**Attachment** **b**

**ADMINISTRATIVE COST DISCUSSION GUIDE**

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| **NOTE: For ease of use in non-ELE States, we use the general term “Simplified Enrollment Process” or “SEP” throughout this form (as non-ELE states are expected to have implemented different types of simplified processes).**  |

**Discussion Guide for a Study of Administrative Costs Associated**

**with <<Simplified Enrollment Process (SEP)>>**

 **We will customize this discussion guide for each non-ELE case study state to collect information on the specific intervention of interest. Bracketed, highlighted text will be replaced with state-specific language. Several targeted SEPs apply only to the renewal process. Language referring to “new enrollments” will be replaced with language referring to “renewals” as applicable in each state.**

1. **State Planning for <<SEP>>**
2. What planning activities occurred in your state before deciding to implement **<<SEP>>**?
3. How did your state determine the agencies with which you would partner? (ask only if applicable, given SEP of interest)
4. Did the state complete any cost-benefit analyses before implementing **<<SEP>>**? If so, are you able to share those with us?
5. **Understanding State Enrollment Processes**
6. Please describe the **<<SEP>>** as it currently operates for new enrollments.
7. Do you have a flow chart outlining the steps of the **<<SEP>>** that you could share with us? If no flow chart is available, please talk us through the steps in the process that parents, contractors, and/or state staff must complete in order to enroll a child in your state’s Medicaid and/or CHIP program via the **<<SEP>>**. These steps may include:
8. Applications that a parent or guardian must complete on behalf of a child and/or documentation that they must provide to establish eligibility.
9. Steps conducted by state staff or contractors who conduct data matches, review submitted applications, enter or verify data in a computer system, have contact with an applicant, or pass applications between the Medicaid and CHIP programs. If your state uses both electronic and paper application processes, we are interested in developing (or obtaining) a process flow chart for both methods.
10. How long has this been the **<<SEP>>** process for new enrollments?
	1. Have there been any major changes in the steps in this process in the past three years? If so, please describe these changes, when they occurred, and why they were implemented.
11. Now, please walk us through the steps of the standard enrollment process(es) for new enrollments. By standard enrollment process, we mean the process that would be completed by parents (on behalf of children), contractors, and/or state staff for children who qualify primarily on the basis of income.
12. What are the primary ways in which the **<<SEP>>** differs from the standard enrollment process?
13. How long has this standard enrollment process been established?
14. Have there been any major changes in the steps in this process in the past three years? If so, please describe these changes, when they occurred, and why they were implemented.
15. For children who primarily qualify on the basis of income, does your state offer any other facilitated enrollment processes, aside from **<<SEP>>**, that would follow a different set of steps and processes?
16. What are these alternate enrollment processes, and how do they differ from the standard route? When were these alternate processes implemented?
17. **Marginal Impacts on Contracted Costs and Staff Time**
18. Which of the steps in the **<<SEP>>** (if any) are completed by a contractor?
19. Which steps in the standard enrollment process are completed by a contractor?
20. How are those contractors reimbursed? Some potential examples include—on a per-application basis, a fixed contract price, or a cost-plus-fee basis.
21. What changes in contractor reimbursement have occurred, if any, as a result of **<<SEP>>**?
22. About how many days does a new application received through the **<<SEP>>** take to process? How does this compare to processing time for a new application through the standard process?
23. About how much active eligibility staff time does it take to determine eligibility for a new application received through the **<<SEP>>**? How does this compare to active staff time required for a new application received through the standard process?
24. What is the salary range for a staff member who processes enrollment applications (standard or **<<SEP>>**)?
25. How many staff members are dedicated to processing or managing **<<SEP>>** applications full time?
26. How many staff members spend part of their time processing or managing **<<SEP>>** applications? About what percentage of their time would you estimate is spent in processing or managing **<<SEP>>** applications?
27. Were any staff members newly hired to support **<<SEP>>**? Are there plans to hire anyone for such a position?
28. About how much staff time is required from information technology systems staff to support the **<<SEP>>** on an ongoing basis? For example, there may be daily/monthly/annual data matches that must be completed.
	1. What is the salary range for a staff member responsible for data systems support?
29. Are there any new ongoing direct expenses associated with **<<SEP>>** enrollment? Some potential examples include new mailing expenses or printing costs for customized enrollment forms.
30. **Implementation Costs**
31. Thinking back to when **<<SEP>>** was first implemented, what data system changes, if any, were needed to implement **<<SEP>>**?
32. About how many staff days (or what contractor costs) were required to make those changes?
33. Are there any other reasons why these systems changes were made, or were they done solely to support **<<SEP>>**?
34. Would any of these data systems changes be necessary to implement provisions of the Affordable Care Act?
35. Please describe any training concerning **<<SEP>>** that occurred at implementation.
36. How many people were involved in the training? What types of staff?
37. How long did the training take to complete?
38. Aside from staff training and data system enhancements, did any other major activities or processes occur in order to implement **<<SEP>>**? Potential examples include policy or staff manual updates or the modification of application materials and brochures.
39. Please describe other eligibility or enrollment process initiatives (if any) that were implemented concurrently with or around the same time as **<<SEP>>**.
40. Did **<<SEP>>** implementation take resources away from other activities? If so, what types of resources were diverted and which activities were postponed or deprioritized?
41. **<<SEP>> Impacts on Partner Agencies** (ask only if applicable, given SEP of interest)
42. Please describe any data-sharing or outreach coordination that you conducted with your **<<SEP>>**  partner agency before implementing **<<SEP>>**.
43. Have your data-sharing and outreach coordination activities changed because of the implementation of **<<SEP>>**? If so, how?
44. Are you aware of any process or staffing changes your partner agency has made to enable **<<SEP>>**?
45. Who should we contact at your partner agency to better understand how its costs or staffing might have changed?
46. **Overall Enrollment and Outreach Costs**
47. What is your annual budget for all enrollment activities for the current year? By enrollment activities, we mean things like application processing and eligibility determination. What is the size of that budget in comparison to the last two years?
48. Please tell us about your major outreach strategies (aside from **<<SEP>>**) to enroll children who would qualify primarily on the basis of income.
49. What is your annual budget for these activities for the current year? What is the size of that budget in comparison to the last two years?
50. How do you assess the success of those investments in outreach? Do you know or have an estimate of how many children are contacted and/or enrolled through direct outreach?
51. **Impacts for Beneficiaries**
52. From the beneficiary perspective, how does the application experience change when they enroll through **<<SEP>>**, rather than through standard enrollment routes?
53. Does the number of interactions with state staff or contractors that are required change?
54. Does the type of documentation or number of different documents that they must provide change?
55. About how many children have been successfully enrolled in Medicaid or CHIP as a result of **<<SEP>>**? Your best estimate is fine.
56. **Concluding Thoughts**
57. Are there other aspects of your **<<SEP>>** program that we should know about to understand how financial and staff time costs differ under **<<SEP>>**?
58. Do you anticipate any changes to the cost of **<<SEP>>** in the next year? For example, because fixed-price contracts will be renegotiated to accommodate changes in work flow, because new staff will need to be hired, or because some aspects of **<<SEP>>** will become newly automated?
59. Are there additional staff members within your agency with whom we should follow up for additional detail on any of the topics we have discussed?