

## **Z. Request for Data**

Thank you for your ongoing participation in the U.S. Department of Agriculture’s Food and Nutrition Service (FNS) SNAP Risk Assessment study. We are sending this request because we need more information about the case-profiling tool, [insert name of tool], your State agency uses to identify SNAP cases at risk of payment error. We are requesting that you run your State agency’s case-profiling tool on your State’s SNAP Quality Control (QC) data for the year prior to implementation of the case-profiling tool and provide the results.

As a reminder, participation in this request is voluntary. Refusal to participate will not have any impact on your position, your State agency, or your programs. You may also skip pieces you do not wish to provide. There is no cost to you to participate apart from the time you spend to complete the request, and there is no compensation. The request should take about 75 minutes. The following sections provide instructions for preparing the aggregate data from your State agency’s case-profiling tool.

## A. What Is the Timeline for Submission?

Data files are due by [date].

## B. What Data Should Be Provided?

Using your State’s SNAP QC data from [1 year prior to implementation of case-profiling tool] to [implementation date of case-profiling tool], please run your State agency’s case-profiling tool on these SNAP QC data and provide the number of SNAP QC cases with—

- ▶ No payment error and not flagged as high risk for payment error by the case-profiling tool
- ▶ No payment error and flagged as high risk for payment error by the case-profiling tool
- ▶ Payment error and not flagged as high risk for payment error by the case-profiling tool
- ▶ Payment error and flagged as high risk for payment error by the case-profiling tool

Table 1 shows an example of these data and is an excerpt of the table in appendix B, where you can provide your State’s data. Please also provide a completed copy of the *data transmittal worksheet* (see appendix A).

**Table 1. Sample Table Shell to Provide Aggregate Case-Profiling Tool Results**

Quality Control Review Results	Case-Profiling Tool Assessment	
	Not Flagged as High Risk	Flagged as High Risk
	Overall	
No payment error	77,000	8,000
Payment error	5,000	10,000

The table in appendix B includes space to provide your State’s data, stratified by the following factors. For each factor, provide the number of SNAP QC cases by payment error and case-profiling tool

assessment status (as table 1 shows). If your State agency does not collect data on a particular factor or it is otherwise unavailable in your State agency's QC data, please leave that section of the appendix B table blank and note in the transmittal worksheet (appendix A.) that your State agency does not collect data on the factor or it is otherwise unavailable.

- ▶ Household includes members of the following racial and/or ethnic groups:
  - All household members are American Indian or Alaska Native
  - All household members are Asian
  - All household members are Black or African American
  - All household members are Hispanic or Latino
  - All household members are Middle Eastern or North African
  - All household members are Native Hawaiian or other Pacific Islander
  - All household members are non-Hispanic and non-Latino
  - All household members are White
  - All household members are "other" race
  - Some household members are Hispanic or Latino and some are not
  - Two or more races in the household
- ▶ Citizenship status of household members
  - U.S. citizen only
  - Noncitizen only
  - Both
- ▶ Sex of head of household
  - Female
  - Male
- ▶ Disability
  - One or more household members with a disability
- No household members with a disability
- ▶ Marital status
  - Household includes a married couple
  - All Household members are unmarried
- ▶ Age of head of household
  - Under 30
  - 30-49
  - 50-59
  - 60 and older
- ▶ Children in the household
  - Household includes one or more members under 18
  - No household members are under 18
- ▶ Elderly in the household
  - Household includes one or more members 60 or older
  - No household members are 60 or older
- ▶ Income status
  - Household has earned income but no unearned income
  - Household has unearned income but no earned income
  - Household has both earned and unearned income
  - Household has no income

We prefer comma-separated values (.csv) or Excel (.xlsx) file formats. We can also receive other tabulated data file formats, including SAS, STATA, and R data files. Please contact Kevin Baier at Westat to discuss alternate formats: [kevinbaier@westat.com](mailto:kevinbaier@westat.com).

## C. How Will Westat Ensure Confidentiality and Data Security?

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Westat will store all data on a secure server, available only to project personnel who have signed confidentiality pledges and have been trained in data security procedures. The server is compliant with the Federal Information Security Modernization Act (<https://www.congress.gov/bill/113th-congress/senate-bill/2521/text>) and the National Institute of Standards and Technology 800-171 (<https://csrc.nist.gov/publications/detail/sp/800-171/rev-2/final>) data security procedures.

Note: This request does not include any data with personally identifying information and is not part of an audit or monitoring visit. However, the final report may present that data at the individual State level.

## D. How Should We Submit the Data?

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Please send all data through Westat's secure file transfer protocol (SFTP) at <https://securetransfer2.westat.com/>. Contact the study's Quantitative Analysis Lead, Kevin Baier, at [kevinbaier@westat.com](mailto:kevinbaier@westat.com), to request SFTP credentials.

## E. Questions or Concerns?

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If you have any questions or concerns, please contact the FNS Project Officer, Eric Williams, at [eric.williams@usda.gov](mailto:eric.williams@usda.gov) or contact the study's Quantitative Analysis Lead, Kevin Baier, at [kevinbaier@westat.com](mailto:kevinbaier@westat.com) or 301.279.4593.

This information is being collected to provide the Food and Nutrition Service (FNS) with key information on case-profiling tools used by SNAP State agencies. This is a voluntary collection, and FNS will use the information to examine risk assessment tools in SNAP. This collection requests 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-####. The time required to complete this information collection is estimated to average 0.25 hours (15 minutes) per response. 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-####). Do not return the completed form to this address. If you have any questions, please contact the FNS Project Officer for this project, Eric Williams, at [eric.williams@usda.gov](mailto:eric.williams@usda.gov).

# Appendix A. Data Transmittal Worksheet

Please complete and include this worksheet with the complete data files. Please send the worksheet and data files to Westat by [date].

1. State agency: \_\_\_\_\_
2. Contact information of the person able to answer any questions regarding the data submission:  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_
3. Date range of data: [Month Day, Year]-[Month Day, Year] \_\_\_\_\_
4. Please include any other necessary file specifications or information here:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please send all data through Westat's secure file transfer protocol (SFTP) at <https://securetransfer2.westat.com/>. Contact the study's Quantitative Analysis Lead, Kevin Baier, at [kevinbaier@westat.com](mailto:kevinbaier@westat.com), to request SFTP credentials.

***By submitting your State agency's data, you certify these data are complete and accurate.***

# Appendix B. Data Table

If your State agency does not collect data on a particular factor listed in table A.1 or it is otherwise unavailable in your State’s QC data, please leave that section of the table blank and note in the transmittal worksheet (appendix B) that your State agency does not collect data on the factor or it is otherwise unavailable.

**Table A.1. Data Table**

Quality Control Review Results	Case-Profiling Tool Assessment	
	Not Flagged as High Risk	Flagged as High Risk
<b>Overall</b>		
No payment error	[insert data in blank cells]	
Payment error		
<b>Household includes members of the following racial and/or ethnic groups: All household members are American Indian or Alaska Native</b>		
No payment error		
Payment error		
<b>Household includes members of the following racial and/or ethnic groups: All household members are Asian</b>		
No payment error		
Payment error		
<b>Household includes members of the following racial and/or ethnic groups: All household members are Black or African American</b>		
No payment error		
Payment error		
<b>Household includes members of the following racial and/or ethnic groups: All household members are Hispanic or Latino</b>		
No payment error		
Payment error		
<b>Household includes members of the following racial and/or ethnic groups: All household members are Middle Eastern or North African</b>		
No payment error		
Payment error		
<b>Household includes members of the following racial and/or ethnic groups: All household members are Native Hawaiian or other Pacific Islander</b>		
No payment error		
Payment error		
<b>Household includes members of the following racial and/or ethnic groups: All household members are non-Hispanic and non-Latino</b>		
No payment error		
Payment error		
<b>Household includes members of the following racial and/or ethnic groups: All household members are White</b>		
No payment error		
Payment error		

Quality Control Review Results	Case-Profiling Tool Assessment	
	Not Flagged as High Risk	Flagged as High Risk
<b>Household includes members of the following racial and/or ethnic groups: All household members are other race</b>		
No payment error		
Payment error		
<b>Household includes members of the following racial and/or ethnic groups: Some household members are Hispanic or Latino and some are not</b>		
No payment error		
Payment error		
<b>Household includes members of the following racial and/or ethnic groups: Two or more races in the household</b>		
No payment error		
Payment error		
<b>Citizenship status of household members: U.S. citizen only</b>		
No payment error		
Payment error		
<b>Citizenship status of household members: Noncitizen only</b>		
No payment error		
Payment error		
<b>Citizenship status of household members: Both U.S. citizens and noncitizens</b>		
No payment error		
Payment error		
<b>Sex of head of household: Female</b>		
No payment error		
Payment error		
<b>Sex of head of household: Male</b>		
No payment error		
Payment error		
<b>Disability: One or more household members with a disability</b>		
No payment error		
Payment error		
<b>Disability: No household members with a disability</b>		
No payment error		
Payment error		
<b>Marital status: Household includes a married couple</b>		
No payment error		
Payment error		
<b>Marital status: All household members are unmarried</b>		
No payment error		
Payment error		
<b>Age of head of household: Under 30</b>		

Quality Control Review Results	Case-Profiling Tool Assessment	
	Not Flagged as High Risk	Flagged as High Risk
No payment error		
Payment error		
<b>Age of head of household: 30-49</b>		
No payment error		
Payment error		
<b>Age of head of household: 50-59</b>		
No payment error		
Payment error		
<b>Age of head of household: 60 and older</b>		
No payment error		
Payment error		
<b>Children in household: Household includes one or more members under 18</b>		
No payment error		
Payment error		
<b>Children in household: No household members are under 18</b>		
No payment error		
Payment error		
<b>Elderly in household: Household includes one or more members 60 or older</b>		
No payment error		
Payment error		
<b>Elderly in household: No household members are 60 or older</b>		
No payment error		
Payment error		
<b>Income status: Household has earned income but no unearned income</b>		
No payment error		
Payment error		
<b>Income status: Household has unearned income but no earned income</b>		
No payment error		
Payment error		
<b>Income status: Household has both earned and unearned income</b>		
No payment error		
Payment error		
<b>Income status: Household has no income</b>		
No payment error		
Payment error		