

## Attachment 10c: Email Solicitation Script, Years 1-3

<DATE>

Dear <PARTICIPANT'S FIRST NAME AND LAST NAME>,

As the independent evaluator for the Medicaid Incentives for the Prevention of Chronic Disease (MIPCD), RTI International is legislatively mandated to report on the costs incurred as part of the administration of the MIPCD program. To collect this data, we created the attached Administrative Costs Form for State staff to complete. We ask that State staff review the instruction and complete the form by **XXX**.

Completing the form includes filling out the one-page form on costs for each year of your MIPCD program to date (Year 1, 9/13/2011 to 9/12/2012; Year 2, 9/13/2012 to 9/12/2013; and Year 3, 9/13/2013 to date). We expect form completion to take no more than 8 hours for each year of cost data. Completing the form is voluntary. We do not expect any risks to you for completing this form. If you find completing any of the fields in the form makes you uncomfortable, you may skip them. If you decide not to participate, it will not impact your MIPCD grant in any way. After completing this form, we will ask you to provide annual cost updates over the next two years.

There is no direct benefit to you for being part of this study except the satisfaction of helping us learn more about the administrative costs of the MICPD programs.

Results of the Administrative Costs Form will be used to assess the following:

- How has the State been spending its administrative funds, and how does this compare with the projected spending in its proposal?
- Have administrative expenditures changed in the different phases of the initiative?
- How do administrative costs vary by major structural differences, such as the type of program, target group/health condition, type and amount of incentive, and scope of the program (statewide vs. limited)?
- What are the costs of the incentives that are paid by the program?
- Were there additional financial costs of the program that were not covered by the program?

If you have any questions about the study or the cost data that is requested in the form, please contact **XXX**.

Thank you for your time and consideration.

Sincerely,

<RTI state team expert or Administrative cost task leader>