

**Request for Approval under the “Generic Clearance for the Collection of
Routine Customer Feedback” (OMB Control Number: 0990-0379)**

TITLE OF INFORMATION COLLECTION: Survey for Obtaining Feedback on HIPAA Training for State Attorneys General & Staff

PURPOSE:

State Attorneys General Training:

Over the past year, the Office for Civil Rights (OCR) has provided in-person training and computer-based training materials on the Health Insurance Portability and Accountability Act (HIPAA) for staff of the State, Territorial, and District of Columbia Attorneys General. OCR provided this training to help prepare the offices of the Attorneys General to exercise their authority under the Health Information Technology for Economic and Clinical Health (HITECH) Act to enforce the HIPAA regulations on behalf of the residents of their states and territories. OCR would like to obtain feedback from those who attended the in-person training sessions or completed the computer-based training to learn whether the training was useful and to improve future training for this audience.

DESCRIPTION OF RESPONDENTS:

Employees of the offices of Attorneys General who participated or will participate in the HIPAA training.

TYPE OF COLLECTION: (Check one)

- | | |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> Other:_____ |

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: Zinethia Clemmons

To assist review, please provide answers to the following question:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? [] Yes [X] No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [] Yes [] No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? [] Yes [] No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [] Yes [X] No

BURDEN HOURS: In-Person Training Survey

Category of Respondent	No. of Respondents	Participation Time	Burden
(3) State, local, or tribal governments	110	5 minutes each	9.17 hours
Totals	110	5 minutes each	9.17 hours

BURDEN HOURS: Computer-Based Training Survey

Category of Respondent	No. of Respondents	Participation Time	Burden
(3) State, local, or tribal governments	220	5 minutes each	18.33 hours
Totals	220	5 minutes each	18.33 hours

TOTAL BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
(3) State, local, or tribal governments	330	5 minutes each	27.5 hours
Totals	330	5 minutes each	27.5 hours

FEDERAL COST:

The estimated cost to the Federal government is \$325.28. OCR will post this survey on the HHS.gov web site thus eliminating postage and other fees associated with mailing the survey.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?
[X] Yes [] No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

OCR will send emails to individuals who attended the in-person training directing them to a url where they can complete and anonymously submit their survey responses. OCR will also send a letter to each Attorney General requesting that a staff member who has completed the computer-based training follow the url to the survey.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)

Web-based or other forms of Social Media

Telephone

In-person

Mail

Other, Explain

Will interviewers or facilitators be used? Yes No