



Lara K. Hulsey
Deputy Project Director

OMB #: 0584-xxxx
Expiration Date: xx/xx/20xx

[DATE]

<<Name>>, Food Service Director
<<xxx>> School District
<<Address>>
<<City, State, Zip>>

Dear [District food service director]:

Your state is participating in a demonstration sponsored by the U.S. Department of Agriculture’s (USDA) Food and Nutrition Service that adds Medicaid to the list of programs used to directly certify students for free meals under the National School Lunch Program (NSLP) and School Breakfast Program (SBP). Using Medicaid data for direct certification could result in more students being certified for free meals while reducing the number of households submitting applications submitted. This would reduce the effort districts must expend processing applications for the NSLP and may reduce overall costs. To determine the impact of using Medicaid data in NSLP/SBP certification, the demonstration gathers data from the group of districts selected to use Medicaid for direct certification and a second group that, for comparison purposes, will not use Medicaid information data during the demonstration.

The Food and Nutrition Service (FNS) of USDA has contracted with Mathematica Policy Research to conduct an evaluation of the demonstration and your district is one of 700 districts across six states included in the study. The study will help Congress make informed decisions about direct certification policies.

This is an important study for FNS and the USDA, and your experiences certifying students for the NSLP and SBP are extremely valuable inputs to the Healthy, Hunger-Free Kids Act of 2010. Participation of states and selected districts in the evaluation is required to be included in the demonstration.

The study is collecting information on certification costs incurred during the 2012–2013 and 2013–2014 school years. To accomplish this goal, you will be asked to complete six surveys—the current survey gathering information this summer for the previous school year (the 2012–2013 school year) and five additional surveys designed to gather data for the 2013–2014 school year at different points in time so that districts can report costs approximately once every two months—soon after they are incurred.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average 5 minutes per response.

LETTER TO:

FROM:

DATE:

PAGE: 4

Please complete the first survey this month using the log-in information provided below.

Go to <https://xxxxxxx>

At the log-in screen, enter the following:

User ID: [user name]

Password: [password]

The information you provide in this survey will be kept private and will not be shared with anyone outside the study team. Responses will be presented only in aggregate form and will not identify any individual or district.

If you have any questions about this survey or the study, please contact our associate survey director, Annalee Kelly, at 609-275-2885 or by email at akelly@mathematica-mpr.com.

Sincerely,