

APPENDIX A-1

SITE VISIT SCHEDULING CALL PROTOCOL

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Evaluation of Demonstrations of Direct Certification with Medicaid for Free and Reduced-Price Meals (DCM-F/RP)

The DCM-F/RP evaluation team is preparing for the in-person site visits for the implementation study. We would like to conduct a [*two/three*]-day site visit to [*state*] in [*month*] to learn more about demonstration planning and preparation, the first DCM-F/RP match, and any initial challenges encountered during the transition. During the visit, we will talk with State child nutrition and Medicaid program administrators and staff in individual and small-group meetings, as well as staff from [*two/four*] school districts. We would like to visit State child nutrition and Medicaid program offices in [*capital city*] and districts within a two-hour drive.

Site visit activities

We are aiming to spend half a day at each agency/district and are hoping to meet with all staff who play key roles in the DCM-F/RP process. Who do you think we should talk with during our visit? What are their titles and roles?

In addition to interviews, we would like to observe key steps in the DCM-F/RP process, to see how each DCM-F/RP task is done. We expect the demonstrations would involve some of the same technical staff we interview and that the observations would take no more than an hour in total. [*If not known:*] What are the key steps conducted by staff at your agency/district? [*For each step:*] Which staff conduct that step?

Timing and next steps

We propose a visit during [*weeks available*]. We understand that individual staff availability varies, but is there anything happening during that time that would interfere with a site visit (such as an all-staff training or State holiday)? Which day would work best for us to visit your agency/district?

We will prepare a draft agenda, including the staff interviews and observations discussed during this call. Thank you for talking with us today. We look forward to seeing you on-site.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not 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 0584-0606. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.