

Justification
Request for Medicare Payment
RRB Form G-740S and CMS-1500

1. Circumstances of information collection - Under Section 7(d) of the Railroad Retirement Act, the Railroad Retirement Board (RRB) administers the Medicare program for persons covered by the railroad retirement system. This collection obtains the information needed by Palmetto GBA, the Medicare carrier for railroad retirement beneficiaries, to pay claims for payments due under Part B of the Medicare program. Authority for collecting the information is 42 CFR 424.32.
2. Purposes of collecting/consequences of not collecting the information - The forms furnished by the RRB and Palmetto GBA for claiming Medicare payments follow.

Form CMS 1500, Health Insurance Claim Form, is the common claim form from CMS (*Centers for Medicare & Medicaid Services*) that is used by physicians and suppliers for claiming payment for medical and related services furnished railroad retirement beneficiaries under Medicare (Part B), Medicaid, and other medical insurance programs.

CMS regulations (CMS 42 CFR 424.32) require that most Forms CMS-1500 be submitted electronically. However, physicians and suppliers keep a quantity of paper Forms CMS-1500 on hand for those claims that fall under the exceptions to that requirement. The physicians and suppliers obtain the forms from the Government Printing Office, the American Medical Association, or www.cms.hhs.gov/forms. Form CMS-1500 is designed for self-completion. The completed form is forwarded by the physician or supplier to Palmetto GBA for processing.

Form G-740S, Patient's Request for Medicare Payment, is used by railroad retirement beneficiaries to apply for reimbursement of payments made for medical services under Part B of the Medicare program.

Form G-740S is obtained from Palmetto GBA or an RRB field office, and is designed for self-completion. The completed form is then forwarded by the beneficiary to Palmetto GBA for processing.

The responsible doctors, suppliers, and other Medicare providers are required to submit Medicare claims using Form CMS-1500 for the medical services that they provide to railroad retirement beneficiaries. However, beneficiaries can use Form G-740S in those situations where, for whatever reason, the provider fails to submit a Form CMS-1500 on their behalf.

The format and use of Form G-740S is the same as its counterpart, Form CMS-1490S, OMB No. 0938-0008. Railroad retirement beneficiaries can use either Form G-740S or CMS-1490S.

The RRB proposes the following changes to Form G-740S:

- **For clarity in completing Items 4b1, Employment, and 4b2, Accident, remove the Yes/No question format and make into a statement requesting the**

applicant check the appropriate “Employment,” “Accident,” or new choice “Neither.” Other minor editorial and cosmetic changes.

3. Planned use of improved information technology or technical/legal impediments to further burden reduction - A proposed version of RRB Form G-740S will be made available at on the Palmetto GBA website upon approval.
4. Efforts to identify duplication and other improvements - See previous reference to CMS Form-1490S in item 2.
5. Small business respondents - Respondents can be small businesses. However, participation is voluntary and to the extent determined by the employer.
6. Consequences of less frequent collections - Not applicable since the information is solicited only once for each claim filed.
7. Special circumstances - **N.A.**
8. Public comments/consultations outside the agency - In accordance with 5 CFR 1320.8(d), comments were invited from the public regarding the information collection. The notice to the public was published on page 59396, of the September 4, 2012, Federal Register. No requests for further information or comments were received. Coordination with CMS representatives is an on-going activity.
9. Payments or gifts to respondents - N.A.
10. Confidentiality - Privacy Act System of Records, RRB-3, Medicare: Part B. In accordance with OMB Circular M-03-22, a Privacy Impact Assessment for this information collection was completed and can be found at <http://www.rrb.gov/pdf/PIA/PIA-BPO.pdf>.
11. Sensitive questions - N.A.
12. Estimate of respondent burden - The RRB uses the information obtained by Forms G-740S and CMS-1500 solely to carry out the requirements of the Centers for Medicare & Medicaid Services (CMS) in the administration of the Medicare program for persons covered by the railroad retirement system. Therefore, the only part of the burden the RRB assumes under its public information collection is a token burden of 1 hour, the burden, in substance, being imposed by CMS. **This token 1 hour burden was suggested by OMB originally.**

In April 1992, OMB conditioned its approval on the RRB coordinating with CMS to ensure that the burden is being accounted for under HHS OMB Number 0938-0008, since the RRB claims a token burden of only 1 hour for its overall submission.

Monthly, Palmetto GBA submits an electronic workload report which it sends to CMS. This report provides statistical information regarding RRB claims processing activity. This report provides CMS with the data necessary to compute the average number of annual responses. A copy of a recent report is included.

13. Estimate of annual cost burden to respondents or recordkeepers - N.A.

14. Estimate of cost to Federal Government - N.A.
15. Explanation for changes in burden - N.A.
16. Time schedule for data collections and publications - The results of this collection will not be published.
17. Request not to display OMB expiration date - The G-740S is seldom revised. Given the costs associated with redrafting, reprinting, and distributing the form in order to keep the appropriate OMB expiration date in place, the RRB requests authorization to **not** display the expiration date on the form.
18. Exceptions to the certification statement - None