



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10398 #99]

### Medicaid and Children's Health Insurance Program (CHIP) Generic Information

#### Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** On May 28, 2010, the Office of Management and Budget (OMB) issued Paperwork Reduction Act (PRA) guidance related to the “generic” clearance process. Generally, this is an expedited process by which agencies may obtain OMB’s approval of collection of information requests that are “usually voluntary, low-burden, and uncontroversial collections,” do not raise any substantive or policy issues, and do not require policy or methodological review. The process requires the submission of an overarching plan that defines the scope of the individual collections that would fall under its umbrella. On October 23, 2011, OMB approved our initial request to use the generic clearance process under control number 0938–1148 (CMS-10398). It was last approved on April 26, 2021, via the standard PRA process which included the publication of 60- and 30-day **Federal Register** notices. The scope of the April 2021 umbrella accounts for Medicaid and CHIP State plan amendments, waivers, demonstrations, and reporting. This **Federal Register** notice seeks public comment on one or more of our collection of information requests that we believe are generic and fall within the scope of the umbrella. Interested persons are invited to submit comments regarding our burden estimates or any other aspect of this collection of information, including: the necessity and utility of the proposed information collection for the proper performance of the agency’s functions, the accuracy of the estimated burden, ways to enhance the quality, utility and clarity of the information to be

collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**DATES:** Comments must be received by [INSERT DATE 14 DAYS AFTER DATE OF PUBLICATION IN THE *FEDERAL REGISTER*].

**ADDRESSES:** When commenting, please reference the applicable form number (CMS-10398 #45) and the OMB control number (0938-1148). To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. *Electronically.* You may send your comments electronically to <http://www.regulations.gov>. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments.

2. *By regular mail.* You may mail written comments to the following address:

CMS, Office of Strategic Operations and Regulatory Affairs

Division of Regulations Development

Attention: CMS-10398 # \_\_\_/OMB control number: 0938-1148

Room C4-26-05

7500 Security Boulevard

Baltimore, Maryland 21244-1850.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, please access the CMS PRA website by copying and pasting the following web address into your web browser: <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRAListing>.

**FOR FURTHER INFORMATION CONTACT:** William N. Parham at (410) 786-4669.

**SUPPLEMENTARY INFORMATION:**

Following is a summary of the use and burden associated with the subject information collection(s). More detailed information can be found in the collection's supporting statement and associated materials (see **ADDRESSES**).

## *Generic Information Collections*

1. *Title of Information Collection:* Medicaid Certified Community Behavioral Health Clinic (CCBHC) Services State Plan Amendment Coverage Template; *Type of Information Collection Request:* New collection of information request; *Use:* On March 9, 2024, section 209 in Title I of Division G of the Consolidated Appropriations Act, 2024 (CAA, 2024) (Pub. L. 118-42) amended section 1905 of the Social Security Act (the Act) to establish a new, optional Certified Community Behavioral Health Clinic (CCBHC) State plan benefit at section 1905(a)(31), and as defined in section 1905(jj) of the Act. CCBHCs must be certified by the State Medicaid agency as meeting the most recent version of the CCBHC Certification Criteria (“the Certification Criteria”) and must submit ongoing data on the provision of services, such as data on service encounters and clinical outcomes, to the State or Secretary. The Certification Criteria that States use to certify CCBHCs establish a basic level of service at which CCBHCs should operate. The amendments to the Act as a result of the passage of the CAA, 2024 provide the authority for SPAs to add this optional Medicaid coverage. The attached template has been developed to simplify the SPA submission by adding the 1905(a)(31) CCBHC services benefit to their State plan. States submitting State plan pages adding optional coverage for the section 1905(a)(31) will be required to utilize and submit the template no later than the end of the quarter in which their effective date falls. *Form Number:* CMS-10398 #99 (OMB control number: 0938-1148); *Frequency:* One time and on occasion; *Affected Public:* State, Local, or Tribal Governments; *Number of Respondents:* 56; *Total Annual Responses:* 56; *Total Annual Hours:* 280. (For policy questions regarding this collection contact: Marlana Thieler at 410-786-6274.)

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**William N. Parham, III**

*Director,*

*Division of Information Collections and Regulatory*

*Impacts,*

*Office of Strategic Operations and Regulatory Affairs.*

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