

February 27, 2013

Office of Management and Budget, Office of Information and Regulatory Affairs, Attention: CMS Desk Officer 725 17th Street, NW Washington, DC 20503

Subject: Comments on Paperwork Reduction Act Package -- Data Collection to Support Eligibility Determinations for Insurance Affordability Programs and Enrollment through Affordable Insurance Exchanges, Medicaid and Children's Health Insurance Program Agencies (1-25-2013) (CMS-10440)

To Whom it May Concern:

The Maryland Health Benefit Exchange (MHBE) submits this letter of comment on the Paperwork Reduction Act (PRA) package on the streamlined application proposed by the Centers for Medicare and Medicaid Services (CMS) on January 25, 2013. Maryland appreciates the opportunity to provide questions and comments. Maryland expects to have its IT system in production by July for open enrollment beginning October 1, 2013, providing little time for significant changes. Based on this narrow window, several questions and comments arise that we respectfully submit below:

- 1. When does CMS expect to publish a final streamlined application?
- 2. What process will exist by which states may seek permission to use an alternative application and when can final decisions on whether an alternative application is acceptable be expected?
- 3. Even if CMS has not yet finalized its formal policy on alternative applications, can the agency provide some informal guidance on which parts of the application are likely to include items that we can change versus items that we will need to closely adhere to the CMS model? For example, we assume it may be possible to adopt additional Maryland-specific privacy and confidentiality protections. In contrast, it might be problematic for us to change questions about income given that advanced premium tax credits (APTC) are based on highly-specific, Internal Revenue Service (IRS) definitions of who is in a household and what counts as income for federal tax purposes.



It is critical that answers to these specific questions be provided promptly since the answers may determine the feasibility of making changes to the State's enrollment system prior to open enrollment. Even if we receive quick answers, we still are concerned that it may be infeasible to implement all of the necessary changes to our online application by October 1, 2013, depending on the scope and complexity of the necessary changes. As a result, we recommend that HHS consider providing states with up to a year during which they can transition to use of the model HHS application or an approved alternative.

As to specific comments regarding the streamlined application, Maryland appreciates CMS's efforts to provide for a consumer friendly experience. Specifically, the PRA makes it clear that an enrollee will only be asked to answer those questions which are relevant to his or her unique situation. However, Maryland recommends additional language testing to ensure that the application continues to meet Plain Language requirements and cultural competencies. In addition, structuring the application into sections, capturing information on a particular subject for all household members in one section, would help to decrease the time it would take to complete the application process.

Finally, the PRA indicates that help text will be forthcoming. Due to the immediacy of open enrollment this places us in a difficult position. Maryland needs to make sure that the help text is comprehensible for the State's uninsured population, including potential Medicaid and Children's Health Insurance Program (CHIP) beneficiaries. It is difficult to fully evaluate the model application without the accompanying help text, which in many instances will determine whether questions and instructions make sense to people. The failure to provide this component of the model application material and to provide states and others with enough time to review it may result in a poor experience for consumers. A consumer experience negatively impacted by confusion may lead to increased call volumes through our call center, demands on navigators and assisters, and inquiries from insurance producers and others providing consumer assistance for Maryland residents and small businesses.

Maryland cannot stress enough the importance of CMS providing an immediate response to the questions presented. The answers will provide us and our vendors with essential information necessary to make policy, training and technical decisions necessary for open enrollment beginning on October 1, 2013. Again, we thank you for the opportunity to comment at this time. Please contact Frank Kolb, Director of Policy at the MHBE, at frank.kolb@maryland.gov should you have any questions.

Sincerely,

Rebecca Pearce.

Executive Director, MHBE