

Supporting Statement – Part A

Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges

A. Background

On March 23, 2010, the President signed into law the Patient Protection and Affordable Care Act. On March 30, 2010, the Health Care and Education Reconciliation Act of 2010 was also signed into law. The two laws collectively are referred to as the Affordable Care Act.

The Affordable Care Act creates State-based health insurance Exchanges, also referred to as “Marketplaces”, new competitive marketplaces where consumers and small businesses can purchase private health insurance. Consumers who access health insurance coverage through the Marketplaces will be able to receive direct assistance from Navigators authorized to help consumers through the registration, eligibility determination, and plan selection process as they enroll in the Marketplaces.

Section 1311(i) requires that a Marketplace establish a Navigator Program under which it awards grants to individuals or entities who satisfy the requirements to be Navigators. Navigators assist consumers by providing education about and facilitating selection of qualified health plans (QHPs) within the Marketplaces, as well as other required duties. For the Federally-facilitated Marketplace (FFM) and State Partnership Marketplaces (SPMs), CMS awards these cooperative agreements.

In April 2013, the Secretary of the U.S. Department of Health and Human Services (HHS) released a prior funding opportunity to support Navigator activities in FFMs and SPMs, PPHF-2013-Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Marketplaces, number CA-NAV-13-001. As a result of that funding opportunity on August 15, 2013, HHS awarded approximately \$67 million to 112 Navigator grant applicants in FFM and SPM states. That grant cycle will run through August 14, 2014. On June 10, 2014, HHS released another funding opportunity to support Navigator activities and anticipates awarding \$60 million in grant funds by September 8, 2014.

Under these cooperative agreements, Navigator awardees are required to carry out the duties described in Section 1311(i)(3) and 45 C.F.R. §155.210(e) to assist consumers and employees seeking health coverage in FFMs or SPMs. Awardees shall:

- Maintain expertise in eligibility, enrollment, and program specifications and conduct public education activities to raise awareness about the Marketplace;
- Provide information and services in a fair, accurate, and impartial manner. Such information must acknowledge other health programs (such as the Medicaid program and Children’s Health Insurance Program (CHIP));
- Facilitate selection of a QHP;
- Provide referrals to any applicable office of health insurance consumer assistance or health insurance ombudsman established under Section 2793 of the PHS Act, or any other appropriate State agency or agencies, for any enrollee with a grievance, complaint, or question regarding their health plan, coverage, or a determination under such plan or coverage;

- Consistent with the requirements set forth in 45 C.F.R. § 155.215, provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served by the Exchange, including individuals with limited English proficiency, and ensure accessibility and usability of Navigator tools and functions for individuals with disabilities in accordance with the Americans with Disabilities Act and section 504 of the Rehabilitation Act and
- Comply fully with the conflict-of-interest and training standards set forth in 45 C.F.R § 155.215.

Under future grant awards, Navigator awardees must provide short weekly and monthly status updates. Additionally, grantees must also provide quarterly and final (at the end of the 12-month cooperative agreement period) progress as well as quarterly financial reports to CMS.¹ Navigators will submit all reporting requirements to CMS electronically via a format provided to awardees by CMS. Due dates for these progress reports will be provided to grant recipients in the Notice of Award.

Each awardee must submit quarterly financial reports of cash transactions to CMS within 30 days after the end of each quarter via the Federal Payment Management System (PMS). A final report on expenditures and any program income generated will be submitted by Navigator awardees on a hard-copy Federal Financial Report (FFR or Standard Form 425) within 90 days of the budget/project period end date.²

B. Justification

1. Need and Legal Basis

The establishment of Navigator Programs to provide education and outreach to consumers about health insurance exchanges and to provide culturally and linguistically appropriate information in a fair, accurate, and impartial manner among consumers is authorized by Sections 1311(d)(4)(K) and 1311(i) of the Affordable Care Act.

Section 1321(c)(1) of the Affordable Care Act authorizes the Secretary of HHS to “establish and operate” a federal Marketplace within any State that does not elect or is not prepared to establish a State-based Marketplace, as well as to “take such actions as are necessary to implement” the requirements for establishing a Marketplace, including the awarding of Navigator grants.

Exchanges must provide various forms of consumer assistance in order to fulfill the requirements of 45 CFR §155.205(d) and (e).

2. Information Users

Under the terms of the Navigator grant program,³ Navigator awardees will be required to provide progress reports on a weekly, monthly, and quarterly basis during the 12 month period of performance, and a final report at the end of the period. Progress reports will outline activities such as:

- How grant funds were used;
- Details of measureable outcomes;
- The program’s progress;
- Descriptions of any barriers encountered;

1 45 C.F.R. § 74.51; 45 C.F.R. § 92.40.

2 45 C.F.R. § 74.51; 45 C.F.R. § 92.41.

3 Navigator grant funding opportunity announcement is available at: <http://www.grants.gov>.

- Types of referrals to other entities;
- Specific education and outreach efforts; and
- Key findings and recommendations.

Awardees will submit their progress reports electronically to CMS staff for evaluation and analysis. The results of this evaluation will provide feedback on the effectiveness of the Navigator Programs, in order that CMS leadership may evaluate the effectiveness of the program and address any areas that need revisions.

3. Use of Information Technology

Awardees are required to log and track information on consumers assisted through the eligibility and enrollment process in order to report required data elements to CMS weekly, monthly, quarterly, and annually. An awardee should be able to provide data, which include but are not limited to, the number of consumers assisted with creating an account; consumers assisted with eligibility determinations; consumers assisted with comparing plans; and the number of consumers assisted with selecting and enrolling in a plan. Awardees should also track information on consumers who were referred to other health care programs such as TRICARE, VA coverage, and Medicare; and, other information detailed in the reporting templates.

All Navigator awardees will submit their progress reports electronically to CMS staff for evaluation and analysis. Navigator entities will receive instructions on how they are to create and submit progress reports. Details on the specific electronic format for submission will be made available to Navigators after awards are made.

Reports sent to CMS will not contain personally identifiable information.

Government Paperwork Elimination Act (GPEA)

Is this collection currently available for completion electronically?

Yes, the data collection elements have been determined and are available for completion electronically.

Does this collection require a signature from the respondent(s)?

- Navigator awardees will submit progress reports using the format prescribed by CMS. While they have to identify themselves, there is no requirement for an electronic signature.

If CMS had the capability of accepting electronic signature(s), could this collection be made available electronically?

- Not applicable. The collection will be made electronically. An e-signature will not be required.

If this collection isn't currently electronic but will be made electronic in the future, please give a date (month & year) as to when this will be available electronically and explain why it can't be done sooner.

- Not applicable. The collection will be made electronically.

If this collection cannot be made electronic, or if it isn't cost beneficial to make it electronic, please explain.

- Not applicable. The collection will be made electronically.

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

There are no unique impacts to small businesses involved.

6. Less Frequent Collection

It is anticipated that Navigators may be contacted by potentially hundreds, if not thousands, of consumers per month. Close monitoring, through data collection reports, of the nature of these contacts will help identify any concerns with implementation. Furthermore, it is necessary to collect metrics on a weekly basis due to the nature of the program and the shorter open enrollment period this year. Solely collecting data monthly would make it difficult to work with grantees to make necessary adjustments to their strategy or performance during the critical open enrollment period. The weekly metrics will be collected and aggregated through the reporting collection system on a monthly basis, with only one additional question needing to be completed by the grantee for the monthly report.

7. Special Circumstances

Explain any special circumstances that would cause an information collection to be conducted in a manner:

Requiring respondents to report information to the agency more often than quarterly;

- Due to the cooperative agreements, CMS will be closely working with grantees to support the Navigator program, particularly prior to and during the Marketplace open enrollment period. The data collection requirements address the frequency of reporting which includes weekly, monthly, and quarterly. Such data collection and reporting allows for greater oversight and monitoring of programmatic activities prior to and during open enrollment.

Requiring respondents to prepare a written response to a collection of information in fewer than 30 days after receipt of it;

- If specific concerns are reported, the Secretary may require a more focused report to study the nature of these findings.

Requiring respondents to submit more than an original and two copies of any document;

- Not applicable. CMS will not require more copies than an original and two copies of any document.

Requiring respondents to retain records, other than health, medical, government contract, grant-in-aid, or tax records for more than three years;

- Awardees must retain records for three years from date of notice of award for auditing purposes.

In connection with a statistical survey that is not designed to produce valid and reliable results that can be generalized to the universe of study;

- Not applicable. Statistical surveys are not contemplated for this program. The measureable data obtained from this program will generate important information to assure that the program is serving consumers as required.

Requiring the use of a statistical data classification that has not been reviewed and approved by OMB;

- Statistical surveys are not contemplated for this program. The measureable data obtained from this program will generate important information to assure that the program is serving consumers as intended.

That includes a pledge of confidentiality that is not supported by authority established in statute or regulation that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use; or

- Not applicable.

Requiring respondents to submit proprietary trade secret, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.

- Not applicable. This is outside the scope of our reporting requirements.

8. Federal Register/Outside Consultation

Describe efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting format (if any), and on the data elements to be recorded, disclosed, or reported.

Following the 60-day comment period in the 79 CFR 20211; April 11, 2014, CMS received four (4) comments from consumer assistance organizations and non-profit groups about the process of collecting data on Navigator activities. Responses to the comments are available in Appendix A.

Consultation with representatives of those from whom information is to be obtained or those who must compile records should occur at least once every 3 years - even if the collection of information activity is the same as in prior periods. There may be circumstances that may preclude consultation in a specific situation. These circumstances should be explained.

We do not foresee circumstances that would preclude CMS from consulting with awardees. CMS will work with each Navigator award recipient to evaluate its progress relative to its Navigator Work Plan and may condition funding based on progress and adherence to Federal guidance and Exchange requirements including training, conflict of interest and Culturally and Linguistically Appropriate Services (CLAS) standards. CMS will track awardee progress and provide technical assistance when needed.

9. Payments/Gifts to Respondents

Payments and gifts will not be provided.

10. Confidentiality

CMS will not collect personally identifiable information from awardees as a part of this grant. All reporting will be of aggregate nature.

11. Sensitive Questions

- In order to perform their required duties, Navigators may need to communicate with clients about sensitive topics, such as their health status and needs, in order to assist with eligibility determinations and enrollment. As such, some information such as individual or family income, employment status, citizenship, and other characteristics that people might commonly consider private may be communicated.
- As part of awardees' reporting requirements, awardees will provide CMS with aggregated data on total numbers of consumers enrolled in QHPs, numbers of consumers ineligible for QHPs, and number of consumers referred to other agencies. See *II. Data Collection Reporting* for additional information.

12. Burden Estimates (Hours & Wages)

CMS estimates that there will be approximately 33 FFM and SPMs and will accommodate adjustments to this number. Wage per hour data for Navigator caseworkers, project leads, and senior level executives are as follows:

Caseworker – GS-9 equivalent	\$20
Mid-Level Project Lead – GS-12 equivalent	\$29
Senior Level Executive – GS-15 equivalent	\$48

33 FFM and Partnership states x 3 grantees	99 Awardees
99 awardees x 4 Navigators on awardee's staff	396 Navigator caseworkers
1 senior level executive per awardee	99 senior level executives
1 mid-level project lead per Navigator awardee	99 mid-level project leads
Total numbers of individuals providing assistance	396 Navigator caseworkers

The total cost to Navigator awardees over a 3 year period, assumes a 26% attrition and turnover rate of the caseworkers in the second and third years⁴, though the total number of these individuals will remain constant (396). The number of Project Leads (99) will remain constant in 2014 and 2015.

I. APPLICATION

This is already captured in SF-424 authority to collect information based on funding opportunity announcement requirements. Therefore, burden hour and cost have not been estimated for this collection and will be included with any future funding opportunity announcements.

II. DATA COLLECTION REPORTING

Data elements enumerated in the CMS-developed progress reporting template will be required from all Navigator awardees. CMS expects awardees to collect information that is relevant to tracking the

⁴ <http://smallbusiness.chron.com/standard-employee-turnover-call-center-industry-36185.html>

operation of the Navigator program.

In addition, the data elements are reflected of the required duties as Navigators pursuant to section 1311(i)(3) and 45 C.F.R. §155.210(e) . Analysis of progress and financial data reporting will enable CMS to ensure that the standards for Navigators are being upheld. Program data also can offer CMS one indication of the effectiveness of FFE Navigator programs, affording opportunities to provide technical assistance and support to Navigator entities and, in extreme cases, inform the need for increased monitoring and possible intervention.

The proposed collection fields are subject to modification based on available technology and informational needs. See appendix B for a crosswalk of changes to the collection fields.

A. Navigator Weekly Progress Report

A. Maintain Expertise in Eligibility, Enrollment, and Program Specifications, and Provide Public Education on Qualified Health Plans (QHPs)

- Number of Navigators who have completed Federal training and any applicable state requirements.
- Number of Navigators who have completed Federal training and are awaiting any applicable state certification.

B. Provide Fair and Impartial Information on Enrollment in QHPs, Tax Credits, and Cost-Sharing Reductions

- Number of first-time appointments for assistance with accessing or enrolling in health coverage.
- Number of follow-up appointments for assistance with accessing or enrolling in health coverage.
- Number of telephone contacts from consumers asking Marketplace or health coverage related questions.
- List of outreach and enrollment events (including expected attendance at the event, actual attendance at the event, number of assisters from the organization at the event, estimated number of consumers with whom Assisters interacted during the event)
- List of marketing/promotion activities (including the estimated number of consumer reached through the marketing/promotional event).

C. Facilitate Enrollment in QHPs

- Number of appointments where consumers sought enrollment assistance from a Navigator with a new qualified health plan (QHP).
- Number of appointments where consumers sought enrollment assistance from a Navigator with renewing a QHP.
- Of the total number appointments where consumers sought enrollment assistance from a Navigator for a QHP:
 - Number of consumers assisted with creating an account.
 - Number of consumers assisted with eligibility determinations.
 - Number of consumers assisted with comparing plans.
 - Number of consumers assisted with selecting and enrolling in a plan.
 - Number of consumers assisted with submitting a change in circumstance.

- Number of consumers assisted with completing an exemption application.
 - Number of consumers referred to another health care program (Medicare, VA/TriCare, community health centers, etc.)
 - Number of consumers assisted who were ineligible for Medicaid or tax credits.
 - Number of consumers assisted who primary language spoken is a language other than English.
- Number of appointments where small business were assisted with Small Business Health Options Program (SHOP).
 - Number of completed shop applications.
 - Number of employees applying for health insurance.
 - Number of dependents applying for health insurance.
- Provide at least one example of a consumer success story.
- List any enrollment challenges from the past week.
- Number of appointments where consumers sought post-enrollment assistance.
- Of those appointments where consumers sought post-enrollment assistance:
 - Number of consumers who sought assistance with eligibility appeals.
 - Number of consumers who sought assistance with filing grievances about an issuer or provider.
 - Number of consumers who sought assistance with using their health coverage.
- Number of consumers deemed eligible by the Marketplace or through the State Medicaid portal for Medicaid or CHIP.

B. Navigator Monthly Progress Report

B. Provide Fair and Impartial Information on Enrollment in QHPs, Tax Credits, and Cost-Sharing Reductions

- Indicate the amount of funding obligated to date.

C. Navigator Quarterly Progress Report

A. Maintain Expertise in Eligibility, Enrollment, and Program Specifications, and Provide Public Education on Qualified Health Plans (QHPs)

- If background checks are required for Navigator staff, indicate how many have been completed.

B. Provide Fair and Impartial Information on Enrollment in QHPs, Tax Credits, and Cost-Sharing Reductions

- Indicate how your organization is monitoring compliance with the conflict of interest standards as set forth in 45 CFR §155.215.

E. Provide Culturally and Linguistically-Appropriate Information to the needs of the population being served by the Exchange (Marketplace), including individuals with limited English Proficiency, and ensure accessibility and usability of Navigator tools and functions for individuals with disabilities in accordance with the Americans with Disabilities Act and section 504 of the Rehabilitation Act.

- Describe how your organization adheres to Culturally and Linguistically Appropriate Services (CLAS) standards. Also, include specific examples of how your organization has addressed consumers' needs related to culturally appropriate services, including services appropriate based on race, ethnicity, age, gender identity, physical ability or limitation, sex, sexual orientation, socioeconomic status, and other factors over the past quarter.
- Describe your organization's plan and/or method for providing translated materials and services to consumers.
- Describe how your organization is ensuring consumer with disabilities have reasonable modifications and accommodations to access Marketplace assistance services.
- List five most common languages, other than English, spoken by consumers assisted.

F. Administrative

- Describe how your organization is overseeing work performed by Navigators.
- Describe how your organization is overseeing work performed by subgrantees/sub-recipients, if applicable.
- Describe how your organization collects, retains, and protects consumers' Personally Identifiable Information (PII).
- Describe what consent forms are collected and how the consent forms are retained.
- Describe how your organizational progress to date aligns with the goals and objectives set forth in the initial grant application and consistent with those outlined in your project narrative.

D. Navigator Annual Progress Report

The data collection for the Annual Progress Report will capture submitted updates from each quarterly report. In efforts to decrease the estimated burden for reporting, CMS will use the same questions from the quarterly reports to serve as a cumulative activity report for the entire grant cycle.

III. BURDEN ESTIMATES FOR ALL PROGRESS REPORTS

Burden Estimates for Navigator Weekly Progress Reports

Total Hours: 43,332 Costs: \$972,972

The cost burden associated with the Weekly Progress Reports will apply to all Navigator awardees. The reports will be prepared by Navigator caseworkers. CMS estimates that each of the 99 grantees awardees (3 grantees x 33 states = 99) will have 4 caseworkers. CMS further assumes that caseworkers will spend approximately two hours each week to provide the required weekly submissions. A mid-level project lead will spend a 1 hour to review the submissions.

Hours: 4 caseworkers x 2 hour x 52 submissions = 416
 Hours for all awardees: 416 hours x 99 awardees = 41,184
 Costs: 41,184 hours x \$20 caseworker wage = \$823,680

Hours: 1 mid-level project lead x 1 hour x 52 submissions = 52
 Hours for all awardees: 52 hours x 99 awardees = 5,148
 Costs: 5,148 hours x \$29 mid-level wage = \$149,292

Burden Estimates for Navigator Monthly Progress Reports

Total Hours: 1,337 Costs: \$28,067

The cost burden associated with the Monthly Progress Reports will apply to all Navigator awardees. Navigator caseworkers will prepare the reports. CMS estimates that each of the 99 grantees awardees (3 grantees x 33 states = 99) will have 4 caseworkers. For the monthly reports, CMS approximates that caseworkers will spend a ¼ hour each week to provide the required monthly submissions. A mid-level project lead will spend a 1/8 hour to review the submissions.

Hours: 4 caseworkers x ¼ hour x 12 submissions = 12
Hours for all awardees: 12 hours x 99 awardees = 1,188
Costs: 1,188 hours x \$20 caseworker wage = \$23,760

Hours: 1 mid-level project lead x 1/8 hour x 12 submissions = 1.5
Hours for all awardees: 1.5 hours x 99 awardees = 148.5
Costs: 148.5 hours x \$29 mid-level wage = \$4,307

Burden Estimates for Navigator Quarterly Progress Reports

Total Hours: 1,733 Costs: \$36,927

The cost burden associated with the Quarterly Progress Reports will apply to all Navigator awardees. There will be four quarterly reports prepared as a result of information logged by Navigator caseworkers. CMS estimates that each of the 99 awardees will require 1 mid-level project lead working ¼ hour to draft and compile a quarterly report of the caseworker’s activities. A senior level executive will take 1/8 hour to review and grant clearance to each quarterly report.

Hours: 4 caseworkers x 1 hour x 4 quarterly submission = 16 hours
16 hours x 99 awardees = 1,584 hours
Costs: 1,584 hours x \$20 caseworker wage = \$31,680

Hours: 1 mid-level project lead x ¼ hour x 4 quarterly submissions = 1 hour
1 hour x 99 awardees = 99 hours
Costs: 99 hours x \$29 mid-level wage = \$2,871

Hours: 1/8 hour of senior level time x 4 quarterly reports = .5 hour
.5 hour x 99 awardees = 49.5 hours
Costs: 49.5 hours x \$48 senior level wage = \$2,376

Burden Estimates for Navigator Annual Progress Report

Total Hours: 111.375 Costs: \$3,465

Reporting requirements for Navigator awardees include the submission of an Annual Progress Report due within 30 days from the end of the 12-month cooperative agreement period. CMS estimates that each awardee will require 1 mid-level project lead working 1 hour to complete their annual report on their activities for the previous year at mid-level wage:

Hours: 1 mid-level project lead x 1 hours = 1 hour
1 hour x 99 awardees = 99 hours
Costs: 99 hours x \$29 mid-level wage = \$2,871

CMS estimates that a senior level executive will take 1/8 hour to review and grant clearance to each annual report.

Hours: 1/8 hour x 99 awardees = 12.375 hours

Costs: 12.375 hours x \$48 senior level wage = \$594

Table 2 – Burden Estimates for Navigator Report Submissions

Deleted 2013 table

2014 Navigator Report Submissions	# of Respondents	Frequency	Responses	Annual Burden Hours	Annual Cost
Weekly Progress Report Submissions	99	52 reports/year	5,148	46,332	\$972,972
Monthly Progress Report Submissions	99	12 reports/year	1,188	1,337	28,067
Quarterly Progress Report Submissions	99	4 reports/year	396	1,733	36,927
Annual Report Submissions	99	1	99	111.375	3,465
2014 Total Navigator Report Submissions				49,512	\$1,041,431

2015 Navigator Report Submissions	# of Respondents	Frequency	Responses	Annual Burden Hours	Annual Cost
Weekly Progress Report Submissions	99	52 reports/year	5,148	46,332	\$972,972
Monthly Progress Report Submissions	99	12 reports/year	1,188	1,337	28,067
Quarterly Progress Report Submissions	99	4 reports/year	396	1,733	36,927
Annual Report Submissions	99	1	99	111.375	3,465
2015 Total Navigator Report				49,512	\$1,041,431

Submissions					
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2016 Navigator Report Submissions	# of Respondents	Frequency	Responses	Annual Burden Hours	Annual Cost
Weekly Progress Report Submissions	99	52 reports/year	5,148	46,332	\$972,972
Monthly Progress Report Submissions	99	12 reports/year	1,188	1,337	28,067
Quarterly Progress Report Submissions	99	4 reports/year	396	1,733	36,927
Annual Report Submissions	99	1	99	111.375	3,465
2016 Total Navigator Report Submissions				49,512	\$1,041,431

	Total Burden Hours	Total Cost
3-Year Hours & Costs for Navigator Reports	148,536	\$3,124,293

13. Capital Costs

The grant announcement indicates that entities or individuals eligible to be Navigators must have expertise in the needs of underserved and vulnerable populations; eligibility and enrollment rules and procedures; the range of QHP options and insurance affordability programs; and privacy and security standards. Therefore, we do not anticipate that programs will need additional capital or startup costs beyond what is covered in awardees grant application.

14. Cost to Federal Government

NAVIGATOR GRANT APPLICATIONS

The review of the applications from FFM and SPM states for Navigator grants will be initially performed by an outside contractor with oversight by federal employees. The contractor will convene a panel of outside experts to evaluate applications and assist in the selection process. The recommendations of the panel of experts will be analyzed by the contractor. The contractor will then submit its recommendations to CMS for review.

A. Application Review by Federal Employees

CMS anticipates that the review of the recommendations of the contractor will include the review of the Navigator cooperative agreement applications of the 99 applications recommended for funding by the contractor, and may include the review of as many as 500 applications before a final selection is made. CMS estimates that each application will require one hour for an initial review by mid-level staff:

Hours: 500 applications x 1 hour (initial review) = 500

Costs: 500 hours x \$29 mid-level wage = \$14,500

Total for Federal Employee Application Review = \$14,500

B. Outside Panel Review

1. Identification of potential reviewers

Two mid-level staff will help to identify a panel of experts with the contractor. Mid-level staff will take about 4 hours to identify potential reviewers. CMS staff is limited to providing non-binding recommendations; the contractor will have ultimate authority in selecting panel members.

Hours: 2 mid-level staff identifying potential reviewers (3 hours each) = 6

Costs: 6 hours x \$29 mid-level wage = \$174

Total for Identification of Potential Reviewers = \$174

2. Participation in the panel review

Outside subject matter experts will participate as panel experts to review applications. In addition, two CMS senior level staff will participate in the panel review to answer questions from the panel of experts. CMS staff will not manage or control the agenda. CMS assumes the review process will take 10 eight-hour days.

Hours: 2 (senior level staff) x 8 hour work days x (10) days = 160

Costs: 160 hours x \$48 senior level wage = \$7,680

Total Hours for Outside Panel Review = 166

Total Cost for Outside Panel Review = \$7,854

C. Follow-up

Some applications will require follow-up telephone calls and other attempts to clarify information or seek additional information. CMS estimates that 75 applications will require follow-up review. Three mid-level CMS staff will require one hour each for follow-up.

Hours: 75 follow-up telephone calls x 3 mid-level CMS x 1 hour = 225

Costs: 225 hours x \$29 mid-level wage = \$6,525

D. Award Announcement and Awardee Notification

Mid-level CMS staff will be devoted to developing rollout materials (factsheets, FAQs, website language, press release, etc.) and follow-up notifications to awardees. CMS assumes that developing rollout materials will take 10 hours. A CMS senior level staff person will take two hours to review these materials. Further, it is anticipated that CMS mid-level staff will provide notification of the award to awardees.

Development of rollout materials:

Hours: 10 hours x 1 mid-level staff + 1 hour x 1 senior level staff = 11 hours
 Costs: 10 hours x \$29 (mid-level wage) = \$290
 1 hours x \$48 (senior level wage) = \$48
Total for Award Announcement: \$338

Awardee notification:

Hours: 99 awardees x .25 hour = 24.75
 Costs: 24.75 hours x \$29 = \$717.75
Total for Awardee Notification: \$717.75

Total Hours for Award Announcement and Awardee Notification: 35.75
Total Cost for Award Announcement and Awardee Notification: \$1,055.75

E. Costs of Review of Quarterly and Annual Reports

Mid-level CMS staff will review quarterly and annual report submissions from Navigator awardees. CMS assumes that it will take 30 minutes to review each quarterly report and ½ hour to review each annual report. CMS further assumes that there will be 99 awardees submitting quarterly and annual Reports.

Hours: 99 Quarterly reports x 4 submissions per budget year x .50 hour = 198
 99 Annual Reports x 1 submission per budget year x .50 hour = 49.5
 Costs: 247.5 hours x \$29 mid-level staff wage = \$7,177.5

CMS estimates it will take Senior Level staff ½ hour to review the aggregate quarterly reports four times per year (for a total of two hours) and one hour to review the aggregate annual report.

Hours: 2 hours for Quarterly Reports + 1 hours for Annual Reports = 3 hours of senior level staff time
 Costs: 3 hours x \$48 senior level staff wage = \$144

Total Hours for Review of Quarterly and Annual Reports = 250.5
Total Cost for Review of Quarterly and Annual Reports = \$7,321.50

Total Cost to Federal Government:

Description	Hours	Costs
Application review	500	\$14,500
Outside panel review	166	7,854
Follow-up	225	6,525
Award announcement and Awardee notification	35.75	1,055.75
Costs of review of quarterly and annual reports	250.5	7,321.50
Total	977.25	\$37,256.25

15. Changes to Burden

CMS has required additional reporting requirements (weekly and monthly) that should result in minimal burden adjustments. The burden adjustments have been modified to accommodate more time for data

collection for the weekly and monthly reporting requirements.

The Navigator Prevention Fund Bi-Annual Report was a one-time data collection during the 2013 grant cycle. The bi-annual reports are no longer being collected and therefore, the associated burden has been removed.

The overall burden has decreased due to a reduction in the number of respondents, from 264 to 99 respondents, to more accurately reflect the number of applications anticipated for review.

16. Publication/Tabulation Dates

At this time, CMS does not expect that the data collected in the weekly, monthly, quarterly, and annual reports will be published or shared with other agencies.

17. Expiration Date

CMS would like an exemption from displaying the expiration dates as these forms are used on a continuing basis. To include an expiration date would result in having to discard a potentially large number of forms.