

Supporting Statement for State Health Information Exchange Cooperative Agreement Program: Full Application

A. Justification

1. Circumstances Making the Collection of Information Necessary

The Office of National Coordinator for Health Information Technology (ONC) is requesting emergency action for this clearance by the Office of Management and Budget no later than 8/28/09. ONC is requesting emergency processing procedures for this application because this information is needed immediately to assure that ARRA funds are used timely and effectively to support electronic health record adoption which will improve the health care and quality.

The purpose of this program, as authorized by Section 3013 of the American Recovery and Reinvestment Act is to provide grants to States and Qualified State Designated Entities for planning and implementation of interoperable health information technology. The applications assist ONC in determining which States and State Designated Entities meet the requirements for award.

2. Purpose and Use of Information Collection

Applicants are required to submit the information in attachment 1 that are associated with the application process so that ONC may make a determination about whether to award a cooperative agreement.

3. Use of Improved Information Technology and Burden Reduction

All documents will be submitted electronically using grants.gov. ONC staff will analyze the data electronically and communicate with the practices using email.

4. Efforts to Identify Duplication and Use of Similar Information

Since this is a new program that was created through ARRA the information that will be collect has never been collected before by the federal government.

5. Impact on Small Businesses or Other Small Entities

No impact on small business.

6. Consequences of Collecting the Information Less Frequent Collection

One time data collection.

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

No special circumstances.

8. Comments in Response to the Federal Register Notice/Outside Consultation

Due to the emergency nature of the program announce, OMB has waived the FRN

requirements for this collection.

9. Explanation of any Payment/Gift to Respondents

Not applicable

10. Assurance of Confidentiality Provided to Respondents

No personal information will be collected other than general contact information. All grant information will be kept confidential as possible.

11. Justification for Sensitive Questions

No sensitive information will be collected.

12. Estimates of Annualized Burden Hours (Total Hours & Wages)

12A. Estimated Annualized Burden Hours

Type of Respondent	No. of Respondents	No. Responses per Respondent	Average Burden per Response (in hours)	Total Burden Hours
State Health Information Technology Coordinator or State Designated Entity	50	1	280	14,000

12B. Cost estimates for a single respondent that has to complete the preliminary application

Type of Respondent	Total Burden Hours	Hourly Wage Rate	Total Respondent Costs
Program Manager	140	*\$35.00	\$4900
Program Assistant	140	*\$20.00	\$2800
Total	280		\$7,700

*From the Bureau of Labor Statistics

13. Estimates of other Total Annual Cost Burden to Respondents or Record Keepers/Capital Costs

There are no additional recordkeeping/capital costs.

14. Annualized Cost to Federal Government

The program will use both federal and consulting resources to accomplish the objective review.

Type of Federal employee support	Total Burden Hours	Hourly Wage Rate	Total Federal Costs
Federal Reviewers	100	*\$65.62	\$6562
Technical Consultants	100	**\$85.00	\$8500
Total	200		\$15,162

*Salaries are based on a 15 Grade/Step 5 in Washington DC area.

**Salaries are based on current contract support.

15. Explanation for Program Changes or Adjustments

This is a new data collection.

16. Plans for Tabulation and Publication and Project Time Schedule

Data collection will begin as soon as clearance is received.

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

Not applicable.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions to the certification.

B. Collection of Information Employing Statistical Methods If statistical methods will not be used to select respondents and item 17 on Form 83-I is checked “No” use this section to describe data collection procedures.

The applications will be reviewed but the data will not be analyzed using statistical methods.

Attachment 1: Contains the application requirements outside those collected by Standard Form 424A.