

Mandatory Insurer Reporting Requirements of Section 111 of the Medicare, Medicaid and SCHIP Act of 2007 (MMSEA) (P.L.110-173)

Burden Table

Insurer Type	Respondents	Responses	Burden Hours	Groupings from Supporting Statement
GHP – Private	1,900	3,515,000	292,917	308,334
GHP – State, Local, Tribal Govts.	100	185,000	15,417	
GHP – Private System Set-Up	1,900	1,900	712,500	750,000
GHP – State, Local, Tribal Govts. System Set-Up	100	100	37,500	
GHP – Private Administrative	1,900	1,900	3,800	4000
GHP – State, Local, Tribal Govts. Administrative	100	100	200	
GHP Totals	2000**	3,704,000	1,062,334	
Non-GHP – Private	289,227	2,898,827	241,569	243,841
Non-GHP – State, Local, Tribal Gov.	100	100	8	
Non-GHP – Federal Government	1,077	27,173	2,264	814,302
Non-GHP Private System Set-Up & Administrative	289,227	289,227	806,715	
Non-GHP-State, Local, Tribal Gov. System Set-Up & Administrative	100	100	27	
Non-GHP – Federal System Set-Up & Administrative	1,077	1,077	7,561	
Non-GHP Totals	290,404***	3,216,504	1,058,144	
Grand Totals	292,404	6,920,504	2,120,478	

** 2,000 is the total number of respondents. There are two respondent pools and each has three sets of burden to address.

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