

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

TITLE OF INFORMATION COLLECTION:

User Experience Design Validation for Accessing Public Data Made Available at CMS.gov (CMS-10700)

PURPOSE:

The Centers for Medicare and Medicaid Services (CMS), more specifically the Office of Enterprise Data and Analytics (OEDA), currently releases a wide variety of data on CMS.gov that the public can access for free whenever they would like. The purpose of this study is to better understand the types of people and academic/business entities that are accessing and using OEDA’s publically available data products made available on CMS.gov. With this research we will aim to validate newly designed features, functionality, web pages, and communications artifacts with existing and prospective users to uncover how to best serve user needs. The primary goal of this study is to determine what things we can do to improve the consumer’s ability to find and re-find the data they want with relative ease, and to understand what things can be done to expand the current user base of these data. The results of this study will be used to redesign CMS.gov and supporting communications to better align with user needs.

DESCRIPTION OF RESPONDENTS:

Respondents will represent a range of interests related to healthcare data and be members of the general public or of an organization/business that consumes healthcare data for their work. Expected respondents for this study will be researchers, clinical practice administrators, data analysts, healthcare company personnel, data journalists, state and local agencies, data developers, and interested citizens.

TYPE OF COLLECTION: (Check one)

- | | |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input 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 checked="" type="checkbox"/> Other: Phone interviews |

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: Yadira Sanchez, Director, Data and Analytics Strategy Group

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

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

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
(1) Individuals	70	60 min	70 hr
Totals	70	60 min	70 hr

FEDERAL COST: The estimated annual cost to the Federal Government is \$29,952.30, which is the fully-loaded cost for the selected contractor to develop, perform, analyze and report the findings from this one-time set of telephone interviews.

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

The selection of your targets 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 this universe? Yes No

If the answer is yes, please provide a description of both below (or attach a 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?

Response: We currently have a list of approximately 250 individuals who have volunteered to offer us feedback on the CMS.gov website. This list was obtained by sending out an email blast to one of the current email listservs requesting for volunteers. Additional respondents will be obtained through existing CMS communication channels (i.e., additional existing email listservs)

with members of the public and those who are currently accessing and using CMS public data. Respondents will have an opportunity to volunteer to participate in the study via email.

We plan to stratify respondents based on their specific uses of the publicly available CMS data. Once we have determined the sub-groups of respondents, we will randomly select individuals from each sub-group to interview. This stratification will offer the research team a way to get broad representation of end-users of CMS.gov. We do not intend to use any rigorous statistical methods to analyze our findings.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)

Web-based or other forms of Social Media

Telephone

In-person

Mail

Other, Explain

2. Will interviewers or facilitators be used? Interviewers Yes No; Facilitators Yes No

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

Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”

TITLE OF INFORMATION COLLECTION: Provide the name of the collection that is the subject of the request (e.g., Comment card for soliciting feedback on xxxx)

PURPOSE: Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

DESCRIPTION OF RESPONDENTS: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

TYPE OF COLLECTION: Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

CERTIFICATION: Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

Personally Identifiable Information: Provide answers to the questions. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

BURDEN HOURS:

Category of Respondents: Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected per row.

No. of Respondents: Provide an estimate of the Number of Respondents.

Participation Time: Provide an estimate of the amount of time (in minutes) required for a respondent to participate (e.g., fill out a survey or participate in a focus group).

Burden: Provide the Annual burden hours: Multiply the Number of Respondents and the Participation Time then divide by 60.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

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

The selection of your targets respondents. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument. Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g., for surveys) or facilitators (e.g., for focus groups) used.

Submit all instruments, instructions, and scripts with the request.