

Application to Use Burden/Hours from Generic PRA Clearance:  
Generic Social Marketing & Consumer Testing Research  
(CMS-10437, OMB 0938-1247)

**Generic Information Collection (GenIC) #1:** Consumer Testing for the Health Insurance Marketplace's (HIM) Quality Rating System (QRS): Phase 1, Wave 1—Terminology Related to the Health Insurance and Quality

Office of Communications (OC)  
Centers for Medicare & Medicaid Services (CMS)

## **A. Background**

The Office of Communication will be collaborating with NORC to conduct preliminary consumer testing of concepts related to the Quality Rating System that will be available on the Health Insurance Marketplace. This is a small scale, rapid turn-around project designed to provide preliminary qualitative information to help guide future consumer interactions.

## **B. Description of Information Collection**

Sections 1311(c)(3) and (c)(4) of the Affordable Care Act directs the Secretary to develop, administer, and make publicly available a Quality Rating System (QRS) that rates Qualified Health Plans (QHPs) based on relative quality and price as well as the results of an Enrollee Satisfaction Survey. The Centers for Medicare and Medicaid Services (CMS) will be conducting research to assist in developing the QRS so that it is understandable, accessible, and useful to Marketplace consumers. In Phase 1, Wave 1 of this research, CMS will test Marketplace consumers' current knowledge and understanding of terms related to health insurance and health plan quality. CMS will also include forced-choice questions aimed at exploring the trade-offs consumers make between plan costs and quality ratings.

## **C. Deviations from Generic Request**

No deviations are requested.

## **D. Burden Hour Deduction**

We will interview 10 people for this study. The respondents will be recruited by a market research firm in northern California. They will vary by age, race/ethnicity, highest level of education completed, and health insurance status. All participants will be eligible to purchase (or will have already purchased) health insurance through the HIM.

The data will be collected via one-on-one, in-person qualitative interviews conducted in a market research facility in California. The interviews are expected to take approximately 30 minutes and respondents will be offered a cash incentive consistent with that for similar consumer marketing research activities in this area for completing the interview. This level of participant incentive is in keeping with that specified in the original Supporting Statement for this collection, i.e., *in accordance to OMB Circular A-21, section C, and subsection 3 "Reasonable Costs"*. A more detailed justification for providing incentives is appended to this application.

The total approved burden ceiling of the generic ICR is 21,488 hours. We are requesting a total deduction of 5 hours from the approved burden ceiling (10 participants x 0.50 hours = 5 hours)

## **E. Timeline**

CMS hopes to deploy this collection as soon as updated consumer testing materials are ready, sometime between the present – December 31, 2015

The following attachment is provided for this information collection:

- CMS Health Insurance Marketplace Quality Rating System - Wave 1 Interview Guide
- Justification for Providing Incentives for Participation in Marketing Research – Qualitative Studies