

was determined that response rates were too low when tested on the PACE population. Further, 43% of the MSHO community enrollees and approximately 89% of the MnDHO community enrollees are frail and Nursing Home Certifiable (NHC).

2. The State of Minnesota became very concerned about using the HOS due to the above findings by CMS, and preferred using the PHS for their beneficiaries who are more similar to beneficiaries in PACE.

3. MSHO/MnDHO health plans must comply with the same PACE PHS survey timelines to assure that the new risk adjustment payment approach will be implemented January 2004.

CMS is requesting OMB review and approval of this collection by June 16, 2003, with a 180-day approval period. Written comments and recommendations will be accepted from the public if received by the individuals designated below by June 9, 2003. During this 180-day period, we will publish a separate **Federal Register** notice announcing the initiation of an extensive 60-day agency review and public comment period on these requirements. We will submit the requirements for OMB review and an extension of this emergency approval.

*Type of Information Collection Request:* New collection; *Title of Information Collection:* Data Collection for Administering the PACE Health Survey to Beneficiaries Enrolled in the Dual Eligible Demonstrations, Minnesota Senior Health Options and Minnesota Disability Health Options; *Form No.:* CMS-10089 (OMB# 0938-XXXX); *Use:* The Centers for Medicare & Medicaid Services has developed a survey, the PHS, that is similar to the Health Outcomes Survey (HOS). This survey was approved for PACE and the Wisconsin Partnership Program (WPP) on March 14, 2003. This emergency is a request to include administering the OMB approved survey to beneficiaries enrolled in Minnesota Senior Health Options and Minnesota Disability Health Options (MSHO/MnDHO). The main purpose of the PHS is to collect health status information that may be used to adjust Medicare payment to MSHO/MnDHO health plan organizations. It has been successfully pilot-tested to assess response rates and accuracy of responses under different

distribution approaches. The pilot test enabled CMS to select an approach whereby MSHO/MnDHO enrollees will be sent surveys to fill out and can request assistance from family or professionals; *Frequency:* Annually; *Affected Public:* Not-for-profit institutions; *Number of Respondents:* 2,600; *Total Annual Responses:* 1,768; *Total Annual Hours:* 295.

We have submitted a copy of this notice to OMB for its review of these information collections. A notice will be published in the **Federal Register** when approval is obtained.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to [Paperwork@cms.hhs.gov](mailto:Paperwork@cms.hhs.gov), or call the Reports Clearance Office on (410) 786-1326.

Interested persons are invited to send comments regarding the burden or any other aspect of these collections of information requirements. However, as noted above, comments on these information collection and recordkeeping requirements must be mailed and/or faxed to the designees referenced below, by June 9, 2003: Centers for Medicare and Medicaid Services, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances, Room C5-14-03, 7500 Security Boulevard, Baltimore, MD 21244-1850. Fax Number: (410) 786-3064, Attn: Dawn Willingham, CMS-10089; and,

Office of Information and Regulatory Affairs, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503, Fax Number: (202) 395-6974 or (202) 395-5167 Attn: Brenda Aguilar, CMS Desk Officer.

Dated: April 22, 2003.

**Dawn Willingham,**

*Acting, CMS Reports Clearance Officer, CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Submission for OMB Review; Comment Request

*Title:* OCSE-396A: Financial Report; and OCSE-34A: Quarterly Report of Collections.

*OMB No.:* 0970-0181.

*Description:* Each State agency administering the Child support Enforcement Program under Title IV-D of the Social Security Act is required to provide information to the Office of Child Support Enforcement concerning its administrative expenditures and its receipt and disposition of child support payments from non-custodial parents. These quarterly reporting forms enable each State to provide that information, which is used to compute both the quarterly grants awarded to each State and the annual incentive payments earned by each State. This information is also included in a published annual statistical and financial report, available to the general public.

Comments sent to the Office of Child Support Enforcement, both directly and in response to the **Federal Register** Notice published June 10, 2002 (67 FR 39727), *et seq.*, provided many useful recommendations to update and correct these financial reporting forms.

Based on these comments, these forms have been revised to conform with recent changes in Federal law and to enable State agencies to more accurately report financial data. In particular, State agencies will now be able to report amounts expended on computer systems in greater detail, and will be able to better differentiate the distribution of child support payments received on behalf of children in foster care facilities or who are current or former recipients of Medicaid payments. State agencies will now be able to identify those child support collections which, although undistributed, will be disbursed shortly to families and those collections that require further review before disbursement.

*Respondents:* State agencies administering the Child Support Enforcement Program.