

Justification for a Nonsubstantive Change
Quarterly Medicaid and CHIP Budget and Expenditure Reporting for the
Medical Assistance Program, Administration and CHIP
CMS-10529 (OMB 0938-1265)

CMS proposes to add routine non-substantive lines to CMS-21 and CMS-64. The added lines will require minimal action from states. Consequently, we are not revising any of our burden estimates. The attached Crosswalk sets out the specific changes.

The added lines are necessary for the accurate reporting of states' Medicaid Eligibility Quality Control (MEQC) collection and overpayment recoveries within Medicaid and CHIP reporting quality. Currently the collection and overpayment activities are not differentiated within the MBES (Medicaid Budget and Expenditure System) system.

Beginning on January 1, 2019, 42 CFR 431.810 through 431.820, requires that states return MEQC collection and overpayment recovered amounts and report their recoveries. The collection and overpayment amounts should be returned at the federal matching rate from which the questioned payment was originally paid.

States are already knowledgeable of the process of reporting MEQC collections and overpayments. They are aware of where the lines will appear within the MBES system.