OMB #: 0584-xxxx

Expiration Date: xx/xx/20xx

 DCM-##

 [date]

<<Name>>, [State Child Nutrition Director/State Medicaid Director]

<<xxx>> [Agency]

<<Address>>

<<City, State, Zip>>

Dear <<[State Child Nutrition Director/State Medicaid Director]>>:

As part of the evaluation of the Demonstrations of Direct Certification of Children Receiving Medicaid (DC-M) being conducted by the U.S. Department of Agriculture’s Food and Nutrition Services, Mathematica Policy Research’s subcontractor, Insight Policy Research, will collect data on the challenges faced in implementing DC-M. We will interview representatives of both the [State Child Nutrition Agency] and the [State Medicaid Agency] in your state. [*for some states:*] In addition, we will conduct interviews with staff in six districts in your state during the 2013–2014 school year to learn about DC-M implementation challenges from the districts’ perspective.

To learn about the experiences of your state agency, we would like to interview you by telephone twice during this school year [*for Year 1 states:*] and twice next school year. The first interview will be in September or October and the second will occur in February. Each interview will last approximately one hour.

A member of the study team from Insight Policy Research will follow up directly with you to provide more information and to schedule a time for your agency’s first interview. Your participation will help us understand the types of challenges states such as yours might encounter in preparing for and conducting DC-M. Thank you for your participation in these interviews and for your continued support of this important study. Please contact me at (609) 936-2778 if you have questions.

 Sincerely,

cc: <<Insight Policy Research>>

Attachments: Study Summary