Supporting Statement – Temporary High Risk Pool Program

A. Justification

1. Circumstances Making the Collection of Information Necessary

The Department of Health and Human Services (HHS) is requesting emergency action for this clearance by the Office of Management and Budget no later than April 30, 2010. We are requesting emergency processing procedures for this application because this information is needed immediately to assure that temporary high risk health insurance pool programs are established timely and effectively.

On March 23, 2010, the President signed into law H.R. 3590, the Patient Protection and Affordable Care Act (Affordable Care Act), Public Law 111-148. Section 1101 of the law establishes a "temporary high risk health insurance pool program" to provide health insurance coverage to currently uninsured individuals with pre-existing conditions. The law authorizes HHS to carry out the program directly or through contracts with states or private, non-profit entities.

2. Purpose and Use of Information Collection

The data collection will be used by HHS to request that States and the District of Columbia submit the following:

- A primary contact person;
- A letter of intent indicating whether or not they intend to submit an application to contract with HHS to operate a high risk pool program under the Affordable Care Act. As part of the letter of intent, we will request they include the anticipated timing for establishment of the program and information on any State legislative decisions that would be needed in order to participate in the new high risk pool program;
- Advance indication of which of the potential implementation options appears to be most likely for states to use to carry out their program, including available additional details such as outlines of programs, or other ideas about potential mechanisms of providing coverage under the new law; and
- All of the above information be submitted via email to HHS with the subject line "Notice of Intent."

This above information will assist HHS in planning for and executing contracts with States to provide a high risk pool program.

3. Use of Improved Information Technology and Burden Reduction

All information collected will be submitted electronically using e-mail. HHS staff will

analyze the data electronically and communicate with States and the District of Columbia using email.

4. Efforts to Identify Duplication and Use of Similar Information

Since this is a new program that was created through the Affordable Care Act, the information that will be collected has never been collected before by the Federal government.

5. <u>Impact on Small Businesses or Other Small Entities</u>

No impact on small business.

6. Consequences of Collecting the Information Less Frequent Collection

This is a one-time data collection.

7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

No special circumstance.

8. Comments in Response to the Federal Register Notice/Outside Consultation

Due to the emergency nature of the program announce OMB has waived the Federal Register notice requirements for this collection.

9. Explanation of any Payment/Gift to Respondents

Not applicable

10. Assurance of Confidentiality Provided to Respondents

No personal health information will be collected. All information will be kept private to the extent allowed by application laws/regulations.

11. Justification for Sensitive Questions

No sensitive information will be collected.

12. Estimates of Annualized Burden Hours (Total Hours & Wages)

In order to complete the letter of intent, each applicant will be asked to identify anticipated timing for establishment of the program, provide information on any State legislative decisions

that would be needed in order to participate in the new high risk pool program, provide advance indication of which of the potential implementation options appears to be most likely for States to use to carry out their program, including available additional details such as outlines of programs or other ideas about potential mechanisms of providing coverage under the new law, and submit such information to OPHI via email.

We estimate that it will take approximately 4 hours per applicant to submit State contact information and complete the letter of intent. These will consist of .10 full week's work (40 hours) divided among two staff members, including a program manager and administrative assistant.

It is estimated that up to 51 respondents will submit contact information and letters of intent.

12A. Estimated Annualized Burden Hours

Estimated Annualized Burden Table

| Forms | Type of | Number of | Number of | Average | Total Burden |
|------------------|------------|-------------|---------------|--------------|--------------|
| (If necessary) | Respondent | Respondents | Responses per | Burden hours | Hours |
| | 1 | 1 | Respondent | per Response | |
| Letter of Intent | State | 51 | 1 | 3.75 | 191.25 |
| | Government | | | | |
| Contact | State | 51 | 1 | .25 | 12.75 |
| information | Government | | | | |
| Total | | | | 4 | 204 |

12B. Cost Estimate for All Respondents Completing the Letter of Intent and Contact Information

| Type of respondent | Number of Respondents | Number of Responses per Responden t | Average Burden Hours | Wage per Hour | Burden Costs Per Response |
|--------------------------|--------------------------|---|----------------------------|------------------|------------------------------|
| General manager | 51 | 1 | 3.75 | \$50.00 | \$9562.50 |
| Administrative assistant | 51 | 1 | .25 | \$22.00 | \$280.50 |
| Total | | | 4 | | \$9843.00 |

Salaries were taken from the Bureau of Labor Statistics website

(http://www.bls.gov/oco/ocos007.htm)

13. Estimates of other Total Annual Cost Burden to Respondents or Record Keepers

/Capital Costs

There are no additional record keeping/capital costs.

14. Annualized Cost to Federal Government

This is the cost to government to review the program.

| Type Federal employee support | Total Burden Hours | Hourly Wage Rate (GS 14 equivalent) | Total Federal Government Costs |
|--|--------------------------|--|--------------------------------------|
| First level reviewer | .5 | \$50.41 | \$25.20 |
| Total | .5 | | \$25.20 |

Salaries are based on a 14 Grade/Step 1 in Washington DC area.

15. Explanation for Program Changes or Adjustments

This is a new data collection.

16. Plans for Tabulation and Publication and Project Time Schedule

Data collection will begin as soon as clearance is received and will be completed in less then 30 days.

17. Reason(s) Display of OMB Expiration Date is Inappropriate

Not applicable.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions to the certification.

B. Collection of Information Employing Statistical Methods

Not applicable. The information collection does not employ statistical methods.