

PAPERWORK REDUCTION ACT SUBMISSION WORKSHEET
Part I: Information Collection Request

This template is intended for staff without an ICRAS account. Please fill out and submit to the appropriate Operating Division to enter into ICRAS. The form mirrors the screens available in the ICRAS 4 system. To request an account to log into ICRAS.

Instructions for filling out the form are available at www.paperworkreduction.gov.

1. Agency/Subagency originating request HHS/CDC	
2. Title Minimum Data Elements (MDEs)/System for Technical Assistance Reporting (STAR) for the National Breast and Cervical Cancer Early Detection Program (NBCCEDP)	
3. Type of information collection (check one) (See instructions) <input type="checkbox"/> New collection (Request for a new OMB Control Number) <input type="checkbox"/> Extension without change of a currently approved collection <input type="checkbox"/> Revision of a currently approved collection <input checked="" type="checkbox"/> Reinstatement without change of a previously approved collection <input type="checkbox"/> Reinstatement with change of a previously approved collection <input type="checkbox"/> Nonmaterial or nonsubstantive change to a currently approved collection (formerly 83C) <input type="checkbox"/> Existing collection in use without and OMB Control Number	4. OCN: <u>0920-0571</u> _____
5. Type of review requested (check one) a. <input checked="" type="checkbox"/> Regular b. <input type="checkbox"/> Emergency - Approval requested by: _____/_____/_____ c. <input type="checkbox"/> Delegated <i>If Emergency, please attach justification. (4000 characters maximum)</i>	6. Requested expiration date (check one) a. <input checked="" type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Six Months from approval date (Maximum for Emergency reviews) c. Other Specify: _____/_____/_____ (mm/yy) or Number of Months from Approval Date
7. Abstract (4000 characters maximum, attach additional sheets as necessary) Background and Brief Description The NBCCEDP was established in response to the Congressional Breast and Cervical Cancer Mortality Prevention Act of 1990. This Act mandates a program that will provide early detection and breast and cervical cancer screening services for under-served women. CDC proposes to aggregate breast and cervical cancer screening, diagnostic, and treatment data from NBCCEDP grantees at the state, territory, and tribal level. These aggregated data will include demographic information about women served through funded programs. The proposed data collection will also include infrastructure data about grantee management, public education and outreach, professional education, and service delivery. Breast cancer is a leading cause of cancer-related death among American women. The American Cancer Society (ACS) estimated that 211,240 new cases would be diagnosed among women in 2005, and 40,410 women would die of this disease. Mammography is extremely valuable as an early detection tool because it can detect breast cancer well before the woman can feel the lump, when it is still in an early and more treatable stage. Women older than age 40 that receive annual mammography screening reduce their probability of breast cancer mortality and increase their treatment options. Although early detection efforts have greatly decreased the incidence of invasive cervical cancer in recent decades, ACS estimated that 10,370 new cases would be diagnosed in 2005 and 3,710 women would die of this disease. Papanicolaou (Pap) tests effectively detect precancerous lesions in addition to invasive cervical cancer. The detection and treatment of precancerous lesions can prevent nearly all cervical cancer-related deaths. Because breast and cervical cancer screening, diagnostic and treatment data are already collected and aggregated at the state, territory and tribal level, the additional burden on the grantees will be small. Continuation of this program will require grantees to report a minimum data set (MDE) on screening and follow-up activities electronically to the CDC on a semi-annual basis. The program will require grantees to report infrastructure data (STAR) to the CDC annually using a web-based system. Information collected will be used to obtain more complete breast and cervical cancer data, promote public education of cancer incidence and risk, improve the availability of screening and diagnostic services for under-served women, ensure the quality of services provided to women, and develop outreach strategies for women that are never	

\$ 991,751_____

Phone: _____

E-mail: _____

12. Does this ICR contain surveys, censuses, or employ statistical methods?

Yes (Attach Part B of Supporting Statement) No

13. Is the Supporting Statement intended to be a Privacy Impact Assessment required by the E-Government Act of 2002?

Yes No

PAPERWORK REDUCTION ACT SUBMISSION WORKSHEET
 Part I: Information Collection Request (continued)
Information Collection Budget (ICB)

If a change in burden is due to a Program Change Due to New Statute, identify the Citations for New Statutory Requirements:

Public Law:

Congress Number	Sequence Number	Section	Name

US Code:

Title	Section	Name

Executive Order:

Number	Name

Statute:

Title	Subtitle

If Program Change is due to Agency Discretion, please categorize the reduction. Burden reduction from (select one):

- a. Cutting Redundancy
- b. Using Information Technology
- c. Changing Regulations
- d. Changing Forms
- e. Miscellaneous Actions

If Program Change is due to Agency Discretion, please categorize the increase in burden. Burden increase caused by (select one):

- a. Changing Regulations
- b. Miscellaneous Actions

Explain the reasons for any program changes or adjustments reported; that is, provide a short statement how the reduction in burden was achieved or why the increase in burden occurred. (If you need more space, please provide a short summary here and elaborate in the Supporting Statement.)
