Assessing the financial impact of federal benefit program enrollment on low-income households

Abstract

Background
Link Health is a Boston-based non-profit leveraging in-person and digital platforms to promote health equity. Its primary aim is to financially support low-income individuals through enrollment in federal benefit programs. This study examines the monetary impact of enrollment through Link Health.

Objective
We consider the effectiveness of several benefit programs in supporting low-income individuals with an emphasis on monetary value.

Methods
Approximately 14,454 individuals have been screened for eligibility via digital outreach, community events, and in-person clinics. Enrollment and financial distributions were evaluated across programs, including the Affordable Connectivity Program (ACP), Lifeline, LIHEAP, transitional aid (TAFDC), and supplemental nutrition assistance program (SNAP).

Results
A total of 1,606 individuals were successfully enrolled, collectively distributing $840,776 in aid. The largest contributors to this sum included:

- **ACP**: 1,149 enrollments, $413,640 distributed annually.
- **Child Care Financial Assistance (CCFA):** 5 enrollments, $80,000 distributed annually.
- **Lifeline**: 368 enrollments, $40,848 distributed annually.
- **LIHEAP**: 25 enrollments, $48,750 distributed annually.
- **SNAP**: 19 enrollments, $57,000 distributed annually.
- **TAFDC**: 21 enrollments, $179,424 distributed annually.

Conclusions
These results highlight the role of targeted outreach and effective enrollment processes in promoting access to federal benefit programs. High enrollment rates in ACP and Lifeline demonstrate a considerable need for affordable broadband and internet services. Programs like CCFA and TAFDC, despite lower enrollment numbers, provide sizable support per individual. This analysis advocates for continued funding of federal benefit programs. Future efforts can be made to develop screening tools that identify eligibility for multiple programs and reduce the complexity of enrollment.