

Justification for Emergency PRA Clearance
Re: State Collection and Report of Dental Provider and Benefit Information

Subject:

Request for Emergency Clearance of the Paperwork Reduction Act Package to Accelerate and Facilitate State Collection of Dental Provider and Benefit Information by August 4, 2009 deadline required by the Children’s Health Insurance Reauthorization Act (CHIPRA) of 2009, sections 501(f)(1) and 501(f)(2)

The Center for Medicaid and State Operations (CMSO) is requesting emergency approval of a Paperwork Reduction Act (PRA) package to accelerate and facilitate States Medicaid and Children’s Health Insurance Program (CHIP) collection of information on dental providers and state dental benefit programs. CHIPRA sections 501(f)(1) and (2) requires this information to be posted on the Insure Kids Now (IKN) website and hotline “not later than 6 months after the date of the enactment of this Act”, the information must on the website by August 4, 2009—six months after the February 4, 2009 enactment. Thereafter, the States must update the information on the dental providers quarterly and the information on their benefit package annually.

States will need to provide the dental provider information to the Health Services Resources Administration (HRSA), who operates the IKN website and hotline, no later than July 16, 2009 in order to meet the **statutory deadline of August 4, 2009**. In order to allow States four weeks to gather and upload this information, the information requirements must be transmitted to the States no later than June 17. **CMS was delayed in providing this guidance to States because Congress did not provide any funding for this activity; therefore, CMS and HRSA have been engaged in lengthy discussions over possible funding sources for this unfunded mandate. As we are confident that the funding issue will be resolved in the near future, we are requesting emergency approval under 5 CFR 1320.13(a)(2)(iii), as we believe that the use of normal clearance procedures is reasonably likely to cause a statutory deadline to be missed.**

We believe that several weeks will be required for States to compile the dental provider and load it into the Microsoft Access file and provide the dental benefit information in an HTML file. Providing States with the format will facilitate and accelerate their ability to meet the statutory deadline. Therefore, we request emergency approval of the PRA package.

Background:

While all States with CHIP programs provide dental services, the ease with which beneficiaries can access the list of available dental providers and benefits varies greatly from State to State. By designating the Insure Kids Now website and hotline as the nationally central place where State specific dental information can reside, Congress appears to intend that this information should be made available in a uniform and easy to access format. Specifically, Section 501(f)(1) and section 501(f)(2) of CHIPRA 2009 requires the Secretary to

“(1) work with States, pediatric dentists, and other dental providers (including providers that are, or are affiliated with, a school of dentistry) to include, not later than 6 months after the date of the enactment of this Act, on the Insure Kids Now website (<http://www.insurekidsnow.gov/>) and hotline (1-877-KIDS-NOW) (or on any successor websites or hotlines) a current and accurate list of all such dentists and providers within each State that provide dental services to children enrolled in the State plan (or waiver) under Medicaid or the State child health plan (or waiver) under CHIP, and shall ensure that such list is updated at least quarterly; and (2) work with States to include, not later than 6 months after the date of the enactment of this Act, a description of the dental services provided under each State plan (or waiver) under Medicaid and each State child health plan (or waiver) under CHIP on such Insure Kids Now website, and shall ensure that such list is updated at least annually.”

CMS and HRSA engaged in numerous discussions on the best way to facilitate States’ ability to gather and submit this information. HRSA contractors are recommending Because CMS and HRSA are asking that the information be provided in a uniform file and format, States will need considerable time to take their current data and provide it in the attached formats. Following discussions with HRSA and their contractors on these formats, it was thought that asking States to submit their dental provider information in a file that allows dropdown information to tailor the response to the request. For the information on benefits, CMS and HRSA will ask states to provide their benefit package information in a fact sheet, the outline of which is attached.

Requested and Proposed Timeline:

Date	Activity
06/05/2009	Submit emergency justification to OMB
06/09/2009	Receive approval to submit emergency package to OMB
06/15/2009	Publication of Emergency Federal Register Document
06/15/2009	Beginning of 30 day public comment period and concurrent OMB review of package
07/14/2009	End of public comment period
07/15/2009	Requested date of OMB approval
07/16/2009	Collection instruments officially sent to State Medicaid and CHIP programs
07/24/2009	Date by which States are required to submit dental provider information and dental benefit information to CMS and HRSA.
08/04/2009	Due Date for IKN website and hotline to have dental information included in the website and hotline

CMS Contact:

Nancy Goetschius
[Division of Children's Health Insurance Programs](#)
Family and Children's Health Programs Group
[Centers for Medicare & Medicaid Services](#)
[7500 Security Boulevard](#)
[Baltimore, MD 21244-1850](#)
[Phone: 410-786-0707](#)
[Fax: 410-786-8534](#)
Email: Nancy.goetschius@cms.hhs.gov