

NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 09/12/2022

Department of Health and Human Services
Centers for Medicare & Medicaid Services

FOR CERTIFYING OFFICIAL: Karl Mathias
FOR CLEARANCE OFFICER: Sherrette Funn

In accordance with the Paperwork Reduction Act, OMB has taken action on your request received 08/02/2022

ACTION REQUESTED: Generic IC
IC TITLE: GenIC 22 (Revision): Health Home State Plan Amendment (SPA)
ICR REFERENCE NUMBER: 201908-0938-015
AGENCY ICR TRACKING NUMBER: CMCS
TITLE: Medicaid and CHIP Program (MACPro) (CMS-10434)
LIST OF INFORMATION COLLECTIONS: See next page

OMB ACTION: Approved without change

OMB CONTROL NUMBER: 0938-1188

The agency is required to display the OMB Control Number and inform respondents of its legal significance in accordance with 5 CFR 1320.5(b).

EXPIRATION DATE: 07/31/2023

DISCONTINUE DATE:

BURDEN:	RESPONSES	HOURS	COSTS
Previous	280	96,844	0
New	280	96,844	0
Difference			
Change due to New Statute	0	0	0
Change due to Agency Discretion	0	0	0
Change due to Agency Adjustment	0	0	0
Change due to PRA Violation	0	0	0

TERMS OF CLEARANCE: Terms of the Generic ICR remain in effect.

OMB Authorizing Official: Dominic J. Mancini
Deputy Administrator,
Office Of Information And Regulatory Affairs

List of ICs				
IC Title	Form No.	Form Name	CFR Citation	Hrs/\$/Resp
GenIC #1 (Extension) - Initial Application	CMS-10434 #1, CMS-10434 #1, CMS-10434 #1	Initial Application SPA Admin, Initial Application, Initial Application Combined		476 / 0 / 56
GenIC #2 (Extension) - CHIP State Plan Eligibility	CMS-10434 #2	CHIP State Plan Eligibility		1,568 / 0 / 56
GenIC #3 (Extension) - Alternative Benefit Plans (ABPs)	CMS-10434 #3	ABP		728 / 0 / 56
GenIC #22 (Extension) - Health Home State Plan Amendment (SPA)	CMS-10434 #22	Health Homes		2,400 / 0 / 30
GenIC #47 (Extension) - Health Home Core Sets	CMS-10434 #47	Health Home Core Set		1,200 / 0 / 30
GenIC #15 (Extension) - Medicaid State Plan Eligibility	CMS-10434 #15	Medicaid State Plan Eligibility		1,120 / 0 / 56
GenIC #26 (Extension) - Medicaid Adult and Child Core Set Measures	385-CQM 2018-ADD-CH-PRA-D, 245-QSSI-MACPro-PRA-AdditionalNotes-D, 390-CQM 2018-CCW-CH-PRA-D, 385-CQM 2018-ADD-CH-PRA-D, 429-AQM 2018 ABA-AD PRA-D	CQM 2018 - Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication (ADD-CH) Core Measure PRA Document, AQM, CQM & MIH - Additional Notes PRA document, Contraceptive Care – All Women Ages 15-20 (CCW-CH), CQM 2018 - Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication (ADD-CH) Core Measure PRA Document, AQM 2018 – Adult Body Mass Index Assessment (ABA) Core Measure PRA document		8,960 / 0 / 224
GenIC # 45 (Extension) - Maternal and Infant Health Quality	CMS-10434 #45	Maternal and Infant Health		112 / 0 / 112
GenIC #77 (New): Medicaid Extended Postpartum Coverage and Continuous Eligibility for Children	CMS-10434 #77, CMS-10434 #77, CMS-10434 #77	Continuous Eligibility for Children (reviewable unit screenshots), Home Page and Initial Application Forms, Continuous Eligibility for Pregnant Women and Extended Postpartum Coverage (reviewable unit screenshots)		2,548 / 0 / 56

List of ICs				
IC Title	Form No.	Form Name	CFR Citation	Hrs/\$/Resp
GenIC 22 (Revision): Health Home State Plan Amendment (SPA)	I5A, I2A, I3A, A1 - A5, HH1 - HH9, I1 - I5, and S (misc.), HH6A, HH5A, HH4A, HH3A, HH2A, HH1A, HH8A, I4A, HH7A, HH9A, I3aA	1945A Other Comment, 1945A Submission Summary, 1945A Public Comment, 1945 Health Home SPA Templates, 1945A Health Homes Delivery Systems, 1945A Health Homes Providers, 1945A Health Homes Services, 1945A Geographic Limitations, 1945A Population and Enrollment, 1945A Health Homes Introduction, 1945A Health Homes Monitoring, Quality Measurement, and Evaluation, 1945A Tribal Input, 1945A Health Homes Payment Methodologies, 1945A Health Homes Program Termination, 1945A Public Notice-Process		1,600 / 0 / 20
Total Hours Actually Used for Information Collections Under Currently Approved ICR:				20,712