INVESTIGATIVE AREA 2: PARTICIPATION AND COST EVALUATION – CHALLENGES

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

| State: | Date: |
|--------------------------|--------------|
| Interviewee/Position: | Start time: |
| Others present/Position: | End time: |
| Permission to Record: | Interviewer: |

Introduction

The purpose of this interview is to explore issues related to [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.

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.

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 52 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

Appendix H.2: State Challenge Interview Protocol (Round 1: Fall Semester) - M

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.]

[*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. To what extent was the Medicaid office consulted in [STATE's] decision to apply to participate in the DC-M demonstration?

2. Consider any limitations and weaknesses of direct certification efforts using other means-tested programs.

- a. Does the office that handles Medicaid in [STATE] also handle:
 - i. SNAP?
 - ii. TANF?
 - iii. Other programs, if any, specific to your State? [*If so*: What programs?]
- b. What would you say are the limitations and weaknesses of direct certification using:
 - i. SNAP?
 - ii. TANF?
 - iii. Other programs?

Start-Up Challenges

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?

a. How did you resolve each of these issues?

- 4. Consider the data sharing necessary to conduct direct certification with Medicaid.
 - a. 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 the Medicaid data you provide for DC-M.
 - a. Are the specifications and data elements the same as those used for direct certification with SNAP? If no, were the same items available in the Medicaid files? Are any additional data elements needed for Medicaid cases?
 - b. Do you provide separate files for Medicaid, or are they included in the same file as the SNAP children?
- 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. Now, let's focus on IT capabilities. In general, what systems updates, if any, did you have to make in your agency to accommodate DC-M?
 - a. Explain the impact of these updates on staffing and the time constraints to accomplish this.
- 8. Prior to this demonstration, were you providing 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.

- 9. Overall, what challenges have you 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?
- 10. Describe any challenges in exchanging data from system to system and how you overcame them.
- 11. Now that you've accommodated the initial request 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?

12. Let's consider 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?

Providing Files

13. How often does your agency provide Medicaid enrollment data files for the match?

- a. How recent is the time period covered by the Medicaid file you provide? For example, if you provide a file on September 1, does it cover children enrolled in Medicaid as of August 15, as of August 1, as of July 15, or another date? Please explain.
- b. How long is the certification period for Medicaid in your State? Are households required to report changes in income during their certification period? (How long ago might the income data in the Medicaid files have been reported, for some children?)
- c. To what extent has providing the files on this schedule been a challenge? [*If challenge:* How have you adapted to this challenge over time?]

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.

- 14. What would you do differently or recommend that other States do differently?
- 15. How will the system as implemented be able to adapt to changes in Medicaid income definitions or eligibility criteria in the future?
- 16. 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.