

THE SOUTHERN INSTITUTE
on Children and Families

Mayersville, Mississippi

*A Study on Improving Access
to Benefits and Services
for Low-Income Families
in the Rural South*

June 1999

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MAYERSVILLE, MISSISSIPPI
A Study on Improving Access to Benefits and Services
for Low-Income Families in the Rural South

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TABLE OF CONTENTS

ACKNOWLEDGMENTS	i
INTRODUCTION	1
INITIAL SITE VISIT	2
Meeting with Parents and Grandparents.....	2
Transportation.....	4
Child Care	5
Child Health Coverage.....	6
Child Health Care.....	6
FOLLOW-UP SITE VISIT	7
Transportation.....	8
Child Care	10
Child Health Coverage.....	12
Child Health Care.....	12
CONCLUSION.....	13
APPENDIX	
A. Food Stamp Asset/Resource Rules.....	15
B. Discussion of Food Stamp Act Vehicle Resource Limit and USDA Draft Guidance.....	17

MAYERSVILLE, MISSISSIPPI

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INTRODUCTION

Children and families in economically depressed rural communities should be a top priority for policymakers who feel strongly that every child should have an opportunity to succeed in life. In the fall of 1998, the Southern Institute on Children and Families set out on a journey to learn more about the challenges rural families face when distances are far and resources are limited.¹

Unita Blackwell, Mayor of Mayersville, Mississippi, and Chairman of the Board of Directors of the Southern Institute on Children and Families, hosted two site visits to Mayersville. The Town of Mayersville has a population of approximately 500 and is located in Issaquena County in the heart of the Mississippi Delta. Issaquena County is among the poorest counties in Mississippi.

The first site visit was held in November 1998 and the second was held in June 1999. The purpose of the first site visit was to gain a better understanding of the issues that face rural families with regard to their access to child health coverage, child health care, child care and transportation. The purpose of the second site visit was to discuss follow-up activities since the initial visit and to define how best to address the identified issues.

Information was both shared and gained during the two site visits to Mayersville. Mayor Blackwell and Sarah Shuptrine, President of the Southern Institute on Children and Families, convened the site visit meetings. The visits were made possible by a grant from The Robert Wood Johnson Foundation.

The Southern Institute is indebted to the residents of Mayersville who were willing to share their concerns and aspirations and also to the professionals who traveled to Mayersville to be part of the dialogue and to participate in the brainstorming of solutions. This report summarizes the discussions, the follow-up activities and the insight gained from the Mayersville site visits.

¹ The Southern Institute on Children and Families is an independent nonprofit public policy organization that works to improve opportunities for children and families in 17 southern states and the District of Columbia, with a focus on disadvantaged children. Through special projects and surveys, the Southern Institute spotlights health, social, education and economic issues of regional significance. It works to encourage public/private sector collaboration on behalf of children and families and seeks to remove bureaucratic and other barriers that restrict access to needed benefits and services.

INITIAL SITE VISIT

Four meetings were held during the Southern Institute's one-day visit to Mayersville on November 10, 1998. The first meeting was with parents and grandparents. The second meeting included community leaders, health providers and parents. Staff from the Mississippi Department of Human Services (MDHS) and the regional Medicaid office attended the third meeting, and the fourth meeting was a Town Hall gathering in the evening. Attending all meetings were Mayor Blackwell, Marquette Brown, Issaquena County DHS Director, Fannie Sampson, Sharkey County DHS Director, and Sarah Shuptrine.

Mayersville residents who attended the meetings shared their concerns as well as their ideas, and expressed their hope that some action would occur as a result of the Southern Institute's visit. Their views outlined below reflect discouragement as to their situation, but they are still hopeful that state and federal action will be taken to improve the well-being of children and families in Mayersville.

Meeting with Parents and Grandparents

It was evident that the residents attending the site visit meetings were interested in their community and eager to participate in discussions about the future of their children.

When asked to describe the greatest challenges they faced in rearing children in Mayersville, parents and grandparents identified fundamental issues, any one of which would be a significant barrier to the ability of families to meet the needs of their children:

- Lack of jobs
- No local health care provider
- No child care services
- Lack of transportation
- No recreational facilities for children

A small hospital is located approximately 12 miles from Mayersville, but has limited services. A small health center is located approximately 15 miles away. Schools are located in Sharkey County, over 10 miles from Mayersville.

Many parents have existed on welfare (cash assistance). Several described previous efforts to leave welfare. Their efforts to work were thwarted by lack of child care and transportation and by federal welfare policies that penalized them if they managed to garner even meager resources that would help them become employable. For example, federal welfare policy (which was eliminated as part of welfare reform in 1996) did not allow cash assistance families to own a car worth more than \$1,500 equity value, and families could not have savings or other liquid assets that exceeded \$1,000. Thus, it was not possible to accumulate savings or to own a reliable car that could have been their ticket to a better education and a job.

The 1996 federal welfare reform legislation ended welfare as an ongoing assistance system. Time limits now apply and thus the emphasis is on moving families from welfare to work.

Welfare reform has created a sense of frustration on the part of the young parents, primarily because they do not feel they are receiving the support necessary to sustain employment. While they demonstrated a strong desire to work, they described a set of circumstances that made that goal elusive. The shortage of jobs in Mayersville and the lack of child care and transportation present overwhelming obstacles.

Several parents indicated that their desire is to live and work in Mayersville, where there is a sense of community. However, with no jobs, child care or transportation, several stated that it looked like they would have to leave Mayersville, and they are concerned about what that would mean for them and their children.

Despite frequent contact with the public system, the parents and grandparents were inadequately informed about public benefits that are available to families who are not connected to the welfare system. For example, most were not aware that child health coverage is available to families who are not on welfare and only a few were aware of the Earned Income Tax Credit.

Asset/resource testing was a source of discouragement for parents and grandparents. They were understandably confused about the differing asset/resource rules across programs, and they felt that policy makers should understand that they need some assets to become more "self-sufficient." Several were under the impression that the children's Medicaid program applied an asset test, and they were pleased to learn that the Mississippi child-only Medicaid program does not have an asset test. They also were frustrated that they didn't already know.

Misconceptions and lack of information about the availability of benefits for working families have been the focus of the information outreach work conducted by the Southern Institute in recent years. Not knowing about available benefits means that, in addition to the lack of child care and transportation, families are not tapping into the child health coverage and wage supplementation programs that can provide them with significant economic assistance.

There were several areas where follow up was needed to clarify issues and to determine if help was available for the families of Mayersville. These areas are outlined and discussed below.

Transportation

There is no general public transportation system that serves the Mayersville area. The lack of public transportation isolates Mayersville residents, many of whom are unable to own and operate a reliable automobile.

Lack of transportation affects the ability of many residents to obtain and retain employment and impedes access to health care and child care. Health care and child care transportation issues are discussed in those sections of this report.

A reliable and responsive transportation system to and from towns and cities where jobs are available can go a long way toward improving opportunities for families who live in Mayersville. There are vans and buses in the area, but they have restrictive ridership rules based on their categorical funding source. For example, Mississippi Department of Human Services (MDHS) provides transportation vans for families in welfare to work programs, but the vans are not available to families who are not on welfare.

An additional transportation strategy, and likely the most workable one for most families, would be to foster ownership of an automobile. This strategy, however, hits a major hurdle when it comes to the Food Stamp eligibility rules. During the discussion of transportation issues, the Southern Institute became aware of a federal Food Stamp policy that hinders ownership of a personal automobile. The policy is buried in the complicated federal asset/resource test terminology that originates from statutory provisions. Research into the asset limits indicates that an automobile can be exempted from the Food Stamp asset test under certain circumstances, but it cannot be exempted if used for daily commute to a job. Under federal law, to be fully exempted the automobile would have to meet the following criteria (see Appendix A):

- Used over 50 percent of the time for income-producing purposes.
- Annually producing income consistent with the fair market value.
- Needed for long distance travel for work (other than daily commute).
- Used as the home.
- Needed to transport a physically disabled household member, or
- Needed to carry most of the household's fuel or water.

The federal Food Stamp policy of not allowing a full exemption of the one automobile basically means that low-income families living in isolated communities like Mayersville are not eligible for food assistance if they own a reliable automobile which is a necessity for families in rural areas.

The allowed value of the Food Stamp automobile is \$4,650 fair market value. Any amount above that is counted as a resource against a \$2,000 resource limit for families where no person is age 60 or older. Considering the real life circumstances of before dawn and after dark long-distance rural travel required to get to and from work, \$4,650 is an unrealistically low automobile value given the need for reliable commuter transportation.

To the credit of welfare reform officials in Mississippi, the automobile asset/resource test for families on the Mississippi Temporary Assistance for Needy Families (TANF/cash assistance) program does not count the value of one vehicle. This state policy was enacted in recognition of the vital link the family car represents for the successful transition from welfare to work. A second vehicle is treated like the automobile asset/resource test under the Food Stamp program. State officials do not, however, have the authority to change the federal Food Stamp automobile resource limit in order to achieve consistency with the Mississippi TANF automobile policy. Changing the Food Stamp asset/resource limits would require congressional action.

With the advent of welfare reform and state enactment of more progressive welfare policies for family automobiles, the Food Stamp asset/resource test is behind the times. Because the Food Stamp automobile limit is now more restrictive than the TANF automobile limit in Mississippi and many other states, this means that families leaving welfare for work who acquire a reliable automobile in order to commute to and from work are not able to obtain food assistance because they no longer meet the Food Stamp asset limit.

Clearly, an automobile asset limit negatively affects the “make work pay” environment that most states are striving to implement as part of welfare reform. It also negatively affects families who are not and have not been on welfare and who need food assistance to meet the needs of their children while working in low-wage jobs.

Families earning low wages need to supplement earnings with public programs that provide benefits to working parents, such as Medicaid for children, the Earned Income Tax Credit, child care and Food Stamps. These benefits can significantly help low-income families to adequately provide for their children.

Child Care

The child care dilemma facing families in Mayersville is a particularly compelling one. In order to work, parents must have access to reliable child care.

There is no full-day child care program in Mayersville. No assessment has been made regarding the feasibility of establishing a full-day child care facility that could accommodate children of working parents who require early morning and evening child care due to long distance commuting.

No efforts had been made to establish a family day care home in Mayersville. The Head Start Center located a few miles outside of Mayersville operates only on a partial day basis.

Some relatives are able to provide child care, but most are not. It was reported that many of the nonworking adults are on Supplemental Security Income (SSI) and are unable to care for children.

For Mayersville families who want to leave welfare and for families who want to avoid welfare, it will be essential to establish reliable child care resources that can support parents who commute long distances and work odd hours. The reality is that child care is fundamental to the ability of parents to get and keep jobs.

Child Health Coverage

Lack of information about child Medicaid coverage can negatively affect the success of two major public goals. The first is helping low-income children to access health coverage and thus improve their access to primary and preventive health care. The second is helping families leaving welfare to maintain health coverage for their children.

Children without health coverage are less likely to have a regular source of health care and more likely to seek care in hospital emergency rooms. Uninsured children are less likely to seek care for injuries and to receive immunizations.

Families leaving welfare for work often are discouraged by what they perceive are losses in benefits, and they miss out on health coverage opportunities because they do not know about them. Knowledge that child health coverage is not tied to welfare is heartening news for parents and it encourages work.

In 1997-98, the Mississippi Department of Human Services worked in cooperation with the Southern Institute in developing a Mississippi version of the Southern Institute information outreach brochures. Technical assistance to adapt the outreach brochures had been made available by a grant from The Robert Wood Johnson Foundation. The outreach brochures have been shown to effectively communicate the availability of health coverage and other benefits for working families. It did not appear that the brochures were being effectively utilized in Issaquena County. Aggressive utilization of the outreach brochures will help assure that families are aware of benefits for working families with children. County DHS staff expressed interest in greater utilization of the outreach brochures.

There is a great deal to be done to educate families about child health coverage available for working families under either the Mississippi Medicaid program or the state children's health insurance program (CHIP). Mississippi has been awarded a *Covering Kids* grant, and public/private sector organizations are working on improving information resources and access to coverage. Details are available on the *Covering Kids* website at www.coveringkids.org.

Child Health Care

Families in Mayersville expressed concerns regarding the lack of a health provider in their community. The closest health facilities are located 12 to 15 miles away. For families without transportation, such a distance represents a substantial barrier to health care. In cases of emergency, the combination of no health provider and no transportation present unsafe circumstances. The ambulance service that serves Mayersville is 12 miles away and residents said the response time is unreliable.

Medicaid transportation is provided on a scheduled basis, but the health needs of children often do not conform to a scheduling system. For persons not eligible for Medicaid, there is no public transportation.

Since the population of Mayersville is so small, the desire of residents for on-site health care represents a significant challenge. Attending the site visit meeting with community leaders and families were two physicians from the nonprofit Cary Christian Center/DeltaCare Rural Health Center, located approximately 12-15 miles away. The exchange among the site visit participants indicated a need for continued dialogue to develop an appropriate solution to the medical isolation felt by the community.

FOLLOW-UP SITE VISIT

On June 9-10, 1999, the Southern Institute made a second site visit to convene individuals and organizations that could contribute ideas and resources toward addressing the issues identified during the initial visit. Two meetings were held. The first was in Mayersville and the second was with Mississippi Department of Human Services (MDHS) officials in Jackson. Those attending the follow-up site visit meetings are listed below:

Mayersville Meeting

Unita Blackwell, Mayor of Mayersville
Marquetta Brown, Director, Issaquena County DHS
Suzie Evans, Director, Mississippi Christian Family Services
Andy George, M.D., DeltaCare Rural Health Center
Steven Golightly, Region IV Administrator, Administration on Children and Families, US Department of Health and Human Services
Larry Bowen, Rural Development Loan Specialist, US Department of Agriculture
David L. Jackson, Program Officer, Mid-South Delta Local Initiative Support Corporation
Robert C. Jackson, Associate Director, Southeast Field Office, Health Services Resources Administration, US Department of Health and Human Services
Lessa Phillips, M.D., Chairman, Department of Family Medicine, University of Mississippi Medical Center
Beulah Russell, Family Day Care Homes Coordinator, Mississippi Forum on Children and Families
Fannie Sampson, Director, Sharkey County DHS
Sarah Shuptrine, President, Southern Institute on Children and Families

Edgar E. Smith, Ph.D., Director, Mississippi AHEC Program, University of Mississippi Medical Center
Rochelle Swaggard, Covering Kids Coordinator, Mississippi Forum on Children and Families

Jackson Meeting

Rickey Berry, Director, Resource Development, MDHS
Unita Blackwell, Mayor of Mayersville
Jane Boykin, Director, Mississippi Forum on Children and Families
Marquetta Brown, Director, Issaquena County DHS
Vera Butler, Director, Economic Assistance TANF Policy Unit, MDHS
Zenotha Robinson, Director of Transportation, Resources Development, MDHS
Fannie Sampson, Director, Sharkey County DHS
Sarah Shuptrine, President, Southern Institute on Children and Families
Pam Simpson, Bureau Director, Field Operations, MDHS
Edna Watts, Division Director, Special Initiatives Unit, Office for Children and Youth, MDHS
Tom Watts, Deputy Director, Economic Assistance, MDHS

Participants at the Mayersville meeting discussed transportation, child care, health coverage and health care issues affecting children and families in Mayersville. Strategies were developed, specific actions needed were identified and responsible parties were named. The identified issues were discussed with MDHS officials the next day in Jackson. State officials expressed willingness to work on the identified issues in cooperation with local citizens. The following summary briefly discusses the issues and describes the strategies for action that emerged from the discussions.

Transportation

- 1) Much to the surprise and dismay of the local participants, a recent survey conducted by Mississippi Christian Family Services failed to adequately document the need for transportation services in the area. Dr. George expressed concern since he views it as a major health problem for the area. The Issaquena County DHS was unaware that the survey had been conducted, and Marquetta Brown indicated an interest in helping to document the need she said she knows exists.

Suzie Evans, Marquetta Brown and Mayor Unita Blackwell will work with the churches in Issaquena County to develop data to document the need for a system of public transportation. The data are needed in order to obtain a Department of Transportation (DOT) grant that would allow the Mississippi Christian Services to obtain the resources to provide public transportation services to and from work. Suzie Evans said she thought the DOT grant also allowed transportation for shopping, but she did not think it allowed transportation for health care purposes.

- 2) Steven Golightly explained that when not in use, Head Start buses and drivers can be used by other programs attempting to meet the transportation needs of low-income families, including commuting to/from work, child care and health care. Operational support must be provided by the programs utilizing the buses and drivers. One source of operational support can be the TANF program, which has been given new flexibility to provide support services, such as child care and transportation, to families whose incomes are above the eligibility level for cash assistance. This was good news to the meeting participants who were unaware that Head Start buses could be utilized to meet other transportation needs.

Currently, the Head Start buses in Mayersville are needed only a few hours a day and are parked during the times they are not in use. The Head Start buses represent a clear transportation resource for Mayersville, as do the drivers who appear to be underutilized. Mr. Golightly pointed out that Head Start bus drivers must have certified driver's licenses.

Mr. Golightly indicated that he would clarify with Marvin Hogan, Director of Friends of Children of Mississippi, Inc., that the Head Start buses can be utilized to help meet broader transportation needs in Mayersville.

At the meeting with MDHS officials, Edna Watts indicated that from a child care perspective it will be very helpful to be able to use Head Start buses for purposes other than Head Start.

- 3) Mr. Golightly also referred to the final TANF rules issued by the Administration for Children and Families. He pointed out that the new regulations provide greater flexibility in how TANF block grant funds can be used to provide transportation services for individuals who leave TANF and enter the workforce. In such instances, time limits do not apply.
- 4) Mississippi Christian Family Services is the Medicaid transportation contractor, but they are unable to transport children or adults who are not Medicaid eligible unless they pay at least the amount paid by Medicaid. Since that amount is \$19.20 one way, the transportation services provided by Mississippi Christian Family Services is out of the financial reach of low-income families and individuals. Suzie Evans indicated she was unaware of a funding source for individuals and families who are not eligible for Medicaid.

Medical related transportation needs will be part of the follow-up work described in the child health care section below.

- 5) Fostering ownership of personal automobiles is a promising strategy for families in rural communities like Mayersville who must commute long distances to jobs and health care. There are multiple methods for accomplishing that goal. One strategy that has worked in Florida is providing refurbished automobiles to low-income families, including TANF families.²

² Sarah C. Shuptrine, Vicki C. Grant and Genny G. McKenzie, Southern Regional Initiative to Improve Access to Benefits for Low Income Families With Children (Columbia, SC: Southern Institute on Children and Families, February 1998) p. 74.

Efforts are also needed to assure that public policies do not penalize families for owning a reliable car. Sarah Shuptrine discussed the follow-up research conducted on the federal Food Stamp automobile asset/resource rules identified as a problem during the initial site visit to Mayersville (see discussion above). A new interpretation from the United States Department of Agriculture (USDA) may be forthcoming in the near future. Under the interpretation, TANF funded benefits or benefits funded under Maintenance of Effort will confer an exemption from Food Stamp automobile asset rules. States would be given broad discretion to decide which benefits would confer an exemption from the Food Stamp automobile asset test. The benefit would not need to be identified as a TANF benefit. Thus families that do not want to be associated with "welfare" could still be categorically eligible for Food Stamps based upon their receipt of a non-welfare service that the state supports with its block grant. A brief description of this new opportunity for states is included in Appendix B.

The pending USDA guidance was discussed with MDHS officials at the Jackson meeting. State officials are concerned with the current level of TANF transportation expenditures required to support work and indicated an interest in learning more about the new flexibility. Sarah Shuptrine indicated that new guidance is expected soon from USDA describing the flexibility, and she said the Southern Institute will provide more information to state officials as it becomes available.

Child Care

- 1) Mayor Blackwell and Marquetta Brown discussed the need for child care in Mayersville where currently there are no child care services for working parents.

Steven Golightly asked if efforts were being made to expand the hours of the nearby Head Start Center. There were no efforts underway. Considerable interest was expressed, but more resources would be needed. Marquetta Brown and Fannie Sampson indicated that TANF subsidies could be one funding source for families if the Head Start Center could provide full-day child care services.

Steven Golightly indicated his willingness to help make the Head Start Center part of the solution to the lack of child care in Mayersville. The availability of transportation was considered a major plus in connection with expanded child care services at the Head Start Center.

Head Start operational hours were mentioned as a problem. Mr. Golightly said that some centers in Region IV are open up to 12 hours a day. He said he would talk with Marvin Hogan, Director of Friends of Children of Mississippi, Inc., concerning enhanced utilization of the Head Start Center in Mayersville.

During a visit to the Head Start Center following the meeting, Mayor Blackwell, Steven Golightly and Sarah Shuptrine were given a tour of the facility by Director Westine Young. There are several classrooms currently not in use that could be utilized for extended day care. Ms. Young indicated interest in working

with the community and mentioned that the center could also be a resource for preschool child care.

Steven Golightly said he will discuss possibilities with his staff and Marvin Hogan to determine what actions are needed to bring about enhanced child care services at the Head Start Center.

NOTE: Steven Golightly has written to Sarah Shuptrine regarding discussions held with his staff and Marvin Hogan subsequent to the Mayersville meeting. He stated that he is ready to provide assistance to Friends of Children of Mississippi in order to extend days and months of operation at the Head Start Center and he also indicated Mr. Hogan's willingness to work with the community with regard to the Head Start buses. Mr. Golightly also indicated that the assistance provided by MDHR for child care provider training could be very helpful to this effort (see #3 below).

- 2) Beulah Russell discussed the possibilities for establishing family day care services in Mayersville. The Mississippi Forum on Children and Families provides technical assistance in the development of family day care under a grant from the Mississippi Department of Education. The Forum has submitted a request to allow Issaquena County to be added to the list of counties to receive start-up technical assistance services. If the request is granted, Ms. Russell would be available to work with interested parties to look at the possibility of establishing family day care services in Mayersville.

During the Jackson meeting, Jane Boykin pointed out that family day care provides a more flexible option for parents who work nontraditional hours. She indicated that family day care opportunities might also be explored close to employers. Ms. Boykin offered her assistance to Mayor Blackwell and said she would be willing to visit Mayersville to discuss family day care opportunities with interested parties in the community.

NOTE: The Mississippi Forum on Children and Families has been informed by the Mississippi Department of Education, Office of Child Nutrition, that the Forum will be able to add Issaquena County to the list of counties to receive family day care start-up technical assistance services.

- 3) Mayor Blackwell mentioned that she had provided a list of five women in Mayersville who are interested in providing child care in their home. The list was prepared at the request of Ronnie McGinnis, Director of the MDHS Office of Children and Youth. A copy also has been made available to Jane Boykin and Marquetta Brown.

NOTE: Marquetta Brown will serve as the local contact for follow-up activities related to the child care opportunities discussed above.

Child Health Coverage

- 1) Rochelle Swaggard, Coordinator of the Mississippi *Covering Kids* Initiative, reported on an issue that has emerged in state level discussions regarding the children of parents who are sanctioned under the TANF program. Ms. Swaggard said children in sanctioned families are being allowed two months to reapply for Medicaid or the children's Medicaid cases will be closed.

Sarah Shuptrine said it is highly likely that the children in sanctioned families would continue to be eligible under the poverty related Medicaid coverage group for children. Ms. Swaggard indicated that the Mississippi *Covering Kids* Initiative, which is a collaborative group that includes MDHS and the Medicaid Division, will continue to work on determining what action can be taken to see that children who are Medicaid eligible maintain coverage.

- 2) Sarah Shuptrine asked if the information outreach brochures developed by the Southern Institute and replicated in cooperation with Mississippi Medicaid and MDHS officials are being utilized. Marquetta Brown and Fannie Sampson indicated that they are sharing the outreach brochures with families who apply for public benefits and TANF families so that they are aware of the health and other benefits available to them without any requirement that they be on welfare. Sarah Shuptrine encouraged broad community distribution of the brochures and pointed out the "*Have You Heard About Benefits for Working Families*" brochure as the most appropriate for general community outreach.

Child Health Care

- 1) A wide-ranging discussion of the need for improved access to primary and preventive health care for children and adults in Mayersville continued to come back to lack of transportation as a major issue (see discussion above). The desire of Mayersville residents to have on-site health care produced discussion of existing programs surrounding Mayersville and whether a health facility should be brought to Mayersville or whether adequate, responsive transportation should be provided to transport residents to existing health providers. Also discussed was the need for a coordinated approach involving transportation and health providers located in the area from Vicksburg to Rolling Fork to Greenville.

Robert Jackson offered to convene several meetings with Dr. Andy George, Dr. Lessa Phillips and Edgar Smith to work on a plan to develop a coordinated health services system to serve the health needs of Mayersville residents.

Dr. Lessa Phillips and Edgar Smith indicated that Mayersville could serve as a model for interaction among health providers and other interested parties regarding the role the Mississippi AHEC could play in helping communities in need of health services.

NOTE: Robert Jackson has advised Sarah Shuptrine that the first meeting of the Mayersville child health care group is scheduled for July. Transportation issues will be taken into consideration, and experts in that area will be brought into the discussions.

- 2) The concerns of residents regarding emergency health services in the region centered on the inadequacy of ambulance services as well as the limited treatment available at the nearest hospital, located 12-15 miles away. It was reported that Mississippi requires all counties to have ambulance services available. The ambulance service that serves Mayersville is located at the small hospital in Rolling Fork, but the hospital is not equipped to handle serious emergencies or trauma.

Dr. Andy George said that occasionally they are so short-staffed at the hospital that the person calling for an ambulance must wait until someone gets to the hospital to drive the ambulance. He said there are times when persons calling for an ambulance are told that they will get there faster by driving. This clearly creates a hazardous situation. The availability of licensed Head Start drivers in Mayersville was mentioned, and a suggestion was made that these drivers could possibly be a part of the solution.

NOTE: The group described in #1 also will address emergency service needs.

- 3) Mayor Blackwell mentioned that she had worked on an application for USDA funding to help with a multi-purpose community facility for Mayersville. Larry Bowen indicated that the application had been received and he will check on the status. Indications were that part of the facility could be used for health services.

CONCLUSION

The complexity of the issues facing Mayersville requires coordinated, comprehensive action. Because there are multiple state and federal agencies that administer various programs for low-income families, significant challenges arise when attempting to identify and implement solutions in communities like Mayersville.

The experience of the Southern Institute in Mayersville indicates that a team approach to technical assistance is required if rural communities with limited resources are to make sense of and access the services and benefits greatly needed by their citizens. The expertise of state agencies, federal agencies and nonprofit organizations is available, but there is no systematic approach to bringing them together to apply their "know-how" to the development of comprehensive strategies. Government and nonprofit organizations working together toward the same goals can be a powerful force in achieving quality of life improvements in any setting, but it is particularly essential in attempting to help isolated rural communities like Mayersville.

Through this initiative, public and private organizations were able to look across agency lines and focus on the contribution each could make. In instances where programs are in place to address needs, the willingness of several agencies to step forward to facilitate a continuation of multi-agency efforts has greatly enhanced the chances that action will occur. In other instances, state and federal public policies must be examined to identify actions that will make transportation, child care, health coverage and health care more accessible in areas where lack of resources and long distances create additional barriers.

The role played by the Southern Institute in Mayersville can be replicated and improved upon in other rural communities. The convening and facilitation of a coordinated approach led to the development of action steps long needed, but unrealized. As a result, it is highly likely that benefits and services needed to improve opportunities for low-income children will become more available and accessible. That's an outcome worth pursuing.

Extraordinary efforts will be needed to prevent small rural communities like Mayersville from dying out. The loss of such communities should be and can be avoided. Families with children are needed to build a future for Mayersville and making it possible for them to thrive is essential. As eloquently stated by Mayor Blackwell, "We must find a way to not leave people behind and to help our children feel like they are part of a new era."

APPENDIX A
FOOD STAMP ASSET/RESOURCE RULES



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Resources (Rules on resource limits)

Households may have \$2,000 in countable resources, such as a bank account, or \$3,000 in countable resources if at least one person is age 60 or older. However, certain resources are NOT counted, such as: a home and lot, the resources of people who receive Supplemental Security Income (SSI), the resources of people who receive Aid to Families with Dependent Children (AFDC).

Licensed vehicles are NOT counted if they are:

- used over 50 percent of the time for income-producing purposes,
- annually producing income consistent with their fair market value,
- needed for long distance travel for work (other than daily commute),
- used as the home,
- needed to transport a physically disabled household member, or
- needed to carry most of the household's fuel or water.

For the following licensed vehicles, the fair market value over \$4,650 is counted:

- one per household
- plus vehicles used for work, training, or education to prepare for work, or to seek work in accordance with the food stamp employment and training requirements.

For all other vehicles, the fair market value over \$4,650 or the equity value, whichever is more, is counted as a resource.

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APPENDIX B

DISCUSSION OF FOOD STAMP ACT
VEHICLE RESOURCE LIMIT AND USDA DRAFT GUIDANCE

CATEGORICAL ELIGIBILITY PROVIDES OPPORTUNITY TO CONTINUE FOOD STAMPS TO FAMILIES LEAVING WELFARE FOR WORK

The Food Stamp Act provides “categorical eligibility” to households in which all members receive either SSI or “benefits under a State program funded under part A of title IV of the Social Security Act” (*i.e.*, the legislation establishing the TANF block grant). Households that are categorically eligible are not subject to the food stamp resource limit. In addition, in non-categorically eligible households, the Food Stamp Act excludes the resources of any “household member who receives [SSI or] benefits under a State program funded under part A of title IV.” In effect, this means that the Food Stamp Program’s vehicle resource limit does not apply to any car or truck owned by someone who receives benefits from a TANF-funded program.

Many states’ welfare reform plans have either raised the limit on the value of vehicles that families receiving cash assistance may own or have eliminated restrictions on such vehicles altogether. Thus as long as a family is receiving cash assistance, it can also receive food stamps even if the car a parent drives to look for, or commute to, employment exceeds the Food Stamp Program’s limits. Once these families left cash assistance, however, states have felt compelled to terminate their food stamps as well because the food stamp resource limits now applied to them. Terminating food stamps as well as cash assistance to these families could undercut states’ efforts to make work more attractive than welfare.

A solution to this problem may be available from a new interpretation of the Food Stamp Act that USDA has been discussing with states for several months. Under this interpretation, TANF- or MOE-funded services other than cash assistance could still count as TANF “benefits” and thus make recipients categorically eligible for food stamps. Thus, if a state provides TANF-funded child care subsidies, or TANF-funded case management services, to a family for twelve months after the family leaves the cash assistance rolls, the state could treat that family as categorically eligible for food stamps. Even a service provided only to a parent would be sufficient to allow the state to treat that parent as a beneficiary of a TANF-funded “benefit” and thus exclude the value of that parent’s car from the food stamp resource test.

It is also important to note that the service or other benefit need not be called “TANF.” As long as it is supported with TANF block grant or MOE funds, a benefit can trigger categorical eligibility even if it is given a name that is distinct from TANF, such as “post-employment services.” Thus families that do not want to be associated with “TANF” or “welfare” could still be categorically eligible for food stamps based upon their receipt of a non-welfare service that the state supports with its block grant.

The drafts of guidance on this issue that USDA has shared with states would give states broad discretion to decide which TANF- or MOE-funded benefits would confer an exemption from food stamp vehicle rules. States would send USDA a list of which benefits would entitle a family to food stamp categorical eligibility; USDA would not second-guess the composition of this list. For ease of administration, states presumably would want to focus on benefits for which they make specific eligibility determina-

tions. A determination that the family is eligible for a particular service would be sufficient: the family would not be required to access a service in a particular month. In this way, just as someone can be a Medicaid beneficiary even if he or she does not actually visit a medical service provider in a given month, a state could determine that a family is receiving a TANF case management benefit as long as the family has been determined eligible without regard to how often the family actually contacts its case manager.

The policy is unlikely to be error-prone; indeed, it would eliminate some errors states currently experience when they fail to deny or terminate benefits to households whose resources exceed the Program's limits. It is, of course, possible that eligibility workers may fail in some cases to recognize that a family is categorically eligible for food stamps. The result of this mistake, however, would be an improper denial or termination of food stamps. Such "negative case errors" are not included in the "payment error rate" from which USDA computes possible QC sanctions. Since categorical eligibility cannot make a household ineligible, or affect the amount of benefits the household should receive, it cannot cause a "payment error."

This policy should give important new opportunities to states spending their TANF block grants or state MOE funds to provide post-assistance benefits to help families moving from welfare to work. By treating these families as categorically eligible for food stamps, states can protect them from the restrictive food stamp vehicle resource limits and further support them in their effort to establish themselves in the work force.

Source: David Super, General Counsel, Center on Budget and Policy Priorities, June 1999.

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