
Advancing Quality Assurance in the CalFresh Program: A Framework of Best Practices to Strengthen Accuracy and Performance

Leveraging Insights from Solano County and Santa Clara County

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Executive Summary

Quality Assurance (QA) is a critical component of effective CalFresh program administration, directly influencing accuracy, compliance, and fiscal accountability. As federal expectations continue to evolve, particularly in relation to Payment Error Rate, associated financial risk, and emerging federal policy direction under the One Big Beautiful Bill Act (H.R. 1, Pub. L. No. 119-21), counties must position QA as a core operational system that supports consistent and accurate benefit delivery.

This paper presents a framework for QA best practices informed by comparative observations conducted in Solano and Santa Clara Counties. While each county operationalizes QA differently, both demonstrate that sustained performance is not driven by individual tools or processes, but by the intentional design of systems that integrate structure, data, training, and leadership alignment.

Across both counties, several key components consistently emerged as drivers of accuracy and performance:

- ***Standardized case review frameworks and QA workflows that*** establish clear expectations, reduce variation in eligibility determinations, and ensure consistency in how cases are evaluated.
- ***Data visibility and cross-divisional information sharing*** that transforms QA findings into actionable insight, informing targeted training, guiding continuous improvement efforts, and supporting performance management across programs.
- ***Organizational alignment and leadership support***, where consistent messaging and cross-functional engagement reinforce QA as a departmental priority and a shared responsibility.
- ***Independent positioning of QA outside of program operations***, strengthening objectivity in case evaluation while maintaining alignment with broader program integrity efforts.

While implementation varies, the consistency across these components reflects a broader shift from reactive error detection toward proactive system management. In both counties, Quality Assurance serves not only as a compliance function but also as a tool for reinforcing expectations, guiding staff performance, and supporting continuous improvement.

Within this context, Sonoma County is uniquely positioned to develop a Quality Assurance framework that aligns with evolving federal expectations and local operational priorities. By incorporating the core practices identified in this analysis, Sonoma County can build a scalable system that promotes consistency, strengthens accountability, and supports more effective oversight and risk management.

Introduction and Context

The signing of the One Big Beautiful Bill Act (H.R. 1, Pub. L. No. 119-21) on July 4, 2025, significantly altered the administration of the Supplemental Nutrition Assistance Program (SNAP), administered as CalFresh in California, by reducing federal funding for program administration and, for the first time, requiring states with higher payment error rates to share in the cost of benefits themselves (One Big Beautiful Bill Act, 2025). Beginning in fiscal year 2027, H.R. 1 reduces the federal reimbursement rate for SNAP administrative costs to 25 percent, increasing the financial responsibility of states to 75 percent. Additionally, states with a Payment Error Rate above the federal threshold of 6 percent or higher will be required to pay between 5 percent and 15 percent toward the cost of SNAP benefits, depending on their error rate (National Association of Counties, 2025). Since the establishment of SNAP in 1964, the federal government has fully funded SNAP benefits, making this a significant shift in fiscal accountability and program administration (National Association of Counties, 2025). As the California Center on Budget and Policy (2026) notes, “The cuts to SNAP could result in between \$2.3 billion and \$5.1 billion annually in lost funding for CalFresh and could put more than 3 million households at risk of losing some or all of their food assistance.”

Within this context, Quality Assurance (QA) plays a central role in the effective administration of the CalFresh program by supporting accuracy, consistency, and compliance in eligibility determinations and benefit delivery (U.S. Department of Agriculture, Food and Nutrition Service [USDA FNS], n.d.). The importance of QA is further underscored by the growing emphasis on Payment Error Rate as both a key performance indicator and a determinant of state financial liability under H.R. 1.

Payment Error Rate measures the percentage of benefits issued incorrectly, including both overpayments and underpayments to households. Importantly, Payment Error Rate does not measure fraud; rather, it measures the accuracy of eligibility and benefit determinations. Federal Quality Control (QC) review requirements and methodologies are outlined within the Food and Nutrition Service ([FNS Handbook 310](#)), which establishes the standards used to evaluate case accuracy and determine Payment Error Rate. In California, the Payment Error Rate is calculated through federally mandated QC reviews conducted within designated Performance Measurement Counties (PMCs). These 19 PMC counties, selected based on CalFresh participation levels, operate county-administered QC units responsible for reviewing active cases to determine whether benefits were issued correctly based on income, household composition, deductions, verification, and other documentation requirements. Reviewed cases are subsequently re-evaluated at the state level before a subsection of cases is selected for final review by the United States Department of Agriculture Food and Nutrition Service for final error rate determination.

As Payment Error Rate increasingly functions as both a performance metric and a fiscal risk indicator, elevated error rates can result in corrective action requirements, increased oversight, and significant financial implications for states and counties. The USDA most recently published California's Payment Error Rate at 10.98 percent for 2024, which would subject the state to the maximum 15 percent benefit cost share under H.R. 1 (U.S. Department of Agriculture, Food and Nutrition Service, 2025). At the time of publishing, the California Department of Social Services (CDSS) recorded a statewide Payment Error Rate of 11.42 percent in August 2025 (California Department of Social Services [CDSS], n.d.). While the long-term structure for distributing these costs has not yet been fully determined, it is likely that the fiscal impact will extend to counties, including Sonoma County, through increased cost-sharing expectations, operational pressures, or reductions in available program funding and resources.

As financial accountability becomes increasingly tied to program accuracy, counties are under growing pressure to strengthen internal systems capable of reducing operational error and sustaining long-term performance. High-performing QA systems establish the conditions under which consistent decision-making is possible by embedding structure, data visibility, leadership alignment, and continuous feedback into daily operations. QA is not simply how agencies identify errors after the work is completed; it is how agencies create the conditions for accuracy from the beginning.

Comparative Observations and Approach

Findings within this analysis were informed through operational observations, virtual meetings, and in-person interviews with QA staff, supervisors, and leadership from Solano County and Santa Clara County (personal communications, April 2026). These counties were selected intentionally based on both operational relevance and organizational structure.

Solano County was selected due to its similarities to Sonoma County in overall caseload size, demographic composition, and operational scale, providing a practical comparison for how QA principles may be implemented within a similarly situated county environment. California Department of Social Services (May 2026) reports a 1.48 percent Payment Error Rate for Solano County as of August 2025, which is the lowest Payment Error Rate of all Performance Measurement Counties (PMC). Santa Clara County was selected due to its status as a PMC with a reported 9.25 percent Payment Error Rate as of August 2025 (CDSS, May 2026) and its recent redesign and modernization of QA processes, including the development of integrated data tracking and performance management systems. As PMCs, Solano County and Santa Clara County's case accuracy and Payment Error Rate performance directly contribute to California's statewide Payment Error Rate. Their PMC status requires them to maintain county-operated Quality Control (QC) functions, with dedicated staff responsible for conducting federally

mandated case reviews. As a result, these counties operate within a heightened environment of accountability where QA and QC systems play a critical role in supporting accuracy, managing fiscal risk, and responding to performance expectations tied to Payment Error Rate outcomes.

While both QA and QC functions contribute to overall program accuracy, this analysis focuses specifically on QA practices and how counties operate quality systems beyond federally mandated QC review requirements. This distinction is particularly relevant, as Sonoma County is not a PMC and does not manage a county-based QC unit; instead, QC reviews are conducted at the state level. As such, this analysis examines how counties leverage QA separately from QC to proactively influence performance and strengthen case accuracy.

The purpose of these comparative observations was to better understand how QA functions are structured, implemented, and integrated into program operations to identify strategies and practices that may support future QA development efforts within Sonoma County. The comparative observations included:

- Workflow observation to understand how QA processes are operationalized in practice
- Review of tools and systems used to support case evaluation, data visibility, and program accuracy
- Staff discussions to gain insight into day-to-day operations, training integration, leadership alignment, and performance management practices

Collectively, these observations provided a practical foundation for identifying the organizational structures, operational strategies, and system components that support sustained accuracy and program performance.

Standardized Case Review Frameworks and QA Workflows

Comparative observations from Solano County and Santa Clara County demonstrate that high-performing QA systems are grounded in standardized frameworks that define not only how cases are evaluated but how expectations are consistently applied across staff, supervisors, and reviewers.

In Solano County, QA is operationalized through structured workflows supported by a comprehensive error guide, standardized citation practices, and centralized tools including the Case Review Error Guide (CREG), a shared Excel-based tracking system that captures all QA case reviews, and SharePoint-based regulatory reference materials. The use of defined citation

categories paired with templates and detailed explanations provides a consistent methodology for identifying errors and communicating findings. Importantly, each error includes both the issue and the corrective action, a design choice that reflects feedback from eligibility staff who needed clearer guidance on how to take corrective action. This transforms QA from a purely evaluative process into a structured teaching mechanism embedded within daily operations.

In Santa Clara County, these same principles are implemented through a structured review model aligned with the federal FNS 310 guidelines for QC case review, incorporating layered case analysis. QA reviews assess not only whether eligibility determinations are correct, but whether decisions are supported by accurate reporting, verified data sources (including Medi-Cal Eligibility Data System (MEDS), Income and Eligibility Verification System (IEVS), and New Hire Registry reports), and appropriate documentation. Additional review periods may be evaluated when income thresholds are exceeded, further reinforcing the depth of analysis applied.

A key operational distinction lies in workflow execution. Solano County relies on structured manual processes to ensure equitable case review distribution across workers, particularly within a banked caseload environment where cases may span multiple program areas. In contrast, Santa Clara County utilizes automated assignments through its QA system, allowing for dynamic case selection and workload balancing. Despite these differences, both counties emphasize consistency in review expectations and equitable application across staff.

An additional critical component is the distinction between elements within staff control and external factors. By focusing QA reviews on documentation, verification handling, and eligibility determinations while separating factors such as timeliness or clerical constraints, both counties reinforce a more equitable and defensible approach to performance evaluation. This clarity ensures that QA findings are actionable and directly tied to staff behavior.

Taken together, these approaches demonstrate that standardization is most effective when it establishes a shared system of expectations that can be consistently applied across staff and reviewers. By reducing variation and clarifying how decisions should be made and documented, these frameworks create a stable foundation for improving accuracy and supporting long-term program performance.

Data Visibility, Performance Management, and Training Integration

A defining feature of effective QA systems is the ability to translate data into actionable insight that directly informs performance management and staff development.

In Santa Clara County, this capability is operationalized through the Case Accuracy Review Monitoring Application (CARMA), an internally developed dashboard that serves as a centralized platform for QA and supervisory case reviews. CARMA provides real-time visibility into case review outcomes, error trends, and individual worker performance, with updates occurring multiple times daily. The system allows users to filter data by unit, supervisor, and worker, enabling targeted analysis and immediate identification of trends, including performance relative to corrective action thresholds.

The integration of CARMA into daily operations allows QA data to function as a live performance management tool. Supervisors can identify emerging issues in real time, while staff development teams use error trend analysis to design targeted refresher trainings. This direct linkage between QA data and training ensures that learning interventions are responsive, focused, and aligned with actual casework.

In Solano County, while tools are less automated, data visibility is achieved through structured reporting mechanisms supported by their Excel-based tracking system or Case Review Error Guide (CREG). QA data is systematically compiled by the QA supervisor and distributed monthly to supervisors and lead staff, with further dissemination to management through established meetings. This tiered communication structure ensures that QA findings are consistently reviewed across multiple levels of the organization.

Both counties leverage QA data to drive targeted case reviews, inform training priorities, and reinforce expectations. Program communications, including newsletters highlighting error trends and QC findings, further support cross-divisional awareness and alignment.

Across both counties, a critical takeaway is that visibility alone is insufficient. The effectiveness of systems such as CARMA and CREG is not solely in their ability to track performance, but in how that information is routinely reviewed, discussed, and applied. This reinforces that data must be operationalized through consistent processes to influence behavior and improve outcomes. These approaches demonstrate that QA data is most effective when it is embedded into daily operations and directly linked to staff performance, training, and decision-making. This integration ensures that QA functions as a continuous feedback mechanism rather than a static reporting tool.

Organizational Alignment and Leadership Support

Strong QA systems are supported by intentional leadership alignment and consistent messaging that reinforces QA as a shared organizational priority.

In Santa Clara County, this alignment is formalized through cross-divisional structures such as Corrective Action Plan Team (CAPT) meetings. These meetings bring together representatives working in the CalFresh program including supervisors, staff development, IT, and leadership. Together, they review QA and QC findings, discuss root causes of errors, and align training and operational improvements. Meeting outcomes are documented and shared, reinforcing transparency and ensuring that QA findings are translated into coordinated action across the organization.

In Solano County, leadership alignment is reinforced through consistent engagement with staff, including QA participation in induction training, unit meetings, and program communications. Messaging emphasizes QA as a collaborative, team-based effort focused on improving performance and preventing errors before they are identified through external reviews.

A critical shared insight across both counties is the importance of communicating the “why” behind QA. Leadership plays a central role in ensuring that staff understand not only what is expected, but why those expectations exist, particularly in relation to state and federal review standards. This emphasis on purpose has been shown to improve engagement, reduce resistance, and increase the likelihood that staff will incorporate feedback into their daily practice.

Additionally, both counties recognize the importance of addressing operational realities, including workload pressures and competing priorities. Leadership engagement provides a platform for discussing these challenges while reinforcing the importance of balancing quality and productivity.

Through consistent messaging, cross-functional collaboration, and visible leadership support, QA is positioned as a core component of program performance rather than an isolated oversight function. These approaches highlight that leadership alignment is not simply a supporting element of QA systems, but a central driver of their effectiveness. When expectations are consistently communicated and reinforced across all levels of the organization, QA becomes embedded within the culture of program operations rather than functioning as a separate oversight activity.

Organizational Positioning of QA and Program Integrity Alignment

The organizational positioning of QA is a critical factor in its effectiveness, influencing both the objectivity of case reviews and the credibility of QA findings.

In both Solano County and Santa Clara County, QA operates with a degree of independence from day-to-day program operations, allowing for objective and consistent case evaluation. This structural separation reduces the influence of operational pressures and supports the application of uniform standards across staff and units.

At the same time, QA remains closely aligned with broader program integrity efforts. Findings related to documentation, verification, and eligibility determinations provide insight into systemic risk areas and support improvements in case accuracy. In Santa Clara County, the integration of QA and QC functions further aligns review practices with federal expectations, while in Solano County, QA mirrors QC standards while maintaining operational flexibility.

This positioning, independent yet aligned, allows QA to function as both an evaluative and strategic component of program operations. It enables leadership to rely on QA findings as credible indicators of performance while also using those findings to inform broader program improvements. By maintaining objectivity while contributing to system-level change, QA strengthens accountability, improves reliability in performance data, and enhances the organization's ability to manage risk in an increasingly complex and regulated environment.

These models demonstrate that the effectiveness of QA is closely tied to its organizational positioning. By maintaining independence while remaining connected to program integrity efforts, QA can provide objective evaluation while contributing to broader system improvements.

Operational Barriers to Implementation

Unlike Solano County and Santa Clara County, Sonoma County does not currently operate a formalized Quality Assurance (QA) case review system within its CalFresh program. Prior to the COVID-19 pandemic, elements of organized QA review existed within the county through additional eligibility and case accuracy reviews conducted by Fraud Technicians in the Special Investigations Unit (SIU). Following the operational impacts of the COVID-19 pandemic, the statewide migration to the California Statewide Automated Welfare System (CalSAWS), significant staffing turnover among Fraud Technicians within SIU, and leadership changes within the Economic Assistance (EA) Division, a formalized and structured QA review process has not been reestablished. While elements of eligibility review, program integrity, audit response, and Quality Control (QC) coordination exist across divisions, these functions are not yet integrated within a unified QA framework. This absence presents a distinct strategic advantage because Sonoma County is uniquely positioned to intentionally design and implement such a system without the constraints of a fragmented legacy of QA structures.

Rather than retrofitting existing processes, Sonoma County has the opportunity to build a cohesive QA framework from the outset that aligns with proven practices while reflecting its operational strengths, organizational structure, and existing program integrity resources.

A significant operational advantage for Sonoma County is the presence of existing structures that already support components of QA and program integrity work. Fraud Technicians within SIU possess extensive eligibility expertise and routinely conduct detailed case analysis related to verification, documentation, overissuance calculations, review of Income and Eligibility Verification System (IEVS) Recipient reports, and policy application. Additionally, SIU staff currently serve as county liaisons for state Quality Control (QC) reviews and are uniquely positioned to identify recurring QC findings, monitor emerging error trends, and support corrective action efforts based on feedback from the California Department of Social Services (CDSS).

At the same time, successful QA implementation will require strong partnership and collaboration between SIU and the Economic Assistance (EA) Division, which administers the CalFresh program in Sonoma County. While SIU may provide operational expertise related to eligibility analysis, review methodology, program integrity, and trend analysis, EA leadership, supervisors, training staff, and frontline workers will play a critical role in operationalizing QA findings and integrating them into daily program administration.

Implementation will also require balancing QA responsibilities alongside existing workload demands and departmental priorities. Eligibility operations continue to face pressures related to timeliness, staffing limitations, increasing policy complexity, and evolving state and federal requirements. Without careful implementation planning, additional QA processes may create concerns regarding workload, duplication of effort, or competing operational expectations.

Budget considerations will also influence implementation strategy. While increasing federal emphasis on Payment Error Rate accountability places growing pressure on counties to strengthen internal accuracy systems, staffing and funding resources remain limited. However, the long-term fiscal risk associated with elevated Payment Error Rates may ultimately exceed the investment required to establish structured QA systems capable of proactively reducing errors. Leveraging existing staffing expertise, operational knowledge, and established infrastructure within both SIU and EA may allow Sonoma County to build QA capacity in a cost-effective and sustainable manner.

Phased Quality Assurance Rollout and Implementation Recommendations

While Sonoma County is well-positioned to develop a formalized Quality Assurance (QA) framework, implementation will require a phased and operationally realistic approach. Building a sustainable QA system will take an extended amount of time, cross-divisional collaboration, staff development, and ongoing organizational alignment. However, leveraging existing expertise, infrastructure, and operational partnerships between the Economic Assistance (EA) Division and the Special Investigations Unit (SIU) may allow Sonoma County to incrementally establish QA functions while minimizing immediate financial and staffing impacts.

A foundational component of implementation should begin with clearly establishing the purpose and operational goals of QA. Sonoma County's QA framework should be designed to align with federal Quality Control (QC) expectations, Payment Error Rate accountability, and broader program integrity goals. Developing a standardized error guide, review methodology, and case review data tracking system aligned with QC principles will help establish consistency in how case accuracy is evaluated and communicated across divisions.

Oversight and coordination of the QA framework may be managed through the SIU Program Planning and Evaluation Analyst (PPEA), functioning in a QA management role in collaboration with CalFresh program analysts, EA leadership, supervisors, and training staff. This structure would support operational alignment between QA, policy interpretation, corrective action efforts, and staff development while maintaining consistency in review methodology and reporting expectations.

Rather than attempting to implement a fully integrated QA system immediately, Sonoma County may benefit from a phased rollout strategy focused first on reviewer calibration, operational consistency, and infrastructure development before expanding into broader staff review processes.

The initial phase of implementation should focus on the staff responsible for conducting and overseeing QA reviews. Supervisors and Senior Eligibility Specialists within both EA and SIU should participate in joint training designed to establish a shared understanding of:

- Case review methodology
- Criteria for identifying errors
- Citation standards

- Documentation and verification expectations
- QC alignment and system functionality

This reviewer calibration process is critical in reducing variation in review outcomes and establishing consistency in policy interpretation across supervisory and review staff. During this phase, SIU QA reviewers should conduct secondary reviews of cases already reviewed by EA supervisors and lead staff. This process will allow reviewers to identify inconsistencies in interpretation, evaluate the effectiveness of review standards, and refine guidance, training materials, and review expectations before implementing broader QA review processes for frontline staff.

Frontline staff should not begin receiving formal QA reviews until reviewers demonstrate sufficient consistency and agreement regarding the case review process and identification of errors. This phased approach supports fairness, strengthens staff confidence in the review process, and positions QA as a collaborative operational support system focused on consistency and continuous improvement rather than punitive oversight.

Implementation should also occur in parallel with the development of Sonoma County's QA data and case review system. The Economic Assistance Division is already developing a supervisor case review database, which may provide a strong foundation for adaptation into a broader QA tracking and reporting system. Utilizing an existing review structure may help create consistency between supervisory reviews and QA processes while minimizing additional system development costs and reducing operational disruption.

Initially, the QA tracking system should focus on capturing:

- Case review outcomes (error/no error)
- Citation categories (type of error)
- Verification and documentation issues
- Error trends (to identify training deficiencies)
- Corrective actions

As implementation progresses, this system may evolve into a more robust reporting and performance management tool capable of supporting trend analysis, targeted training, leadership reporting, and long-term operational planning.

As foundational processes stabilize, Sonoma County can expand QA operations through formalized reporting, integration with staff development efforts, and regular cross-divisional

communication between SIU, EA leadership, supervisors, analysts, training staff, and CalSAWS help desk staff. QA findings should not function as isolated review results but as operational feedback capable of informing workflow improvements, clarifying policy interpretation, identifying systemic challenges, and supporting supervisory coaching efforts.

Long-term implementation should focus on embedding QA into broader organizational culture and operational decision-making. This includes:

- Establishing consistent leadership messaging regarding QA expectations
- Aligning QA with broader program integrity and operational goals
- Formalizing communication pathways between QA, program operations, training, and leadership
- Developing long-term reporting dashboards and trend analysis capabilities
- Evaluating staffing structures to support sustainable QA operations

At this stage, QA transitions from an isolated review activity into an operational infrastructure that supports performance management, accountability, fiscal risk reduction, and organizational consistency across programs.

Conclusion

The comparative observations conducted in Solano County and Santa Clara County demonstrate that effective Quality Assurance systems are not built through isolated reviews or compliance activities alone. Rather, successful QA models function as integrated operational systems that connect case review methodology, data visibility, staff development, leadership alignment, and program integrity into a continuous cycle of accountability and improvement.

The findings from both counties illustrate that sustained program accuracy is achieved when organizations establish clear review standards, create visibility into operational trends, and use QA findings proactively to inform training, supervision, and decision-making. In this way, QA becomes more than a mechanism for identifying errors after they occur; it becomes a system for strengthening consistency and reducing error risk before inaccuracies are repeated across program operations.

For Sonoma County, this moment presents a unique strategic opportunity. Unlike counties working within established legacy QA structures, Sonoma County can intentionally design a modern QA framework informed by current operational realities, evolving federal expectations, and lessons learned from high-performing counties. Existing operational strengths within the

Special Investigations Unit, combined with established collaboration and partnership with the Economic Assistance Division, provide a strong foundation for building a scalable and sustainable QA model capable of supporting long-term program accuracy and fiscal accountability.

As the Payment Error Rate increasingly functions as both a performance indicator and a measure of fiscal risk, counties will face growing pressure to demonstrate not only that errors are identified, but that systems are in place to prevent them. Sonoma County is well-positioned to proactively respond to this changing environment by building a QA system that is structured, data-informed, operationally aligned, and integrated into daily program administration.

Ultimately, the long-term success of QA will not be defined by the number of cases reviewed or errors identified, but by the county's ability to create a culture where accuracy, consistency, and accountability are embedded into the work itself.

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