Appendix C. Final State and Local SNAP Administrator Interview Guide

OMB No. 0584-[NEW]

*Assessing SNAP Participants’ Fitness for Work*

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# Interview Protocol for State and Local SNAP Administrators

*The respondents for this guide are administrators at the State and local level. This would include county administrators in a county-administered State. Prior to the interview, site visitors should tailor the guide based on the structure of the SNAP agency and program in the State, including questions for the State SNAP Director, policy staff, and data staff. Some questions will be relevant for both State and local staff.*

## Introduction and Consent

See separate documented entitled “SNAP Fitness Introductory Script and Consent”

This information is being collected to assist the Food and Nutrition Service in understanding how States assess physical or mental limitations when screening for exemptions from work requirements or determining good cause. This is a voluntary collection and FNS will use the information to determine needs for technical assistance. This collection does not request any personally identifiable information under the Privacy Act of 1974. 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-[xxxx]. The time required to complete this information collection is estimated to average 1.50 hours 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22306 ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

## Background:

To start, we would like to ask some background information about you, your role, and the general structure of SNAP and SNAP E&T in your State.

1. What is your job title?
2. How long have you been in this position?
3. What are your primary responsibilities?
4. *For State admin:* Can you please describe the structure of division of this agency that administers SNAP? 
   1. What other programs does your agency administer?
   2. What is the leadership and decision-making structure at your agency?
   3. Please describe the staffing structure and roles of staff overseeing SNAP eligibility and applications.
   4. *Ask for an organizational chart.*
5. *For local admin:* Please provide an overview of the office/agency and the programs administered through this office/agency.
   1. What programs does this office/agency administer?
   2. [IF MORE THAN ONE PROGRAM] How are staff assigned to programs?
      1. Probe on dedicated staff to each program, staff working across different programs, staff dedicated to specific groups (e.g., ABAWDs), staff dedicated to SNAP E&T
   3. How many staff work in this office?
   4. How many staff members are specifically dedicated to SNAP? *(Tailor if needed based on responses to questions 5a-5c)*
      1. Are these staff members responsible for other types of cases as well?
      2. Are staff members responsible for all aspects of a SNAP case (e.g., eligibility, redeterminations, etc.)? Are different staff responsible for processing different application components?
      3. Who is responsible for entering data on SNAP applications? Recertifications?
6. Can you provide an overview of your State’s SNAP E&T program?
   1. [TAILOR BASED ON MANDATORY/VOLUNTARY STATE] We understand that your State [does/does not] require that some SNAP participants participate in SNAP E&T. *Note to interviewer: Ensure that respondent understands this applies to individuals who are specifically required to participate in E&T, as opposed to those individuals subject to work requirements who can fulfill their work requirements by participating in E&T but could fulfill them another way if they chose to.*
      1. Does this vary in different parts of the State?
         1. [IF YES] How so?
   2. Who provides E&T services in your State?
      1. [IF SERVICE PROVIDERS]:
         1. What service providers do you contract with to provide SNAP E&T services?
         2. What location do these providers serve?
   3. How do E&T services vary for different areas of the State?
   4. Can you please describe the staffing structure of the E&T program at your agency?
      1. Probe on staff positions and roles, such as navigators.

As we noted earlier, we are hoping to learn more about your policies and guidelines for assessing whether applicants are able to work or whether they should be exempt from work requirements due to a physical or mental limitation. We’ll begin by asking some questions about the eligibility for SNAP and the application process in your State, as well as processes related to good cause.

We have reviewed your policy manual and *[OTHER DOCUMENTS REVIEWED HERE]*, but we would like to confirm our understanding of the work requirements and structure of SNAP in your State. When we say “work requirements” during this interview, we are referring to work requirements for work registrants (i.e., general work requirements), ABAWD work requirements, and requirements for mandatory E&T participation [if applicable]. We’d like to understand how all of them relate to your policies related to screening for exemptions due to physical and mental limitations and good cause.

1. *Describe the work requirements as you understand them, including distinctions between general work requirements, ABAWD work requirements, and mandatory E&T [if applicable]. Ask participants to confirm and expand, if needed, upon the description. If possible, bring a printed list of the requirements from the documents available and walk through the requirements with the respondent.* 
   1. *Note to interviewer: Be sure to explicitly clarify the difference between general work registrants, ABAWDs, and mandatory E&T participants (if applicable).*
   2. *Probe on:*
      1. Implications of whether the State has a mandatory or voluntary E&T program
         1. [IF MANDATORY] Requirements to participate in mandatory SNAP E&T
         2. [IF VOLUNTARY] Criteria for participating in voluntary SNAP E&T

## Section 1: Process

1. Can you please provide an overview of the SNAP application process in your State?
   1. Do SNAP eligibility workers determine eligibility for any other assistance programs (e.g., TANF)? Does the State use a combined application?
   2. How do applicants complete applications?
      1. Probe on in-person, online, or by phone, as well as changes to the process that occurred during the COVID-19 pandemic
      2. Probe on whether this varies by whether the applicant is applying only for SNAP or for other programs as well– SNAP, SNAP and TANF/Medicaid, childcare, etc.
      3. Probe on whether there are other variations to this process.
   3. How do eligibility workers conduct interviews?
      1. Probe on in-person or by phone, as well as changes that were put in place/remain in place due to COVID
   4. We would like to understand how applicants are screened for exemptions from work requirements due to physical or mental limitations. Can you please describe the process by which applicants are screened for exemptions from ***general work requirements*** due to a physical or mental limitation?
      1. Who determines whether applicants should be exempt?
      2. What are the required steps that staff must follow?
         1. Probe on required verification for exemptions.
      3. At what point during the application process is the exemption made?
      4. Who approves the exemption?
         1. Can you please walk us through the review process for those who have to approve the exemption?
      5. Do these processes differ **for ABAWDs**?
         1. [IF YES] Repeat d.i-d.iv
      6. [IF MANDATORY STATE] Do these processes differ for **mandatory E&T participants**?
         1. [IF YES] Repeat d.i-d.iv
      7. [IF TELEPHONIC INTERVIEWS ARE ALLOWED] How do the processes for screening for exemptions vary for interviews that occur over the phone?
         1. Probe on:
            1. How they make sure they follow procedures if the interview is by phone
            2. Whether there are specific processes they must follow if they interview by phone
   5. What notices or other information do SNAP applicants or participants receive related to work requirements?
      1. Probe on work registrants, ABAWDs, and SNAP E&T participants (if applicable)
      2. How are applicants notified about whether they are exempt from work requirements?
   6. How do SNAP staff ensure that recipients are complying with work requirements?
      1. Probe on required documentation, interactions with SNAP E&T staff if applicable
      2. Probe on how this varies by general work registrants, ABAWDs, mandatory E&T (if applicable)
2. Can applicants appeal if they are not granted an exemption due to a physical or mental limitation? Can participants?
   1. Does this vary for general work registrants, ABAWDs, or SNAP E&T participants (if applicable)?
   2. [IF YES] Can you please describe the appeal process?
      1. Probe on:
         1. Who is involved
         2. What steps the appeal process entails
         3. Any policies or guidelines around appeals – reasons why people appeal, grounds on which appeals are granted, etc.
         4. Variation, if at all, for general work registrants, ABAWDs, or SNAP E&T participants (if applicable)
      2. How often do applicants appeal the determination?
      3. How often would you estimate that appeals are successful?
3. What is the process by which an applicant/participant can request to have an exemption from work requirements due to a physical or mental limitation?
   1. How does this process differ, if at all, for exemptions related to general work requirements, ABAWD work requirements, and requirements to participate in SNAP E&T?
4. Can you describe the recertification process?
   1. How often are SNAP participants required to go through recertification?
   2. Does this vary by whether participants are work registrants or ABAWDs? Other characteristics?
   3. What does this process entail?
      1. Probe on:
         1. Interview type (phone/in-person)
         2. Reassessment of work registration
         3. How they determine whether an individual should be exempt from the work requirements due to a physical or mental limitation
         4. Required verification for maintaining exemptions
5. Are there other points at which an applicant’s/participant’s ability to work may be reassessed?
   1. Probe on:
      1. Differing reassessment times based on whether the participant’s ability to work may be resolved or changed
      2. If an individual receives a provider determination from the SNAP E&T provider
      3. Other circumstances that may prompt a reassessment, such as new information about a participant’s ability to work due to a physical or mental limitation
      4. Whether this varies for work registrants, ABAWDs, or E&T participants (if applicable)
6. How did this process change as a result of COVID-19? *Note to interviewer: This may already have been covered in the discussion of process, but ask here if it has not been discussed.*

## Section 2: Determining and Developing Policies and Guidelines

*Note: This section is likely to be most relevant for State administrators and/or County administrators in County-administered States. However, there may be some questions relevant to local administrators in State-administered States. Site visitors should tailor the guide and select which questions to ask as needed while on site.*

Now that we understand the overall process, we would like to learn more specifically about the policies that guide these processes for how your agency determines whether SNAP applicants are considered fit or able to work or whether they should be exempt from work requirements due to a physical or mental limitation.

1. Can you please describe the policies your State has in place to determine whether SNAP applicants are fit for work or whether they should be exempt from work requirements?
   1. How does this vary for general work registrants, ABAWDs, or mandatory E&T participants (if applicable)?
   2. Probe on policies related to:
      1. Which applicants they are required to assess for ability to work (e.g., all applicants, just ABAWDs, other groups)
      2. How ability to work for SNAP relates to criteria for TANF
      3. Conditions or situations that qualify an applicant as exempt due to a physical or mental limitation
      4. E&T participation, including requirements to participate for mandatory E&T states/areas [if applicable] and criteria to volunteer in voluntary E&T states/areas
      5. Verification of mental or physical limitation, such as letters from a licensed physician or therapist or vocational or rehab provider, eligibility through another program (social security, etc.)
      6. Whether the State provides access to professionals (e.g., mental health providers, social workers) to conduct a mental health assessment, and in what circumstances
      7. Eligibility worker discretion
         1. Discretion over which criteria to use
         2. Discretion over how to apply the criteria
      8. Specific circumstances such as homelessness
2. What is the source of these policies?
   1. Probe on:
      1. Federal or State statute or regulation
      2. Type of documentation (e.g., in a manual, notice, other form of documentation)
3. Are these policies applied uniformly throughout the State?
   1. [IF NO] Can you describe how the implementation of these policies vary across the State?
      1. Probe on county administration, different characteristics of local areas (e.g., urban/rural, high/low unemployment)
   2. Do local areas (e.g., counties, offices, or regions) have discretion over how they apply these policies?
      1. [IF YES] What type of discretion do local areas have?
   3. How is this variation monitored or overseen by the State staff?
4. In addition to variation by local area, are other types of variation or deviations from these policies permitted?
   1. [IF YES] Please describe these variations.
   2. [IF LOCAL ADMIN] To your knowledge, are the policies you use in your [County/local area] different from those used in other parts of the State?
      1. [IF YES] How so?
5. Now we would like to learn about how these policies came about and how they were developed. Can you please provide an overview of how your State’s policies related to applicants’ ability to work were developed?
   1. What was the process for developing these policies?
   2. Who led the development of the policies?
   3. Who else was consulted (e.g., stakeholders, FNS)?
   4. What were the key considerations that went into the policy development?
      1. Probe on:
         1. Differences between policies related to general work requirements, ABAWDs, and requirement to participate in SNAP E&T
         2. Whether there were specific challenges or needs that the policies were created to address
         3. Specific considerations related to other programs (e.g., TANF) they needed to consider
         4. Other contextual factors (e.g., COVID, financial crises, natural disasters, state- or locality-specific considerations)
6. When were the policies last updated?
   1. Why were they updated?
      1. Probe on whether there were any changes made as a result of the E&T final rule which was published in January 2021
   2. Were there updates as a result of COVID-19?
      1. Probe on changes that were made either solely due to COVID-19 or more tangentially related to COVID-19
      2. [IF YES] What were the updates as a result of COVID-19?
         1. What issues did these updates seek to address?
         2. How were these updated policies created or determined?
         3. Have these changes remained in place after the pandemic ended?
7. In addition to formal documented policies, do you provide additional guidance to eligibility workers on how to implement these policies?
   1. [IF YES]:
      1. What is the guidance?
      2. Why did you start sharing this guidance?
      3. How did you develop this guidance?
   2. [IF NO]: Why has there not been additional guidance provided?
      1. Probe on whether this is because it is not needed, whether additional guidance is forthcoming, other reasons
      2. Have there been discussions over whether to provide additional guidance?
         1. [IF YES] Why did you choose not to issue further guidance?
   3. What other resources, if any, exist to help eligibility workers to determine whether an individual should be exempt from work requirements due to a physical or mental limitation?

## Section 3: Communication of Policies and Guidelines

*This section will be relevant for both State and local administrators.*

Now we hope to learn about how you communicate these policies and guidelines with eligibility workers, as well as how eligibility workers are trained.

1. [FOR STATE ADMIN] How do you ensure local offices are up to date on the policies and guidance about related to policies for exempting applicants from work requirements based on a physical or mental limitation?
2. Please describe how your agency communicates policies and/or guidance to eligibility workers about determining whether applicants are able to work or whether they should be exempt from work requirements (including general work requirements, ABAWD requirements, and mandatory SNAP E&T (if applicable)).
   1. Is this the responsibility of your agency? The local office? Both?
   2. Probe on:
      1. Standard operating procedures
      2. Updates to procedures
      3. Regular communications through other channels
      4. Other
3. How does your agency ensure that staff are trained on these policies?
   1. Have you implemented training to ensure that staff are trained on the new policies related to the final rule from January 2021?
      1. [IF YES] What does this training entail?
4. Does the policy include requirements for training for eligibility workers or other staff members?
   1. [IF YES] What are the training requirements?
      1. Probe on:
         1. Content of training
         2. Frequency of training
         3. Who provides the training
         4. Who is required to attend training
   2. [IF NO OR IF NOT SPECIFIED IN POLICY]
      1. What type of training do you provide?
      2. How often do you provide training?
      3. What is the content of the training?
      4. Who provides this training?
      5. Who is required to attend?
   3. [IF NOT SPECIFIED ABOVE] Do you provide training on implicit bias or racial disparities as it relates to participants’ ability to work?
      1. Do you provide training on cultural differences related to mental health that may impact whether individuals from certain groups seek exemptions due to mental limitations?

## Section 4: Good Cause

*Note to interviewers: It is likely that some of the discussion of process will be covered above in the discussion of applications and policies. Tailor this section as needed based on previous sections and the perspective of the respondent..*

Now we’d like to discuss how good cause determinations are made in your State, both for not complying with work requirements, as well as for voluntarily quitting a job. We also hope to understand how a good cause determination may relate to a participant being granted an exemption from work requirements due to a physical or mental limitation.

1. Can you please describe the process by which good cause determinations are made?
   1. What are the permitted reasons for good cause?
      1. Probe specifically on good cause determinations related to mental or physical limitations.
   2. How do workers determine whether a good cause determination is warranted?
      1. Probe on:
         1. How eligibility workers learn that a good cause determination may be warranted (e.g., participant non-compliance, information from or contact by SNAP E&T case managers, other)
         2. Identifying reasons for good cause
         3. Verification
   3. How does the process vary for different reasons for good cause?
   4. How do these processes differ for the different work requirements related to general work registrants, ABAWDs, and participants in SNAP E&T?
   5. Can participants request a good cause determination?
      1. [IF YES] What is the process by which a participant may request a good cause determination?
   6. In what cases would a good cause determination result in an exemption from work requirements due to a physical or mental limitation?
      1. Can you please describe the process for screening for an exemption from work requirements due to a physical or mental limitation based on a good cause determination?
      2. How does this vary, if at all, for general work registrants, ABAWDs, and mandatory SNAP E&T participants (if applicable)?
2. [IF SNAP E&T IS APPLICABLE] Can you describe how eligibility workers work with the SNAP E&T case managers to determine whether a good cause determination is needed? *Note to interviewer: Tailor this question if needed depending on whether one person fills both of these roles.*
   1. Is this process codified in your policies or guidelines?
      1. [IF NO] How was this process developed? Is this consistent across the State?
   2. Probe on:
      1. At what point does the SNAP E&T case manager contact the eligibility worker
      2. What happens when the SNAP E&T case manager contacts eligibility worker
      3. How do they work together and communicate
      4. Who communicates with the recipient
      5. What information eligibility worker needs to make the good cause determination

## Section 5: Data Systems and Automation

*Site visitors should tailor this question prior to the visit. It is likely that this will be most relevant for State administrators in State-administered States and County administrators in County-administered States.*

Now we’d like to learn about how you track information on applications, exemptions from work requirements due to a physical or mental limitation, and good cause determinations in your State’s data systems.

1. Who is responsible for entering information about SNAP applicants into your State’s data system(s)?
   1. Which systems are used to maintain information about SNAP applicants?
      1. Probe on systems related to eligibility, payments, SNAP E&T, etc.
   2. Who has access to the system(s)?
   3. [IF SNAP E&T IS APPLICABLE FOR LOCAL ADMINS] Do SNAP E&T providers and State staff (especially case managers, but also other staff) have access to the system(s)?
      1. [IF YES] How are data system(s) used to communicate information about participant compliance with SNAP E&T staff?
2. What information is collected in the systems related to exemptions from work requirements due to a physical or mental limitation and good cause determinations?
3. Do you review data on SNAP applicants’ and/or participants’ exemptions from work requirements due to a physical or mental limitation?
   1. [IF YES] How often?
      1. What data do you review?
         1. Do you review data related to participant race and/or potential racial disparities in exemptions from work requirements due to a physical or mental limitation?
      2. How do you use this data?
4. Do you review data on good cause determinations related to participants’ ability to work?
   1. [IF YES] How often?
      1. What data do you review?
         1. Do you review data related to participant race and/or potential racial disparities in good cause determinations related to participants’ ability to work?
      2. How do you use this data?

## Section 6: Implementation and Challenges

To close, we would like to learn about your perspective on implementing policies related to screening for exemptions from work requirements due to a physical or mental limitation and good cause policies, as well as any challenges, successes, or lessons learned you have experienced.

1. What, if anything, has been challenging about developing policies and guidelines related to exemptions from work requirements due to a physical or mental limitation?
   1. Probe on:
      1. Contextual factors (e.g., economic climate, political context, other State/local contextual factors)
      2. Other existing requirements or restrictions
      3. Interactions with other programs
      4. Technical challenges (e.g., data system development and/or alignment with other programs)
      5. Challenges specific to general work registrants, ABAWDs, or SNAP E&T participants (if applicable)
   2. Why were these factors challenging?
   3. How did you/your agency address these challenges?
2. What do you feel has been successful?
   1. Why?
3. From your perspective, what are the challenges that eligibility staff face in screening for or granting exemptions from work requirements due to a physical or mental limitation?
   1. How has this contributed to your policies or guidelines on screening for exemptions from work requirements due to a physical or mental limitation? Policies or guidelines for providing good cause related to a participant’s ability/inability to work due to a physical or mental limitation?
   2. What type of support or assistance is available for eligibility staff in addressing these challenges?
4. From your experience, what do you think is challenging for clients/applicants/participants about the process for screening for an exemption due to a physical or mental limitation?
   1. What do you think works well?
5. What changes, if any, would you like to see in your State’s policies about screening for exemptions from work requirements due to a physical or mental limitation? For providing good cause due to a physical or mental limitation? What changes to implementation of these policies?
6. What lessons learned or insights would you share with other agencies who are developing, implementing, or revising their policies related to screening for exemptions from work requirements due to a physical or mental limitation? For providing good cause do a physical or mental limitation?
7. Is there anything else about policies related to screening for exemptions or providing good cause due to a physical or mental limitation that you think would be helpful for us to know?

**Thank you for your time.**