

Revision of Estimated Annual Cost Burden*

Form Number	Form Name	Total Estimated Burden (Hours)		Estimated Hourly Wage of Respondent		Total Estimated Annual Cost Burden ^a		Change in Estimated Annual Cost Burden ^a
		06/2015	06/2014	06/2015	06/2014	06/2015	06/2014	
57.100	NHSN Registration Form	167	167	\$38.98	\$38.55	\$6,497	\$6,425	\$72
57.101	Facility Contact Information	333	333	\$38.98	\$38.55	\$12,993	\$12,850	\$143
57.103	Patient Safety Component--Annual Hospital Survey	4,167	5,000	\$38.98	\$38.55	\$162,417	\$192,750	(\$30,333)
57.105	Group Contact Information	83	83	\$38.98	\$38.55	\$3,248	\$3,213	\$36
57.106	Patient Safety Monthly Reporting Plan	18,000	18,000	\$38.98	\$38.55	\$701,640	\$693,900	\$7,740
57.108	Primary Bloodstream Infection (BSI)	132,000	132,000	\$38.98	\$38.55	\$5,145,360	\$5,088,600	\$56,760
57.111	Pneumonia (PNEU)	216,000	216,000	\$38.98	\$38.55	\$8,419,680	\$8,326,800	\$92,880
57.112	Ventilator-Associated Event	360,000	360,000	\$38.98	\$38.55	\$14,032,800	\$13,878,000	\$154,800
57.114	Urinary Tract Infection (UTI)	80,000	120,000	\$38.98	\$38.55	\$3,118,400	\$4,626,000	(\$1,507,600)
57.116	Denominators for Neonatal Intensive Care Unit (NICU)	162,000	162,000	\$32.04	\$31.84	\$5,190,480	\$5,158,080	\$32,400
57.117	Denominators for Specialty Care Area (SCA)/Oncology (ONC)	270,000	270,000	\$32.04	\$31.84	\$8,650,800	\$8,596,800	\$54,000
57.118	Denominators for Intensive Care Unit (ICU)/Other locations (not NICU or SCA)	1,800,000	1,620,000	\$32.04	\$31.84	\$57,672,000	\$51,580,800	\$6,091,200
57.120	Surgical Site Infection (SSI)	126,000	126,000	\$38.98	\$38.55	\$4,911,480	\$4,857,300	\$54,180
57.121	Denominator for Procedure	270,000	270,000	\$32.04	\$31.84	\$8,650,800	\$8,596,800	\$54,000
57.123	Antimicrobial Use and Resistance (AUR)-Microbiology Data Electronic Upload Specification Tables	6,000	6,000	\$18.45	\$18.26	\$110,700	\$109,560	\$1,140
57.124	Antimicrobial Use and Resistance (AUR)-Pharmacy Data Electronic Upload Specification Tables	6,000	6,000	\$14.33	\$14.25	\$85,980	\$85,500	\$480
57.125	Central Line Insertion Practices Adherence Monitoring	41,667	8,333	\$38.98	\$38.55	\$1,624,167	\$321,250	\$1,302,917
57.126	MDRO or CDI Infection Form	216,000	216,000	\$38.98	\$38.55	\$8,419,680	\$8,326,800	\$92,880
57.127	MDRO and CDI Prevention Process and Outcome Measures Monthly Monitoring	36,000	36,000	\$38.98	\$38.55	\$1,403,280	\$1,387,800	\$15,480
57.128	Laboratory-identified MDRO or CDI Event	480,000	360,000	\$38.98	\$38.55	\$18,710,400	\$13,878,000	\$4,832,400
57.137	Long-Term Care Facility Component – Annual Facility Survey	250	250	\$38.98	\$38.55	\$9,745	\$9,638	\$108
57.138	Laboratory-identified MDRO or CDI Event for LTCF	500	500	\$38.98	\$38.55	\$19,490	\$19,275	\$215
57.139	MDRO and CDI Prevention Process Measures Monthly Monitoring for LTCF	250	250	\$38.98	\$38.55	\$9,745	\$9,638	\$108
57.140	Urinary Tract Infection (UTI) for LTCF	1,125	1,125	\$38.98	\$38.55	\$43,853	\$43,369	\$484
57.141	Monthly Reporting Plan for LTCF	250	250	\$38.98	\$38.55	\$9,745	\$9,638	\$108
57.142	Denominators for LTCF Locations	9,750	9,750	\$38.98	\$38.55	\$380,055	\$375,863	\$4,192
57.143	Prevention Process Measures Monthly Monitoring for LTCF	250	250	\$38.98	\$38.55	\$9,745	\$9,638	\$108

Form Number	Form Name	Total Estimated Burden (Hours)		Estimated Hourly Wage of Respondent		Total Estimated Annual Cost Burden ^a		Change in Estimated Annual Cost Burden ^a
		06/2015	06/2014	06/2015	06/2014	06/2015	06/2014	
57.150	LTAC Annual Survey	333	333	\$38.98	\$38.55	\$12,993	\$12,850	\$143
57.151	Rehab Annual Survey	833	833	\$38.98	\$38.55	\$32,483	\$32,125	\$358
57.200	Healthcare Personnel Safety Component Annual Facility Survey	400	400	\$33.27	\$32.15	\$13,308	\$12,860	\$448
57.203	Healthcare Personnel Safety Monthly Reporting Plan	1,417	917	\$33.27	\$32.15	\$47,133	\$29,471	\$17,662
57.204	Healthcare Worker Demographic Data	3,333	3,333	\$33.27	\$32.15	\$110,900	\$107,167	\$3,733
57.205	Exposure to Blood/Body Fluids	2,500	2,500	\$33.27	\$32.15	\$83,175	\$80,375	\$2,800
57.206	Healthcare Worker Prophylaxis/Treatment	375	375	\$33.27	\$32.15	\$12,476	\$12,056	\$420
57.207	Follow-Up Laboratory Testing	625	625	\$18.45	\$18.26	\$11,531	\$11,413	\$119
57.210	Healthcare Worker Prophylaxis/Treatment-Influenza	417	417	\$33.27	\$32.15	\$13,863	\$13,396	\$467
57.300	Hemovigilance Module Annual Survey	1,000	1,000	\$34.27	\$33.61	\$34,270	\$33,610	\$660
57.301	Hemovigilance Module Monthly Reporting Plan	100	100	\$34.27	\$33.61	\$3,427	\$3,361	\$66
57.303	Hemovigilance Module Monthly Reporting Denominators	6,000	6,000	\$34.27	\$33.61	\$205,620	\$201,660	\$3,960
57.304	Hemovigilance Adverse Reaction	6,000	6,000	\$34.27	\$33.61	\$205,620	\$201,660	\$3,960
57.305	Hemovigilance Incident	833	833	\$34.27	\$33.61	\$28,558	\$28,008	\$550
57.400	Patient Safety Component—Annual Facility Survey for Ambulatory Surgery Center (ASC)	417	417	\$32.04	\$31.84	\$13,350	\$13,267	\$83
57.401	Outpatient Procedure Component - Monthly Reporting Plan	15,000	15,000	\$32.04	\$31.84	\$480,600	\$477,600	\$3,000
57.402	Outpatient Procedure Component Event	83,333	83,333	\$32.04	\$31.84	\$2,670,000	\$2,653,333	\$16,667
57.403	Outpatient Procedure Component - Monthly Denominators and Summary	40,000	40,000	\$32.04	\$31.84	\$1,281,600	\$1,273,600	\$8,000
57.500	Outpatient Dialysis Center Practices Survey	13,000	11,375	\$38.98	\$38.55	\$506,740	\$438,506	\$68,234
57.501	Dialysis Monthly Reporting Plan	6,500	6,500	\$32.04	\$31.84	\$208,260	\$206,960	\$1,300
57.502	Dialysis Event	162,500	130,000	\$32.04	\$31.84	\$5,206,500	\$4,139,200	\$1,067,300
57.503	Denominator for Outpatient Dialysis	13,000	7,800	\$32.04	\$31.84	\$416,520	\$248,352	\$168,168
57.504	Prevention Process Measures Monthly Monitoring for Dialysis	22,500	9,000	\$32.04	\$31.84	\$720,900	\$286,560	\$434,340
57.505	Dialysis Patient Influenza Vaccination	4,063	4,063	\$32.04	\$31.84	\$130,163	\$129,350	\$813
57.506	Dialysis Patient Influenza Vaccination Denominator	271	271	\$32.04	\$31.84	\$8,678	\$8,623	\$54
Total Estimated Annual Cost Burden						\$169,329,048	\$146,941,956	\$22,387,097

*Despite no change in the estimated burden hours, cost for some forms increased or decreased due to increase or decrease in annual wages.

^aValues were rounded prior to summation.