

Attachment A: State Questionnaire of Integration of Health and Human Services Programs

PURPOSE

This questionnaire is part of a study being conducted by the U.S. Department of Health and Human Services (HHS) to describe the range of activities and efforts states have undertaken since 2010 to better connect their health and human services programs for low-income and disadvantaged populations. With a focus on health and human services programs such as Medicaid, TANF, SNAP, Child Care and LIHEAP, we ask questions about:

- Eligibility and enrollment systems
- Program entry processes
- Governance of data sharing
- Lessons learned
- Technical assistance needs

The questionnaire will include all 50 states and the District of Columbia.

Your participation in this activity is completely voluntary. Your full participation, however, is crucial to helping HHS better understand every state's current status of health and human services program integration, as well as plans and needs for further integration. Findings may potentially contribute to the development of technical assistance tools to help states that need additional resources or guidance to achieve their integration goals.

One outcome of the questionnaire will be a webinar in Spring 2016 to be hosted by the study sponsors, HHS's Office of the Assistant Secretary for Planning and Evaluation and the Administration for Children and Families. The webinar will provide a forum to share results, promote dialogue among state participants, and discuss technical assistance and other actions to further promote integration across health and human service programs.

We will not identify or release to others the responses of individual states, counties, or individuals completing this questionnaire, and any presentations will not attribute responses to any individual respondent without permission. Some respondents may be contacted to see if they are willing to discuss their state's experiences as part of the webinar.

The study is being conducted by MEF Associates in partnership with the American Public Human Services Association (APHSA) and the Rockefeller Institute of Government of the State University of New York (SUNY) under contract to HHS.

The time required to complete this information collection is estimated to average 45 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer.

INSTRUCTIONS

- The questionnaire is expected to take 45 minutes to complete on average.
- Responses are saved each time you click on the “Next” or “Prev” buttons on the bottom of each page.
- You can change earlier responses by clicking on the “Prev” button to return to a question.
- If you wish to pause the questionnaire, you can click “Next” or “Prev” to save the responses you have entered so far. When you are ready to return to it, click on the “Begin Questionnaire” link in the email invitation.
- If you would like someone else in your agency to contribute responses to your questionnaire, you can forward them the email invitation. The “Begin Questionnaire” link in the invitation is specific to your questionnaire, and they can access it through the same link. Please note a few things: 1) Please remind any other respondents to save their responses by clicking “Next” or “Prev” after they have contributed responses. 2) To ensure responses are saved properly, only one person should access the questionnaire at a time. 3) Our goal is for responses to reflect the perspectives and priorities of senior leadership within the agency, so to the extent possible, anyone contributing responses should answer questions from that perspective.
- We have also provided a Word document version of the questionnaire that you can use to gather responses from others in your agency. However, **we would like only one response per state** so please ensure that you are coordinating across potential respondents and submitting only one response.
- When you have completed the questionnaire, please click on the “Done” button on the last page. This will lock the questionnaire, and after it is clicked, no one will be able to change answers without contacting us.
- As noted on the previous screen, we will not identify or release to others the responses of individual states, counties, or individuals completing this questionnaire, and any presentations of findings will not attribute responses to any individual respondent without permission.
- If you have any questions about the questionnaire, or need help accessing or completing it, please email [CONTACT INFO TO BE ADDED] or call [CONTACT INFO TO BE ADDED].

I. BACKGROUND

Please enter the following information for the primary respondent to this questionnaire. This information is for questionnaire administration purposes only, including potentially contacting you for clarification of responses.

1. State: ___[Dropdown menu]___
2. Agency: _____
3. Name: _____
4. Title: _____
5. Email: _____
6. Phone: _____
7. Which health and/or human service programs are within the purview of your agency? Please select all that apply.
 - Medicaid – eligibility determination and enrollment
 - Medicaid – operations/claims payment
 - Children’s Health Insurance Program (CHIP) – eligibility determination and enrollment
 - Children’s Health Insurance Program (CHIP) – operations/claims payment
 - Supplemental Nutrition Assistance Program (SNAP)
 - Temporary Assistance for Needy Families (TANF)
 - Low Income Home Energy Assistance Program (LIHEAP)
 - Child Care
 - Child Support
 - Child Welfare
 - Other (Please specify additional program(s)) _____

II. ELIGIBILITY AND ENROLLMENT SYSTEMS

[Note to reviewers: we used a skip pattern here, so questions are repeated with slight differences.

- *Those who select the first choice for Q8 will answer Qs 9-13, which refer to an “integrated eligibility and enrollment system” and includes Medicaid and CHIP as an option.*
- *Those who select the second choice for Q8 will answer Qs 14-18, which are identical questions but refer instead to an “eligibility and enrollment system that determines eligibility for human services programs” and does not include Medicaid and CHIP as options for programs included.*

Instructions state that respondents with multiple systems that determine eligibility for human services programs should answer the questions for the system that used for TANF eligibility determination.]

8. Does your state currently have an integrated eligibility and enrollment system shared by health (primarily Medicaid and/or CHIP) and human service programs to determine eligibility?

- We have an integrated eligibility and enrollment system used by both Medicaid and one or more human service programs. *[Please go to Question 9 and answer Questions 9-13]*
- Our eligibility and enrollment system for Medicaid is separate from the system(s) used for any human service programs. *[Please skip to Question 14 and answer Questions 14-18]*

9. For your integrated eligibility and enrollment system that determines eligibility for health and human services programs, please check the programs below for which it determines eligibility:

- Medicaid
- CHIP
- SNAP
- TANF
- LIHEAP
- Child Care
- Other (please specify additional program(s)) _____

10. What are the current capabilities of your integrated eligibility and enrollment system, and when were these capabilities implemented? For each of the following possible capabilities and features, please check whether they were part of your system before 2010, added since 2010, or not a feature of your current system.

[Note: for each row, check only one column]

	In place before 2010, still in place today	Added since 2010, still in place today	Not a feature of the current system
Determine eligibility and enroll newly eligible persons/families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Share information across programs for eligibility and enrollment purposes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Track program and participant activity in response to federal and state requirements.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide real-time access to electronic data for verification purposes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. How important a priority for your agency is improving your system's capabilities in these areas?
Please rank the importance of making system improvements for each type of system capability. (If your system does not currently have this feature, please rank the importance of adding it.)

	No or little importance 1	2	3	4	Very high importance 5
Determine eligibility and enroll newly eligible persons/families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Share information across programs for eligibility and enrollment purposes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Track program and participant activity in response to federal and state requirements.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide real-time access to electronic data for verification purposes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. If there are any other capabilities and features that are high priorities for making improvements to your integrated eligibility and enrollment system, please explain them here:

13. If your state is currently taking any actions to make improvements to your integrated eligibility and enrollment system, please briefly describe them:

[Please skip to Question 19]

14. (If you have multiple systems that determine eligibility for human services programs, please answer the following questions for the system that you use for TANF eligibility determination.)

For your eligibility and enrollment system for human services programs, please check the programs below for which it determines eligibility:

- SNAP
- TANF
- LIHEAP
- Child Care
- Other (please specify additional program(s)) _____

15. What are the current capabilities of your human services eligibility and enrollment system, and when were these capabilities implemented? For each of the following possible capabilities and

features, please check whether they were part of your system before 2010, added since 2010, or not a feature of your current system.

[Note: for each row, check only one column]

	In place before 2010, still in place today	Added since 2010, still in place today	Not a feature of the current system
Determine eligibility and enroll newly eligible persons/families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Share information across programs for eligibility and enrollment purposes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Track program and participant activity in response to federal and state requirements.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide real-time access to electronic data for verification purposes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. How important a priority for your agency is improving your system’s capabilities in these areas?
Please rank the importance of making system improvements for each type of system capability. (If your system does not currently have this feature, please rank the importance of adding it.)

	No or little importance 1	2	3	4	Very high importance 5
Determine eligibility and enroll newly eligible persons/families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Share information across programs for eligibility and enrollment purposes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Track program and participant activity in response to federal and state requirements.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide real-time access to electronic data for verification purposes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Integrating the eligibility and enrollment system for human services programs with that for Medicaid.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. If there are any other capabilities and features that are high priorities for making improvements to your human services eligibility and enrollment system, please explain them here:

18. If your state is currently taking any actions to make improvements to your human services eligibility and enrollment system, please briefly describe them:

[Note to reviewers: skip pattern ends here. All respondents answer the following question]

19. For the programs included in this eligibility and enrollment system, which of the following best describes how a program participant's eligibility is verified?

- Primarily based on paper records.
- Based on a mix of paper and electronic information.
- Based on electronic data sources from inside and outside the agency.
- Based on the use of common business rules, electronic document management, and data sharing.

20. Does the human services eligibility and enrollment system share data with the State or Federal Health Insurance Marketplaces?

- Yes, the system both sends data to and receives data from the Marketplace(s)
- The system sends data to the Marketplace(s), but does not receive any data from the Marketplace(s)
- The system receives data from the Marketplace(s), but does not send any data to the Marketplace(s)
- The system neither sends data to nor receives data from the Marketplace(s)

21. Does information provided to the State or Federal Health Insurance Marketplace trigger enrollment in any of the programs included in the human services eligibility and enrollment system?

- Yes
- No *[Skip to Question 23]*

22. If your answer to the previous question was "yes," please specify which for which programs enrollment might be triggered? _____

23. Does your agency make use of a Master Client Index or similar tool that serves as one common identifier used to match data across data systems?

- Yes
- No *[Skip to Question 25]*

24. Which of the following programs is your Master Client Index or similar tool used with? (If there is more than one index, please respond for the one that in your judgment is the most significant for these programs.)

- Medicaid (eligibility determination and enrollment)

	Medicaid	CHIP	SNAP	TANF	LIHEAP	Child Care
Direct outreach (e.g., mailings, social media)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outreach by program staff in the community (e.g., job and health fairs, community meetings, community health centers)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cross-training of staff from other programs or community partners on program eligibility rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electronic referral forms among programs within the agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electronic referral forms used by programs or community partners outside the agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electronic notices (e.g., electronic notification of recertification dates, benefit updates, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customer service/technical support (electronically or through call center)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client portal(s) (e.g., web-based access to online applications)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Line staff direct enrollment via shared systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common paper application form across two or more major programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shared electronic application form across two or more programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verification of eligibility using data from sources inside the agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verification of eligibility using data from sources outside the agency (e.g., State Department of Vital Statistics, Federal Data Services Hub, other income data sources).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28. Among these features, what have been the most notable changes since 2010?

29. Thinking across the various health and human services programs under your agency's purview, please rank how important a priority you see making improvements (or additions) in the listed areas to support program outreach, access, and intake.

	No or little importance 1	2	3	4	Very high importance 5
Formal referrals from other programs or community partners beyond what is legally required	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Co-location with other agencies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Direct outreach (e.g., mailings, social media)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outreach by program staff in the community (e.g., job and health fairs, community meetings, community health centers)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cross-training of staff from other programs or community partners on program eligibility rules	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Electronic referral forms among programs within the agency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Electronic referral forms used by programs or community partners outside the agency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Electronic notices (e.g., electronic notification of recertification dates, benefit updates, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Customer service/technical support (electronically or through call center)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Client portal(s) (e.g., web-based access to online applications)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Line staff direct enrollment via shared systems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Common paper application form across two or more major programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shared electronic application form across two or more programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verification of eligibility using data from sources inside the agency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verification of eligibility using data from sources outside the agency (e.g., State Department of Vital Statistics, Federal Data Services Hub, other income data sources).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Formal referrals from other programs or community partners beyond what is legally required	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30. If there are any other areas that are high priorities for making improvements (or additions) not listed here to support program outreach, access, and intake, please explain them here:

31. If your state is currently taking any actions to make improvements to support program outreach, access, and intake related to the areas described in the previous two questions, please briefly describe them:

32. Among the programs shown in the table below, please indicate if your state grants eligibility for one or more programs on the basis of eligibility or enrollment in another (sometimes referred to as “categorical eligibility”).

Check if:

	Eligibility is granted for Medicaid...	Eligibility is granted for CHIP...	Eligibility is granted for SNAP...	Eligibility is granted for TANF...	Eligibility is granted for LIHEAP...	Eligibility is granted for Child Care...
...on the basis of Medicaid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...on the basis of CHIP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...on the basis of SNAP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...on the basis of TANF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...on the basis of LIHEAP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...on the basis of Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

33. Please list up to three of the most significant challenges that have impeded efforts to make improvements to the integration of program entry processes. Please be as specific.

Challenge
1.
2.
3.

34. For each of the challenges you listed in the previous question, please indicate how serious an issue you consider the challenge to be.

Challenge	Seriousness of issue		
	Minor	Moderate	Major
[Prefilled from previous question]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[Prefilled from previous question]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[Prefilled from previous question]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

IV. DATA GOVERNANCE

35. Please indicate the role of the following parties in how your agency makes decisions regarding data sharing for the key programs under your purview:

[Note: for each row, check only one column]

	Principal decision maker(s)	Major role in decision making	Minor role in decision making	No role in decision making
Top management within your agency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program-level management in your agency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
IT division within your agency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Partnering agencies/ organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other stakeholders (specify below)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

36. If you responded that “other stakeholders” have a role in decision making in the previous questions, please specify: _____

37. Please indicate which statement best characterizes the data-sharing policies associated with each of the programs below.

	Restrictive policies against data-sharing limit integration with other programs.	Sharing data with other programs requires separate data requests.	The program is part of a data sharing cooperative with two or more other programs.
Medicaid (eligibility determination and enrollment)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medicaid (operations/claims payment)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
CHIP (eligibility determination and enrollment)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
CHIP (operations/claims payment)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SNAP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TANF	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LIHEAP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child Support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child Welfare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (<i>specify below</i>)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

38. If you included an “Other” program in the previous questions, please specify: _____

39. Which statement best describes the overall characteristics of your data-sharing policies?

- There are few or no policies describing opportunities, risks, and legal statutes associated with data sharing and employment and eligibility interoperability.
- Data release for the program is governed by a complex set of overlapping federal and state rules and/or regulations that lack clarity or guidance.
- Legal data sharing policies regarding risk and legal statutes for the program are clearly outlined and available with guidance on implementation.

40. Please list up to three of the most significant challenges that impede efforts to improve data sharing (e.g., legal, regulatory, or governance issues, etc.). Please be as specific.

Challenge

Challenge
1.
2.
3.

41. For each of the challenges you listed in the previous question, please indicate how serious an issue you consider the challenge to be.

Challenge	Seriousness of issue		
	Minor	Moderate	Major
<i>[Prefilled from previous question]</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>[Prefilled from previous question]</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>[Prefilled from previous question]</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

42. With regards to the storage of client history data for programs within your agency, which of the following most closely describes where data is kept?

- Client history resides exclusively within individual programs.
- Client history is kept in multiple systems.
- Client history is located in a centralized repository.

43. Which of the following most closely describes the rules and practices regarding sharing client history data among programs *within your agency*?

- Client history is not shared with other programs within the agency except where specifically required under statute or regulation.
- Some client history data is shared with other programs within the agency, but only with the consent of the data owners and clients.
- Some client history data is shared with other programs within the agency based on specific requests that meet particular guidelines, without requiring explicit consent of the clients.
- Client history is generally available to some or all staff of other programs within the agency, to whom permissions have been granted based on their role in the agency, for the purposes related to program operations (e.g., facilitating program enrollment; determining client service needs, etc.).

44. Which of the following most closely describes the rules and practices regarding sharing client history data with programs *outside your agency*?

- Client history is not shared with programs outside the agency except where specifically required under statute or regulation.
- Some client history is shared with other programs outside the agency, but only with the consent of the data owners and clients.
- Some client history data is shared with other programs outside the agency based on specific requests that meet particular guidelines, without requiring explicit consent of the clients.
- Client history is generally available to some or all staff of other programs outside the agency, to whom permissions have been granted based on their role, for the purposes related to program operations (e.g., facilitating program enrollment; determining client service needs, etc.).

V. TA Needs

45. For each of the following areas listed below, please indicate how important it would be to your agency to receive technical assistance in the area if such assistance were made available.

	No or little importance 1	2	3	4	Very high importance 5
Guidance on federal rules and guidelines related to sharing client information among programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Examples of successful data sharing experiences from related programs that can be used as models.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Examples and language from previously accepted Advance Planning Documents (APDs) that we can use designing our own plans.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suggestions about ways to obtain sustainable source of enhanced funding for eligibility and enrollment system modifications.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enhanced funding to support data harmonization and interoperability.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Training opportunities for states for staff on data interoperability and potential system modifications to support it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

46. Please describe any other specific areas in which your agency could benefit from technical assistance regarding integration of health and human services programs related to eligibility and enrollment, data integration, or other areas of program integration:

47. Has your agency had any recent experiences regarding integration of health and human services programs related to eligibility and enrollment, data integration, or other areas of program integration from which other states could benefit?

48. What recommendations do you have to support increased data sharing across human service programs or to otherwise support increased integration of health and human services programs?

49. If there is more information available online on topics covered by this questionnaire (e.g., your state's human service eligibility and enrollment systems, efforts to integrate program entry processes, or governance of data sharing) please provide links here:

50. HHS and the study team will hold a webinar to present findings from this questionnaire and to conduct a dialogue among states regarding strategies for integration among health and human services programs. Please provide the names and email addresses of one or two individuals in your agency who would be most appropriate to participate in this webinar, in addition to yourself: