

INTERVIEW PROTOCOL: STATE MEDICAID DIRECTOR

CHALLENGES TO IMPLEMENTING DIRECT CERTIFICATION WITH MEDICAID

**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 gather information about [STATE's] demonstration on direct certification of children for the National School Lunch Program and School Breakfast Program, or NSLP/SBP, using Medicaid enrollment data. The interview will last approximately 30 minutes. Since you are involved in the Medicaid program, we will focus on your perspective.

Winter 2013 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.

Because each State's project is unique, describing a particular State's experiences will likely identify that State. We will not use your names 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 a half 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.]

Appendix H.5: State Challenge Interview Protocol (Round 2: Spring Semester) - M

[*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, but we're going to focus on your recent efforts regarding the certification process for this school year.

Background

To start, let's talk about how your demonstration has progressed since [MONTH].

1. Have any changes occurred in your DC-M matching process since the initial round of matching was completed? If so, why did you make these changes? [*Probe:* Follow up on anything they mentioned planning during the first round of interviews.]

Implementation Challenges

I'd also like to discuss any implementation challenges that your State might have had to deal with.

2. Have any new challenges arisen since we last spoke?
3. Overall, what challenges have you encountered in implementing DC-M? What problems have these challenges caused? [*Probe:* Any other serious challenges?]
 - a. [*For each challenge:*] To what extent have you been able to resolve the challenge? How? (If state mentioned challenges in previous interview, as about their current status in resolving them)

Providing the data

4. Because children receiving Medicaid are not categorically eligible, DC-M requires States and districts to look at income, in addition to Medicaid receipt, to determine NSLP eligibility. How challenging is conducting that extra step? How does your State assess income of children in the Medicaid data for DC-M?
 - a. Do you use a simple gross income variable, program or category codes, or a combination of the two to determine eligibility? [*If gross income:* was the appropriate single data element already in your system or did you need to construct it?] [*If program/category codes:* how easy was it for your agency to decide which program codes were eligible and which were not? Did this process require any clarification from the Child Nutrition Agency?]
 - b. Is a gross income variable included in the file your agency sends to Child Nutrition staff?
 - c. 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?

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[If respondent says that Medicaid receipt is used as an indicator of NSLP eligibility: Is the measure of income used for Medicaid eligibility gross income? What exclusions and deductions do you make? And what income cutoff is used for Medicaid eligibility (Is it 133%? Higher? Lower?)]

5. Describe any challenges in exchanging data from system to system and how you overcame them.
6. Now that you've accommodated requests to provide data for DC-M, do you anticipate any continuing impacts on your agency besides the ongoing provision of data? If so, what are they?
7. How often does your agency provide Medicaid enrollment data files for the match?
 - a. To what extent has providing the files on this schedule been a challenge? *[If challenge: How have you adapted to this challenge over time?]*

Resources

8. Let's discuss the challenges associated with resources to implement DC-M. First, let's focus on IT capabilities. Since we last spoke, have you been required to make any systems updates in order for your agency to accommodate DC-M?
 - a. Explain the impact of these updates on staffing decisions and the time constraints to accomplish this.
9. Now, please think about any challenges in obtaining staff to implement DC-M.
 - a. What activities associated with DC-M were most time consuming and difficult to implement for staff? To what extent, if any, did activities require significantly more time/effort than originally anticipated?
 - b. Were there any particular aspects of your State's systems or processes that made DC-M more or less labor intensive for staff?
 - c. Did you need any temporary or contract staff?

Response to Challenges/Lessons Learned

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

10. What would you do differently or recommend that other States do differently?
11. How will the system as implemented be able to adapt to changes in Medicaid income definitions or eligibility criteria in the future?
12. 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.

