



2025

SNAP PER IMPROVEMENT PLAN



PRESENTED BY
human services group

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Executive Summary

Rhode Island's Quality Control (QC) data shows the top three drivers of the FFY2024 Payment Error Rate (PER) are (1) wages and salaries, (2) shelter deductions, and (3) household composition. Each reform area in this plan—Policy, Quality Assurance (QA), QC, Business Process, IT Systems and Workload Management—has been mapped to these drivers to demonstrate a direct alignment between the state's identified errors and the targeted strategies to resolve them.

Rhode Island's Supplemental Nutrition Assistance Program (SNAP) faces heightened risk under H.R. 1, which reduces federal administrative cost-sharing and imposes steep sanctions on states with PER above 6%. Human Services Group (HSG) conducted an assessment and developed a set of recommendations to reduce Rhode Island's PER below 6% through targeted reform in specific areas – Policy, QA, QC, Business Process, IT Systems and Workload Management. Within each of these targeted reforms, priorities have been identified to implement as soon as possible—within the first few months—as they will have the greatest impact on the PER. The remainder of this report provides all the strategies recommended to reduce the PER for each reform area, and the strategies are also outlined in the Implementation Timeline on page 27, providing a recommended roadmap of execution for the RI Department of Human Services (DHS).

DHS has already established a strengthened governance structure leveraging the Office of Program Integrity and tiger teams—cross-functional workgroups focusing on problem solving—to monitor progress, track results, and ensure sustained error reduction consistent with federal oversight expectations.

Over the past decade, FNS and the broader environment have required us to make it easier for clients to get benefits and for staff to process cases quickly. While this has improved access and speed, it hasn't always supported the kind of quality culture needed to meet the requirements of new legislation. Moving forward, success will depend on shifting the culture to one of shared responsibility to quality, supported by technical improvement, while still balancing customer access and staff needs.

Targeted Reform Areas

Policy Simplification and Federal Flexibility

- Move to simplified reporting for all households.
- Assign 24-month certification periods to Elderly and Disabled Simplified Application Project (ESAP) households.
- Revoke the Change of Address waiver.

Quality Assurance (QA) Framework

- Conduct urgent "Find and Fix" reviews of the ESAP population with surge staff.
- Build a culture of shared responsibility through organizational change management.

Quality Control (QC) Improvements

DHS will expand proactive customer communication tools, integrate SNAP Connect expansion, and engage community partners to help customers understand and meet reporting requirements. These activities complement internal reforms and extend accuracy improvements into the client-facing environment.

- Standardized review processes with process maps and performance standards.

Business Process Optimization

- Standardize eligibility procedures and documentation.
- Provide simulation-based interview training.

IT Systems and Workload Management

- Expand use of commercial data sources to track employment and household changes.
- Procure an AI-driven Smart Policy Hub that links policy, QA, and training. (AI will not be used in any benefit determinations.)

Introduction

Background

H.R. 1, also known as the “One Big Beautiful Bill Act”, enacted in mid-2025, imposes sweeping changes to the Supplemental Nutrition Assistance Program (SNAP) that shift both financial burdens and eligibility rules and carry significant consequences for millions of low-income families. Under the new law, beginning October 1, 2026, the federal share of state administrative costs drops from roughly 50% to only 25%, meaning states will absorb an additional 25% of overhead for running the program. Additionally, states with SNAP payment error rates (PER) exceeding 6% will face a penalty of absorbing 5-15% of the actual SNAP benefit costs based on the state’s tiered performance for the entire federal fiscal year. The bill also strengthens work requirements and tightens eligibility for certain immigrant populations.

H.R. 1 introduces specific SNAP provisions that directly increase error risk and state liability:

- Section 10102 overhauls work requirements for SNAP Able-bodied Adults without Dependents (ABAWD) rules by (1) raising the maximum age subject to the 3 month time limit from 54 to 64; (2) reducing the “parental” exemption to include parents/caretakers of children up to 13 (previously 18) years old; (3) removing exemptions for homelessness, veteran status and those who aged out of the foster care system before age 24; and (4) narrowing the criteria for a state to qualify for a waiver of the requirements.
- Section 10103 removes the Standard Utility Allowance (SUA) for non-elderly/non-disabled households who do not incur heating and cooling costs, raising the chance of shelter calculation errors.
- Section 10105 establishes a state benefit cost share tied to PER tiers.
- Section 10106 reduces the federal administrative match to 25%.
- Section 10107 eliminates SNAP Nutrition Education and Obesity Prevention Grant Program (SNAP-Ed). These provisions underscore the urgency of reducing Rhode Island’s PER.

Rhode Island’s SNAP has experienced significant changes over the past 15 years. Historically high caseloads and extensive system challenges have caused strains not only in the administration of SNAP but also in workload management, keeping Rhode Island in a challenging environment as it attempts to serve its constituents effectively.

Beginning with the recession of 2009, Rhode Island’s SNAP participation soared to record levels, experiencing one of the steepest increases in the country. By 2011, caseloads per Eligibility Technician (ET) had grown by over 400% from an average of 750 to more than 3,500 cases, resulting in the state having the highest caseload per ET in the nation. The significant increase in workload contributed to an elevated PER, leading to three consecutive years of federal sanctions between 2011 and 2013. At this time, states were required to perform below the national average of the PER which fluctuated year to year; the PERs for FFY 23 and 24 were 11.68% and 10.93%, respectively. In response, Rhode Island launched a Business Process Redesign (BPR) in 2014, shifting from a caseload model to task-based processing. By 2015, the state reduced its error rate to 3.91%, and in early 2016, it achieved a historic low of 1.24%.

However, the implementation of its new integrated eligibility system, RIBridges, in September 2016, disrupted the strides made and successes of 2014 and 2015. System limitations placed the BPR model on hold, and staff

reductions and increased demand strained operations. PERs rose sharply, peaking at 21.04% in 2019, nearly three times the national average, and Rhode Island was sanctioned in 2018 and 2019. During COVID-19, the United States Department of Agriculture (USDA), Food and Nutrition Service (FNS) suspended QC reviews and the reporting of state PERs and any associated sanctions. They also relaxed policies to increase access throughout the pandemic, such as waiving interviews (a cornerstone to accurate eligibility decision making) and verification requirements. In FFY 2023, Rhode Island's PER was 12.40%, In FFY 2024, the PER was 12.29%, compared to a national average of 10.93%.

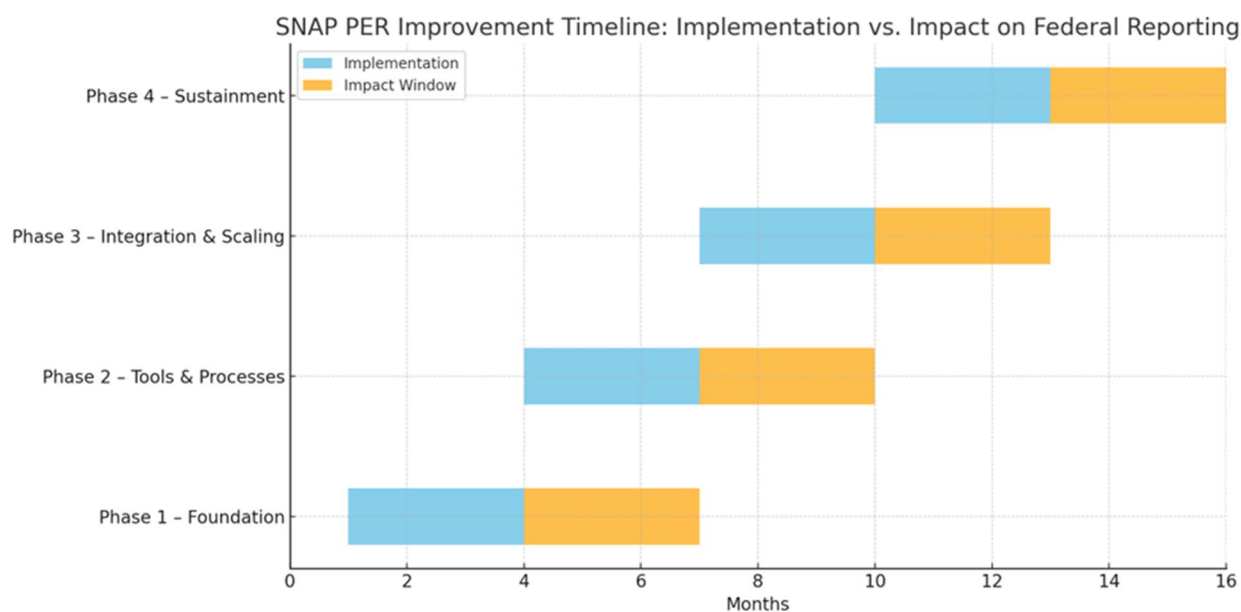
Level Setting Expectations to Impact

Implementing strategies to strengthen SNAP accuracy is the first step toward success; measurable improvements in Rhode Island's federal PER will take longer to appear. This is because federal QC reviews sample cases monthly, often reviewing cases processed months earlier, and the official PER is calculated and reported on an annual basis. As a result, even well-designed strategies may not be reflected in yearly federal reporting until several months after implementation.

The lag is influenced by several factors. First, the federal QC sample will include cases processed under both old and new rules for a period, which means legacy errors from old rules will continue to affect results even after corrections are in place. Second, the case cycle structure with certification periods of 12-, 24- or 36-months delays the impact of certain policy changes until households recertify or report changes. These realities mean that immediate improvements in internal accuracy may not translate into an official PER decline right away.

In practice, states can typically see the first signs of improvement within two to three months (if measuring Key Performance Indicators (KPIs) associated with the actions taken) as newly processed cases begin to flow into the QC sample and staff become more confident applying new strategies. However, the full effect often takes six to twelve months to appear in federal reporting, as cases with the old rules become less of the sample and the annual reporting cycle captures more improved performance. One strategy that can work against the natural timing of improvement results is the 'Find and Fix' initiative, which is an immediate target and correction of known errors in the sample, discussed later in this document.

Timing is critical under H.R. 1 as it ties state penalties to sustained performance below the 6% threshold. Understanding the lag between implementation and impact is essential to setting realistic expectations, maintaining momentum among staff, and fairly evaluating the effectiveness of strategies over time.



Scope

In August 2025, DHS hired Human Services Group (HSG) to facilitate a process with the state to deliver a comprehensive plan for reducing the SNAP PER to below the federal threshold of 6%. HSG was engaged to:

- Validate the state identification of driving causes of Rhode Island’s PER and/or further inform the existing root cause analysis.
- Review Rhode Island’s SNAP policies to identify those that hinder Rhode Island’s ability to meet the national PER and identify options that provide greater performance protection.
- Design and run a process mapping and improvement engagement designed to streamline, simplify, and strengthen the ability of DHS to meet compliance.
- Review portions of the eligibility process/systems and provide recommendations for IT upgrades that would lower the PER.
- Develop a SNAP PER Improvement Plan, ranking strategies by net benefit.

Following an extensive review of artifacts, policy, reports/analyses, system application, and task walk-through observations, and conducting onsite observations, HSG recommended a face-to-face brainstorming session with key leadership to incorporate their thoughts, feedback, and engagement into the process. The session was facilitated by:

- Discussing the most prevalent root causes of errors.
- Identifying actions that could help increase accuracy around those root causes.
- Discussing current initiatives in flight to bring down the error rate.
- Sharing other outside strategies used across the country that could be helpful in RI, and to get our “think-out-of-the-box” mindset stirred.
- Prioritizing initiatives that would have the biggest impact on reducing the PER.
- Creating seven tiger teams to vet priorities and make recommendations for immediate and long-term action. Tiger teams are small, specialized groups of experts brought together to solve specific, high-priority problems or challenges, usually under tight deadlines (reducing the SNAP PER to under 6%). Tiger teams will report on their progress in the bi-weekly Core Team Meetings. The tiger team priorities identified were:

Focus Area	Goals
Supervisors	➤ Assess roles and responsibilities ➤ Build supervisory capacity to support staff ➤ Prioritize 1:1 conferences, on-the-job training, and coaching ➤ Build consistency and evaluation ➤ Establish a Supervisor Academy ➤ Observe ETs
ESAP	➤ Find cases in error and make necessary corrections ➤ Simplify reporting requirements
New Hire Support	➤ Develop nesting environment ➤ Structure progression plan ➤ Develop consistency and standardized procedures ➤ Improve interviewing skills
Training	➤ Target training for upcoming policy changes with labs ➤ Focus on household composition, special populations, expenses, and income ➤ Blend the approach with Learning Management System (LMS) modules, instructor-led training, and processing labs (data entry and scenarios) ➤ Improve interview skills ➤ Mirror work environment ➤ Update quick reference guides ➤ Collaborate (QC, PI, Operations)
Field Labs	➤ Provide live cases ➤ Support rotations ➤ Improve outcomes ➤ Target areas ➤ Standardize procedures
Workload Clean-Up	➤ Review cases that have been pending ➤ Provide feedback to supervisors ➤ Reduce backlog
QA Prevention	➤ Review larger sample ➤ Conduct true pre-authorizations ➤ Conduct 2nd Party reviews (Eligibility Technician Supervisor Approval (ETSA), large supplements) ➤ Improve quality checks ➤ Utilize Quality Assessment Tool (QAT) (used to meet with worker)

Throughout the process, the Director of DHS has been coordinating with the labor unions regarding the need for changes to the administration of SNAP to avoid significant penalties that could have a variety of impacts on the department. Successful adoption of these recommendations will require a collaborative process that

incorporates workforce perspectives and safeguards staff interests.

HSG respectfully presents our findings and recommendations.

Note: This SNAP PER Improvement Plan does not yet include review of the FNS Quality Control cases reviews for the most recent six months (post-submission to FNS) or the Business Process Redesign (BPR) design session. These activities will be performed in October 2025, and the information gleaned from those exercises will be added to this report by January 2026.

Target Reform Areas for Improvement

SNAP Policy Review

Introduction

Crafting SNAP policy with a focus on accuracy means going beyond compliance to intentionally designing rules that reduce complexity, minimize room for error, and safeguard benefit integrity. Policies that align with QC protections, such as clear definitions of countable income, standardized verification requirements, and consistent reporting rules, help ETs make precise determinations and give participants confidence in the process. By embedding QC considerations into policy from the start, DHS can proactively prevent common error trends rather than relying solely on corrective action after mistakes occur.

HSG met with the Associate Director of Policy and Program to gain an interagency perspective from the policy lens and better understand how Rhode Island's current approach to SNAP administration influences payment accuracy. In addition to this discussion, HSG conducted an in-depth review of the Secretary of State's website to examine Rhode Island's SNAP policy manual, guidance, and regulations. The team also reviewed the state's SNAP application process, including intake procedures, documentation requirements, and verification steps, to identify potential areas of complexity or misalignment that could affect program accuracy.

This review was designed to highlight where Rhode Island's rules are consistent with federal requirements, where the state has adopted more restrictive practices, and where opportunities exist to align with proven approaches from other states that have contributed to lowering their SNAP PER. By grounding the analysis in both federal policy and state-level practices, HSG identified targeted opportunities for Rhode Island to strengthen alignment, reduce administrative burden, and support a lower PER.

Building on these findings, HSG compared Rhode Island's policies with those in other states, drawing on federal SNAP requirements under 7 CFR Part 273 and the most recent FNS State Options Report. The following policy recommendations reflect this analysis and are designed to support a lower SNAP PER in RI.

Policy Simplification and Removing Unnecessary Complexity from Eligibility Rules

Reducing complexity in eligibility rules strengthens program administration, lowers the risk of mistakes and errors, and shortens processing time by reducing confusion.

Recommendations

One Reporting Model

Move to one reporting model – simplified reporting for all households.

One reporting model consistency lowers the chance of errors in how changes are reported and/or processed, directly supporting more accurate benefit determinations. The five states with the lowest SNAP PER below 6% all have one reporting model: simplified reporting.

Align Program Certification Periods

Assign six-month certification and renewal periods to households receiving SNAP, RI Works (RIW), and Medicaid.

Setting six-month certification periods for households receiving SNAP, RIW, and Medicaid creates a shared review point that keeps eligibility data current and aligned. While Medicaid requires annual renewals, federal rules (42 CFR §435.916(d)) allow earlier redeterminations using updated information from SNAP and RIW. Coordinating these cycles reduces discrepancies, ensures income and household details are aligned across programs, and eliminates the interim change reporting process in which most individuals indicate no changes. This streamlined approach reduces unnecessary administrative burden and lowers the risk of payment errors.

Align Work-Required Individual Certification Periods

Assign six-month certification periods to Able Bodied Adults without Dependents (ABAWDs) and the Medicaid expansion group.

ABAWDs and Medicaid expansion households can experience more frequent changes in income or work hours. Assigning a shorter, aligned six-month certification period helps keep eligibility information current, especially in a population that is expected to experience a change, such as getting a job. This ensures the state is capturing changes and income that would affect benefits in a timely manner, reducing the risk of overpayments or underpayments.

Shelter Verification Requirements

Integrate and align shelter verification requirements across SNAP and RIW.

Both SNAP and RIW programs use shelter information, but for different reasons. SNAP uses it to determine benefit amount, while RIW uses it to confirm and verify household composition. Creating a shared shelter verification policy would streamline the process, strengthen accuracy in household composition determinations, and reduce the chance of inconsistent or missing information that drives payment errors.

ESAP Certification Periods

Assign 24-month certification periods to Elderly Simplified Application Project (ESAP) households and reassign cases no longer considered ESAP to a six-month certification period.

Seniors and individuals with disabilities in ESAP typically have stable circumstances, but a 36-month certification cycle leaves too much time for unreported changes to go undetected, increasing the risk of payment errors. Shifting to a 24-month certification period provides a balanced checkpoint that improves accuracy, strengthens quality control oversight, and ensures benefits remain properly aligned with household circumstances.

Additionally, for households that lose ESAP eligibility, cases should be reassigned to a standard six-month certification period, allowing earlier detection of changes associated with earned income or other shifts in circumstances. Together, these targeted adjustments reduce costly errors while keeping the process manageable for staff.

Combine Policy and Process Transmittals

Combine policy and process transmittals as a bridge to AI Tools.

As an interim step toward AI-assisted policy tools and procedural guides, the agency should begin issuing combined policy and process transmittals. Each transmittal would bring together the policy, explaining the “what and why,” with the process, and outlining the “how” of implementation. Delivering both in a single document will reduce confusion, strengthen accuracy, and ensure staff understand not only the intent of changes but also

the steps required to carry them out. This integrated approach should be a collaboration between the policy office that creates policy and field operations that implement the policy. Developing this collaboration and combined memo lays the groundwork for AI-enabled guides that can transform these transmittals into interactive, real-time resources for staff.

Denials Prior to 30th Day

Update policy on denials prior to the 30th day.

Federal SNAP regulations (7 CFR §273.2(g) and §273.2(h)(1)(i)) require that households be given at least 10 days to provide requested verification and that applications remain pending until the 30th day unless the household has clearly refused to cooperate. While Rhode Island provides 15 days to return requested information, without an approved Early Denial Waiver from FNS, applications cannot be denied before the 30th day solely because verification has not been returned.

To ensure compliance and reduce potential payment errors, the policy at Section 1.3.7 of the state SNAP regulations (218-RICR-20-00-1, § 1.3.7 “Denying an Application Prior to the 30th Day should be revised to reflect that cases *may* be denied if verification is not provided within the required timeframe but must remain pending until the 30th day in the absence of an early denial waiver. In addition, the application's language should be updated to use “may” rather than “will” when describing potential denial for missing verification.

Application Household Composition Language

Update the household composition policy language.

The current RI DHS policy at Section 1.2 of the state SNAP regulations (218-RICR-20-00-1, § 1.2 “Household Definitions”) states that households must list the members they “wish” to be considered for SNAP benefits, which differs from both federal regulation (section 7 CFR § 273.2(b)(1)(i)) language and the application language. This phrasing may result in the inadvertent exclusion of mandatory household members who purchase and prepare their food together. The distinction of purchase and preparation must be confirmed at the time of the interview.

Application Assessment

Simplify the Application for Assistance: Plain Language and Accessible Design.

The Application for Assistance is a 40-page form written at a 10th–12th grade level, which could make it difficult for many applicants to read and understand. Rewriting the form in plain language and incorporating visual aids like icons, color-coding, and section highlights would make instructions clearer and strengthen accuracy in program administration.

Revise Online Application

Remove default selections on the online application.

Currently, the online SNAP application prefills answers with “No.” This default setting can lead applicants toward leaving responses unchanged, even when the correct answer is “Yes.” Like closed-ended questioning, this design increases the risk of missing critical information at intake, which can lead to oversight, inaccurate eligibility determinations, and ultimately contribute to payment errors. A recommendation is to remove prefilled responses and require applicants to actively select their own answers. This ensures that each question is intentionally reviewed and answered, reducing the chance of default responses masking important information.

In tandem, additional steps should be taken to encourage applicants to use the online portal rather than paper applications, as the portal allows for stronger controls and improved data quality at the point of entry.

Vendor Payment Verification

Clarify vendor payment verification for shelter expenses.

On page two under section six of the instructions in the Application for Assistance, a recommendation is to add the following sentence: “Letter or statement that shows the amount of rent or utility costs paid directly on your behalf to your landlord or utility company.” This clarification ensures applicants provide accurate documentation of vendor payments toward shelter costs. Without this guidance, households may omit or misreport these third-party payments, which can result in incorrect shelter deductions and potential payment errors. Making the requirement explicit strengthens data accuracy at intake and reduces the risk of eligibility and benefit calculation errors tied to shelter expenses.

Self-Employment Expense Deduction

Implement a self-employment standard expense deduction.

Instead of requiring households to report and verify actual self-employment expenses, implementing a standard deduction for these expenses streamlines the process and offers QC protection in these cases. This reduces paperwork, ensures consistency across cases, and lowers the risk of errors caused by missing or inconsistent documentation. Staff can apply the standard deduction quickly, thereby improving efficiency and accuracy at the same time.

Federal Waivers Provide Flexibility that Reduces Room for Staff Error

Federal waivers and state option policies in SNAP are powerful tools that allow agencies to tailor the program to local needs while improving performance outcomes, and without losing accountability. By adopting strategic options, states can streamline processes, reduce administrative burden, and minimize common sources of payment errors.

Revoke “Alternative Procedures” Waiver

Revoke the “Alternative Procedures when Change of Address is Reported” waiver.

Removing this waiver, which allows states to postpone verification of shelter costs when a household reports an address change, ensures that households changing addresses follow the same consistent rules as everyone else in terms of verifying household composition and shelter expenses. Standardizing the process improves accuracy and lowers the risk of errors tied to incomplete or inconsistent address changes and the potential household and shelter expenses associated with them.

Resource Considerations Policy Simplification

Policy simplification and the removal of unnecessary complexity represent modest adjustments to staff responsibilities but carry significant impact for program integrity and compliance. These changes should be advanced through DHS’s strategic planning, labor engagement, and policy development processes to ensure alignment across the workforce and clarity in implementation.

Associated system adjustments, including those required for certification alignment, self-employment deductions, and application redesign, are reflected in the DHS Capital Budget and SFY27 decision packages. Costs are also being pursued through various federal grant submissions, with detailed planning and resource allocations incorporated into DHS’s strategic planning, policy modernization, and continuous improvement activities.

Quality Assurance

Introduction

In SNAP administration, QA and QC serve complementary but distinct functions in strengthening program performance. QA is proactive and focused on preventing errors from occurring in the first place. QC is retrospective and measures the outcome of actions by the workforce.

Quality Assurance	Quality Control
Proactive: Focus on preventing errors before they occur	Retrospective: Identify errors after benefits are issued
Build strong policies, training, and simulations	Review a federal sample of cases (minimum 1,020 active cases per year)
Conduct internally by the agency	Mandate by FNS and federally monitored
Emphasize process improvement and consistency	Emphasize measurement of accuracy and error rates
Help staff apply rules correctly and confidently	Determine the state's PER and potential liability
Support ongoing program performance	Trigger corrective action plans when errors are found

QA builds the guardrails to support accuracy up front, while QC provides the accountability check that measures outcomes and drives corrective action. QA and QC serve distinct purposes and must be present in any SNAP organization to maintain an acceptable performance level.

HSG staff met with RI DHS staff in the Program Integrity and Quality Control sections to understand the QA infrastructure within the department and how it operates and collaborates with the other entities in the eligibility ecosystem; reviewed the state's semi-annual Management Evaluation Review and CAP, Quality Improvement (QI) data and analyses, and state plan documents; and assessed the pre-authorization review process and viability.

Recommendations

Quality Culture

Build a Culture of Shared Responsibility within RI DHS through a Communications and Organizational Change Management (OCM) support system.

In line with previous FNS guidance to remove barriers during the pandemic, for the past several years, RI DHS has operated with a mindset that prioritized rapid access. While this expanded access, it created constraints that did not support high performance. To achieve higher accuracy rates, the agency must now invest in shifting to a culture of shared responsibility—where quality determination drives quality service and ensures compliant performance.

A Culture of Shared Responsibility is not achieved through policy, process, and systems alone; it requires consistent commitment and ownership at every level. It embeds accuracy, consistency, and continuous improvement into every aspect of SNAP administration—not just as a compliance requirement, but as part of DHS's identity and daily work.

This culture reframes the role of staff, empowering them not only as Eligibility Technicians but as stewards of program integrity. Staff will develop their professional skills through training, coaching, and real-time

feedback, learning how their daily decisions directly affect clients and federal accountability. In this model, errors are identified earlier, training is embraced as professional growth, and corrective actions are seen as opportunities to improve rather than as compliance burdens.

By making quality a shared responsibility, DHS will foster consistency across offices, build public trust, reduce costly errors, and strengthen staff development. This approach creates a professional environment where staff are supported to grow, adapt, and excel—ensuring SNAP fulfills its mission of delivering timely and accurate benefits to Rhode Islanders who need them most.

Change management involves helping leadership, staff, and stakeholders adapt smoothly to new policies, systems, or practices. Embedding change management principles will support DHS through a continuous improvement mindset and support maintenance of high performance for the long term. The types of initiatives or activities that develop a culture of shared responsibility typically include:

- Leadership Alignment and Vision Setting
 - Strategy sessions with executives to define a clear vision for the change
 - Consistent leadership “change narrative” so all managers speak with one voice
- Stakeholder Engagement
 - Mapping out internal and external stakeholders (ETs, policy, field leadership, IT, QA, QC, community advocates, labor partners, clients)
 - Listening sessions and focus groups to capture concerns and ideas
 - Building a “change champions” network of staff who help model and spread adoption
- Communication Planning
 - Tailored messages for staff, clients, and partners explaining the “why” and “how” of changes
 - Use of multiple channels—emails, town halls, job aids, and intranet hubs—for repeated reinforcement
 - FAQs and “myth-busting” tools to reduce confusion
- Training and Capability Building
 - Policy and system training with current technological capabilities, hands-on simulations, and case scenarios
 - Refresher modules and quick-reference guides to reinforce learning
 - Coaching support for supervisors to help staff through the transition
- Pilot and Phased Rollout
 - Small pilots (e.g., one region or office) before scaling statewide
 - Gather data and feedback to make mid-course corrections
 - Share pilot “success stories” to build momentum
- Continuous Feedback and Support
 - Feedback loops (surveys, hotlines, open office hours) to hear from staff and participants
 - Metrics (error rates, timeliness, staff confidence) to monitor adoption
 - Adjust communications, training, or policy guidance in real time as challenges emerge
- Recognition and Reinforcement
 - Celebrate early wins and highlight staff who successfully model new practices
 - Tie change efforts to performance recognition and professional growth
 - Reinforce consistently that change is not a one-time event but an ongoing process

Find and Fix Case Reviews

Conduct 'Find and Fix' case reviews.

The RI ESAP population is nearly 40% of its total SNAP caseload and accounts for approximately 50% of the QC sample. These cases, therefore, make a high contribution to the PER in RI, which is also not typical, as these households are normally stable. Although confirmation through QC case reviews is still pending, observations and discussions suggest a combination of system and worker errors.

This September, DHS established a dedicated tiger team to coordinate the reduction of the PER by addressing ESAP across multiple areas. The team is in the process of:

- Identifying the entire ESAP caseload and cross-referencing to known ESAP exclusions, such as households with earned income or individuals under age 60 without a disability. Any matches should be immediately converted to regular SNAP.
- Researching incorrect disability coded cases, correcting those cases, and developing an ongoing solution to prevent future disability coding errors.
- Tracking case corrections and analysis for error trends; developing and providing staff training based on identified error trends.
- Seeking and gaining approval from the Food and Nutrition Service (FNS) to modify ESAP and converting the entire ESAP caseload to Simplified Reporting.
- Assigning shorter certification periods (24 months) for ESAP.

Given this is a notable contribution to the PER, it is recommended that these cases be identified, reviewed, and fixed, if required, as soon as possible. If this cannot be accomplished through existing resources, it is recommended that surge support be engaged, as this would have a significant impact on reducing the error rate for this fiscal year.

While it is known that the ESAP caseload is impacting the error rate to a great degree, additional Find and Fix Case Reviews should occur, based on an updated error prone profile of impactful contributors to the PER, to guard against a 6+% SNAP PER.

Quality Assurance Framework

Create a Quality Assurance (QA) Framework.

RI DHS needs a strong quality assurance framework to meet the heightened standards of H.R. 1 SNAP performance. Specific SNAP QA key performance indicators (KPIs) should be aligned with federal compliance, increase individual accountability, establish consistent feedback loops, improve coordination of case review results, and use preventative QA intelligence to anticipate and address errors.

DHS uses an "error-prone profile" to conduct pre-authorization reviews that help catch mistakes before they happen. To be effective, this profile must stay closely aligned with the errors that have the greatest impact on benefit accuracy, which may require system changes. Currently, reviews are not applied consistently because supervisors balance many competing responsibilities, and updating the profile within the system is time-consuming and not very flexible. These challenges make it harder for DHS to use the pre-authorization tool to its full potential. Having the process in place is an important first step, but ensuring it is used effectively will make the biggest difference.

A QA framework helps agencies shift from "catching errors after the fact" to building systems and staff practices that prevent errors from happening. The framework is a structured approach to ensure casework is consistently accurate, reliable, and aligned with established standards. In SNAP administration, a QA

framework provides the tools and processes needed to prevent errors before they reach the QC stage. For DHS, we recommend that the following QA framework be developed and activated:

Develop a Quality Assurance unit that is solely focused on SNAP error prevention.

The QA team is responsible for consistently reviewing SNAP cases and identifying error-prone profiles that could compromise the state's overall SNAP PER. The profiles must have at a minimum a level two root cause identification, meaning who, what, why, when, where, and how the error occurred. In this way, the department can truly understand the remediation effort required to solve the problem.

Once DHS has its error rate in compliance, the team can focus on developing its ability to work in a culture of shared responsibility that consistently stays ahead of error trends to maintain compliance.

Require Supervisors to review a minimum of four standardized cases per month.

This supports error reduction through assessment, coaching, and performance improvement plans, if necessary. The performance expectations should match the federal requirements of the state; therefore, a tolerance level of no more than 6% of an error rate and 95% timeliness rate per month is suggested. This means that conferences should be formally held to review results and provide celebration and/or coaching. A level of accountability is required to attain and maintain performance levels that do not place the state at risk. DHS will need to work closely with its labor unions to determine the appropriate measures and process.

Establishing case review accountability is key.

According to interviews with several staff members, since cases are typically handled by multiple people it is challenging to determine who caused the error, even though only one person has authorized the case, thereby making it harder to establish accountability for errors made.

It is recommended that the state take a position that the one who authorized the case is the owner of the case action. This will require an ET to review the case before making the final determination to ensure an accurate one is made. In turn, the accommodation to conduct this quality review ahead of time must be provided to the ETs. This position will support a culture of shared responsibility, and reduce the number of hand-offs, which reduces error and delay to customers.

Develop a standardized case reading approach/methodology and tool.

Standardized case reviews ensure consistency across reviewers, identify the root causes of errors, and provide reliable, comparable data for improvement. These reviews not only help pinpoint policy, training, or system issues that drive errors but also create a foundation for continuous improvement, allowing states to improve accuracy, timeliness, and client access while avoiding federal penalties.

It is recommended that DHS develop a standardized case reading approach/methodology and tool so that reviews are consistent, focused, and aligned and can provide clear reporting of error trends so that appropriate corrective action can occur in near real time. A general tool can be used both at the field level for supervisors, and for the QA team to have consistent case reviews; however, the QA team will need the flexibility to devise targeted case reviews/tools when specific error trends present themselves. The tool will

ensure consistent, focused, and aligned reviews, providing clear reporting of error trends that enable appropriate corrective action in near real time.

Resource Considerations Quality Assurance

Shifting to a shared responsibility-driven culture, embedding organizational change management supports, and sustaining “find and fix” initiatives represent significant changes in workforce expectations and accountability. These adjustments should be advanced through DHS’s strategic planning, labor engagement, and business process mapping efforts to ensure alignment with policy, staff development, and operational needs.

Communications and organizational change management activities, as well as surge support for targeted “find and fix” case reviews, have been incorporated into the DHS Capital Budget and SFY27 decision packages. Associated costs are also being pursued through various federal grant submissions, with detailed planning and resource allocations reflected in DHS’s strategic planning and continuous improvement roadmap.

Develop a QA Collaborative.

DHS should create a QA Collaborative, run by the QA lead, which includes policy, operations, IT, Training, QC, QA, the Claims, Collections and Recoveries Unit (CCRU) and Appeals. This formal, standing, mandatory meeting that assesses all SNAP PER intelligence reports and determines the required planned actions, short and long-term, to maintain an acceptable error rate. The QA Collaborative reports to the Director for insights, support, and guidance. This will establish a formal shared responsibility-driven approach to attacking SNAP PER. The Collaborative would be charged with:

- Reviewing error trends found in QA, QC, Pre-Auths (if conducted), Supervisory Reviews, CCRU and Appeals
- Determining short- and long-term actions to fix and stay ahead of impending problems
- Determining Communications and OCM needs for impending changes
- Identifying training needs, immediate and long-term. Aside from new hire training, training must be driven by QA intelligence gained through all preventative case reviews, which ensure content addresses current issues and error trends. Emerging finite issues require finite micro or modular training that targets persistent behavior.

Quality Control

Introduction

The program’s accountability, and states’ PERs, depend on fair and uniform measurement. Inconsistent QC reviews create uneven results: the same type of case could be marked “correct” in one state or review unit and “error” in another. That not only undermines the credibility of the error rate but also makes it harder for states to identify true problem areas and apply effective corrective actions. QC consistency ensures that findings are comparable across reviewers, across states, and over time, which allows FNS to enforce standards fairly and enables states to target improvements with confidence.

To assess the current challenges and opportunities within Rhode Island's QC process, HSG conducted a comprehensive review. This included virtual interviews with staff from both QC and Program Integrity, an analysis of SNAP sampling plans and available QC reports, and a review of limited case narratives and disagreements received. This methodology provided a thorough overview of the state's QC operations,

revealing opportunities for improvement.

Note: RI QC cases have not yet been obtained for a thorough assessment. Upon completion of the QC case reviews in October 2025, this report will be updated with the findings.

Recommendations

Require SNAP Eligibility Experience

Require SNAP eligibility experience when filling QC positions (two years preferred, one year minimum).

RI DHS would benefit from requiring SNAP eligibility experience for QC positions. A QC reviewer's job is to assess the work of an eligibility worker. A QC reviewer with prior experience in eligibility determination will already be familiar with SNAP rules, including income limits, resource tests, household composition, and deductions. They understand the rationale behind a particular document, the calculation used, or the specific policy applied. This insight helps them to quickly identify potential errors and inconsistencies in a case file, going beyond simply checking boxes, and enables them to understand the reasoning behind the original eligibility determination.

QC Process Map

Develop a process map for QC reviews, including milestones for completion.

QC should develop a documented process map for QC review completion. At a minimum, the process map should include scheduling interviews and case preparation, conducting interviews, and specifying dates for percentage completion (50%, 75%, 90%, 100%). A process map ensures that every reviewer follows the same consistent steps, regardless of their individual experience or location. A process map serves as a valuable training tool for new reviewers allowing them to see the flow of the entire review process, and making it easier to follow at each stage, from case selection to final decision.

Establish QC Reviewers Performance Standards

Establish performance standards for QC reviewers based on accuracy and completion rates.

Requiring key performance indicators for QC staff to meet provides real accountability. Accuracy is the cornerstone of a QC reviewer's role, ensuring that the feedback the reviewer provides to frontline staff is consistently on the mark.

When QC reviewer errors are discovered during the federal re-review process, the state's reported error rate is adjusted negatively to account for these findings, which have significant implications for program integrity and state finances. For example, if state QC calls a case correct but the FNS re-review finds an error, the error is counted, but the state also incurs a penalty to the error rate because it was an undetected error. FNS may apply a bias adjustment upward, inflating the reported error rate.

A completion rate standard ensures that the workload is being managed effectively and that there are no backlogs that could jeopardize compliance. Just like any other role, a clear goal for productivity can motivate reviewers to stay on track. These two metrics ensure the program's integrity, promote continuous improvement, and provide a clear framework for accountability. This balanced approach creates a culture of shared responsibility where reviewers are encouraged to be both efficient and thorough, ultimately strengthening the integrity and effectiveness of the entire program.

QC Reviewer Training

Provide QC training for reviewers; ensure they receive the same training as ETs.

DHS must ensure QC reviewers receive comprehensive training. Reviewers must follow a rigorous, standardized process to ensure that all cases are assessed using the same methodology per the FNS 310 Handbook. Requiring that QC reviewers complete comprehensive training guarantees that they are well-versed in the specific procedures, federal regulations, and policies to avoid bias and ensure that their findings are valid and consistent across all cases.

Additionally, ETs apply a complex set of federal and state regulations to determine a household's eligibility and benefit amount. To accurately review these decisions, QC reviewers must have an equally deep and current understanding of these same policies. Providing the same training ensures that both groups are operating from the exact same policy manual and interpretation and eliminates the risk of reviewers using outdated or different policy knowledge to assess a case, which can lead to incorrect findings. If a QC reviewer receives different or less comprehensive training, they may not be equipped to recognize subtle but critical details in a case record. This can lead to missed errors or, conversely, an incorrect finding of an error.

Shared Responsibility & Engagement

Expand Shared Responsibility through Customer and Partner Engagement.

Because both client and worker errors contribute to Rhode Island's PER, DHS should strengthen proactive customer communication tools, expand SNAP Connect, and engage community partners to help households understand and meet reporting requirements. These actions complement internal reforms and extend accuracy improvements into the client-facing environment.

Resource Considerations Quality Control

Adjustments to QC performance expectations and accountability measures, along with supporting training and engagement activities, represent important shifts in workforce standards. These changes should be advanced through DHS's strategic planning, labor engagement, policy development, and business process mapping to ensure they are feasible, transparent, and supported across the workforce.

Training alignment, performance standards, and expanded engagement supports have been incorporated into the DHS Capital Budget and SFY27 decision packages. Associated costs are also being pursued through various federal grant submissions, with detailed planning and resource allocations reflected in DHS's strategic planning and program integrity roadmap.

Business Process Optimization

Introduction

Streamlined workflows—supported by clear policies, integrated systems, and well-defined roles—help ETs focus on accurate determinations rather than administrative hurdles. For customers, this translates into faster access to benefits, fewer unnecessary requests for documentation, and less churn. Ultimately, efficient business processes protect both program integrity and participant experience, allowing agencies to meet the dual goals of accuracy and timely service.

HSG conducted a series of discovery interviews and on-site observations. Discovery began with two virtual sessions with operations administrators and senior supervisors to gather initial insights and establish areas of focus. The team visited three offices – Warwick (non-lobby processing), Holden Street (walk-in office), and Shepard (appointment office) – to observe operations and speak directly with staff. In total, HSG engaged with

a total of 28 individuals, including the assistant administrator, senior supervisors, supervisors, ETs, and members of the quality control and training teams. Observations of ETs included direct customer interactions, both over the phone through SNAP Connect and in person through the lobby. This combination of virtual sessions, on-site visits, and leadership discussions provided a comprehensive perspective across roles, offices, and functions, enabling the identification of consistent patterns, challenges, and opportunities for improvement.

Note: As a next step, HSG will conduct a business process optimization session with ETs and supervisors in October 2025 to map out the existing processes in detail. This will include a process improvement workshop, mapping by task type, and process analysis of each map to identify inefficiencies and surface opportunities for standardization and streamlining. These activities will ensure that solutions are grounded in staff experience, highlight pain points that contribute to errors, and generate actionable recommendations for improving accuracy, efficiency, and overall customer experience.

Recommendations

Refresh and Refocus Supervisor Role

Refresh and refocus the Supervisor role to strengthen accuracy and staff development.

Supervisors in Rhode Island's eligibility programs often spend time on potentially low-value administrative tasks. In addition, the scope of supervisory responsibilities is broad and inconsistent across offices, often shaped by immediate operational pressures rather than immediate and/or long-term priorities. These factors reduce the time supervisors can devote to coaching employees, reinforcing policy compliance, and strengthening quality assurance.

DHS established a dedicated tiger team to assess and evaluate the current scope of supervisory responsibilities. This team will continue to identify low-value tasks that can be eliminated or automated and recommend strategies to realign supervisors' roles toward higher-impact/quality work. Building on this foundation, supervisors' focus should shift to case accuracy, staff mentoring, and continuous improvement, supported by structured observations and real-time feedback. Performance improvement resources and tools, such as the observation and case review checklists, can be leveraged to strengthen oversight and consistency.

Implementing the tiger team's recommendations will provide a clear path for supervisors to move away from administrative burdens and toward higher-value contributions that directly support program integrity and staff development.

Eligibility Process

Standardize and streamline eligibility processes and monitor for compliance and execution.

Variations in processing applications, entering data into RIBridges, and documenting case notes often stem from the use of individualized documentation templates and differing interpretations of verification requirements. As a result, staff spend additional time reworking cases, customers provide information more than once, and the risk of errors increases.

Developing a step-by-step procedural handbook will support ETs in their daily work by standardizing operating practices and reducing repeat interactions with customers. Standard use of consistency tools—such as documentation, interview, and verification templates—along with clear instructions for keying cases in RIBridges will help ensure uniformity. The handbook should also stress focusing on one case at a time and prioritizing returned verifications to reduce unnecessary delays.

By embedding these practices in standardized operating procedures, DHS can ensure consistency across

offices, reduce reliance on supervisor-specific direction, and minimize errors.

Redesign Training

Redesign training to build skills and reduce errors.

Staff training should be redesigned to better mirror the real-world environment and build interviewing skills across both new hires and tenured staff. Current approaches do not consistently prepare staff to manage complex eligibility interviews or decision-making. Training should begin with the application process and emphasize active interviewing, clear communication of reporting requirements, and confident handling of conflicts or discrepancies.

A final assessment should incorporate case scenarios that combine interviewing techniques with system navigation to replicate actual work. DHS should also explore modern digital tools, including interactive simulations and micro-trainings, that can be deployed quickly when error trends are identified. Using AI to support training development and refinement will help meet these needs with greater speed and precision. In addition to classroom instruction, a progressive on-the-job training (OJT) plan with clear benchmarks will reinforce skills and build confidence.

DHS has also established three tiger teams to strengthen training and development by:

- Redesigning new hire training and onboarding for stronger early skill development.
- Creating targeted training strategies for existing staff to reduce SNAP PER and prepare for upcoming policy changes.
- Developing processing labs that allow staff to apply training concepts in a supported, live-case environment.

Implementing these changes will directly address the root causes of errors, strengthen professional development across the workforce, and create a stronger foundation for long-term accuracy and program integrity.

Improve Pre-authorization Reviews

Improve clarity, accountability, and effectiveness in pre-authorization reviews.

Pre-Authorization case reviews are crucial for preventing known, persistent, and impactful errors from entering the SNAP QC sample; however, if they are not aligned with the error trends, the Pre-Authorization initiative loses its effectiveness. Pre-Authorization case file criteria must be determined by informed, near-real-time performance data and requires agile decision making...specific to the challenges the ETs are experiencing.

To ensure the effectiveness of pre-authorizations, triggers must be clearly defined and communicated to staff, supported by a standardized rubric to guide consistent reviews. A closed-loop feedback process should be implemented so that supervisors can verify corrections, provide targeted coaching, and use results to reinforce staff development. Pre-authorization outcomes should also be tracked and made available at the individual, team, office, and agency levels to provide transparency, identify trends, develop micro trainings for correction, and ensure consistency across the organization. To further strengthen accountability, random reviews must be conducted behind Supervisors to validate the accuracy and consistency of pre-authorization decisions and guidance to ETs.

If the current error-prone profile cannot be updated to reflect current error trends, we recommend developing a trackable, enforceable, and manual process to identify the true error-prone case files and manually submit them to Supervisors for review before disposition. Until the error-prone profile is re-established to current trends and the system can pull them appropriately at the right time for review, we

recommend Supervisors stop the current process as is and turn to a manual process for impactful pre-authorization case reviews, standardized case reviews for individual performance improvement, and Find and Fix efforts.

Performance Management

Build quality into performance management.

Supervisors currently rely heavily on manual logs and metrics focused on productivity—such as the number of cases processed, volume of case notes, and individual worker inbox management. When performance is often evaluated by volume alone, DHS runs the risk of reinforcing speed over accuracy, thereby contributing to recurring errors that undermine program integrity. We recommend that supervisors regularly observe interviews as a means of measuring performance, which enhances their ability to assess interview quality and provide timely feedback on critical skills such as reviewing information, clarifying discrepancies, data entry, and explaining reporting requirements.

Recommended performance indicators include, at a minimum, attendance, time in service (the amount of time spent actively serving customers), case accuracy, one-touch rates (the percentage of cases completed without the need to request verifications), and task completion times. Tracking task completion times will provide a clearer understanding of the average effort required for each task type, ensuring that performance expectations are realistic and aligned with the actual complexity of work.

We also recommend establishing a recurring all supervisor meeting focused on shared responsibility that will provide a forum to share local findings, align practices, and create consistent expectations for process quality statewide. Aligning evaluation criteria with both accuracy and efficiency will strengthen staff capacity, reduce recurring errors, and support sustained improvement in the SNAP payment error rate.

Resource Considerations Business Process Optimization

Changes to business processes, supervisory roles, and training expectations represent a significant shift in workforce accountability and daily practice. These adjustments should be advanced through DHS's strategic planning, labor engagement, and business process mapping to ensure expectations are clearly communicated and supported across staff, supervisors, and union partners.

Pre-authorization review profile and system changes, along with analytical and immersive interviewing training, have been incorporated into the DHS Capital Budget and SFY27 decision packages. Associated costs are also being pursued through various federal grant submissions, with detailed planning and resource allocations reflected in DHS's strategic planning and continuous improvement roadmap.

IT System/Workflow Analysis

Introduction

It's critically important for an IT system to run well in SNAP administration because the entire program depends on accurate, timely, and secure data processing. A reliable eligibility system ensures that applications are processed without delay, income and household information are calculated correctly, and benefits are issued on schedule. A well-functioning eligibility system streamlines workflows, embeds policy rules directly into eligibility determinations, and integrates with data sources like unemployment insurance or child support to strengthen accuracy.

HSG conducted discovery activities focused on application and processing workflow—including task creation,

workload volumes, staff rotations, task assignments, monitoring practices, and escalation pathways. These activities included interviews with supervisors and ETs who interact with the system daily, RIBridges demonstrations, and a review of the Worker Inbox in RIBridges and Tableau dashboards.

Throughout this assessment, it has become clear to HSG that there are significant eligibility system limitations that are and will continue to impact the SNAP PER which needs further discovery. Over the next 30 days, HSG will conduct an exploration of Rhode Island's eligibility system priorities and how they influence changes/enhancements and how they impact the state's PER. This review will include an analysis of the current IT roadmap to evaluate whether the existing plan supports accuracy. HSG will also assess workflow logic and integration points with external data sources to identify where system design may contribute to recurring errors or administrative burden. In addition, the system change order process will be assessed to ensure it aligns with program integrity goals. Findings from this review will be used to provide targeted recommendations for IT enhancements with the highest potential to reduce payment errors and strengthen overall program performance.

In the meantime, given the historical experience with enhancements, automation, and system fixes, it is recommended that RI DHS implement a formal plan of implementation and monitoring around any system implementation that includes:

- Project charter with clear goals and objectives for success.
- Implementation plan, which outlines timelines, roles, responsibilities and OCM activities needed to understand the intent of the change and further the adoption of it.
 - For example, understanding the need for quality checks will make it less likely that workers will bypass these checks when processing cases.
- A baseline metric of performance.
- Defined performance expectations or targets.
- Weekly reporting of any system changes and their performance.
- Plan for refinement to meet expected performance.

Data, Technology, Automation, and AI Tools

Data and technology play a critical role in improving accuracy and strengthening program operations. Reliable data provides insight into potential error trends and areas for improvement. Automation reduces the burden of repetitive tasks, limiting human error and allowing staff to focus on higher-value work. AI expands these capabilities by detecting patterns, highlighting risks, and delivering timely guidance. Together, data, automation, and AI create programs that are more precise, efficient, and adaptable, while helping minimize errors.

Recommendations

AI-powered Smart Policy Hub

Procure an AI-powered Smart Policy Hub *that integrates QA reviews and training to create a comprehensive feedback loop and output.*

RI DHS would benefit from a centralized technology-driven policy repository that is quick, simple, and easy for staff to use during case processing. The system must provide searchable, plain-language guidance, decision aids, and step-by-step prompts that can be accessed in real time.

Modern technology can combine a policy hub with training and simulation development, alleviating the significant content development workload from the training team, which allows them to focus on preventative

and remediation training, operating in near real time, and the information the Department has regarding 'now' performance. This system integrates the QA review process and data by tracking and monitoring performance based on review outputs, intelligently informing training and policy needs without manual analysis. The system connects policy, and staff needs as identified through case reviews and training. This AI capability strengthens the QA prevention strategy by housing reviews of worker performance, analyzing policy application and training needs based on review intelligence, and providing adaptive recommendations. Based on the Department's needs, the system can develop new training to address immediate requirements, or refresh and rehaul existing policies or training that staff members are not adopting, as indicated by the review system.

Commercial Employment Data

Expand the use of commercial employment data to monitor household changes.

To reduce the reliance on self-reported information, RI DHS can expand the use of commercial data sources that actively monitor household changes. These tools capture shifts in employment and income (especially beneficial for ABAWD households in SNAP and Medicaid), household changes, or recipient moves that are common causes of payment errors. While federal rules still require follow-up when data is unclear, using these sources as case clues provides critical insight that strengthens accuracy, improves oversight, and helps reduce the PER.

To minimize administrative burden, automate the function that identifies questionable information requests from households and, if no response is received, close or deny the case.

Increase Online Capabilities

Increase utilization of online capabilities.

Launch a communication and engagement campaign that drives customers to online platforms (current utilization is approximately 30%), using clear messaging and simple how-to resources to make online access the fastest and easiest option. The campaign should include heavy lobbying or in-office assertion to the portal. This initiative can be developed and executed by the Communications and OCM support system mentioned as a need on page eight of this report. The shift of customers to the digital space will reduce administrative burdens on the workforce, lower the wait time of customers, minimize paperwork, and enhance customer experience, which is particularly crucial given that many new initiatives will affect the speed of service.

Resource Considerations IT System/Workflow Analysis

System and workflow changes will require only modest adjustments to staff work processes, but they will have significant impact on accuracy, efficiency, and program integrity. These changes should be addressed through DHS's strategic planning, labor engagement, and business process mapping efforts to ensure staff adoption, policy alignment, and operational clarity.

The procurement of a Smart Policy Hub, expansion of commercial data monitoring, and launch of a customer online utilization campaign have been incorporated into the DHS Capital Budget and SFY27 decision packages. Associated costs are also being pursued through various federal grant submissions, with detailed planning and resource allocations captured through DHS's strategic planning, technology roadmap, and organizational change management activities.

Optimizing Workload Distribution and Staff Assignments

Workload management is essential to SNAP administration because it directly affects accuracy, timeliness, and

staff capacity to serve clients effectively.

Well-managed workloads—balanced across teams, supported by efficient processes, and informed by data allow staff to spend the right amount of time on each case, apply policies correctly, and provide better service to participants. Effective workload management not only improves program performance but also creates a healthier work environment that sustains long-term quality in SNAP administration.

Current challenges in workload management include:

- Duplicate or outdated tasks that create unnecessary work.
- The Worker Inbox showing tasks rather than full cases, making prioritization harder.
- Manual processes (like spreadsheets) required to assign and reconcile work.
- Large queues that may include non-actionable tasks, inflating backlogs.
- Rotating staff assignments that sometimes create uneven exposure across programs.

Recommendations

RI Bridges Task Logic and Distribution

Prioritize a review of RI Bridges task logic and automate task distribution.

The task logic review should focus on reducing non-actionable tasks, streamlining task disposal, and ensuring due dates are accurate and relevant. Leadership reporting should emphasize the case level rather than the task level, providing a clearer picture of actual workload volumes and enabling better prioritization of complete cases. Tableau dashboards can serve as an interim solution until longer-term system enhancements are in place. To further support real-time workload management, anchor magnet logic should be modified to bundle tasks earlier—before a worker claims the anchor task—allowing leadership to assign complete cases more efficiently. DHS should also explore additional technology options to automate task distribution for workable and unassigned tasks, reducing reliance on spreadsheets and manual reconciliation

Redesign the Rotation Model

Redesign the rotation model to balance specialization with cross-program knowledge.

Shorter cycles for limited-exposure programs like d CCAP, combined with stronger standard operating procedures (SOPs) and cross training, would improve staff readiness and accuracy to handle combination cases. Once task management workload management is resolved, redesigning the rotation model can then be designed for greatest impact.

Worker Inbox Cleanup

Conduct worker inbox cleanup to reset workloads and establish a baseline for improvement.

In September, a tiger team was created to address the cleanup of the Worker Inbox. Building on this work, DHS should continue refining task creation, assignment processes, and rotation practices to prevent backlogs from recurring and sustain a manageable, accurate workload flow.

Expand SNAP Connect

Expand SNAP Connect statewide and add second outbound call.

The SNAP Connect pilot, which provides for an automated call to customers to complete the SNAP interview upon application submission, and allows customers to call in at their convenience to complete the interview, rather than the traditional scheduling of an interview appointment date and time, has demonstrated strong results and should be expanded statewide as soon as possible. This expansion should include adding a second outbound call attempt through the dialer to reduce inbound call volume and reach more applicants proactively. Quality checkpoints for application processing should also be applied for staff assigned to SNAP Connect.

Resource Considerations Optimizing Workload Distribution and Staff Assignments

Adjustments to workload distribution, staff assignments, and task management processes will require moderate shifts in workforce duties and accountability. These changes should be addressed through DHS's strategic planning, labor engagement, and business process mapping efforts to ensure alignment with policy, union considerations, and staff development pathways.

Task logic fixes, Anchor Magnet enhancements, task distribution improvements, and queue management tools are included in the DHS Capital Budget and SFY27 decision packages. Associated costs are also being pursued through various federal grant submissions, with detailed planning and resource allocations reflected in DHS's strategic planning and technology roadmap.

Implementation Timeline

Below is a recommended implementation timeline to reduce the RI DHS SNAP PER based on the strategies identified in this report. Those of highest priorities are asterisked; these should be considered, developed and activated as soon as possible.

 Phase 1: Foundation Months 1-3	
Policies and Waivers	✓ * Move to simplified reporting for all households. ✓ * Revoke Change of Address waiver. ✓ * ESAP certification (24 months). ✓ Self-employment standard deduction.
QA Framework	✓ * Conduct ESAP Find and Fix reviews. ✓ * Build a culture of quality through OCM. ✓ Stand up the QA unit. ✓ Supervisors conduct 4 standardized case reviews/month. ✓ Establish QA Collaborative.
QC Improvements	✓ * Develop a QC process map and performance standards. ✓ Begin QC staff training aligned with ETs.
Business Process	✓ * Design simulated Interview training – targeted. ✓ * Develop and implement the procedural handbook to tighten up Intake and Renewal processes. ✓ Redesign the new hire simulation-based training.
IT/Workload	✓ * Expand commercial data monitoring. ✓ * Procure AI Smart Policy Hub. ✓ Clean up Worker Inbox.
 Phase 2: Tools and Processes Months 4-6	
QA Framework	✓ Continue supervisor case reviews ✓ Embed QA Collaborative activities. ✓ Realign performance metrics to accuracy requirements.

QC Improvements	✓ Eligibility experience required for QC staff. ✓ Continue QC staff training.
Business Process	✓ Standardize and finalize the procedural handbook. ✓ Continuing Tiger Teams. ✓ Advance training redesign.
IT/Workload	✓ Increase online utilization campaign. ✓ Automate task distribution and dashboards.
 Phase 3: Integration and Scaling Months 7-9	
QC Improvements	✓ Finalize QC process map. ✓ Refine alignment with ET training.
Business Process	✓ Expand Tiger Team outputs statewide.
IT/Workload	✓ Expand automation of task distribution and dashboards.
 Phase 4: Sustainment Months 10-12	
Business Process	✓ Solidify performance metrics realignment.
IT/Workload	✓ Continue automation, utilization campaigns, and monitoring.
QA Framework and QC	✓ Institutionalize QA Collaborative and supervisor case reviews as recurring practices.

Key Performance Indicators

Reducing Rhode Island’s SNAP PER to below the federal threshold requires not only strong recommendations but also a strategy for measuring progress. Key Performance Indicators (KPIs) provide the framework to evaluate effectiveness, inform remediation, guide corrective action, and ensure accountability at all levels of the Department. (These sorts of measures should also be developed upon each system enhancement to ensure DHS is receiving the Return on Investment (ROI) as expected.)

KPIs serve as the bridge between recommendations and outcomes by translating high-level goals into concrete, trackable measures. They define what success looks like in measurable terms, enabling leadership to monitor progress, staff to understand expectations, and stakeholders to see the impact of reforms in real time.

By embedding KPIs into daily operations, Rhode Island DHS can move toward proactively managing program quality. Over time, this framework will also strengthen program integrity, improve customer experience, and ensure that progress is both measurable and sustainable. These KPIs will also serve as the performance benchmarks reported under Rhode Island’s CAP.

HSG recommends the adoption of the following set of KPIs initially but also recommends the creation of a KPI tiger team. This tiger team would take a deeper dive into the major recommendation areas - policy

simplification, quality assurance, quality control, business process optimization, and IT and workload management - to fully explore the full set of meaningful KPIs that inform remediation and that are feasible within the opportunities and constraints of RI DHS.

Policy Simplification KPIs

Simplifying reporting rules and aligning certification periods are central recommendations to reduce errors caused by inconsistent or confusing requirements. To track the effectiveness of these changes, KPIs in this area should include:

- **Certification Period Accuracy:** Measure the percentage of households correctly assigned to the appropriate certification period based on program rules.
 - Target 94% compliance.
- **Error Reduction in Shelter Verification:** Monitor shelter-related payment errors before and after policy alignment.
 - Target reduction of 75% in the first year.
- **Staff Policy and Procedure Understanding:** Measure the percentage of staff submitting clarification inquiries on a specific policy or process after implementation.
 - Target: Fewer than 5% of staff submit clarification inquiries within three months of implementation.
- **Policy Adoption Accuracy:** Track the percentage of cases processed correctly under newly implemented policy rules, as verified through QA or supervisor reviews.
 - Target: 90% accuracy within the first three months of implementation, improving to a minimum of 94% within six months.

Quality Assurance KPIs

Preventing errors before they reach the federal QC review is a primary goal of building a strong QA framework. KPIs in this area should align with federal requirements to include:

- **Worker Performance Accuracy Rate:** Track worker performance through standardized case reviews and that align with federal requirements.
 - Target: 94% accuracy within three months.
- **Worker Timeliness Rate:** Track worker timeliness through standardized case reviews and that align with federal requirements.
 - Target: 95% timely.
- **Reduction in Repeat Errors:** Frequency of the same error appearing more than once for a single worker or unit.
 - Target: 25% reduction within the first year.
- **Worker Improvement Rate:** Track the percentage of workers whose error rate decreases after targeted QA coaching.
 - Target: 75% of coached workers show improvement within three months.
- **Supervisory Case Review Compliance:** Measure the number of reviews completed per supervisor compared to the expected number (e.g., four per worker per month).
 - Target: 100% completion of required reviews.
- **Case Review Error Rate:** Measure the percentage of Supervisor-reviewed cases found to have at least one error.
 - Target: Less than 6% error rate across all supervisor reviews by year-end.

Business Process Optimization KPIs

Streamlining eligibility processes, strengthening supervision, and redesigning training are essential to reducing errors tied to case management and staff performance. KPIs for this area should include:

- **Supervisor Observations Conducted:** Measure the percentage of supervisors who complete at least two structured case observations per worker each quarter.
 - Target: 100% of workers receive two documented observations per quarter.
- **One-Touch Case Completion Rate:** Measure the percentage of applications or renewals finalized in a single interaction without a follow-up request for additional verification.
 - Target: 80% of all applications/renewals completed in one touch.
- **Interview Quality Score:** Measure the percentage of interviews scoring at least 94% on a standardized rubric that assesses the use of open-ended questions, explanation of reporting requirements, accuracy of data collection, and documentation quality.
 - Target: 90% of interviews observed meet or exceed the standard.

IT/Workload Management KPIs

Technology improvements and better workload distribution are necessary to reduce inefficiencies and prevent errors tied to manual processes. KPIs in this area should include:

- **AI Smart Policy Hub Utilization:** Measure the percentage of ETs who access the Smart Policy Hub at least once per week.
 - Target: 75% utilization within six months of implementation.
- **Reduction in Non-Actionable Tasks:** Measure the decrease in duplicate or non-actionable tasks generated.
 - Target: 50% reduction within six months; 100% within 12 months.
- **Online Application Usage:** Measure the percentage of applications submitted online versus paper.
 - Target: Increase online application submission from 30% to 60% within twelve months, and the percentage of online account holders actively using the system.