

Supporting Statement - Part A
Cooperative Agreement to Support Navigators in
Federally-facilitated Exchanges
(CMS-10463/OMB control number: 0938-1215)

A. BACKGROUND

The Cooperative Agreement to Support Navigators in Federally-facilitated Exchanges enables recipients to operate as Exchange Navigators in States with a Federally-facilitated Exchange (FFE), as authorized by the Patient Protection and Affordable Care Act (PPACA)¹. Section 1311(i) of the PPACA requires Exchanges to establish a Navigator grant program under which it awards grants to eligible individuals and entities (as described in Section 1311(i)(2) of the PPACA and 45 C.F.R. § 155.210(a) and (c)) applying to serve consumers in States with a FFE. Navigators assist consumers by providing education about and facilitating selection of qualified health plans (QHPs) within the Exchanges, as well as other required duties. Entities and individuals cannot serve as federally certified Navigators and carry out the required duties without receiving federal cooperative agreement funding.

When Exchanges were in their infancy, and public awareness and understanding of coverage options were low, the U.S. Department of Health and Human Services (HHS) encouraged Navigators to cast a wide net and to provide intensive face-to-face assistance to consumers. The FFEs have been in operation since 2013 for the 2014 open enrollment period, and the public is more aware of the options for private coverage available through them. Certified application counselors, direct enrollment partners, and Exchange-registered agents and brokers serve as additional resources to consumers. Beginning in 2018, the Navigator program was scaled down to reflect the enhanced public awareness of health coverage through the Exchanges and increased roles for private sector partners, including issuers and licensed health insurance agents and brokers, in serving consumers.

On May 23, 2019, CMS released its fifth Funding Opportunity since 2013² for Navigators serving FFE consumers. As a condition of award, Navigator awardees must agree to cooperate with any Federal evaluation of the program and must provide required weekly, monthly, quarterly, annual, and final (at the end of the cooperative agreement period) reports in a form prescribed by CMS, as well as any additional reports as required. Reports will be submitted

¹The Patient Protection and Affordable Care Act (Pub. L. 111-148) was enacted on March 23, 2010. The Health Care and Education Reconciliation Act of 2010 (Pub. L. 111-152), which amended and revised several provisions of the Patient Protection and Affordable Care Act, was enacted on March 30, 2010.

²For more information on the previous Navigator Funding Opportunity announcements and awardees, please see <https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/assistance.html>.

electronically. These reports will outline how cooperative agreement funds were used, describe program progress, describe any barriers encountered including how any potential conflicts of interest were mitigated and process for handling non-compliant paid and unpaid staff performing Navigator duties, describe how the program ensured access to culturally and linguistically appropriate services. They will also detail measurable outcomes, including how many of their staff completed required training and became certified as Navigators and how many consumers they served. CMS will provide the format for program reporting and the technical assistance necessary to complete program reporting requirements. At each stage, CCIO staff will evaluate reports and provide feedback to recipients and provide technical assistance as needed. CMS also updated its method to internally collect and track consumer complex case information that Navigators have voluntarily submitted to CMS for resolution assistance since 2013.

B. JUSTIFICATION

1. Need and Legal Basis

Section 1311(i) of the PPACA requires Exchanges to establish a Navigator grant program under which it awards grants to eligible individuals and entities (as described in Section 1311(i)(2) of the PPACA and 45 C.F.R. § 155.210(a) and (c)) applying to serve consumers in States with a FFE. Entities or individuals that receive a cooperative agreement award must be capable of carrying out, at a minimum, all Navigator duties required by the PPACA and HHS regulations. The primary regulations that establish requirements for awardees are 45 C.F.R. §§ 155.210³ and 155.215⁴.

The HHS Notice of Benefit and Payment Parameters for 2020 (HHS 2020 Payment Notice⁵) amended federal regulations at 45 C.F.R. § 155.210(e)(9), making certain types of assistance including post-enrollment duties for FFE Navigators *permissible*, but *not required* as had previously been the case. This change in Navigator duties will apply to this PRA renewal package and the upcoming Navigator cooperative agreements awarded in 2019 and beyond, with awardee reporting on the following topics⁶ now being optional:

³ See 45 C.F.R. § 155.210, at https://ecfr.io/Title-45/se45.1.155_1210

⁴ See 45 C.F.R. § 155.215, at https://ecfr.io/Title-45/se45.1.155_1215

⁵ See HHS 2020 Payment Notice: <https://www.federalregister.gov/documents/2019/04/25/2019-08017/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2020>

⁶ See 45 C.F.R. § 155.210(e)(9)

- Understanding the process of filing Exchange eligibility appeals;
- Understanding and applying for exemptions from the individual shared responsibility payment that are granted through the Exchange, understanding the availability of exemptions from the requirement to maintain minimum essential coverage and from the individual shared responsibility payment that are claimed through the tax filing process and how to claim them, and understanding the availability of IRS resources on this topic⁷;
- The Exchange-related components of the premium tax credit reconciliation process, and understanding the availability of IRS resources on this process;
- Understanding basic concepts and rights related to health coverage and how to use it; and
- Referrals to licensed tax advisers, tax preparers, or other resources for assistance with tax preparation and tax advice related to consumer questions about the Exchange application and enrollment process, exemptions from the requirement to maintain minimum essential coverage and from the individual shared responsibility payment, and premium tax credit reconciliations.

2. Information Users

Under the Terms and Conditions of the Navigator program, awardees must provide progress reports on a weekly, monthly, quarterly and annual basis during the 24-month period of performance, and a final report at the end of the period. Progress reports will outline activities such as:

- How cooperative agreement funds were used;
- Details of measureable outcomes;
- The program's progress;
- Descriptions of any barriers encountered;
- Types of referrals to other entities;
- Specific education and outreach efforts; and
- Key findings and recommendations.

Awardees will submit their progress reports electronically to CMS staff for evaluation and analysis. The results of this evaluation will provide feedback on the effectiveness of

⁷The elimination of the shared responsibility payment [applies to months beginning after December 31, 2018](https://www.irs.gov/affordable-care-act/individuals-and-families/individual-shared-responsibility-provision). More information found here: <https://www.irs.gov/affordable-care-act/individuals-and-families/individual-shared-responsibility-provision>.

the Navigator Program, in order that HHS and CMS leadership may evaluate the effectiveness of the program and address any areas that need revisions.

CMS will also use the information collected from Navigator organizations to inform the public about the availability of application services from designated organizations.

3. Use of Information Technology

All Navigator awardees must submit their progress reports 100% electronically via the CMS reporting system(s), as prescribed by CMS and subject to change at its discretion and funding availability. Navigator awardees will receive details and instructions on the specific electronic format for submission shortly after awards are issued.

In addition, CMS will also use a public facing website to display information collected from Navigator organizations that will support consumers seeking enrollment assistance from any designated Navigator organization. Any updates, additions, or deletions to that information can be submitted electronically by the Navigator organization to ensure that accurate and current information is available to the public.

4. Duplication of Efforts

This information collection does not duplicate any other effort and the information cannot be obtained from any other source.

5. Small Businesses

There are no unique impacts to small businesses involved.

6. Less Frequent Collection

Implementation of the Navigator program, in accordance with final regulations at 45 C.F.R. §155.215(g), requires information collection to allow each Exchange to establish a process for providing required disclosures and obtaining required consumer authorizations. The FFEs must establish a reasonable retention period for maintaining these records, which is no less than six years, unless a different and longer retention period has already been provided under other applicable Federal law. The consumer may revoke such authorization(s) at any time.

CMS will also require data collection on a weekly, monthly, and quarterly basis for program oversight. An annual progress report is required after the first 12-month budget period of the 2-year period of performance and a final progress report is required at the end of the 2-year period of performance. The amount of **required** data that will be collected through this renewal package is less than what is currently being collected under CMS-10463. As a result of the HHS Notice of Benefit

and Payment Parameters for 2020 (HHS 2020 Payment Notice⁸), federal regulations at 45 C.F.R. § 155.210(e)(9) have been amended to make certain types of assistance, including post-enrollment duties for FFE Navigators permissible, but not required as had previously been the case. Beginning with Navigator cooperative agreements awarded in 2019, awardees who choose to perform any of the duties at 45 C.F.R. § 155.210(e)(9) will also have the option to report this work to CMS as part of their weekly metric reporting. In this instance, the data being collected under this renewal will mirror what is currently being collected under CMS-10463.

It is necessary to collect metrics from awardees on a weekly basis due to the nature of the program and its structure as a cooperative agreement⁹ rather than a grant. To lessen the reporting burden on awardees, the weekly metrics will be collected and aggregated on a monthly basis—allowing awardees to avoid duplicative reporting. In addition, the monthly data collection aids CMS in providing oversight and determining compliance with the programmatic and financial requirements of the cooperative agreement.

Lastly, it is necessary for CMS to collect information from Navigator organizations to inform the public about the availability of services. Any updates, additions, or deletions by Navigator organizations to this information may occur on an as needed basis.

7. Special Circumstances

Due to the nature of cooperative agreements, CMS will be closely working with awardees to support the Navigator program, particularly prior to and during the Exchange open enrollment period. Thus, it is necessary to increase the data collection requirements to include weekly and monthly reporting for greater program oversight

⁸ See *HHS 2020 Payment Notice*: <https://www.federalregister.gov/documents/2019/04/25/2019-08017/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2020>

⁹ A Cooperative Agreement is an assistance mechanism in which substantial HHS programmatic involvement with the recipient [awardee] is anticipated during the performance of the activities [period of performance]. Under each Cooperative Agreement, HHS' purpose is to support and stimulate the recipient's activities by involvement in, and otherwise working jointly with, the award recipient in a partnership role. To facilitate appropriate involvement during the period of this Cooperative Agreement, HHS and the recipient will be in contact at least once a month, and more frequently when appropriate. In addition, CMS will assign specific Project Officers and Grants Management Specialists to each Cooperative Agreement award to support and monitor recipients throughout the period of performance. CMS Grants Management Officers, Grants Management Specialists, and Project Officers will monitor, on a regular basis, progress of each recipient. This monitoring may be by phone, document review, on-site visit, other meeting and by other appropriate means, such as reviewing program progress reports and Federal Financial Reports (FFR or SF-425). This monitoring will be to determine compliance with programmatic and financial requirements.

and monitoring of awardee compliance with the programmatic and financial requirements of their award.

Additionally, Federal regulations at 45 C.F.R. § 155.210(e)(6) require Awardees to “maintain a record of the authorization provided [by the consumer] in a form and manner as determined by CMS, for no less than six years, unless a different and longer retention period has already been provided under other applicable Federal law.”

Awardees must retain entity records pertinent to this award for a period of three years from the date of submission of the final expenditure report.¹⁰

8. Federal Register/Outside Consultation

A Federal Register Notice was published on October 23, 2019 (84 FR 56812). Comments were received; however, the content was not relevant to the subject collection of information.

9. Payments/Gifts to Respondents

Payments and gifts will not be provided.

10. Confidentiality

Awardees should not include PII in any weekly, monthly, quarterly, or final reports submitted to HHS in connection with the data reporting requirements proposed in this collection. In addition, Awardees are required to ensure compliance with the standards adopted by the FFE pursuant to 45 C.F.R. § 155.260 when providing Navigator services to consumers involving the use of PII.

In the event of investigations into potential violations of program standards or noncompliance with other requirements that apply to Navigators, HHS may collect some personally identifiable information of Navigators (e.g., name, unique ID number) or consumers (e.g., name), as this information is provided on the consumer authorization form¹¹ that is used prior to a Navigator assisting a consumer. To the extent provided by law, we will maintain the privacy of any respondent with respect to the information being collected.

¹⁰ See 45 CFR Part 75 [available at <http://www.ecfr.gov/cgi-bin/text-idx?node=pt45.1.75&rgn=div5>], which implements 2 CFR Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (“Uniform Guidance”) for the U.S. Department of Health & Human Services (HHS) operating divisions, effective December 26, 2014.

¹¹ See *Model Authorization Form for Navigators*: <https://marketplace.cms.gov/technical-assistance-resources/draft-authorization-form-navigators.pdf>

11. Sensitive Questions

In order to perform their required duties, Navigators may need to communicate with consumers about sensitive topics, such as their health status and needs, in order to assist with eligibility determinations and enrollment. As such, some information such as individual or family income, employment status, citizenship, and other characteristics that people might commonly consider private may be communicated.

As part of awardees' reporting requirements, awardees will provide CMS with aggregated data on total numbers of consumers enrolled in QHPs, the number of consumers assisted with applying for Medicaid/CHIP, etc. (see 14. *Data Collection Reporting* for additional information).

12. Burden Estimates (Hours & Wages)

Wage Rates

The following sections of this document contain estimates of burden imposed by the associated information collection requirements (ICRs). To derive average costs, CMS used data from the Bureau of Labor Statistics (BLS) (<https://www.bls.gov/ooh/>). In this regard, CMS adjusted the employee hourly wage estimates by a factor of 100 percent. This is necessarily an estimated adjustment, both because fringe benefits and overhead costs vary significantly from employer to employer, and because methods of estimating these costs vary widely from study to study. Nonetheless, there is no practical alternative and CMS believes that doubling the hourly wage to estimate total cost is an accurate estimation method that has been used successfully in previous burden calculations.

1) ICRs Related to Data Reporting on Required Navigator Duties (§§ 155.210 and 155.215) by Navigator Cooperative Agreement Awardees to CMS

CMS estimates that there will be 34 FFEs and will make adjustments to this number, if needed. Hourly wage data for Navigator caseworkers, project leads, and senior level executives are as follows:

Table 1. Respondents' Hours and Wages

Position	Basic Hourly Wage	Hourly Labor Costs (Hourly rate + 100% Fringe Benefits)	Estimated # Responses per Respondent (Awardee)	Total Program Respondents Based on 50 Estimated Awardees	Total Burden Costs (All Respondents)
Caseworker/ Navigator	\$20.90 ¹²	\$41.80	9	450	\$18,810
Lead Navigator/ Project Manager	\$31.41 ¹³	\$62.82	1	50	\$3,141
Senior Level Executive	\$50.47 ¹⁴	\$100.94	1	50	\$5,047

It should be noted that the number of awardees decreased from 102 to the newly estimated 50 based on current data and significantly decreased level of funding currently available for Navigator cooperative agreement awards, compared to when the current PRA package was approved in 2016. The average number of caseworkers/Navigators increased from four to nine based on current data of certified Navigators, regardless of funding source, during the latest open enrollment period for the 2019 Plan Year, November 1, 2018 to December 15, 2018. The number of awardees and average number of Navigators per awardee are expected to remain the same for the 24-month period of performance, covering the 2020 and 2021 plan years.

2) ICRs Related to Non-Exchange Entities: Privacy and Security Policies and Procedures (§155.260(b))

Various types of non-Exchange entities will assist consumers as they enroll in coverage in States with an FFE. These entities include Navigators and certified application counselors (CACs), both of which must enter into

¹² Bureau of Labor Statistics. Community Health Workers. <https://www.bls.gov/oes/current/oes211094.htm>

¹³ Bureau of Labor Statistics. Social and Community Service Managers. <https://www.bls.gov/oes/current/oes119151.htm>

¹⁴ Bureau of Labor Statistics. Top Executives. <https://www.bls.gov/ooh/management/top-executives.htm>

privacy and security agreements with the FFE, pursuant to 45 C.F.R. § 155.260(b).

The agreements require these entities to implement privacy and security policies and procedures, which include developing training and awareness programs, implementing breach and incident handling procedures, creating a privacy disclosure statement, maintaining accounting of disclosures, and obtaining informed consent from individuals for any use or disclosure that is not permissible within the scope of the privacy notice statement or any relevant agreements.

Navigators

This ICR was originally approved in 2013 and consisted of meeting initial requirements and developing policies and procedures. For this approval, Lead Navigators/Project Managers and Senior Level Executives will continue with maintenance efforts only of the previously established policies and procedures.

The estimated total burden will be 1 hour per Project Manager and 0.75 hours per Senior Level Executive. Each Navigator Project Manager's wage is an estimated \$62.82 per hour for a total burden cost of \$62.82 per each Navigator Project Manager. We estimate there will be 50 Navigator Project Managers, for a total of \$1,570.50. Each Navigator Senior Level Executive's wage is an estimated \$100.94 per hour, for a total burden cost of \$75.71 per each Senior Level Executive. We estimate there will be 50 Navigator Senior Executives, for a total of \$3,785.25. As the Navigator program has become more mature, the number of Navigator Project Managers and Senior Executives has remained relatively stable as a result of the number of Navigator awardees leveling out in recent years.

Table 2: Burden Estimate Navigator Privacy and Security Policies and Procedures

Position	Basic Hourly Wage	Hourly Labor Costs (Hourly Rate + 100% Fringe)	Total Number of Respondents (Awardees)	Burden Hours	Total Burden Costs (Per Respondent)	Total Burden Costs (All Respondents)
Lead Navigator/ Project Manager	\$31.41	\$62.82	50	1	\$62.82	\$1,570.50
Senior Level Executive	\$50.47	\$100.94	50	0.75	\$50.47	\$1,897.63

Certified Application Counselors

Certified Application Counselor (CAC) Project Directors and CAC Senior Officials at Certified Application Counselor Designated Organizations (CDOs) will be responsible for continuing with the maintenance efforts of the previously established policies and procedures outlined above. CAC Project Directors will handle the initial breach and follow the set procedures (entailing more time associated with the task). Each project director’s wage is an estimated \$116.88 with an estimated total burden of 1 hour per project director. The total burden cost per analyst is \$116.88. With an estimate of 3,500 CAC Project Directors, the annual total burden cost is \$408,800. CAC Senior Officials will ensure the protocol is executed and adapt the policies accordingly (requiring the necessary oversight). Each senior official’s wage is an estimated \$156.94 with an estimated total burden of 0.75 hour per senior official. The total burden cost per senior official is \$117.71. With an estimate of 3,500 CAC Senior Officials, the annual total burden cost is \$411,968.

Table 3: Burden Estimate CAC Privacy and Security Policies and Procedures

Position ¹⁵						
CAC Project Director	\$58.44	\$116.88	3,500	1	\$116.88	\$408,800
CAC Senior Official	\$78.47	\$156.94	3,500	0.75	\$117.71	\$411,968

3) ICRs Regarding Reports

Burden Estimates for Navigator Weekly Progress Reports

~~Total Hours: 21,850 Costs: \$877,503~~

The cost burden associated with the Weekly Progress Reports will apply to all Navigator awardees. The reports will be prepared by Navigator caseworkers. CMS estimates that each of the 50 awardees spread across the 34 FFE States will have an average of 9 caseworkers per awardee, regardless of funding source. CMS further assumes that caseworkers will spend approximately one hour each week to provide the required weekly submissions. A mid-level project lead will spend a half hour to review the submissions. Further, the total number of submissions was decreased from 52 to 46 to more accurately reflect current practice.

¹⁵ Bureau of Labor Statistics. Occupational Employment Statistics, Occupational Employment and Wages, http://www.bls.gov/oes/current/naics5_524290.htm

Burden Estimates for Navigator Quarterly Progress Reports

Total Hours: 100 Costs: \$8,188

The cost burden associated with the Quarterly Progress Reports will apply to all Navigator awardees. There will be four quarterly reports, prepared mainly from information previously logged by Navigator caseworkers and then automatically aggregated by HIOS. CMS estimates that 1 mid-level project lead working .25 hour to draft and respond to the questions in the quarterly. A senior level executive will take .25 hour to review and attest each quarterly report.

Table 6: Burden Estimate Quarterly Progress Report

Leads Hours: 1 mid-level project lead x .25 hour x 4 quarterly submissions = 1 hour

Hours all Awardees: 1 hour x 50 awardees = 50

Costs: 50 hours x \$62.82 mid-level wage = \$3,141

Senior Hours: 1 senior level x .25 hour x 4 quarterly reports = 1 hour

Hours all Awardees: 1 hour x 50 awardees = 50 hours

Costs: 50 hours x \$100.94 senior level wage = \$5,047

Total Hours: 50 hours leads + 50 hours senior level= 100

Total Costs: \$3,141 leads + \$5,047 senior level = \$8,188

Burden Estimates for Navigator Annual Progress Report

Total Hours: 100

Costs: \$7,235

Reporting requirements for Navigator awardees include the submission of an Annual Progress Report due within 30 days from the end of the 12-month cooperative agreement budget period. CMS estimates that each awardee will require 1 mid-level project lead working 1.5 hour to complete the report and 1 senior level executive will take .50 hour to review and clear it.

Table 7: Burden Estimate Annual Progress Report

Leads Hours: 1 mid-level project lead x 1.5 hour x 1 annual report submission = 1.5 hour

Hours all Awardees: 1.5 hour x 50 awardees = 75 hours

Costs: 75 hours x \$62.82 mid-level wage = \$4,711.50

According to 2018 quarterly progress report data¹⁷, 350,000 individuals provided authorization. The *total estimate for the authorization recordkeeping requirement is \$469,000.*

Authorization Prior Obtaining Consent: With respect to the requirement for the Navigator to receive authorization from each consumer before obtaining access to the consumer's PII (separate from consent form), CMS estimates it will take one caseworker with a wage of \$41.80/per hour 0.25 hours (15 minutes) to obtain the authorization. The total cost estimate for disclosures by each individual Navigator is therefore \$10.45.

CMS estimates that the time burden associated with maintaining a record of the authorization is 0.016 hours (1 minute). CMS estimates the total cost for the individual to maintain the record of authorization is \$0.67.

Therefore, assuming that the same 350,000 individuals provide authorization, this brings the total estimate for this recordkeeping requirement for all awardees to \$3,892,000.

Table 9: Record-Keeping Requirements

Consent Form:

Cost to collect consent form: \$41.80 (one caseworker wage) x .016 hour (1 minute) = \$0.67 per authorization.

Cost to maintain consent form: \$41.80 (one caseworker wage) x .016 hour (1 minute) = \$0.67 per authorization.

Total Hours to Collect & Maintain Form: .016 hour x 2 (same time to collect & maintain) x 350,000 consent forms = 11,200 hours

Total Cost to Collect & Maintain Consent Form: \$0.67 (collect) + \$0.67 (maintain) x 350,000 authorizations = \$469,000

Authorization:

Hours Obtain Access: .25 hour x 350,000 (authorizations) = 87,500 hours

Cost Obtain PII Access: \$41.80 (one caseworker wage) x .25 hour = \$10.45 per caseworker

Hours to maintain authorization: .016 hour x 350,000 (authorizations) = 5,600 hours

¹⁷ This data was taken from cumulative quarterly progress reports submitted by 2018 Navigator awardees.

Cost to maintain authorization: $\$41.80$ (one caseworker wage) \times $.016$ hour =
 $\$0.67$

Total Authorization Hours: $87,500$ (obtain) + $5,600$ (maintain) = $93,100$

**Total Authorization Cost: $\$10.45$ + $\$0.67 \times 350,000$ (number authorizations) =
 $\$3,892,000$**

Burden Estimates for all Progress Reports and Assister Organization Updates 2019-2020

Table 10: Total Annual Reporting Expenditures

2019 Navigator Report Submissions	# of Respondents (Awardees)	Frequency	Responses (Column 2 x 3)	Annual Burden Hours (See Above Tables)	Annual Costs (See Above Tables)
Weekly Progress Report Submissions	50	46 reports/year	2,300	21,850	\$897,503
Monthly Progress Report Submissions	50	11 reports/year	550	3,850	\$163,820.25
Quarterly Progress Report Submissions	50	4 reports/year	200	100	\$8,188
Annual Report Submissions	50	1 report/year	50	100	\$7,235
Assister Organization Information	50	4 updates/year	200	100	\$6,282

2019 Total Navigator Submissions (without records)	26,000	\$1,083,028.25
NEW: Record Keeping Requirements	93,100	\$3,892,000
2019 Total Navigator Submissions (with records)	119,100	\$4,975,028.25

2020 Navigator Report Submissions	# of Respondents (Awardees)	Frequency	Responses (Column 2 x 3)	Annual Burden Hours (See Above Tables)	Annual Costs (See Above Tables)
Weekly Progress Report Submissions	50	46	2,300	21,850	\$897,503
Monthly Progress Report Submissions	50	11	550	3,850	\$163,820.25
Quarterly Progress Report Submissions	50	4 reports/year	200	100	\$8,188
Annual Report Submissions	50	1/year	50	100	\$7,235
Assister Organization Information Submissions	50	4 updates/year	200	100	\$6,282
2020 Total Navigator Submissions (w/o records)				26,000	\$1,083,028.25
NEW: Record Keeping Requirements				93,100	\$3,892,000
2020 Total Navigator Submissions (w/records)				119,100	\$4,975,028.25

Total 2019-2020	Total Burden Hours	Total Cost
2-Year Total Navigator Progress Reports and Assister Organization Information Submissions	52,000	\$2,166,056.50
2-Year Total with new Record Keeping Requirements	238,200	\$9,950,056.50

13. Capital Costs

The Notice of Funding Opportunity indicates that entities or individuals eligible to be Navigators must have expertise in the needs of underserved and vulnerable populations; eligibility and enrollment rules and procedures; the range of QHP options and insurance affordability programs; and privacy and security standards. Therefore, we do not anticipate that programs will need additional capital or startup costs beyond what is covered in awardees cooperative agreement application.

14. Cost to Federal Government

Navigator Cooperative Agreement Applications

The review of the applications from FFE states for Navigator cooperative agreements will be initially performed by an outside contractor with oversight by federal employees. The contractor will convene a panel of outside experts to evaluate applications and assist in the selection process. The recommendations of the panel of experts will be analyzed by the contractor. The contractor will then submit its recommendations to CMS for review.

Total for Federal Employee Application Review = See Table 9 (after items A-D below)

a) Application Review by Federal Employees

CMS anticipates that the contractor may review up to 150 applications of the Navigator cooperative agreement applications resulting in about 50 applicants recommended for funding by the contractor before a final selection is made. CMS estimates that each application (150 total) will also require one hour for an initial review by federal mid-level staff (GS-12 equivalent¹⁸):

Costs: 150 applications x 1 hour x \$31 (GS-12 hourly wage) = \$4,650

¹⁸ <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/2019/general-schedule/>

b) Outside Panel

While not required every year (if awards are made for a multi-year period of performance), an outside panel is required for each initial cooperative agreement application process at the start of the period of performance:

Costs: 150 applications x 1 hour (initial review) X \$31 GS-12 hourly wage = \$4,650

c) Follow-up

Some applications will require follow-up telephone calls and other attempts to clarify information or seek additional information before award decisions can be made. CMS estimates that 25 applications will require some level of follow-up review. Three mid-level (GS-12 equivalent) CMS staff will require one hour each for follow-up.

Costs: 25 follow-up telephone calls x 3 mid-level CMS staff (GS-12 equivalent) x 1 hour x \$31 GS-12 hourly wage = \$2,325

d) Award Announcement and Awardee Notification

Mid-level CMS staff (GS-12 equivalent) will be devoted to developing rollout materials (factsheets, FAQs, website language, press release, etc.) and follow-up award to awardees. CMS assumes that developing rollout materials will take 10 hours. A CMS senior level (GS-15 equivalent) staff person will take two hours to review these materials. Further, it is anticipated that CMS mid-level staff (GS-12 equivalent) will take another 10 hours to provide notification of the awards to awardees.

Development of rollout materials:

Costs: 10 hours x \$31 (GS-12 hourly wage) = \$310

2 hours x \$51 (GS-15 hourly wage) = \$102

Awardee notification:

Costs: 10 hours x \$31 (GS-12 hourly wage) = \$310

Total Cost for Award Announcement and Awardee Notification: \$722

Table 11: Total Cost to Federal Government

Description	Cost
Application Review Federal Employees	\$4,650
Outside Panel	\$4,650
Follow-up	\$2,325
Award Announcement & Awardee Notification	\$722
TOTAL COST TO FEDERAL GOVERNMENT	\$12,347

15. Changes to Burden

Due to the inclusion of the requirement to maintain consumer authorizations and the consent form requirements, burden hours have increased from 22,471 to 119,100 hours.

16. Publication/Tabulation Dates

At this time, CMS does not expect that the data collected in the weekly, monthly, quarterly, and annual reports will be published or shared with other agencies.

17. Expiration Date

The expiration date will be displayed on the first page (top right corner) of each reporting instrument.

²⁰ See HHS 2020 Payment Notice: <https://www.federalregister.gov/documents/2019/04/25/2019-08017/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2020>