

Supporting Statement for Medicaid Disproportionate Share Hospital (DSH)
Annual Reporting Requirements
CMS-R-266 (OMB 0938-0746)

Background

The attached notice provides for a collection of hospital specific DSH payment information as required by section 1923(j)(1) of the Social Security Act (the Act). The collection of data will be submitted to CMS on an annual basis by each State.

A. Justification

1. Need and Legal Basis

The authorization for the DSH information collection is from Section 1001 of the Medicare Modernization Act.

Section 1923(j)(1) of the Act requires States to submit an annual report that includes the following:

- Identification of each DSH that received a DSH payment under the State's Medicaid program in the preceding fiscal year and the amount of DSH payments paid to that hospital in the same year.
- Such other information as the Secretary determines necessary to ensure the appropriateness of DSH payments.

2. Information Users

This information will be used by CMS and Congress to assess the utilization of the disproportionate share hospital program dollars.

3. Use of Information Technology

CMS recommends the State use a standard software spreadsheet package to compile the information before submitting the information to the regional offices.

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

These requirements do not affect small businesses.

6. Less Frequent Collection

Failure of the State to submit this information will result in the State being out of compliance with section 1923(j)(1) of the Social Security Act.

7. Special Circumstances

There are no special circumstances regarding the collection of this information.

8. Federal Register Notice/Outside Consultation:

A final rule published on January 21, 2011 (76 FR 3909). No comments were received.

9. Payment/Gift To Respondent.

There is no payment/gift to respondent.

10. Confidentiality

The information submitted by a State is not of a proprietary nature. This information will be made available to the public.

11. Sensitive Questions

Questions of a sensitive nature are not being asked.

12. Burden Estimate (Total Hours & Wages)

Hours

The information submitted by each State is required annually, beginning at the end of the first quarter of the fiscal year following the reporting period. It requires a submission of hospital specific payment data related to the disproportionate share hospital program. The submission of this data in an electronic spreadsheet format will take each State approximately 42 hours. At 42 hours per State the total number of hours will be approximately 2,142 hours for all 51 States.

Wages

Wage levels would vary depending on the level of staff utilized by individual States, but estimating this expense at \$51.00/hr for 1,071 total hours for management and professional staff to review and prepare reports and \$28.77/hr for 1,071 total hours for office staff to prepare the reports totaling \$1,675 per state or \$85,434 nationally.

13. Capital Costs

There should be no capital costs related to the collection of this data.

14. Cost to Federal Government

The information submitted by each State will be compiled and evaluated by an employee/contractor of the Federal government. The approximate amount of staff time utilized will be one half hour per State submission which will total 26 hours per annum staff time. Wage levels would approximate \$33.00 an hour, costing the government \$828.00 per annum to compile and evaluate this data.

15. Changes to Burden

There are proposed changes to the burden based on the a notice of proposed rulemaking (CMS-2367-P) that would require the submission of additional information under section 1923(j)(1) of the Social Security Act. To ensure the most accurate burden estimate, there are changes to the hours and wages based on our review of State submissions under section 1923(j) of the Social Security Act. Additionally, the number of respondents has been corrected from 52 to 51 (all 50 states and the District of Columbia).

Hours

The information submitted by each State is required annually, beginning at the end of the first quarter of the fiscal year following the reporting period. The notice of proposed rulemaking (CMS-2367-P) would require additional information hospital specific payment data from States related to the disproportionate share hospital program. We estimate that it would take an additional 4 hours per state (from 38 approved hr to 42 total hr) to complete the DSH reporting spreadsheets.

Wages

We used the following hourly labor rates and estimated the time to complete each task: \$51.00/hr and an additional 102 hr (1,071 total hours) for management and professional staff to review and prepare reports, and \$28.77/hr and an additional 102 hr (1,071 total hours) for office staff to prepare the reports. We estimate that the proposed changes will require an additional cost of \$10,404 (or \$85,434 total) based on the additional 204 (4 x 51) annual hours for all states and the District of Columbia (or 2,142 total hr).

16. Publication/Tabulation Dates

CMS is requesting the information be tabulated and submitted to the regional offices by the end of the first quarter of the Federal fiscal year following the reporting year.

17. Expiration Date

This information does not lend itself to an expiration date.

18. Certification Statement

There are no exceptions to the certification statement.

B. Collection of Information Employing Statistical Methods

N/A. This collection does not employ statistical methods.