

Department of Transportation

Federal Aviation Administration

SUPPORTING STATEMENT

Helicopter Air Ambulance Operator Reports

OMB #2120-XXXX

INTRODUCTION

This information collection is submitted to the Office of Management and Budget (OMB) to request a three-year approval clearance for the new information collection entitled, Helicopter Air Ambulance Operator Reports.

Part A. Justification

1. Circumstances that make collection of information necessary.

The FAA Modernization and Reform Act of 2012 (the Act) mandates that all helicopter air ambulance operators must begin reporting the number of flights and hours flown, along with other specified information, during which helicopters operated by the certificate holder were providing helicopter air ambulance services. See PL 112-95, Sec. 306, 49 USC § 44731. The FAA Administrator had 180 days to develop a methodology to collect and store those data. The Act further mandates that not later than 2 years after the date of enactment, and annually thereafter, the Administrator shall submit to the Committee on Transportation and Infrastructure of the House of Representatives and the Committee on Commerce, Science, and Transportation of the Senate, a report containing a summary of the data collected.

2. How, by whom, and for what purpose is the information used. The helicopter air ambulance operational data provided to the FAA will be used by the agency as background information useful in the development of risk mitigation strategies to reduce the helicopter air ambulance accident rate, and to meet the mandates set by Congress.

3. Extent of automated information collection. Helicopter air ambulance operators will be able to download a Microsoft Excel spreadsheet reporting template with blank fields in which they can populate their information / data. Upon completing their report they will be able to submit it via an FAA email mailbox set up for that purpose.

4. Efforts to identify duplication. Of the nine items of data required by the Act (identified in the Act in seven paragraphs), the FAA can access two – the number of helicopters used to provide air ambulance services and the number of helicopter air

ambulance accidents. Since these items are more readily available to the operator, we have included them in the data collection matrix.

5. Efforts to minimize the burden on small businesses. The information requested is limited to the minimum necessary to fulfill these new reporting requirements mandated by the Act and as developed by FAA. The amount of data required to be submitted is proportional to the size of the operation.

6. Impact of less frequent collection of information. FAA initially requested that helicopter air ambulance operators submit reports quarterly. Based on the comments submitted, the FAA is now only requesting annual submissions, which are in accordance with the Congressional language requiring this data to be reported.

7. Special circumstances. There are no special circumstances that are applicable to this request.

8. Compliance with 5 CFR 1320.8

A 60-day notice was published in the Federal Register on August 12, 2013, vol. 78, no. 155, pages 48925-48926 allowing for public comment on this collection.

The FAA received a total of 17 responses to the request for public comment. Air Medical Operators Association (AMOA) submitted a comment, and ten individuals submitted the identical comment as members of the organization. Additionally, four operators (Reach Air Medical Services, Air Evac EMS, Med-Trans, and Air Methods) and two other industry associations (Association of Air Medical Services (AAMS) and Helicopter Association International (HAI)) submitted comments.

Based on the comments, the FAA has made adjustments in the reporting requirements, frequency of reporting and the format for submission. Specifically, the linkage between the registration number, time of day, flight time, IFR flight time and base has been removed. Reporting requirements have changed from a “per flight” basis to an aggregate basis. Additionally, the reporting requirement has been reduced from a quarterly report to an annual report.

Since all 17 comments received contain identical or substantially similar reiterations of the AMOA comment, the FAA’s response will refer to AMOA’s comment to represent all of the comments received.

AMOA raised four main concerns and suggested alternative proposals for each of the data collection requirements. Their concerns are discussed below.

1. AMOA states that the FAA’s proposed methodology for collection is not necessary for the FAA’s performance and would set a damaging precedent for aviation regulation.

AMOA does not consider Operations Specifications (Ops Specs) to be the proper vehicle for data collection, since they are dedicated to specific operational safety authorizations. AMOA states that by using Ops Specs to collect the data, the FAA is skirting the Administrative Procedure Act and ignoring DOT precedent by imposing the data collection requirement on operators without conducting notice and comment rulemaking.

AMOA suggests that the FAA implement the data collection reporting requirement through a general rulemaking process that allows for public comment from the industry and other important stakeholders to assure that congressional intent is carried out and the public benefits.

FAA response:

The FAA is authorized by statute to “require [certificated helicopter air ambulance operators] to submit to the Administrator . . . a report containing” the data listed in 49 U.S.C. § 44731. *See* 49 U.S.C. § 44731(a). The statute does not require that the FAA engage in notice and comment rulemaking in order to implement the data collection requirement. The FAA is seeking approval to collect only the data as described and required in the Act. The FAA is not seeking to collect any additional data to what is specified in the statute. Additionally, there is ample precedent for utilizing Ops Specs to impose data reporting requirements on an operator. Data collection for the air tour industry is one specific example of this precedence.

2. AMOA states that the estimated burden far underestimates the actual burden that would result from implementation of the FAA’s proposal.

AMOA claims that the FAA proposal fails to take into account the current data collection practices by air medical operators, and thereby makes the actual burden that would result from the FAA’s proposal much greater. Additionally, AMOA states that the FAA proposal goes beyond the requirements of section 44731 by requiring a report correlating the various data elements to one another. AMOA cites, for example, the FAA’s proposed reporting form would require a report correlating the total number of flight requests accepted or declined and the type of each such flight request to registration number, base location, time of day, total flight time, and IFR time, thereby making reporting significantly more burdensome. AMOA states that the air medical industry does not currently collect information in this manner because there is no safety or business reason for doing so.

AMOA estimates that for a small to medium sized operation, collecting the data as the FAA proposes may require up to 72 hours per year at a cost of approximately \$4,000. AMOA also estimates that for a large and more complicated operation, the collection of the data may require a more complex solution, most likely necessitating the hiring of additional full-time employees at a cost up to \$250,000 per year. AMOA claims that these estimates are significantly more than the FAA’s published estimate of 6 hours per response.

AMOA expressed concerns about the capacity limitations of a Microsoft Excel spreadsheet, claiming it would be insufficient to contain the voluminous data that would be submitted. AMOA states that an Excel spreadsheet has a limit of 65,536 rows by 256 columns, thus even if the FAA requires air medical operators to report only those flights with a patient on board, those flights alone may exceed 400,000 rows per year which far exceeds the capabilities of the spreadsheet even on a quarterly basis. AMOA also expressed concerns about the FAA's ability to protect the confidentiality of the proprietary information.

FAA Response:

In response to AMOA's comment that that the FAA proposal goes beyond the requirements of section 44731 by requiring a report correlating the various data elements, the linkage between the registration number, time of day, flight time, IFR flight time and base have been removed.

The FAA acknowledges that virtually all operators utilize some form of data collection and storage. Operators would not be required to change how they collect operational data; rather, the FAA's Excel template could be populated by exporting their current data in a format readable by Excel. Excel can read most commercial data, as well as comma or space delimited data. We do recognize that, in some cases, it may be necessary to develop a sub-routine to allow the export of an operator's data into an Excel readable format. However, the FAA asserts that this will be a one-time cost.

The Act states that the FAA "shall develop a method to collect and store the data" required by the Act. The data collection methodology does not go beyond the requirements of law.

The FAA does not agree with AMOA's cost and hour estimates for collecting the data. As described in further detail below in section 12, the FAA based its estimates on those developed for a similar requirement in the Act mandating air tour flight data operations reporting which was approved by OMB in December, 2012 (OMB Control No. 2120-0750). Additionally, the FAA has changed the data collection reporting requirement from quarterly to annually, which further reduces the time requirements.

The FAA clarifies that Excel is to be used as a transmittal program for the data. Once the FAA receives the data, we will move it into other data analysis tools that do not have the constraints and capacity limitations associated with Excel. The current data collection requirements significantly reduce the amount of data to an amount well within the capability of Excel through the aggregation of reporting requirements. The FAA's experience with data collection for the air tour industry has demonstrated that this volume of data will fall well within the capability of most operator's information technology equipment.

Finally, the Act requires the FAA to include a "method to protect the confidentiality of any trade secret or proprietary information" when collecting and storing the data. See 49

U.S.C. § 44731(c). The data collection methodology and storage procedures are mirrored on the air tour industry data collection efforts mandated by Congress and should allay any issues in this area. Data is forwarded to Flight Standards for validation. Once validated, the data can be analyzed by the Office of Accident Investigation and Prevention. Throughout the process, protections incorporated in the handling and storage of other data collection efforts, such as air tours, ASIAs, and others will be utilized. Additionally, the simplification of the requested data elements adds an additional layer of confidentiality.

3. AMOA states that the FAA’s legislative mandate may be implemented in a different manner so as to enhance the quality, utility and clarity of the information collected.

AMOA states that the data collection requirement should be collected to improve the safety of the air medical sector, and not to track the commercial activities of individual company operations. AMOA does not believe the information should be “pegged to individual aircraft registration numbers” but rather that there be an aggregate reporting of the information. Additionally, AMOA expressed concern with the definition of “flight” and whether it was limited to the leg of the flight when transporting the patient.

FAA Response:

The FAA believes that the revised format of data collection will provide useful safety information to improve the safety of the air medical sector and will meet the mandate set by Congress without jeopardizing any proprietary information.

The revision to the data collection form and methodology eliminates correlation of data to registration numbers except for the reporting of the total number of hours flown and total number of flights conducted, by registration number, as mandated by the statute.

4. AMOA states that the alternative proposal it presented would minimize the burden while enhancing the quality of the collected information for purposes of advancing aviation safety.

FAA response: Eliminating any linkage between the specific aircraft registration number, time of day, flight time, IFR flight time, and base, the data collection matrix and procedures, responds to AMOA’s concerns and addresses the changes suggested in its alternative proposal.

9. Payments or gifts to respondents. No payment or gift to respondents will be made.

10. Assurance of confidentiality: The Act requires the FAA to include a “method to protect the confidentiality of any trade secret or proprietary information” when collecting and storing the data. See 49 U.S.C. § 44731(c).

11. Justification for collection of sensitive information: No sensitive information is requested.

12. Estimate of burden hours for information requested:

- Nationwide, there are 73 authorized helicopter air ambulance certificate holders utilizing 1,073 approved air ambulance helicopters. Certificate holders will be required to report their air ambulance-related information on an annual basis. The annual hour burden will vary greatly between the operators based on the number of authorized helicopters operated by each. The actual number of flights each operator conducts per year per authorized helicopter is currently unknown. However, the FAA estimates that 367 flight operations are conducted per helicopter per year.¹ This translates into an aggregate total number of helicopter air ambulance operations of 393,791 (1,073 helicopters X 367 operations per helicopter).
- Authorized helicopter air ambulance certificate holders who operate 10 or more air ambulance helicopters would be required under a proposed regulation² to have Operations Control Centers (OCC). For the purposes of this analysis, certificated holders falling into this category are defined as “large.” Fifteen certificate holders fall into this category, and operate 895 air ambulance helicopters in aggregate, or 83% of the fleet. The balance of the certificate holders (58) each operate fewer than ten helicopters and are defined here as “small.” Small certificate holders operate 179 helicopters in aggregate.
- Certificate holders will input their data in a Microsoft Excel spreadsheet template, which requires some general information that the operator must input regarding his company (e.g., name of company, FAA certificate number). The additional information will be limited to that required by the Act.
- Based on estimates developed for air tour flight data operations reporting, approved by OMB in December, 2012 (OMB Control No. 2120-0750), it will take each small certificate holder (those operating fewer than 10 helicopters), approximately 6 hours on average to fill out and submit the required annual report. Our burden estimate for large operators (those operating 10 or more helicopters) did not scale linearly. These large operators would be required under

¹ Source: *Helicopter Air Ambulance, Commercial Helicopter, and Part 91 Helicopter Operations*, NPRM, 75 FR.62640, 62661 (Oct. 12, 2010). It should be noted that the exact number of certificated operators and the number of authorized air ambulance helicopters in service may vary over time. These estimates are based on the best available data at the time of this analysis. Actual figures at time of reading may vary slightly.

² Id.

proposed the regulation to have OCCs. Due to the high volume of activity of these large certificate holders, nothing other than electronic means of data recording and dispatching would be practical for compliance with this mandate. We believe that those operators who employ electronic flight dispatch databases should be able to largely automate exporting the required data into an Excel-readable format (i.e., comma or space-delimited text files). Therefore, for each large certificate holder who conducts a large number of operations, we estimate that it will take, on average, approximately 16 hours to fill out and submit each annual report.

- There are 58 “small” certificate holders and 15 “large” operators as defined in the context of this request. Thus it will take $58 \times 6 = 348$ hours per year for “smaller” operator labor burden; $15 \times 16 = 240$ hours per year for “larger” operator labor burden. The aggregate hourly burden total would be 588 labor hours per year for all the respondents.
- Using the automated “export” and “import” features in Excel is a relatively simple task and can be performed by an administrative clerk. The assumed hourly labor rate for an industry clerk is \$25 / hour.³ Therefore, the average annual burden to an individual small operator (as defined in this context) would be \$150 (6 hours X \$25), and for an individual large operator, \$400 (16 hours X \$25). The total aggregate annualized burden to all respondents is estimated to be approximately \$14,700 (588 hours X \$25).

13. Estimate of total annual costs to respondents. We do not anticipate that there would be any capital / startup costs or operation / maintenance associated with this reporting effort. Helicopter air ambulance operators are being asked to fill in an Excel spreadsheet template, which would only require a computer and standard software package that most businesses would reasonably be expected to already possess or can acquire for a relatively modest cost, approximately \$110. Therefore, the only costs are related to keeping data and reporting it to the FAA, which we estimate to be approximately \$14,700.

14. Estimate of cost to the Federal government. Helicopter air ambulance operators will electronically submit this information directly to FAA. Agency costs will include a review of each operator’s annual submittal to ensure every operator has submitted the proper report, and to ensure the data are properly reported. We anticipate that it will take the agency approximately 40 hours each year to review all the reports that are submitted by the helicopter air ambulance operators. The review would likely be conducted by a GS-13 level employee working in the Washington, D.C. area (i.e., a policy analyst or Aviation Safety Inspector). The cost to the federal government for a Washington, D.C. based employee at a grade 13, step 5 level is \$64.06 / hour (\$48.35/hr., which includes a

³ Id.

24.22% locality adjustment,⁴ X 1.325 benefits cost), for a cumulative government cost of \$2,562. It is further estimated that an additional 40 hours for end-of-reporting-year collation and report generation will also be needed. This final report assembly is also likely to be conducted by a GS-13 (step 5) level employee for a cost to the government of \$2,562, bringing the overall estimated aggregate cost to the federal government of \$5,124.

15. Explanation of program changes or adjustments. This is a new collection; therefore it is a program change.

16. Publication of results of data collection. No publication of the comprehensive data set is anticipated; it is primarily for internal use and tracking and for reporting to Congress as stipulated in the statute. Some of the operational information collected (such as number of operations, locations, and aircraft makes and models) may be included as generalized background information to document baseline conditions in helicopter air ambulance operations to develop methodologies for mitigating risk in such operations and to meet the congressional mandate.

17. Approval for not displaying the expiration date of OMB approval. We are not seeking approval to not display the expiration date.

18. Exceptions to certification statement. There are no exceptions to the certification statement.

⁴ Source: OPM.gov, Pay & Leave Salary Table 2012, the most recent year for which OPM salary data are available.