

NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 09/01/2023

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 07/31/2023

ACTION REQUESTED: Revision of a currently approved collection

IC TITLE:

ICR REFERENCE NUMBER: 202307-0938-010

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: 09/30/2026

DISCONTINUE DATE:

BURDEN:	RESPONSES	HOURS	COSTS
Previous	280	96,844	0
New	716	96,844	0
Difference			
Change due to New Statute	0	0	0
Change due to Agency Discretion	436	0	0
Change due to Agency Adjustment	0	0	0
Change due to PRA Violation	0	0	0

TERMS OF CLEARANCE:

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
2023 Renewal: Extension without change of active collections of information (GenICs #1, #2, #3, #15, #22, #26, #45, #47, and #77)				20,712 / 0 / 696
Total Hours Actually Used for Information Collections Under Currently Approved ICR:				20,712