

Supporting Statement A

Generic Clearance for the Collection of Medicare Current Beneficiary Survey (MCBS) Respondent “Pulse” Feedback

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A. JUSTIFICATION

The Centers for Medicare & Medicaid Services (CMS) requests approval for a new generic clearance for the collection of Medicare Current Beneficiary Survey (MCBS) Respondent “Pulse” Feedback. The MCBS Pulse generic clearance is intended for contexts in which CMS stakeholders require time-sensitive data to inform program planning and decision-making. This clearance will allow CMS to improve operational efficiency by establishing a data-driven process to inform emerging program initiatives, develop nascent questionnaire concepts, and obtain rapid insights on evolving beneficiary needs. The MCBS Pulse generic clearance will improve the CMS’s evidence-based program planning and administration and reduce administrative complexity for both the agency and its stakeholders.

A1. Circumstances Making the Collection of Information Necessary

CMS is the largest single payer of health care in the United States. CMS plays a role in administering health insurance coverage for more than 120 million people across the Medicare, Medicaid, CHIP, and Exchange populations. A critical aim for CMS is to be an effective steward of taxpayer resources and a trustworthy partner in improving healthcare quality, accessibility, and affordability while safeguarding program integrity and preventing fraud, waste, and abuse. CMS also aims to put patients first in the delivery of their health care needs.

CMS has a long history of relying on robust, nationally-representative data to inform program planning and evaluation, while using survey sampling, design, and weighting methods that maximize relevance, accuracy, and reliability. The MCBS, collected under OMB clearance 0938-0568, is the most comprehensive and complete survey available on the Medicare population and is essential in capturing data not otherwise collected through CMS operations. The MCBS is a nationally-representative, longitudinal survey of Medicare beneficiaries that is sponsored by CMS and directed by the Office of Enterprise Data and Analytics (OEDA). The survey is conducted through a contract with NORC at the University of Chicago (NORC). Survey-collected data elements, combined with CMS administrative data, complete the picture of beneficiaries’ health care experiences and provide a vital component in the development and evaluation of models and analyses conducted by CMS.

In addition to OMB clearance 0938-0568, which covers the main MCBS data collection, CMS has clearance 0938-1275, Generic Clearance: Questionnaire Testing and Methodological Research for the Medicare Current Beneficiary Survey. It allows CMS to improve data quality and accuracy on the main MCBS survey by evaluating and revising existing or new questionnaire items and assessing new data collection methodologies and modes. It is designed to promote efficiencies in the development of questionnaire items and survey methods that increase response rates and reduce respondent burden.

While the rigorous methods used on the existing MCBS main and generic clearances are critical for examining annual trends in health care cost and utilization and maximizing the efficiency and efficacy of MCBS survey operations, they are not designed to support the rapid data needs of a policy-driven agency. CMS operates in a dynamic policy environment where decision-makers must respond to emerging issues, evaluate nascent program initiatives, and make evidence-based operational adjustments that directly impact more than 69 million beneficiaries. These policy decisions require timely beneficiary input that current data collection mechanisms cannot provide. The new MCBS Pulse generic clearance request addresses this critical gap by enhancing

operational efficiency through time-sensitive, data-driven information collection for evidence-based policy development and decision making. This approach supports CMS's commitment to effective stewardship of taxpayer resources through improved program planning and operational effectiveness.

This generic clearance will provide a proactive, streamlined process for the rapid collection of data via a new tool, the MCBS Pulse, that will allow CMS to collect time-sensitive data (“Pulse” feedback) from beneficiaries on emerging topics of interest or feedback on the program. By leveraging the MCBS framework already in place, this mechanism will efficiently deliver new information that focuses on capturing beneficiary knowledge, practice, perspectives, and opinions about various topics of importance to CMS programs, thereby improving program planning and reducing administrative complexity. Data collection may also inform early question development efforts that would be further tested under the existing MCBS generic clearance (0938-1275) and would inform potential future topics for the MCBS and other CMS-administered surveys.

The MCBS Pulse is intended to offer quick-turnaround directional insights rather than rigorous, generalizable findings. For each set of results, CMS will clearly document what is known about the validity, accuracy, and the appropriateness of the data for a given purpose. Each MCBS Pulse survey will be brief and constrained in content, containing no more than five questions that reflect an intentional prioritization of topics of greatest need to CMS stakeholders and limitation of respondent burden. In general, a nine-week span of time is anticipated from start to internal release of data; this expedited timeline for each MCBS Pulse Survey would be as follows:

- Survey design (2 weeks)
- OMB clearance (5 days)
- Instrument programming and pretesting (up to 2 weeks)
- Data collection (up to 2 weeks)
- Post-processing and internal release of estimates (up to 2 weeks)

The MCBS design includes three rounds of data collection per year, each lasting approximately 16 weeks. In compliance with the Terms of Clearance on the main MCBS clearance (0938-0568), CMS will propose strategic burden reductions in the main MCBS survey, ensuring the MCBS Pulse is burden-neutral with no net increase in respondent burden. These reductions will create dedicated capacity for year-round Pulse fielding. Given that each Pulse survey is going to be exceptionally brief, no more than five questions fielded for up to two weeks, CMS will be able to conduct multiple Pulse surveys per round throughout the year based on operational needs, with total Pulse burden remaining well within the burden reductions to be implemented.

A2. Purpose and Use of Information Collection

CMS will collect, analyze, and interpret information gathered through this MCBS Pulse generic clearance to support evidence-based policy development and operational decision-making. This clearance will accomplish the following three goals:

- Enhance CMS operational efficiency and policy responsiveness by providing timely data points not available from other sources to inform program planning and development;

- Add early design phase questionnaire testing and development capabilities to the MCBS and other CMS surveys to support continuous improvement of CMS-focused questionnaires; and
- Launch a streamlined process to rapidly gather beneficiary insights on emerging policy priorities and program topics.

The purpose and use of collecting this information will fall into one of three categories: 1) CMS program planning feedback, 2) early questionnaire design, or 3) beneficiary feedback on emerging topics.

CMS Program Planning Feedback

The MCBS Pulse generic clearance will be used by decision-makers across CMS to obtain time-sensitive feedback on existing programs and new program initiatives, supporting the agency's need for rapid, evidence-based policy development. While data from the main MCBS is used by CMS and external stakeholders to monitor and evaluate the Medicare program, its design is not sufficient for facilitating rapid feedback on specific program elements that CMS requires to inform real-time program development and operational adjustments in a dynamic policy environment.

CMS will use the information gathered through this generic clearance to identify program strengths and weaknesses, obtain preliminary data points that inform existing and developing programs, and support evidence-based operational decision-making. Questions on MCBS Pulse will target areas such as Medicare program branding, communications, and outreach strategies; awareness and use of existing programs; experience and satisfaction with existing programs; barriers to use; trust and security concerns; interest in program changes or developments; and future improvements. Responses will be assessed to plan and inform ongoing and future efforts to improve program uptake, quality, satisfaction, and efficiency, thereby supporting effective stewardship of taxpayer resources.

This collection of information is necessary to enable CMS decision-makers to rapidly obtain beneficiary feedback to support efficient program development and service delivery. Within CMS, stakeholders of the MCBS Pulse generic clearance have already expressed interest in including the following topics in future Pulse information collections:

- The **CMS Innovation Center** develops and tests health care payment and service delivery models to improve patient care, lower costs, and align payment systems to promote patient-centered practices. These initiatives – such as the Wasteful and Inappropriate Service Reduction (WiSER) model¹, which seeks to improve the pre-authorization process and reduce unnecessary healthcare spending – require rapid beneficiary feedback to inform model design and implementation strategies.

The MCBS Pulse will enable the Innovation Center to gather timely data to inform early model development. It will also provide information on public awareness and opinions of newly announced Innovation Center models, supporting evidence-based adjustments to outreach strategies and program design. This rapid feedback mechanism will produce essential data on beneficiary experiences and factors that motivate health behavior change,

¹ <https://www.cms.gov/priorities/innovation/innovation-models/wiser>

enabling the Innovation Center to make operational improvements that enhance program uptake and effectiveness.

- The **CMS Office of Communications (OC)** serves as CMS's focal point for strategic and tactical communications, providing leadership for CMS in the areas of customer service, website operations, traditional and new media, media relations, call center operations, consumer materials, public information campaigns, and public engagement². To inform key functions, OC requires timely information on beneficiaries' awareness of specific Medicare benefits.

The MCBS Pulse generic clearance will produce needed information on the reasons why people do or do not take advantage of important Medicare benefits, such as the Annual Wellness Visit. The MCBS Pulse will also provide a quick snapshot as to any confusion people may have from recent Medicare news, such as headlines about drug price negotiation and price changes for Medicare Advantage (MA) or Part D. A key advantage of using the MCBS framework is the availability of extensive beneficiary characteristic data, enabling OC to analyze responses across multiple demographic, health status, and coverage dimensions, providing nuanced insights beyond high-level aggregate statistics that are not available through other OC survey mechanisms. This time-sensitive information will enable OC to make rapid, evidence-based communication updates that address beneficiary confusion or concerns, thereby improving program awareness and beneficiary engagement.

- The **CMS Office of Program Operations and Local Engagement (OPOLE)** is responsible for effectively implementing the Agency's local outreach strategy and messaging³. In this role, OPOLE provides a regional perspective on national initiatives and advises on how to effectively implement program strategies at the local level. To inform the impact of Agency initiatives on program beneficiaries, OPOLE requires timely data on how Medicare beneficiaries engage with their healthcare.

The MCBS Pulse will enable OPOLE to rapidly gather insights on how Medicare beneficiaries track key health metrics, such as blood pressure, cholesterol, and glucose levels, and to identify the types of people or professionals Medicare beneficiaries prefer to engage with when making healthcare decisions. This time-sensitive information will support evidence-based refinements to local outreach strategies and program implementation approaches, thereby improving the effectiveness of regional engagement efforts and beneficiary health outcomes.

- The **CMS Center for Clinical Standards and Quality (CCSQ)** is responsible for developing, implementing, and enforcing quality standards for healthcare facilities and clinicians serving Medicare and Medicaid beneficiaries. In this role, CCSQ oversees quality measurement, improvement initiatives, and clinical standards that directly impact beneficiary care and outcomes. To inform the development and refinement of quality initiatives and

² <https://www.cms.gov/about-cms/leadership/office-communications>

³ <https://www.cms.gov/leadership/office-program-operations-local-engagement>

better understand beneficiary engagement with preventive care services, CCSQ requires timely data on beneficiary perspectives and experiences with key Medicare benefits.

The MCBS Pulse will enable CCSQ to rapidly gather insights on beneficiaries' perspectives and experiences, understand the factors that motivate beneficiaries to complete preventative care services (e.g., Annual Wellness Visits), and assess beneficiary experiences with care planning services. This time-sensitive information will support evidence-based refinements to quality measurement strategies, preventive care initiatives, and care planning programs, thereby improving the effectiveness of quality improvement efforts and enhancing beneficiary engagement with important Medicare benefits.

- The **CMS Office of Enterprise Data & Analytics, Data & Analytics Strategy Group (DASG)** builds and maintains APIs that support access to Medicare Parts A, B, and D claims data for more than 60 million beneficiaries and help ensure that this information is accurate, secure, and easy to use. The data include details about coverage, services received, prescriptions, and costs, which are important for managing care, supporting care coordination, and advancing research. DASG relies on beneficiary feedback to ensure these APIs meet user needs and continue to support informed decision-making across the health care system.

The MCBS Pulse will enable DASG to rapidly gather feedback on beneficiary perceptions, usage patterns, barriers to adoption, and opportunities for improvement across the suite of APIs. This time-sensitive information will support evidence-based program enhancements that address beneficiary concerns related to trust, security, data control, and communication, and help improve program awareness, adoption, and overall user experience.

Early Questionnaire Design

The development of new survey items is essential to ensuring the continued policy relevance of the MCBS and other CMS surveys and supporting CMS's ability to respond to evolving healthcare priorities. As the healthcare landscape continues to change, it is important for CMS to develop new survey items that capture information on new program or policy priorities and to fill measurement gaps for significant health areas.

The existing MCBS generic clearance (0938-1275) covers several types of research activities that support the MCBS, such as cognitive interviewing, focus groups, and field testing. These research activities are used by CMS to accomplish goals related to improving data quality and accuracy of questionnaire items, improving data collection methods, and reducing respondent burden.

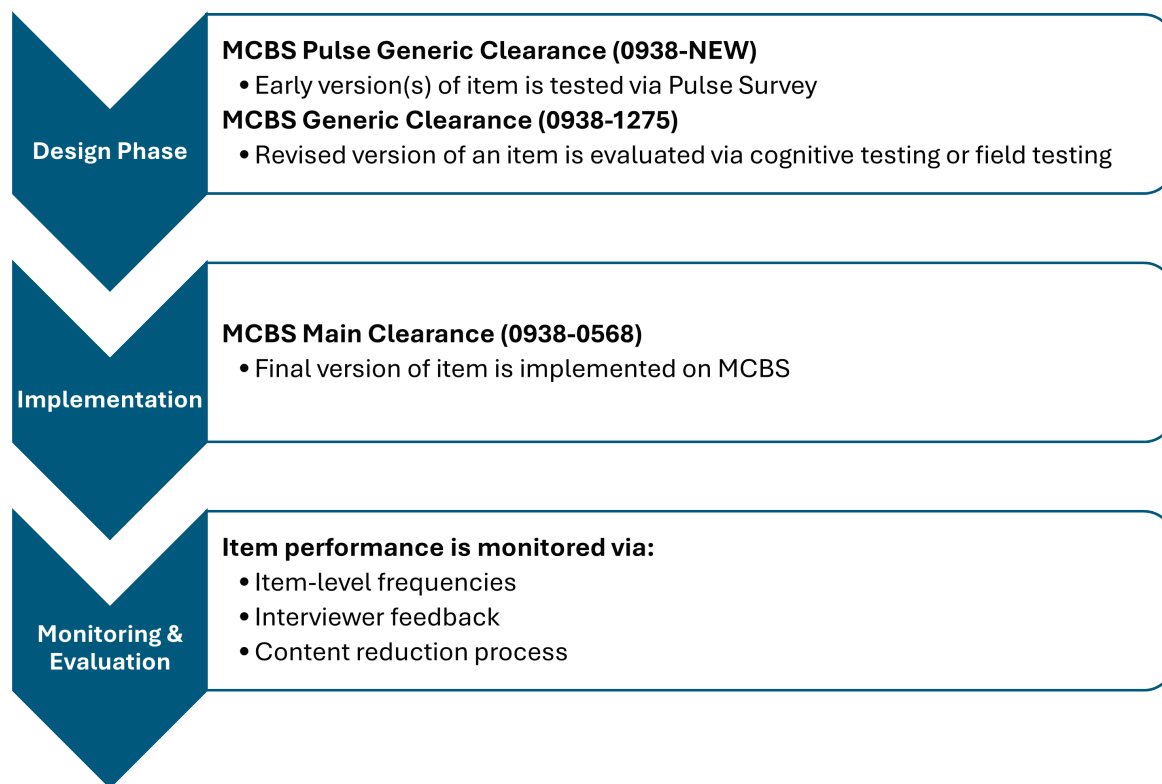
While critical to supporting the statistical rigor of the MCBS survey through the improvement of questionnaire items and survey methods, the existing generic clearance is not designed to offer rapid testing of nascent questionnaire concepts that CMS requires for timely policy responsiveness. Under the MCBS Pulse generic clearance, CMS aims to collect rapid turnaround feedback on early versions of new questionnaire items by incorporating Pulse items into an existing MCBS round of data collection. This may entail testing the performance and feasibility of early item concepts to determine if they would be understood by beneficiaries in the context of a general health survey. CMS could also leverage the MCBS Pulse to test multiple versions of an

item or conduct early question text development for other CMS surveys to determine what changes in wording or response options may provide more accurate measurements.

As an example, health experts at CMS have identified chronic headaches and migraines as a current gap in the MCBS Health Status and Functioning Questionnaire (HFQ) which is administered during the Fall round. The MCBS Pulse generic clearance could be used to test potential questions on chronic headaches and migraines to determine the best way to ask questions about headache severity and type, duration, associated symptoms, and quality of life impact.

CMS's vision is that the three MCBS clearances would work in concert to support efficient evolution of item design and content management. As shown in Exhibit 1, once early versions of an item are tested via the MCBS Pulse clearance, revised versions could then be further evaluated via cognitive testing or field testing on the existing MCBS generic clearance (0938-1275), if warranted. Final versions of the items would then be implemented on the MCBS survey via the main clearance (0938-0568). Item performance for MCBS Pulse items will be efficiently evaluated by leveraging existing procedures on the MCBS survey, including a review of item-level frequencies, interviewer feedback, and the content reduction process, which identifies long-standing or newly added items with data quality or other performance issues for removal from the survey.

Exhibit 1. Development of New Survey Items via the MCBS Clearance Vehicles



Beneficiary Feedback on Emerging Topics

As the nation's largest health insurer, CMS serves as a critical steward of taxpayer funds while advancing CMS leadership's agenda to empower beneficiaries to better manage their health and navigate the healthcare system, foster healthcare prevention and chronic disease management,

and reduce costs and increase price transparency. To support these objectives, CMS requires timely, preliminary insights from the Medicare population on emerging health concerns and evolving policy interests.

Items fielded under the MCBS Pulse generic clearance will be used to provide CMS decision-makers with rapid, directional feedback from the Medicare population on emerging and priority health concerns and policy interests. This feedback will serve as an additional data point to inform early-stage program exploration and planning. Pulse data will be used for exploratory purposes to identify areas warranting further investigation through more comprehensive research methods, inform preliminary program planning discussions, and provide early awareness of beneficiary perspectives on nascent policy considerations.

The MCBS Pulse is intended as a complement to, not a replacement for, the rigorous main MCBS survey and other CMS data collection and beneficiary engagement efforts. CMS recognizes that MCBS Pulse data, given its rapid-turnaround design and focus on directional insights, is not appropriate as a sole basis for policy decisions or regulatory actions. Rather, Pulse feedback will be integrated with administrative data, main MCBS findings, stakeholder input, and other evidence sources to develop a more comprehensive understanding of issues for program planning and operational considerations. For any policy initiatives requiring public input, CMS will follow all applicable notice and comment procedures as required by the Administrative Procedure Act and OMB guidance.

Implementation of MCBS Pulse Surveys

CMS will design MCBS Pulse surveys by working with CMS stakeholders who have time-sensitive data needs. Each individual survey is expected to be a very brief, one to five item collection that takes two minutes or less to administer.

For each individual survey, CMS will submit an individual collection request (ICR) under this generic clearance and will provide OMB with a brief memo explaining the specific purpose and procedures for each collection, as well as copies of all questionnaires or respondent materials. Due to the urgency of obtaining data on Pulse topics, and to enable timely operational decision-making, CMS requests that OMB reviews and approves Pulse ICRs within five business days.

NORC at the University of Chicago, under contract with CMS to administer the MCBS, will conduct activities under this generic clearance. Once the questionnaire items are finalized and programmed, the MCBS Pulse survey will be fielded to existing MCBS respondents for up to two weeks alongside regular MCBS production. The items will be programmed and administered outside of the current production environment as they are substantively different from the main MCBS and will not be fielded for the full data collection period. CMS has already demonstrated effectiveness of this process most recently with the MCBS Beneficiary Trust Pulse Supplement (CMS 10549 GenIC #8, approved September 16, 2025). Professional MCBS field interviewers will be trained to administer these questions.

Given the rapid turnaround of Pulse surveys and their focus on timely insights rather than high statistical precision, achieving response rates or sample sizes equivalent to a full MCBS data collection round is not required. As such, starting in Summer 2026 Round 105 and each round thereafter, each individual MCBS Pulse survey will be fielded for up to two weeks within a

current data collection round. Because the MCBS design includes three rounds per year, each lasting approximately 16 weeks, CMS will be able to conduct multiple Pulse surveys each round based on operational need.

A3. Use of Information Technology and Burden Reduction

To keep respondent burden at a minimum, Community-dwelling MCBS respondents will be asked to participate in the MCBS Pulse survey immediately after the conclusion of their main MCBS interview. Based on prior experiences with interviewer-administered MCBS supplemental surveys, CMS expects the majority of respondents to agree to the additional Pulse questions. The Pulse survey will be conducted with the trained MCBS field interviewer who administered the main interview via computer assisted personal interview (CAPI) on an MCBS issued tablet. The Pulse survey may be conducted via in-person, phone, or video interviewing, depending on the mode of data collection for the main MCBS interview.

All interview modes will leverage the same interviewer-administered CAPI technology. While the MCBS Pulse surveys are expected to be brief one to five item surveys with limited complexity, CAPI technology will ensure that interviewers are able to move quickly and seamlessly through the item series.

A4. Efforts to Identify Duplication and Use of Similar Information

The MCBS Pulse clearance does not duplicate any other questionnaire design work being done by CMS or other Federal agencies. No information to be obtained from the proposed testing currently exists. The research may involve collaboration with staff from other agencies. All efforts will be collaborative and no duplication in this area is anticipated.

The MCBS Pulse surveys are not intended to duplicate data collected in other CMS surveys, including the MCBS main or generic clearance or the CMS OC surveys, which focus strictly on service delivery and CMS operations. Instead, the MCBS Pulse is intended to fill gaps in data collections that gather important beneficiary feedback on program development, survey item design, and emerging issues but require a shorter turn-around. Importantly, the MCBS Pulse leverages the MCBS's comprehensive beneficiary characteristic data to enable subgroup analyses that are not possible with other survey mechanisms, providing CMS offices like OC with stratified insights that inform targeted program strategies beyond what aggregate-level data can provide.

A5. Impact on Small Businesses and Other Small Entities

Items fielded under this MCBS Pulse generic clearance will only be administered to individuals in households.

A6. Consequences of Collecting the Information Less Frequently

The new MCBS Pulse generic clearance request will enhance operational efficiency through time-sensitive, data-driven information collection for evidence-based policy development and decision making. Less frequent collection of this data will render CMS unable to make evidence-based operational adjustments that directly impact more than 69 million beneficiaries.

This clearance only involves one-time data collection for each set of MCBS Pulse items. Any interest in continuing collection of Pulse items will be reflected in revisions to the main MCBS clearance (0938-0568) or further testing under the MCBS generic clearance (0938-1275).

A7. Special Circumstances Relating to Guidelines of 5 CFR 1320.5

None of the special circumstances listed by OMB apply to this MCBS research program.

A8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside Agencies

The 60-day Federal Register notice was published on January XX, 2026 (XX FR XXXX).

A9. Explanation of Any Payment or Gift to Respondents

Fielding activities conducted under this clearance will not provide payments or gifts as incentives to respond. The most important incentive the MCBS uses is to persuade the respondent that his or her participation is a service to the future of Medicare.

A10. Assurances of Confidentiality Provided to Respondents

Authority for maintenance of the MCBS system is given under section 1875 of the Social Security Act (42 United States Code 13951l). On February 14, 2018, CMS published in the Federal Register a notice of a modified or altered System of Record (SOR) (System No. 09-70-0519). The notice was published in 83 Federal Register 6591.

All respondents who participate in the MCBS under this clearance will be informed that the information they provide will be kept private and that their participation is voluntary.

At the conclusion of the main MCBS survey and just prior to beginning the Pulse survey, the interviewers will read a brief consent script that explains the purpose of the test and informs respondents that the information they provide will be kept private and that their participation is voluntary. If respondents agree to participate, the interviewer will begin administering the Pulse survey items.

Interviewer training stresses the importance of maintaining privacy. The MCBS interviewer's manual specifically addresses this, and it is part of the training for all interviewers. Procedures have been established to maintain and ensure privacy. These include computer security procedures (e.g., laptop password encryption).

CMS will take precautionary measures to minimize the risks of unauthorized access to the records and the potential harm to the individual privacy or other personal or property rights of the individual.

All MCBS survey staff directly involved in MCBS data collection and/or analysis activities are required to sign confidentiality agreements. Furthermore, all MCBS beneficiary-level data are protected from public disclosure in accordance with the Privacy Act of 1974, as amended.

A11. Justification for Sensitive Questions

In general, the MCBS does not ask sensitive questions. However, given that the MCBS Pulse surveys are designed to ask about feedback on different aspects of the Medicare program and emerging issues, some of the survey topics may be considered potentially sensitive by a small number of respondents. If there is a need to administer sensitive questions as part of an MCBS Pulse survey, it will be explained and justified in the specific information collection submitted to OMB for approval. All MCBS interviewers are trained on how to handle respondent concerns about question sensitivity. Further, respondents are advised of the voluntary nature of their participation in the survey or any of its components. Beneficiaries are informed that they can choose not to answer any questions they do not wish to answer and that they may stop the interview at any time.

A12. Estimates of Annualized Burden Hours and Costs

Table 1 is based on the maximum number of data collections expected on an annual basis under this generic clearance. The total estimated respondent burden and costs are calculated below. For the purposes of estimating burden, CMS assumes that most MCBS respondents living in the community (e.g., households) will respond to one Pulse survey in a given data collection round. In compliance with the Terms of Clearance on the main MCBS clearance (0938-0568), CMS is coordinating this Pulse clearance request with strategic burden reductions in the main MCBS survey, ensuring the Pulse surveys are burden-neutral with no net increase in respondent burden. These coordinated changes will create dedicated capacity for year-round Pulse fielding.

Table 1. Estimated Annual Reporting Burden, by Round

Data Collection Period	Number of Respondents	Frequency of Response	Hours Per Response	Total Hours
Winter Round	10,619	1	0.033	350
Summer Round	7,880	1	0.033	260
Fall Round	12,618	1	0.033	416
TOTAL	31,117		0.10	1,026

The estimated annualized costs to respondents is based on the Bureau of Labor Statistics (BLS) data from May 2024, http://www.bls.gov/oes/current/oes_nat.htm. The mean hourly wage for all occupations is \$32.66.

The estimated annualized annual costs are outlined in Table 2.

Table 2. Estimated Annual Costs

Data Collection Period	Wages	Total Hours	Total Costs
Winter Round	\$32.66	350	\$11,431
Summer Round	\$32.66	260	\$8,492
Fall Round	\$32.66	416	\$13,587
TOTAL		1,026	\$33,510

A13. Estimates of Other Total Annual Cost Burden to Respondents and Record Keepers

No capital costs.

A14. Annualized Costs to the Federal Government

The cost to the government for this Generic Clearance consists mainly of the salaries of CMS and NORC contractor staff who 1) assist with questionnaire design, 2) recruit, schedule, and assist in interviewing respondents, and 3) assist in the analysis of results, reporting, and recommendations. At this time, we cannot anticipate the exact number of participants, length of interview, and/or mode of data collection for the surveys to be conducted under this clearance. Estimated annualized costs for developing this Generic Clearance extension and testing items under this clearance are shown below. All costs related to this clearance are covered by CMS under the existing MCBS budget.

Table 3. Personnel or Other Direct Cost

Personnel or Other Direct Cost	Estimated Cost
CMS Personnel (GS13-GS15 at 8.00 FTE)	\$1,263,688
NORC Contracting Costs	\$23,570,000

A15. Explanation for Program Changes or Adjustments

This is a new clearance request to support this new data collection system.

A16. Plans for Tabulation and Publication and Project Time Schedule

This clearance request supports rapid collection of time-sensitive beneficiary feedback to inform program planning, operational decision-making, and early-stage questionnaire development. Fielding of MCBS Pulse surveys will commence in Summer 2026 Round 105 and continue in each round thereafter. Each individual Pulse survey will include no more than five items and will be fielded for up to two weeks within a given MCBS data collection round.

The frequency of Pulse surveys will depend on the Agency's operational needs, stakeholder demand for time-sensitive data, and the nature of emerging issues requiring rapid beneficiary input. Given the multiple CMS offices and program areas that may require timely feedback, CMS anticipates fielding multiple Pulse surveys per MCBS data collection round. The annual schedule for information collection for May 2026 – April 2029 is the same as for the main MCBS clearance package (0938-0568, expiration 01/31/2029).

The timeline from ideation to dissemination of insights to CMS stakeholders is approximately nine weeks. Following data collection, CMS will make data available to internal decision-makers in a timely fashion after the completion of each Pulse survey.

An important aspect of the Pulse survey system will be a data dissemination strategy that communicates the strengths and limitations of data collected through the Pulse's rapid approach. Consistent with CMS's commitment to quality, transparency, and standards of practice, CMS will carefully evaluate the quality of the data and clearly communicate what is known about its validity, accuracy, and the appropriate uses of each dataset.

Internal dissemination modes may include internal infographics, data briefs, or tables with basic descriptive statistics, and restricted-use internal files. All analytic products will include highly visible information regarding data quality and any limitations. In addition, CMS may share information on questionnaire development with the public at academic conferences.

A17. Reason(s) Display of OMB Expiration Date is Inappropriate

No exemption is requested.

A18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions to this certification statement.