## Non-Substantive Change Request to 0938-1190 (Patient Protection and Affordable Care Act; Exchange Functions: Eligibility for Exemptions)

February 26, 2014

This is a non-substantive change request to two of the seven applications for an exemption from the shared responsibility payment that are approved as OMB number 0938-1190. The changes are as follows:

Application for Exemption for American Indians and Alaska Natives and Other Individuals who are Eligible to Receive Services from an Indian Health Care Provider

- Correct an error on page 2, such that the text after the "YES" option on question #7 says, "If yes, then leave the rest of this page blank", instead of, "If yes, skip to question 9".
  - o IMPACT: Currently, consumers may be accidentally answering questions that aren't relevant.
- Add the list of documentation that is acceptable for substantiating eligibility for the exemption
  - O IMPACT: Currently, consumers are unclear which documents are required to support a request for this exemption. Please note that the existing application already requires documentation, in accordance with regulations; the addition to the application is just the detailed list (as vetted with the CMS Tribal Technical Advisory Group and the Indian Health Service) to provide clarity on which documents are acceptable.

Application for Exemption from the Shared Responsibility Payment for Members of Recognized Religious Sects or Divisions

• Correct an error on page 2, such that the race and ethnicity questions are numbered #12 and #13 instead of #9 and #10

These changes have no impact on the previously stated burden associated with this collection, which assumed that the errors listed would not exist, and consumers would need to submit documentation in support of the first exemption described above.

We are currently receiving and processing these applications, and so these corrections are needed quickly to ensure that consumers can use the process smoothly. After approval, we will immediately replace the existing versions of these applications on healthcare.gov with the updated versions.