

CMS Response to Public Comments on CMS-10249

Administrative Requirements for Section 6071 of the Deficit Reduction Act

Docket #CMS-2026-2278 | Form CMS-10249

Introductory Paragraph

CMS received one (1) public comment in response to the May 20, 2026 information collection request notice for Form CMS-10249, *"Administrative Requirements for Section 6071 of the Deficit Reduction Act."* The comment was submitted on July 20, 2026, by Andrew Langer, President of the Main Street Foundation, a non-profit, non-partisan 501(c)(3) research and education foundation, through its Center for Regulatory Analysis and Engagement (CRAE). The comment was addressed to Secretary Robert F. Kennedy, Jr. (HHS) and Administrator Mehmet Oz, MD (CMS).

The commenter expressed general support for the Money Follows the Person (MFP) Rebalancing Demonstration and its commitment to individual choice, independence, and community-based care. However, the commenter raised several significant concerns, including: (1) the absence of supporting materials necessary for meaningful public comment; (2) the need for transparent, comparable outcome measures in reporting; (3) the importance of minimizing duplication and unnecessary administrative burden on states; and (4) the need for CMS to justify each reporting requirement with a clear administrative purpose. CMS has carefully reviewed this comment and responds as follows.

Comment 1: Insufficient Supporting Materials for Meaningful Public Comment

Summary:

The commenter asserts that the public docket lacks the materials necessary for meaningful public participation — specifically the supporting statement, proposed instruments, detailed burden calculations, and an analysis identifying changes from the existing approved collection. The commenter notes that the currently approved collection identified 410 annual responses and 5,003 annual burden hours, while the present notice estimates 329 responses and 2,706 hours — a significant reduction — but provides no explanation for these decreases. The commenter argues that without these underlying documents, the public cannot meaningfully assess the collection's necessity, practical utility, clarity, potential duplication, or estimated burden.

CMS Response:

CMS acknowledges the commenter's concern regarding the availability of supporting documentation. Transparency in the information collection process is a priority, and CMS

recognizes the importance of providing sufficient materials to enable informed public participation. CMS will review its practices for publishing supporting documentation in conjunction with information collection request notices to ensure that the public has access to the materials needed to provide substantive input prior to submission to the Office of Management and Budget (OMB).

Action(s) Taken:

CMS followed the required notice-and-comment process under the Paperwork Reduction Act (PRA) by publishing the information collection request notice in the Federal Register and providing the public with a 60-day opportunity to submit comments. CMS has not revised any reporting requirements or instruments as a direct result of this comment. The reduction in annual responses (from 410 to 329) and burden hours (from 5,003 to 2,706) reflects CMS's deliberate effort to reduce administrative burden on participating states while retaining the information necessary to adequately monitor program performance, protect participants, and ensure fiscal accountability under Section 6071 of the Deficit Reduction Act. These reductions were not arbitrary — they resulted from a careful review of reporting requirements to eliminate redundant, low-value, or obsolete data elements. CMS has not revised the burden estimates as a result of this comment; however, CMS will provide additional methodological explanation in the supporting statement submitted to OMB to ensure transparency regarding how these estimates were derived.

Comment 2: Reporting Should Emphasize Transparent, Comparable Outcomes

Summary:

The commenter argues that the MFP reporting system should be designed to measure meaningful program performance rather than administrative activity alone. The commenter recommends that core performance measures address whether transitions occur successfully, services remain continuous, and participants' health and safety are protected. The commenter also calls for reporting on quality of life changes, sustainability of community placements, and rates of avoidable reinstitutionalization. Additionally, the commenter recommends that financial reporting clearly distinguish amounts spent on direct participant services from administrative expenditures, and that definitions, measurement periods, and reporting conventions be standardized to permit reliable cross-state comparisons. Finally, the commenter urges CMS to explain how each major reporting requirement advances a defined administrative purpose tied to Section 6071's statutory objectives.

CMS Response:

CMS agrees that the MFP reporting system should capture meaningful program outcomes, not merely administrative processes. CMS is committed to designing reporting requirements that reflect the statutory objectives of Section 6071 of the Deficit Reduction Act, including successful community transitions, participant protection, and fiscal integrity.

CMS will consider the commenter's recommendations regarding outcome-focused measures, standardized definitions, and financial transparency as it finalizes the revised collection. CMS also acknowledges the importance of balancing standardization with appropriate operational flexibility for states operating different Medicaid systems.

Action(s) Taken:

CMS followed the required notice-and-comment process and has carefully considered the commenter's recommendations regarding outcome-focused reporting. CMS has not revised the reporting instruments as a direct result of this comment at this time. The current reporting framework was designed to balance meaningful program oversight — including tracking successful community transitions, participant health and safety, and fiscal integrity — with a reduced administrative burden on states. CMS's burden reduction decisions were grounded in the principle that reporting obligations should be proportionate to their administrative and programmatic value. Requirements retained in the revised collection bear a clear and demonstrable relationship to Section 6071's statutory objectives. CMS has not revised the burden estimates as a result of this comment, as the existing estimates already reflect a streamlined collection focused on the data most essential to adequate program monitoring.

Comment 3: CMS Should Minimize Duplication and Unnecessary Burden

Summary:

The commenter emphasizes that meaningful accountability does not require collecting every potentially useful data point, and that each reporting requirement consumes administrative resources that could otherwise support participant transitions and program activities. The commenter recommends that CMS: (1) rely on existing Medicaid administrative data and information already submitted through related federal reporting systems; (2) eliminate duplicative requirements across CMS components and contractors; (3) design electronic reporting systems with common definitions, reusable data fields, automated validation, and prepopulated information; (4) ensure interoperability with state systems; and (5) periodically review the continued value of each reporting element, removing requirements that are obsolete, duplicative, or no longer informative.

CMS Response:

CMS appreciates the commenter's focus on administrative efficiency and burden reduction. CMS is committed to minimizing unnecessary reporting burden on participating states while preserving the information necessary for statutory oversight, fiscal accountability, and program evaluation. CMS will review existing reporting requirements for potential overlap with other federal data collections and will explore opportunities to leverage existing Medicaid administrative data. CMS also supports the use of modern electronic reporting systems that reduce manual entry and improve data quality. The

commenter's recommendation for periodic review of reporting elements is consistent with CMS's ongoing program evaluation efforts.

Action(s) Taken:

CMS followed the required notice-and-comment process and has thoroughly reviewed the commenter's recommendations regarding duplication and administrative burden. CMS has not made additional revisions to reporting requirements as a direct result of this comment, as the revised collection already reflects a significant and intentional reduction in burden — from 5,003 to 2,706 annual burden hours — achieved through the elimination of duplicative, obsolete, and low-value reporting elements. These reductions were made with careful consideration to ensure that the information necessary to adequately monitor the MFP program, safeguard participants, and maintain fiscal accountability is preserved. CMS has not revised the burden estimates as a result of this comment. The current estimates represent CMS's considered judgment that the revised collection strikes the appropriate balance between minimizing state administrative burden and retaining the data needed to fulfill CMS's statutory oversight responsibilities under Section 6071 of the Deficit Reduction Act.