

ATTACHMENT T
ADMINISTRATIVE DATA ELEMENTS

SNAP, TANF, AND MEDICAID ADMINISTRATIVE DATA

Timeline

Monthly data to be collected every three months starting in first month of random assignment, with the first extract containing the past 12 months of data, then three months of data each following quarter.

Variables

Basic unit information	Unit Benefit amounts for each program for each month
Case ID – unique identifier of unit’s case	SNAP indicator, month X (whether unit currently has active case)
Date of SNAP certification	SNAP monthly benefit amount, month X
Date of most recent SNAP recertification	Medicaid indicator, month X
Length of certification period	Medicaid claims, month X
County where application was processed (FIPS code)	TANF indicator, month X (presence of TANF income in month X)
	TANF monthly benefit amount, month X
Unit income (as of most recent certification)	Contact information
Unit’s gross countable monthly income	First and last name of unit head
Unit’s net countable income	Address (residential and mailing)
Presence of earned income	Telephone numbers (include all available numbers on the file)
Presence of unearned income	Email
Presence of GA income	
Presence of SSI income	
Presence of Social Security income	For cases that are closed
	Reason for case closure
	Date of case closure
	For cases that are open, an indicator for whether the case is currently under sanction

Notes

Information from the TANF and Medicaid systems, including data on each SNAP participant, will be obtained for a single outcome measure from integrated systems only

UNEMPLOYMENT INSURANCE EARNINGS DATA

Universe

Each person randomly assigned to a treatment or control group as part of the pilot project

Timeline

Quarterly data collected twice: obtain a 3-year extract one year after random assignment and obtain a 2-year extract three years after random assignment

Variables

Unemployment Insurance data elements

- Sample member social security number (SSN)

- Sample member name

- Identification of quarter (year/quarter)

- ID of employer(s) during each quarter (federal ID number, state ID number, name, and/or branch name)

- Employer(s)' address during each quarter

- NAICS (North American Industry Classification

- System) code(s) for employer(s) in quarter

- Amount of reported quarterly earnings

- Number of weeks paid in quarter

- Hours of work in quarter/week

- Specification of which calendar weeks have hours/wages

Notes

Where possible, we will also try to collect monthly Unemployment Insurance benefit amounts.

Matches of files of SNAP E&T sample members' personal identification information to states' UI data systems will need to be done periodically, to ensure that data are not lost.

DATA ON SERVICE RECEIPT

Universe

Each person randomly assigned to a treatment or control group as part of the pilot project

Purpose

These data will be used for 1) assessing data fidelity for the evaluation, 2) the participation analysis, and 3) the cost/benefit analysis.

Timeline

We will work closely with each site to develop a feasible plan for collecting data on service receipt. The data for monitoring will be needed periodically after the start of the pilot, but data for the participation and cost/benefit analysis will be required less frequently.

Variables

Demographic information

Unique identifier to link to SNAP case
 Name
 Gender
 Age
 Homeless
 Veteran
 Offender
 Low-income
 Limited English language proficiency

Education

Highest school grade completed at entry/exit
 School status at entry

Type of service received

(Varies by site—should include discreet training and services that best describe what happens at each site)

Self-initiated services
 Assessment (document results)
 Case management received/most recent date of service or frequency
 Type of training service

 Industry for which receiving training
 Type of education program in which enrolled

 Type of support service received
 Type of follow-up services received (over what period of time)

Service receipt information

Service/activity start date (overall and by activity)
 Service/activity end date (overall and by activity)
 Date completed/withdrew by activity
 Reason for withdrawal by activity
 Cost of training/service
 Amount of subsidy paid for employment
 Amount and frequency of support services received

Providers

Provider code—to identify the provider by service
 Location where each service was provided—zip code

Credentials and degree/certifications

Type of credentials/degrees/certifications earned
 Date earned
 Status at program exit (if not complete)

Employment

Employment status at entry into program

 Occupation/industry codes of most recent employment
 Employment status at exit from program
 Occupational and industry codes for employment at exit/follow-up
 Entered training-related employment
 Employed by training employer

Notes

For sites that capture the required data within their MIS, or can add needed data elements to their systems, we will arrange for regular extracts from the existing system. In other sites, where existing systems do not or cannot capture all of the needed data on service receipt, we will work with each site to develop a supplemental tracking system that will allow providers to track and submit data consistently and systematically.