



241 18th Street S
Suite 403
Arlington, VA 22202
202-898-2578
advancingstates.org

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July 19, 2021

William N. Parham, III
Director, Paperwork Reduction Staff
Office of Strategic Operations and Regulatory Affairs.
Centers for Medicare and Medicaid Services
Division of Regulations Development, Room C4-26-05
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Attention: Document Identifier/OMB Control Number: CMS-P-0015A

Dear Director Parham:

On behalf of ADvancing States, I am writing to submit comments on the proposed changes to CMS-372(S) reports. ADvancing States is a nonpartisan association of state government agencies that represents the nation's 56 state and territorial agencies on aging and disabilities. We work to support visionary state leadership, the advancement of state systems innovation, and the development of national policies that support home and community-based services for older adults and persons with disabilities. Our members administer a wide range of services and supports for older adults and people with disabilities, including overseeing Medicaid HCBS waivers that are subject to the 372 reporting requirements in many states. Together with our members, we work to design, improve, and sustain state systems delivering long-term services and supports for people who are older or have a disability and for their caregivers.

We are writing to express our concern about these proposed changes and to request that any changes to the reports be delayed until discussions with the states can be completed. Notably, we have three specific issues that warrant further attention before any changes to the 372 reports are implemented. These include:

- 1) The burden placed on state agencies;
- 2) The ongoing work on reforming Medicaid HCBS waiver quality reporting; and
- 3) The timing of the proposed changes.

Below, we address each of these issues in greater detail.

Burden Estimates for State Agencies

In the supporting documentation, CMS estimates that “changes to the online 372 reporting tool will be less of a burden for the states and CMS.” We do agree that some of the changes made to this system – most notably the auto-population of certain fields and the automatic calculation of compliance rates and deficiencies – will result in efficiencies and reduce the time required to submit 372 forms. However, the overall process changes are likely to increase burden on state agencies in aggregate. This is due to the new requirement for annual reporting on all measures, including those without deficiencies.

States will need to make changes to data systems and staff workloads, as well as amend contracts that may be in place to assist with information collection, aggregation, and analysis in order to do annual reporting to CMS. We do not believe that all these changes will be immaterial and will require both time and resources for many states to come into compliance with the changes if they are implemented as proposed. Moreover, as noted below, we are concerned that CMS is already requesting annual information from states prior to reviewing comments on this proposal.

Medicaid HCBS Waiver Quality Workgroup

Advancing States and several of our members are involved in an ongoing workgroup that is evaluating the quality improvement system (QIS) for the 1915(c) waivers. While no changes have been made or agreed upon, successful workgroup outcomes would include modifications to the waiver subassurances as well as to the accompanying measure calculations. Such changes would necessitate further changes to the 372 form and would, hopefully, have the effect of reducing state burden while shifting focus to reporting that is better suited to measuring participant outcomes and overall well-being.

We question why CMS is pursuing the proposed changes to the 372 forms at this time when this work remains ongoing. Such changes raise concerns about whether CMS’ understanding of the intent of the workgroup is the same as ours. We do not believe that making changes to 372s now is constructive, or frankly appropriate, if we are seeking to make additional modifications soon.

Timing of Changes

We have received reports from several of our state members that CMS has begun requesting that 372 reports be submitted in the new format outlined by this Paperwork Reduction Act notice. As we discussed earlier, making these changes in such a short timeframe is not feasible. Further, we are concerned that the changes appear to be moving forward before CMS has a chance to review the comments – such as these expressing concern – that will be submitted on the notice.

Due to all these issues, we respectfully request that any changes to the 372 reports be postponed until such time as the quality workgroup completes its work. We further request, once changes to the reports are made, that CMS allow ample lead time for states to make the necessary modifications to their systems and contracts before requiring that information be submitted in the new format. We appreciate being able



to provide feedback on this important topic and look forward to working with CMS to ensure that the 372 reporting requirements are modified in a way that is manageable to states and is also meaningful for outcomes and participants. We appreciate the ongoing partnership with CMS and are excited to collaborate regarding these changes in the future. If you have any questions regarding this letter, please feel free to contact Damon Terzaghi at dterzaghi@advancingstates.org or 202-898-2578.

Sincerely,

A handwritten signature in blue ink that reads "Martha Roherty".

Martha Roherty
Executive Director
ADvancing States

Cc: Alissa Deboy, Director, Disabled and Elderly Health Programs Group (DEHPG)
Melissa Harris, Deputy Director, DEHPG
Ralph Lollar, Director, Division of Long-term Services and Supports, DEHPG