



## Policy Brief

# Supporting Medi-Cal Recipients by Screening for Employment Eligibility in San Francisco

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*This policy project was developed by Aspen Policy Academy leaders while participating in the 2026 Tech Executive Leadership Initiative (TELI). This policy brief provides an overview of the leaders' proposed solution. The full project is [available here](#). Please note that all authors' opinions published here are their own. This publication does not reflect the views of the Aspen Policy Academy or the Aspen Institute.*

## Executive Summary

The City and County of San Francisco (CCSF) Mayor's Office of Innovation, in partnership with the San Francisco Human Services Agency (SFHSA), should pilot a digital screening tool that routes San Francisco residents seeking job and volunteer opportunities from JobsNOW! according to their eligibility and access needs. A digital screening tool would free staff to address high-need cases while routing job-ready residents to self-service tools.

Under this pilot program, CCSF would be able to redirect its limited frontline staff toward high-need residents who require hands-on support by automating the screening process and directing residents into one of four support and onboarding tiers. This scalable model would help maintain system stability, connect residents to career and volunteer opportunities, and help preserve their benefits.

## Background

CCSF faces a critical turning point as the federal [One Big Beautiful Bill Act](#) (OBBBA, also known as H.R. 1), passed in 2025, introduces an 80-hour monthly work requirement for Medi-Cal recipients ages 19 to 64. This requirement is projected to increase demand on San Francisco's workforce services and referral programs, pressuring existing systems to scale rapidly to serve the [25,000 to 50,000 residents](#) who are at risk of losing their health benefits due to the new work requirements. One of the main workforce programs offered

by CCSF is [JobsNOW!](#), a free employment program that matches job seekers with employers. [JobsNOW! successfully placed more than 33,000 residents](#) in jobs between 2018 and 2024. Demand for JobsNOW! under H.R. 1 is expected to increase by an additional 40,000 residents, according to estimates shared by the SFHSA team.

Current CCSF workforce programs rely on labor-intensive intake processes that will be difficult to scale to support increased demand without a shift in strategy and technology use. Without structural changes to handle the anticipated surge, these manual intake processes will likely create significant challenges. Delays could prevent residents from accessing mandated workforce development programs, putting them at risk of losing Medi-Cal and other essential benefits due to procedural noncompliance. Administrative bottlenecks could result in a significant loss of healthcare coverage for eligible San Francisco residents, particularly those in vulnerable populations who may already struggle to navigate the existing process.

The use of digital screeners for program onboarding and intake aligns with research conducted by the [Digital Benefits Network at Georgetown University](#) on the ways that states are modernizing integrated eligibility systems to provide immediate, personalized guidance during major federal policy shifts.

## **Recommendation**

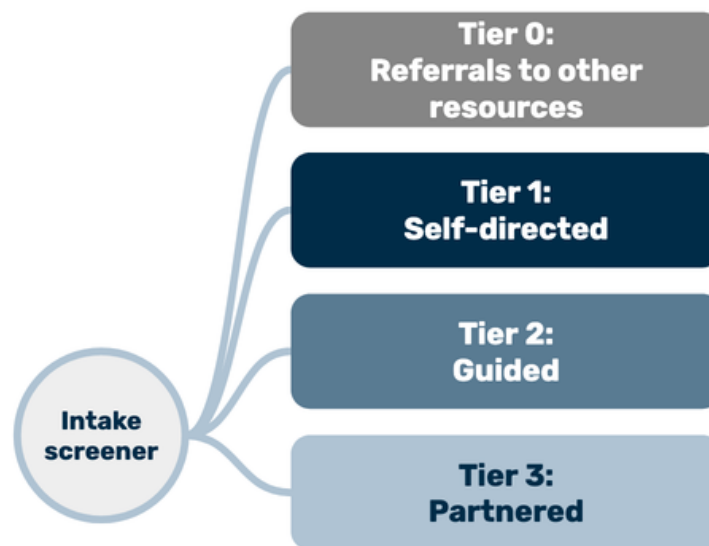
The City and County of San Francisco Mayor's Office of Innovation, in partnership with the San Francisco Human Services Agency, should pilot a digital screening tool that routes San Francisco residents through the JobsNOW! onboarding and intake according to their eligibility and access needs. The JobsNOW! intake screener would be a digital tool, accessible online by mobile phone or computer, that would route residents to the appropriate level of workforce development support based on their situation, barriers, and readiness. The screener should take 3–5 minutes to complete on a mobile phone or computer and should be available in San Francisco's primary languages.

The first section of the screener would cover eligibility, determining whether a resident meets basic program criteria such as service area and income thresholds. This section would align with much of the existing intake form, but with recommended adjustments for flow and ease. These questions would need to be refined by the CCSF team to reflect the program's specific policy requirements. The second section of the screener would cover barriers and readiness, assessing employment, digital, and communication barriers to determine the appropriate level of JobsNOW! support for the resident's onboarding to the

program. This section would include additional questions that are not on the existing intake form to better understand the resident's situation.

Based on responses to these sections, residents would be assigned to one of four tiers for onboarding and intake support:

- **Tier 0: Screen out:** Residents do not meet the JobsNOW! eligibility criteria and are redirected to other resources such as CalJOBS, America's Job Center, and BenefitsCal.
- **Tier 1: Self-directed:** Residents are eligible with no significant barriers and can proceed independently with account creation, document upload, and virtual onboarding.
- **Tier 2: Guided:** Residents are eligible with some barriers (e.g., low income, no transportation, dependent care) and receive self-directed access plus a scheduled staff check-in.
- **Tier 3: Partnered:** Residents face significant barriers (e.g., housing instability, legal history, limited work experience, digital access challenges) and are connected directly with a caseworker for one-on-one support throughout the remaining intake and onboarding steps.



With the digital screening tool, job-ready and digitally comfortable residents would be routed to self-service onboarding. They would be able to take steps such as creating online accounts, inputting skills and uploading their résumé, completing JobsNOW! preparation, and undergoing any other onboarding needed before being matched to a job or volunteer opportunity. Introducing this Tier 1 path would free up staff time for residents who fall into the higher tiers and may require more intensive one-on-one support.

The digital screening tool would also provide responsive helper text and personalized guidance directly within the intake form, answering frequently asked questions about workforce development programs without requiring human intervention. This approach would help residents resolve common questions and provide clear expectations about their situation without taking up additional staff time.

Additionally, because the tiered intake and triage system could be accessed digitally by mobile phone or computer, residents could complete the intake and triage system with trusted peers, case managers, or other supporters. This means that residents who prefer in-person support or have limited English proficiency could work with their trusted community organizations, such as food banks and senior centers, and enroll in familiar settings. Over time, CCSF could train residents who have already successfully navigated the workforce program as peer navigators who can guide new clients, providing a level of credibility and scale that existing staff alone cannot achieve.

This proposal would streamline staff capacity so that CCSF could focus more on residents in Tiers 2 and 3 who need one-on-one support; expand the reach of workforce services by allowing people to access the program intake flow through a low-barrier digital entry point; and ensure that residents retain their benefits while building trust in government services. Crucially, the option for residents to receive in-person support would remain available alongside this supplemental digital pathway to ensure continued accessibility. The digital screening tool would also connect residents to other relevant benefits and resources if they do not meet JobsNOW! eligibility requirements or are interested in other benefits, supporting their longer-term economic well-being beyond the JobsNOW! program.

## **Budget and Implementation**

We suggest an initial pilot phase lasting 6 months to refine the build and integrations and to define the pilot participants. The initial cost estimate is \$120,000, covering part-time engineering, operations, and user experience support, with the expectation that CCSF would also provide critical hands-on strategic, implementation, and planning support. This investment is intended to prevent systemwide administrative overload and the downstream costs associated with large-scale coverage loss.

## Projected staff capacity needed for the tiers of support:

	Self-directed	Guided	Partnered
Tier	1	2	3
Who they are	<ul style="list-style-type: none"> <li>No major barriers</li> <li>Can navigate JobsNOW! services independently</li> </ul>	<ul style="list-style-type: none"> <li>Some barriers</li> <li>Has positive signals</li> <li>Would benefit from check-ins</li> </ul>	<ul style="list-style-type: none"> <li>Significant barriers</li> <li>Needs a caseworker working alongside them</li> </ul>
What triggers it	<ul style="list-style-type: none"> <li>Default self-service</li> <li>No barrier flags raised during screening</li> </ul>	<ul style="list-style-type: none"> <li>Extremely low income</li> <li>No transportation</li> <li>No tech access</li> <li>Dependent care responsibilities</li> <li>Unclear on benefits impact</li> </ul>	<ul style="list-style-type: none"> <li>Housing instability, legal barriers, or not working</li> <li>No recent work history</li> <li>Not feeling ready</li> </ul>
What they get	<ul style="list-style-type: none"> <li>Virtual orientation</li> <li>JobsNOW! portal access</li> <li>Customer service line</li> </ul>	<ul style="list-style-type: none"> <li>Self-directed offerings</li> <li>Scheduled staff check-ins</li> <li>Barrier-specific support</li> </ul>	<ul style="list-style-type: none"> <li>Housing instability, legal barriers, or not working</li> <li>No recent work history</li> <li>Not feeling ready</li> </ul>
Staff time	~0 hrs	~0.5 hrs	~2 hrs
Est. share	~40% of clients	~30% of clients	~20% of clients

Several areas warrant refinement with the CCSF team before implementing the pilot, including identifying the specific eligibility and tiering criteria, finalizing the documentation required during screening versus later in intake and onboarding, and providing the infrastructure needed to support Tier 3 and 4 intake scheduling directly from the screener. The CCSF would also have the opportunity to expand the screener to capture residents' job and volunteer preferences and to explore the technical feasibility of connecting residents directly to self-service pairing opportunities. Future enhancements could further improve accessibility and reach, such as expanding language and communication options beyond the current offerings, enabling unique referral links from partner benefits programs to streamline warm handoffs, and introducing AI-powered Q&As to guide residents through the screener in real time. To further extend staff capacity, individual orientation sessions could eventually give way to group-based onboarding for residents who have completed the digital intake process and share similar career or volunteer goals.

**If you'd like to learn more, see the full project, including a prototype guide, stakeholder FAQ, and demo video, at [aspempolicyacademy.org/project/sf-digital-screening-tool-2026](https://aspempolicyacademy.org/project/sf-digital-screening-tool-2026).**



## About the Tech Executive Leadership Initiative (TELI)

This project was completed as part of TELI, a partnership between the Aspen Institute's Policy Academy and the Tech Talent Project. TELI is a multiweek skills-building initiative that prepares experienced technology leaders to engage effectively with public sector challenges. Learn more at [aspempolicyacademy.org/teli](https://aspempolicyacademy.org/teli).

Photo by Dmitry Kropachev