**OCN: 0938-1131**

**Justification of Non-material Changes (83-C Change Worksheet)**

**SUBJECT:** Change Worksheet - Request for amendment to the approved Emergency Paperwork Reduction Act Package for the Medicaid Emergency Psychiatric Demonstration (ACA Sect. 2707) Application Proposal Guidelines, OMB Control Number 0938-1131.

The Paperwork Reduction Act (PRA) package containing the Application Proposal Guidelines for the Medicaid Emergency Psychiatric Demonstration was approved by the Office of Management and Budget on or about May 10, 2011.

We request that the approved Emergency Paperwork Reduction Act Package for the Medicaid Emergency Psychiatric Demonstration (ACA Sect. 2707) Application Proposal Guidelines listed under OMB Control Number 0938-1131 be amended without additional burden requirements obviating the need for re-publication as a new PRA submission.

This request is necessitated by a policy change. The Assistant Secretary for Financial Resources (ASFR) required the Centers for Medicare & Medicaid Services to amend the demonstration design to include Medicaid beneficiaries enrolled in Medicaid managed care plans. Therefore, we have so amended the demonstration design and made pertinent changes to the solicitation indicating that States will now be able to include managed care patients. Attached is the amended Application Proposal Guidelines with all of the required changes to the document underlined (see attached).

There are three sections amended in the Application Proposal Guidelines which may appear to require additional burden. These sections are: 2.1, Mental Health Issues and Service Delivery in the State; 2.2, Psychiatric Care and Facilities,2.3, Demonstration Population; 3.3, Facilities Selected for the Demonstration; 3.4, Medicaid Payment System and Accounting; and 3.6, Understanding of Demonstration Waiver Authority. However, upon reading each section in their entirety, where the detail of the response is left to the State in preparing its proposal, the section amendments provide additional guidance to the States as to what specific information to focus on in responding to that section. So, where the State may be asked to describe pertinent information about how mental health services are provided within its borders, the amendments provide specific guidance as to what components of that same information the State should specifically focus on in responding to the solicitation. It is not that we are requesting additional information, but that we are asking the States to be more specific in what information it does provide. Therefore, we do not believe that a State which responds fully to the solicitation before these amendments were made would incur any additional burden in responding to the amended application guidelines.