

NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 01/31/2005

Department of Health and Human Services
Agency for Healthcare Research and Quality
FOR CERTIFYING OFFICIAL:
FOR CLEARANCE OFFICER:

In accordance with the Paperwork Reduction Act, OMB has taken action on your request received 11/15/2004

ACTION REQUESTED: New collection (Request for a new OMB Control Number)

TYPE OF REVIEW REQUESTED: Regular

ICR REFERENCE NUMBER: 200411-0935-001

TITLE: Questionnaire and Data Collection Testing, Evaluation, and Research for the Agency for Healthcare Research and Quality

LIST OF INFORMATION COLLECTIONS: See next page

OMB ACTION: Approved with change

OMB CONTROL NUMBER: 0935-0124

The agency is required to display the OMB Control Number and inform respondents of its legal significance in accordance with 5 CFR 1320.5(b).

EXPIRATION DATE: 01/31/2008

DISCONTINUE DATE:

BURDEN:	RESPONSES	HOURS	COSTS
Previous	0	0	0
New	10,500	5,200	0
Difference			
Change due to New Statute	0	0	0
Change due to Agency Discretion	10,500	5,200	0
Change due to Agency Adjustment	0	0	0
Change due to PRA Violation	0	0	0

TERMS OF CLEARANCE: Approved consistent with AHRQ memo submitted to OMB 01/26/05. AHRQ will submit individual requests under this generic clearance to OMB including 1. a running tally of the total number of approved hours and respondents currently in use under the generic clearance; in the event that additional hours are required, AHRQ should submit an 83-C change worksheet to OMB 2. a justification section describing the proposed collection and any planned analysis in detail, specifically addressing the relevance of the collection to the overall structure of the generic clearance. OMB will attempt to provide comments within ten days of official receipt of individual clearance requests under this generic. AHRQ must receive explicit OMB approval prior to the fielding of any proposed collections under this clearance.

OMB Authorizing Official:

Donald R. Arbuckle
Deputy Administrator,
Office of Information and Regulatory Affairs

List of ICs

IC Title	Form No.	Form Name	CFR Citation
Questionnaire and Data Collection Testing, Evaluation, and Research for the Agency for Healthcare Research and Quality			