Strategies for Reducing Administrative Burden in Public Benefit and Service Programs

Executive Summary

Public program administrative burden — the costs associated with applying for, receiving, and participating in government benefits and services — can be a significant obstacle to individuals accessing support to which they are entitled. The Office of Management and Budget (OMB) memorandum on Improving Access to Public Benefits Programs Through the Paperwork Reduction Act (OMB M-22-10 (Apr. 13, 2022)), reminds Federal agencies of their responsibility under the Paperwork Reduction Act of 1995 (PRA) to (1) accurately estimate the burdens experienced by the public when accessing benefit programs and (2) use that analysis to minimize burdens, with particular emphasis on burden reduction for historically underserved communities. OMB M-22-10 also calls on agencies to emphasize systematic, rather than one-off, burden reduction initiatives, including by working with their general counsel to determine if every burden identified in an information collection request is strictly necessary under the relevant authorizing statute or program implementation regulation.

As articulated in OMB M-22-10, agencies should consider the following types of costs that individuals may face:

- **Informational and learning costs**, which refer to the time, effort, money, and other resources that individuals need to expend to learn about the existence of a public service or benefit, rules governing their eligibility, and application, certification, benefits maintenance, and post-award reporting or recertification processes.

- **Compliance costs**, which refer to the time, effort, money, and other resources that individuals need to expend to follow through with program application, certification, or recertification, including filling out necessary paperwork, waiting for correspondence from program agencies, planning for in-person meetings, and producing documentation to confirm their eligibility (for instance, records of household composition, income, assets, or health status).

- **Psychological costs**, which refer to the cognitive load, discomfort, stress, anxiety, distrust, or loss of autonomy or dignity that individuals may experience as a result of attempting to access a public benefit or service.

- **Redemption costs**, which refer to the time, effort, money, and other resources that individuals need to expend to use public benefits or services where beneficiaries or participants must navigate third-party agents or vendors.[i]

This memo reviews research findings and recent examples from Federal agencies responding to the COVID-19 public health emergency to demonstrate high-impact burden reduction strategies. These strategies can be used as models as agencies explore burden reduction activities relevant to their own programs and services. These strategies can be part of a broader program integrity strategy to ensure effective and efficient administration of programs that includes efforts to minimize fraud, waste, and abuse. Because the research literature tends to focus on program participation rates as the primary measure of burden reduction, this memo assesses strategies by their overall likelihood of increasing participation.

This memorandum reviews research supporting several strategies:

- Providing easy-to-use and actionable information to likely eligible individuals has been shown to increase program participation under some conditions but is unlikely to reach the most vulnerable and disconnected individuals. Instead, informational interventions are most likely to be effective, according to research, when paired with other burden reduction methods that target compliance and psychological costs.

- Ensuring that program decision points minimize required actions by beneficiaries has been shown to boost the likelihood that beneficiaries will receive the full services or benefits to which they are entitled. Two complementary strategies for reducing learning, compliance, and psychological costs in this way include: (1) shifting from "opt-in" to "opt-out" for receipt of benefits and services where feasible; and (2) setting defaults in programs to be most favorable towards beneficiaries.

- Providing additional methods of submitting applications has been shown to increase program participation—but is most likely to be effective when paired with other burden reduction methods that target compliance and psychological costs.

- Using existing administrative records to automatically enroll individuals, populate application information, or determine eligibility has been shown to increase program participation.

- Making in-person assistance options more physically and geographically accessible has been shown to increase successful applications, and thus program participation rates, particularly among disadvantaged individuals.

- Simplifying, permitting more flexibility in, or eliminating unnecessary reporting, documentation, and other requirements for application and recertification has been shown to increase program participation rates.

- Providing assistance through sources trusted by target communities or intermediaries for accessing benefits has been shown to increase participation rates, especially for disadvantaged participants.

Illustrating the Opportunity for Administrative Burden Reductions

Across Federal benefit programs, there is often a substantial gap between the population of individuals eligible for benefits and those actually receiving benefits. For instance, recent studies suggest that slightly less than half of adults eligible for Medicaid received benefits.[ii] Participation in the Supplemental Nutritional Assistance Program (SNAP) is higher, at 82% of eligible individuals in 2019 — but, even so, that estimate indicates that some 7 to 8 million individuals may be eligible for benefits but not receiving benefits. Because many social programs like SNAP and Medicaid are administered by state governments, participation rates also vary greatly across the country.[iii] In 2019, for instance, SNAP participation rates ranged from 55% in Wyoming to 100% in Delaware, Illinois, Oregon, and Pennsylvania.[iv]

Past research indicates that administrative burdens can play an important role in explaining why participation rates are higher in some states and programs compared to others, as this memo explains below. Administrative burdens include the costs associated with learning about, applying for, and using public services and benefits. Failure to receive benefits can undermine program effectiveness, hampering economic opportunity for disadvantaged, underserved, and otherwise vulnerable communities.

Administrative burdens also impose substantial financial, time, and psychological costs on individuals who succeed in applying for and ultimately receiving public benefits. During the height of the COVID-19 public health emergency in 2020, for example, backlogs, limited staff, and outdated IT infrastructure meant that many unemployed workers encountered long wait times to process their unemployment benefit applications.[v] These delays caused psychological stress and financial uncertainty for households experiencing job loss — even for successful applicants.[vi]

The next section defines the scope of administrative burden reductions using the framework detailed in OMB M-22-10.

Defining the Scope of Administrative Burden Reductions

Past research has identified a number of explanations for why individuals might choose to apply for benefits or not, and the costs that individuals incur in the process. These include the value of the public service or benefit, the degree of uncertainty around the receipt of the public service or benefit, awareness and knowledge of the program, social norms and stigma, and the costs associated with the time, money, and efforts involved in applying for and using the service or benefit.[vii]

Agency administrative burden reduction efforts envisioned by OMB M-22-10 involve only a subset of these factors and represent a select number of strategies to improve coverage, take-up, and effectiveness of social benefits and programs. The primary focus of administrative burden reduction efforts is on implementation of existing benefits and services under current law. More specifically, burden reduction measures involve **reducing the costs faced by individuals in applying for, receiving, or using public benefits and services**.

Under this definition, other changes that might increase program participation but that do not involve reducing the costs faced by individuals are not within the scope of OMB M-22-10. For instance, past research finds that programs with more generous benefits have higher participation rates, but efforts to increase benefit generosity would not fall directly within the scope of OMB M-22-10. Similarly, efforts to streamline internal agency benefit administration that do not reduce the costs faced by individuals or households would not be in the scope of OMB M-22-10.

As spelled out in OMB M-22-10, agencies should consider the following types of costs that individuals may face:

- **Informational and learning costs**, which refer to the time, effort, money, and other resources that individuals need to expend to learn about the existence of a public service or benefit, rules governing their eligibility, and application, certification, benefits maintenance, and post-award reporting or recertification processes.

- **Compliance costs,** which refer to the time, effort, money, and other resources that individuals need to expend to follow through with program application, certification, or recertification, including filling out necessary paperwork, waiting for correspondence from program agencies, planning for in-person meetings, and producing documentation to confirm their eligibility (for instance, records of household composition, income, assets, or health status).

- **Psychological costs**, which refer to the cognitive load, discomfort, stress, anxiety, distrust, or loss of autonomy or dignity that individuals may experience as a result of attempting to access a public benefit or service.

- **Redemption costs,** which refer to the time, effort, money, and other resources that individuals need to expend to use public benefits or services where beneficiaries or participants must navigate third-party agents or vendors.[viii]

Successful burden reduction efforts take aim at some or all of these four costs to individuals. Importantly, efforts to reduce one cost may reduce other costs. For instance, by reducing compliance costs associated with extensive paperwork, agencies may also reduce stigma and psychological costs to applicants.[ix]

Past research offers insights about specific strategies agencies can deploy that may reduce those costs applicable across many different types of public benefits and services. The next section reviews several evidence-informed strategies and their implications for agency burden reduction. Because the research literature tends to focus on program participation rates as the primary measure of burden reduction, this memo assesses strategies by their overall likelihood of increasing participation.

One important cross-cutting consideration for Federal agencies in implementing burden reduction strategies is that many social programs involve partnerships between different levels of government. In many programs, local, territorial, Tribal, or state governments —rather than Federal agencies — are primarily responsible for making decisions about how benefits and services are administered. Nevertheless, Federal agencies still can encourage other levels of government to implement burden reduction efforts, including through vehicles such as waivers, guidance, funding opportunities, and outreach and communications.

Select Evidence-Informed Strategies for Reducing Administrative Burden

- **Providing easy-to-use and actionable information to likely eligible individuals has been shown to increase program participation under some conditions but is unlikely to reach the most vulnerable and disconnected individuals. Instead, informational interventions are most likely to be effective, according to research, when paired with other burden reduction methods that target compliance and psychological costs.**

  A number of past interventions have tested whether providing information to eligible (or likely eligible) but non-participating individuals can improve program participation.[x] Available evidence suggests that these informational campaigns, aimed at reducing learning costs, are more likely to be effective when paired with other interventions that lower compliance costs or psychological costs.[xi]

For instance, this includes providing assistance with application and recertification in addition to informational outreach.

An important limitation identified by past research is that informational interventions appear to be most effective for individuals who are already connected to existing benefit programs or the tax system, and who tend to be relatively more advantaged.[xii] Accordingly, agencies might carefully consider the limits of informational interventions to reach especially vulnerable populations, especially when deployed on their own without additional burden reduction approaches like those described below.

- **Ensuring that program decision points minimize required actions by beneficiaries has been shown to boost the likelihood that beneficiaries will receive the full services or benefits to which they are entitled. Two complementary strategies for reducing learning, compliance, and psychological costs in this way include: (1) shifting from "opt-in" to "opt-out" for receipt of benefits and services where feasible; and (2) setting defaults in programs to be most favorable towards beneficiaries.**

One of the core findings from behavioral economics research is that individuals show a strong degree of passivity, choosing to remain with earlier or default choices even when those choices might not be the most favorable.[xiii] In benefit programs, this could mean that individuals miss out on more generous benefits or services for which they might be entitled but that would require new applications, certifications, or other reporting.

A burden-reducing alternative is for program administrators to design programs in ways that default individuals into receiving the full benefits or services available to them. This could mean automatically delivering benefits or services to individuals when they become eligible for those benefits or services. Below, this memo discusses strategies for using administrative data to do so. It can also mean automatically enrolling or delivering the maximum tier or category of benefit service to which individuals are eligible. By removing steps that individuals would otherwise need to take on their own, these measures may both reduce learning and compliance costs, as well as reduce psychological burden.

One example of these changes to program choice architecture comes from publicly-subsidized health insurance policies in Massachusetts.[xiv] The state implemented two policies to reduce learning, compliance, and psychological costs for beneficiaries, including (1) automatically enrolling eligible individuals who did not choose a health plan in a fully-subsidized, free plan; and (2) instead of disenrolling individuals who missed payments on their health plans, transferring those individuals to a fully-subsidized, free plan. These two changes led to large increases in enrollment and retention in health insurance coverage, preventing otherwise vulnerable individuals from becoming uninsured because they failed to select a health plan or missed an insurance premium payment.

A common misconception in program administration is that failing to enroll or take-up benefits or services reflects an intentional decision on the part of the prospective beneficiary. Past research clearly demonstrates that this assumption may not reflect reality. Instead, agencies might think about opportunities to minimize the choices and actions that applicants or beneficiaries need to proactively take — especially given other cognitive, financial, and time burdens that vulnerable populations may face.[xv]

- **Providing additional methods of submitting applications has been shown to increase program participation — but is most likely to be effective when paired with other burden reduction methods that target compliance and psychological costs.**

Providing additional means of submitting benefit applications, especially allowing online or phone applications, may help to reduce compliance and psychological costs for prospective beneficiaries. The move to online filing for taxes, for instance, increased claims for the Earned Income Tax Credit.[xvi] Online applications can be especially burden-reducing when agencies are able to make forms more accessible and easier to navigate, and when individuals are able to take advantage of knowledgeable intermediaries who can assist them in the claimant process.[xvii] In the case of the Earned Income Tax Credit, for instance, much of the increase in claims associated with online filing may have occurred because of increased use of tax preparers offering tools for filing.

Without simplification measures or navigational assistance, moving away from paper or mail-based applications may not appreciably reduce burden.[xviii] For instance, research suggests that states who moved from paper to phone and online filing for unemployment benefits did not see an increase in unemployment insurance participation — perhaps because there were no other informational or compliance cost reductions deployed at the same time. Agencies might consider avoiding online forms that simply replicate paper-based forms, and instead explore how digital forms can make applications more accessible.

In addition, agencies might consider ways of drawing on trusted intermediaries to further assist claimants, which can reduce both compliance and psychological costs. In fact, these factors may complement one another: by increasing take-up of benefits in local communities, agencies can help to address stigma around benefit application and receipt.[xix] This memo discusses both of these measures in more detail below. In either case, agencies might consider whether retaining alternative methods of applying for benefits may increase access to individuals who lack consistent access to phone service or internet access.[xx]

- **Using existing administrative records to automatically enroll individuals, populate application information, or determine eligibility has been shown to increase program participation.**

  In some cases, programs may be able to remove the step of application, certification or recertification altogether if they have access to reliable administrative records for eligible beneficiaries. In such cases, agencies could consider initiating enrollment or certification on behalf of individuals automatically. Taking this step may substantially reduce learning and compliance costs for beneficiaries, potentially as low as zero, to the extent that no further action is required on the part of the beneficiary. This may work especially well in the case of cash payments, which can be automatically distributed or deposited in bank accounts.[xxi]

  In other cases, agencies might consider using administrative records to facilitate eligibility determinations — for example, using an individual's eligibility for one program as proof of eligibility for another. Doing so may decrease compliance costs and increase program participation.[xxii] In the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), for instance, research suggests that policy changes using eligibility for other programs to confirm income eligibility for WIC may have increased program participation. In another published analysis, pre-population of student financial aid application data fields with already-collected tax information (also paired with application assistance) reduced application completion time and increased the likelihood that individuals would use Federal financial aid to attend college.[xxiii]

  At the same time, agencies pursuing simplifications of eligibility determinations might consider retaining existing means of verifying eligibility to ensure that they do not create new barriers to participation. In addition, before employing automatic enrollment, data matching, or data population strategies, agencies will need to verify that those strategies are legally permissible and appropriate

given applicable law, policy, and regulations and that administrative data are sufficiently reliable for program integrity purposes.[xxiv]

- **Making in-person assistance options more physically and geographically accessible has been shown to increase successful applications, and thus program participation rates, particularly among disadvantaged individuals.**

  Research on the WIC program has found that pregnant women's proximity to WIC clinics is associated with increases in participation, especially for more disadvantaged women.[xxv] Geographic distance to in-person facilities may be especially important for programs that require in-person visits to evaluate initial and continued eligibility. In these cases, agencies might explore ways to ensure that in-person facilities are accessible, for instance, by minimizing transportation and other related costs (like child care). Another example comes from research on Social Security disability benefits, which found that closures of field offices were associated with reduced disability applications in the areas around the closed offices.[xxvi] The analysis suggests that effects may have been largest for the most disadvantaged individuals. The lesson is that vulnerable individuals may be especially sensitive to changes in the geographic distance to government offices.

  Just as importantly, agencies might consider providing alternatives to in-person appointments for individuals who cannot easily travel for such meetings. Qualitative research on WIC program waivers implemented during the COVID-19 public health emergency — which suspended in-person appointments — found that many participants reported strong appreciation for the ease of phone-based interactions. And aside from lowering compliance costs, research suggests that these waivers may have lowered stigma and psychological burden on beneficiaries by collecting participant health information remotely, rather than through an in-person clinic visit.[xxvii] Research also suggests that COVID-19 waivers removing the requirement that WIC beneficiaries visit local offices to reload benefits may have increased participation rates in states adopting waivers compared to those that did not remove in-person requirements.[xxviii]

- **Simplifying, permitting more flexibility in, or eliminating unnecessary reporting, documentation, and other requirements for application and recertification has been shown to increase program participation rates.**

  Reducing the documentation that applicants are required to provide, simplifying application forms, introducing or expanding categorical eligibility criteria (rather than income or other resource thresholds that require more specific reporting from beneficiaries), and allowing applicants to use the same application for determining eligibility in multiple programs may increase program participation rates.[xxix] After application, an important set of barriers to ongoing participation in social programs are post-award reporting requirements and recertifications — processes by which current beneficiaries document continued eligibility. Longer recertification periods, fewer recertification or reporting requirements for changes in income, flexible alternatives for recertification or reporting requirements (for instance, waiving requirements for face-to-face meetings), or decreasing penalties for individuals who miss recertification requirements may increase continued participation in programs.[xxx] Recent research on the Medicaid and State Children's Health Insurance Program (SCHIP) has found that when states increased reporting requirements on program beneficiaries, health insurance coverage for children fell, especially for non-white children, Hispanic children, children with at least one non-citizen parent, and children with non-college educated parents.[xxxi]

  Not all of these strategies may be available for all programs under current program statutes. That said, agencies may have opportunities for using demonstration project or waiver authorities to advance alternatives for recertification and reporting.

- **Providing assistance in accessing benefits through sources or intermediaries trusted by target communities has been shown to increase participation rates, especially for disadvantaged participants.**

  When potential beneficiaries are confronted with applications, certifications, or recertifications for public benefits and services, trusted intermediaries — like community-based organizations or frontline service providers — may offer important assistance, reducing informational costs, compliance costs, and psychological costs and stigma.[xxxii] These kinds of navigation services are especially likely to be successful when they are provided by organizations or other representatives who have trusted relationships with the communities they are serving, and where these organizations or representatives use culturally and linguistically appropriate outreach and assistance strategies.[xxxiii] Agencies should be aware, however, that some intermediaries may require beneficiaries to pay for their assistance. These intermediaries can introduce further costs to benefit access, undermining program effectiveness.

Examples of Recent Burden Reduction Measures Highlighted in the White House's "*Advancing Equity through the American Rescue Plan*"[xxxiv]

In addition to lessons informed by past research, a number of Federal agencies have taken steps in recent years to reduce administrative burden in response to the COVID-19 public health emergency. This section provides examples of burden reduction efforts in Federal agencies, often in partnership with state, local, territorial, and Tribal governments. While we do not yet have research or evaluation findings related to the effectiveness of these efforts, the below examples provide models for agencies to consider.

- The **Emergency Rental Assistance** program provided funding for rental and utility assistance to state, city, county, and Tribal grantees to support low-income households affected by the economic consequences of the COVID-19 public health emergency. To reduce administrative burden in the delivery of these benefits, the U.S. Department of the Treasury issued guidance that clarified the **permissibility of self-attestation** for all eligibility criteria during the public health emergency, subject to appropriate safeguards. Treasury further encouraged grantees to **avoid establishing documentation requirements that would create barriers** and urged user-friendly application processes that were available in multiple modalities.

- Enhancements to the **Child Tax Credit** made the credit temporarily more generous, and implementation by the Treasury Department aimed to ensure broader and more equitable take-up of the credit. One important step that the Treasury Department took was using existing information from 2020 stimulus payments to identify families who might be eligible for the expanded Child Tax Credit in 2021 and begin **automatic advance payments** to those families. These families were less likely to be regular tax filers — since they had previously used a tool for non-filers — and so might have otherwise missed out on receiving the enhanced Child Tax Credit without automatic payments.

- The new national **Low Income Household Water Assistance Program** provides emergency water support to low-income households. This program provided grants to states, territories, and Tribal communities to work with utilities to pay for water service to low-income households. To reduce administrative burden on applicants, the U.S. Department of Health and Human Services encouraged grantees to use a **sample household application** that incorporated plain language and streamlined data fields, requesting only the minimum necessary information to establish eligibility. The program

also encouraged grantees to use **categorical eligibility criteria**, and in particular, using an applicant's eligibility for other Federal benefits programs as an easily-verified marker.

- The U.S. Department of Labor launched an **Unemployment Insurance Navigator program,** funding state unemployment insurance agencies to partner with local, community-based organizations. These organizations are intended to have a presence in communities that have experienced obstacles to unemployment insurance benefit access in the past. Through these partnerships, workers will receive **targeted outreach and assistance** provided by trusted community intermediaries aimed at boosting participation rates in the program.

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[i] Carolyn Barnes. 2020. *State of Empowerment.* Ann Arbor, MI: University of Michigan Press.

[ii] Sandra Decker et al. 2022. "Eligibility for and Enrollment in Medicaid Among Nonelderly Adults After Implementation of the Affordable Care Act." *Medical Care Research Review* 79(1).

[iii] See: https://www.fns.usda.gov/usamap/2019

[iv] See: https://www.fns.usda.gov/usamap/2019

[v] Gregory Acs and Michael Karpman. 2020. "Employment, Income, and Unemployment Insurance during the COVID-19 Pandemic Findings from the May 14–27 Coronavirus Tracking Survey." Urban Institute.

[vi] Rakeen Mabud et al. 2021. "Foundations for a Just and Inclusive Recovery." Color of Change, National Employment Law Project, TIME'S UP Foundation, and the Cornell Worker Institute.

[vii] For summaries of the relevant research, see especially: Wonsik Ko and Robert A. Moffitt. 2022. "Take-Up of Social Benefits." National Bureau of Economic Research Working Paper 30148.; Janet Currie. 2006. "The Take-Up of Social Benefits." Published in Alan Auerbach et al. (eds) *Public Policy and the Income Distribution*. New York, NY: Russell Sage Foundation Press.; Pamela Herd and Donald P. Moynihan. 2018. *Administrative Burden: Policymaking by Other Means*. New York, NY: Russell Sage Foundation Press.

[viii] Barnes 2020.

[ix] On the overlapping and long-term effects of burden, see for instance: Derek Wu and Bruce D. Meyer. 2021."Certification and Recertification in Welfare Programs: What Happens When Automation Goes Wrong?" Unpublished working paper.

[x] See for instance: Caitlin Anzelone et al. 2018. "Using Behavioral Insights to Increase Participation in Social Services Programs: A Case Study." Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.; Beth Osborne Daponte et al. 1999. "Why Do Low-Income Households not Use Food Stamps? Evidence from an Experiment." *Journal of Human Resources* 34(3).; John Guyton et al. 2017. "Reminders and Recidivism: Using Administrative Data to Characterize Nonfilers and Conduct EITC Outreach." *American Economic Review: Papers and Proceedings* 107(5).

[xi] See for instance: Elizabeth Linos et al. Forthcoming. "Can Nudges Increase Take-up of the EITC?: Evidence from Multiple Field Experiments." *American Economic Journal: Economic Policy*. See also: Amy Finkelstein and Matthew J. Notowidigdo. 2019. "Take-Up and Targeting: Experimental Evidence from SNAP." *Quarterly Journal of Economics*: 134(3).

[xii] Linos et al. Forthcoming.; Finkelstein and Notowidigdo 2019.

[xiii] For widely-cited examples, see: Brigitte Madrian and Dennis Shea. 2011. "The Power of Suggestion: Inertia in 401(k) Participation and Savings Behavior." *American Economic Review* 116(4).; James Choi et al. 2003. "Optimal Defaults." *American Economic Review* 93(2). For a summary of the behavioral economics findings, see: Richard H. Thaler and Cass R. Sunstein. 2003. "Libertarian Paternalism." *American Economic Review* 93(2).

[xiv] Adrianna McIntyre et al. 2021. "Can Automatic Retention Improve Health Insurance Market Outcomes?" *AEA Papers and Proceedings* 111. See also Iris Arbogast et al. 2022. "Administrative Burdens and Child Medicaid Enrollments." National Bureau of Economic Research Working Paper 30580.

[xv] On the costs faced by vulnerable populations, see especially Sendhil Mullainathan and Eldar Shafir. 2013. *Scarcity: Why Having Too Little Means So Much*. New York: Times Press.

[xvi] See for instance: Wojciech Kopcuzk and Cristian Pop-Elches. 2007. "Electronic filing, tax preparers and participation in the Earned Income Tax Credit." *Journal of Public Economics* 91.; Carolyn Barnes and Sarah Petry. 2021. "'It Was Actually Pretty Easy': COVID-19 Compliance Cost Reductions in the WIC Program." *Public*

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[xvii] See for instance: Colin Gray. 2019. "Why Leave Benefits on the Table? Evidence from SNAP." *Journal of Public Economics*: 179.

[xviii] As an example of a move to phones and online filing that did not increase take-up, see: Avraham Ebenstein and Kevin Stange. 2010. "Does Inconvenience Explain Low Take-Up? Evidence from Unemployment Insurance." *Journal of Policy Analysis and Management* 29(1).

[xix] See for instance: Pablo A. Celhay et al. 2022. "Stigma in Welfare Programs." National Bureau of Economic Research Working Paper 30307.

[xx] Lindsey Leininger et al. 2011. "The Target Efficiency of Online Medicaid/CHIP Enrollment: An Evaluation of Wisconsin's ACCESS Internet Portal." State Health Access Reform Evaluation, the Robert Wood Johnson Foundation.

[xxi] Kris Cox et al. 2022. "Stimulus Payments, Child Tax Credit Expansion Were Critical Parts of Successful COVID-19 Policy Response." Center on Budget and Policy Priorities.

[xxii] For an overview of opportunities to combine different state administrative data sources for eligibility determinations, see: Sonal Ambegaokar et al. 2017. "Opportunities to Streamline Enrollment Across Public Benefit Programs." Center on Budget and Policy Priorities. See also: Marianne Bitler et al. 2003. "WIC Eligibility and Participation." *Journal of Human Resources* 28.; Christopher A. Swann. 2010. "WIC Eligibility and Participation: The Roles of Changing Policies, Economic Conditions, and Demographics." *B.E. Journal of Economic Analysis and Policy* 10(1).

[xxiii] Eric P. Bettinger et al. 2012. "The Role of Application Assistance and Information in College Decisions: Results from the H&R Block Fafsa Experiment." *Quarterly Journal of Economics* 127(3).

[xxiv] On the risks of automation in benefit determination, see for instance: Wu and Meyer 2021.

[xxv] Maya Rossin-Slater. 2013. "WIC in your neighborhood: New evidence on the impacts of geographic access to clinics." *Journal of Public Economics* 102.

[xxvi] Manasi Deshpande and Yue Li. 2019. "Who Is Screened Out? Application Costs and the Targeting of Disability Programs." *American Economic Journal: Economic Policy* 11(4).

[xxvii] Barnes and Petry 2021.

[xxviii] Aditi Vasan et al. 2011. "Association of Remote vs. In-Person Benefit Delivery with WIC Participation During the COVID-19 Pandemic." *JAMA* 326(15).

[xxix] For analysis of state SNAP policies and their relationship to participation rates, see for instance: Peter Ganong and Jeffrey B. Liebman. 2018. "The Decline, Rebound, and Further Rise in SNAP Enrollment: Disentangling Business Cycle Fluctuations and Policy Changes." *American Economic Journal: Economic Policy* 10(4).; Leininger et al. 2011.; Caroline Ratcliffe et al. 2008. "Effect of State Food Stamp and TANF Policies on Food Stamp Program Participation." Economic Research Service, U.S. Department of Agriculture Contractor and Cooperator Report No. 36.

[xxx] See especially: Ganong and Liebman 2018.; Tatiana Homonoff and Jason Somerville. 2020. "Program Recertification Costs: Evidence from SNAP." National Bureau of Economic Research Working Paper 27311.

[xxxi] Iris Arbogast et al. 2022.

[xxxii] See for instance: Eric P. Bettinger et al. 2012.; Benjamin D. Sommers et al. 2017. "The Impact Of State Policies On ACA Applications And Enrollment Among Low-Income Adults In Arkansas, Kentucky, And Texas." *Health Affairs* 34(6).; Alexander Hertel-Fernandez and Alix Gould-Werth. 2020. "Labor organizations and Unemployment Insurance." Washington Center for Equitable Growth.; Diana Whitmore Schanzenbach. 2009. "Experimental Estimates Of The Barriers To Food Stamp Enrollment." University of Wisconsin, Madison Institute for Research on Poverty Working Paper DP1367-09.

[xxxiii] See for instance: Roberto Vargas. 2016. "How health navigators legitimize the Affordable Care Act to the uninsured poor." *Social Science and Medicine* 165.

[xxxiv] For more detailed case studies, see: White House: Advancing Equity through the American Rescue Plan. May 2022: https://www.whitehouse.gov/wp-content/uploads/2022/05/ADVANCING-EQUITY-THROUGH-THE-AMERICAN-RESCUE-PLAN.pdf