

# Universal Caseload (UCL) Action Plan

1. Feb2019
2. Assistance Programs
3. Universal Caseload Action Plan

## Background

Universal caseload, or task-based processing, is a different way of handling public assistance cases. Rather than assigning each case to a caseworker whom clients must call, often leaving a message, UCL allows a pool of caseworkers to handle pooled cases. A Contact Center receives phone calls and sends them to a caseworker located in the same geographic area as the client. Many other states have moved to UCL, because it promises several benefits:

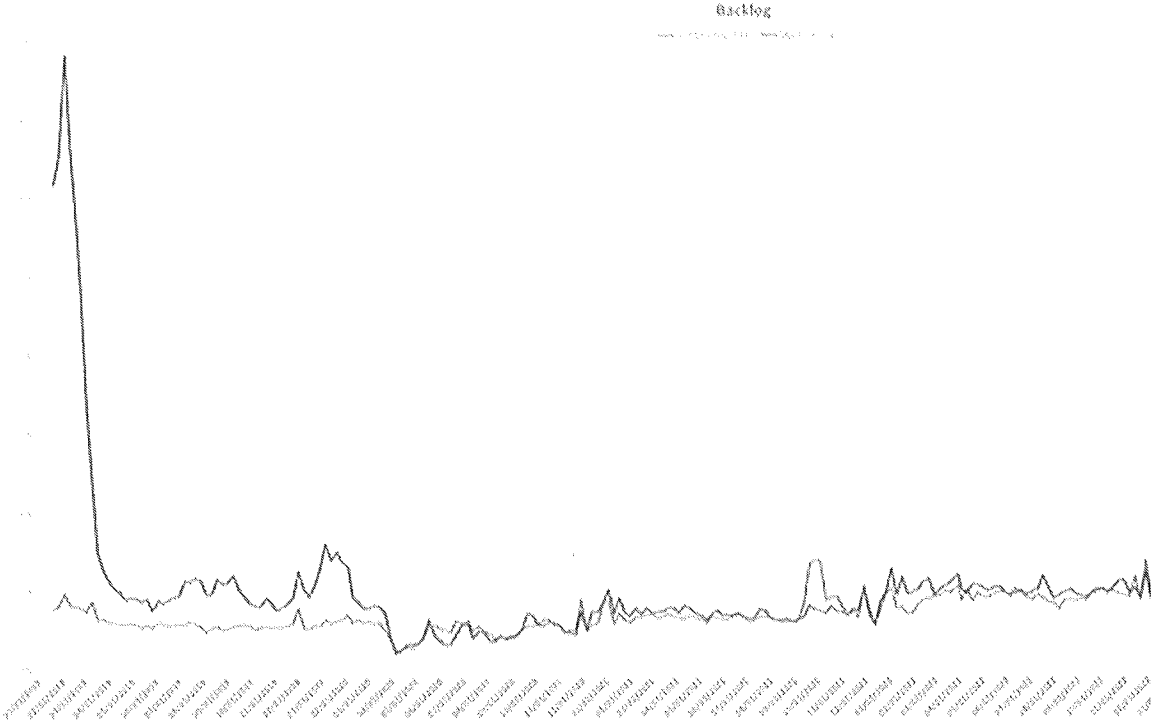
- **Faster and more reliable service:** Clients don't need to leave voicemails, which may be dropped if a caseworker is sick. The aim is to handle most calls in one interaction.
- **Greater efficiency:** When work is shared across counties, capacity can swing based on level of need.
- **More visibility:** The shared system allows supervisors to observe client experience and caseworker interactions more easily.

In Michigan universal caseload began with a pilot in February 2018 and rolled out to 50 counties by October of 2018. The 50 counties are now grouped into 10 areas, known as geo-groups, each of which serves individuals from the entire area. Customers can still visit those offices for assistance.

## Challenges

To date, the results of UCL's implementation have been unacceptable-to the new Director, Robert Gordon, and equally to the organization's senior management and its caseworkers. MDHHS is delivering benefits in UCL counties far less promptly than in non-UCL counties. For example, in non-UCL counties the application backlog is about 4%. In UCL counties the backlog is currently, on average 32%. Some UCL offices are currently carrying a backlog of applications as high as 48%. Behind those numbers are painful stories of individuals who are not getting the FAP or Medicaid or State Emergency Relief or the Child Development Care they need. Caseworkers who want to do right by their clients are distraught, rightly so.

While there is no sugarcoating these results, it is important to note there has been progress. Because of steps we have already put in place, the backlog has declined, on average, 6% over the last week.



**Response**

Director Gordon has visited five county offices (two UCL and one non-UCL) and spoken by video with staff at a sixth. In these offices, he has met with managers, caseworkers, and clients. He has also talked with the Department’s senior management, legislators, union representatives, and national experts on benefits delivery.

Based on that experience, Director Gordon notes the following:

- A shared service model has great potential to provide better service to Michiganders-no more waiting for return calls, faster service, better response to emergencies, and greater specialization among caseworkers.
- Our implementation of "universal caseload" has been unacceptable. Clients deserve better. Our caseworkers deserve better.
- Simply going backward should be a last resort. If a caseworker isn't available, a customer deserves to get help. And while personalized service can be very

powerful, in a world where most caseworkers had 700+ cases even before "universal caseload," most people did not see much benefit from personalization.

- A good "shared services" model can allow caseworkers to provide personalized service to individuals who most need it, while also allowing for many individuals to get the benefits they want quickly and efficiency.
- We need to try to make UCL work. Thanks to the hard work of the DHHS team, we are making progress already. The backlogs have declined by 6% over the last week.
- The leaders of DHHS will commit further resources and further expertise to this effort, as outlined below. Our caseworkers, in spite of their frustrations, will do all they can to make UCL work.

Director Gordon set the goal that by working with department leadership, we will do everything possible to be in a dramatically better place on backlogs within the next three months. MDHHS will track our progress weekly and will provide the tools to the public to also track our progress on backlogs in UCL counties compared to non-UCL counties.

### **UCL Counties**

The 50 counties that have UCL are: Alcona, Alger, Alpena, Antrim, Arenac, Baraga, Bay, Benzie, Cheboygan, Charlevoix, Chippewa, Clinton, Crawford, Delta, Dickinson, Eaton, Emmet, Gladwin, Gogebic, Genesee, Grand Traverse, Gratiot, Houghton, Iosco, Iron, Jackson, Kalkaska, Keweenaw, Luce, Mackinac, Manistee, Marquette, Mecosta, Menominee, Midland, Leelanau, Missaukee, Montmorency, Ogemaw, Ontonagon, Oscoda, Osceola, Otsego, Presque Isle, Roscommon, Sanilac, Schoolcraft, Shiawassee, St. Clair and Wexford.

Genesee - only urban county  
in "beta-test"