

CMS' Response to Public Comments on CMS-R-74 (OMB 0938-0467)

The information collection for CMS-R-74 (OMB 0938-0467) authorizes states to collect all information needed to determine and redetermine eligibility for Medicaid and CHIP, to verify the income and eligibility information collected on the applicant's application and in the applicant's case file through data matches with the agencies and entities identified in Section 1137 of the Act, and to use the PARIS system in determining eligibility for Medicaid or CHIP. The request for comment published in the [Federal Register](#) on September 8, 2025, and the public comment period closed on November 7, 2025.

We received two comments about the information collection, one from [Promise](#), a company that describes itself as a “public-benefit technology practitioner,” and one from an anonymous submitter. CMS acknowledges the comments and does not recommend any updates to the information collection based on the comments.

Comment 1: The commenter, Promise, recommends CMS require states to: 1) track rates of successful data matches between the state's eligibility and enrollment systems and electronic data sources, establish standards for minimum match rates, keep records of performance metrics, and conduct regular quality checks, 2) permit applicants to edit their applications via web/text/IVR modalities, 3) provide access to applications and other beneficiary-facing interfaces for users with limited English proficiency and disabilities and track usability metrics, 4) adopt privacy and security features to keep beneficiary data secure and ensure use of PHI is minimized in recordkeeping, 5) publish information about their eligibility and enrollment requirements and processes in machine-readable format, 6) attest annually to using the PARIS system and report corrective actions taken as a result, and 7) quantify and report savings from automation of verification functions. The commenter supports continuation of CMS-R-74 and recommends incorporating these recommendations into the ICR's instructions and supporting materials so states can operationalize them consistently.

CMS Response 1: CMS acknowledges the commenter's recommendations meant to improve states' eligibility and enrollment verification processes and individuals' ability to verify and maintain their enrollment in Medicaid and CHIP coverage. However, many of the commenter's recommendations are not required in current statute nor regulations, and at minimum, CMS would need to undertake notice and comment rulemaking before requiring states to take up these enhancements. Some recommendations are part of existing regulatory requirements, such as 42 CFR 435.905(b) and 42 CFR 457.110(a), which require states to provide program information accessibly, timely, and free of cost to applicants and beneficiaries with limited English proficiency and individuals living with disabilities. Since this ICR only updates our estimates of burden on states and individuals to implement existing requirements under the Social Security Act and the Affordable Care Act, CMS is not able to address the commenter's recommendations in this ICR. CMS suggests the commenter submit formal comments at the next appropriate opportunity, such as in response to future rulemaking or RFI.

Comment 2: The anonymous commenter recommends that the Secretary pay any expenses related to states' verification of eligibility "incurred but not reported." The commenter also recommends that states make use of the same payroll information collected by employers for verifying eligibility for Medicaid and CHIP.

CMS Response 2: CMS acknowledges the comment and reminds the commenter that states may claim federal matching funds (up to 90% of state spending) for eligibility and enrollment system changes and ongoing maintenance and operations of existing Medicaid and CHIP eligibility and enrollment systems in order to streamline verifications of eligibility. As well, states currently have flexibility to determine which data sources, including payroll information, that are accessible to the state via electronic data sources to use to verify eligibility.

Action(s) Taken: CMS acknowledges these comments and does not recommend any updates to the information collection based on the comments.