

Responses to Comments Received
Federal Register Notice on Generic Clearance for Medicaid and CHIP
State Plan, Waiver, and Program Issues
CMS-10398, OMB 0938-New

CMS received three comments on the July 1, 2011 (76 FR 38655) 60-day notice regarding the generic clearance for Medicaid and CHIP State plan, waiver, and program issues. The commenters were the Texas Health and Human Services Commission (HHSC), which is the Texas Medicaid agency, the Alaska Native Health Board (ANHB), and the Alaska Native Tribal Health Consortium (ANTCH). The comments from ANHB and ANTCH were identical.

1. Comments on Electronic Submission

The Texas HHSC suggested that CMS develop guidance and provide technical assistance if it intends to use an automated system for submitting the templates created under this generic request. The commenter suggested that since the current process is paper-based, a transition plan will be necessary to transition from the templates used under the existing paper-based process and the templates used under the automated system.

CMS Response

The CMS does not intend to implement an automated system for Medicaid and CHIP State plans, waivers, and demonstration using the templates under this generic request. An effort is underway to develop such an automated system, but the PRA approval for that collection will occur as amendments to the PRA package associated with the CMS-179 form (OMB 0938-0193). The State plan, waiver, and demonstration templates created under this request will be completed using a Microsoft application (generally Word) and sent electronically to CMS via e-mail, a process consistent with existing practice.

2. Comments on Collaboration with States

The Texas HHSC noted the importance of CMS collecting State input in the development of State plan amendment templates and other collections.

CMS Response

We agree that the input of States is critical in the development of State plan amendment templates and other collections. We work closely with State partners to receive input through Technical Advisory Panels and other vehicles throughout the development process.

3. Comments on Tribal Consultation

Both ANHB and ANTCH commented that CMS should continue to ensure appropriate tribal consultation in the development of templates and collections under this PRA request.

CMS Response

The CMS is committed to meaningful consultation with tribal governments and health programs. We will continue to engage with the Tribal Technical Advisory Group and other consultation activities with the tribes throughout the development process as forms and templates are created under this generic request.