

## SUPPORTING STATEMENT FOR PAPERWORK REDUCTION ACT SUBMISSION

Public Information Collection Requirements Submitted for Public Comments and Recommendations: TRICARE Dental Program (TDP) Claim Form

### A. JUSTIFICATION

#### 1. Need and Use

The TRICARE Management Activity (TMA) under the authority of the Office of the Assistant Secretary of Defense (Health Affairs)/TMA Office of the Deputy Assistant Secretary of Defense has the responsibility for management of the TRICARE dental program as established in Title X, United States Code, section 1076a. The TDP claim form is required to gather information to make payment for legitimate dental claims and to assist in contractor surveillance and program integrity investigations and to audit financial transactions where the Department of Defense has a financial stake. The information from the claim form is also used to provide important cost share explanations to the beneficiary. Copies of Title X USC 1076a, 32 CFR 199.13 are attached.

#### 2. Purpose and Users of the Information

This claim form allows for the efficient management of the TDP and ensures that payments are made only for legitimate claims for covered dental procedures provided by a licensed dentist to an eligible beneficiary. It is realized that non-network providers may submit a claim form that is similar to the TDP claim form with all the required information and this will be accepted for payment. The users of the information are the TDP contractor, TMA personnel, licensed network and non-network dentists, and the eligible beneficiaries.

#### 3. Information Collection Techniques

The information collected to make payment for covered dental procedures provided by a licensed dentist to an eligible beneficiary can be sent to the TDP contractor electronically, Fax or mail. Approximately 35% of all TDP network dental claims are filed electronically. Dental offices and patients can download the TDP claim form from the contractor's web site.

#### 4. Duplication and Similar Information

There is no duplication of the data collection effort. The actual costs for the dental procedures and what specific procedures were performed cannot be obtained by any other method except for the TDP or similar dental claim form.

5. Small Business

This collection of information does involve small business or other small entities. It does not have a significant impact on small businesses or other entities. The average time to complete the form is 15 minutes at an average cost of \$5.00 and the payment from the contractor for the treatment provided far exceeds this cost. There is no other method for seeking reimbursement from the contractor for services provided.

6. Less Frequent Collections

This collection of information is only required when payment for covered dental procedures that are performed by a licensed dentist is requested. Payment cannot be accomplished without completion of the dental claim form.

7. Special Circumstances

For non-network dentists, to include those in overseas locations, the use of the TDP Claim Form is highly encouraged. However, dental claims will be paid if all the required information is provided on a similar claim form.

8. Federal Register Notice/Consultations

The 60-day information collection notice was published on Monday, February 2, 2009 (74 FR 5825). There were no public comments received in response to this notice.

9. Payment/Gift to Respondents: None.

10. Confidentiality

Confidentiality of any information received on the TDP claim form are assured through agency policy and the contractual requirement that the contractor not use or further disclose Protected Health Information other than as permitted or required by the Contract or as Required by Law.

11. Sensitive Questions

There are no questions of a sensitive nature on the form.

12. Burden Estimated (hours)

The total hour burden for the respondents is projected to be \$1,006,415. This is based on the annual number of 4,025,660 claim forms submitted and an estimate of 15 minutes per completed TDP claim form. There are 64,930 dental offices that complete the claim forms. Approximately 35% of TDP claims are filed

electronically. The percentage of OCONUS TDP claim forms is less than 1% of the total TDP claim forms.

Number of Respondents: 64,930

Responses Per Respondent: 62

Annual Responses: 4,025,660

Average Burden Per Response: 15 minutes

Annual Burden Hours: 1,006,415

The average cost to the dentist office to complete the TDP claim form is \$ 5.00. This cost is based on an estimate of 15 minutes per completed form and an average billing manager wage of \$20 per hour based on current literature.

The annual costs to the respondents is \$5,032,075 ( $\$5.00 \times 1,006,415$ ).

#### 13. Cost to Respondents

There are no start-up, O&M, or capital costs to respondents except for the mailing costs.

#### 14. Cost to Federal Government

The cost to the government is estimated to be \$3.00 per claim for a total of \$12,076,980.

#### 15. Change in Burden

Increase in respondents.      Extension of previously approved collection.

#### 16. Publication/Tabulation

Information gathered through this project will not be published or tabulated.

#### 17. Expiration Date

No exception is sought for displaying the expiration date of the data collected through this project.

#### 18. Exceptions

There are no exceptions to the certification statement in Item 19 of OMB Form 83-1.

**B. COLLECTION OF INFORMATION EMPLOYING STATISTICAL METHODS**

Statistical methods are not employed for collection of this information