

**Request for Approval under the "Generic Clearance for Improving  
Customer Experience: OMB Circular A-11, Section 280  
Implementation"**  
**OMB Control Number: 0938-1382 (CMS-10910)**

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**TITLE OF INFORMATION COLLECTION:** Insure Kids Now Survey

**PURPOSE OF COLLECTION:**

*The CMCS/ Operation Services Group/ Division of Communication and Outreach is updating the current InsureKidsNow.gov survey activity OMB 0190-0008. The IKN PRA package is being revised per OMB and A-11 requirements and subsequently resulted in a transition of the survey contractor from Verint to Qualtrics to align with other CMS website surveys and reduce costs. We are using this juncture to update the current InsureKidsnow.gov survey OMB 0190-0008 to be more succinct, streamlined and easier to gather voluntary user feedback and experiences. The survey is reducing the number of data fields from 29 questions to 7 questions. The survey will continue to assist in continuing to implement the 21st Century Integrated Digital Experience Act (21st Century IDEA). The data will continue to help us understand InsureKidsnow.gov site successes, pain points, and areas for improvement. The updated survey will ask users to voluntarily self-identify their user types for the purpose of better understanding their needs and how we can best improve our services. This combination of data will also provide a better understanding of the user journey on the site.*

*Our approach does not use any statistical methods – no statistical techniques or models have been applied to the data. Since this is a survey, we have added Supporting Statement B to this submission.*

**TYPE OF ACTIVITY:** (Check one)

- ☐ Customer Research (Interview, Focus Groups, Surveys)
- ☒ Customer Feedback Survey
- ☐ Usability Testing of Products or Services

**ACTIVITY DETAILS**

1. If this is a survey, will the results of this survey be reported to Touchpoints as part of quarterly reporting obligations specified in OMB Circular A-11 Section 280?
  - ☐ Yes
  - ☒ No
  - ☐ Not a survey

2. How will you collect the information? (Check all that apply)

- ☒ [ X ] Web-based or other forms of Social Media
- ☐ [ ] Telephone
- ☐ [ ] In-person
- ☐ [ ] Mail
- ☐ [ ] Other, Explain

3. Who will you collect the information from?

*All users who access InsureKidsNow.gov will have the opportunity to provide feedback through this survey. Typically, these individuals self-identify as 'consumers' of health care services or policy professionals who use the extensive data on IKN.gov to support their work. The logic for a survey prompt will require the user to visit at least 2 pages, there is a 'quarantine period' of 7 days to minimize oversampling, and there will be an embedded window appearance and a sampling rate of 25%. No personal information will be requested or collected.*

4. How will you ask a respondent to provide this information?

*Survey questions will mostly be multiple choice however, depending on the respondents' choices, 3 free-text opportunities will be available for expanded feedback.*

5. What will the activity look like?

*This is exclusively an online, web-based survey without any direct supervision or external involvement. If a site user agrees to participate an embedded window will appear to prompt them through the survey.*

6. Please provide your question list.

*See attached.*

7. When will the activity happen?

*This survey will go live September 2024 and will prompt users in accordance with the logic previously submitted.*

8. Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?

☐ [ ] Yes ☒ [ X ] No

If Yes, describe:

**BURDEN HOURS**

We estimate that there are two primary types of respondents, health care 'consumers' and policy professionals.

| Category of Respondent     | No. of Respondents | Participation Time | Burden Hours      |
|----------------------------|--------------------|--------------------|-------------------|
| Beneficiaries              | 50                 | 2 minutes          | 1.6 hours         |
| Grantees, States, Outreach | 50                 | 2 minutes          | 1.6 hours         |
| <b>Total</b>               | <b>100</b>         |                    | <b>3.27 hours</b> |

**CERTIFICATION:**

I certify the following to be true:

1. The collections are voluntary;
2. The collections are low-burden for respondents (based on considerations of total burden hours or burden-hours per respondent) and are low-cost for both the respondents and the Federal Government;
3. The collections are non-controversial;
4. Any collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the near future;
5. Personally identifiable information (PII) is collected only to the extent necessary and is not retained;
6. Information gathered is intended to be used for general service improvement and program management purposes
7. The agency will follow the procedures specified in OMB Circular A-11 Section 280 for the required quarterly reporting to OMB of trust data and experience driver data from surveys.
8. Outside of the quarterly reporting mentioned in the bullet immediately above, if the agency intends to release journey maps, user personas, reports, or other data-related summaries stemming from this collection, the agency must include appropriate caveats around those summaries, noting that conclusions should not be generalized beyond the sample, considering the sample size and response rates. The agency must submit the data summary itself (e.g., the report) and the caveat language mentioned above to OMB before it releases them outside the agency. OMB will engage in a passback process with the agency.

Name and email address of person who developed this survey/focus group/interview:

**Name: Jayne Burleson**

**Email address: Jayne.burleson@cms.hhs.gov**

**All instruments used to collect information must include:**  
**OMB Control No. 0938-1382 (CMS-10910)**  
**Expiration Date: 12/31/2026**