

Supporting Statement For Paperwork Reduction Act Submissions **Chronic Care Improvement Program and** **Medicare Advantage Quality Improvement Project**

Background

The Social Security Act, §1852 e(1), (2) and (3)(a)(i), and regulations at Part 42, 422.152 describe CMS' regulatory authority to require each Medicare Advantage Organization (MAOs) (other than Medicare Advantage (MA) private fee for service and MSA plans) that offers one or more MA plan to have an ongoing quality assessment and performance improvement program. This program must include measuring performance using standard measures required by CMS, and report its performance to CMS.

Previous to the creation of the Medicare Advantage Quality Improvement Project (QIP) Reporting Template and the Chronic Care Improvement Program (CCIP) Reporting Template, Medicare Advantage Organizations (MAOs) were required to submit information on their QIPs and CCIPs through the Health Plan Management System (HPMS). MAOs complained about the difficulty of using the HPMS. The QIP Reporting Template and the CCIP Reporting Template were created in response to those complaints. The templates provide a simpler, easier way for MAOs to report the required data. They also provide consistency in reporting among plans so that collected data can be used more efficiently.

A. Justification

1. Need and Legal Basis

Regulations at Part 42, 422.152 describe CMS' regulatory authority to require each Medicare Advantage Organization (MAOs) (other than Medicare Advantage (MA) private fee for service and MSA plans) that offers one or more MA plan to have an ongoing quality assessment and performance improvement program.

2. Information Users

Information collected in the QIP and CCIP Reporting Templates will be an integral resource for oversight, monitoring compliance and auditing activities necessary to ensure high quality provision of general health services and chronic care services to Medicare beneficiaries. Data will be used by Regional Office staff and the Division of Health Plan Accountability (DHPA). If outliers or other data anomalies are detected, DHPA will work in collaboration with Regional Offices and other divisions within CMS for follow-up and resolution.

3. Use of Information Technology

MAOs will submit (yearly) data to CMS using the templates. Submissions will be 100% electronic (email). As stated in "A" above, MAOs said that the information system CMS

uses (HPMS) was very cumbersome for them to use for the specific purpose of submitting data for CCIPs and QIPs. The draft templates are available to plans now for comment and voluntary use. The collection does not require a signature from the respondent.

4. Duplication of Efforts

This collection does not contain duplication of similar information.

5. Small Business

This collection does not impose a significant impact on small businesses and other entities.

6. Less Frequent Collection

Less frequent collection of the data from MAOs would severely limit CMS' ability to perform accurate and timely oversight, monitoring, compliance and auditing activities regarding Quality Improvement Projects and Chronic Care Improvement Programs.

7. Special Circumstances

No special circumstances apply.

8. Federal Register/Outside Consultation

A 60-day Federal Register notice was published on September 22, 2006.

Draft templates were posted for public comment on www.cms.hhs.gov on September 15, 2006. CMS has made MAOs aware of the templates in the annual call letter update and at the Medicare Advantage quality conference sponsored by the Quality Improvement Organizations.

9. Payments/Gifts to Respondents

There are no payments/gifts to respondents associated with this information collection request.

10. Confidentiality

CMS will adhere to all statutes, regulations, and agency policies.

11. Sensitive Questions

CMS will adhere to all statutes, regulations, and agency policies.

12. Burden Estimates (Hours and Wages)

CMS does not expect that compliance with these audit requirements would result in additional start-up costs. Anticipated staff needed for collecting information and data and their estimated hourly rate follow:

a. ANNUAL COST BURDEN FOR RESPONDENTS

Basic numbers per year

Number of respondents = 426

Number of responses = 852 (2 responses per respondent: 1 CCIP and 1 QIP)

Time per response = 4 hours 20 minutes or 4.33 hours

Cost per hour = \$40

Annual hour burden:

Time per response X number of responses = Annual hour burden

4.33 X 852 = 3689.16

Cost per response:

Time per response X cost per hour = Cost per response

4.33 X \$40 = \$173.20

Annual cost Burden

Cost per response X Annual number of Responses = Annual Cost Burden

\$173.20 X 852 = 147,566.40

b. ANNUAL COST BURDEN FOR RECORDKEEPING

Basic numbers per year

Number of respondents = 426

Number of responses = 852 (2 responses per respondent: 1 CCIP and 1 QIP)

Time per response = 6 hours 30 minutes or 6.5 hours

Cost per hour = \$40

Annual hour burden

Time per response X number of responses = Annual hour burden

6.5 X 852 = 5,538.0 hours

Cost per Response

Time per response X cost per hour = Cost per response

6.5 X \$40 = \$260

Annual cost Burden

Cost per response X Annual number of Responses = Annual Cost Burden

\$260 X 852 = \$221,520

13. Capital Costs

There is no capital cost associated with this collection.

14. Cost to Federal Government

There is no capital cost associated with this collection.

15. Changes to Burden

This is a new data collection.

16. Publication/Tabulation Dates

We propose that use of the templates will begin upon obtaining OMB clearance. Recordkeeping will commence upon obtaining clearance and the first collection will begin one month thereafter. The collection of the data on the templates will continue indefinitely.

17. Expiration Date

CMS would like an exemption from displaying the expiration date as these forms are used on a continuing basis. To include an expiration date would result in having to discard a potentially large number of forms.

18. Certification Statement

There are no exceptions.

B. Collections of Information Employing Statistical Methods

This information collection does not employ any statistical analyses.