Justification for Emergency PRA Clearance Applications for MEDICARE AND MEDICAID PROGRAMS: PROGRAMS OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE); Program Revisions

Subject: The Centers for Medicare Management (CMM) is requesting that the Paperwork Reduction Act (PRA) package for the Medicare and Medicaid Programs: Programs of All-inclusive Care for the Elderly (PACE); Program Revisions final rule, CMS-1201-F, be processed under 5 CFR 1320.13 (a)(2)(i) for emergency clearance.

Background: Section 902 of the Medicare Prescription Drug, Improvement and Modernization Act of 2003 established a 3-year timeline for publishing a Medicare final regulation after a proposed regulation or an interim final regulation has been published.

November 24, 1999 interim final rule was a comprehensive document establishing the requirements for the Programs of All-inclusive Care for the Elderly as authorized under the Balanced Budge Act of 1997 (BBA).

October 21, 2002 interim final rule implemented section 903 of the Medicare, Medicaid and SCHIP Benefits Improvement and Protection Act of 2000 (BIPA).

Justification: We request this Paperwork Reduction Act clearance under an emergency approval process to meet the statutorily mandated reporting requirement under the MMA.

The reporting requirements being filed under this review do not represent substantively new processes for PACE providers. The reporting requirements have been updated in specific areas to provide a mechanism for disclosure and recusal in the event of a conflict of interest involving members of the PACE governing body or their immediate family members, and removes the requirement that PACE organizations must furnish a copy of signed contracts for inpatient care facilities to CMS and the State administering agency. Concurrent with the Federal Register posting, CMS will announce and post this document on www.cms.hhs.gov.

CMM requests that the PRA Federal Register be published on November 24, 2006 and that the comment period run until December 8, 2006. CMM is requesting OMB approval by December 15, 2006. Note that the Medicare and Medicaid Programs: Programs of All-inclusive Care for the Elderly (PACE); Program Revisions final rule, CMS-1201-F, will publish on November 24, 2006 and will become effective on December 22, 2006 (30 days after publication) and the reporting requirements will also become effective on December 22, 2006.

Failure to receive OMB approval by this timeframe will negatively impact the PACE providers, who will not have adequate time to adjust their policies and procedures by the effective date of the regulation. These reporting requirement for the policy and procedure will generally be completed once as part of the provider application, while the reporting requirement for disclosure and recusal documentation will occur only in the event of a conflict of interest by a member of the PACE organization's governing body of an immediate family member.

KEY PRECEDING EVENTS	
Date	Milestone
October 20, 2006	Emergency Justification request submitted
October 27, 2006	OMB approval for Emergency Justification request
October 27, 2006	Emergency PRA package submitted
November 24, 2006	 PRA Federal Register Notice comment period begins CMS also posts Draft 2007 PACE Reporting Requirements in PACE Home Page section of CMS website (http://www.cms.hhs.gov/PACE/)
December 8, 2006	PRA Federal Register Notice 2 week comment period ends
December 15, 2006	OMB approval
December 22, 2006	CMS-1201-F becomes effective

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