REINSTATEMENT INVENTORY

CMS-10398, OMB 0938-1148

In this July 2024 iteration we propose to reinstate our burden ceiling without change. Similarly, we also propose to reinstate 49 of the generic collection of information requests that had been active prior to the April 30, 2024, expiration. The associated generic collection of information requirements, burden estimates, and reporting instruments and instructions would be reinstated without change.

As of the April 30, 2024, expiration, we had used 360,281 of the 450,000 hours for the GenICs that are set out in the most recent Notice of Action (see attached NOA, dated April 26, 2024). In this July 2024 iteration, we propose to reinstate all of the previously approved GenICs with the exception of CMS–10398 #72 (Expressions of Interest in the Infant Well-Child Visit Affinity Group) which does not meet the emergency processing criteria. **Consequently, we are removing such burden (145 hours) from this request, resulting in a burden of 360,136 hours (360,281 hr – 145 hr).**

Cost estimates are dependent on our requirements and the respondent’s BLS Occupation Title and wage. Since this information will not be known until upcoming GenICs are developed, our cost estimates will be set out when each GenIC package is submitted to OMB for approval.

Our previously approved burden ceiling of 450,000 hours is unchanged.

A list of the reinstated GenICs follows.

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|  | GenIC Title | CMS ID Number |
|  | Generic Clearance for Medicaid and CHIP State Plan, Waiver, and Program Submissions | CMS-10398 (Reinstates the 450,000 hr burden ceiling) |
|  | CHIP Annual Report Template System (CARTs) | CMS-10398 #1 |
|  | Medicaid Managed Care Data Collection | CMS-10398 #2 |
|  | Medicaid Payment Suspensions | CMS-10398 #5 |
|  | Cycle IV (AI/AN Round II Outreach & Enrollment Grant Final Report Addendum) and Cycle V (Connecting Kids to Coverage Outreach and Enrollment Semi-Annual and Final | CMS-10398 #7 |
|  | Application for Section 1915(b)(4) Waiver - Fee For Service Selective Contracting Program | CMS-10398 #9 |
|  | Section 1115 Demonstration and Waiver Application | CMS-10398 #10 |
|  | MAGI- Based Eligibility Verification Plan | CMS-10398 #11 |
|  | Medicaid Accountability – Nursing Facility, Outpatient Hospital and Inpatient Hospital Upper Payment Limits | CMS-10398 #13 |
|  | Federally-Facilitated Marketplace (FFM) Integration Data Collection Tool | CMS-10398 #16 |
|  | CHIP State Plan Eligibility | CMS-10398 #17 |
|  | FMAP Claiming State Plan Amendment | CMS-10398 #21 |
|  | Medicaid Accountability – UPL ICF/IID, Clinic Services, Medicaid Qualified Practitioner Services and Other Inpatient & Outpatient Facility Providers | CMS-10398 #24 |
|  | MAGI Conversion Plan Part 2 | CMS-10398 #27 |
|  | MMIS APD Template NCCI Coding Initiative | CMS-10398 #28 |
|  | Medicaid Cost Sharing | CMS-10398 #29 |
|  | State Reporting Medicaid Payment Suspension | CMS-10398 #30 |
|  | Statewide HCBS Transition Plans | CMS-10398 #31 |
|  | Provider- Preventable Conditions under 42 CFR 438.6 and 447.26 and Title 2702 Non-Payment Preprint (Attachment 4.19) | CMS-10398 #32 |
|  | Opportunity for families of Disabled Children to Purchase Medicaid Coverage for Such Children (DRA 6062) | CMS-10398 #33 |
|  | Model Application Template and Instructions for State Child Health Plan Under Title XXI of the Social Security Act, State Children's Health Insurance Program | CMS-10398 #34 |
|  | Eligibility and Enrollment Performance Indicators | CMS-10398 #35 |
|  | Managed Care Rate Setting Guidance | CMS-10398 #37 |
|  | Section 223 Demonstration Programs to Improve Community Mental Health Services | CMS-10398 #43 |
|  | 1915(i) State Plan Home and Community Based Services | CMS-10398 #46 |
|  | Section 223 Demonstration Programs to Improve Community Mental Health Services | CMS-10398 #48 |
|  | Community First Choice State Plan | CMS-10398 #50 |
|  | Fast Track Federal Review Process for Section 1115 Medicaid and CHIP Demonstration Extensions | CMS-10398 #51 |
|  | Delivery System and Provider Payment Initiatives Under Medicaid Managed Care Products | CMS-10398 #52 |
|  | Section 1115 Substance Use Disorder (SUD) Demonstration: Guide for Developing Implementation Plan Protocols | CMS-10398 #53 |
|  | Electronic Visit Verification (EVV) Good Faith Effort Exemption Requests | CMS-10398 #54 |
|  | Limit on Federal Financial Participation for Durable Medical Equipment in Medicaid | CMS-10398 #55 |
|  | Section 1115 Demonstration: Budget Neutrality Workbook | CMS-10398 #56 |
|  | Section 1115 Substance Use Disorder (SUD) Demonstration: Monitoring Reports Documents and Templates | CMS-10398 #57 |
|  | Medicaid Section 1115 Eligibility and Coverage Demonstration Implementation Plan and Monitoring Reports Documents and Templates | CMS-10398 #58 |
|  | Medicaid Section 1115 Severe Mental Illness and Children with Serious Emotional Disturbance Demonstrations | CMS-10398 #59 |
|  | Medicaid Disaster Relief for the COVID-19 National Emergency State Plan Amendment Template and Instructions | CMS-10398 #61 |
|  | Data Collection for Section 1003 of the SUPPORT Act | CMS-10398 #62 |
|  | 1932(a) State Plan Amendment Template | CMS-10398 #63 |
|  | Federal Meta-Analysis Support: Section 1115 Substance Use Disorder Demonstrations | CMS-10398 #64 |
|  | Medicaid and CHIP COVID 19 Public Health Emergency Unwinding Reports | CMS-10398 #66 |
|  | Section 1006(b) of the SUPPORT Act: Medicaid Assisted Treatment (MAT) | CMS-10398 #68 |
|  | Reporting Requirements for Additional Funding for Medicaid HCBS During the COVID-19 Emergency | CMS-10398 #69 |
|  | Reporting Requirements for State Planning Grants for Qualifying Community Based Mobile Crisis Intervention Services During the COVID–19 Emergency | CMS-10398 #71 |
|  | Supplemental Payment Reporting under the Consolidated Appropriations Act, 2021 | CMS-10398 #73 |
|  | Coverage of Routine Patient Cost for Items & Services in Qualifying Clinical Trials | CMS-10398 #74 |
|  | ARP 1135 State Plan Amendment | CMS-10398 #75 |
|  | Expressions of Interest in the Improving Maternal Health by Reducing Low-Risk Cesarean Delivery Affinity Group | CMS-10398 #76 |
|  | COVID-19 Risk Corridor Reconciliation Reporting Template | CMS-10398 #79 |
|  | Improving Quality of Care and Outcomes Data for Pregnant Medicaid Beneficiaries and Newborn Infants through Linkage and Evaluation of VR, BC, DC, and TAF | CMS-10398 #81 |