THE GEORGE WASHINGTON UNIVERSITY

WASHINGTON, DC

November 25, 2022

OIRA Desk Officer for CMS
Office of Information and Regulatory Affairs
Office of Management and Budget
Washington, DC

Re: Hospital Wage Index Occupational Mix Survey (CMS-10079) (OMB Control No. 0938-0907)

Dear OIRA Desk Officer,

I am pleased to submit this response to the Centers for Medicare and Medicaid Services' invitation for comments to OMB on its information collection request (ICR) regarding the Hospital Wage Index Occupational Mix Survey (CMS-10079) (OMB Control No. 0938-0907), as published in the *Federal Register* on October 25, 2022 (87 FR 64486). My comments are informed by my current efforts as:

- Research Professor, George Washington Institute of Public Policy, George Washington University (GW)
- Co-Principal Investigator, Jobs and Employment Data Exchange-Research Enrichment Project (JEDx-REP), conducted on behalf of the U.S. Chamber of Commerce Foundation (Chamber Foundation)
- Representative of research organizations, <u>Workforce Information Advisory Council</u> (WIAC), U.S. Department of Labor
- Board Member, <u>Industry Studies Association</u> and chair of its Industrial Policy Committee.

I write to recommend that OMB approve the CMS ICR for the Hospital Wage Index Occupational Mix Survey with the term of clearance that CMS identify, and report findings to OMB in nine months on, the potential benefits of collecting the requested information through employer administrative record repositories under development by the Chamber Foundation's Jobs and Employment Data Exchange (JEDx) in lieu of the current survey. JEDx is guided by the JEDx Partnership, which includes representatives of the U.S. Department of Commerce and U.S. Department of Education. JEDx is about to enter a pilot phase with State Partners California, Texas, Florida, New Jersey, Colorado, Arkansas, and Kentucky. Kerrie Leslie, Senior Statistician in OIRA monitors the JEDx effort as an observer.

In the near term, JEDx aims to have state government unemployment insurance (UI) systems agree to a set of nationwide data standards for UI employment wage records that would, through the creation of employer administrative record trusts, enable a **substantial reduction in respondent burden** for employers required to provide occupation and wage information to federal and state regulatory and statistical agencies, such as CMS, EEOC, and state labor

departments. For reference, JEDx has created an <u>employment and earnings records data</u> <u>dictionary</u> that includes the data elements currently required by 29 federal and two state information collections and is in the process of identifying those data elements that would lead to the largest reduction in employer respondent burden.

As indicated in the Occupational Mix Survey supporting statement, CMS estimates that each of 3,200 hospitals invests 480 hours (60 working days) in completing the survey—at a cost an average of \$34,000 per hospital or \$109 million nationwide. In concept, JEDx has the potential to largely eliminate this substantial burden.

In addition, it appears that JEDx has the potential to improve the quality of occupational data used to set Medicare rates in facilities other than hospitals, which could lead to more appropriate rates, to the benefit of those facilities, CMS, and patients. At present, CMS repurposes the Hospital Wage Index based on data collected from acute care hospitals to set wage indices for other types of facilities, including skilled nursing facilities, inpatient psychiatric facilities, long-term care hospitals, and hospices. CMS does so because it finds the cost of conducting occupational mix surveys in such facilities to be prohibitive. In concept, JEDx should allow CMS to create customized wage indices for each type of facility with minimal respondent burden.

I appreciate the opportunity to provide comments on the Hospital Wage Index Occupational Mix Survey, hope OMB finds them of value, and look forward to OMB's decision.

Sincerely,

Andrew Reamer Research Professor

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