

Supporting Statement For Paperwork Reduction Act Submissions

State Collection and Reporting of Dental Provider and Benefit Package Information on the Insure Kids Now! Website and Hotline (CMS-10291/OMB # 0938-1065)

A. Background

CMS is seeking 3-year approval for the extension of this currently approved collection.

The Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA) sections 501(f) (1) and (2), requires that state-specific information on dental providers and benefits be posted on the Insure Kids Now (IKN) website and available on the hotline “not later than 6 months after the date of the enactment of this Act”. The States must update the information on the dental providers quarterly and the information on their benefit package annually. The Health Resources and Services Administration (HRSA) operates the IKN website and hotline. CMS is partnering with HRSA to facilitate State compliance with the statutory reporting requirements for dental providers and dental benefit information.

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. It appears that it is the intent of Congress that making this information readily available will help to avoid a situation in which a child died due to lack of access to adequate dental care.

The IKN website contains information on dental providers, their contact information, any specialty, provisions to provide care to special needs children, etc. It was designed to be easily navigated by everyone who seeks the information. People who call the hotline will be helped by those who have access to the IKN website or a state.

B. Justification

1 . Need and Legal Basis

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.”

2. Information Users

CHIP and Medicaid beneficiaries, their parents and guardians, advocates, dental providers, social workers, Congressional staff, researchers, and others will access this information from the IKN website and hotline.

3. Use of Information Technology

States must submit information on dental providers and on dental benefits. The use of technology for state compliance is described below.

Dental Provider Information

HRSA will facilitate data submission and file sharing with each State and identified CMS staff through a secure website account (e-Room). Each State will be allotted two accounts to access the e-Room through which they will have access to the common data and restricted access to their own State information and data.

States will be given the following options for submitting required data:

- 1) Creation of the data files from a State’s own data processing system;
- 2) Use of a CMS- and HRSA-provided Microsoft Access desktop database tool (States would download this from the IKN eRoom); and,
- 3) Entry of data in an uncomplicated web data table in the State’s e-Room.

Once the data is uploaded, the HRSA Data Warehouse will check and clean the data to ensure it is non-duplicative and consistent.

The attached instructions to the States fully utilize electronic submission of the required information to reduce burden and facilitate collection. While States will have to initially submit information on their dental benefit packages in Word, they will be able to submit the information electronically by the time the next collection is required or within one year. The goal is that fully 100 percent of the required information will be submitted electronically.

Dental Benefit Information

HRSA will, with contract support, post States’ dental benefit package information on the IKN website. The information will initially be supplied to HRSA in a Word template file in the e-Room. These files will be converted into an appropriate web format (html or pdf), tagged as required to comply with Section 508 of the Rehabilitation Act, as amended (to ensure accessibility for people with disabilities), and posted to HRSA’s web server. HRSA will also create an index page listing and linking to all of the documents and create a link to each State’s document in the CHIP dental provider locator tool.

Three months after the initial posting, HRSA will convert the documents into data that can be

stored and displayed in a user-friendly format. This will require data entry (that will be incorporated into the data collection related to the dental provider locator tool and enable States to update their own information) and graphic user interface development to display data in a user-friendly format.

States will not be required to submit an electronic signature.

4. Duplication of Efforts

This information collection does not duplicate any other effort and the information cannot be obtained from any other source.

5. Small Businesses

Small businesses will not be impacted by this collection.

6. Less Frequent Collection

Section 501 specifies the frequency of collection. Specifically, dental provider information must be submitted every three months (quarterly) and dental benefit information is due yearly.

7. Special Circumstances

There are no special circumstances associated with this collection.

8. Federal Register/Outside Consultation

A 60-day Federal Register notice seeking public comment was published on September 11, 2009.

9. Payments/Gifts to Respondents

There are no payments/gifts to respondents.

10. Confidentiality

We do not pledge confidentiality.

11. Sensitive Questions

There are no sensitive questions.

12. Burden Estimates (Hours & Wages)

Collection of Dental Provider Information

40 hours per State quarterly

(51 x 4 x 40hrs = 8,160 hours)

\$50 per hour State wage

\$50 x 40 = \$2000 x 4 = \$8000 yearly burden to a State

\$8000 x 51 States = \$408,000

Collection of Dental Benefit Information

20 hours per State annually

51 x 1 x 20hrs = 1,020 hours)

\$50 per hour State wage

\$50 x 20 = \$1000 yearly burden to a State

\$1000 x 51 States = \$51,000

Total Annual Responses (includes quarterly and annual data collection) = 255

Total Annual Burden hours (includes quarterly and annual data collection) = 9,180

13. Capital Costs

States will be able to access this information from their existing systems; therefore, there are no capital costs.

14. Cost to Federal Government

Estimates below are contractor costs to HRSA develop the capacity to meet the Congressionally mandated requirement.

(1) Oral Health Provider Interface Tool

Budget: FY 2009

Development and Posting of Initial Data (By August 4th) \$261,540.10

Development Interactive Update Tool \$169,270.21

Quarterly Updates through FY2009 \$21,518.18

Additional GOVWORKS Administrative Fee (4%) \$18,093.14

HRSA Interagency Agreement Administrative Fee (5%) \$22,616.42

TOTAL: \$493,038.05

Budget: FY 2010

Quarterly Updates and Maintenance \$12,339.20

Additional GOVWORKS Administrative Fee (4%) \$493.569

HRSA Interagency Agreement Administrative Fee (5%) \$616.96

TOTAL \$13,449.73

Budget: FY 2011

Quarterly Updates and Maintenance \$12,339.20

Additional GOVWORKS Administrative Fee (4%)	\$493.569
HRSA Interagency Agreement Administrative Fee (5%)	\$616.96
TOTAL	\$13,449.73

Budget: FY 2012	
Quarterly Updates and Maintenance	\$12,339.20
Additional GOVWORKS Administrative Fee (4%)	\$493.569
HRSA Interagency Agreement Administrative Fee (5%)	\$616.96
TOTAL	\$13,449.73

(2) Posting of State dental benefit packages

Budget: FY 2009	\$50,980.00
Additional GOVWORKS Administrative Fee (4%)	\$2199.20
HRSA Interagency Agreement Administrative Fee (5%)	\$2749.00
TOTAL	\$55,968.00

****No Additional Costs after Development**

3) Supporting the additional costs for managing and running the Insure Kids Now Hotline

Budget: FY 2009	\$55,000.00
Additional GOVWORKS Administrative Fee (4%)	\$2200.00
HRSA Interagency Agreement Administrative Fee (5%)	\$2750.00
TOTAL	\$59,950.00

Budget: FY 2010	\$55,000.00
Additional GOVWORKS Administrative Fee (4%)	\$2200.00
HRSA Interagency Agreement Administrative Fee (5%)	\$2750.00
TOTAL	\$59,950.00

Budget: FY 2011	\$55,000.00
Additional GOVWORKS Administrative Fee (4%)	\$2200.00
HRSA Interagency Agreement Administrative Fee (5%)	\$2750.00
TOTAL	\$59,950.00

Budget: FY 2012	\$55,000.00
Additional GOVWORKS Administrative Fee (4%)	\$2200.00
HRSA Interagency Agreement Administrative Fee (5%)	\$2750.00
TOTAL	\$59,950.00

GRAND TOTAL FOR TECHNOLOGY \$829,156.00

Federal Staff Costs are estimated at 10 hours per week per year for two staff members.
 \$50 per hour per person per hour.
 $50 \times 10 \text{ hours/week} = 500 \times 2 \text{ staff members} = \$1000 \text{ per week or } \$52,000 \text{ per year.}$

15. Changes to Burden

There are no program or burden changes.

16. Publication/Tabulation Dates

By statute, all information was posted to the IKN website within 6 months after passing of CHIPRA 2009. The provider information must be updated quarterly and the benefit information must be updated annually.

17. Expiration Date

This collection does not lend itself to the displaying of an expiration date.

18. Certification Statement

There are no exceptions to the certification statement identified in Item 19, "Certification for Paperwork Reduction Act Submissions," of OMB Form 83-I.

C. Collections of Information Employing Statistical Methods

Because this is a collection of factual data, the collection of this information does not lend itself to the utilization of statistical methods.