

Supporting Statement – Part A
Medicaid Eligibility and Enrollment (EE)
Implementation Advanced Planning Document (IAPD) Template
CMS-10536, OCN 0938-New

Background

Title XIX of the Social Security Act and regulations at 42 Code of Federal Regulations (CFR) Part 433, Subpart C make available enhanced Federal financial participation (FFP) to states for the design, development, and implementation of mechanized claims processing and information retrieval systems used in State Medicaid Programs as well as for the ongoing operation of those systems. The Final Rule, CMS-2346-F, published in the Federal Register on April 19, 2011, makes clear that Medicaid eligibility determination systems are included in the definition of mechanized claims processing and information retrieval systems and are therefore eligible for enhanced FFP. This enhanced FFP will allow states to build and maintain Medicaid eligibility determination systems that will provide more efficient, economical, and effective administration of the Medicaid program as well as address the changes to the Medicaid program under the Affordable Care Act.

The Social Security Act and CMS-2346-F provide 90 percent FFP to states for the design, development and implementation of Medicaid eligibility determination systems, and 75 percent FFP for the operation and maintenance of those systems. To receive enhanced FFP for these systems, states must provide further detail on how the proposed system will address the standards and conditions identified in 42 CFR § 433.112(b). States must also receive prior approval from the Centers for Medicare & Medicaid Services (CMS) through the submission of an Advanced Planning Document (APD).

In order to justify a request for enhanced FFP to support Medicaid eligibility determination system costs, states must provide sufficient information and documentation in an APD to CMS for review.

CMS is requesting OMB approval for this information collection via the Paperwork Reduction Act.

A. Justification

1. Need and Legal Basis

In order to assess the appropriateness of states' requests for FFP for expenditures under the Social Security Act related to Medicaid eligibility determination systems, CMS must have sufficient information and documentation. CMS authorized funding for state requests for enhanced FFP for expenditures related to Medicaid eligibility determination systems in the Final Rule, CMS-2346-F, published in the Federal Register on April 19, 2011.

States must request prior approval for this enhanced FFP through submission of an APD.

CMS regulations concerning mechanized claims processing and information retrieval systems, including Medicaid eligibility determination systems, are at 42 CFR § 433, subpart C. A state that chooses to develop, enhance, or replace its required system or subsystems must first submit for approval an APD. The general Health and Human Services (HHS) requirements for approval of APDs are at 45 CFR § 95, subpart F and 42 CFR § 457.230.

CMS is adding the Implementation APD template to reduce the burden on states by clearly indicating the information required for a successful submission.

2. Information Users

In order to assess the appropriateness of states' requests for enhanced FFP for expenditures under the Social Security Act related to Medicaid eligibility determination systems, CMS staff will review the submitted information and documentation in order to make an approval determination for the APD.

3. Use of Information Technology

The forms will be available in electronic format. We expect every submission to be forwarded to our agency using the electronic format. The document is completed in a user friendly format. CMS is working with other components that use the APD process (such as for MMIS and the Medicaid EHR Incentive Program) to develop requirements for a portal solution for States to submit APDs and APD reports.

4. Duplication of Efforts

There is no duplication of effort on information associated with this collection.

5. Small Businesses

This collection does not impact small businesses.

6. Less Frequent Collection

States are only required to provide this information if they are specifically seeking FFP for Medicaid eligibility determination systems. States that are not seeking FFP for this purpose do not need to submit this additional APD documentation. With the exception of the annual update, once any documents are approved, there is no need to resubmit additional documents, unless the state initiates a change. This process is a longstanding process to implement states' Medicaid IT systems and has been used for years.

7. Special Circumstances

There are no special circumstances or impediments. The Implementation APD template will be available in electronic format and will be posted on the CMS Internet website.

8. Federal Register/Outside Consultation

The 60-day Federal Register notice published on August 29, 2014 (79 FR 51571). Comments were received. The comments and our response have been added to this PRA package.

To summarize, we revised the estimated hours for states to complete the IAPD template from 8 hours to 16 hours to better reflect the time and effort involved in gathering information from various data sources, reviewing the instructions in the proposed template, and completing the template itself.

9. Payments/Gifts to Respondents

There are no payments of gifts associated with this collection.

10. Confidentiality

There is no personal identifying information collected in the documents. All the information is available to the public.

11. Sensitive Questions

There are no questions of a sensitive nature associated with these forms.

12. Burden Estimates (Hours & Wages)

CMS estimates that it will take no more than 16 hours for a state to complete and submit the completed Implementation APD template and supporting documentation to CMS, assuming the State chooses to submit all the documents and/or all the documents at once. Updates to the Planning APD and Implementation APD are only necessary if status updates occur. An annual update is required but should take states less time to complete. The potential number of respondents is 56 (50 States, D.C., and 5 territories); we estimate that most states, if not all, will submit at least annually. Once approved, the state will not need to resubmit unless there is a need for revisions. If all states complete and submit the templates once annually with two additional updates per year, CMS estimates the total annual burden would be 2,688 hours.

CMS reviewed the wages from the Bureau of Labor Statistics and estimates that a Business Operations Specialist (occupational code 13-1000) with a mean hourly wage estimate rate of \$33.19 would be completing the data for the template (http://www.bls.gov/oes/current/oes_nat.htm). When accounting for fringe benefits, the hourly wage is adjusted by 35% to \$44.81/hr. At this rate, it will cost approximately \$120,449.28 (or \$44.81/hr. x 2,688 hr).

13. Capital Costs

There are no capital costs.

14. Cost to Federal Government

CMS estimates that the review of the Implementation APD and supporting documentation will be approximately 6 hours assuming all of the documents are submitted simultaneously.

CMS further estimates that one GS-13 Step 1 in the Baltimore area, where CMS Central Office is located, at an hourly rate of \$43.52 (http://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2015/DCB_h.pdf) will be responsible for review and approval of these documents. When accounting for fringe benefits, the hourly wage is adjusted by 35% to \$58.75/hr.

As such, the cost to the Federal Government could be \$19,740 ($\$58.75 \times 6 \text{ hours} \times 56 \text{ States}$ potentially submitting materials).

15. Changes to Burden

Not applicable. This is a new collection.

16. Publication/Tabulation Dates

There are no plans to publish the information for statistical use.

17. Expiration Date

CMS does not oppose the display of the expiration date.

18. Certification Statement

There are no exceptions to the certification statement.

B. Collections of Information Employing Statistical Methods

There are no statistical aspects of the design in this collection.