THE ASSESSMENT OF CONTRIBUTIONS OF AN INTERVIEW TO SNAP ELIGIBILITY AND BENEFIT DETERMINATIONS

(Moderator Note: Substitute appropriate State Program Name instead of [SNAP] where appropriate)		
Stat	State Program Name ¹	Name of State EBT Card
е		
OR	SNAP	Oregon Trail
NC	Food & Nutrition Services	(US Flag Image Only)
UT	FSP (Food Stamp Program)	Utah Horizon
01	r sr (r ood stamp r ogram)	

FOCUS GROUP GUIDE

A. Introduction

Thank you very much for agreeing to come to this discussion group today. My name is [NAME], and I work for Mathematica Policy Research, an independent research organization that is not part of the government.

We are doing a study for the US Department of Agriculture, Food and Nutrition Service to learn about the Supplemental Nutrition Assistance Program or SNAP, which [is called NAME here in STATE] and was formerly known as the Food Stamp Program, and how the application process works in [STATE]. As part of the study, we want to learn about your experiences with different stages of the [SNAP] application process and understand what makes completing the application difficult.

By participating in this focus group, you are giving us consent to use the information collected today in the reporting of the results of this study. All information collected from individuals in connection with this study will be kept private and used only for research purposes. Your name will not be used in reporting the results of the study and your answers will not affect your eligibility for any programs. Contact information such as your name, number, and address will not be maintained for any purposes beyond the study.

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The OMB control number for this project is 0584-XXXX. Public reporting burden for this collection of information is estimated to be 100 minutes per response including the time for participating in the interviews and providing the extant data collection. 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 Services, Office of Research and Analysis, 3101 Park Center Drive, Room 1014, Alexandria, VA, 22302, ATTN: Rosemarie Downer

Before we start, I want to mention some rules for our discussion group.

- First, we want you to know that taking part in this discussion is voluntary, and you can choose to not answer a question if you wish. *Participating in this discussion will not affect any of the services and benefits (e.g., SSI, Medicaid) you receive.*
- I am going to ask some questions and I'd like everyone to speak up. Let's try to have equal "air time" so everyone will have a chance to speak. Please speak one at a time and as loudly as I am speaking. It's important to avoid side conversations with your neighbors.
- Please respect each other's point of view. There are no right or wrong answers. So just say exactly what you think, whether it's something good or bad.
- At times, I may need to move the conversation along to be sure we cover everything. If I interrupt you, it's not personal. I just want to get to everything that's on the agenda.
- By signing the consent form, you indicated that you would keep private what is discussed during this group, as well as the identities of the other participants. After you leave today, we ask that you respect each other's privacy by not repeating any of the discussion you've heard.
- I would like to tape record our discussion so I can listen to it later and accurately report *what* was said. Everything you say here is private, except as otherwise required by law. No one besides our study team will listen to the tape. Your names will *not* be included in our report or on any document we submit to anyone outside of the study team.
- If you want to say something that you don't want taped, please let me know, and I will be glad to pause the recorder. Does anybody have any objections to participating or to my taping our discussion?²
- The session will last about 1¹/₂ hours, and we will not take any formal breaks. But please feel free to get up at any time to stretch, use the restroom, or help yourselves to something to eat or drink.
- At the end of the session, you will receive \$30 (plus a transportation reimbursement) as a thank you for coming today

² If a second request to turn off the recorder is made, the moderator will inform the participants that the recorder will no longer be used so that we can ensure the focus group proceeds as efficiently as possible. Mathematica will then rely solely on the detailed notes that will be taken during the focus group session. In addition, Mathematica will closely monitor each of the focus groups to identify this and other issues that may arise. We will keep FNS informed of any such issues and take the necessary steps to resolve them.

and sharing your opinions. This incentive will not affect your potential eligibility for SNAP benefits in the future.

• Are there any questions before we get started?

To get started, please introduce yourself and tell us:

- Your first name
- How long you have lived in the area

B. SNAP Knowledge/Expectations Prior to Applying for Benefits

All of you are here because you began a [SNAP] application in the last several months. Please focus on that experience in our discussion and not on any prior experiences with [SNAP].

- 1. Prior to applying for [SNAP] benefits, did you hear or read about any recent changes to the program?
- 2. What changes were you informed about?

[PROBE ON THESE TOPICS IF NECESSARY]:

- **Shorter Eligibility Interviews**—Some individuals qualify for expedited interviews, or may not need an interview at all.
- **Electronic Applications**—Individuals can apply on-line.
- **Community Partners**—Schools, libraries, hospitals and other organizations provide applications and application assistance.
- Self-Service Centers—At [STATE] offices, computers, fax machines, copiers, and a secure drop-off box are available to apply for benefits or report income changes.
- **Toll-Free Information Line**—Provides information about the program and allows participants to report income changes
- 3. How did you hear about those changes?
 - From [SNAP] representative
 - Saw notice/flier about changes
 - Word of mouth heard about changes from a friend, family member or someone else
- 4. Did you get any information about [SNAP] from other government programs you may participate in (ie., SSI, TANF)?
- 5. How confident were you that your application would be approved?

6. In what ways was the actual process different from what you expected?

7. Before this most recent experience, had you ever applied for [SNAP] benefits before?

• Was the process application different this time from last?

C. Experiences with SNAP Application Process

1. Please describe what you had to do during the application process.

2. Did you fill out the paper application or did you complete the online version?

3. How well did you understand the instructions on how to complete the application?

4. Was the application difficult or easy to complete?

A [SNAP] application can be denied if it is not completed or if all needed verifications are not received within 30 days of when your application was first submitted.

5. Did you complete the entire application process?

6. [If no], Describe some reasons for your not completing the application process?

[PROBE ON THESE TOPICS IF NECESSARY]:

- Difficulties filling out the application
- Difficulties getting paperwork for verifications
- Lack of help with completing forms
- Missed interview and did not re-schedule³

- Why did you miss the interview: lack of transportation, no access to telephone, forgot, working?

- Did not need benefits anymore (income or living situation changed or improved)
- Thought I would probably be denied, so did not continue

- Why did you think you would be denied? (Income requirements, immigrant status, lack of supporting documents)

6a. [If multiple reasons given,] was there a single reason that stands out?

7. Do you intend to re-apply for benefits? If so, will you apply the same way or a different way? Why?

³ Only relevant in the non-pilot sites.

D. Proofs and Verification Documents

There are a number of proofs, or verifications, that are needed in order to approve an application for [SNAP] benefits.

1. What proofs or paperwork were you asked to provide?

- Proof of Identification: birth certificate, driver's license, social security card, immigration status
- Children's identification: birth certificate, social security card
- Proof of where you live
- Proof of income
- Proof of resources
- Proof of expenses: medical, shelter, utilities

2. How did you submit these items? Describe the process of submitting this documentation.

3. Did you have difficulty obtaining any of the proofs that were required?

3a. If so, what difficulty did you have?

[PROBE ON THESE TOPICS IF NECESSARY]:

- Did not understand what they were really asking for
- Did not have the ability to obtain or could not find the documents
- Did not have original documents
- Could not obtain necessary documents in time for the application deadline
- Could not obtain the specific kind of proof requested
- Did not have transportation/could not travel to get documents
- Needed to make copies of documents, but could not get to a copy machine.
- Did not have stamp, fax machine, or transportation to get them in on time

4. If you could not provide documented proof, were you given other options?

4a. If so, what were those options?

[Only discuss if need prompting. May include:

• Letting the client verify information on an application such as household member identity, citizenship, age or date of birth as true and providing a signature.

- Using any available documents that provide proof of your eligibility. You do not have to give a specific kind of document or proof.
- Giving someone else permission represent you with the SNAP office and other agencies.

- Were you familiar with any of these options while applying?

4b. If not, do you think knowing about other options for providing proofs would have helped you complete the [SNAP] application process?

E. Access to Help in Completing SNAP Application

- 1. Describe the process of how you sought help with the [SNAP] application process including help with obtaining proofs or verifications.
- 2. What kinds of help did you seek?

[PROBE ON THESE TOPICS IF NECESSARY]:

- Online at [SNAP] website
- Online at website other than [SNAP] website
- Called [SNAP] office
- Called toll-free information line
- Called my specific case worker
 - Was it easy or difficult to get a hold of your case worker?
- Went in person to [SNAP] office
- Asked a friend or family member for help
- Asked other government agency for help.
- 3. Was it easy or difficult to get answers to questions?
- 4. Was the help that you received useful/adequate? Why or why not?

F. For Those Who Had An Interview...

- 1. If you had an eligibility interview either in person at a local agency office or by telephone, describe the interview process.
- 1a. Was your interview by phone or in-person?
- 2. How easy or difficult was it to schedule your eligibility interview?

3. What topics were covered in the interview you had with the [SNAP] rep?

• Your rights and responsibilities as a [SNAP] client

- How to access and use the EBT card [insert state name for card]
- Recertification procedures
- Help and other resources available
- Where can you use [SNAP] benefits
- What kinds of things can you buy with [SNAP] benefits
- 4. During the interview, did you have an opportunity to ask questions?

5. Were you given information about other benefits you might be eligible to receive?

6. About how long did the interview last?

7. Did you have any follow-up contact with the person who interviewed you?

8. Do you think that *not* having an interview with a [SNAP] representative would have made the application process easier or more difficult? Why?

G. For Those with No Interview...

- 1. Did you receive information about any of the following:
 - What information you needed to show to complete your application
 - Your rights as a [SNAP] client
 - How to access and use the EBT card
 - Recertification procedures
 - Help and other resources available
 - Where can you use [SNAP] benefits
 - What kinds of things can you buy with [SNAP] benefits
- 2. How did you receive this information?

3. Did you know that you could request an interview with a [SNAP] representative?

4. Do you think that having an interview with a [SNAP] representative would have made the application process easier or more difficult to complete? Why?

5. Did anyone from the SNAP office contact you after you submitted your application?

6. Where you asked any follow-up questions about your application? (by telephone or mail?)

7. What types of questions were you asked?

8. How long did that follow-up process take?

H. Overall Impressions

- 1. [If answered "no" at qC5,] For those of you who did not complete your application for [SNAP] benefits, at what point in the application process did you stop?
- 1a. [If answered "no" at qC5,] What was the main reason you did not finish the [SNAP] application process?
- 2. What was the easiest part of the [SNAP] application process?
- 3. What was the most difficult part of the [SNAP] application process?

4. Is there anything you would change about the [SNAP] application process to make it easier?

- 5. Do you plan on re-applying for [SNAP] benefits? Why or why not?
- 6. Is there anything else that you would like to add about your experiences with the [SNAP] application process, or are there other thoughts you had during our discussion that you would like to mention before we finish?

Thank you for taking the time to share your thoughts and ideas. This discussion has been very useful in helping us learn more about the Supplemental Nutrition Assistance Program in [STATE]. If you have any questions about your SNAP application and the reasons you did not qualify for benefits, you should contact your local SNAP office directly.