

SUPPORTING STATEMENT
Report of Medical Examination and Vaccination Record
Form I-693
(OMB No. 1615-0033)

A. Justification.

- 1. Explain the circumstances that make the collection of information necessary. Identify any legal or administrative requirements that necessitate the collection. Attach a copy of the appropriate section of each statute and regulation mandating or authorizing the collection of information.**

Section 245 of the Immigration and Nationality Act (Act) requires that applicants for adjustment of status to that of a lawful permanent resident in the United States must establish that they are admissible to the United States, as if they were first arriving. The medical grounds of inadmissibility are found in section 212(a)(1) (A) of the Act. In addition, section 232(b) of the Act requires that medical officers of the U.S. Public Health Service (PHS) certify any physical or mental defect or disease observed in arriving aliens. When PHS medical officers are not available, U.S. Citizenship and Immigration Services (USCIS) must designate private physicians to serve as civil surgeons. Because PHS medical officers have not been available for many years, USCIS has been designating private physicians to serve as civil surgeons, in accordance with section 232(b) of the Act.

Section 212(a)(1)(A) of the Act states that the medical grounds of inadmissibility are determined according to the regulations prescribed by the Secretary of Health and Human Services (HHS). The applicable HHS regulations are found at 42 CFR part 34. The corresponding USCIS regulations are found at 8 CFR part 232. In addition, the civil surgeons are responsible for certifying to USCIS the information necessary to determine whether applicants for adjustment of status are inadmissible on medical grounds. Form I-693 is used by the civil surgeons to report the results of the medical examination to the USCIS.

- 2. Indicate how, by whom, and for what purpose the information is to be used. Except for a new collection, indicate the actual use the agency has made of the information received from the current collection.**

The information on the Report of Medical Examination and Vaccination Record will be used by USCIS in considering the eligibility for adjustment of status under 8 CFR parts 209, 210, 245 and 245a; and V nonimmigrant status under 8 CFR 214.15. The applicable regulations state:

- 8 CFR 209.1(c): “A refugee seeking adjustment of status under section 209(a) of the Act is not required to repeat the medical examination performed under §207.2(c), unless there were medical grounds of inadmissibility applicable at the time of admission. The refugee is,

however, required to establish compliance with the vaccination requirements described under section 212(a)(1)(A)(ii) of the Act.”

- 8 CFR 209.2(d): “For an alien seeking adjustment of status under section 209(b) of the Act, the alien shall submit a medical examination to determine whether any grounds of inadmissibility described under section 212(a)(1)(A) of the Act apply. The asylee is also required to establish compliance with the vaccination requirements described under section 212(a)(1)(A)(ii) of the Act.”
- 8 CFR 210.2(d): “An applicant under this part must be examined at no expense to the government by a designated civil surgeon or, in the case of an applicant abroad, by a physician or clinic designated to perform medical examinations of immigrant visa applicants. The medical report setting forth the findings concerning the mental and physical condition of the applicant shall be incorporated into the record. Any applicant certified under paragraph (1), (2), (3), (4), or (5) of section 212(a) of the Act may appeal to a Board of Medical Officers of the U.S. Public Health Service as provided in section 234 of the Act and part 235 of this chapter.”
- 8 CFR 245.5: “Pursuant to section 232(b) of the Act, an applicant for adjustment of status shall be required to have a medical examination by a designated civil surgeon, whose report setting forth the findings of the mental and physical condition of the applicant, including compliance with section 212(a)(1)(A)(ii) of the Act, shall be incorporated into the record. A medical examination shall not be required of an applicant for adjustment of status who entered the United States as a nonimmigrant spouse, fiancé, or fiancée of a United States citizen or the child of such an alien as defined in section 101(a)(15)(K) of the Act and §214.2(k) of this chapter if the applicant was medically examined prior to, and as a condition of, the issuance of the nonimmigrant visa; provided that the medical examination must have occurred not more than 1 year prior the date of application for adjustment of status. Any applicant certified under paragraphs (1)(A)(ii) or (1)(A)(iii) of section 212(a) of the Act may appeal to a Board of Medical Officers of the U.S. Public Health Service as provided in section 234 of the Act and part 235 of this chapter.”
- 8 CFR 245a.3(d)(4): “Applicants who filed for temporary resident status prior to December 1, 1987, are required to submit the results of a serologic test for HIV virus on Form I-693, “Medical Examination of Aliens Seeking Adjustment of Status,” completed by a designated civil surgeon, unless the serologic test for HIV was performed and the results were submitted on Form I-693 when the applicant filed for temporary resident status. Applicants who did submit an I-693 reflecting a serologic test for HIV was performed prior to December 1, 1987, must submit evidence of this fact when filing the I-698 application in order to be relieved from the requirement of submitting another I-693. If such evidence is not available, applicants may note on their I-698 application their prior submission of the results of the serologic test for HIV. This information shall then be verified at the Regional Processing Facility. Applicants

having to submit an I-693 pursuant to this section are not required to have a complete medical examination. All HIV-positive applicants shall be advised that a waiver of the ground of excludability under section 212(a)(6) of the Act is available and shall be provided the opportunity to apply for the waiver...”

- 8 CFR 214.15(f): “An alien described in paragraph (c) of this section who is in the United States may apply to the Service to obtain V nonimmigrant status pursuant to the procedures set forth in this section and 8 CFR part 248. The alien must be admissible to the United States, except that, in determining the alien’s admissibility in V nonimmigrant status, sections 212(a)(6)(A), (a)(7), and (a)(9)(B) of the Act do not apply. (1) To apply for V nonimmigrant status, an eligible alien must submit (i) Form I-539, Application to Extend/Change Nonimmigrant Status, with the fee required by §103.7(b)(1) of this chapter; (ii) The fingerprint fee as required by §103.2(e)(4) of this chapter; (iii) Form I-693, Medical Examination of Aliens Seeking Adjustment of Status, without the vaccination supplement; and (iv) Evidence of eligibility as described by Supplement A to Form I-539 and in paragraph (f)(2) of this section.”

3. **Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses, and the basis for the decision for adopting this means of collection. Also describe any consideration of using information technology to reduce burden.**

This form can be downloaded, completed and saved electronically, but cannot be e-filed at this time. This form is the most efficient means for USCIS to collect the required data until full automation can be achieved. USCIS has no estimate for when electronic submission of the Report of Medical Examination and Vaccination Record may be possible. USCIS provides this application to the public via the USCIS Internet Web site at www.uscis.gov/i-693. Due to the partial Government Paperwork Elimination Act (GPEA) compliance of allowing for accessing, completing and saving the form electronically, USCIS requests a minimum of a 2-year approval as we continue to move towards full GPEA compliance for all forms.

4. **Describe efforts to identify duplication. Show specifically why any similar information already available cannot be used or modified for use for the purposes described in Item 2 above.**

No other similar information is currently available which can be used for this purpose. In addition, USCIS has examined whether the information is collected by other DHS components or Federal agencies from which USCIS could obtain the information, and no viable source was found. The law and regulations require a separate and distinct medical examination and a report to be completed in

association with the application for adjustment of status. An examination and medical report prepared for other purposes is not sufficient for USCIS's needs in adjudicating applications. This is because routine physical examinations, or other medical examinations not performed specifically for immigration purposes, do not typically cover all of the health conditions required to determine admissibility. Further, the assessment of health conditions for immigration purposes must be conducted in accordance with the Department of Health and Human Services regulations, as stated above, including the *Technical Instructions for the Medical Examination of Aliens in the United States (Technical Instructions)*.¹ The Report of Medical Examination and Vaccination Record covers all health conditions relevant to the admissibility determination and corresponds with the *Technical Instructions* to ensure that the specific health conditions that may impact admissibility are properly assessed in the medical examination.

5. If the collection of information impacts small businesses or other small entities (Item 5 of OMB Form 83-I), describe any methods used to minimize burden.

This collection of information does not have an impact on small businesses or other small entities. This form is completed by applicants required to establish that they are not inadmissible to the United States based on medical grounds. While the applicants may engage the services of a doctor, those activities are a normal part of the doctor/small business function. No unnecessary burden is placed upon the applicant or doctor due to the information collected on this form.

Under 5 CFR 1320(b)(1), burden means the total time, effort, or financial resources expended by persons to maintain, retain, or disclose or provide information to or for a Federal Agency. Under 8 CFR 1320.3(c)(4), for purposes of the definition of ten or more persons, contractors engaged by a respondent for the purpose of complying with the collection of information are not included as persons. Medical professional providing medical certifications are generally paid for their services either by the alien or a third party, and thus are considered contractors engaged by the respondents to comply with this information collection, and do not fall under the category of persons with the associated burden as described above.

6. Describe the consequence to Federal program or policy activities if the collection is not conducted or is conducted less frequently, as well as any technical or legal obstacles to reducing burden.

If the required information is not collected, USCIS will not be able to correctly determine the eligibility of an applicant for lawful permanent resident status,

¹ Provided by the Centers for Disease Control and Prevention, a component agency of the U.S. Department of Health and Human Service. The *Technical Instructions* are available online at: <http://www.cdc.gov/immigrantrefugeehealth/exams/ti/civil/technical-instructions-civil-surgeons.html>.

creating a potential public health risk or denying the applicant an immigration benefit to which he or she may be legally entitled.

7. **Explain any special circumstances that would cause an information collection to be conducted in a manner: requiring respondents to report information to the agency more often than quarterly; requiring respondents to prepare a written response to a collection of information in fewer than 30 days after receipt of it; requiring respondents to submit more than an original and two copies of any document; requiring respondents to retain records, other than health, medical, government contract, grant-in-aid, or tax records for more than three years; in connection with a statistical survey that is not designed to produce valid and reliable results that can be generalized to the universe of study; requiring the use of a statistical data classification that has not been reviewed and approved by OMB; that includes a pledge of confidentiality that is not supported by authority established in statute or regulation, that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use; or requiring respondents to submit proprietary trade secret, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.**

There are no special circumstances associated with this information collection.

8. **If applicable, provide a copy and identify the data and page number of publication in the Federal Register of the agency's notice, required by 5 CFR 1320.8(d), soliciting comments on the information collection prior to submission to OMB. Summarize public comments received in response to that notice and describe actions taken by the agency in response to these comments. Specifically address comments received on cost and hour burden. Describe efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting format (if any), and on the data elements to be recorded, disclosed, or reported. Consultation with representatives of those from whom information is to be obtained or those who must compile records should occur at least once every 3 years – even if the collection of information activity is the same as in prior periods. There may be circumstances that may preclude consultation in a specific situation. These circumstances should be explained.**

On June 18, 2012, USCIS published a 60-day notice in the Federal Register at 77 FR 26285. USCIS received one submission from one commenter in response to the 60-day notice.

The commenter suggested that applicants under 18 years of age should not be required to sign Form I-693 under penalty of perjury because they are minors and

have no understanding of what they are signing. For nearly 60 years, however, DHS regulations have provided that a child's application for immigration benefits, and related papers, can be signed by someone other than the child only if the child is under 14. 8 CFR 103.2(a)(2); *see also* 29 FR 11956, 11956 (1964) and 17 FR 11469, 11480 (1952). Moreover, the individual who signs Form I-693 certifies only that he or she is the person undergoing the medical examination and that the personal information given in Part 1 of the form is true. This is standard language prescribed for the signature of most Federal forms governing unsworn declarations at 28 U.S.C. 1746. Even if this language is not in the form's jurat, the penalties for false presentation of a document at 8 U.S.C. 1324c(f) would still apply. In any event, this information is not beyond the "understanding" of most teenagers. Whether a minor can be prosecuted criminally for perjury is a matter for the proper court to decide. But the signature block text still serves the critical function of pointing out to the individual that he or she must not sign the Form I-693 unless the information is true.

On September 7, 2012, USCIS published a 30-day notice in the Federal Register at 77 FR 55221. USCIS has received one submission from one commenter on the 30-day notice to date. The commenter indicated that vaccines are controversial and suggested that USCIS should keep records on who gets sick or dies when a vaccine is administered. The commenter also questioned whether physicians abroad correctly complete the medical examination documentation; the commenter believed that there is no incentive for a physician in a foreign country to complete the paperwork truthfully.

USCIS did not make any changes to Form I-693 based on these comments. Congress set the immigration vaccination requirements in the Act and the Department of Health of Human Services (HHS) through the Center for Disease Control and Prevention (CDC) prescribes the mandatory vaccines, not USCIS. HHS also has a system in place through which adverse events based on vaccinations can be reported. USCIS is not in a position to administer such a system. Similarly, physicians abroad are not under the jurisdiction of USCIS and do not use Form I-693 to report the results of a medical examination. Physicians completing immigrant medical examinations are under the jurisdiction of the Department of State and use DS forms for that purpose.

9. Explain any decision to provide any payment or gift to respondents, other than remuneration of contractors or grantees.

The USCIS does not provide payments or gifts to respondents in exchange for a benefit sought.

10. Describe any assurance of confidentiality provided to respondents and the basis for the assurance in statute, regulation, or agency policy.

There is no assurance of confidentiality. The system of record notice associated with this information collection is the USCIS Benefits Information System, which was published in the *Federal Register* on September 29, 2008, at 73 FR 56596. The privacy impact assessment associated with this information collection is USCIS Benefits Processing of Applicants Other Than Petitions for Naturalization, Refugee Status, and Asylum.

- 11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private. This justification should include the reasons why the agency considers the questions necessary, the specific uses to be made of the information, the explanation to be given to person’s from whom the information is requested, and any steps to be taken to obtain their consent.**

Some of the information requested on this form is of a sensitive nature. The form includes information as to whether an applicant has been diagnosed with tuberculosis, syphilis, or other communicable diseases or suffers from a physical or mental disorder, drug abuse or addiction. These questions are required to obtain information that must be reviewed to determine whether an applicant has or does not have a condition that may make him or her ineligible for adjustment of status on public health grounds under 8 CFR Parts 209, 210, 245, and 245a; or V nonimmigrant status under 8 CFR Part 214.15.

- 12. Provide estimates of the hour burden of the collection of information.**

Type of Respondent	Form Name (Form Number)	No. of Respondents	No. of Responses per Respondent	Avg. Burden per Response (in hours)	Total Annual Burden (in hours)	Avg. Hourly Wage Rate	Total Annual Respondent Cost
Individuals or households	Report of Medical Examination and Vaccination Record (Form I-693)	565,180	1	2.5	1,412,950	* \$30.44	\$43,010,198
Total		565,180			1,412,950		\$43,010,198

* The above Average Hourly Wage Rate is the [May 2011 Bureau of Labor Statistics average wage for “All Occupations”](#) of \$21.74 times the wage rate benefit multiplier of 1.4 (to account for fringe benefits) equaling \$30.44.²

² The wage rate used is for the applicant for adjustment of status who is subject to this information collection. The civil surgeons are paid for their services and thus their time and other associated burden are not subject to the PRA.

Annual Reporting Burden

The annual reporting burden is **1,412,950**. This figure was derived by multiplying the number of respondents (565,180) x (1) frequency of response x (2.5) 2 ½ hours per response.

This estimation is based on USCIS experience with the program and is calculated as follows: learning about the form (30 minutes); making an appointment with a civil surgeon for a medical exam (15 minutes); taking the medical exam (1 hour); reading the results of the Tuberculin Skin Test (TST) or Interferon Gamma Release Assay (IGRA), which requires a second appointment with the civil surgeon (30 minutes); reporting the results of the medical exam on the form (10 minutes); and submitting the medical exam report to USCIS (5 minutes).

- 13. Provide an estimate of the total annual cost burden to respondents or record keepers resulting from the collection of information. (Do not include the cost of any hour burden shown in Items 12 and 14).**

There are no capital or start-up costs associated with this information collection. *(There is no fee associated with this information collection.)*

- 14. Provide estimates of annualized cost to the Federal government. Also, provide a description of the method used to estimate cost, which should include quantification of hours, operational expenses (such as equipment, overhead, printing, and support staff), and any other expense that would not have been incurred without this collection of information. Agencies also may aggregate cost estimates from Items 12, 13, and 14 in a single table.**

Annualized Cost Analysis:

a.	Printing Cost	\$	9,143
b.	Collection and Processing Cost	\$	33,901,657
c.	Total Annual Cost to the Government	\$	33,910,800

Government Cost

The estimated cost to USCIS, which is covered by fee receipts, is **\$33,910,800**. This figure is calculated by using the estimated number of respondents 565,180 x (1) number of response x (1.5 hours) per response (time required to collect and process information) x \$40 (suggested average hourly rate for clerical, officer, and supervisory time with benefits). In addition, this figure includes the estimated overhead cost for printing, stocking, and distributing the form, which is 9,143.

- 15. Explain the reasons for any program changes or adjustments reporting in Items 13 or 14 of the OMB Form 83-I.**

There has been a decrease of 587,050 in burden hours from those previously reported for this information collection. This change can be attributed to a decrease in the number of respondents from 800,000 respondents to 565,180. The

decrease in the number of respondents is based on updated FY 2011 statistical data and the resulting adjustment in agency estimates.

USCIS is revising the Form I-693 (see table of changes). Revisions to the form include deletion of the Social Security Number field and revision of findings in the Communicable Diseases section in anticipation of forthcoming updates to the Centers for Disease Control and Prevention (CDC)'s Technical Instructions. Language instructing the civil surgeon to attach an X-ray report (if required of the applicant, as part of the tuberculosis evaluation) was also deleted from the form, in agreement with CDC. Revisions to the instructions include reformatting into a single-column display, deleting language requiring the applicant to sign at the end of the immigration medical examination and inserting clarifying language regarding signature requirements.

- 16. For collections of information whose results will be published, outline plans for tabulation, and publication. Address any complex analytical techniques that will be used. Provide the time schedule for the entire project, including beginning and ending dates of the collection of information, completion of report, publication dates, and other actions.**

USCIS does not intend to employ the use of statistics, or the publication thereof, for this information collection.

- 17. If seeking approval to not display the expiration date for OMB approval of the information collection, explain the reasons that display would be inappropriate.**

USCIS will display the expiration date for OMB approval of this information collection.

- 18. Explain each exception to the certification statement identified in Item 19, "Certification for Paperwork Reduction Act Submission," of OMB 83-I.**

The USCIS does not request an exception to the certification of this information collection.

- B. Collection of Information Employing Statistical Methods.**

Not Applicable.