



Policy Brief

Digitizing the JobsNOW! Intake Process for Medi-Cal Clients 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 Mayor's Office of Innovation (MOI) should replace the current paper-based JobsNOW! client intake process for employment services with a prefilled web form that is integrated with the California Statewide Automated Welfare System (CalSAWS), the case management system supporting all public assistance programs in the state. This approach would benefit applicants by eliminating the need to enter information into multiple systems and reduce time-consuming data entry work for the Employment and Training Specialists (ETS) who verify benefits eligibility.

A prefilled web form would allow ETS to focus on supporting Medi-Cal recipients who are most at risk of losing their coverage and thereby help avert a potential public health and fiscal emergency. It would also help ETS effectively manage the significant increase in new clients expected as a result of the work requirements imposed by the federal One Big Beautiful Bill Act (OBBBA, also known as H.R. 1) passed in 2025. MOI should partner with the San Francisco Human Services Agency (SFHSA), CalSAWS, and the San Francisco Department of Technology to ensure that this solution is operational by the January 1, 2027, H.R. 1 implementation deadline.

Background

Medicaid eligibility has historically been based on income and categorical criteria, independent of employment. However, under the new H.R. 1 work requirements, Medi-Cal recipients must complete 80 hours per month of work, volunteering, or training and undergo an enrollment assessment twice a year. In light of the new requirements, the City and County of San Francisco and SFHSA expect about 20,000 additional Medi-Cal recipients to seek employment services in order to maintain their coverage.¹

The City and County of San Francisco's main infrastructure for matching low-income residents with work opportunities is SFHSA's JobsNOW! employment program. Today, 6 ETS verify benefits eligibility, serving approximately 200 clients at any given time. Clients work with ETS on a 90-day cycle, voluntarily seeking workforce services and employment activities. The client intake process involves an hourlong in-person appointment, using a paper intake form that collects information such as address, demographic information, income, and language preference.² The ETS must manually categorize the client's family income level by cross-referencing an income range table. This intake system takes up significant time during appointments, limiting the amount of time that staff can spend sourcing work opportunities. It is also susceptible to error.

Existing systems now allow Californians to apply for multiple public benefits in one system without having to reenter their information. In 2023, BenefitsCal launched statewide, using an application programming interface (API) to securely pull verified client data from the CalSAWS database, a statewide platform that is co-owned by all California counties. Since CalSAWS is designed to be the source of truth for all public assistance programs and is used to determine eligibility for Medi-Cal across the state, SFHSA could leverage these prefill capabilities for other city services as well.

Recommendation

The City and County of San Francisco MOI should build a prefilled web form that is integrated with CalSAWS to replace the current paper-based JobsNOW! client intake process. Unlike the current paper form, which requires ETS to manually collect and enter client information during a time-constrained appointment, a prefilled web form would automatically populate verified client data at the start of each intake interview. This would reduce redundant data entry, improve data accuracy, and free ETS to use more of their appointment time to understand clients' employment barriers. In light of the new work requirements imposed by H.R. 1, implementing this solution will be critical to helping an influx of new clients satisfy the new work requirements and preventing the loss of

Medi-Cal coverage for thousands of San Franciscans.

The proposed process improvement would reduce manual entry so that the ETS can focus on clients' needs while the form is already populated with basic data. This could be achieved with the following proposed workflow, as demonstrated in a prototype of the new intake form:

1. The ETS logs in to the intake system with their own credentials.
2. During the in-person appointment, with the client's consent, the ETS enters the client's name and date of birth. The system pulls the client's relevant verified information from CalSAWS.
3. The intake form is prepopulated with the client's address, phone number, date of birth, race and ethnicity, gender identity and sexual orientation, and language.
4. The intake system retrieves the client's verified income and family size from CalSAWS. It automatically categorizes the client's family income level (extremely low income, low income, moderate income, or above moderate income).
5. The ETS reviews the prefilled fields with the client. If any of the prefilled data are inaccurate, the ETS can edit the data to reflect the client's current information.
6. Once the form is reviewed by the ETS and client, the client signs on-screen to note their approval and finalize the intake.

Since the information on the JobsNOW! intake form is already collected as part of the Medi-Cal eligibility determination process, the same data infrastructure that determines Medi-Cal eligibility could also power a prefilled JobsNOW! intake form. Rather than duplicating data collection across systems, this approach would reuse verified data through CalSAWS's existing API — the same technical approach that enables BenefitsCal to allow Californians to apply for multiple public benefits without reentering their information. Critically, this approach would not change the content of the intake form or ETS's workflow; it would simply replace manual data entry with automated prepopulated data.

This prefilled intake form would ensure that Medi-Cal recipients receive critical support from ETS in meeting work requirements, helping them maintain their benefits.

Below is a narrative illustration demonstrating the real-world impact of this proposed solution:

Magdalena is a 57-year-old San Franciscan with type 2 diabetes. Without the prescription drug metformin, her ankles swell and she cannot stand for long shifts. Under H.R. 1, she is terrified that her physical limitations will prevent her from finding work and force her to lose the very medication that enables her to work. In the current JobsNOW! intake appointment, staff spend much of their time reviewing basic information, leaving Magdalena little time to explain her limitations. With a prefilled intake form, staff could use the time saved to focus on finding Magdalena a role that matches her physical capabilities.

Note: “Magdalena” is an archetypical persona created for this analysis. She is based on themes identified through stakeholder input, program documentation, and publicly available information regarding the anticipated impact of H.R. 1 community engagement requirements on Medi-Cal recipients and workforce staff. She is not a real individual.

Budget and Implementation

The entirety of the delivery, comprising predevelopment, development, pilot, and rollout, is estimated to span only 6 months. The estimated cost to MOI is \$210,000 for initial development and \$21,000 to \$31,500 for ongoing maintenance. Costs for SFHSA are pending but would likely qualify for a 90% federal match from the Centers for Medicare and Medicaid Services (CMS) for initial development and a 75% federal CMS match for maintenance. Further details are included in the implementation plan.

If you'd like to learn more, see the full project, including an implementation plan and demo video, at aspenpolicyacademy.org/project/sf-jobsnow-intake-2026.

Endnotes

1. Internal stakeholder projection provided to the Tech Executive Leadership Initiative cohort.
2. Phone call with SFHSA, February 19, 2026.



Photo by William Bout



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 aspenpolicyacademy.org/teli.