

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 #49 Model Online Eligibility Results: Consumer Testing Interviews

June 10, 2016

Center for Medicaid and CHIP Services (CMCS)
Centers for Medicare & Medicaid Services (CMS)

A. Background

The Centers for Medicare & Medicaid Services (CMS) work in partnership with States to implement Medicaid and the Children's Health Insurance Program (CHIP). Together these programs provide health coverage to millions of Americans. Medicaid and CHIP are based in Federal statute, associated regulations and policy guidance, and the approved State plan documents that serve as a contract between CMS and States about how Medicaid and CHIP will be operated in that State. CMS works collaboratively with States in the ongoing management of programs and policies, and CMS continues to develop implementing guidance and templates for States to use to elect new options available as a result of the Affordable Care Act or to comply with new statutory provisions. CMS also continues to work with States through other methods to further the goals of health reform, including program waivers and demonstrations, and other technical assistance initiatives.

B. Description of Information Collection

Over the last several years, CMS has established standards and issued guidance designed to transition State Medicaid and CHIP programs to automated approaches that reduce agency workload and enable applicants to receive an eligibility determination in real time. A real time eligibility determination is defined by CMS as when "there is no clearly perceivable delay between the submission of a complete and verifiable application and the response to the applicant." This can be found at www.medicaid.gov/affordablecareact/provisions/downloads/real-time-determinations.pdf. As articulated in CMS IT guidance,

We envision a streamlined, secure, and interactive consumer experience that will maximize automation and real time adjudication while protecting privacy and personally identifiable information...Individuals should be able to complete their online application and receive program placement quickly (for example, 15 to 20 minutes).

This information collection request will inform the development of a tool (a model online eligibility results page) that supports State Medicaid Agencies in their effort to effectively communicate with consumers about eligibility results and next steps in the enrollment process in the context of the new streamlined and interactive consumer application experience that CMS expects states to deliver.

Specifically, CMS aims to improve the communication of Medicaid eligibility determinations to consumers who complete online applications with State Medicaid Agencies and to enhance consumers' understanding of how to complete enrollment if their application is transferred to the Federally-Facilitated Marketplace. To support states' efforts in these areas, the Expanding Coverage Learning Collaborative has developed a model online eligibility results page that State Medicaid Agencies can use to inform the design of their own online application systems. This information collection effort will test the model online eligibility results page with up to 48 consumers to:

- Determine if consumers can **read** and **understand** key messages and instructions in the model results page.
- Determine if consumers would **take action** based on key messages and instructions in the model results page.
- Assess consumers' ability to **navigate** the model results page.
- Identify **challenges** or **barriers** that consumers face while using the model results page.
- Understand consumers' **overall impressions** of the model results page.

Testing will be conducted in English only. Target respondents include those with a 12th grade education or lower, ages 18 to 65, who have applied to Medicaid before or who are new Medicaid applicants.

Testing will be completed at two community based organizations (CBOs) - the City of Alexandria Workforce Development Center and the PA CareerLink West Philadelphia. Researchers from the Maximus Center for Health Literacy will conduct the consumer interviews, and they have established working relationships with these two CBOs, having previously used the CBOs for other consumer testing projects. Maximus will train each CBO's staff to recruit participants for this project, drawing from the pool of individuals who already interact with the CBO. Recruitment will occur by phone and on site. CBO staff will use a screener to determine whether potential participants meet the target criteria of being between the ages of 18 and 65, with a 12th grade education or lower, and who have previously applied to Medicaid before or who are new Medicaid applicants. They will also affirm that potential participants are conversant in English.

The product of this information collection effort will be a testing report, delivered to CMS, which will not contain any personally identifiable information. Test results will not be publicly disseminated. Findings from this information collection will inform revisions to the model online eligibility results page, and the revised model results page will be made available to State Medicaid Agencies.

C. Deviations from Generic Request

No deviations are requested.

D. Burden Hour Deduction

The total approved burden ceiling of the generic ICR is 154,104 hours, and CMS previously requested to use 69,879 hours, leaving our burden ceiling at 84,225 hours.

D.1. Wage Estimates

The following cost estimate is based on the current Federal minimum wage of \$7.25/hr.

D.2. Burden Estimates

CMS estimates the model online eligibility results page will be tested with up to 48 total participants – 24 participants in Virginia, with testing occurring at the City of Alexandria Workforce Development Center, and 24 participants in Pennsylvania, with testing occurring at the PA CareerLink West Philadelphia. Each semi-structured interview will be 1.0 hour in length. Since the model online eligibility results page will be tested with 48 consumers, this represents 48 total hours of respondent time.

The cost for a respondent to complete one response is estimated at \$7.25. In aggregate we estimate a cost of \$348.00 (48 hr x \$7.25/hr).

D.3. Information Collection Instruments and Associated Instruction/Guidance Materials

- Model online eligibility results page

This document is the model online eligibility results page that researchers from the Maximus Center for Health Literacy will review with each consumer. The document is an interactive PDF, mimicking the functionality of a website. As participants “click” on the “buttons” they will navigate through the different screens.

- Testing Protocol

This document provides the script that researchers from the Maximus Center for Health Literacy will follow in interviewing each consumer and presents the questions the researchers will ask respondents about specific aspects of the model eligibility results page to test their understanding of the pages, ability to navigate through the pages, inclination to take action based on the messages in the pages, and overall impressions.

E. Timeline

We are seeking approval by July 5, 2016. Our detailed timeline for the project is as follows:

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| • July 5 | OMB approval |
| • July 5-July 15 | Participant recruitment |
| • July 17-July 23 | Consumer testing |
| • July 25-Aug. 5 | Analyze results of consumer testing |
| • Aug. 5- 19 | Update model eligibility results page to incorporate findings from consumer testing |
| • Aug. 22 – Sept. 9 | Develop and present webinar to states presenting model page |
| • Sept. 12 | Contract year concludes |