

Supporting Statement A

State Agency Interviews about Residential Care Facilities Licensed to Exclusively Serve Residents with Intellectual and Developmental Disabilities for the National Study of Long-Term Care Providers

**Generic IC:
Developmental Studies to Improve the National Health Care Surveys
OMB No. 0920-1030
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Contact Information
Lauren Harris-Kojetin
Division of Health Care Statistics
National Center for Health Statistics
3311 Toledo Rd
Hyattsville MD 20782
301-458-4369
fti3@cdc.gov
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A. Justification

1. Circumstances Making the Collection of Information Necessary

The National Center for Health Statistics (NCHS) received OMB approval for Developmental Studies to Improve the National Health Care Surveys Generic Clearance (OMB No. 0920-1030, EXPIRES 10/31/2017) to conduct developmental studies on survey design and data collection activities that are part of the National Health Care Surveys (NHCS).

Under this approval, OMB has agreed to expedite generic IC review of proposals for data collections and OMB will generally review such requests within ten business days.

The specific generic IC project for this clearance is to:

- Conduct interviews with up to 65 state regulatory agency staff (state government representatives) in the 50 states and the District of Columbia to: (1) confirm that we have identified the appropriate licensure categories of residential care facilities within each state that serve adults with intellectual and developmental disabilities (IDD) and meet the definition of residential care facility used in the National Study of Long-Term Care Providers (NSLTCP) and (2) for each relevant licensure category, obtain information about the availability of a listing of licensed facilities, what data are included on the listing, how current the listing is, and how to obtain the listing in the future when developing the frame for the 2018 NSLTCP survey of residential care facilities.

2. Purpose and Use of Information Collection

The National Study of Long-Term Care Providers (NSLTCP) (OMB No. 0920-0943, expires 05/31/2019) is a biennial initiative that produces national and state statistical information about the supply, use, and key characteristics of providers and services users in the major sectors of paid, regulated long-term care services in the United States. NSLTCP is intended to enable efficient monitoring of the diverse field of long-term care services and to help support and inform long-term care policy, research, and practice.

For the first three waves conducted between 2012 and 2016, NSLTCP has included five sectors — adult day services centers, assisted living and similar residential care facilities, home health agencies, hospices, and nursing homes. For NSLTCP, NCHS uses nationally representative administrative data from the Centers for Medicare & Medicaid Services (CMS) on nursing homes and residents, home health agencies and patients, and hospices and patients; and collects primary data through surveys on residential care facilities and residents and adult day services centers and enrolled participants, because national administrative data are not available on these two sectors.

Although NSLTCP covers five sectors, gaps remain, and NCHS aims to fill gaps in the sectors NSLTCP covers. Since the inception of NSLTCP in 2012, one of the coverage gaps has been residential care facilities that, although they meet other elements of the NSLTCP residential care facility definition, are excluded because they exclusively serve adults with IDD. The NSLTCP study definition of a residential care facility has been one that is licensed, registered, listed, certified, or otherwise regulated by the state to provide room and board with at least two meals a day, provide around-the-clock on-site supervision, and help with activities of daily living (e.g., bathing, eating, or dressing) or health related services, such as medication supervision; serves primarily an adult population; and has at least four licensed, certified, or regulated beds. Facilities licensed to serve the mentally ill or IDD populations exclusively have been excluded. NCHS intends to add IDD-exclusive residential care facilities and their residents to the 2018 NSLTCP wave.

As with residential care facilities more generally, IDD-exclusive residential care facilities are not regulated at the federal level, but at the state level, so the national sampling frame of residential care facilities used for each NSLTCP survey wave has been created from lists of regulated facilities in each state. State government representatives provided the most recent frame of state-regulated residential care facilities which was developed for use in the 2016 National Study of Long-Term Care Providers (NSLTCP) (OMB No. 0920-0912. Discontinued 05/11/2016). NCHS intends to submit an information collection package in the future for constructing the frame of residential care facilities for the 2018 NSLTCP wave. The design of that information collection to construct the 2018 residential care frame—which will include both the types of residential care facilities that have traditionally met the NSLTCP definition as well as, for the first time, the facilities that would have met the definition except for the fact that they exclusively serve residents with IDD—will be informed by findings from this current information collection. As a result, NCHS is submitting this package for exploratory work now, and will submit the package for the 2018 frame construction after we have findings from this exploratory work.

To help meet the goal of adding the IDD-exclusive residential care facility sector in 2018, the purpose of this exploratory work is to better understand the residential facilities that exclusively serve adults with IDD. This exploratory work includes several components: (1) review the residential care facility state regulatory licensure categories already reviewed for the 2016 NSLTCP wave and add any categories that were excluded from the 2016 wave because they exclusively served residents with IDD; (2) identify other potentially eligible residential care facility state licensure categories, some of which fall under state agencies not previously included in earlier waves of NSLTCP frame development; and (3) describe the extent to which comprehensive listings of regulated IDD-exclusive residential care facilities are available and from what agencies, to inform the 2018 residential care facility frame activities. Three methods will be used to complete this exploratory work: internet searches of publicly accessible state web

sites; review and summarizing of relevant state regulations for licensure categories not previously included in NSLTCP; and, interviews with representatives of state government agencies that regulate residential care facility licensure categories (this may be a director of a state agency, department or unit , policy analyst or supervisor) that are not already included in NSLTCP.

NCHS seeks clearance for this specific generic IC project to conduct the interviews with state government representatives that oversee residential care facility licensure categories that are not already included in NSLTCP.

The information will be collected from state government representatives in the 50 states and the District of Columbia via telephone interviews. The procedure to identify the state government representatives to interview includes: (1) based on searching state agency websites and a targeted regulatory review, states agencies will be identified as overseeing licensure categories of residential care facilities that potentially exclusively serve an IDD adult population; (2) based on searching state agency websites, the state government representatives (typically the director, manager, or leader of the state regulatory program) will be identified along with the person's work contact information (email, telephone, address).

Each of the 65 interviews will include two project team members; one to conduct the interview and another to take notes and to contribute to the discussion.

3. Use of Improved Information Technology and Burden Reduction

As the first point of contact with the government representative in each state, we will email an advance package that includes a cover letter from NCHS stating the purpose and importance of the interview, noting that they will be called shortly, and indicating the agenda for the call. Each email will be tracked to ensure that it was delivered to the contact. For those that are returned, we will call the agency and get clarification on the email address and resend. If we receive a response that directs us to another representative in the state, we will send a new package to that person via email and restart the process of contacting them using the previously described steps. Within a week of emailing the advance package, we will begin to contact these government representatives at state agencies by telephone using a scheduling script to set up the interviews. Interviews will be conducted by telephone at a time convenient to each subject matter expert.

4. Efforts to Identify Duplication and Use of Similar Information

This exploratory work will inform the construction of a national sampling frame for the 2018 NSLTCP survey of residential care facilities and will include both providers that exclusively serve residents with IDD and those that do not. At this time, no such frame exists.

The 2018 frame that will be developed (under a separate information collection package to be submitted after the exploratory work is completed) will be used to draw a sample of residential care facilities for NSLTCP that is scheduled to be fielded in 2018. No up-to-date uniform list of residential care facilities currently exists at the national level. The most recent frame of residential care facilities was developed for NSLTCP in 2016 (OMB No. 0920-0912. Discontinued 05/11/2016) and used for the 2016 NSLTCP residential care facility survey (OMB No. 0920-0943, expires 05/31/2019), and excluded facilities that exclusively served residents with IDD. Given turnover of establishments in this sector, NCHS concludes that the 2016 frame is too old for use in a 2018 survey. In addition, NCHS seeks to add IDD-exclusive residential care facilities for 2018.

5. Impact on Small Businesses or Other Small Entities

No small businesses are affected.

6. Consequences of Collecting the Information Less Frequently

This is a request for clearance to allow NCHS to conduct these exploratory interviews with state government representatives one time.

For a future information collection—not under this current request for clearance—to create the 2018 sampling frame that will include those residential care facilities that do and those that do not exclusively serve the IDD population, these same state government representatives may be contacted. There is a high level of turnover of facilities in the residential care facility sector; thus a biennial collection is needed to provide a more up-to-date, accurate frame.

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

This request fully complies with the regulation 5 CFR 1320.5.

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

a. Federal Register Notice

In compliance with 5 CFR 1320.8(d), a 60-day Federal Register notice was published in the Federal Register on April 30, 2014, Volume 79, Number 83 pages 24435-36 . There were no public comments received as a result of this notice.

b. Consultation

Only internal consultation was involved in this project.

9. Explanation of Any Payment or Gift to Respondents

No payment or gift will be offered to the state government representatives.

10. Protection of the Privacy and Confidentiality of Information Provided to Respondents

It has been determined that the Privacy Act does not apply to this request. We will not collect identifiable private information about the state government representatives. Instead, the interviews will collect information on how a state defines IDD; what residential care settings the state regulates; the state's definition of each licensure category and how it relates to the NSLTCP eligibility criteria for a residential care facility; and for each licensure category, what is the responsible state agency, the approximate number of facilities, and how to obtain listings of these facilities.

Confidentiality will be provided to state government representatives as assured by Section 308(d) of the Public Health Service Act (42 USC 242m) as follows:

“No information, if an establishment or person supplying the information or described in it is identifiable, obtained in the course of activities undertaken or supported under section 304, 306, or 307 may be used for any purpose other than the purpose for which it was supplied unless such establishment or person has consented (as determined under regulations of the Secretary) to its use for such other purpose and in the case of information obtained in the course of health statistical or epidemiological activities under section 304 or 306, such information may not be published or released in other form if the particular establishment or person supplying the information or described in it is identifiable unless such establishment or person has consented (as determined under regulations of the Secretary) to its publication or release in other form.”

In addition, legislation covering confidentiality is provided according to section 513 of the Confidential Information Protection and Statistical Efficiency Act (PL-107-347) which states:

“Whoever, being an officer, employee, or agent of an agency acquiring information for exclusively statistical purposes, having taken and subscribed the oath of office, or having sworn to observe the limitations imposed by section 512, comes into possession of such information by reason of his or her being an officer, employee, or agent and, knowing that the disclosure of the specific information is prohibited under the provisions of this title, willfully discloses the information in any manner to a person or agency not entitled to receive it, shall be guilty of a class E felony and imprisoned for not more than 5 years, or fined not more than \$250,000, or both.”

Data will be treated in a confidential manner. The process of informing state government representatives of the procedures used to keep information confidential begins with material e-mailed in advance and carries through to interviewer training and all communications with potential state government representative respondents.

NCHS and subcontractor staff routinely employ technical, physical, and administrative measures to secure information and safeguard privacy and confidentiality. These include:

- when confidential materials are moved between locations, records are maintained to insure that there is no loss in transit,
- hard copies of confidential information are stored in secure areas when not in use,
- access to the data processing and storage areas is controlled, with only authorized personnel allowed in secure locations,
- individual data files are protected by passwords and other techniques, which prohibit access by non-approved project staff,
- access to nonpublic data is restricted to those who must have such access.

Interviewers, supervisors, and staff receive thorough training on legal and ethical obligations. All employees and contract staff sign an Affidavit of Nondisclosure as a condition of employment.

11. Institutional Review Board (IRB) and Justification for Sensitive Questions

This data collection effort is deemed not human subjects research (Attachment A).

There are no sensitive items included in this survey.

12. Estimates of Annualized Burden Hours and Costs

Interviews will be conducted with up to 65 state government representatives. The first step in the data collection process is a telephone call to state agencies to verify the preliminary contact information (e.g., telephone and email) for the state government representatives that we obtained from searching state agency websites (Attachment B), which will take on average 5 minutes. Using the verified contact information, we will email an advance package to each state government representative that includes a cover letter from NCHS (Attachment C). Within a week of emailing the advance package, we will begin to contact these government representatives at state agencies by telephone using a scheduling script (Attachment D), which will take on average 5 minutes, to set up the interviews. We will use a semi-structured protocol (Attachment E) for the interviews, which will average 30 minutes. A thank you letter will be emailed after we have completed the interview with the state officials (Attachment F). The verification call, scheduling call, and interview are estimated to take no more than 40 minutes per respondent for a total burden of 45 hours (see Table 1).

The average cost to state government representatives is estimated to be \$1,369.35 (see Table 2). The hourly wage estimates for completing the interviews mentioned in the burden hours table are based on information from the Bureau of Labor Statistics web site (<http://www.bls.gov>). Specifically, we used the "May 2015 National Occupational Employment and Wage Estimates" for Medical and Health Services Managers.

Table 1. Estimate of Annualized Burden Hours

| Type of Respondent | Form Name | Number of Respondents | Number of Responses | Average Burden/Response (in hours) | Response Burden (in hours) |
|----------------------------------|----------------------------------|-----------------------|---------------------|------------------------------------|----------------------------|
| State government representatives | Contact information verification | 65 | 1 | 5/60 | 6 |
| State government representatives | Scheduling Call Script | 65 | 1 | 5/60 | 6 |
| State government representatives | Interview | 65 | 1 | 30/60 | 33 |
| Total | | | | | 45 |

Table 2. Estimate of Annualized Burden Costs

| Type of Respondent | Form Name | Total Burden Hours | Hourly Wage Rate ¹ | Total Respondent Costs |
|----------------------------------|----------------------------------|--------------------|-------------------------------|------------------------|
| State government representatives | Contact information verification | 6 | \$30.43 | \$182.58 |
| State government representatives | Scheduling Call Script | 6 | \$30.43 | \$182.58 |
| State government representatives | Interview | 33 | \$30.43 | \$1,004.19 |
| Total | | | | \$1,369.35 |

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

There are no additional costs to the state government representative respondents other than their time to participate in the voluntary interview.

14. Annualized Cost to the Federal Government

It is expected that collecting and analyzing the data from the state government interviews will cost NCHS about \$35,000 in contractor costs (including labor and other direct costs) and \$8,000 in NCHS staff costs, for a total of about \$43,000.

15. Explanation for Program Changes or Adjustments

This is a generic IC. There are no program changes or adjustments.

16. Plans for Tabulation and Publication and Project Time Schedule

The state government representative interviews will be analyzed and summarized, and findings included in a report for internal use only by NCHS (not made public). That is, the information is for internal use only. Expected users of the report findings include staff of NCHS' Long-Term Care Statistics Branch and project staff for its contractor, RTI International. No other publications are currently planned.

Findings from these interviews will be used to inform construction of the 2018 residential care facility sampling frame which will be used to draw a sample of residential care facilities for the 2018 NSLTCP survey. Adding IDD-exclusive residential care facilities to NSLTCP will enable NCHS to fill a gap in coverage, which will make NSLTCP findings useful to data users interested in this sector and population. Expected users of this potential, future new data include, but are not limited to CDC's NCHS and its contractors; other Department of Health and Human Services (DHHS) agencies, such as the Office of the Assistant Secretary for Planning and Evaluation and the Administration for Community Living; state government agencies, such as State departments of developmental disabilities; associations, such as National Association of States United for Aging and Disabilities and the National Association of State Directors of Developmental Disabilities Services; universities; foundations; and other private sector organizations.

This project will begin within 2 weeks of clearance.

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

The display of the OMB expiration date is not inappropriate.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions to the certification.