



June 10, 2014

Martique Jones  
Deputy Director  
Regulations Development Group  
Office of Strategic Operations and Regulatory Affairs  
Centers for Medicare & Medicaid Services  
Division B, Office of Strategic Operations  
and Regulatory Affairs  
Room C4-26-05  
7500 Security Boulevard  
Baltimore, MD 21244-1850

RE: CMS-10463: Cooperative Agreement To Support navigators in Federally-Facilitated and State Partnership Exchanges  
CMS-10521: Improving Quality of Care in Medicaid and CHIP through Increased Access to Preventive Services, State Survey  
Proposed Reporting Requirements

Dear Ms. Jones:

Advanced Patient Advocacy, LLC as a Navigator grantee in the States of Florida, Kansas, Virginia and West Virginia is pleased to provide the Centers of Medicare and Medicaid Services (CMS) with comments on the proposed reporting requirement CMS-10463 and CMS-10521.

For nearly fourteen years, APA has partnered with healthcare providers along with state and local governments to provide critical enrollment, disability, liability and most recently navigation programs to a diverse array of communities. With a passion for Advocacy, our staff is dedicated to providing innovative programs that improve the quality of life of the individuals we serve.

APA currently has relationships with healthcare organizations and state agencies covering 21 states. We have mastered the ability to implement cost effective enrollment, disability, liability and navigation solutions resulting in nearly 3M individuals assisted. Our primary target population continues to be one of the most vulnerable. We have provided these individuals access to health care services, as well as protection against the financial risks associated with serious illness or injury, by enabling them to obtain and maintain health care coverage. We are proud of our continued collaboration with existing healthcare relationships and are making a significant impact by reducing the number of individuals and families without health coverage.

Please find our specific comments and recommendations on those areas of the reporting requirements noted below.

**CMS-10463 Cooperative Agreement to Support Navigators in Federally Facilitated and State Partnership Exchanges**  
**CMS-10521 Improving Quality of Care in Medicaid and CHIP through Increased Access to Preventive Services, State Survey**

*(1) The Necessity and utility of the proposed information collection for the proper performance of the agency's functions*

Advanced Patient Advocacy supports the proposed changes in the frequency of data collection reporting requirements to provide more detailed feedback to CMS leadership on the effectiveness of the program. However, Advanced Patient Advocacy is requesting clarification on the following proposed metrics:

- *Number of direct contacts with consumers* – Advanced Patient Advocacy is requesting clarification on whether or not this metric applies to only outreach events, or applies to outreach events and consumer appointments.
- *Number of telephone contacts* – Advanced Patient Advocacy is requesting clarification on CMS' definition of 'general inquiries'. For example, consumers have called our office requesting general information regarding the Marketplace, but are not seeking answers to specific questions.
- *Provide a list of upcoming outreach/enrollment events* – Advanced Patient Advocacy is requesting clarification on what constitutes a 'significant variance' in event attendance.
- *Number of Full-Time Equivalents (FTEs) serving as Navigators* – Advanced Patient Advocacy is requesting clarification on how the organization should count FTEs that only serve as Navigators at outreach/enrollment events; thus making their hours worked in a Navigator capacity less than 20 hours per week.

*(2) The Accuracy of the estimated burden*

Advanced Patient Advocacy supports the calculation methods used by CMS to estimate cost burdens for preparing and submitting weekly, monthly, quarterly, and annual progress reports.

*(3) Ways to enhance the quality, utility, and clarity of the information to be collected*

Advanced Patient Advocacy supports the need for quality, utility, and clarity in the information being collected from Navigator awardees, and recognizes CMS's effort to ensure the Navigator programs effectiveness by instituting more detailed reporting requirements.

*(4) The use of automated collection techniques or other forms of information technology to minimize the information collection burden*

Advanced Patient Advocacy supports the usage of information technology resources to minimize the information collection burden.

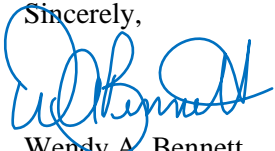
For example, Advanced Patient Advocacy uses proprietary software, commercially available software and programs to enable ease of reporting to CMS on the various data collection requirements including Navigator specific databases that would include their dates of training, certification and other pertinent data.

By using all available information technology resources applicable to the various reporting requirements of the grant the reporting burden is dramatically diminished.

### **Conclusion**

On behalf of our organization; thank you for the opportunity to comment on these proposed reporting requirements. We fully support any legislation that further protects the integrity of the Federal Navigation program and participants. If you have any questions, please do not hesitate to contact me at (603) 617-2423 or wbennett@apallc.com.

Sincerely,



Wendy A. Bennett  
Principal & President