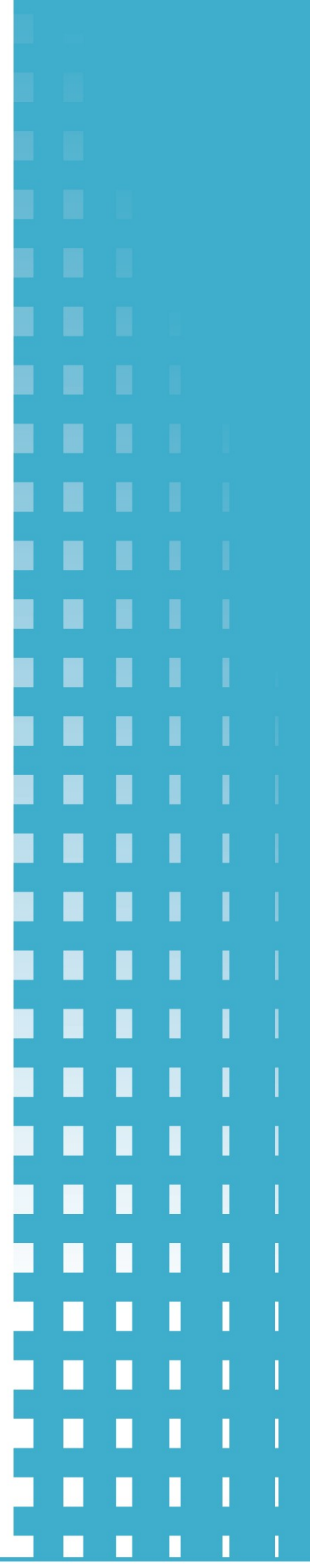


# Appendix F13

## Round 1 EBT Contractor (ACS) Interview Guide



# EBT Contractor (ACS) Interview Guide

## Round 1: Implementation

The EBT contractor for the Massachusetts Department of Transitional Assistance (DTA) is Affiliated Computer Services (ACS). The purpose of Round 1 interviews is to document the HIP implementation process and will include inquiry as to the activities and work required and completed by the EBT contractor up to shortly prior to the project going live. The interviews will take place approximately 6 to 8 weeks before the implementation of HIP. It is anticipated that interviews will occur over approximately a one week period.

The EBT contractor interviews will take place in Austin, TX, Hampden County or on site in Hampden County, Massachusetts. If ACS staff are not at these locations, we will conduct phone interviews. Interviews will include:

- The ACS Massachusetts EBT Project/Account Manager (responsible for DTA relationship and EBT/HIP project management)
- The ACS HIP Technical Lead (responsible for overall design and changes to the ACS system, third party processor systems and for working with DTA and their contractor on interface changes)
- The ACS EBT Senior Director for Program Management (responsible for all EBT operations in Massachusetts and across the country)
- The ACS EBT Project Lead responsible for HIP implementation in Hampden County (rollout of new EBT machines and/or software)

Interviews will include the following questions. Additional follow-up questions are anticipated, to clarify or expand responses.

Public reporting burden for this collection of information is estimated to average 90 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Research and Analysis, 3101 Park Center Drive, Room 1014, Alexandria, VA 22302 ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

## **GENERAL INFORMATION**

1. Date and Time of Interview
2. Location of Interview
3. Name(s) and Title(s) of Respondent(s)
4. Provide a brief description of the respondents' normal job functions.
5. Describe your role in HIP. Check all that apply.
  - HIP Project Management
  - EBT System Design and Modifications, Including HIP Reports
  - Retailer Recruitment
  - Supporting HIP Enablement for Retailers
  - Retailer System Testing/Certification
  - Cardholder Support, including Card Issuance and Customer Service
  - Coordination with Other Stakeholders
  - Other (please define)

## **HIP MANAGEMENT AND COORDINATION**

6. How and when did you first learn about HIP?
7. Describe ACS' involvement in HIP grant application process. If you were not involved, skip to question 8.
8. Describe the ACS support and project management structure utilized for implementing HIP in Massachusetts.
  - 8.a. Were there changes to the ACS project plan, and if so, what were the changes and why did they occur?
  - 8.b. What were the greatest challenges in meeting the project schedule and how were they addressed?
9. Describe the level and type of coordination that has occurred between ACS staff, FNS, DTA Central Office, DTA local offices and community based organizations (CBOs), and the Abt team.
  - 9.a. What were the strengths and weaknesses of coordination between the stakeholder groups?
  - 9.b. Did coordination between ACS stakeholder groups impact implementation of the pilot?
  - 9.c. What challenges were encountered in working with these stakeholder groups on HIP and how were they addressed?
  - 9.d. What types of coordination took the most and the least amount of time and were the most or least productive?

## **HIP DESIGN AND DEVELOPMENT**

10. Were you involved in system design and/or system modifications? If not, skip to question 14.
11. What were the interactions between ACS and FNS, DTA Central Office, State contractors, Hampden County DTA, and the Abt team during the system design and development?
  - 11.a. Describe the types of interactions that were most and least effective.
12. What was ACS's role in the development of HIP system requirements and the design of system changes for HIP?
  - 12.a. What ACS staff were involved?
  - 12.b. Describe HIP design activities undertaken by ACS.
  - 12.c. What meetings took place to discuss potential changes to the EBT system and what were the main topics of discussion?
  - 12.d. What issues arose and how were they resolved?
  - 12.e. How were planned changes documented and approved?
  - 12.f. Was there a formal design document? (Get copy)
13. What system changes were made to accommodate HIP?
  - 13.a. What was the time frame for completion of the changes? Was the time sufficient?
  - 13.b. Describe the testing process (if any) and results.
  - 13.c. What changes proved to be the most challenging to address and how were they addressed?

## **RETAILER PARTICIPATION AND RETAILER SUPPORT**

14. Were you involved in recruitment or support of retailers? If not, skip to question 25.
15. What was ACS' role in the recruitment of retailers for HIP? If not involved with retailers, skip to question
  - 15.a. How were retailers contacted, e.g., mailings, in-person meetings, phone contacts, and visits to stores?
  - 15.b. Did the approach vary by type of store (integrated retailers<sup>1</sup>, EBT only retailers<sup>2</sup>, third party retailers<sup>3</sup>, voucher retailers<sup>4</sup>, farmers' markets? If so, in what ways?

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<sup>1</sup> An integrated retailer is a retailer that has an electronic cash register system (ECR) that is integrated with its point of sale (POS), which is a credit, debit and EBT acceptance terminal. Once the transaction amount is calculated by the ECR, the amount is automatically sent to the POS for customer approval and authorization.

<sup>2</sup> An EBT-only retailer is a retailer that uses a POS terminal provided by the state. The terminal can only be used for EBT transactions. It cannot be used for other credit or debit transactions.

<sup>3</sup> A third party retailer is a retailer that does not have an integrated system but does have a POS (provided by a third party processor) that accepts credit, debit and EBT transactions. Once the transaction amount is calculated by the ECR, the amount is hand-entered by the retailer into the POS terminal for customer approval and authorization.

<sup>4</sup> A voucher retailer is a retailer that does not have an EBT-only terminal or a POS terminal. SNAP transactions are conducted using a paper voucher and phone authorization for the transaction.

- 15.c. Were meetings held with groups of retailers or individual retailers? Please describe.
- 15.d. What role in recruitment was played by state or county retailer organizations and how did these organizations contribute to the pilot?
16. What aspects of HIP positively or negatively impacted the recruitment among integrated retailers, EBT only retailers, third party retailers, voucher retailers and farmers' markets?
- 16.a. What have been the major reasons for non-participation in each category of retailer?
- 16.b. How important was scheduling and timing as to whether or not retailers participated?
- 16.c. Is ACS still recruiting retailers for participation? If so, please describe.
- 16.d. Are there any parts of the county potentially underserved by current retailer participation in HIP and if so, how is this being addressed?
- 16.e. If certain retailers started to participate and dropped out, what were the reasons?
17. What type of training has been provided to each of the categories of retailers?
- 17.a. When and how was the training conducted?
- 17.b. If additional training is planned, when and how will it take place?
18. What point of sale (POS) software changes were required to conduct HIP at EBT only terminals?
- 18.a. Were these changes completed in-house or contracted?
- 18.b. Were they installed on-site or remotely?
19. What testing and recertification<sup>5</sup> has been conducted for the changes to both the EBT only terminals and the integrated stores?
- 19.a. What problems have been identified during testing?
- 19.b. If this process is not complete, what are the plans for completion?
20. Describe the process changes made to the ACS retailer help desk and to the retailer data base.
21. What have been the primary enquiries received by the retailer help desk concerning HIP participation?

### **THIRD PARTY PROCESSORS (TPP)<sup>6</sup>**

22. Have you been involved with TPPs in regard to HIP participation? If not, skip to question 27.
- 22.a. What interaction was initiated with TPPs and at what point in the implementation process were these contacts made?

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<sup>5</sup> Retailer ECRs and third party processor (TPP) software must be tested and certified to conduct EBT transactions. With the HIP enhancements made to ECR or TPP software, it is anticipated that participating retailers' ECRs and TPP software must be tested and recertified for WIC EBT.

<sup>6</sup> A third party processor, or TPP, is a transaction acquiring service. POS terminals that accept credit, debit and EBT transactions transmit the transaction to the retailer's TPP. The TPP then routes the transaction to the appropriate card issuer for authorization. In turn, the card issuer settles the transaction amount to the TPP, which then bundles the day's transactions for settlement to the retailer.

- 22.b. Was this done individually or in a group setting?
- 22.c. Which TPPs are participating and which ones chose not to participate and why?
- 23. How was ongoing information about the project schedule communicated to TPPs?
  - 23.a. How important was timing and scheduling as to whether the TPPs participated?
  - 23.b. Were all TPPs able to meet the project implementation schedule and if not, why?
- 24. What testing was completed with TPPs prior to recertification?
  - 24.a. What were the dates of recertification?
  - 24.b. Did all TPPs recertify on the first try and if not, why?

### **CARD ISSUANCE, CARDHOLDER CUSTOMER SERVICE, AND CARDHOLDER TRAINING**

- 25. Were you involved in card issuance, cardholder customer service or cardholder training? If not, skip to question 30.
- 26. Were any card issuance changes required by the HIP pilot? If so, please describe.
- 27. Describe the card protective sleeves, including production and distribution.
- 28. What changes were made to the cardholder customer service interactive voice response (IVR) system and scripts?
  - 28.a. What process changes and training have been completed for customer services representatives to handle the project calls?
- 29. What was ACS' role in providing information to SNAP participants selected to participate in HIP?
  - 29.a. Did ACS participate in designing training for HIP participants? If so, what was that role?

### **ISSUES/LESSONS LEARNED**

- 30. Looking back, is there anything you would have changed about the implementation process?
- 31. Other than previously discussed, what issues, if any, have you encountered during implementation and how were they resolved?
  - 31.a. What impact did they have on HIP operations or the HIP evaluation?
- 32. What lessons have you learned from your experiences to date?
- 33. To date, have the efforts to implement HIP been greater or less than anticipated? Please elaborate.