

INTERVIEW PROTOCOL: STATE CHILD NUTRITION DIRECTOR

**INVESTIGATIVE AREA 2: PARTICIPATION AND COST EVALUATION –
CHALLENGES**

**DEMONSTRATIONS OF NSLP/SBP DIRECT CERTIFICATION OF CHILDREN
RECEIVING MEDICAID BENEFITS**

State:
Interviewee/Position:
Others present/Position:
Permission to Record:

Date:
Start time:
End time:
Interviewer:

Introduction

The purpose of this interview is to explore issues related to [STATE's] demonstration of direct certification of children for the National School Lunch Program and School Breakfast Program or NSLP/SBP, using Medicaid enrollment data. This interview will last approximately 1 hour.

September 2012 Interviews:

The study will assess the impact of the demonstration on NSLP/SBP participation and certification costs. This interview will focus on the challenges you experienced in [MONTH(S)] 2012 when implementing the demonstration, and the extent to which you have overcome those challenges to date. We will conduct additional interviews in February 2013 to discuss the experiences and challenges of the next round of certification matching. In addition to these interviews, we will use quantitative data to assess the demonstration's impact on NSLP/SBP participation and costs. [STATE] is among six participating States, two with statewide demonstrations and four with local district-based demonstrations.

Subsequent Interviews:

We talked to you in [MONTH] about your experiences with the demonstration of direct certification of the National School Lunch Program/School Breakfast Program, or NSLP/SBP, using Medicaid enrollment data. In this interview we would like to discuss your experiences and progress since the last time we talked.

All Interviews:

Throughout this interview, we will refer to the demonstration of direct certification with Medicaid data as DC-M. The information that we collect in this interview will be used together with information from other States to describe the experiences of all States participating in the demonstration.

Appendix H.1: State Challenge Interview Protocol (Round 1: Fall Semester) - CN

Because each State's project is unique, describing a particular State's experiences will likely identify that State. We will not use your name in our reports, but your identity might be inferred from the identity of your State and the nature of the information that you provide. If there is something that you want to say privately that you would not otherwise mention, let us know and we'll use it to inform our understanding, but will keep the details private.

We will ask you questions and record your answers in an interview format that will take about an hour. With your permission, we'd like to electronically record your responses to make sure we get them right. Do I have your permission to record the interview?

[If yes: Thank you.]

[If no: You have my assurance that we will keep anything private that you wish. If you'd prefer, we will not cite anything that you say verbatim from the recording. Wait for response; if yes, record: Thank you. If no: That's OK. Just bear with me as I take detailed notes.]

Your DC-M implementation began near the start of the 2012-2013 school year. For the most part, we're going to focus on your recent efforts regarding the certification process for this school year, but let's begin with the context of DC-M in your State.

History and Reasons for Applying

1. Why did [STATE] apply to participate in the DC-M demonstration? *[Probe: Any other reasons?]*
2. Were your plans for, and design of, DC-M influenced by any limitations or weaknesses of direct certification efforts using other means-tested programs? What would you say are the limitations and weaknesses for: *[If some mentioned in response to Q1 above, begin with: You mentioned some limitations of current direct certification efforts, were there any others?]*
 - a. SNAP?
 - b. TANF?
 - c. FDPIR?
 - d. Other programs, if any, specific to your State? *[If so: What programs?]*

Start-Up Issues and Concerns

Now, we'll focus on your preparations for DC-M.

3. Overall, what would you say were the most serious concerns you faced in planning and preparing for DC-M?
4. Consider the data sharing agreements necessary to conduct direct certification with Medicaid.
 - a. Which agencies are party to the data sharing agreements necessary for DC-M?
 - b. Did you develop new agreements or revise existing agreements?

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- c. Can you describe any issues you had to address with partner agencies on:
 - i. Data confidentiality or security, including but not limited to HIPAA?
 - ii. Information technology protocols for data sharing?
5. Now, consider the specifications for matching student enrollment data with Medicaid data
 - a. Are the specifications and data elements the same as those used for direct certification with SNAP? Why or why not?
6. DC-M requires information on income “before the application of any expense, block or other income disregard,” rather than the income definition used in determining Medicaid eligibility. How were you able to account for this difference so that you could use Medicaid income to determine eligibility for DC-M? How challenging was this aspect of the process? Would it have been easier to provide the income definition used in determining Medicaid eligibility?
7. How did you conduct DC-M together with direct certification with SNAP, or combine the results? Did you have any concerns related to the sequencing of different direct certification methods (e.g., SNAP, TANF, FDPIR) for a household/applicant. If yes, what were they?
8. Now, let’s focus on IT capabilities. In general, what systems updates, if any, did you have to make in your agency, or other agencies, in order to identify eligible children and conduct the DC-M matching process?
 - a. Explain the impact of these updates on staffing and your schedule for getting the work done.
9. Prior to this demonstration, were you using Medicaid data for direct verification of NSLP applications?
 - a. If yes, explain the transitions that you made to scale up from DV-M to DC-M and how that affected your preparation for DC-M.

Implementation Challenges

Turning to implementation of the systems developed, let’s discuss some implementation challenges that your State might have had to deal with.

10. Overall, what challenges have you [*if district-level matching, add: and local districts*] encountered in implementing DC-M? What problems have these challenges caused? [*Probe: Any other serious challenges?*]
 - a. To what extent have you been able to resolve (each of the) challenges and, if so, how?
11. Are there specific barriers related to Medicaid that complicated the matching process or negatively affect the matching success rate? [*Probe: Have you had difficulties with low-quality data, missing data, high rates of unmatched cases, one-to-many matches, or matching individuals within a household? Any other examples?*] [*If district-level matching: Have districts reported any specific barriers?*]

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12. Describe any quality assurance systems in place to ensure the accuracy of matches.
[Probe: Do you check a sample of cases? How is the sample determined?]
13. Describe any challenges in exchanging data from system to system and how you overcame them or, if ongoing, how you plan to do so. For example, did you implement changes after some data elements from Medicaid did not fully meet your needs?
14. Let's discuss the challenges associated with resources to implement DC-M. Thinking about technology, did you have all of the software and systems needed to get the job done? Or did you have to acquire or develop some? Please explain.
15. Think about the relative success of matches achieved with DC-M. Did it permit more students to be directly certified than before? How and to what extent?
 - a. Approximately what percentage of Medicaid records are successfully matched to student enrollment files?
 - b. Did your experiences with or success in matching vary by student characteristics or for any subset of cases or groups of children/families?
[Probe: Were there differences in success by race/ethnicity? Family/household size and composition? Were there name differences among members of the family/household? Student grade level?]
 - c. Did success in matching vary by district characteristics such as size of district? Whether it was urban, suburban, or rural? Diversity of district?
16. Have you had any challenging concerning key data elements that may have been missing for certain subset of cases or groups of children?
17. Did you have any challenges associated with extending eligibility to multiple children in the same household? If so, describe what they were and how you overcame them.
18. How does your system ensure that students certified under DC-M remain certified if they transfer to another school district? [If DC-M1: Discuss differences in how the process works for districts participating in DC-M and those not participating in DC-M.]
19. Once DC-M was implemented, did you experience any delays in conducting DC-M compared to direct certification with SNAP or was the timeline about the same? If so, describe the nature of those delays and the average impact in time.
20. Now, please think about any challenges you faced in obtaining staff to implement DC-M at the State level, or if applicable, at the district level.
 - a. Did you face challenges in identifying staff or obtaining enough of their time? How did DC-M impact their other responsibilities?
 - b. Did you need any temporary or contract staff?
 - c. What activities associated with DC-M were most time consuming, difficult to implement, or required significantly more time/effort than originally anticipated?
 - d. Were there any particular aspects of your State's systems or processes that made DC-M more or less labor intensive for staff?

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- e. Is the staff time in conducting DC-M offset by reduced staff time on other activities? Please explain how and to what extent.
- f. *[For subsequent interview only]* Did you experience any turnover among key staff that affected your continuing ability to conduct DC-M or make changes/improvements to it?

Timing of Match

- 21. We want to understand the lag time between enrollment in Medicaid and the potential to benefit from DC-M in your State. For example, if a match is conducted on August 1, what is the most recent group of students who might be matched? Those enrolled in Medicaid a month before, by July 1, or two weeks before, by July 15, or what?

[For statewide demonstrations]

- a. How often does the [STATE] education agency receive Medicaid enrollment data files?
- b. How often does your agency conduct matches against the Medicaid files?
- c. To what extent is this matching schedule successful in certifying students as quickly as possible?

[For district-level matching States]

- a. How often is Medicaid data provided to districts?
- b. How often do most districts conduct matching? Are there any State requirements or may the district set its own schedule?
- c. To what extent is this matching schedule successful in certifying students as quickly as possible?

Program Outcomes

Now, let's talk about program outcomes.

- 22. What is your estimate of benefits gained from DC-M in helping to meet your State's goals for participating in the demonstration and increasing the participation of students in NSLP/SBP, based on what you know so far?
- 23. If you were asked whether or not to recommend continued, full-scale implementation of DC-M for your State based on the investment made, estimated ongoing implementation costs, offsets to other direct certification expenses, and gains in helping to certify needy children for NSLP/SBP, would you recommend continuing the effort? Why or why not?
- 24. Would you recommend the effort to other States that are similar to your State in terms of needs of the population and availability of systems and resources? Why or why not?

Response to Challenges/Lessons Learned

Now I'd like you to think about the lessons learned to date in implementing the DC-M demonstration.

25. What would you do differently or recommend that other States do differently?
26. What procedures have been planned or implemented to improve the success of DC-M? [*Probe: Are these planned or already implemented; if planned, for when?*]
27. How will the system as implemented be able to adapt to changes in Medicaid income definitions or eligibility criteria in the future?
28. Is there anything else you would like to add?

Closing

That concludes our interview. Thank you for your time. We'll be contacting you again in several months to schedule an interview for [MONTH] to discuss your State's experiences in the next round of DC-M.

[*In September 2012, add: At that time we'll also plan ahead for interviews next September with several participating local districts.*]

[*In February 2013, add: We'd also like to get some input from you on several local districts we can talk to in September 2013 about their experiences. We'd like to be able to talk to a variety of districts in terms of size and the nature of their experiences to get a broad perspective. We'll send you a form you can complete to suggest districts for those interviews, from which we'll choose about six to interview.*]