

Request for Renewal under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0938-1185)

TITLE OF INFORMATION COLLECTION: Evaluation of Stakeholder Training - Health Insurance Marketplace and Market Stabilization Programs

PURPOSE:

The Patient Protection and Affordable Care Act of 2010 (ACA) was enacted to assist millions of Americans in obtaining affordable health care services and to allow more employers to offer insurance coverage to their employees in a cost effective manner. Since the implementation of ACA in 2014, individuals and small businesses have been able to purchase private health insurance through competitive marketplaces called the “Health Insurance Marketplace” (Marketplace), also known as “Affordable Insurance Exchanges” or “Exchanges.” The Centers for Medicare & Medicaid Services (CMS) issued regulations for the establishment and practices of Marketplaces in States, as well as for the market stabilizing programs. The cooperation and coordination of States, health insurance issuers, the Federal Government and other key stakeholders is essential to the continued success of the Marketplace and associated market stabilization programs.

CMS is strongly committed to providing appropriate education and technical outreach to States, issuers, self-insured group health plans and third-party administrators (TPA) participating in the Marketplace and/or market stabilization programs mandated by the ACA. In addition, CMS recognizes that the success of Marketplaces and associated programs relies on the cooperation and coordination of States, issuers, self-insured health plans, third-party administrators (TPA) of self-insured health plans, health insurance agents and brokers, and other stakeholders.

CMS procured the services of a contractor, A. Reddix & Associates (ARDX), to help with its training and technical outreach efforts that support Marketplace and market stabilization program development. With the services of the contractor, CMS provides training and technical assistance primarily through weekly, bi-weekly, monthly, and quarterly webinars, Q&A sessions, and user group series. A web portal (www.REGTAP.info) was developed to support CMS’ training efforts and to provide a centralized location for resource information, training session registration, and technical assistance. ARDX utilizes surveys as part of a comprehensive evaluation process and solicits voluntary feedback from stakeholders regarding training sessions and technical assistance provided under this contract. The Registration for Technical Assistance Portal (REGTAP) invites users to provide general comments regarding the portal.

CMS is requesting renewal of OMB No. 0938-1185 (Expiration Date: 12/31/2015). We are submitting four (4) related packages for simultaneous approval. Personally Identifiable Information will not be collected as a part of any of these instruments. The evaluation instruments include:

- On-site Post-Training Hardcopy Surveys provided to each participant at the end of each day of the onsite event, with an online version for remote participants (a link appearing upon exiting the session and follow-up survey emailed to participants);

- Webinar Post-Training Participant Surveys administered using a polling feature at the end of each session, with a follow-up link appearing upon exiting the session and a second follow-up survey emailed to participants);
- Webinar-based Q&A Post-Training Participant Surveys administered using a polling feature at the end of each session, with a follow-up link appearing upon exiting the session and a second follow-up survey emailed to participants);
- User Group Post-Training Surveys emailed to participants following the sessions in which they participated.

The survey results will help to determine stakeholders' level of satisfaction with trainings, identify any issues with training and technical assistance delivery, clarify stakeholders' needs and preferences, and define best practices for training and technical assistance. ARDX will conduct on-going evaluations and utilize results to continually improve the services provided to stakeholders.

DESCRIPTION OF RESPONDENTS:

Respondents include stakeholders participating in the Health Insurance Marketplace and in the market stabilization programs (e.g., health insurance issuers, self-insured group health plans, third-party administrators, agents, brokers and other entities). The following Stakeholder Training events are planned for the requested OMB Clearance period (January 2016-September 2017): One On-Site, 2-day Training; 199 Webinars; 50 Webinar-based Q&A Sessions; and 35 User Groups.

TYPE OF COLLECTION: (Check one)

- | | |
|---|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> Other: _____ |

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: _____

To assist review, please provide answers to the following question:

INFORMATION NOT RELEASABLE TO THE PUBLIC UNLESS AUTHORIZED BY LAW: This information has not been publicly disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. *Unauthorized disclosure may result in prosecution to the fullest extent of the law*

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? ☐ Yes ☒ No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? ☐ Yes ☐ No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? ☐ Yes ☐ No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? ☐ Yes ☒ No

ANNUAL ESTIMATED BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Total Estimated Burden Hours	Total Estimated Respondent Cost Burden
Private Sector – Health Insurance Marketplace Stakeholders				
Webinar	22,959	15 minutes per respondent	5740 hours	\$170,300.61
Webinar-based Q&A Session	5,740	15 minutes per respondent	1435 hours	\$42,575.15
User Group	3,073	15 minutes per respondent	768 hours	\$22,795.46
On-Site Training (including remote participants)	590	15 minutes per respondent	147 hours	\$4,375.40
Totals	32,362	15 minutes per respondent	8091 hours	\$240,046.62

FEDERAL COST: The estimated annual cost to the Federal government, including but not limited to the data collection activities described in this submission is \$325,000. Included are costs associated with background research, requirements gathering, evaluation design, instrument design and pretest, systems development, data collection activities, analysis, and reporting.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

INFORMATION NOT RELEASABLE TO THE PUBLIC UNLESS AUTHORIZED BY LAW: This information has not been publicly disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. *Unauthorized disclosure may result in prosecution to the fullest extent of the law*

The selection of your targeted respondents

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?
[] Yes [x] No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

All registrants participating in an on-site training, webinar, Q&A session, and/or user group session will be afforded the opportunity to voluntarily participate in the survey.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
[x] Web-based or other forms of Social Media
[] Telephone
[x] In-person
[] Mail
[] Other, Explain
2. Will interviewers or facilitators be used? [] Yes [x] No

Please make sure that all instruments, instructions, and scripts are submitted with the request.