the envelope we sent you
 - Turn in your form at your local MDHHS office

MDHHS will send you and your child care provider notices once the form is processed. If approved, the child care provider can begin billing.

Michigan Department of Health and Human Services
MDHHS-4025 (Rev. 12-20) 1 of 2

Provider Details

Child Care Provider Information

Provider Provider ID #

Provider Address (Street address, City, State, ZIP Code)

Provider Phone Number Provider Email

Where are the child(ren) listed below cared for?

Licensed Child Care Center
 Licensed Group Home
 Licensed Family Home

Home where child lives
 Provider's home

← If the provider is license-exempt and not related to the children, care must be provided in the children's home.

Child information

← Need more room to write? Attach a list for additional children. Be sure to include the same information.

Please list all child(ren) in the family needing care.

Name of child	Date of birth	Date child care began	Is the child related to the provider?	If yes, how are they related?
<input type="text"/>	<input type="text"/>	<input type="text"/>	Y N	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	Y N	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	Y N	<input type="text"/>

Sign Here

I have told the truth; I understand that I can be held criminally/financially responsible for providing false information on this form. I certify that I have read and agree to all rules in the CDC Handbook posted online at [Michigan.gov/childcare](#).

For more information and requirements, see the CDC Handbook at [Michigan.gov/childcare](#). If you need help, contact your MDHHS specialist.

Signature of Parent or Substitute Parent Date

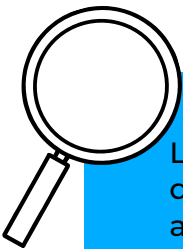
The Michigan Department of Health and Human Services will not exclude from participation in, deny benefits of, or discriminate against any individual or group because of race, sex, religion, age, marital origin, color, height, weight, marital status, gender identification or expression, sexual orientation, partisan considerations, or a disability or genetic information that is unrelated to the person's eligibility.
This institution is an equal opportunity provider.

Michigan Department of Health and Human Services
MDHHS-4025 (Rev. 12-20) 2 of 2

In 2021, MDHHS began redesigning correspondence for 15 core notices, including verification requests, appointments, and case actions letters across the agency's largest benefits programs. The redesign has focused on making notices more accessible, understandable, actionable, and transparent. Changes include simplifying language and clarifying instructions, restructuring notices so that the most relevant information for residents comes first, and using visual design to make the content more approachable while drawing attention to due dates and actions.

Feedback from user testing is promising. Residents report feeling that redesigned notices are clearer and more inviting, help them better understand what they need to do and take immediate action on, and strengthen their trust with MDHHS.

During user testing, one resident noted, "It makes me feel like they actually took the time to review my file before sending me this form." A caseworker exclaimed, "This is awesome! I can see less phone calls already!"



Large-scale, human-centered redesign provides a transferable model across different states and agencies. While MDHHS is an exemplar, several other state and local agencies around the country are adopting this model with similar outcomes.

The **Missouri Department of Social Services** is currently implementing a large-scale redesign for applications, renewals, and correspondence across its largest benefits programs. The new designs build off of the Michigan work and are seeing similar success. During user testing interviews, residents noted that the new forms felt more "approachable" and less "dehumanizing." One frontline worker explained, "I like that this [application] is shorter. It's very simple and has all of the questions we need to make a determination." Another worker shared, "We ask so many questions [on the current renewal form] that have nothing to do with a determination and it's like, 'why are we asking [participants] these things? It just makes things harder for everyone.'"

readiness checklist

The following checklist includes conditions and resources that underpin a successful large-scale redesign initiative, based on previous efforts that have been implemented in other states.

We encourage you to use this checklist to assess your agency's readiness to take on a large-scale redesign and identify specific areas to address as you prepare.

Project Leadership + Operations

Large-scale redesign must be a top priority for the agency, otherwise the project risks being de-prioritized by inertia, competing agendas, and other roadblocks that will inevitably come up. Set your project up for success by ensuring:

- Your agency/department has established leadership and a core team committed to seeing the project through from start to finish.
 - Directors and deputies of departments that oversee eligibility and enrollment for benefit programs are fully bought-in on redesign. As project sponsors, they can help secure stakeholder buy-in and unblock institutional obstacles.
 - The project lead reports directly to director-level leadership and has capacity to dedicate at least 50 percent, if not more, of their time to redesign. This person is capable of setting a vision, advocating for prioritizing user voices in decision making, and integrating processes and requirements across policy, legal, data, technology, and business. They are trusted and can navigate dynamics across all levels of the agency (from leadership to frontline staff), and have authority to remove barriers along the way through executive decision making.
 - You have established a core team with the skills and capacity to take on redesign. This includes a user researcher/service designer, graphic designer, policy analyst, legal counsel, data analyst, technical specialist, communication specialist, and training specialist. These individuals should serve as liaisons to the agency's wider policy, legal, and technical teams.

- You have a group of specialists on staff who are able to dedicate time and energy to the project as needed. This includes frontline staff, policy analysts, technical specialists, business process specialists, and translators.
- If you are planning to bring in outside support for redesign, the agency's procurement process is set up to identify the right vendor/partner. This includes the ability to assess human-centered design capacity and agile software development experience with modern government, and developing RFPs/RFIs accordingly.
- You have the funding to take on a large-scale redesign project and sustain newly redesigned forms, technology changes, and processes once they are implemented. This might come from federal matching funds, state budget, foundation support, or other sources.
- Your agency's leadership is ready for the type of culture change that comes with taking on a large-scale redesign effort. This includes willingness to challenge existing processes (the way things have always been done) and navigate difficult decisions across policy, legal, data, technology, procurement, budget, and other areas to make necessary changes that meet user needs.
- You are prepared to engage internal and external stakeholders—including residents, frontline staff, community partner organizations, unions, legislature, other state agencies, and federal agencies (USDA Food and Nutrition Service (FNS), U.S. Centers for Medicare & Medicaid Services (CMS), etc.). You understand stakeholders' motivations and priorities, where you might encounter resistance, and how to align them around a shared vision for the project.

User Research + Design

In order to keep the experiences of residents and frontline staff at the center of your redesign efforts, it's important to incorporate user input throughout all stages of the project—including during discovery research, designing and testing, piloting, and implementation. This will ensure you're tackling the right problem and prioritizing user voices in decision making.

- You have the ability to recruit people to participate in user research. You'll want to consider engaging core users—such as residents, caseworkers, lobby staff, and call center staff—as well as key informants—such as community partners and advocacy organizations. You'll want to ensure that people who participate in research are diverse and representative of the range of users who access your benefit programs.
- You are able to train team members involved in user research on how to conduct user interviews, user testing sessions, observations, and site visits. You will also train them on how to analyze data and identify patterns to make informed decisions.
- You have processes in place to store user research data in a way that maintains user confidentiality and complies with privacy and security regulations.
- Your team understands the current process for making changes to existing forms and either has the authority to make decisions or can work with decision makers to go through redesign. This includes having the ability to reimagine how things are done and change agency processes.
- Your team has the ability to prototype and test new design ideas and solutions. This includes having the resources to do 3-4 rounds of user testing per component.
- If you plan to translate applications, renewals, and/or correspondence, start with forms and notices that already come in other languages. You will need native speakers to translate and review materials for accuracy and readability.

Policy

Change can create conflict with stakeholders who have valid reasons for the way things have been done to date. Get your legal and policy teams on board with human-centered redesign from the start so that they can partner with you to create new forms and processes that center people's experiences and meet laws and regulations.

- Your legal and policy team—or teams, if there are separate teams for different benefit programs—has a strong understanding of relevant federal, state, and departmental laws and policies. They are also open and empowered to make decisions about where there is room for interpretation with policy implementation, including what information and language is required on forms and notices, and what can be rephrased, removed, or collected in other ways.
- You are able to connect with federal agencies (FNS, CMS, etc.) and national policy research centers and nonprofits that can provide outside guidance on how other states interpret and implement policy.
- Your policy team has the ability to revise policy manuals to standardize practices and interpretations among county and field offices across the state. Manuals should use plain language and include examples of varied implementation as appropriate.

Technology

Your technology systems are what make it possible to implement redesign. You'll want to think about technical implementation early, as it can be a place where projects get bogged down, especially depending on the complexity of your data and engineering needs and how your existing systems are set up—for example, whether systems are modern and flexible or static; if data is housed across multiple systems; and whether you need to build, change, or integrate systems.

- You have the ability to update the online benefits website/portal so that online applications and renewals reflect new language, question structure, and other changes. Consider a full redesign of the website/portal if it is not already mobile-friendly, or if it doesn't currently function in a way that allows residents to manage their full case online (uploading documents, reporting changes, viewing letters, etc.).
- You are able to make changes to your correspondence management system to integrate new forms and notices, remove unnecessary form fields, and pre-fill form fields. For renewal forms, the correspondence management system can be updated to collate core forms with relevant supplements.
- Your existing backend case management systems are integrated so data can be shared across benefits programs. If this isn't feasible, you are able to integrate document storage so forms can be viewed in multiple systems.
- You can make updates to case management systems to remove data entry fields that aren't necessary for frontline staff to make application or renewal determinations.
- Your systems are set up to generate reports that surface relevant outcomes data. See the evaluation section for examples of impact metrics.
- You have processes in place to comply with data privacy and security regulations. This includes securing relevant approvals for data sharing and use, if necessary.
- You are able to establish a process for ongoing systems maintenance and protocols for escalating and resolving technical issues that arise.

Implementation

Implementation is an essential, yet often overlooked, step for successfully rolling out redesign efforts. You will need to find ways—through outreach, training, and other means—to bring stakeholders along so they can embrace and successfully implement new solutions.

- You are committed to onboarding frontline staff so they buy into implementation and are able to adopt new solutions. This includes allocating time and resources to properly train staff, ideally using a peer training model or another proven approach.
- If agency or frontline staff must take on additional responsibilities to support implementation, you have the ability to rescope roles and workflows.
- If internal agency or department processes need to be updated, you have the authority to make changes or are able to work with decision makers to do so.
- You have channels to communicate with other internal stakeholders who aren't directly impacted by redesign so they are aware of the effort. Prepare to explain the why, what, when, where, and how behind the project, as well as how it may affect them.
- You are committed to informing external stakeholders (residents, advocates, community partners, providers, unions and workforce development organizations, etc.) so they will support redesign and are aware of any changes that may impact them. This includes developing communications materials and marketing campaigns, and conducting outreach to reach key audiences to raise awareness. It also involves directly notifying residents so they are aware of the changes, and training partner organizations that help residents apply for benefits.

Evaluation

Make sure you have a way to measure the impact of redesign on outcomes and user experiences. This is key for communicating the value of redesign to stakeholders, which can help you build momentum for expanded efforts. It also helps you identify places where you can iterate and make improvements post-launch.

- You have identified key impact metrics and have a process for collecting, assessing, and measuring data across short-term and long-term outcomes. Example metrics include: time to apply, application and renewal submissions, approval and denial rates, days to determination, completion and error rates, caseworker processing time, reasons for lobby visits and calls, etc.
- You have access to the data you need to evaluate impact, and you have processes in place to comply with data privacy and security regulations. If necessary, you can secure relevant approvals for data sharing and use.
- You are committed to leveraging evaluation data to identify gaps and inform continuous improvements to redesigned forms and processes.

Governance + Sustainability

It's important to establish a governance model so that redesign efforts are sustained long-term and not rolled back over time. To accomplish this, you'll want to build in a system of accountability and clear processes for continuously improving and expanding on redesign.

- You are able to appoint a team that will be responsible for sustaining changes and overseeing continuous improvement.
 - These individuals should have the training, skills, and capacity to take on these roles. Examples of skillsets needed include: user researcher/service designer, graphic designer, technical specialist, policy analyst, and legal counsel.
 - If you are planning to bring in an outside partner/vendor for redesign, there is a clear transition plan that includes upskilling the agency team members who will be responsible for sustaining changes moving forward.
 - There should be one person who reports directly to director-level leadership with the authority to remove obstacles and make final decisions of whether or not to implement new changes.
- You are committed to developing a framework for future decisions to follow a human-centered design process. This includes how changes are submitted, vetted, user tested, approved, implemented, and evaluated. For example, creating a decision tree can provide structure for how to assess and incorporate future changes to forms. Similarly, creating a form for formally submitting change requests—that, at a minimum, asks for a description of the change, who it will impact, and the rationale behind the request—can support a process where updates are made with intention.
- You are committed to creating accountability structures to ensure redesigned forms and processes are sustained. This includes, where relevant, revising metrics for performance reviews for leadership and staff to reflect changes.

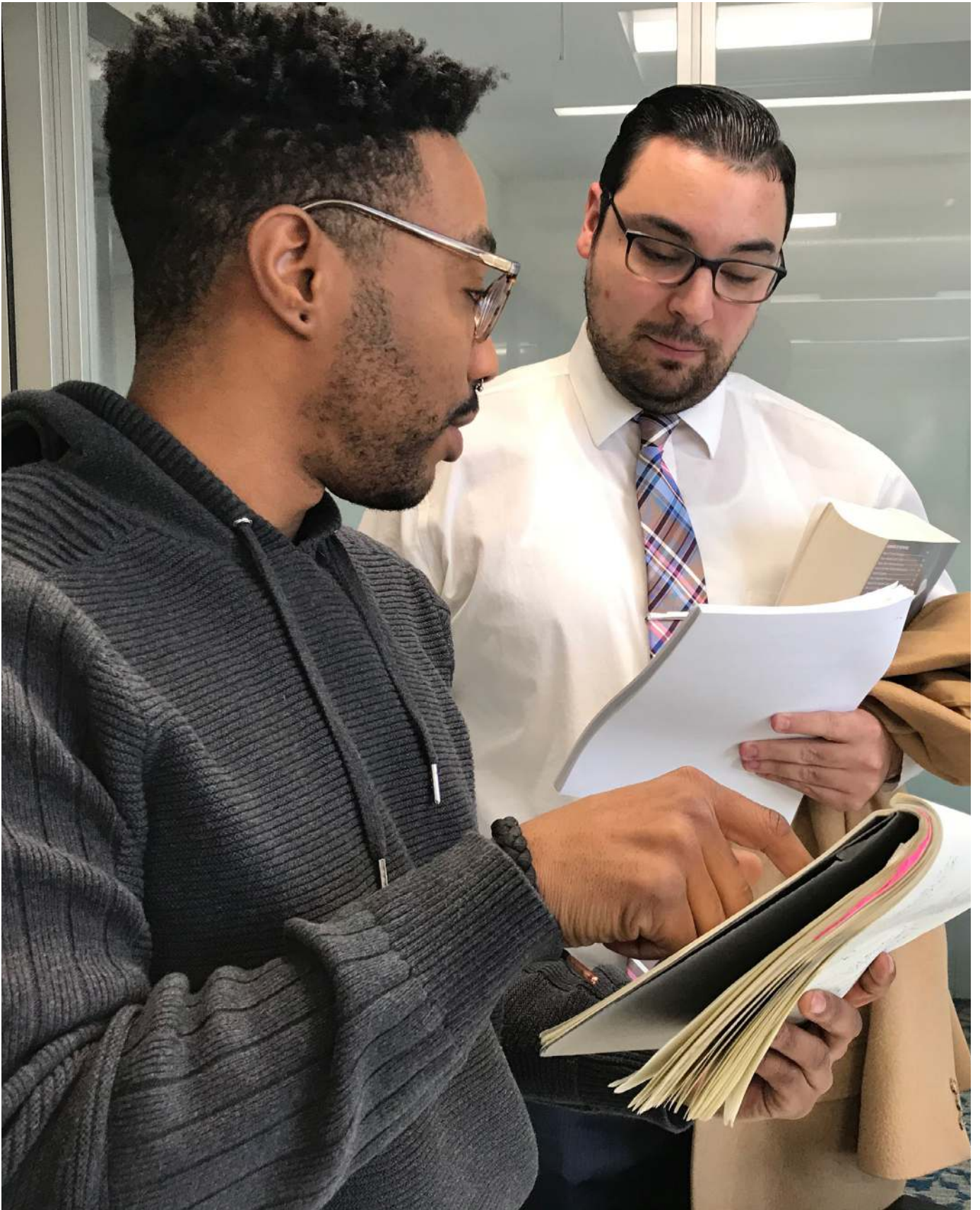
paths forward

→ **Large-Scale Redesign**

If you've met most of the conditions in this checklist or feel confident that you can address them soon, you're likely well positioned to take on a large-scale redesign effort. Read on for an overview of the major stages of redesign and practical resources that will equip you for success.

→ **Small-Scale Redesign**

If meeting the checklist conditions now or in the near future seems like a stretch, a smaller-scale redesign project might be a better fit. Jump to the Smaller-Scale Redesign section, starting on [page 34](#) for examples of different types of incremental changes you can make, resources and conditions needed for each, and practical guidance as you get started.



roadmap for large-scale redesign



Redetermination Application

John Doe
Ap 1, 2024 @ 1:30pm
Jan 12, 2024

Redetermination Application

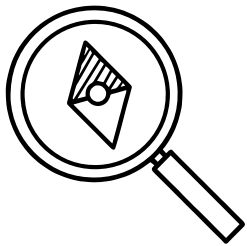
Redetermination Application

Medical Assistance

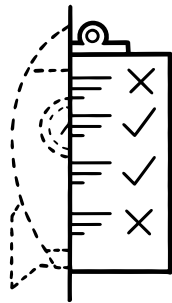
Spiral notebook with handwritten notes and a black pen.

roadmap for large-scale redesign

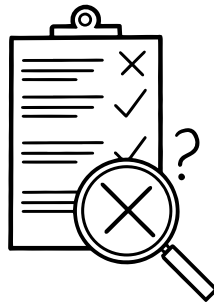
As you prepare to take on a large-scale, human-centered redesign effort, you'll want to plan for these four phases:



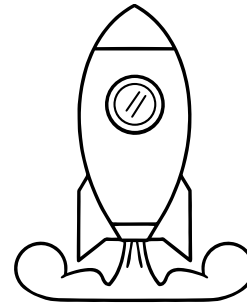
Research



**Design and
Testing**



Pilot



Implementation

Research

The first step of redesign is understanding the experiences and needs of your core users (participants and frontline staff). Instead of relying on assumptions, ground your understanding of the problem and potential solutions in user interviews, direct observation, and baseline data analysis.

You should also conduct a landscape analysis to understand policy requirements, business processes, previous precedents for change (successful and unsuccessful), complementary or competing agency priorities, stakeholder and funding needs, technical requirements, and other considerations that affect your project.

Design and Testing

After you've identified potential solutions, you'll take an iterative approach to prototype, design, and test ideas, and integrate feedback on them. As a best practice, break the design process into shorter sprints where you quickly develop and get user input on components/features early and often. You should prepare for 3-4 rounds of testing per component.

By keeping users at the center of your design process, you ensure that you are designing solutions that fit their needs. This process also minimizes the risk of spending time and resources designing a solution that doesn't address the problem.

Pilot

Once you've designed and user tested your solution, it's time to pilot it in a real-world setting. Piloting your redesigned solution allows you to test it with a broader, more diverse set of users, which can help you uncover unexpected use cases, surface potential issues that need to be addressed, and pressure test the solution at scale before launch.

Implementation

Once you've piloted your solution and ironed out any remaining kinks, you can turn your sights to launch. Just as your redesign process centers on users, so too should implementation. Residents, frontline workers, and other internal and external stakeholders should be informed about changes to forms and processes. Frontline staff and community partner organizations should be fully onboarded ahead of rollout.

You should also develop a clear plan for evaluating the impact, including defining short and long-term outcomes. Check out [Code for America's Safety Net Scorecard](#) for metrics to consider. It's important to remember that implementation isn't the end-goal—sustained impact is. Establish a governance model to sustain changes over time and support continuous improvement.

Ready to get started with large-scale redesign?

As a next step, check out [Civilla Practica](#) on:

- Foundations to Human-Centered Redesign
- Design Principles: Visual and Content Design
- Applications | Renewals | Correspondence

These free, online courses are meant to help you get your redesign effort off the ground. The self-guided courses will walk you through developing and kicking off your project, equip you with tangible skills in design and user research, and impart lessons learned from Civilla's work in Michigan and Missouri.

smaller-scale redesign



Redetermination
Massachusetts Department of Health and Human Services
Division of Health Care Financing Administration
100 State Street, Room 1000
Boston, MA 02109

MA Only

Financial Application

PROGRAM SPECIFIC

Assets

Expenses

JOIN RE
INTERVIEW DATE
MAY 1, 2014
SEND THE FORM
TO THE STATE
IN THE MAIL BY
MAY 15, 2014
FILL OUT!

MEDICARE

FAMILY INCOME Does anyone's income change?

TAX PAGES

STUDENT LOAN

NOO IN REQUIRING

Automatic Renewal? Y N

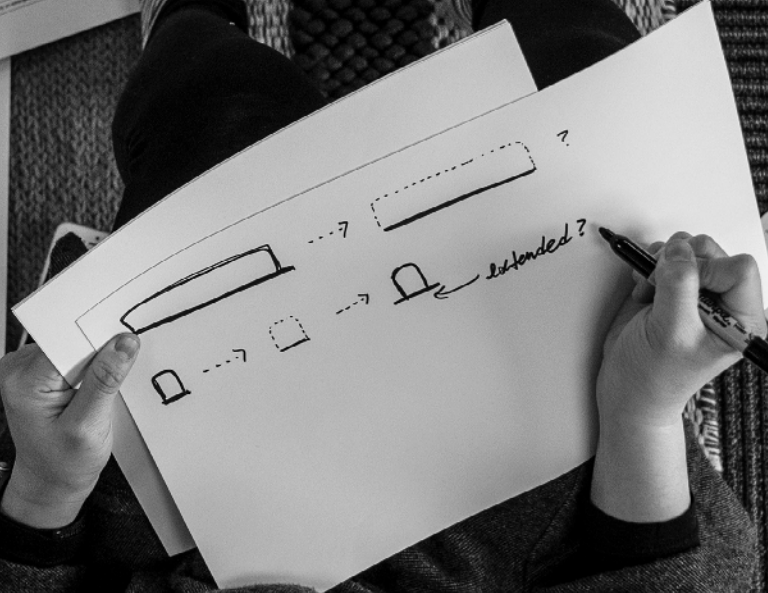
54321

Redetermination
Massachusetts Department of Health and Human Services
Division of Health Care Financing Administration
100 State Street, Room 1000
Boston, MA 02109

CASH ONLY

School Attendance? TBD

Fact Check (FAP CASH)



Financial Application

Financial Application

Redetermination

Redetermination

Redetermination

Redetermination

Redetermination

Redetermination

smaller-scale redesign

Smaller projects are great because they allow you to make incremental improvements quickly and with fewer resources. They're also lower-stakes opportunities to test out and demonstrate the impact of changes, which you can use to build momentum toward a larger-scale effort.

There are many different types of smaller-scale projects you can take on, depending on the problem areas you want to address and the resources available to support redesign. You'll be able to do many of these initiatives by yourself (depending on your skill set) or with a small team. You can also take on one or multiple incremental changes.

While you don't need to meet the full set of conditions and resources in the readiness checklist for an incremental redesign project, set yourself up for success by ensuring:

- You have approval and authority to take on the project.
- You are willing to engage relevant internal and external stakeholders early and often.
- You have a process for incorporating user research and testing throughout all stages of the project.
- You can ensure changes are effectively implemented. Depending on the type of redesign you take on, this might include training frontline staff and partner organizations, notifying and onboarding residents, making technology changes, etc.
- You have a way to evaluate and report impact.

Below are examples of smaller-scale redesign projects that you might take on to incrementally improve applications, renewals, and/or correspondence.

Visual Redesign

Streamlining visual design of applications, renewals, and correspondence makes it easier for residents to navigate forms and notices. This can increase their ability to complete forms accurately and on time, which can

in-turn make processing easier for caseworkers. Key elements to consider for visual redesign include: updating fonts and text sizes, increasing text hierarchy, adding color and spacing, and highlighting key deadlines and actions.

Visual redesign typically requires user research, graphic design, and policy reviews, as well as light technical changes like updating forms in the correspondence management system.

As a next step, check out the Civilla Practica course on [Design Principles](#). This online course will introduce you to general principles of visual redesign, best practices for accessibility, colors, and fonts. We also recommend taking a look at the MDHHS [style guide](#) for tips and the [redesigned application](#) to see them in practice.

Simplify Language

Simplifying the language used on forms and in notices can help residents with lower literacy understand communications. It can also reduce confusion stemming from legal or policy jargon, increasing people's ability to accurately complete the forms and take action on timely notices. This can help reduce call center volume, which in-turn frees frontline workers to focus on more complex cases.

Simplifying language typically requires user research, communications design, and policy/legal reviews, as well as light technical changes (if you're updating online forms and notices).

As a next step, check out Civilla Practica course on [Design Principles](#). This online course will introduce you to best practices for voice, plain language, and readability. We also recommend reviewing the [Federal Plain Language Guidelines](#). To see how MDHHS simplified language, read through their [redesigned application](#) for residents.

Reduce Length

Reducing correspondence length by cutting non-essential text makes it easier for residents to digest key information. Shortening applications and renewals by removing questions that aren't necessary to determine eligibility and benefit allotment helps residents complete forms faster and ensures that eligible residents aren't dropping off in the process.

Reducing length typically requires user research, service and/or communications design, and policy/legal reviews, as well as light technical changes.

As a next step, check out Civilla Practica on [Design Principles](#), which will introduce you to best practices on streamlining form and notice length.

Pre-Fill Information

Pre-filling forms with known information—so residents only need to make updates when something has changed—removes the time burden for residents of filling in details that the agency already has on file. This makes it faster and easier for residents to complete forms accurately and on time.

Pre-populating information typically requires user research, data, and engineering resources, along with policy/legal reviews.

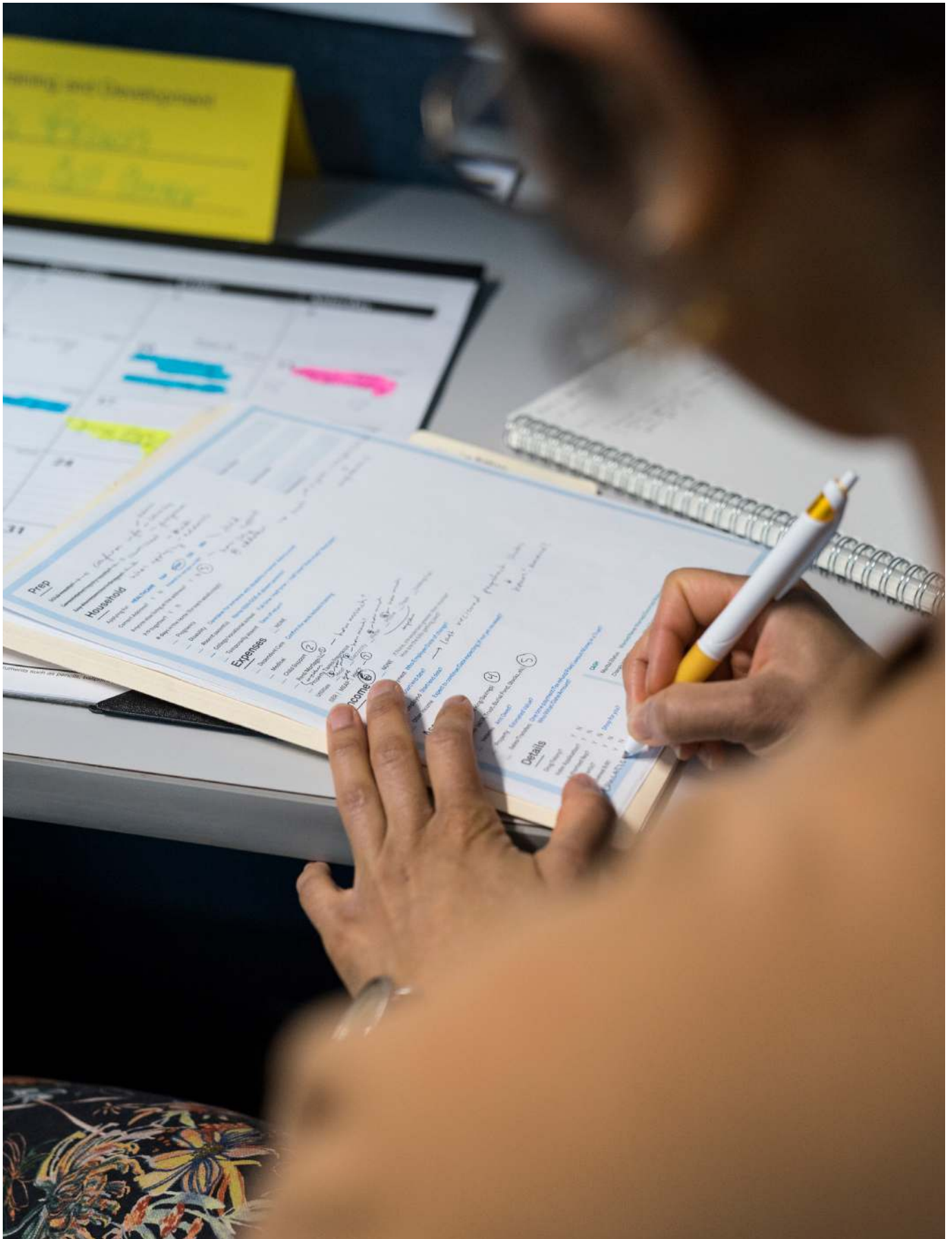
Review federal and state guidelines for pre-filling information on renewal forms and correspondence for benefit programs. The U.S. Centers for Medicare & Medicaid Services (CMS) has issued federal requirements for [Medicaid and Children’s Health Insurance Program \(CHIP\) renewals](#), whereas you’ll want to review state requirements for SNAP, WIC, and TANF.

Expand Translation Options

Translating applications, renewals, and correspondence into commonly spoken languages other than English improves accessibility for communities that are often underserved.

Expanding translation options typically requires user research and data resources to identify language needs, as well as native speakers to translate and review materials for accuracy and readability. This work may also require light technical changes.

As a next step, check out the Civilla Practica course on [Design Principles](#), which will introduce you to best practices for translation. The Centers for Medicaid and Medicare Services [Guidelines for Translation](#) is another good resource.



conclusion



next steps

Redesigning applications, renewals, and correspondence to be more human-centered can have powerful effects on the lives of residents who access public benefit programs and the frontline staff who support them.

In light of the [American Rescue Plan Act](#)—which provides landmark funding for technology modernization, cross-government collaboration, and other infrastructure to improve benefits delivery—and heightened public support for investing in the social safety net and systems of equity, now is the moment for state and local government agencies to take on human-centered redesign.

Whether your agency is ready to overhaul applications, renewals, and correspondence through a large-scale redesign effort, or is better positioned to make smaller-scale, incremental changes, taking a human-centered approach helps ensure that redesign is grounded in people's experiences.

We hope that this guide helps you prepare for human-centered redesign by giving you a framework for identifying the right size and scope for your redesign project. As you get started with redesign, we encourage you to use the checklists and refer to the resources we've shared to ensure that your agency is set up for success.

get in touch

We love hearing from leaders and staff at state and local government agencies to learn about your experiences.

Feel free to reach out to us if you have questions or want to share how you're thinking about redesign to deliver a more human-centered safety net in your state.

beeckcenter@georgetown.edu

hello@civilla.org

glossary

Applications: Forms and processes (interviews, verifications) associated with resident enrollment in public benefit programs.

Case management system: This is the electronic system, sometimes referred to as the backend system, that frontline staff use to access, update, and manage resident case files—including all data, documents, and correspondence.

Churn: When residents who are eligible for benefits lose coverage and then must go through the application process to reenter the program within a short period of time (typically less than four months). Churn results in a lapse in coverage, and occurs most frequently around interim reporting and renewal periods.

Correspondence: Notices, letters, and other agency communications sent to residents with information about benefit programs.

Correspondence management software or system: Sometimes called customer correspondence management (CCM) software, correspondence engine, or forms and mail management, this is the electronic system that manages the creating, prefilling, collating, and sending of outgoing forms, letters, and notices—electronic, paper, mail—for residents on public benefits programs.

Frontline workers/staff: Field office lobby staff, caseworkers, eligibility workers, call center staff, and other staff employed by state or local government agencies that support residents with enrolling in and maintaining public benefits.

Human-centered design/redesign: An approach to design that centers on user experiences to understand problems and develop solutions that address their needs. Iteratively prototyping and testing potential solutions with users, and continuous improvement are key tenants to the human-centered design process.

Integrated applications and renewals: A combined form that allows residents to apply for or renew multiple public benefits programs at the same time. Because residents who meet the income eligibility for one program are often eligible for other programs as well, integrated applications and renewals can help residents save time and increase their enrollment across programs for which they are eligible. Integrated applications can also streamline workload and processing time for frontline workers.

Online benefits portal: A digital or web-based site where residents can apply for and renew benefits, check and manage their case, and receive information about benefits programs in one place.

Public benefits agencies: State and local government agencies that administer public benefits programs. These often have names like Department of Health and Human Services, Department of Social Services, and Human Services Agency.

Public benefits programs: Also called social safety net benefits, means-tested public assistance, and social welfare, these are government-sponsored programs that provide cash assistance or in-kind benefits (goods, services, waivers, vouchers) to low income individuals and families. Some of the largest programs include:

- **Healthcare:** Medicaid, Children’s Health Insurance Program (CHIP)
- **Food and nutrition assistance:** Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- **Cash assistance:** Temporary Assistance for Needy Families (TANF), Supplemental Security Income (SSI)

Renewals: Forms and processes (interviews, verification documents, interim reporting) associated with redetermination or recertification of eligibility for public benefit programs. While requirements and timing differ by program and state, residents must typically renew at least once per year in order to keep their benefits.

Residents: Sometimes called clients or participants, these are people who are enrolled in public benefits programs or are eligible but not enrolled.

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Civilla + Beeck Center