Organization: United Way of Southwest Missouri & Southeast Kansas	
Name: Amy DeArmond	
Title: Interim Executive Director	
Date of Submission: April 24, 2026	
Provider? ☒ **Please complete both Part A and Part B**	
Stakeholder only? ☐ **Please complete only Part B**	
Programs Administered/Managed by your Organization (ALL utility related programs, including government funded programs such as LIHEAP and weatherization) 1. Critical Medical Needs – Southwest Missouri 2. 3.	

Part A: Provider Information Request

If you or your organization helps or has previously helped administer a utility assistance program (weatherization, LIHEAP, PAYS, Keeping Current, Dollar Help, Dollar More, ERPP, Critical Needs, Low-Income Assistance Programs, Payment Partner Program, etc.) please provide your name and the name of your organization and complete Part A. **If you don't manage or administer programs, skip to Part B on page 2.**

Please complete a table for each program that your organization manages
Copy and paste the tables as needed for the number of programs your organization manages
Cells will expand as needed to accommodate text

Provider Question 1: PROGRAM ADMINISTRATION							
Utility Company		Program Name			State Agency Partner		
Liberty Electric Spire Gas Missouri American Water		Critical Medical Needs – Southwest Missouri					
Program Start Date	2023	Program End Date	Ongoing		Total # Employ	1 FTE	
Job Title 1	Executive Director	Duties	Case approvals, budget, and reporting		# Employ	¼	
Job Title 2	Director – Care Partner Network	Duties	Case management (review and verify referrals, navigate other local resources, discuss with utilities, make recommendation for hardship funds)		# Employ	½	
Annual Average Enrollment #	71		Monthly Average Enrollment #		6		
Comments	We are payer of last resort for Critical Medical Needs hardship funds, which helps us maximize our budgeted funds but results in higher levels of staff time in case management to connect clients with other available resources and payment options before they are considered for CMN hardship amounts.						

Provider Question 2: EVALUATION FOR EFFECTIVENESS	
Do you conduct surveys to gauge effectiveness of this utility assistance program?	☐ **Yes** ☒ **No**
Do you conduct any non-survey evaluations to gauge effectiveness of this program?	☒ **Yes** ☐ **No**
Do you share the results…with utility partners? **Yes** ☒ **No** ☐ …with state agencies?	☒ **Yes** ☐ **No**
If you conduct surveys or other evaluations, please explain the process you use.	
We meet with local health providers to discuss the parameters and outcomes of the program and receive feedback from patient experience. We report out on the program to utility partners and the state.	

Provider Question 3: STRENGTHS AND WEAKNESSES OF ASSISTANCE PROGRAMS
Based on experience and participant feedback, what are the **STRENGTHS** of this program?
• Funding is available to meet client needs • The 30-day hold on shutoff gives time to help locate resources with the client • We have the ability to identify other, unrelated client needs and make referrals • Use of a closed-loop referral system with our local CIE gives us the ability to maximize outcomes and visibility for health providers, community organizations, and our own programs
Based on experience and participant feedback, what are the **WEAKNESSES** of this program?
• As payer of last resort, we have a longer lag time to case closure – this is unique to our area as other providers pay earlier • We have limited alternative funding pools • It is sometimes difficult to connect with clients (no voice mail, do not return calls or emails, etc.)
If you have it, please provide empirical and/or anecdotal data that support your comments.
Payer of Last Resort: From January to April 2026, we have tracked the amount of utilities arrears at case opening versus the amount of hardship funds utilized to close out a case as resolved with utilities arrearages paid. Arrears at Case Opening — $25,017.91 Alternative Sources – Case Management — $10,211.26 — 40.8% Hardship Funds Used — $14,806.65 — 59.2% Alternative sources include LIHEAP, Salvation Army, Saint Vincent de Paul, local churches, Project Help, United to Help Our Neighbors, or self-pay arrangements. **Challenge in Client Connection:** From 2023 to now, we have had 33 ineligible clients (17% of referrals) – with the most common reason being inability to contact (6.8% of referrals).

Part B: Stakeholder Information Request

All interested stakeholders are invited to submit responses to **any or all of the following questions**. To ensure submissions are as helpful as possible, respondents are encouraged to provide specific information and data relevant to circumstances experienced in Missouri, "lessons learned" from other jurisdictions, and citations.

Stakeholder Question 1: EFFECTIVENESS OF EXISTING PROGRAMS AT REDUCING ARREARAGES AND DISCONNECTIONS FOR HIGH-BURDEN HOUSEHOLDS
a. How much do **existing programs** help improve long-term household stability versus one-time crisis relief (i.e. reduce repeat disconnects)?
b. Which specific features are most effective at stabilizing households and preventing repeated cycles of arrearage (e.g., predictable monthly payments, income-based caps, arrearage forgiveness, and hardship protections, etc.)?
c. What customer categories (e.g., irregular income, medical debt, unbanked, etc.) are currently underserved or excluded by existing programs?
d. What aspects of existing programs limit or reduce effectiveness (e.g., funding caps, restrictive eligibility windows, administrative barriers, etc.)?
e. What specific modifications or alternative models (e.g., income-based caps or automatic enrollment) could close identified gaps?

Stakeholder Question 2: CRITERIA AND MECHANISMS FOR PROGRAM ENROLLMENT
a. What principles should be used to establish eligibility criteria (e.g., need, administrative feasibility, accuracy, and alignment with household need) and how should programs prioritize access to assistance when resources are limited?
b. What income thresholds, vulnerability indicators, or energy burden metrics to determine program eligibility?
We appreciate the lack of income guidelines for a Critical Medical Need, which could create significant short-term disruption no matter what the income of an individual/family may be.
c. Would automatic or categorical enrollment be effective?
d. What risk-management practices (e.g., random audits, post-enrollment verification, data-matching) should be used that are effective without creating undue burdens for applicants?
e. What program design elements can be included that prevent fraud, collecting duplicate benefits, or mismanagement while maintaining accessibility for eligible households?

Stakeholder Question 3: CHALLENGES OF ADMINISTRATIVE BURDEN
a. What administrative practices would reduce customer burden and streamline application, verification, and recertification processes (e.g., short-form applications, online portals, single-point-of-entry systems)?
b. What program design elements would reduce administrative workload while maintaining accurate eligibility determinations?
c. What strategies from other jurisdictions that have effectively reduced verification or recertification barriers?

Stakeholder Question 4: METRICS AND EVALUATION
a. What metrics should be used to evaluate program performance, measure impacts, and assess cost-effectiveness?
b. What metrics should be used to evaluate the effectiveness of marketing, education, and outreach efforts?
c. What customer-experience metrics should be used to evaluate program accessibility, clarity, and ease of navigation, including the application, verification, and enrollment processes?
d. What metrics should be used to evaluate whether verification requirements are appropriately calibrated to risk?
e. What metrics should be used to assess whether programs improve long-term household stability, reduce arrearages, prevent disconnections, and support energy-efficiency or weatherization investments?

Stakeholder Question 5: RATE STRUCTURES AND ASSISTANCE SUCCESS
a. Is there a relationship between utility rate structures and the success of assistance programs? If so, what is that relationship?

B31. How does the rate design element of **fixed charges** affect households with limited or no income flexibility?
b2. How does the rate design element of **seasonal usage and rates** affect households with limited or no income flexibility?
b3. How does the rate design element of **time-variant pricing** affect households with limited or no income flexibility?

Stakeholder Question 6: EFFECTIVENESS ARE REDUCING RELIANCE ON CRSIS ASSISTANCE
Identify specific program elements that have demonstrated the greatest success in reducing reliance on “in crisis” assistance. (e.g., offering 1/12th debt forgiveness in exchange for on-time payments, offering levelized billing)
Establishing a low-income rate could be a beneficial development, but there is significant need for supplemental programs for those with extenuating circumstances and especially given the current affordability challenges.

Stakeholder Question 7: IMPLEMENTATION CHALLENGES
Describe the implementation challenges that should be anticipated when launching new assistance programs.
• Setting clear program parameters, including required intake info, checklists for required verifications or data tracking, and other forms for standardizing processes. • Educating those who have client touchpoints on the programs and how to make effective referrals. • Establishing trackable reporting metrics on the front-end for data continuity and accountability.