LA’MESSAGE Pilot: Text Reminders in Louisiana

Partnership with Code for America
Discovery + Pilot: July 2018 - December 2019
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### Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Summary</td>
<td>3</td>
</tr>
<tr>
<td>LA’MESSAGE in Context</td>
<td>6</td>
</tr>
<tr>
<td>LA’MESSAGE Service Delivery and Results</td>
<td>12</td>
</tr>
<tr>
<td>Delivery-Driven Development</td>
<td>21</td>
</tr>
<tr>
<td>Recommendations for Tackling Churn in Louisiana</td>
<td>30</td>
</tr>
<tr>
<td>Implementation Manual : How to create a permanent text message service</td>
<td>44</td>
</tr>
</tbody>
</table>
Executive Summary

About Code for America
Code for America is a national nonprofit headquartered in San Francisco. Since 2011, Code for America has worked with hundreds of local and state governments to take a user-centered, iterative, and data-driven approach to improve the administration of government services for those who need them most. This work is fundamentally about helping people access the services they need. But it’s also about showing government, the provider of these services, that new ways of thinking and doing are worth investing in.

Our Integrated Benefit Initiative in Louisiana
- Louisiana was one of five states selected to partner with Code for America on a philanthropically-funded Integrated Benefits Initiative technology pilot.
- The discovery phase revealed an opportunity to employ text messaging to ease clients’ experience with maintaining benefits and avoiding costly churn.
- Over eight months in 2019, we offered “LAMESSAGE” text message reminders to more than 108,000 clients to help maintain Medicaid, SNAP, TANF, and WIC benefits. The text messages supplemented the existing paper client notices sent by each program.
- We worked with Louisiana’s Department of Children and Family Services (DCFS), Department of Health (LDH), Office of Technology Services (OTS), and the Governor’s Office throughout the pilot.

Recommendations to Reduce Churn
We unconditionally recommend DCFS, Medicaid, and WIC leverage text message reminders to support clients and caseworkers in navigating the benefits process. The LAMESSAGE pilot spanned clients with multiple case types across four benefits programs at every stage of applying for and maintaining benefits. In every type of touchpoint, text message reminders improved client outcomes—sometimes dramatically so. Reminders are particularly effective in reducing churn, a common challenge for both clients and caseworkers that persists in Louisiana.

- Text message reminders are an exceptional solution to challenges in Louisiana:
- Reminders improve outcomes, nearly doubling key metrics in some cases
- Reminders supplement communication gaps from undelivered paper mail, indecipherable notices, clunky online portals, and overburdened call centers
- Reminders create feedback loops with real data from real users that can serve as an early warning when the benefits program is not working correctly to serve clients
- Reminders reach clients of all backgrounds cheaply and efficiently, costing pennies to send while maintaining extremely high delivery rates compared to any alternative
Executive Summary

Broad recommendations from the lessons of LA’MESSAGE

1. Deploy a permanent text message reminder service
2. Make client feedback a routine part of developing and iterating notifications
3. Simplify and speed up the communications approval process
4. Adopt true agile development within agencies and with vendors
5. Explore creative opportunities to gather client text message opt-ins
6. Leverage existing client touchpoints to gather feedback
7. Put additional “stretch” opportunities on the roadmap
8. Improve how clients interact with call centers
9. Improve the SNAP interview experience for clients and caseworkers
10. Proactively educate clients on the process to maintain benefits

LA’MESSAGE Summary Results

The LA’MESSAGE pilot goal was to help clients understand and complete the application and renewal process efficiently so they can access benefits while reducing burden for caseworkers.

Code for America built a multi-program, one-way text messaging service that broadcasts reminders and guidance to clients at key touchpoints to facilitate successfully completing the application or renewal process.
Executive Summary

Results from the LA’MESSAGE Pilot

This document contains detailed reporting and analysis on case outcomes for each program type, as well as results from iterative experiments within the programs. Across all four programs, more than 108,000 clients were offered reminders, with almost 27,000 opting in to the program. According to the available data, LA’MESSAGE text message reminders improved the core churn metric, at times dramatically:

- 784 WIC clients improved their kept appointment rate by 79%
- 454 SNAP Simplified Reporting clients increased their case maintenance rate by 21%
- 487 SNAP Redetermination clients increased their case renewal rate by 37%
- 58 FITAP clients increased their case renewals rate by 13%
- 9,983 Medicaid renewal clients increased their annual case approval rate by 67%
- 6,207 Medicaid income check clients increased their verification response rate by 56%

Summary of Client Needs from User Research

Through our user research, we developed an understanding of what clients need in order to learn about safety net programs for which they may be eligible, to enroll in those programs, and to maintain their case status over time.

1. “I need multiple notices in multiple formats when I need to take action on my case.”
2. “I need to get answers to my questions quickly and easily from wherever I am.”
3. “I need consistency in my interactions with social safety net agencies.”
4. “I need to know what’s expected of me in the future when I first enroll in a program.”
5. “I need to be able to determine my case status easily.”
6. “I need one place to learn about all the programs for which I might be eligible.”

To read more about these client needs, insights developed through our research and the methods we used in our user research, please see our research report, “Exploring the Louisiana Benefits Experience: User Research Findings.”

Additional Supporting Pilot Documentation

In addition to this final report and supplementary manual on how to deploy a permanent text message report, several other resources are available to interested readers:

- *Exploring the Louisiana Benefits Experience: User Research Findings*
- Demonstration site for LA’MESSAGE: codeforamerica.org/features/louisiana-demo/
- Open source Github repository for the LA’MESSAGE technical tool
  - [https://github.com/codeforamerica/la_message](https://github.com/codeforamerica/la_message)
LA’MESSAGE in Context
LA’MESSAGE in Context

Our Integrated Benefit Initiative in Louisiana
The social safety net reaches deep into daily life in Louisiana. About half of Louisiana households use safety net services or are one paycheck away from needing them. More than 3 in 4 children in Louisiana receive Medicaid benefits. In response to regular natural disasters like hurricanes and flooding, the state supports hundreds of thousands of Louisianans with services like D-SNAP and housing assistance.

Despite the centrality of assistance in many people’s everyday lives, Louisiana disperses the administration of safety net services across multiple agencies, all of which are at varying stages of technology and service delivery modernization. The Louisiana Department of Health (LDH) launched a new Medicaid eligibility system in Fall 2018, and a new WIC eligibility system in Fall 2019. The Department of Children and Family Services (DCFS), which administers SNAP and FITAP, expects to launch a new eligibility system in early 2020. The Louisiana Housing Corporation (LHC) administers the LIHEAP program through local community action agencies, while the Office of Technology Services (OTS) spans technology contracting and development efforts across all state agencies.

The complexity of this operating environment creates wide variation in service delivery. Until very recently, WIC clients received paper vouchers to redeem for benefits at in-person appointments every three months. The sole designation of a follow-up appointment is a physical sticker. Every three months, Louisiana Medicaid automatically mails notices to clients flagged by a database as potentially over an income eligibility threshold. Clients have 10 days from the date of mailing to respond in order to maintain their coverage. SNAP clients frequently miss annual redetermination interviews, because they come from an unknown phone number at unexpected times.
LA’MESSAGE in Context

The common thread in these service delivery practices is the extraordinary difficulty eligible clients face in maintaining their benefits. *Churn* happens when clients’ benefits are revoked, but they rejoin the program soon after. It often occurs when clients simply do not know what they must do to maintain benefits, or when they do know, but struggle to complete the procedural tasks mandated of them. A 2014 FNS study* noted that the “vast majority of cases that churned exited SNAP at the time of recertification or a required interim report.”

Frequently, clients only realize that they have lost their benefit when they turn to use it—an EBT card is unexpectedly empty at the start of the month, or a provider informs them their health insurance is no longer valid. These moments are accompanied by deep anxiety and financial insecurity, and most critically, do not reflect a participant’s actual eligibility for a given program.

As one client said,

“*Every six months, I basically start over.*”

LA’MESSAGE in Context

Churn is costly to the state of Louisiana as well. It takes significantly more time for a caseworker to process a new application than it does to maintain a current one. Overburdened document processing centers sort the same documents submitted months earlier. Customer service call centers receive panicked or angry calls from clients who need support. A recent study estimated the administrative costs associated with churn to be $80 for each SNAP client alone. Assuming conservatively that 1 in 4 of the 900,000+ Louisiana SNAP clients churn annually, the associated administrative costs for churn in SNAP alone are $18 million.

Code for America conducted extensive qualitative user research with clients, caseworkers, and state leadership prior to developing a solution to test and scale. In conversation after conversation, we heard insights all closely related to the challenge of churn. Agency leadership and frontline staff believe clients should be proactive and take personal responsibility during the entire benefits process, but acknowledge that it can be hard to reach clients. Everyone—caseworkers and clients included—acknowledges that notices are frequently indecipherable. This results in clients not knowing what’s expected of them, and unable to complete required actions correctly and on time.

As one client put it:

“Everything down here is so complicated. They have good resources down here, but the process is difficult.”
LA’MESSAGE in Context

While documenting the common challenge of maintaining benefits, user research also confirmed a second, equally important insight: most clients rely on their mobile phone as their primary communication method. Clients who may otherwise rarely check their mail or email prioritize keeping their phone connected above all other concerns. Even when physical mail arrives to the right address, it does not connotate urgency. Phones are people’s lifelines, and yet are absent in most people’s experience with Louisiana’s benefits system.

Taking these two insights together, a Steering Committee comprised of senior leadership from LDH, DCFS, OTS, and the Governor’s Office elected to pilot LA’MESSAGE, a concept that would span multiple agencies and programs to support people in maintaining benefits with text message reminders. LA’MESSAGE could immediately start to address client needs and pain points without interfering or impacting the modernization efforts of the agencies, and start to unify the client experience with a consistent tool across agencies. The Steering Committee adopted the following as the pilot goal:

**Help clients understand and complete the application and renewal process efficiently so they can access benefits while reducing burden for caseworkers.**

Code for America and the various Louisiana agencies established underlying data and business agreements, and began reaching clients in the spring of 2019.
Process and Research Activities

At Code for America, we believe in a delivery-driven government that understands and meets user needs by using real-time user data to iterate before and during implementation.

User-centered design is at the heart of our process. In Louisiana, we conducted a six month discovery period by interviewing more than 60 clients and stakeholders in urban and rural field offices and clinics across the state. We heard from clients in a variety of circumstances: homelessness, bankruptcy, single parenthood, job loss, natural disasters, and addiction. These user insights informed the first prototypes we developed alongside clients.

Throughout the pilot, Code for America used a variety of tools to gather user feedback to guide decisions, including remote and in-person client interviews, customer satisfaction surveys, focus groups, caseworker and staff shadowing, and quantitative data. We estimate more than 100 hours of input from more than 30 clients and 50 program staff after the pilot inception, including through the final month of service delivery. For more details on our user research findings in Louisiana, please see the companion report, “Exploring the Louisiana Benefits Experience: User Research Findings.”
LA’MESSAGE Service Delivery and Outcomes

A confirmation that your online SNAP application was received.

A reminder the day before your SNAP phone interview.

A notice of whether your SNAP application was accepted or denied.

A notice that your EBT benefits for the month were loaded.
LA’MESSAGE Service Delivery and Outcomes

Clients received the first messages from LA’MESSAGE in April 2019. Over the following eight months, it rapidly scaled from dozens of clients per campaign to tens of thousands of clients. Code for America iterated on and adjusted the texting tool, message content, and message cadences along the way to support clients with timely, specific reminders intended to reduce churn.

LA’MESSAGE and WIC Clients

Mothers participating in the WIC program were the first clients to receive LA’MESSAGE reminders. Alongside partners in two New Orleans WIC clinics, Code for America developed tailored messages for each of five different appointment types (certification, recertification, nutrition education, food instrument issuance, and high-risk nutritional counseling). Messages indicated specific contextual information (like what to bring to the appointment) and individual appointment dates and times. LA’MESSAGE offered reminders in English, Spanish, and Vietnamese. Most clients received two reminders - one the week before and another the day before their appointments.

From April 2019 to August 2019, Code for America offered nearly 1,700 clients appointment reminders. 784 clients opted-in and received reminders, for the highest overall opt-in rate at 55%, of any group in the pilot. The chart below illustrates the funnel of clients from an initial list of phone numbers, filtered by deliverable phone numbers (cell phones in service), and then finally filtered by the number of clients who opted in.

[Chart showing the funnel of clients from initial list to number of clients who received reminders]

Sample WIC recertification campaign

Your WIC appointment is 11/21 at 9:30 AM. The office is located at 2222 Simon Bolivar Avenue, 2nd Floor. This appointment is to pick up your vouchers, and will take about 30 minutes. You don’t need to bring your child. Remember to complete your online nutrition class at wichealth.org. Otherwise you'll need to attend a class during your appointment.

This is a reminder that your WIC appointment is tomorrow at 9:30 AM. You'll be picking up vouchers. Bring your ID with you. If you need to reschedule, call 504-658-2760.
LA’MESSAGE Service Delivery and Outcomes

WIC Client Outcomes

WIC clients experienced some of the most dramatic improvements of any program in the LA’MESSAGE pilot:

- LA’MESSAGE created a nearly 80% increase in kept appointments, with 52% of clients successfully renewing over the baseline of 29%
- LA’MESSAGE created a nearly 60% decrease in missed appointments, with 31% of clients missing appointments over the baseline of 53%
- There was no significant difference between LA’MESSAGE clients in terms of rescheduling appointments (17% of clients rescheduled over the baseline of 18%)

Note: For the charts in this report, “n” represents the total number of opted-in clients who received text message reminders. The results compare clients who opted-in vs. a baseline of clients who did not opt-in (either refused or did not reply). The pilot was not conducted as a randomized controlled trial.
LA’MESSAGE Service Delivery and Outcomes

LA’MESSAGE and SNAP/FITAP Clients

LA’MESSAGE supported DCFS clients statewide in three distinct case scenarios:
- SNAP clients completing six-month Simplified Reporting (SRs)
- SNAP clients completing annual Redeterminations (“redets”)
- FITAP clients completing annual Redeterminations (“redets”)

From May 2019 to November 2019, Code for America worked with dedicated DCFS staff to offer text message reminders to more than 3,000 clients (predominantly from the SNAP program, since FITAP serves a relatively small number of clients directly). The opt-in rate across all three groups was relatively similar: 34% for SNAP SRs, 36% for SNAP Redeterminations, and 44% for FITAP Redeterminations.

<table>
<thead>
<tr>
<th></th>
<th>SNAP SRs</th>
<th>SNAP Redets</th>
<th>TANF Redets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total phone numbers</td>
<td>1,525</td>
<td>1,529</td>
<td>150</td>
</tr>
<tr>
<td>SMS deliverable</td>
<td>87%</td>
<td>88%</td>
<td>88%</td>
</tr>
<tr>
<td>Offered text messages</td>
<td>1,327</td>
<td>1,346</td>
<td>132</td>
</tr>
<tr>
<td>Opted in</td>
<td>34%</td>
<td>36%</td>
<td>44%</td>
</tr>
<tr>
<td>Received reminders</td>
<td>454</td>
<td>487</td>
<td>58</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1 week before interview</th>
<th>Day of interview</th>
<th>10 days before verification deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st reminder</td>
<td>2nd reminder</td>
<td>3rd reminder</td>
</tr>
<tr>
<td>DCFS: Your SNAP phone interview is 11/21 at 9:30 AM. The call may come from an unlisted or out of state number, so please be sure to answer all calls. If you need to reschedule, call 1-888-524-3578. Select your language, then dial 3-1-2-4.</td>
<td>DCFS: Your SNAP phone interview is today at 9:30 AM. The call may come from an unlisted or out of state number, so please be sure to answer all calls. If you need to reschedule, call 1-888-524-3578. Select your language, then dial 3-1-2-4.</td>
<td>DCFS: You have verification due. Your SNAP case may not be processed without this verification. You can mail documents to: PO Box 250903, Baton Rouge LA 70826, drop them off at any SNAP office, submit them online at cfsa- cp.dfts.la.gov/selfservice, or fax them to 225-674-3164. Please remember to label each document you send with your full name and the last 4 digits of your Social Security Number.</td>
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Sample SNAP redetermination campaign
LA’MESSAGE Service Delivery and Outcomes

In addition to the standard reminders, a small group of SNAP Redetermination clients (about 25) received personalized reminders for their phone interviews. While we intended to test the impact of personalized, specific reminders (similar to the LA’MESSAGE reminders for WIC), the manual nature of appointment scheduling and pulling the relevant data from the legacy system ultimately limited the possibility of scaling up interview reminders.

SNAP/FITAP Client Outcomes

LA’MESSAGE SNAP and FITAP clients showed statistically significant improvements in every category, with the largest gains occurring for clients in the annual SNAP Redetermination group.

- LA’MESSAGE created a 21% increase in renewals for SNAP SR clients, with 81% of clients successfully renewing over the baseline of 67%
- LA’MESSAGE created a 37% increase in renewals for SNAP Redetermination clients, with 70% of clients successfully renewing over the baseline of 51%
- LA’MESSAGE created a 13% increase in renewals for FITAP Redetermination clients, with 71% of clients successfully renewing over the baseline of 63%

Assuming that all 900,000 SNAP clients must complete an SR within one year and a churn rate of 25%, LA’MESSAGE could eliminate more than 31,500 churn cases annually. Using the FNS estimate of $80 per case in an administrative costs, text message reminders could reduce state costs associated with SNAP churn by more than $2.5 million, plus hundreds of thousands of hours of saved client time.
LA’MESSAGE Service Delivery and Outcomes

LA’MESSAGE and Medicaid Clients

LA’MESSAGE supported Medicaid clients statewide in three distinct case scenarios:

- **Verification**: New Medicaid applicants with outstanding verification documents
- **Renewal**: Current Medicaid clients up for their annual renewal
- **Income Check**: Current Medicaid applicants flagged for income eligibility checks

From May 2019 to December 2019, Code for America offered more than 100,000 Medicaid clients LA’MESSAGE reminders. More than 25,000 Medicaid clients opted-in and received reminders. The opt-in rate varied across the three groups however: 43% for new applicants with verifications, 22% for renewal clients, and 26% for income eligibility check clients.

Medicaid Client Outcomes

LA’MESSAGE Medicaid clients showed statistically significant improvements in all measured outcomes over the baseline, although there was some variation in the increases by outcome type.

![Graph showing the outcomes for Verification, Renewal, and Income Check]

- **Verification**:
  - Total phone numbers: 5,442
  - SMS deliverable: 4,580
  - Offered text messages: 1,968

- **Renewal**:
  - Total phone numbers: 98,764
  - SMS deliverable: 76,270
  - Offered text messages: 16,961

- **Income Check**:
  - Total phone numbers: 26,269
  - SMS deliverable: 23,647
  - Offered text messages: 6,216

**Opted in** and **Received reminders** statistics are not provided in the graph but are part of the outcomes.
LA’MESSAGE Service Delivery and Outcomes

LA’MESSAGE created a 13% increase in returned application documents from verification clients, with 71% of clients successfully renewing over the baseline of 63%

Renewal clients saw a range of improvements at the time of measurement:

- LA’MESSAGE created a 67% increase in case approvals for renewal clients, with 25% of clients successfully renewing over the baseline of 15%
- LA’MESSAGE created a 60% decrease in case closures for renewal clients, with 6% of clients experiencing a closed case over the baseline of 10%
- LA’MESSAGE created a 58% increase in “pending status” for renewal clients, with 19% of clients experiencing pending review over the baseline of 12%
  - Note: While cases in this category could ultimately experience positive or negative outcomes, review pending indicates that a client likely responded to the agency in some way about their case, which we take as a leading indicator of success.
- LA’MESSAGE created a 56% decrease in clients who did not return renewal packets, with 63% of clients returning renewal packets over the baseline of 35%
**LA’MESSAGE Service Delivery and Outcomes**

*Income Check clients* saw some of the most dramatic improvements overall. LA’MESSAGE created a 56% increase in responses for the required income verification document, with 25% of clients returning the document over the baseline of 16%.

The data point to a few early lessons about Medicaid. First, the biggest improvements are related to outcomes that clients control themselves (like submitting a document). This is true even when clients have relatively short time frames to respond (10 days or less in some cases). These outcomes suggest that clients will try to complete case-related actions if given sufficient notice and guidance on what Medicaid requires.

Second, the baseline outcomes vary dramatically across the groups, but in a way that reflects how recently the client likely communicated with Medicaid about their case. Verifications clients have a relatively high baseline for returning documents (63%). At the other end of the spectrum, income check clients are identified by a database and receive a notification they are likely not expecting, and their baseline reflects this (16%). More regular communication to establish shared expectations of case management (including before the 10-day period to return a document) could improve the baseline.
LA’MESSAGE Service Delivery and Outcomes

After application submission
Primary reminder

To complete your Medicaid application, please submit the following documents soon if you haven’t yet: Proof of Citizenship + Bank Statement. You can drop them off at the Medicaid office, or submit them online at espweb.lamedicaid.la.gov/selfservice/. You can also email them (along with your case number) to mymedicaid.la.gov.

Sample Medicaid verification campaign

4 weeks before deadline
1st reminder
Your household’s Medicaid coverage is expiring. To keep getting Medicaid, you must complete your renewal by 11/21. You can renew online at espweb.lamedicaid.la.gov/selfservice/. You can also renew over the phone on weekdays 8am-5pm at 1-888-342-6207.

2 weeks before deadline
2nd reminder
You need to complete your Medicaid renewal by 11/21. You can renew online at espweb.lamedicaid.la.gov/selfservice/. You can also renew over the phone on weekdays 8am-5pm at 1-888-342-6207.

1 week before deadline
3rd reminder
Your Medicaid renewal is due next week, on 11/21. You can renew online at espweb.lamedicaid.la.gov/selfservice/. You can also renew over the phone on weekdays 8am-5pm at 1-888-342-6207.

Sample Medicaid renewal campaign

Before deadline
1st reminder
You are at risk of losing your health coverage. We have mailed you a letter asking for information we need to determine if you’re eligible to keep your coverage. You must reply by the deadline on that letter. If you did not receive the letter or have questions, you can call us at 1-888-342-6207, weekdays 7 a.m. to 6 p.m.

After deadline, during grace period
2nd reminder
Your Medicaid coverage has ended because you didn’t provide information needed for your case. You may be able to get your coverage back if you provide this information by September 30. You can upload the information to https:// espweb.lamedicaid.la.gov/selfservice/. You can email it to MyMedicaid@la.gov or fax it to 1-677-623-2987. You can mail it to the address on the letter. If you have any questions, call us at 1-888-342-6207, weekdays 7 a.m. to 6 p.m.

Sample Medicaid income check campaign
Delivery-Driven Development
LA’Message Learning

Throughout the pilot, LA’MESSAGE benefited from a cycle of continuous learning and improvement.

1. Responding to User Feedback
2. Scaling the LA’MESSAGE Technical Infrastructure
3. Iterating on Messages to Improve Results
4. Conducting Stakeholder Workshops
Responding to User Feedback

Feedback Before the Pilot:
Before sending the first LA’MESSAGE reminder, Code for America wrote and refined the messages with the people who would receive them: clients.

Louisiana benefits clients evaluated draft reminders for each program, sorting them into categories like “helpful,” “not helpful” and “don’t understand.” Clients also prioritized the types of messages they would find most and least valuable. Clients consistently rated notices related to using the benefits much lower than securing and maintaining their benefits. For example, high priority messages included those related to due dates, interview times, missing documents, and application decisions. The least valuable messages, according to clients, related to EBT card balances or issuances and picking a provider or healthcare plan.

![A client sorts draft SNAP messages by usefulness](image)

After focusing on the individual messages deemed most valuable by clients, Code for America leveraged remote user testing tools to observe Louisiana clients responding to entire draft text message campaigns. This feedback helped us refine the cadence and clarity of the first reminder campaigns.

Feedback During the Pilot:
Direct user feedback informed adjustments during the LA’MESSAGE campaign as well. For example, when clients receive a multi-page, formal notice through the mail, they don’t typically respond immediately with a handwritten letter and expect a personal correspondence to begin. The medium of text messaging carries different client expectations though. LA’MESSAGE recipients quickly started to reply to reminders with specific questions about their case.
Responding to User Feedback

We envisioned and launched LA’MESSAGE deliberately as a one-way reminder service, so Code for America did not intend or was not authorized to respond to individual case questions. However, we adapted to meet client expectations by developing (and securing approval) for an auto-responder message that redirected clients who replied to texts with the appropriate call center number for case questions.

Clients interacted with LA’MESSAGE in another unexpected way: by calling the phone number associated with the reminders. To support clients who expected support over the phone, we recorded an automatic voice message that explained the service and redirected clients to existing agency resources (like the website and call center) for support. This message was specific to each agency.

Feedback After the Pilot:

During the last phase of service delivery, Code for America shared an optional client satisfaction survey to approximately 1,100 recent Medicaid clients through two methods. The first was Twilio Studio, which allowed clients to complete the survey via text message, while the second was a Google Form sent as a link to clients. Even though the Twilio Studio link came from an entirely new phone number (not the LA’MESSAGE number), nearly twice as many clients opted in to the Twilio survey (39 clients or 7.32%) versus the Google link (20 clients or 3.50%). This suggests that directly gathering client feedback through text messages is a highly effective channel worth investing in for a permanent text message solution.

Survey Question and Results:

- How much do you trust the content in Medicaid text messages? (3.7/5)
- How useful were the text messages for you? (4.2/5)
- How confident are you that you did the right thing in response to the text messages? (4/5)

We also asked one open-ended question: What else do you want Louisiana Medicaid to know about the text messages you received? Thirty-six clients replied to this prompt, with almost half (15 total) replying “Nothing.” The two other general themes from open-ended responses were that texts are great and/or better than mail (“I love the reminders about renewing my application and Medicaid updates”) and that requests for better or more up to date information (“Keep me posted on my coverage”). We see the first category as validating text messages as a medium of outreach, while the second speaks to the importance of integrating text messages with a client’s case record in a timely, accurate way. Clients want personalized information that gives them clear next steps. Finally, a few clients expressed concern about the legitimacy of the messages (“Please give assurance so we may know the messages are not a scam”).

December 2019 | Integrated Benefits Initiative

Louisiana: End of Pilot Report
Scaling LA’MESSAGE Technical Infrastructure

During the LA’MESSAGE inception meeting in January 2019, we envisioned three distinct pilot phases serving 20, 100-500, and 1,000+ clients respectively. By September 2019, LA’MESSAGE had been offered to over 100 times as many clients—more than 108,000 in total, largely driven by opportunities to support Medicaid. This scale was possible in part due to the new Medicaid eligibility system, which allowed bulk client list sharing and outcomes analysis (compared to the legacy DCFS system that requires staff intensive data extraction). While the service appeared the same from the client perspective, Code for America rapidly evaluated, deployed, and scaled different tools to meet the unexpected volume.

**Phase 1: April - June 2019**

LA’MESSAGE launched with a commercial off-the-shelf (COTS) tool called SimpleTexting. This allowed us to quickly serve hundreds of clients across WIC, SNAP, FITAP, and Medicaid with an efficient, cost-effective tool accessible to non-technical audiences. We manually processed opt-ins and small batches of campaigns for clients with like case situations.

The first jump in scale occurred when we began to support Medicaid in the quarter two (Q2) income check campaign, resulting in bulk client lists in the thousands. While SimpleTexting could support that volume, our manual opt-in procedures could not. We quickly adapted by writing custom code to automate opt-ins, allowing us to reach the Q2 income check clients effectively.

**Phase 2: July 2019 - November 2019**

Demonstrating the value of reminders during the Q2 income check campaign created more demand for text message reminders, and LDH started sharing Medicaid renewal client lists in the tens of thousands. To manage this new volume, we deployed two new tools.

First, we transitioned WIC, SNAP, and FITAP LA’MESSAGE campaigns to TextIt.In, a new COTS tool that offered a better user interface and customer service at a lower price. This tool was sufficient for monthly batches of hundreds of clients and handled opt-ins and campaign sends, though the data to power interview reminders required manual effort by both DCFS and Code for America staff. TextIt.In also offered tools to manage more complex workflows, including the ability to automate a campaign of text messages (i.e. three reminder messages sent over a three-week period).

Next, Code for America developed a custom Ruby on Rails application to handle monthly batches of tens of thousands of Medicaid clients. The tool used the Twilio API to send messages and was hosted on Amazon Web Services (AWS). This application was maintained and managed by a Code for America software engineer. The code is open source and available at https://github.com/codeforamerica/la_message.
Scaling LA’MESSAGE Technical Infrastructure

Sample Campaign Flow from TextIt.In

DCFS is testing out a text message reminder program. Would you like to receive reminders, notices, and confirmations? They will be in addition to any letters and calls you already receive. Please reply with YES or NO. You can opt out of messages at any time.

You have opted in to text messages about your case. You can opt out of this service at any time by replying with STOP.

You have been opted out. You will not receive any more text messages from DCFS.
Iterating on Messages to Improve Results

Code for America works in an iterative fashion to continuously improve. After receiving the initial data on outcomes, we identified several key areas to test new variations on the original campaigns. We designed experiments to test the impact of changing one variable in the message, and worked with WIC and Medicaid partners to secure approval.

Experiment 1: Number of Messages (WIC)

- **Experiment:** Clients receive either one or three reminders instead of the baseline two reminders
- **Result:** No significant differences in kept appointment rates (ranging from 52-54%)
- **Takeaway:** Even just one timely, specific appointment reminder can dramatically improve a client’s ability to keep their appointment or interview

Experiment 2: Opt-In Language (Medicaid)

- **Experiment:** Clients receive one of three variations on the original opt-in language, testing simpler language, framing around importance, or a shorter message
- **Result:** No significant improvement on baseline opt-in message, except the shorter message variant showed a statistically significant 12.5% (24% baseline to 21% experiment) decrease in opt-in rate
- **Takeaway:** The original message framing was sufficient, and shorter messages show lower opt-in rates, potentially because clients don’t trust the message legitimacy. Even a test with a “negative result” is beneficial to improving program outcomes as a test sent to a limited number of clients provides stronger validation than meetings or conversations debating the merits of specific language.

Experiment 3: Renewal Language (Medicaid)

- **Experiment:** Clients receive one of two variations on the original renewal language, testing more professional and friendly reminder framing.
- **Result:** 37.6% of clients who received the friendly framing failed to submit their renewal packets vs. only 33.8% of clients who received the professional framing. This is a statistically significant 3.9 percentage point increase in favor of the professional framing.
- **Takeaway:** A professional framing can encourage clients to submit renewal documents at a higher rate than a more friendly reminder tone.
Iterating on Messages to Improve Results

While no single experiment showed dramatic changes from the baseline, collectively they proved something even more important: Louisiana agencies can adopt an agile, iterative mindset to find what works best for clients. Louisiana should carry forward this process of testing new alternatives in a systematic way and incorporate these learnings into its service delivery. It is unlikely that any committee’s initial attempt at developing message language for clients is perfect on the first attempt, no matter how many perspectives are incorporated at the beginning. Experiments allow real data from real users to guide decisions continuously.

Testing small changes in message language can help identify the best way to serve clients with low risk and low effort. Running the experiments took a few hours to set-up and later analyze the results. Each experiment reached only a fraction of the state’s Medicaid clients, minimizing the risk if messages accidentally included incorrect information. But the results give credible support to add value for the entire client population (and caseworkers as well). For instance, adopting the professional tone message from experiment three could result in approximately 60,000 additional client responses to renewal requests if scaled up (4 percentage point improvement times 1.5 million Louisianans who use Medicaid), at virtually no cost after the initial experiment runs. This enormous opportunity was identified by a few hours of work for the small team to set up and run the experiment.
Conducting Stakeholder Workshops

The premium on user feedback and iterative development extends from frontline users to senior decision-makers and implementers. Throughout the fall, Code for America conducted several workshops with agency leadership to use learnings from the pilot to envision a permanent text message service in Louisiana.

Workshop sessions included:

- Outcomes and Capabilities Brainstorm
- 3 C’s Exercise: Characters, Components, and Challenges
- Atomize Exercise to map components of technical system (Deloitte leads joined this session)
- Success Metrics and Prioritization Exercise
- Conducting User Research

The workshops showed that Medicaid leaders are well-aligned on outcomes for a text message service, with reduced churn, reduced procedural denials, less field workload, and better communication for clients and workers as the top-ranked outcomes desired of a service. The broader lesson from the workshop was to develop alignment on what the overall goals were, which in turn informed the direction and conclusions of the LA’MESSAGE pilot. Agencies can use the facilitation principles from agile workshops to continually align on agency priorities.

"The workshop was super helpful. We hadn’t had a chance to come together and drill down on where we wanted to go. After that meeting there was a lot of agreement on direction and outcomes.”

– Participant
Recommendations for tackling churn in Louisiana
Recommendations to tackle churn in Louisiana

1. Deploy a permanent text message reminder service
2. Make client feedback a routine part of developing and iterating notifications
3. Simplify and speed up the communications approval process
4. Adopt true agile development within agencies and with vendors
5. Explore creative opportunities to gather client text message opt-ins
6. Leverage existing client touchpoints to gather feedback
7. Put additional “stretch” opportunities on the roadmap
8. Improve how clients interact with call centers
9. Improve the SNAP interview experience for clients and caseworkers
10. Proactively educate clients on the process to maintain benefits
Deploy permanent text message reminder service in Louisiana

Explanation

We unconditionally recommend DCFS, Medicaid, and WIC leverage text message reminders to support clients and caseworkers in navigating the benefits process. The LA'MESSAGE pilot demonstrated the value of text message reminders across multiple case types and multiple benefits programs, improving service delivery in every instance of their use. Text message reminders are an exceptional solution to challenges in Louisiana:

- Reminders improve outcomes, nearly doubling key metrics in some cases.
- Reminders supplement communication gaps from undelivered paper mail, indecipherable notices, clunky online portals, and overburdened call centers.
- Reminders create feedback loops with real data from real users that can serve as an early warning when the benefits program is not working correctly to serve clients.
- Reminders reach clients of all backgrounds cheaply and efficiently, each costing less than a penny to send while maintaining extremely high delivery rates compared to alternatives.

The two most important qualities in a text messaging service are trustworthiness and timeliness.

Replicating the same paper notice communications and processes in text message form would cause confusion and a worse experience for clients than nothing at all. We consider the following to be “table stakes” (minimum requirements) to deploying a permanent text message service:

- Text messages clearly identify the sender and conditions of opting in like security compliance, opt-out procedures, and data usage.
- Text messages integrate with existing case management systems. Any text correspondence should be included in a client’s case record and accessible in real-time to caseworkers and other staff. Integration allows client-specific information like interview times and case status to be included in text messages.
- All text messages are vetted to contain accurate, up-to-date details and tested to ensure deliverability and readability across phone types and carriers.
- The system must be able to send tens of thousands of text messages promptly with high deliverability rates.
- The system must be able to send automated messages (rather than requiring human intervention) based on triggering events in the client’s case.

We share further details on how to deploy a permanent text message service in the implementation manual at the end of this report.
Make client feedback a routine part of developing and iterating notifications

Explanation

While the technology behind LA’MESSAGE represented something new in Louisiana, the success of the LA’MESSAGE pilot is owed to delivering on what clients need. At every decision point, LA’MESSAGE leveraged rich, layered client feedback to deliver an effective service. Engaging with clients early and often helped us dispel assumptions and clarify the root causes of churn so that the messages could be as effective as possible.

Louisiana should invest in gathering feedback for all client interactions, including but not limited to those associated with a permanent text message service. Techniques should, at minimum, include:

- Conduct research with clients directly before ever writing a new message or testing a new way of delivering a message. Gather client feedback in the form of one-on-one or small group interviews in a neutral location, like a library, and reimburse clients for their time.
- Use experimental methods to test iterations on existing message features, like language, timing, and cadence. A/B tests, where two versions of a message are compared to each other, are an effective, efficient way to get rigorous evidence of what changes will be successful in a low risk way.
- Implement simple, lightweight ongoing customer satisfaction surveys to track a rolling benchmark of client success and create channels for qualitative feedback.
- Return to one-on-one or small group interviews with clients who have interacted with new services successfully or unsuccessfully, or decided against using them at all. The goal should be to gather deep qualitative feedback on what works and why, repeatedly. In-depth qualitative interviewing can complement and guide broader quantitative feedback.
- Ensure decision-makers personally receive client feedback. Committee members and project teams should personally join user feedback sessions to experience perceptions of service delivery firsthand. No dashboard will replace direct client feedback.
- Hire professional researchers, either as contractors or in-house. User research is a growing, sophisticated practice in digital service delivery, and state leaders should have access to dedicated, talented staff to develop and implement research plans. We worked with talented firms at home in Baton Rouge and New Orleans during our project—Louisiana has the resources it needs in its own backyard.
3

Simplify and speed up the communications approvals process

Explanation

The approval process for approving new or updated message and notice language was the most consistent internal roadblock faced during the LA’MESSAGE pilot. While Louisiana agencies are embracing agile development and a client-centric focus in the new eligibility systems, the message approval process has not matched these modernization efforts.

Approvals for slight changes on existing messages frequently took three to four weeks from submission to final approval. The approved messages often departed significantly from the proposals. In some cases, the messages approved at multiple levels by agency committees contained inaccurate information (that was later corrected). While some of this delay and error can be attributed to working with an external partner on a new mode of communication, there are significant opportunities to streamline and accelerate approvals in a way that would benefit all agency communications. Given that most issues facing clients require responses ranging from 10 days to one month, the approvals process almost guarantees that a given client will not see improvements to their experience before the window closes.

In our experience with Medicaid, a typical LA’MESSAGE reminder required writing, editing, and markup in the Notices & Review Committee, then consideration for approval by the Bureau of Media and Communications, then approval by an OTS Committee (with no Medicaid membership), then approval by the Medicaid Executive Office. We estimate at least 30 people over four distinct hand-offs required review of low-risk, low-impact changes (like changing the length of the basic opt-in message by five words).
Simplify and speed up the communications approvals process

A best case scenario Medicaid text message approvals process would work as follows:

1. **Start with clients.** A dedicated representative or small team (one to three staff members) drafts and tests all correspondence with clients for value and comprehension before presenting for approval. Give those closest to clients the power to lift up and prioritize what would create value for them in Medicaid communications.

2. **Get to consensus quickly and regularly.** The small client-oriented team prioritizes findings and presents specific messages for approval to a small committee (“The Agile Message Development Committee”). This committee would include designees for the eligibility system, communications, analytics, policy, legal, caseworker, OTS, and leadership perspectives, limiting total membership to six to eight total individuals. The committee should meet regularly (every two weeks) to evaluate messages, with a clear facilitator to manage the process and a fixed process to arrive at a specific decision.

3. **Escalate only critical questions to agency leadership.** Throughout the pilot, Medicaid committees struggled to articulate which categories of approvals required executive office input versus those that could be delegated to the various committees. The agency should define specific criteria for delegated decision-making, which at minimum should allow the Approval Committee to iterate on message language, cadence, and timing without the executive office being a blocker.

4. **Limit OTS veto points to technical capabilities.** As currently structured, Medicaid has no input on a veto point for its own communications. OTS has an important role to play in advising on the technical capabilities and overarching system security, but it should not have blanket “black box” authority to deny Medicaid communications. We recommend including OTS in the Approvals Committee alongside other functional perspectives, rather than maintaining a separate approvals track that both delays decision-making and limits Medicaid input.

5. **Embrace agility.** Adopt the stance that messages are a work in progress and will always be subject to modification when user data and feedback comes in.

The goal should be to propose, evaluate, and launch new variations in service delivery within two weeks.
Adopt true agile development within agencies and with vendors

State agencies are making steady progress towards more agile software development practices. But the pace of change can be quicker. Adopting stronger, more modern agile practices sooner will accelerate state agencies’ collective efforts at reducing churn with technology-based solutions. These practices include:

1. **Collect user feedback constantly, welcome changing requirements, and reprioritize tasks at the beginning of every sprint.** Set up demo environments so that both workers and clients can give immediate feedback on in-development features. Based on that user feedback and any incoming policy changes, alter the priority of the backlog to focus on the most impactful improvements.

2. **Set up a continuous integration/continuous deployment (CI/CD) pipeline to deliver software frequently and securely.** Currently, the vendor development team is not allowed to deploy new code to production. Remove this requirement while maintaining security controls through the setup of a continuous integration system that supports modern security practices by running static and dynamic code analyses and other security checks as well as automated functional tests. Continuous integration should lead to continuous deployment, where successful running of the test suite can lead to an automatic or one-click deploy.

3. **Empower the development team to self-organize and improve.** Encourage policy and program managers to work closely with the development team on a day-to-day basis, providing honest, constant feedback. Promote the practice of continuous learning through retrospectives attended by all stakeholders and team members.

With stronger agile practices, software will be released more frequently, at a higher quality, and will be more likely to address true user needs.
Explore creative opportunities to gather client text message opt-ins

There is significant opportunity and desire to grow the base of opted-in clients. When Code for America supported Q2 wage check clients, only a few hundred had already opted in to e-notifications (out of approximately 10,000 clients in the sample). In other words, faced with taking a new policy and operations procedure live, Medicaid could only immediately reach less than one half of one percent of impacted clients.

Louisiana agencies should adopt a modern “user acquisition” mindset to continuously enroll clients in the text messaging program, while still adhering to best practices for consent and opt-out. Opportunities to offer opt-ins for text messaging to clients include:

- Center prominent nudges throughout electronic and paper touchpoints for benefits, including during the application and renewal moments. This could include friendly, encouraging call-to-action web pages and an opt-in script as part of caseworker and call center touchpoints.
- Add an opt-in option on the front page of all agency website homepages (similar to a “subscribe” button that many commercial websites use). Clients should be able to submit their cell phone number and link to their case without requiring a registration or login procedure.
- Develop low-tech campaigns to help clients opt-in, such as postcards or flyers included with or in addition to existing agency mail campaigns.
- Use existing community partnerships to promote opt-ins, including with food banks, healthcare navigators, medical providers, libraries, and other CBOs.
- Launch up an interactive voice response (IVR a.k.a robocall) campaign that asks the clients to opt in.

As part of the LA’MESSAGE pilot, Code for America shared back lists of opted-in clients from across all four programs (approximately 25,000) clients, but this is still a small fraction of Louisianans who could benefit from the improved outcomes associated with text message reminders.
Leverage existing client touchpoints to gather feedback

Louisiana’s existing infrastructure and processes offer important system performance and client experience data to leverage. While these sources are distinct from the agile, human-centered processes we emphasized in LA’MESSAGE, they offer a complementary lens to gather input and evaluate service delivery.

- Leverage summary and individual data from call centers. DCFS’s new ability to disaggregate by zip code creates an opportunity to pilot interventions in a specific geographic area, gather data, and deepen insights with location-based qualitative research.
- Share a “Voice of the Client” call center conversation each week to executive staff and product delivery teams. This could be a representative issue or new pain point selected by call center managers to elevate direct client voices to decision-makers.
- Consider creative ways to engage with the new EBT vendor platform to gather client feedback—for instance, regularly review app store ratings and comments, or share data from feedback forms that accompany the EBT portal/interface.
Put additional “stretch” opportunities on the roadmap

Client expectations for any service increase every year. Prioritizing and executing on all of the above strategies would create an experience for 2019, but client expectations will only grow. To continue delivering excellent services, Louisiana should prepare for and explore additional opportunities to deliver client value, including:

**Full two-way text messaging**
An immediate, unexpected learning from LA’MESSAGE was that clients want and expect guidance specific to their situation from text messaging, just as they would from a phone call or in-person support. Louisiana should experiment with allowing caseworkers and call center staff to interact with clients directly over text messaging, just as they do on phone calls. In a small Code for America pilot run with the state of Michigan, trained caseworkers interacted with clients over a Zendesk tool, resulting in more accurate, timely document submissions and faster days to determination.

**Automatic two-way text messaging, or “canned responses”**
Most client responses to our messages fell into a few standard categories, like missing an interview or requesting to talk to a caseworker. Instead of a general redirect automatic response like we used in the pilot, agencies could develop more specific automatic responses triggered by client replies. For instance, a question about a missed interview could trigger a specific, automatic response about how to reschedule interviews, rather than a generic message with the agency website and call center number. A question related to case status could send an update from the case management system for the latest information.

**Allow document submission by text and email**
Accessing client self service portals from a phone ranges from difficult (Medicaid) to impossible (DCFS, WIC). For required verification documents, the overwhelming majority of clients will take a picture from a phone. Faxing or mailing the document requires additional, burdensome steps. Even email can be difficult to navigate for clients on both a desktop and smartphone, though it is substantially easier than faxing or mailing. Creating an option for document submission by text message would greatly improve the client experience, reduce the time to receive documents, increase submission rates, and give caseworkers the information they need to make decisions in a timely way.
Put additional “stretch” opportunities on the roadmap

Coordinate program touchpoints and reminders across agencies.
Almost every client engaged for user research during the pilot is cross-enrolled in multiple benefits programs. Clients are not concerned (or often aware) that programs are administered by different agencies or divisions within agencies. They just want support in critical moments. A truly valuable text message service would coordinate renewal, reminders, and timely case information across benefits cases (especially across Medicaid and SNAP) to provide holistic support for clients. The next step would be coordinating renewals themselves across agencies with an integrated touchpoint, as other states have done.
8

Improve how clients interact with call centers

Clients described call center interactions as the most consistent and frustrating pain point in trying to understand and maintain their case status. Wait times stretch intolerably, and call center staff can rarely answer client questions. Responses to simple inquiries can take days to answer since call center staff must direct them to a specific, assigned caseworker (who may be busy, sick, etc.). While there are immovable policy limitations to allowing contracted call center staff answer case questions, there are a number of creative practices to make the customer service experience more useful, including:

- Modern “call back” features, where clients can elect to be called back when their wait time concludes (rather than waiting on hold). Text messages can supplement these efforts by letting clients know what to expect, or when there are typically low wait times for the call centers.
- Create a pool of authorized, on-demand caseworker teams to triage and respond to relatively simple case questions alongside the call center workers. DCFS could create a structure where specific case questions can be answered by this on-demand team quickly instead of relaying the messages to specific case workers embedded in the field offices. No matter what, clients should know when to expect a response.
Improve the SNAP interview experience for clients and caseworkers

The current SNAP interview process fails clients and caseworkers. Caseworkers receive new SNAP cases (or Redeterminations), and then schedule an interview to occur four days later in order to allow the notification letter with the interview time to reach clients. Caseworkers do not call clients in the intervening four days. We recommend experimenting with more direct, timely processes to improve the experience and increase processing timeliness, particularly for expedited cases:

- Allow caseworkers to cold call interview clients as soon as they receive the case. Other states have implemented this practice and report reaching clients 70-80% of the time if they cold call, leave a message, and try again within 24 hours.
- Allow in-person client interviews, rather than redirecting clients at offices to use a kiosk to call their caseworker. Many clients are more comfortable communicating face to face, and are disappointed to travel to an office only to be forced to connect with the agency through a phone.
- Experiment with on-demand interviews (letting clients call-in to have an interview at will, rather than at a specific time). Louisiana could try this with a small trial to gauge feedback from caseworkers and clients. Another option would be to allow clients to schedule or reschedule their interviews through text or email (similar to a doctor’s or dentist’s office).

The overall goal should be to shape a process that reduces missed interviews to save caseworker and client time.
Proactively educate clients on the process to maintain benefits

Throughout our user research, clients showed the detailed ways they organize their case information and next steps. In many instances, they are trying to anticipate when they will receive the benefit and how to proactively maintain their case status, even amid the turmoil and turbulence of their day-to-day. More proactive education about what to expect and what actions to take over the lifetime of the benefit would be valuable in reducing churn, as well as client anxiety. This could take the form of clear, plain language onboarding information once enrolled, periodic reminders (text message and mail) before the critical renewal period, and public awareness materials at offices and online.
A note of appreciation

State agency leaders and frontline staff balance enormous risks and complexity every day in their administration of social safety net services. Nurturing a new initiative to support clients with an external partner takes initiative, open-mindedness, and hard work. We are grateful for the dedicated state partners that made LA'MESSAGE a reality, and we see great promise for a human-centered safety net in Louisiana.

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