



# CalFresh Dual Enrollment Strategies

## February 1, 2017

**SF-MARIN FOOD BANK**

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# Our mission is to end hunger in San Francisco and Marin

This year, we will distribute **49 million**  
pounds of food to meet the need



How big is the in-reach opportunity with Medi-Cal?

# Lost Dollars, Empty Plates 2016 Report

- **Statewide**
  - \$2.5 billion in lost federal nutrition benefits
  - \$4.5 billion in additional economic activity
- **San Francisco**
  - \$97.7 million in lost federal nutrition benefits
  - 174.9 million in additional economic activity

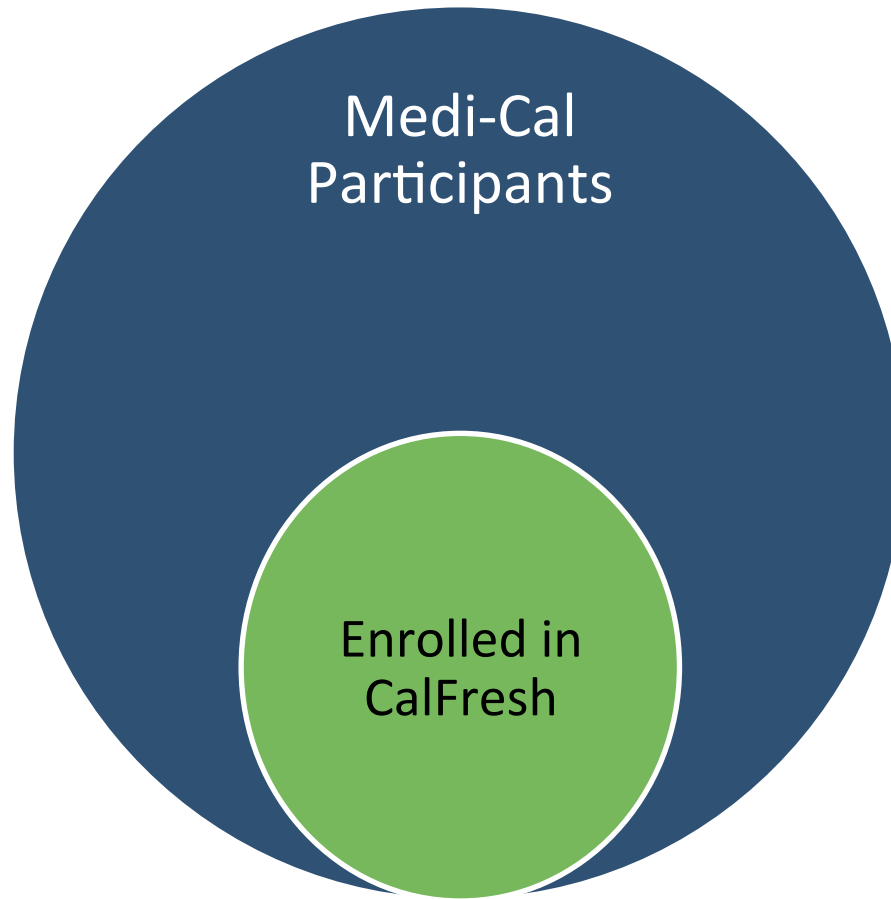
How do we connect  
Medi-Cal participants  
to CalFresh?

# Using Medi-Cal Aid Codes to Refine In-Reach Work

29.2%

of Medi-Cal  
Participants  
are enrolled  
in CalFresh

(June 2016 CalFresh  
Data Dashboard)

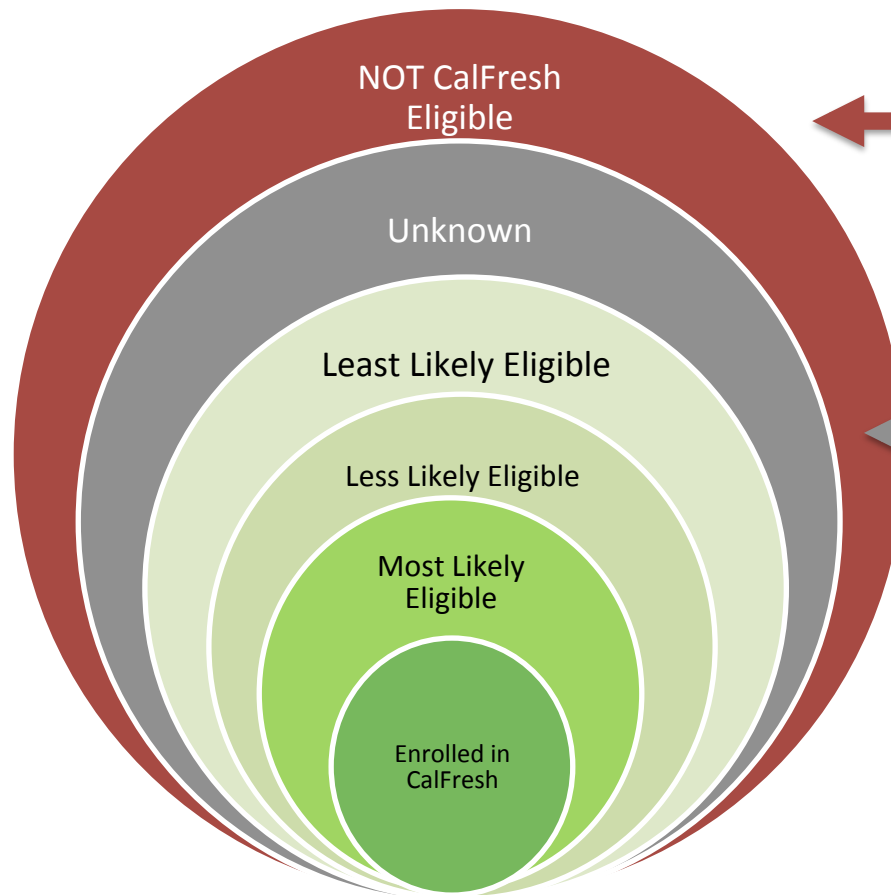


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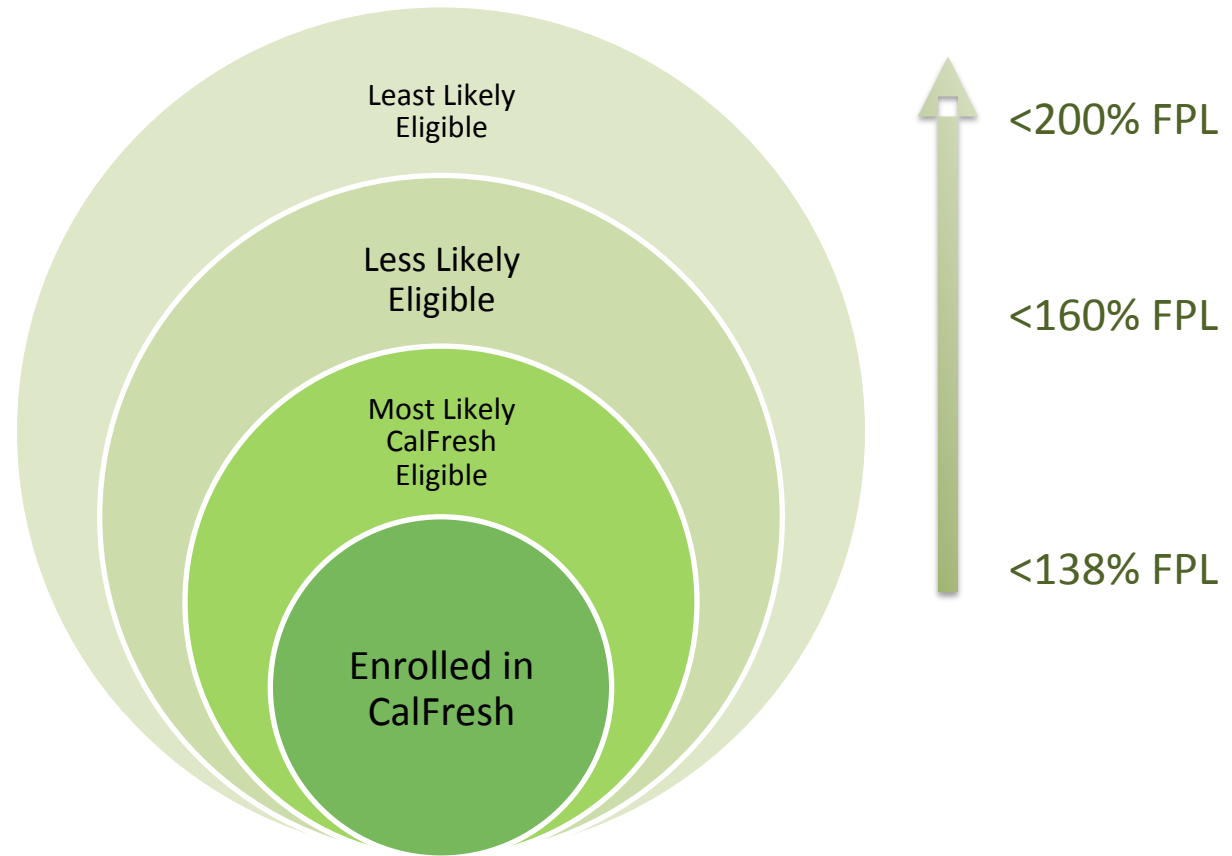


Aid code indicates:

- SSI
- Undocumented
- Inmates
- In LTC facility
- Income >200% FPL

Aid codes that don't  
define income well

# Using Medi-Cal Aid Codes to Refine In-Reach Work





# San Francisco Process

Proactive In-Reach:  
Outbound Call Campaign

# Outbound Call Campaign Model

Contact info for 1,200 cases/month

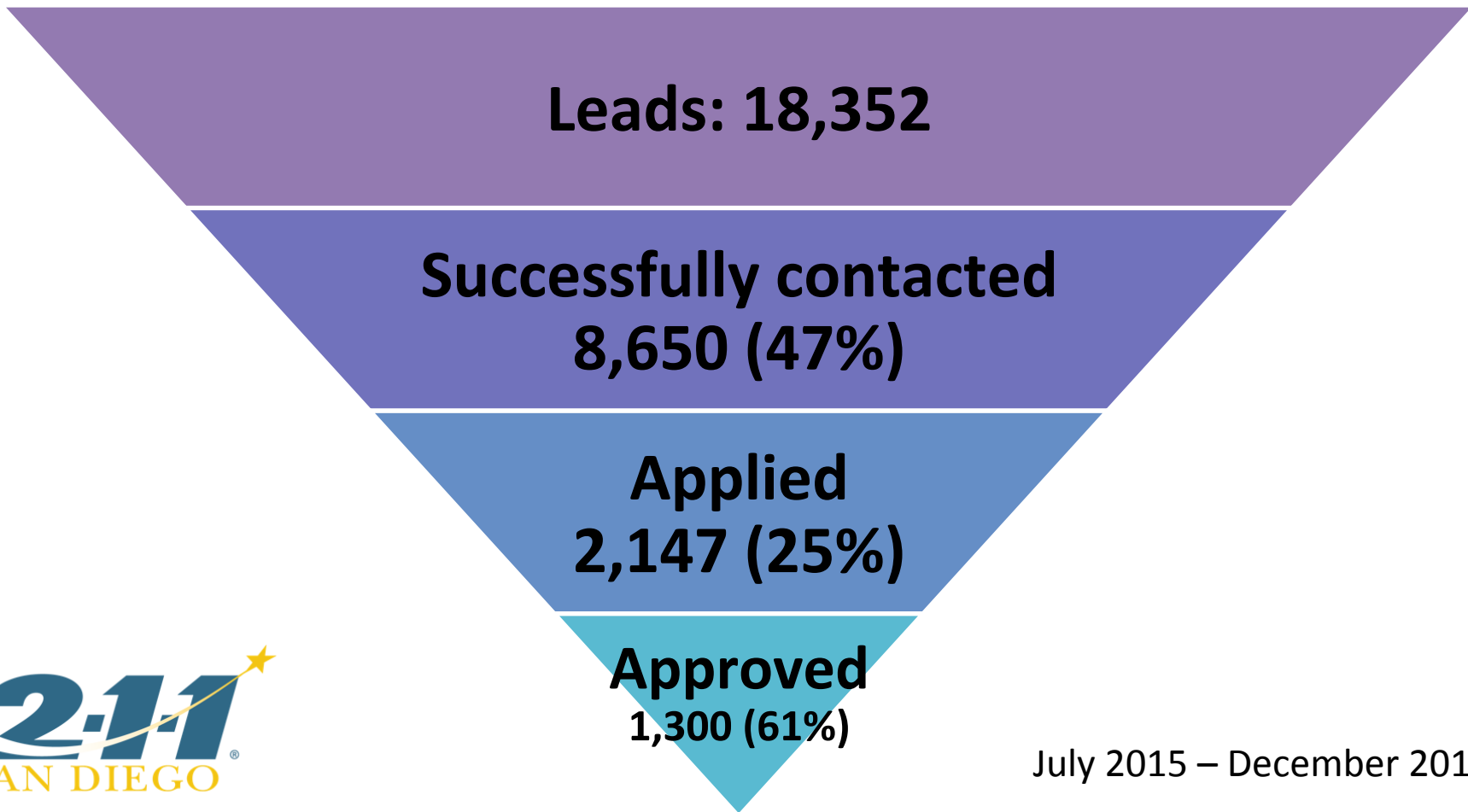
Attempted contacts via phone, letter,  
postcard

Application assistance

Application follow-up



# Early Results



July 2015 – December 2016

# Explore Details of Results

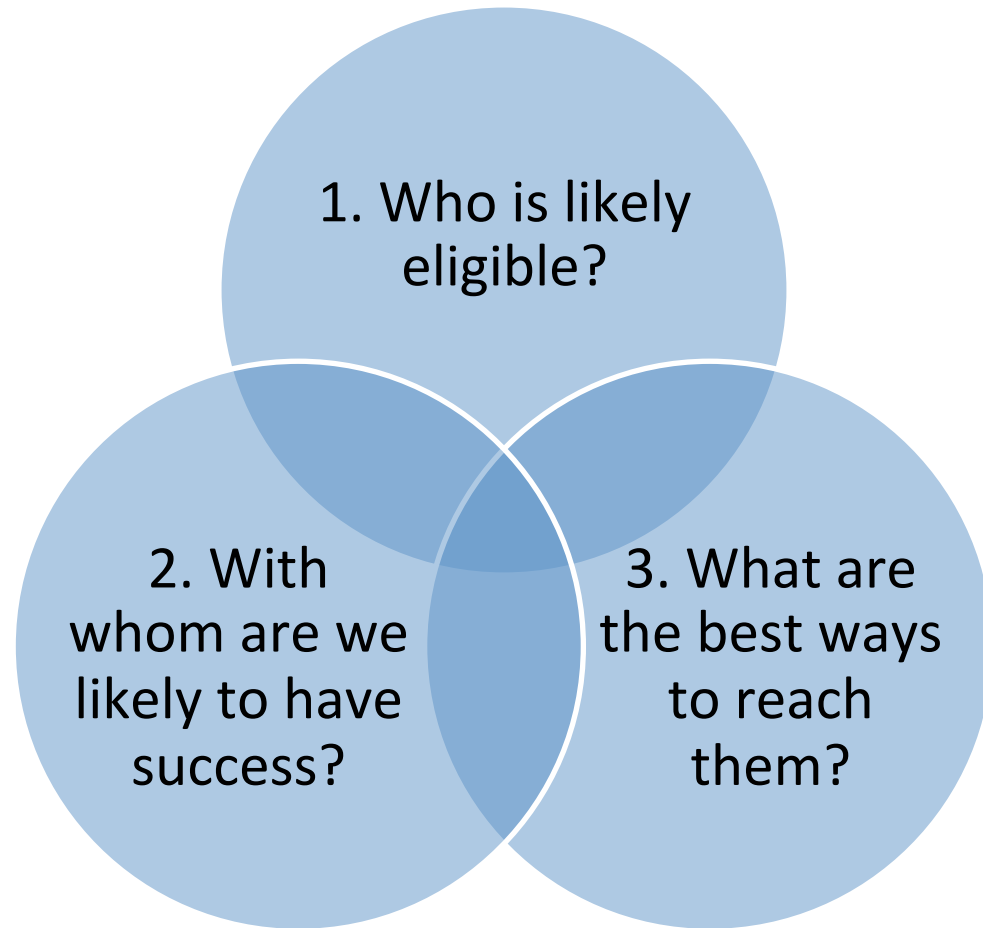
## Approval and Denial Rates by Age Group and Language

	Approved	Denied
<b>Under 60</b>	<b>54%</b>	<b>46%</b>
Cantonese	53%	47%
English	57%	43%
Spanish	50%	50%
<b>60 and Over</b>	<b>73%</b>	<b>27%</b>
Cantonese	73%	27%
English	75%	25%
Spanish	70%	30%
<b>Total</b>	<b>62%</b>	<b>38%</b>

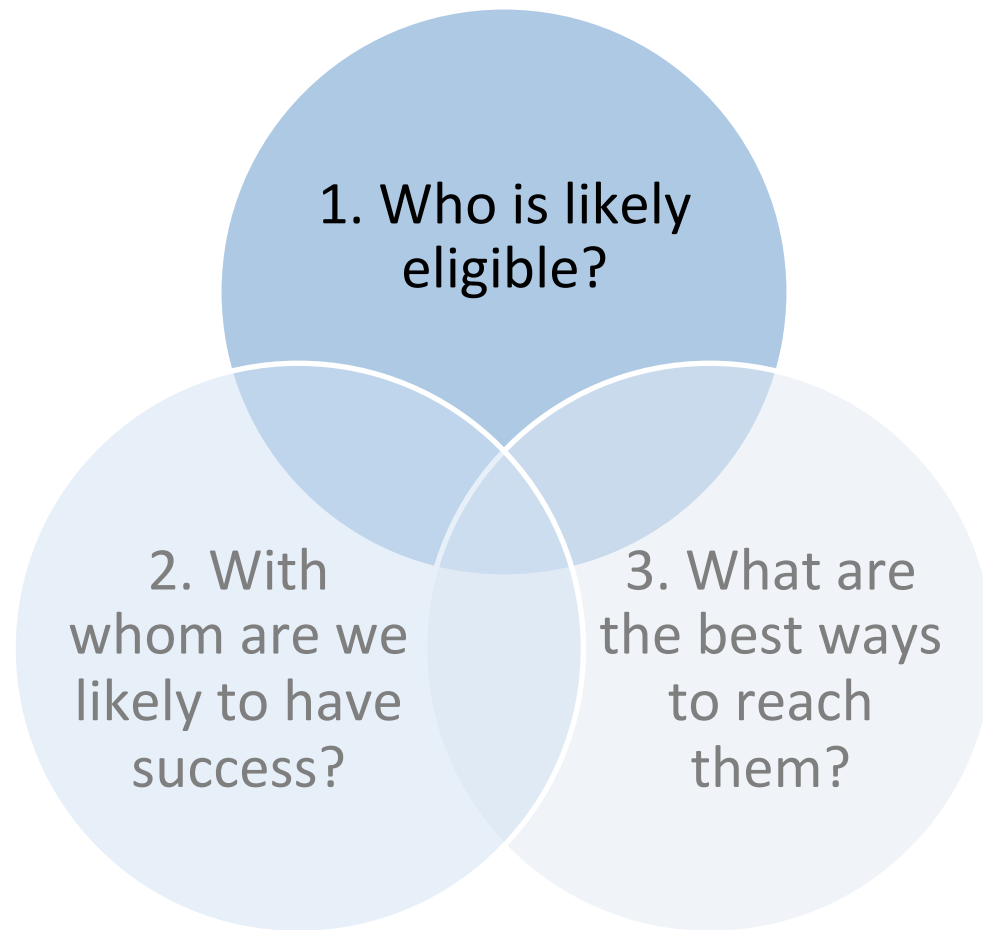
# San Francisco Process

Refining the Next Wave of  
Work

# Refining the Next Wave of Work



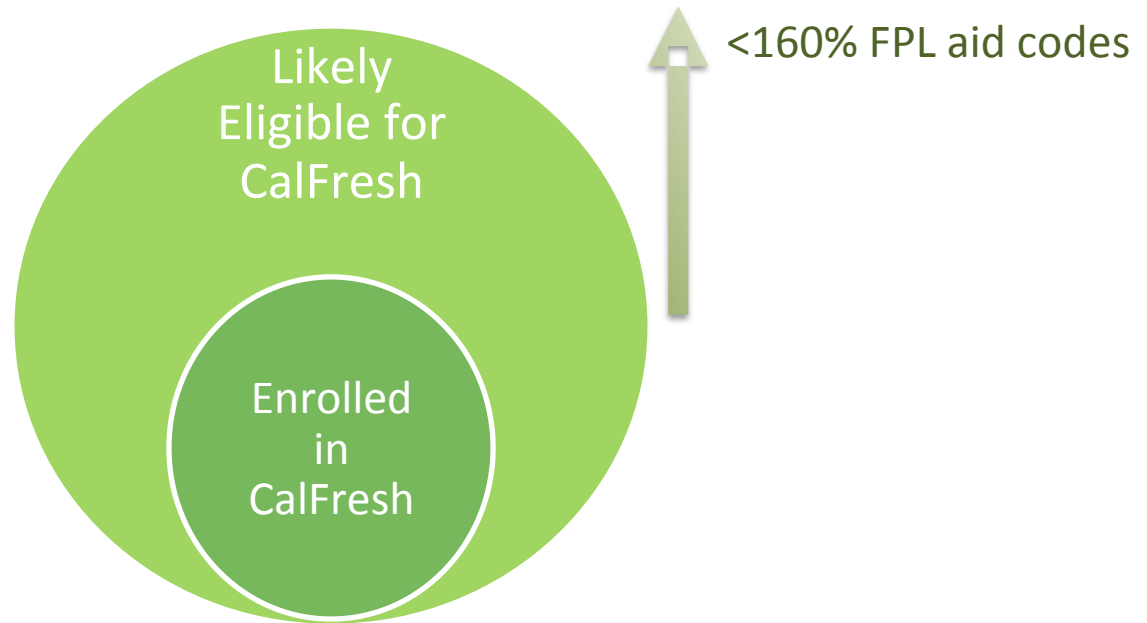
# Refining the Next Wave of Work



# Who is likely eligible?

## Refine pool for in-reach:

1. Use aid code methodology to narrow
2. Only cases where all case members likely eligible
3. Only cases where all case member NOT on CF
4. Incomes <100% FPL





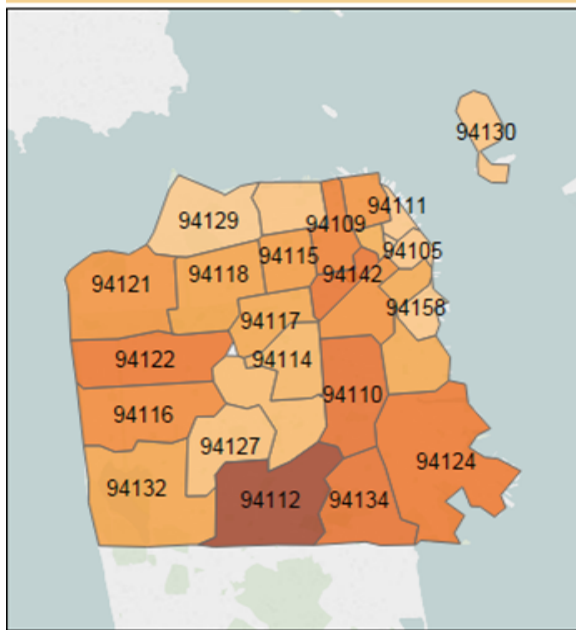
# Who are they?

Client type	
Child	5,878
Senior	21,128
TAY	6,078

Total Cases	Total Individuals
<b>51,586</b>	<b>67,051</b>

Citizen		Gender	
No	29%	Female	52%
Yes	71%	Male	48%

## Location of Medi-Cal cases



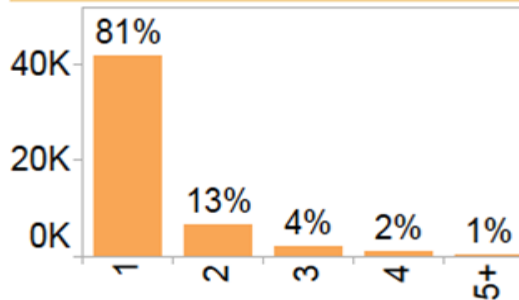
## Case language

English	58%
Cantonese	24%
Spanish	6%
Mandarin	3%
Russian	4%
Vietnamese	2%
Tagalog	1%
Other	1%

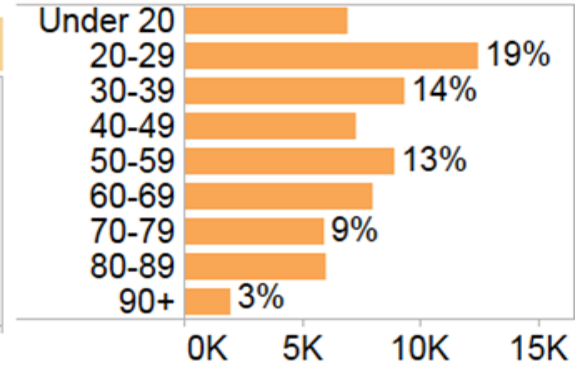
## Case ethnicity

Other	27%
Chinese	30%
White	17%
Hispanic	7%
Unknown	13%
Black or African Am..	6%

## Case size



## Age



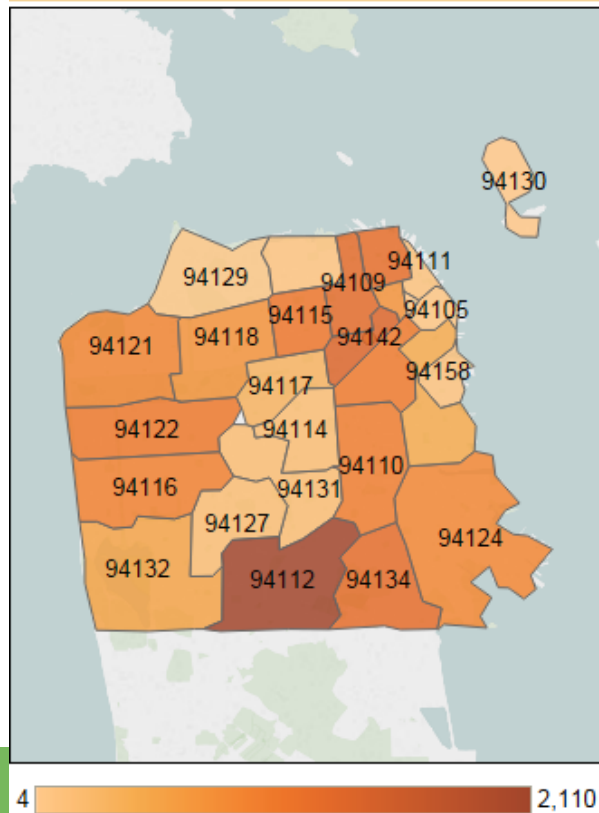
# Digging deeper...

Client type	
Child	5,878
Senior	21,128
TAY	6,078

Total Cases	Total Individuals
<b>17,738</b>	<b>21,128</b>

Citizen		Gender	
No	31%	Female	61%
Yes	69%	Male	39%

## Location of Medi-Cal cases



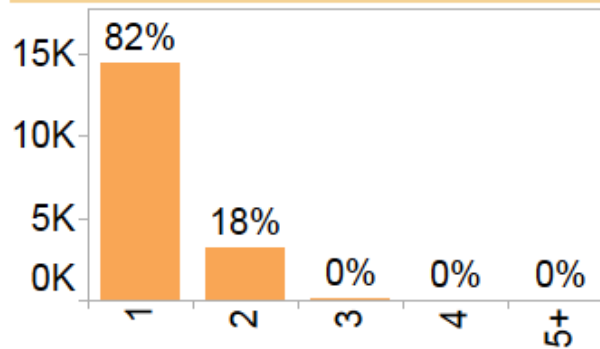
## Case language

English	29%
Cantonese	41%
Spanish	7%
Mandarin	5%
Russian	9%
Vietnamese	3%
Tagalog	3%
Other	3%

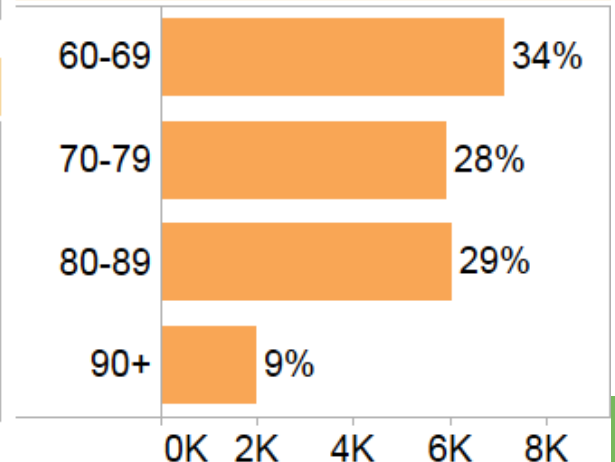
## Case ethnicity

Other	26%
Chinese	46%
White	6%
Hispanic	6%
Unknown	13%
Black or African American	2%

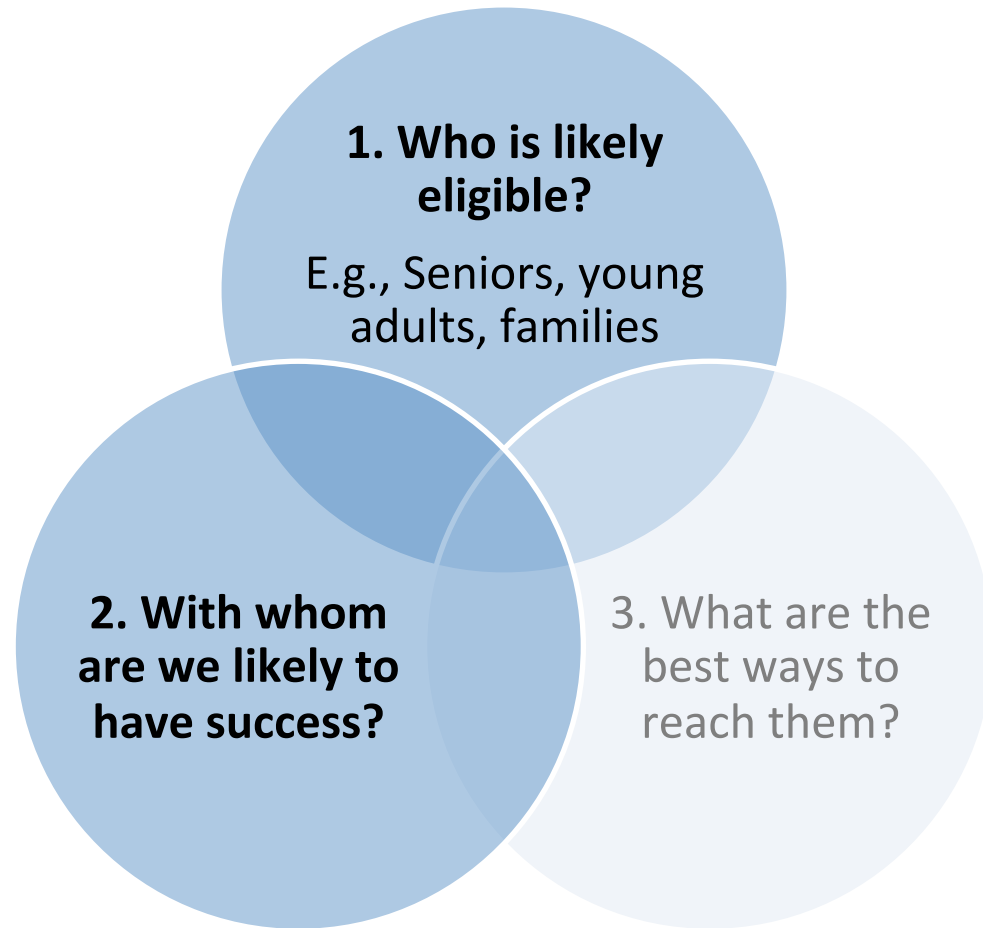
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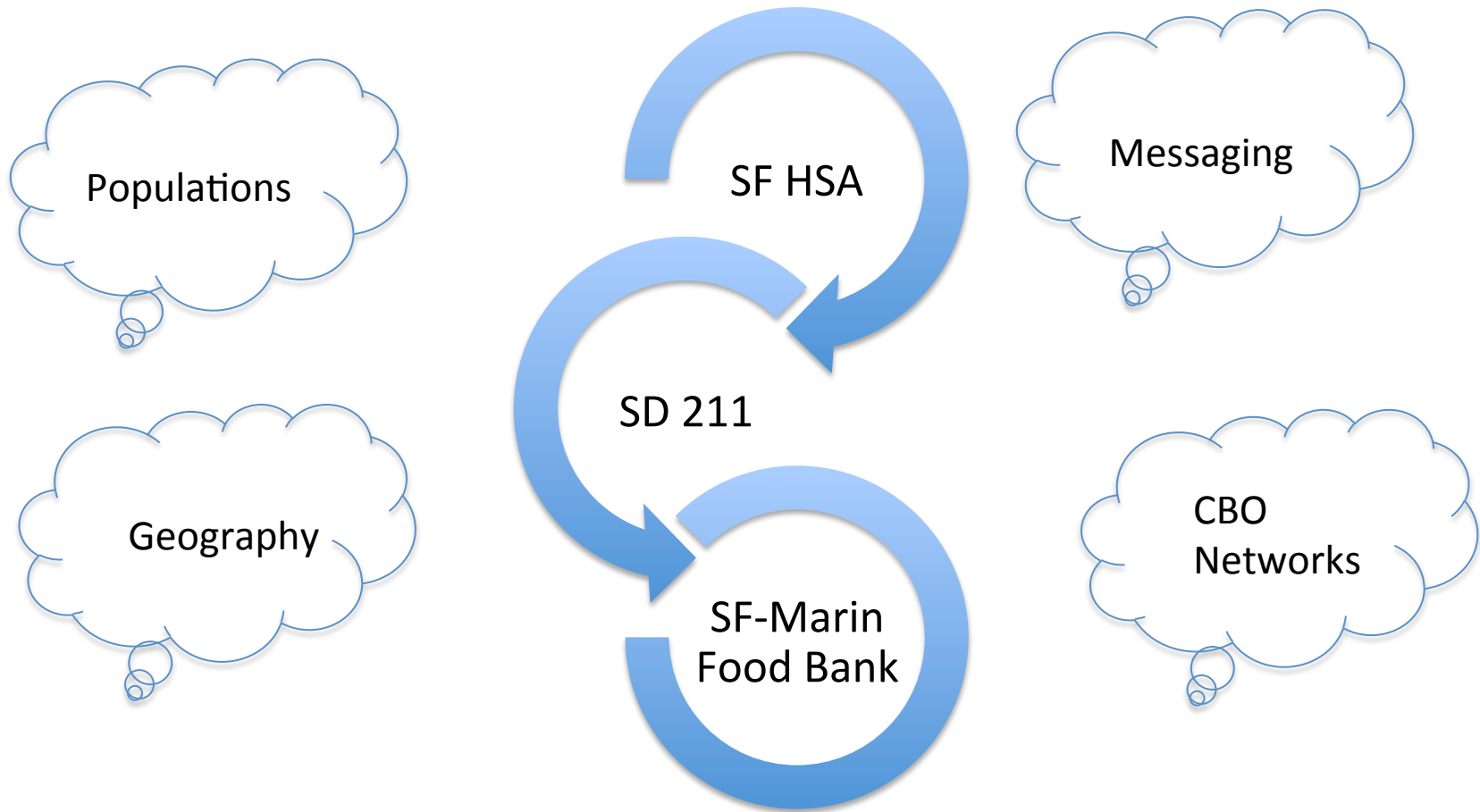
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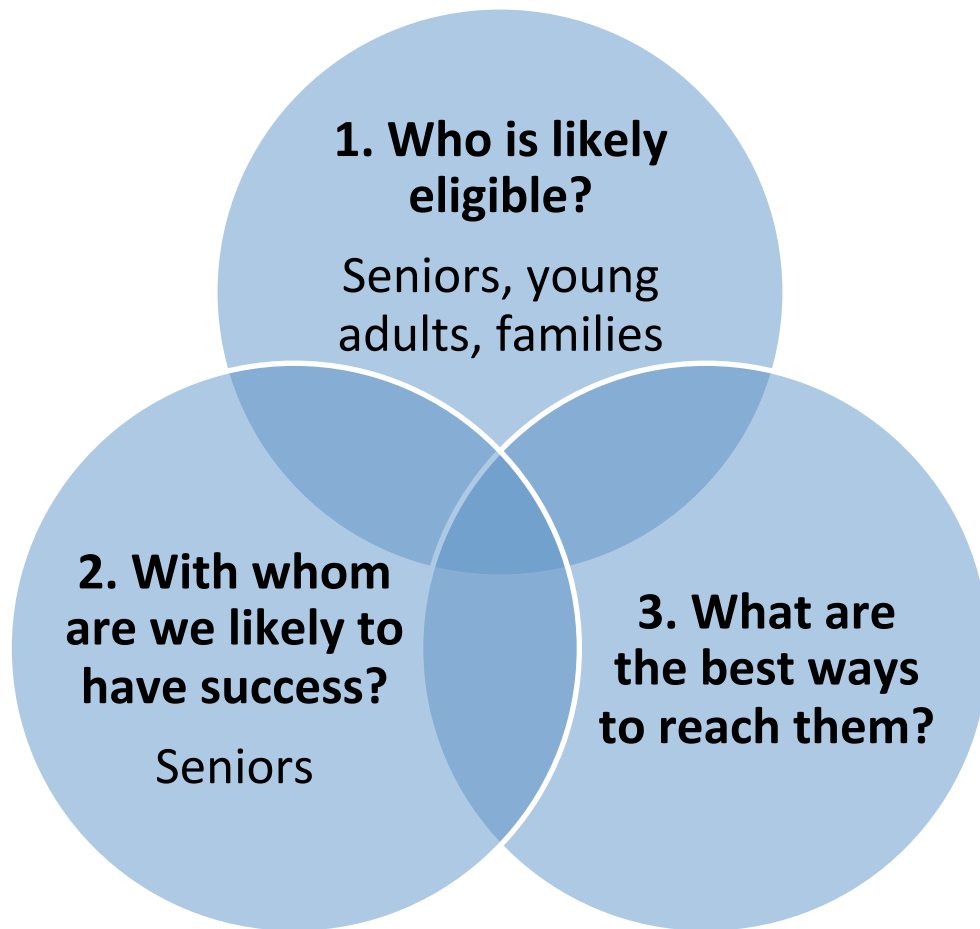
# Where are we likely to have success?



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# 3. How should we reach them?



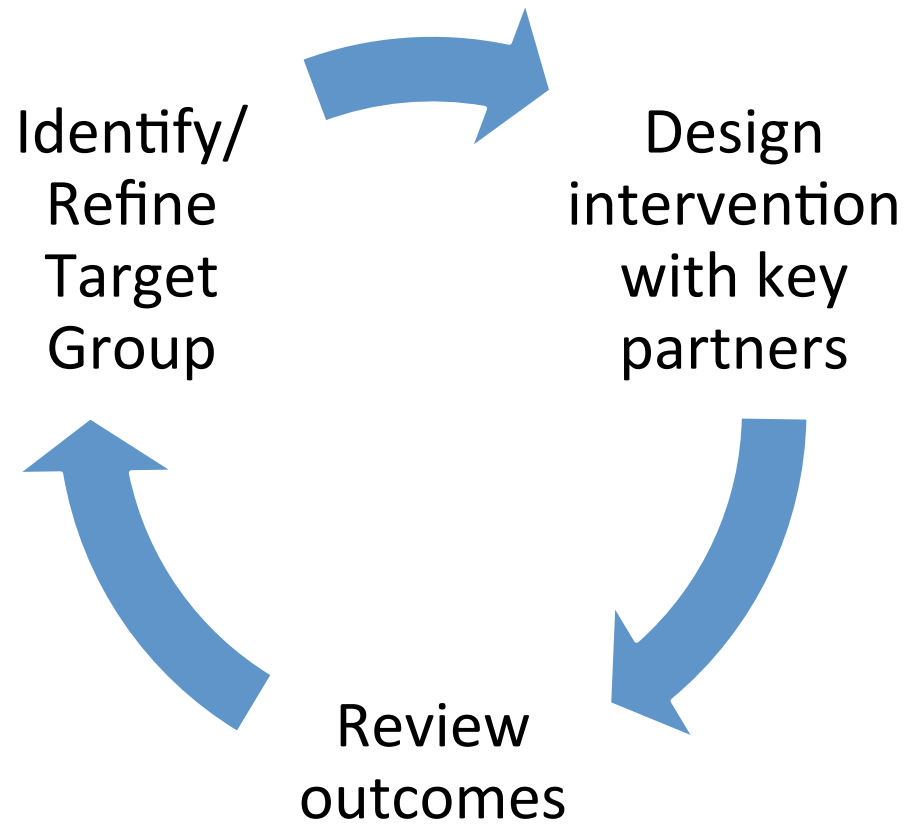
## Senior focus

- Targeted senior-only call list for SD211
- Refined materials and outbound call scripts
- CBO partnerships
- Possible outstations in underserved areas

## Young adults, families

- Text campaign, lower touch approaches
- Targeted messaging

# How to do this?



# Alameda – another example

- Pre-populated CalFresh applications with Medi-Cal renewal packets

Questions? Comments?

