

Attachment 5.g. Site Visit Clinic Staff Interview Protocol and Consent Form

**MEDICAID INCENTIVES FOR PREVENTION OF CHRONIC DISEASES EVALUATION
INTERVIEW GUIDE**

Clinician Protocol

(Individuals working in a clinical setting who are affiliated with the program, have direct interaction with potential participants, may educate or meet with participants on a regular basis, and may be aware of problems recruiting participants)

Roles may include the following:

- Providers
- Clinic administrative staff
- Nurse care managers

A separate protocol has been developed for nonclinical educators and recruiters.
Questions in blue are designed to be probes that will be asked when needed.

Introduction

Thank you for making time to speak with us today. We are researchers from Research Triangle Institute International (RTI) and the National Academy for State Health Policy (NASHP), evaluating the Medicaid Incentives for Prevention of Chronic Diseases demonstration.

In this discussion, we are interested in gathering your perspective on implementation progress and challenges, program details such as the types of special populations involved or targeted by your state initiative, your data collection processes, and the project's evaluation progress. We are also particularly interested in your perspective on the effectiveness and sustainability of this initiative on reducing Medicaid and health care costs.

Our evaluation is being funded by the Centers for Medicare & Medicaid Services (CMS). As a condition of participation, CMS expects state staff and program partners to cooperate with the evaluation team, but ultimately your decision to participate in this aspect of the study is voluntary. If you do not wish to participate in this interview or answer specific questions, please let us know immediately.

We believe there are minimal risks to you from participation, and every effort will be made to protect your confidentiality. We want to assure you that we will not quote you by name. We will use some quotes in reports, but quotes will not be attributed to an individual or his or her organization.

There are no direct benefits to you from participating in this study. But your insights will be used by federal and state policymakers as well as other Medicaid programs to improve the impact that incentives have on chronic disease prevention and management among Medicaid beneficiaries and address the challenges involved in implementing an incentivized health prevention program. CMS and RTI's Institutional Review Board (IRB) have reviewed and approved this research protocol.

We would like to record our conversation, to ensure that our notes from today are complete. Do I have your permission to audio record our conversation today?

Finally, we are conducting a second round of stakeholder interviews focused on beneficiaries' satisfaction with the program so we may contact you for further information.

Are the remaining interview conditions OK with you? Do you have any questions before we begin?

Background

About the Respondent

1. What is your role in [name of state program]?
 - a. What is your role in [name of state program] participant recruitment?
 - b. What other interactions do you have with participants?
2. How long have you been in this role?
3. What type of interaction do you have with participants (e.g., do you provide ongoing counseling or teach a class or serve as a resource when participants have questions)?

- a. On a typical day, what percentage of your time is spent interacting with participants?
 - b. How do participants typically contact you (e.g., via telephone, in person, as part of a group meeting, schedule an appointment)?
 - c. How frequent is your contact with each individual participant?
 - i. How, if at all, does the frequency of participant contact vary?
4. In your position, how often, if at all, do you interact with Medicaid beneficiaries who are not [name of state program] participants (occasionally, daily, or never)?
- a. What type of interaction do you have with these individuals?
 - b. How do your interactions with [name of state program] participants compare to those with individuals who are not participating in [name of state program]?
 - i. To what extent, if at all, are your interactions with these two groups of individuals similar?
 - ii. To what extent, if at all, are your interactions with these two groups of individuals different?
5. In your opinion, are there any ways your interactions with participants could be improved?
- a. If so, how could they be improved?
 - b. In your opinion, how could [name of state program] facilitate this change?
6. How did your [program/practice/clinic] become involved in [name of state program]?
- a. Was your [program/practice/clinic] recruited to participate in [name of state program]?
 - b. Did your [program/practice/clinic] respond to a solicitation such as an RFP to participate in [name of state program]?
 - c. Is your [program/practice/clinic] paid to participate in [name of state program]?
7. How long has your [program/practice/clinic] participated in [name of state program]?
8. Who else within your [program/practice/clinic] participates in [name of state program] (e.g., nurse, medical assistant)?

About the Program

9. Some state participants refer to the initiative by a name different from the official program name. Other than [name of state program], what names do you or participants use when referring to this program?

- a. In your opinion, do you think participants will recognize the program as [name of state program]?
10. In your opinion, can participants distinguish between [name of state program] and general health services provided by Medicaid?
- a. Do participants recognize that they are in a special Medicaid incentive program?
11. Are there any similar or complementary efforts in place in your [program/practice/clinic] for your patients with [chronic condition(s) of this program's focus]?
- a. Tell us about these programs and how they complement or overlap with your [program/practice/clinic]'s MIPCD efforts?
 - b. How do these initiatives differ from [name of state program]?

Implementation Progress

Overall Program

12. In your opinion, what have been the key successes of [name of state program] in your [program/practice/clinic]?
- a. What factors helped [name of state program] succeed?
13. What challenges or barriers have you faced in your role within [name of state program]?
- a. How are you or [name of state program] addressing these challenges?
 - b. What challenges, if any, still remain unaddressed?
14. Within your [program/practice/clinic], does participation in [name of state program] vary based on the following characteristics, and if so, please describe.
- a. Patient characteristics (age, sex, race)?
 - b. Native language?
 - c. Geographic location?
 - d. Other characteristics?
15. What type of interaction/communication, if any, do you have with nonclinical participant educators such as lifestyle coaches, peer navigators?
- a. How often do you interact/communicate with nonclinical participant educators?
 - b. How, if at all, could the communication between [name of state program] nonclinical education and clinical staff be improved?

Recruitment

In discussing your implementation progress, we would like to ask a few questions about recruitment. We recognize that you may have a limited role in recruiting participants; however, we hope to obtain your opinion on the progress of this activity and will ask only the questions that are applicable to your role. *Questions indicated with an asterisk (*) will only be asked of clinicians who engage in direct participant recruitment.*

16. How is [name of state program] currently recruiting participants to your [program/practice/clinic]?
 - a. Please describe how this recruitment strategy(ies) was developed.
 - b. What staff are responsible for recruiting participants?
17. *When did you begin recruiting participants?
 - a. To your knowledge, did participant recruitment occur according to the originally proposed timeline?
 - i. What are the reasons participant recruitment did not follow the original timeline?
18. *How are you recruiting participants?
 - a. Please describe the recruitment process.
 - i. Tell me about the screening process, if any, for possible participants (for example, do you verify if they are enrolled in Medicaid or eligible for the program)?
19. *How was your recruitment strategy(ies) developed?
 - a. Did you collaborate with any partners to develop this strategy?
 - i. If so, please describe who?
20. *What methods or materials, if any, are you using to recruit participants (e.g., flyers, outreach to providers)?
 - a. Did you help develop any of these recruitment methods or materials?
 - b. Were any of these methods or materials adopted from another program(s)?
21. *Are there specific locations you work in or organizations you work with to recruit participants?
 - a. How were these locations or organizations identified?
 - b. In your opinion, how successful are these locations or organizations in recruiting participants?

22. How many staff within your [practice/program/clinic] recruit [name of state program] participants?
23. *What type of training did you and other staff receive before you began recruiting participants?
 - a. Please tell us about this training.
 - i. How long is it?
 - ii. Who developed this training?
 - iii. What types of information were covered in the training?
 - iv. How helpful was this training at providing you with the skills needed to recruit participants?
 - v. Have there been additional “refresher” courses since the original training?
24. *In your opinion, how could your training be improved to be more useful, if at all?
25. In your opinion, what marketing strategies have been most successful at recruiting participants to your [program/practice/clinic]?
 - a. What factors contributed to their success?
 - b. Were certain strategies more or less successful at recruiting participants with different :
 - i. Patient demographics (race, age, sex)?
 - ii. Chronic health conditions?
 - iii. Other characteristics?
 - iv. Please describe why.
26. *In your opinion, how successful have you been at recruiting participants?
 - a. Has the program reached its participant enrollment goals?
27. What challenges have you or your [program/practice/clinic] faced recruiting participants?
 - a. How is [name of state program or program/practice/clinic] addressing these challenges?
28. In your opinion, is there a way that [name of state program] could improve its participant recruitment to your [program/practice/clinic]?

Incentives

29. What role, if any, do the incentives play in [name of state program] in your [program/practice/clinic]?
- a. Do they assist [name of state program] in recruiting participants?
 - b. Do they help motivate and retain participants in [name of state program]?

Special Populations

As part of the Affordable Care Act, the MIPCD national demonstration is required to focus on the extent to which special populations (such as adults with disabilities, children with special health care needs) are able to participate in the demonstration. This section focuses on special populations the state may engage in its program.

30. We understand that [name of state program] is planning to engage [special population listed here], which we consider to be a special population. How are you or other staff recruiting or engaging this special population(s) to participate in your [program/practice/clinic or name of state program]?
- a. Are these recruitment techniques unique for this special population(s)?
31. Based on your experience, how successful are these techniques at engaging [name of special population(s)] to participate in the [name of state program] implemented by your [program/practice/clinic]?
- a. What challenges has [program/practice/clinic] faced recruiting [name of special population(s)]?
 - b. Are there any changes your [program/practice/clinic] is planning to implement to overcome these challenges?
32. What strategies are you or other staff using to recruit individuals who speak languages other than English to participate in your [program/practice/clinic]?
- a. Have you implemented recruitment strategies in other languages or used a translator or a language line (such as an ATT translation phone line) to recruit the participants?
 - b. Do you have recruitment materials in different languages or translators available to recruit participants?
 - i. Which languages are available?
33. To what extent, if at all, do you conduct participant sessions in other languages?
- a. Have you used a translator for any participant sessions?
 - b. Have educational materials been translated into different languages?

- i. Which languages?

State Grant Evaluation Progress

- 34. We understand that [name of organization] is in charge of [name of state program] evaluation and that they are planning to conduct [name of the evaluation type]. What role, if any, do you have in this evaluation?
 - a. How is [name of state program] assessing the impact of your work with participants?
 - i. Does [name of state program] evaluate your recruitment strategies?
 - ii. Does [name of state program] evaluate beneficiary participation or satisfaction with your [program/practice/clinic]?
- 35. What assessments, if any, are you or [name of organization evaluating] conducting with beneficiaries?
 - a. Are you assessing beneficiary satisfaction?
 - i. If so, what types of assessment tools such as questionnaires, focus group discussion guides are being used to gauge participant satisfaction with [name of state program]?
- 36. What data, if any, do you collect as part of your participant recruitment and education efforts?
 - a. How, if at all, are these data shared with [name of state program]?
 - b. How, if at all, do you use these data to decide which recruitment strategies to implement?

Data Collection

- 37. [name of state program] is conducting a study with an experimental group receiving incentives and comparing them to a control group that may not be receiving incentives. Do you know which participants are in the experimental group or the control group?
- 38. *If yes:* In many experimental studies, interaction between control and experimental groups can impact study outcomes. To what extent does this interaction currently occur with participants in your [program/practice/clinic]?
 - a. Do the two groups interact frequently, occasionally, or not at all?
 - b. In what context does interaction between control and experimental group participants occur (for example, sharing information or concepts learned in the classes)?
 - c. What steps, if any, have been taken to minimize this interaction?

Overall

- 39. To date, what key implementation lessons have you learned?

- a. What advice would you give providers or clinical staff participating in similar types of prevention programs?
40. What recommendations, if any, do you have for [name of state program] in its efforts to engage additional providers to participate?
41. What changes to [name of state program], if any, do you plan to implement before beneficiary participation ends in December 2015?
- a. Why have you or your staff decided to make these changes?
42. In thinking about the various challenges you've shared, in your opinion, are there any challenges that would/could have benefited from state peer-to-peer learning or technical assistance?
43. Is there anything else about [name of state program], that we haven't covered but that would be important for our team to know?