Application to Use Burden/Hours from Generic PRA Clearance:

Medicaid and CHIP State Plan, Waiver, and Program Submissions

(CMS-10398, OMB 0938-1148)

Information Collection #7: CHIPRA Connecting Kids to Coverage Outreach and Enrollment Grant (Cycle III) Semi-Annual Report Template - Revised

**February 17, 2014**

Center for Medicaid and CHIP Services (CMCS)

Centers for Medicare & Medicaid Services (CMS)

# CMS requests expedited approval of this collection instrument for release upon OMB approval. An expedited approval is needed to minimize the disruption to timely grant reporting.

# A. Background

The Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA)

(Pub. L. 111-3), signed into law by President Obama on February 4, 2009, reauthorized the Children’s Health Insurance Program (CHIP) through federal fiscal year (FFY) 2013.

(The ACA extended CHIP funding through 2015.) In addition to financing health coverage for low-income children, the law contained provisions aimed at reducing the number of children who were eligible for Medicaid or CHIP but are not enrolled and improving retention so that eligible children stay covered for as long as they qualified. To support such efforts, CHIPRA provided a total of $100 million for outreach and enrollment activities, including $80 million for grants to states, local governments, community-based and non-profit organizations and others; $10 million in grant funds exclusively for Indian health care providers and tribal entities; and $10 million devoted to a national outreach and enrollment campaign.

To continue this work, section 10203(d)(2)(E) of the Patient Protection and ACA, enacted on March 23, 2010, provided an additional $40 million in funding for outreach and enrollment activities, available through FFY 2015. These funds were allocated in the same proportion as

the funding available through CHIPRA, with $32 million for grants to states, local governments, community-based and non-profit organizations; $4 million for Indian health care providers

and tribal entities (as noted above, these funds will be made available in a separate FOA to be released in the second quarter of FY14); and $4 million for a national outreach and enrollment campaign.

To date, a total of $122 million in grant funding has been awarded. The first $40 million in grants, entitled CHIPRA Outreach and Enrollment Grants (Cycle I), were awarded in September 2009, to 68 grantees in 42 states. This was followed in April 2010 with awards amounting to $10 million in grants to 41 American Indian/Alaska Native (AI/AN) grantees in 19 states. The second cohort, CHIPRA Outreach and Enrollment Grants (Cycle II), were awarded in August 2011 with another $40 million going to 39 grantees in 23 states.

In July 2013, 41 Connecting Kids to Coverage Outreach and Enrollment Grants (Cycle III), totaling $32 million were awarded in 22 states. Cycle III grants will support outreach strategies similar to those conducted in previous grant cycles, and also will fund activities designed to help families understand new application procedures and health coverage opportunities, including Medicaid, CHIP and insurance affordability programs under the ACA.

The broad goal, for all these outreach and enrollment grants, is to reduce the number of children who are eligible for Medicaid and the Children’s Health Insurance Program (CHIP) but are not enrolled, and to keep them covered for as long as they qualify. Given that the timing of the Cycle III grant awards leads up to and overlaps the implementation of the Affordable Care Act, the projects funded also must help prepare organizations and communities for the significant changes that will occur with respect to the enrollment and renewal process.

Applicants for Cycle III grants were required to design their proposals to address issues in one of five primary focus areas. The focus areas and the number of applications being recommended in each is below:

1. Engaging schools in outreach, enrollment and retention activities (9 awards);
2. Bridging health coverage disparities by reaching out to subgroups of children that exhibit lower-than-average health coverage rates (8 awards);
3. Designing and executing targeted enrollment strategies to streamline health coverage enrollment for individuals participating in other public benefit programs such as SNAP, WIC or other programs (3 awards);
4. Establishing and developing application assistance resources to provide high quality, reliable Medicaid and CHIP enrollment and renewal services in local communities (13 awards); and
5. Conducting training programs to equip communities to help families understand the new application and enrollment system and to deliver effective assistance to families with children eligible for Medicaid or CHIP (8 awards).

**B. Description of Information Collection**

Section 2113(d) of the Social Security Act requires that CMS publish enrollment data and annual reports to Congress on the grant-funded outreach and enrollment efforts. CMS has contracted with an external evaluator to assess, synthesize and report on the success and lessons of the CHPRA grants. In order to conduct the evaluation and meet Congressional requirements, CMS proposes to collect periodically specific data and narrative information from each grantee.

The CHIPRA Cycle III Semi-Annual Report template is attached.

The document is designed to allow grantees to answer the questions in the Microsoft Word document and return it to CMS for review. The attached framework (collection format) is designed to:

* Recognize the diversity of grant project designs and approaches to outreach and enrollment, and allow grantees flexibility to highlight key accomplishments, challenges, and lessons learned of their projects;
* Allow grantees to report on the strategies for outreach and enrollment that were most effective and least effective in enrolling children in Medicaid and CHIP;
* Provide consistency across the grant program in the structure, content, and format of the report;
* Allow for accurate and effective evaluation of the outcomes and strategies of grantees as compared to their proposal and goals

For each Semi-Annual Report, the appropriate reporting period and due dates will be populated in the template where indicated.

All 41 grantees will report on the attached template, questions one through 14. Those grantees that are concentrating on Focus Area 5 (Training Programs) are required to complete questions 15 through 21 of the template.

We are requesting approval of this information collection for reporting in Federal fiscal years 2014 through 2017. We require grantees to complete a Final Report for this grant program. The template for the Final Report will be submitted separately for PRA approval.

# C. Deviations from Generic Request

No deviations are requested.

# D. Burden Hour Deduction

This package revises the CHIPRA Grant Cycle II Semi-Annual Report Template that was approved by OMB on May 1, 2012. Specifically, this package revises the Template (Crosswalk attached) and increases the number of respondents from 39 to 41. The hours per response remains the same.

The total approved burden ceiling of the generic ICR is 86,240 hours, and CMS previously requested to use 45,993 hours, leaving our burden ceiling at 40,247 hours. CMS estimates that each grantee will complete the collection of data and submission to CMS twice a year within 20 hours per submission. There is a potential universe of 2 additional respondents, so the total burden deducted from the total for this request is 80 hours.

# E. Timeline

The CHIPRA Cycle III Semi-Annual Report template is designed to collect reports twice annually for two years. In addition, some grantees may request and receive no-cost extensions of their grants for up to one additional year, and those grants will continue to use this template.

Because grant reporting customarily falls on the end of a fiscal quarter and the grant award did not coincide with a fiscal quarter, the semi-annual reporting periods were adjusted to coincide with the fiscal quarter. The following is the planned reporting periods and report due dates for the two-year budget period of the Cycle III grants.

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| --- | --- | --- |
| Reporting Period | Open Date | Due Date |
| July 15, 2013 to December 31, 2013 | TBD based on PRA approval | TBD based on PRA approval |
| January 1, 2014 to June 30, 2014 | July 1, 2014 | July 30, 2014 |
| July 1, 2014 to December 31, 2014 | January 1, 2015 | January 30, 2015 |
| January 1, 2015 to July 14, 2015 | July 15, 2015 | August 14, 2015 |

The reporting period for the final report will be: July 15, 2013 to July 14, 2015.

Note that the first report is delayed. Grantees currently have no PRA-approved instrument to submit their periodic grant reports, therefore we will be requesting approval of this collection as soon as possible to minimize the disruption to timely grant reporting.

The following attachments are provided for this information collection:

Attachment A – CHIPRA Connecting Kids to Coverage (Cycle III) Outreach and Enrollment Grant (Cycle III) Semi-Annual Report Template