Justification for Emergency PRA Clearance Re: State Collection and Report of Recovery Act Information

Subject:

Request for Emergency Clearance of the Paperwork Reduction Act Package to Accelerate and Facilitate State Collection of Quarterly Information for Federal Fiscal Year (FFY) 2009 as required by the American Recovery and Reinvestment Act of 2009 (Recovery Act), sections 5001 and 5004(d)

The Center for Medicaid and State Operations (CMSO) is requesting emergency approval of a Paperwork Reduction Act (PRA) package to accelerate and facilitate collection of quarterly information for FFY 2009 by State Medicaid programs as required by the Recovery Act. The Department is required to collect specified information for annual reports to Congress.

Section 5001 - Temporary Increase of Medicaid Federal Assistance Percentage (FMAP) of the Recovery Act requires quarterly reports for the period of October 1, 2008 – September 30, 2011. Section 5004(d) - Extension of Transitional Medical Assistance (TMA) requires quarterly reports beginning for the quarter of July – September 2009 until the Federal authority for TMA coverage ends (now scheduled to sunset on December 31, 2010). Each State Medicaid agency will submit its quarterly reports to the appropriate Regional Office of the Centers for Medicare & Medicaid Services (CMS). The CMSO will then compile and summarize the quarterly reports for annual reports to Congress, as required by the Recovery Act.

States are required to start providing the quarterly information to the CMS Regional Offices as soon as possible related to allocation and expenditures of the increased Medicaid FMAP that became available under section 5001 of the Recovery Act beginning with the 1st quarter of FFY 2009 (October – December, 2008). Since the new TMA provisions of the Recovery Act took effect on July 1, 2009, States must begin their reporting related to TMA under section 5004 of the Recovery Act once data become available for the 4th quarter of FFY 2009 (July – September, 2009).

If the required data are not currently available to States, they will need to develop new data runs to extract the information from the State's eligibility system or its Medicaid management information system, and so will need to receive as soon as possible the guidance with the information collection requirements for sections 5001 and 5004 of the Recovery Act. Therefore, 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 for annual reports to Congress as required under sections 5001 and 5004 of the Recovery Act.

We believe that several weeks will be required for States to develop the necessary processes extracting the required information. Once the processes are developed, the reports should be relatively quick and easy for States to generate quarterly and then load the information into the Microsoft Excel tables. Providing States with the format will facilitate and accelerate their ability to meet the statutory deadlines. Therefore, we request emergency approval of the PRA package.

Background:

Two Excel spreadsheets outline the information each State must provide the appropriate Regional Office of the Centers for Medicare & Medicaid Services (CMS) each calendar quarter, in accordance with the reporting requirements in two sections of the (Recovery Act (P.L. 111-5), signed by President Obama on February 17, 2009:

- 5001 Temporary Increase of Medicaid Federal Medical Assistance Percentage (FMAP)
- 5004(d) Extension of Transitional Medical Assistance (TMA)

The Secretary of Health and Human Services is required to submit annual reports to Congress with information collected from States in accordance with sections 5001 and 5004(d) of the Recovery Act.

All State Medicaid Agencies in 50 States will complete the reports. CMS will review the information to determine if each State has met all the reporting requirements of sections 5001 and 5004(d) of the Recovery Act.

Date	Activity
8/21/09	Submit emergency justification to OMB
8/26/09	Receive approval to submit emergency package to OMB
9/4/09	Publication of Emergency Federal Register Document
9/4/09	Beginning of 30 day public comment period and concurrent OMB review of package
10/3/09	End of public comment period
10/5/09	Requested date of OMB approval
10/08/09	Collection instruments officially sent to State Medicaid and CHIP programs
10/31/09	Due dates for quarterly State reporting for increased FMAP and TMA
09/30/2011	Due dates for annual reports to Congress about increased

Requested and Proposed Timeline:

CMS Contact:

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