

Supporting Statement Part A  
Annual Early and Periodic Screening, Diagnostic and  
Treatment (EPSDT) Participation Report  
CMS-416, OMB 0938-0354

*Note: The title of our currently approved collection of information request is, “Annual Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Participation Report and Supporting Statutory Language Contained in 1902(a)(43)(D) of the Social Security Act.” In this 2023 iteration we propose to shorten the title as indicated above.*

## **Background**

Section 1902(a)(43)(D) of the Social Security Act (the Act) requires States to report annually by age group and basis of Medicaid eligibility for medical assistance, information relating to Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services provided under the State plan. The Centers for Medicare & Medicaid Services (CMS) is responsible for administering the EPSDT benefit, in partnership with states, and uses the annual reports to evaluate the benefit’s effectiveness in meeting the health care needs of Medicaid eligible children. The report also is used to provide data to the Congress and the public on the use of health care services by children enrolled in Medicaid.

This 2023 collection of information request is an Extension that adjusts our cost estimates based on updated wage data. We are also proposing nonsubstantive changes to our instruction instrument that consists of updating the dates within the fiscal year (see the attached Crosswalk for details). Otherwise, there are no changes to any of our currently approved (active) requirements, burden estimates, and reporting instruments. See section 15 of this Supporting Statement for details.

### **A. Justification**

#### **1. Need and Legal Basis**

The authority for requiring states to submit the annual EPSDT report is section 1902(a)(43)(D) of the Act. The report is submitted to CMS on Form CMS-416 (attached). CMS then makes publicly available the compiled state and national data. The data are used to assess the effectiveness of state Medicaid programs in reaching EPSDT eligible children, including the provision of required dental services to eligible children.

#### **2. Information Users**

States submit Form CMS-416 to CMS’ Center for Medicaid and CHIP Services (CMCS). The data collected are used to assess the effectiveness of state Medicaid programs in reaching EPSDT eligible children, by age group and basis of Medicaid eligibility, who are provided initial and periodic child health screening services, referred for corrective treatment, and receiving dental, and lead screening services.

3. Information Technology

CMS developed a uniform electronic form by which states must report the required data. All states and territories use a Medicaid Management Information Systems (MMIS) from which the data are extracted, based on programming according to the CMS-416 instructions. The state extracts the data and inputs it into the electronic CMS form, and then submits the report via email to the CMS EPSDT Technical Assistance mailbox.

The Form provides states with the option of allowing CMS to calculate EPSDT data on their behalf using information they submit to CMS via T-MSIS, provided that the quality of the state's T-MSIS data meets internal data quality standards. All states are required to submit T-MSIS data to CMS on a monthly basis.

4. Duplicate Information

CMCS is the only CMS component collecting EPSDT data. Therefore, there is no duplication.

5. Small Business

Respondents are limited to States. In that regard this collection of information request does not involve small businesses or other small entities.

6. Less Frequent Collection

Section 1902(a)(43)(D) of the Act requires the annual reporting by states of the EPSDT data. Less frequent collection does not provide adequate/current data necessary for response to Congressional and public inquiries. States that do not provide Form CMS-416 by the annual deadline are considered out of compliance with the authorizing statute.

7. Special Circumstances

There are no special circumstances that would require an information collection to be conducted in a manner that requires respondents to:

- Report information to the agency more often than quarterly;
- Prepare a written response to a collection of information in fewer than 30 days after receipt of it;
- Submit more than an original and two copies of any document;
- Retain records, other than health, medical, government contract, grant-in-aid, or tax records for more than three years;
- Collect data in connection with a statistical survey that is not designed to produce valid and reliable results that can be generalized to the universe of study;
- Use a statistical data classification that has not been reviewed and approved by OMB;
- Include a pledge of confidentiality that is not supported by authority established in statute or regulation that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible

- confidential use; or
- Submit proprietary trade secret, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.

8. Federal Register/Outside Consultations

The 60-day notice published in the Federal Register on March 10, 2023 (88 FR 15035). Comments must be received by May 9, 2023.

9. Payments or Gifts

There is no provision for any payment or gift to respondents associated with this reporting requirement.

10. Confidentiality

Because no personal identifying information is collected in the report, there is no issue of confidentiality with respect to the data submitted by the state. The data collected on the report is available for public review.

11. Sensitive Questions

There are no sensitive questions associated with this collection. Specifically, the collection does not solicit questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private.

12. Respondent Requirements and Burden Estimates

*12.1 Wage Estimates*

To derive average costs, we used data from the U.S. Bureau of Labor Statistics' May 2021 National Occupational Employment and Wage Estimates for all salary estimates ([http://www.bls.gov/oes/current/oes\\_nat.htm](http://www.bls.gov/oes/current/oes_nat.htm)). In this regard, the following table presents BLS' mean hourly wage, our estimated cost of fringe benefits and other indirect costs (calculated at 100 percent of salary), and our adjusted hourly wage.

Occupation Title	Occupation Code	Mean Hourly Wage (\$/hr)	Fringe Benefits and Other Indirect Costs (\$/hr)	Adjusted Hourly Wage (\$/hr)
Computer and Information Analysts	15-1210	50.40	50.40	100.80

We are adjusting our employee hourly wage estimates by a factor of 100 percent. This is necessarily

a rough adjustment, both because fringe benefits and other indirect costs vary significantly from employer to employer, and because methods of estimating these costs vary widely from study to study. Nonetheless, we believe that doubling the hourly wage to estimate total cost is a reasonably accurate estimation method.

## 12.2 Burden Estimates

CMS receives Form CMS-416 submissions annually from 56 state entities. States who are current on their T-MSIS data submissions and whose T-MSIS data meet internal data quality standards are eligible for this option. It is estimated that approximately 31 state entities will choose to complete and submit the Form CMS-416 themselves and that approximately 25 state entities will choose to have CMS generate the form. This estimate is based on the number of states who are expected to meet the internal T-MSIS data quality standards.

Burden for states that complete the Form CMS-416:

- Reporting

**604.5 hours** = 31 State entities x 1 report annually x 19.5 hours

\$60,934 per year = \$100.80/hr x 604.5 hours

**\$15,234** = Adjusted cost, 25% of the total cost to account for the state portion of the costs

- Recordkeeping

**294.5 hours** = 31 State entities x 1 report annually x 9.5 hours

\$29,686 per year = \$100.80/hr x 294.5 hours

**\$7,422** = Adjusted cost, 25% of the total cost to account for the state portion of the costs

Requirement	Respondents	Total Responses	Time per Response (hours)	Total Annual Time (hours)	Labor Cost (\$/hr)	Adjusted Cost (\$)
CMS-416 (Reporting)	31	31	19.5	604.5	100.80	15,234
CMS-416 (Recordkeeping)			9.5	294.5		7,422
<b>Total</b>	<b>31</b>	<b>31</b>	<b>varies</b>	<b>899</b>	<b>100.80</b>	<b>22,656</b>

Burden for states that opt to have CMS generate the Form CMS-416:

- Reporting

**375 hours** = 25 State entities x 1 report annually x 15 hours

\$37,800 per year = \$100.80/hr x 375 hours

**\$9,450** = Adjusted cost, 25% of the total cost to account for the state portion of the costs

- Recordkeeping

**237.5 hours** = 25 State entities x 1 report annually x 9.5 hours

\$23,940 per year = \$100.80/hr x 237.5 hours

**\$5,985** = Adjusted costs, 25% of the total cost to account for the state portion of the costs

Requirement	Respondents	Total Responses	Time per Response (hours)	Total Annual Time(hours)	Labor Cost (\$/hr)	Adjusted Cost (\$)
CMS-416 (Reporting)	25	25	15	375	100.80	9,450
CMS-416 (Recordkeeping)			9.5	237.5		5,985
<b>Total</b>	<b>25</b>	<b>25</b>	<b>varies</b>	<b>612.5</b>	100.80	<b>15,435</b>

### 12.3. Summary of Annual Burden Estimates

Requirement	Respondents	Total Responses	Time per Response (hours)	Total Annual Time (hours)	Labor Cost (\$/hr)	Adjusted Cost (\$)
States that complete the Form CMS-416	31	31	19.5	604.5	100.80	15,234
States that opt to have CMS generate the Form CMS-416	25	25	15	375	100.80	9,460
<i>Subtotal: Reporting</i>	<i>56</i>	<i>56</i>	<i>34.5</i>	<i>979.5</i>	<i>100.80</i>	<i>24,694</i>
States that complete the Form CMS-416	31	31	9.5	294.5	100.80	7,422
States that opt to have CMS generate the Form CMS-416	25	25	9.5	237.5	100.80	5,985
<i>Subtotal: Recordkeeping</i>	<i>56</i>	<i>56</i>	<i>19</i>	<i>532</i>	<i>100.80</i>	<i>13,407</i>
<b>TOTAL</b>	<b>56</b>	<b>56</b>	<b>varies</b>	<b>1,512</b>	<b>100.80/hr</b>	<b>38,101</b>

### 12.4. Information Collection Instruments and Supporting Documents

- Form CMS-416, “Annual EPSDT Participation Report.” (No Change)

States submit the Form CMS-416 to CMS’ Center for Medicaid and CHIP Services (CMCS). The data are used to assess the effectiveness of state Medicaid programs in reaching EPSDT eligible children, by age group and basis of Medicaid eligibility, who are provided initial and

periodic child health screening services; referred for corrective treatment; and receiving dental and lead screening services.

- Form CMS-416, “Instructions for Completing Form CMS-416: Annual Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Participation Report.” (No Change)

Section 2700.4 of the State Medicaid Manual (SMM) contains the CMS-416 form as well as instructions for completing the form.

### 13. Capital Costs

There are no start-up costs associated with this information collection because the Medicaid EPSDT benefit has been in existence since 1967.

All states use the Medicaid Management Information System to capture claims data, from which CMS-416 data can be derived. However, CMS does not mandate state data system types or data collection methodologies. Some states may use a different data system and/or a hybrid approach of claims data and managed care encounter data to collect the CMS-416 data. Therefore, it is necessary to estimate a range of operating and maintenance costs for EPSDT data. These costs are estimated in a range of \$3,000 to \$15,000 annually.

### 14. Federal Costs

The annualized cost to the Federal Government when the state generates the CMS Form-416 is \$90,049 (\$69,326 + \$20,723) which is computed as follows:

75 percent (Federal share) of the states’ total costs	$\$69,326 = \$92,435 \times 0.75$
Data entry, analysis, and inquiry responses (GS-13/8)	$\$20,723 = \$138,150 \times 0.15 \text{ FTE}$

The annualized cost to the Federal Government when CMS generates the CMS Form-416 is \$74,864 (\$47,234 + \$27,630) which is computed as follows:

75 percent (Federal share) of the states’ total costs	$\$47,234 = \$62,978 \times 0.75$
Data entry, analysis, and inquiry responses (GS-13/8)	$\$27,630 = \$138,150 \times 0.2 \text{ FTE}$

*Note: \$138,150 @ GS-13 step 8 for the Washington-Baltimore-Arlington locality (effective January 2023). See <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2023/DCB.pdf>.*

The total annualized cost to the Federal Government is \$164,913 (\$90,049 + \$74,864).

### 15. Burden/Program Changes

This 2023 collection of information request is an Extension that adjusts our cost estimates based on updated BLS wage data.

Our active collection of information uses BLS' May 2018 estimate of \$45.67/hr (adjusted to \$91.34/hr) while this 2023 iteration uses BLS' May 2021 estimate of \$50.40/hr (adjusted to \$100.80/hr), a difference of plus \$9.47/hr. Overall, the adjustment increases our total cost estimate by plus \$3,587 (from \$34,514 to \$38,101)

We are also proposing nonsubstantive changes to our instruction instrument that consists of updating the dates within the fiscal year (see the attached Crosswalk for details).

Otherwise, there are no changes to any of our currently approved (active) requirements, burden estimates, and reporting instruments.

16. Publication and Tabulation Data

Data from state submissions of the form may be posted on the CMS website, Medicaid.gov. Some of the data may be published in tables and charts to show reporting progress across FFYs.

17. Display of Expiration Date

The CMS-416 form and instruction display the expiration date.

18. Exception to Certification Statement

Not applicable. There are no exceptions.

**B. Collections of Information Employing Statistical Methods**

CMS does not intend to collect information employing statistical methods.