

**Request for Approval under the "Generic Clearance for Improving
Customer Experience: OMB Circular A-11, Section 280
Implementation"
OMB Control Number: 0938-1382 (CMS-10911)**

TITLE OF INFORMATION COLLECTION: Medicaid.gov Static Feedback Survey

PURPOSE OF COLLECTION:

The CMCS/ Operation Services Group/ Division of Communication and Outreach is updating the current Medicaid.gov Static Feedback survey activity OMB 0190-0008. The Medicaid.gov Feedback survey 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 Medicaid.gov Feedback Survey survey OMB 0190-0008 to be more succinct, streamlined and easier to gather voluntary user feedback and experiences. The survey is increasing from 3 questions to 5 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 Medicaid.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)

- ☒ 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 Medicaid.gov will have the opportunity to provide feedback. Typically, these individuals self-identify as 'consumers' of health care services or policy professionals who use the extensive data on Medicaid.gov to support their work. The feedback tab will always be available to leave feedback. 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 a feedback tab on Medicaid.gov without any direct supervision or external involvement. If a site user would like to leave feedback they can click on the tab.

6. Please provide your question list.

See attached.

7. When will the activity happen?

This survey will go live September 2024 and will be available as a clickable tab to leave feedback if desired.

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

☐ Yes ☒ No

If Yes, describe:

BURDEN HOURS

We estimate that there are two primary types of respondents, health care 'consumers' and policy professionals. The respondents and number of respondents are based on FY 2023 historical data of the current feedback tool.

Category of Respondent	No. of Respondents	Participation Time	Burden Hours
Beneficiaries (Consumers)	700	2 minute	23.3
Policy Professionals	600	2minute	20.0
Total	1,300		43.3

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-10911)
Expiration Date: 12/31/2026