

**Statement in Support of Application for Waiver of Inadmissibility
under Immigration and Nationality Act
(OMB Control No. 0920-0006)**

**Request for Extension of Currently Approved Data Collection
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Request for Extension

A. Justification

1. Circumstances Making the Collection of Information Necessary

The purpose of this submission is to request an extension of the current OMB approval of the information collection "Statement in Support of Application for Waiver of Inadmissibility," (OMB No. 0920-0006), including standardized format for required evaluation report. This information collection is authorized under 8 USC Section 212(a)(1)(A)(i) and 212(a)(1)(A)(iii)(I) or 212(a)(1)(A)(iii)(II), Immigration and Nationality Act (INA), amended as of September 30, 1996. (Attachment 1)

Background

Section 212 (a) of the INA states that aliens with specific health-related grounds are ineligible to receive visas and ineligible for admission into the United States. The conditions are listed in subsections as follows:

(i) aliens who have a communicable disease of public health significance, which include infection with the etiologic agent for acquired immune deficiency syndrome,

(iii) (I) aliens who have a physical or mental disorder and behavior associated with the disorder that may pose, or has posed, a threat to the property, safety, or welfare of the alien or others; or

(iii) (II) aliens who have had a physical or mental disorder and a history of behavior associated with the disorder, which behavior has posed a threat to property, safety, or welfare of the alien or others and which behavior is likely to recur or lead to other harmful behavior.

However, section 212(g) of the INA authorizes the Attorney General to waive certain inadmissible health-related grounds which would allow an alien to overcome his/her inadmissibility. The Centers for Disease Control and Prevention (CDC) becomes involved in the waiver process as the recipient of a medical evaluation report, as indicated in the regulations (8 CFR 212.7) (Attachment 2):

“the alien or the alien’s sponsoring family member shall submit a statement to the consular or Service office. The statement must be from a clinic, hospital, institution, school, or other specialized facility or specialist in the United

States ... who will complete the evaluation and provide an evaluation report to the Centers for Disease Control and Prevention.”

CDC’s Division of Global Migration and Quarantine (DGMQ) works closely with the Department of Homeland Security (DHS)’s office of U.S. Citizenship and Immigration Services (USCIS). To obtain the waiver, the alien follows the subsequent steps:

- a) The alien contacts the consular office or immigration officer to obtain the Department of Justice, Immigration and Naturalization Service (INS) form I-724. (Note: Form I-724 replaced Form I-601)
- b) The requesting consular officer overseas or the immigration officer in the U.S. sends the medical documents and the I-724 form to CDC/DGMQ.
- c) DGMQ reviews the medical information submitted to determine if the applicant meets the medical requirements for a waiver under Section 212(a)(1)(A)(i) or Section 212(a)(1)(A)(iii)(I) or (II) as outlined above.
- d) If the waiver is under Section 212(a)(1)(A)(i), the I-724 form is reviewed for identification of the medical facility or specialist in the U.S. who agrees to perform the applicant’s initial evaluation. If the waiver is under Section 212(a)(1)(A)(iii)(I) or (II), DGMQ issues and completes Part I of CDC Form 4.422-1 (Attachment x) as the Reviewing Official.
- e) CDC’s response is transmitted to the requesting consular officer or immigration officer. As applicable, that office, in turn, forwards form I-724 or CDC Form 4.422-1 to the applicant’s sponsor in the U.S. for completion.
- f) The applicant’s sponsor locates a medical facility or specialist in the U.S. who will agree to perform the applicant’s initial evaluation. As applicable, the physician completes form I-724 or Part II of CDC form 4.422-1, indicating that he/she will indeed perform the applicant’s initial evaluation after the applicant arrives in the U.S.
- g) The applicant (or applicant’s sponsor) completes, as applicable, form I-724 or Part III of CDC form 4.422-1, affirming that he/she will report to the specialist or facility that completed Part II.
- h) Completed forms are returned to DGMQ for final review and notification to the consular or immigration officer. DHS does not normally grant a waiver under Section 212(a)(1)(A)(i) under form I-724 is completed, or grant a waiver under Section 212(a)(1)(A)(iii)(I) or (II) until Parts I, II, and III of CDC form 4.422-1 are completed.
- i) Once the waiver is approved and the applicant has arrived in the U.S., the evaluation occurs.
- j) The medical facility or specialists in the U.S. submits the evaluation report to DGMQ. The suggested format for the evaluation report is CDC form 4.422-1a for mental disorders and CDC form 4.422-1b for HIV infection (Attachment 4).

Respondents to this data collection include healthcare providers who complete form I-724 for HIV waiver applicants and Part II of CDC form 4.422-1 for mental illness waiver applicants and submit the appropriate evaluation report. Respondents also include the

applicant or sponsoring family member who completes the I-724 form or Part III of CDC form 4.422-1.

Privacy Impact Assessment

Overview of the Data Collection System:

Items of Information to be Collected: The information collected includes personal and identifiable information on the alien; it includes a medical evaluation of the alien. The primary purpose of the forms is to maintain adequate records on waiver applicants, thereby complying with the regulations set forth by USCIS. The information in identifiable form includes name, address, date of birth, INS file number, and medical information.

Identification of Website(s) and Website Content Directed at Children Under 13 Years of Age: This information collection does not involve use of websites; nor is the data collection directed at children under 13 years of age.

2. Purpose and Use of Information Collection

The Department of Homeland Security, U.S. Citizenship and Immigration Services (USCIS) regulations require that a statement be furnished from a facility or specialist agreeing to see the waiver applicant for an initial evaluation after arrival in the U.S. The statement is reviewed by CDC and submitted to the consular or immigration official before the applicant is approved for a waiver. The initial reports furnished by the specialist or facility are submitted to DGMQ to confirm that the individual reported to the facility or specialist and that an initial evaluation was done. DGMQ considers the primary purpose of these forms to be to maintain adequate records on waiver applicants, thereby complying with the regulations set forth by USCIS. Also, Section 237 of the INA was amended to subject an alien to deportation if the Secretary of Health and Human Services certifies that the alien has failed to comply with the terms, conditions, and controls imposed by the waiver. If an alien enters the U.S. with an approved waiver and fails to comply with the terms, conditions, and controls imposed by receiving a waiver, CDC could share this information with the USCIS.

Privacy Impact Assessment Information

3. Use of Improved Information Technology and Burden Reduction

Minimal information is collected to carry out CDC responsibilities required by law. Collection of this information electronically is impractical because most respondents are one-time respondents, in addition to confidentiality issues.

4. Efforts to Identify Duplication and Use of Similar Information

No similar information is available. Reports relate to aliens who enter the U.S. with an approved waiver of grounds of inadmissibility. Regulations require reports to be furnished to the Director, Division of Global Migration and Quarantine, Centers for Disease Control and Prevention, Atlanta, Georgia. No other component of the Public Health Service is involved in the medical examination of aliens and waiver procedures.

5. Impact on Small Businesses or Other Small Entities

Collection of information may or may not involve small business. The applicant's family can choose the physician or medical facility that they wish to perform the follow-up evaluation. The information requested has been held to the absolute minimum required for the intended use of the data.

6. Consequences of Collecting the Information Less Frequently

Less frequent data collection would not conform to the regulations. There are no legal obstacles to reduce the burden.

7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

The data collection requirements are consistent with the guidelines in 5 CFR 1320.5.

8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

A. A 60-day Notice was published in the *Federal Register* on 08/14/2008, Vol. 73, No.158, pp. 47604 (Attachment 3). There were no public comments to the Notice.

B. The Department of Homeland Security (DHS) provides guidance concerning its regulations pertaining to the health-related grounds of inadmissibility and the waiver requirements to overcome the inadmissibility. CDC's contact person for DHS is Mark Rouse, Adjudications Division, U.S. Citizenship and Immigration Services, Department of Homeland Security, Washington, D.C., phone (202) 514-4754.

9. Explanation of Any Payment or Gift to Respondents

There are no payments or gifts to respondents.

10. Assurance of Confidentiality Provided to Respondents

Privacy Impact Assessment Information

A. Technically, the Privacy Act applies only to U.S. citizens and lawfully admitted aliens. However, in a previous submission, the HHS Privacy Act Advocate indicated that there was no legal barrier to extending Privacy Act protection to the respondents in this information collection request. Therefore, CDC's judgment has been that the Privacy Act

is applicable to this data collection. The applicable Systems of Record Notice is 09-02-0102: Alien Mental Waiver Program.

B. The personal and identifiable information on the alien is filed and retrieved by name and date and country of birth. In many cases, the alien registration number given to the alien by USCIS is also provided to DGMQ for identification purposes.

The information on each alien is maintained in both individual hard copy files and a computer database. The hard copy files are kept in locked file cabinets and access to the computer database is restricted. A limited number of both employees and contractors have access to the files and to the computer database.

C. There is no separate consent form; however, the alien and/or alien's family member must sign Part III of CDC form 4.422-1 (Attachment 4) indicating compliance with conditions of waiver which include submission of the medical evaluation to CDC.

D. The alien and/or alien's family member must sign Part III of CDC form 4.422-1 (Attachment x) indicating compliance with conditions of waiver. Failure to comply with the terms, conditions, and controls of the waiver of inadmissibility may subject the alien to deportation under the INA. This advisory is printed at the bottom of CDC form 4.422-1.

11. Justification for Sensitive Questions

The report furnished is a medical evaluation of the alien. Information of a sensitive nature may be voluntarily furnished by the specialist or facility in the report. As part of the waiver procedure, the alien is aware that the medical evaluation will be furnished to DGMQ and that because the report is an evaluation of his/her physical/mental disorder, sensitive information may be included in the report that is forwarded to CDC.

12. Estimates of Annualized Burden Hours and Costs

A. Estimate of Annualized Burden Hours

All respondents are physicians/health care providers, and they are the only respondents allowed to provide information on various forms. An estimated 300 applicants each year will meet the medical requirements for a waiver. Each year approximately 200 of the 300 approved waiver applicants are actually admitted into the U.S. and are subject to the required medical evaluation. The number of waiver applicants, as well as the number approved who are actually admitted to the U.S. and are subject to the required medical evaluation is approximately the same for both applicable sections of the law, Section 212(a)(1)(A)(i) and (ii). There are no official reporting forms required for furnishing the initial reports of the applicant after admission in the U.S. These reports are prepared after the specialist or facility has completed an evaluation of the applicant. Since the report is based on information already obtained, CDC estimates the reports will require only 10 minutes of the specialist's or facility staff's time. Forms are the suggested format for the

evaluation report, CDC for 4.422-1a for mental disorders and CDC 4.422-1b for HIV infection.

Form	Number of Respondents	Number of Responses per Respondent	Average Burden per Response (in hours)	Total Burden Hours
CDC 4.422-1	200	1	10/60	33
CDC 4.422-1a	200	1	20/60	67
CDC4.422-1b	200	1	20/60	67
Total				167

B. Estimates of Annualized Cost to Respondents

The annualized cost to respondents is an estimate since different healthcare providers have different rates and the applicant must pay for any charges involved in the evaluation. Some healthcare providers, e.g., regional medical centers, are mandated by State law to provide services if the applicant resides in their area of jurisdiction. Using an average physician's wage of \$100 per hour, the calculated annualized cost to respondent is \$16,700.00.

Forms	Total Burden Hours	Hourly Wage Rate	Total Respondent Costs
CDC Form 4.422-1	33	\$100.00	\$3,300.00
CDC Form 4.422-1a	67	\$100.00	\$6,700.00
CDC Form 4.422-1b	67	\$100.00	\$6,700.00
Total	167		\$16,700.00

13. Estimates of Other Total Annual Cost Burden to Respondents or Record Keepers

The respondents must mail the forms and other documents to CDC for evaluation. CDC estimates that the mailing cost per respondent will be \$80 per year, for a total cost to respondents of \$16,000.

14. Annualized Cost to the Government

Approximate cost to the Federal government each year:

- Professional services provided by psychiatric consultant \$18,000
- CDC Professional and Clerical staff \$68,000
- Printing and mailing forms \$ 4,000

Total annualized cost to the Federal government \$90,000

15. Explanation for Program Changes or Adjustments

The burden has not changed from the burden shown in the current inventory.

16. Time Schedule, Publication, and Analysis Plans

There are no plans for publishing any information obtained either on the waiver forms or from the reports furnished to CDC.

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

No exemption is requested.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions to the certification.

B. Collections of Information Employing Statistical Methods

This information collection does not involve statistical methods. The collection of information is authorized under Immigration regulations, which require that a statement be furnished from a facility or specialist agreeing to see a waiver applicant for an initial evaluation after arrival in the U.S. The statement is generated by CDC with Part I completed with information provided on the immigration waiver form (I-724), which includes the race/ethnicity of the applicant. Part II and III must be completed by the physician and applicant or physician and applicant's sponsor. The completed statement must be reviewed by CDC before an applicant is approved for a waiver. The initial reports from the facility or specialist are furnished to CDC to confirm that the individual did report to the facility or specialist and that an initial evaluation was done in compliance with the terms, conditions, and controls imposed by the waiver.

List of Attachments

- Attachment 1:** Section 212(a) and (g) of the Immigration and Nationality Act
- Attachment 2:** 8 CFR 212.7
- Attachment 3:** 60 day Federal Register Notice
- Attachment 4:** CDC forms 4.422-1, 4.422-1a; and 4.422-1b