**Supporting Statement for Form SSA-680**

# Social Security Administration

# Health IT Partner Program Assessment –

# Participating Facilities and Available Content Form

**OMB No. 0960-NEW**

**A. Justification**

**1. Introduction/Authoring Laws and Regulations** -The *Health Information Technology for Economic and Clinical Health (HITECH) Act*, enacted as part of the *American Recovery and Reinvestment Act of 2009*, promotes the adoption and meaningful use of health information technology. Federal agencies (as defined in Executive Order issued on August 22, 2006, relating to promoting quality and efficient health care in Federal Government-administered or -sponsored health care programs) who contract or enter into agreements with health care providers, health plans, or health insurance issuers, agree to use health information technology systems and products that meet the standards and implementation specifications adopted under Section *3004* of the *Public Health Service Act*, as added by section *13101*.

Since 2008, the Social Security Administration (SSA) has been working to enable the electronic exchange of health information. We believe we can improve the speed and consistency of disability determinations with the use of health information technology (health IT). Health IT will enable us to reduce the amount of time we need to make a disability determination by allowing us to electronically request and receive health records.

SSA is now working on implementing a health IT process with several large healthcare providers or “partners.” With this health IT process, we hope to demonstrate that we can successfully exchange health information electronically with providers in a production setting. Our success depends not only on the partner’s technological capabilities, but also the content of the medical information they can provide in response to SSA’s requests (e.g., what data is captured in the healthcare provider's electronic health record {EHR} system, and in what format).

To support expansion of SSA's health IT initiative, we designed the Health IT Partner Program Assessment – Participating Facilities and Available Content Form, Form SSA-680, to provide a basic understanding of potential partners’ organization’s available EHR content. We intend to evaluate the completed form for potential partners for both their accessibility of health information, and the content value of their EHR for our disability adjudication processes.

This is a new information collection in support of SSA’s health IT initiative. The respondents are healthcare providers.

**2. Description of Collection** - Before deciding to move forward with a health IT partnership, SSA needs to understand whether an organization can electronically provide the substantive medical information that enables us to make disability determinations. The first step in this process is for potential partners to tell us about their organization and its characteristics via the SSA-680.

All of the information SSA receives from potential partners will reside solely with us. Any healthcare entity that expects to partner with us must complete the SSA-680. This form specifically asks questions to identify the partner organization, the partners’ available clinical documents, and continuity of care document (CCD) capability, an XML-based markup standard intended to specify the encoding, structure, and semantics of a patient summary clinical document for electronic exchange.

The first section of the form identifies basic characteristics about the partner organization, such as its affiliation as a Health Information Exchange hospital, physical group, or integrated physician network. In addition, the questions seek to ascertain the entity’s current health IT electronic data exchange capabilities, as well as the types of documents it is capable of sharing electronically.

Secondly, the form identifies the partners’ available clinical documents. These questions seek to classify the types and formats of clinical documents currently generated within the organization. The form categorizes the documents by format, structure, and characteristics; and differentiates between structured standards-based documents and unstructured documents.

Finally, the form recognizes the CCD capability of the provider entity. The questions in this section surround documentation on summaries of the problem, medication, medical encounter, and procedure. Furthermore, the form contains data questions around physical exam, functional status, treatment, lab, and support contact information. The data within each of these areas are classified by structured data and unstructured data in a CCD.

Further detailed information regarding the form’s contents is contained in the addendum to the supporting statement.

Once we have reviewed and validated their responses as complete, SSA will conduct careful analysis to determine if each organization is ready to begin a health IT partnership with SSA.

**3. Use of Information Technology to Collect the Information –** SSA will not be implementing an electronic version of the SSA-680 at this time in accordance with the agency’s Government Paperwork Elimination Act due to the low volume of use. However, we will only accept respondents completed forms via email.

**4. Why We Cannot Use Duplicate Information -** The nature of the information we are collecting and the manner in which we are collecting it preclude duplication. SSA does not use another collection instrument to obtain similar data.

**5. Minimizing Burden on Small Respondents**

This collection affects small businesses or other small entities. However, we have minimized the burden as much as possible with checkboxes and multichoice answers.

**6. Consequence of Not Collecting Information or Collecting it Less Frequently –** If we did not collect this information, SSA would be unable to determine and verify whether the health entity has the IT capabilities to successfully partner with us in a health IT environment. Because we collect the information once, we cannot collect it less frequently.

**7. Special Circumstances**

There are no special circumstances that would cause Social Security to conduct this information collection in a manner inconsistent with 5 CFR 1320.5.

**8. Solicitation of Public Comment and Other Consultations with the Public**

The 60-day advance Federal Register Notice published on January 31, 2012 at 77 FR 4854, and SSA received no public comments. The second Notice published on July 16, 2012 at 77 FR 41874. If SSA receives any comments in response to the 30-day Notice, we will forward them to OMB.

**9. Payment or Gifts to Respondents**

SSA does not provide payments or gifts to the respondents.

**10. Assurances of Confidentiality**

SSA collects, maintains, and distributes confidential and non-confidential information in accordance with *42 U.S.C. 1306*, *20 CFR 401* and *402, 5 U.S.C. 552* (Freedom of Information Act), *5 U.S.C. 552a* (Privacy Act of 1974), Internal Revenue Code (*26 U.S.C. 6103(l)(1)(A)*), *Federal Information Security Management Act of 2002 (Title III)* of the E-Government Act of 2002 (*P.L. 107-347*), and OMB Circular No. A-130*.*

**11. Justification for Sensitive Questions –** This information collection does not contain any questions of a sensitive nature.

**12. Estimates of Public Reporting Burden –** We estimate 30 respondents will take 5 hours each to complete the SSA-680. Accordingly, the annual public burden is 150 hours. This figure represents burden hours, and we did not calculate a separate cost burden.

**13. Annual Cost to the Respondents –** There is no known cost burden to the respondents. This is a one-time data collection and the time estimated is approximately 5 hours per organization. The cost, if any, would be minimal to the individual organizations.

**14. Annual Cost to Federal Government –** The cost to the Federal Government for distributing the collection instrument, collecting and processing the information (via email) is negligible.

**15. Program Changes or Adjustments to the Information Collection Request**

This new information collection will increase the public reporting burden. See section 12 for estimated burden figures. Eventually, this new process may absorb and replace existing collections associated with disability determinations and collections of medical information.

**16.** **Plans for Publication Information Collection Results**

SSA will not publish the results of the information collection.

**17.** **Displaying the OMB Approval Expiration Date**

SSA is not requesting an exception to the requirement to display the OMB approval expiration date . We will transmit and accept the SSA-680 via email only.

1. **Exceptions to Certification Statement**

SSA is not requesting an exception to the certification requirements at 5 CFR 1320.9 and related provisions at 5 CFR 1320.8(b)(3).

**B. Collections of Information Employing Statistical Methods**

SSA does not use statistical methods for this information collection.