

Supporting Statement A
Nurse Corps Scholarship Program
OMB Control No. 0915-0301
Revision

A. JUSTIFICATION

1. CIRCUMSTANCES OF INFORMATION COLLECTION

This is a request for Office of Management and Budget (OMB) continued approval of the Health Resources and Services Administration's (HRSA) NURSE Corps Scholarship Program (NCSP) application forms. This project is OMB Approval Number 0915-0301, and expires on May 31, 2018. The legislative authority for the NURSE Corps SP is the Public Health Service Act (Attachment A), Title VIII, amended by Public Law 101-205 on August 1, 2002. The purpose of the NCSP is to provide scholarships to nursing students in exchange for a service commitment at an eligible healthcare facility with a critical shortage of nurses.

An applicant must be enrolled or accepted for enrollment at an accredited school of nursing in a graduate, baccalaureate, associate degree or diploma program. A student can apply for full-time or part-time enrollment. A student must be a U.S. citizen or national, free of any federal judgment liens, free from existing service commitments, and not in default of any federal debt. Scholarship applicants currently are screened in a two-stage process. First an application is submitted. Based on the review of the application, students are then identified by funding preference.

Under the Nurse Corps Scholarship Program (NCSP), students seeking to become registered nurses are offered the opportunity to enter into a contractual agreement with the Secretary under which the U.S. Department of Health and Human Services agrees to pay the total school tuition, required fees, other reasonable costs, and a stipend for living expenses. In exchange, the scholarship recipient agrees to provide full-time, or part-time if approved by the Secretary, clinical services at a health facility designated by the NCSP as having a critical nursing shortage. The minimum service commitment is 2 years; the maximum is 4 years. Information regarding absences and type of health care facility at which NCSP scholars are serving are necessary to ensure that NCSP scholars are fulfilling their service requirements.

One form has been added to this collection:

Nurse Corps SP Employment Verification and Critical Shortage Facility Form, which allows participants to transfer to other facilities mid-service.

One form has been revised:

The Initial Employment Verification Form was updated to include all eligible facilities listed in the NCSP Application and Program Guidance.

2. PURPOSE AND USE OF INFORMATION

The application is used to determine which applicants are qualified to receive scholarship awards. Applicants are selected for awards according to the criteria required by Federal statute and the funding preference of NCSP. In providing contracts under the NCSP, the Secretary shall give priorities to qualified applicants who demonstrate the greatest financial need. The information collected is used by the NCSP to select applicants for scholarship awards. All information is used to determine which individual applicants have a sincere desire to practice in a health care facility with a critical shortage of nurses and have a desire to remain and continue to practice after the period of service commitment. Information collected is also used to monitor NCSP scholars' progress in school and in service to ensure compliance with program policies.

ONLINE APPLICATION FORM

The NCSP application (Attachment B) has ten sections.

Sections 1 & 2. Assurances and Eligibility: This section requires the applicant to assure that if awarded a scholarship the applicant will comply with the service requirements of the NCSP. This section also collects information to ensure that the applicant is eligible to participate in the program.

Section 3. Application Information: This section identifies part-time versus full-time applicants and applicants who may have participated in federal pipeline programs

Section 4 General Information: This section collects general information needed for administrative purposes (e.g., name, address, phone number, e-mail address).

Section 5. Background Information: This section collects gender, ethnicity and race information based on OMB requirements, as well as information about an alternate person to contact in case the applicant cannot be contacted using information in the application.

Section 6. Degree Information: This section collects information about the degree or diploma program for which the applicant is requesting a scholarship, the current status in the program, and the number of school years of funding requested. This section also collects information on the expected family contributions as indicated on the Student Aid Report submitted by the applicant.

Section 7. Letters of Recommendation: This section allows recommenders identified by the applicant to submit letters of recommendation on behalf of the applicant online.

Section 8. Supporting Documents: This section allows the applicant to upload all necessary supporting documents, such as essays, authorization to release information, and verification of acceptance/good standing report.

Section 9. Self Certification: This section requires the applicant to certify that the applicant is not presently debarred, suspended, excluded, or disqualified from participation in covered transactions by any Federal agency or department. This section also requires the applicant to certify that the applicant has read and understands the terms of the NSP program guidance.

Section 10. Review and Submit: This section allows the applicant to review each section and submit the application.

APPLICATION AND PROGRAM GUIDANCE

The Application and Program Guidance (Attachment C) describes the NCSP program for students in training to become registered nurses. It covers applicant eligibility requirements, funding preferences for awards, scholarship benefits, and service requirements. The guidance has three sections.

Section I. Program Overview: This covers eligibility requirements, award process, service obligation, tax notice and information, funding preferences, scholarship benefits, program and service requirements, and program compliance.

Section II. Application Information: This covers general instructions for completing the online application, required supporting documents, and deadline dates.

Section III. Additional Information: This section provides Resources, Frequently Asked Questions and Definitions for applicants.

Graduation Close Out Form

The School Verification Form (Attachment D) is completed by the scholar's academic institution. The form requests information pertaining to whether or not any outstanding balance is due the educational institution from the NCSP on behalf of the scholar. The information is collected once a year upon graduation.

Confirmation of Interest of Award

The Confirmation of Interest Form (Attachment E) is needed for the applicant to accept the scholarship award, provide banking information for stipend payment, confirm the number of years of funding requested, submit the W-4, submit the enrollment verification form, and to sign the award contract electronically. This information is collected once for new awardees through BMISS.

Contract

The contract (Attachment F) authorizes the Secretary of Health and Human Services to provide applicants selected to be participants in the NCSP with scholarship awards. In return for the awards, applicants must agree to serve for a period of not less than 2 year as nurses in a health care facility with a critical shortage of nurses. The contract has six sections.

Section A. Obligations of the Secretary: This covers what the Secretary of the Department of Health and Human Services agrees to provide the selected applicant.

Section B. Obligations of the Applicant: This covers what the selected applicant agrees to provide the NSP while in training and during obligated service periods.

Section C. Breach of Scholarship Contract: This covers the liability of the applicant when there is a breach of contract.

Section D. Cancellation, Suspension, and Waiver of Obligation: This covers what happens upon the applicant's death or the conditions when the Secretary can waive or suspend an applicant's service or payment obligation,

Section E. Contract Extension: This covers the procedures to request annual extensions of contracts.

Section F. Contract Termination: This covers the procedures to terminate a contract.

Data Collection Worksheet

The Data Collection Worksheet (Attachment G) is completed by the scholar's academic institution through BMISS. The Worksheet requests the cost of tuition, required fees, and other reasonable costs for each academic year. This information is necessary to determine the amount of the scholarship award for the payment of NCSP scholar's tuition, fees, and other reasonable educational costs. The information is collected once a year for new awardees.

School Enrollment Verification Form

The School Verification Form (Attachment H) is completed by the scholar's academic institution. The form requests information pertaining to the scholar's student status, such as full-time, part-time, repeating course work, or on leave of absence. This information is utilized to determine if the scholar is eligible for continued NCSP financial support. The information is collected four times a year.

Initial Employment Verification Form

The Initial Employment Verification Form (Attachment I) is needed to identify and approve the health care facilities at which new NCSP scholar graduates find employment as well as when scholars transfer to a different site. This is to ensure that scholars will be serving at a health care facility with a critical shortage of nurses. This information is collected once, upon graduation of the nursing school, and each time a scholar requests to transfer to a different site.

Employer/Participant Service Verification Form

The Service Verification Form (Attachment J) is completed by both the scholar and the scholar's employer. The form is necessary to monitor the successful completion of scholars' service obligations. Information on the number of days of absences is collected to see if an extension of the service obligation is needed. This is completed every six months and is completed online through the BMISS.

3. Use of Improved Information Technology and Burden Reduction

The NCSP utilizes the BMISS, an IT system used to process and monitor all BHW programs. The link to the online NCSP application is available here: <https://programportal.hrsa.gov/>

Banking information which was previously uploaded is now electronically completed through BMISS. Individuals are able to log-in to BMISS to fill out the necessary information online.

4. Efforts to Identify Duplication and Use of Similar Information

The information requested in the application and forms is specific to the applicant and unique to this program. No similar information is collected from this group of individuals. No other source of this information is known to exist for completion of the application and monitoring forms.

5. Impact of Small Businesses or Other Small Entities

No small businesses will be involved in this study.

6. Consequences of Collecting the Information Less Frequently

The online application and data collection worksheet are necessary for the selection process for making NCSP awards, which must be completed annually prior to the beginning of the academic

school year. In the absence of collecting this data, review, selection, and approval of qualified applicants cannot be carried out. Moreover, the Confirmation of Interest Form is completed once to allow the applicants to accept the award, indicate the number of funding years requested, and provide banking information for stipend payments. The School Verification Form is required four times a year to ensure the NCSP participant is maintaining good standing in the academic nursing program and is eligible to continue receiving benefits. The Graduation Close Out Form is required once to ensure the NCSP does not have an outstanding balance due to academic institutions. Initial Employment Verification Form is required only once, unless the scholar requests to transfer to another site, to ensure the scholar will be serving at an eligible facility. The Service Verification Form is required twice a year to ensure participants are meeting their service requirements and to monitor the completion of the participants' service obligations.

7. Special Circumstances Relating to the Guidelines 5 CFR 1320.5(d)(2)

The request fully complies with the regulation.

8. Comments in Response to the Federal Register Notice/Outside Consultation:

Section 8A:

A 60 day notice was published in the *Federal Register* on Wednesday, November 29th 2017, vol. 82, No. 288; pp 56618. There were no public comments.

Section 8B:

This program has consulted with the following individuals to obtain constructive feedback to improve the application, improve efficiency, and minimize the collection burden. The comments on clarity of the application and forms were positive. The applicants found the application instructions and materials to be clear and straight forward. There were no suggestions for improvement.

Applicants contacted included:

Hayder Chaudhery
Registered Nurse (RN)
West Coast University in CA
15981 Oyster Bay Lane
Fontana, CA 92336
909-641-2512

Candace Moon
Nurse Practitioner (NP)
University of North Georgia - School of Nursing
215 MLK Jr. Dr.
Jefferson, GA 30549
706-224-2257

Jessica Stoker
Registered Nurse (RN)
Chamberlain University, Atlanta
2700 Esquire Cir NW; Apt N
Kennesaw, GA 30144

210-376-9586

Gissella Suarez
Registered Nurse (RN)
Universidad Del Turabo, Tampa
7336 Parkside Villas Dr N
St. Petersburg, FL 33709
727-336-5944

Leah Richardson
Nurse Practitioner (NP)
Goshen College
607 S. 3rd St.
Goshen, IN 46526
574-238-1028

9. Explanation of any Payment/Gift to Respondents

Respondents will not receive any remuneration.

10. Assurance of Confidentiality Provided to Respondents

Data collected on the individual NCSP application form constitutes a system of records as defined under the Privacy Act of 1974. The program is covered by an existing System of Records, Public Health and National Health Service Corps (PH/NHSC) Scholarship Training Program, the Physician Shortage Area Scholarship Program (PSASP), National Health Service Corps Scholarship Program (NHSC SP), National Health Service Corps Loan Repayment Program (NHSC LRP), NHSC Student/Resident Experiences and Rotations in Community Health (SEARCH), NURSE Corps Loan Repayment Program (NCLRP), NURSE Corps Scholarship Program (NCSP), Native Hawaiian Health Scholarship Program (NHHSP), and Faculty Loan Repayment Program (FLRP), Applicants and/or Participants Records System, HHS/HRSA/BHW (0915-0037).

All information collected through use of the NCSP application process, as well as storage of this information, will be in compliance with the Privacy Act. A Privacy Act Notice, describing the authority for collecting the information, several routine uses which may be made of the information collected and the necessity of reporting to receive scholarship award consideration, is contained in the NCSP Application Program Guidance.

11. Justification for Sensitive Questions

HHS requires that race and ethnicity be collected on all HHS data collection instruments. Questions regarding race and ethnicity are asked in the online application; however, responses to these questions are optional. The Social Security number is required because the amount received for the stipend and tuition payments must be reported to the Internal Revenue Service as income to the scholarship recipient. All NCSP payments made to scholars, or on their behalf to nursing schools, are taxable pursuant to the legislative citation (26 USC 117(c)).

12A. Estimated Annualized Burden Hours

Type of Respondent	Form Name	No. of Respondents	No. Responses per Respondent	Total number of Responses	Average Burden per Response (in hours)	Total Burden Hours
Nursing Student Applicant	Eligible Applications/ Application Program Guidance	2,600	1	2,600	2	5,200
Academic Institution	School Enrollment Verification Form	500	4	2,000	.33	660
Nursing Scholar*	Confirmation of Interest Form	250	1	250	.2	50
Academic Institution	Data Collection Worksheet Form	500	1	500	1	500
Academic Institution	Graduation Close Out Form	200	1	200	.17	34
Employer	Initial Employment Verification Form	500	1	500	.42	210
Employer	Employer – Participant Service Verification Form	1,000	2	2,000	.12	240
Nurse	CSF Verification Form	200	1	200	.2	40
Total		5,750	8,250	6,934

Respondents are completing multiple forms.

The number of NCSP applicants is estimated to average 2,600 per year for the next 3 years. This estimate is based on the average number of applications received for the cycles from Fiscal Year (FY) 2012 to FY 2017. Each applicant must complete an application only once if selected for award.

The current application requests general information, background information, and educational degree information. It is estimated that it will take an average of 2 hours to review the instructions, complete the forms, and upload the necessary documents to the NCSP online application. The Data Collection Worksheet averages 1 hour to complete and each academic institution will submit one Data Collection Worksheet, which lists the tuition and fees. The Confirmation of Interest form takes on average about .20 hours to complete and is submitted once. The graduation close out form is submitted once upon graduation and averages .17 hours to complete. The School Enrollment Verification Form takes an average of .33 hours to complete. The Initial Employment Verification takes an average of .42 hours to complete while the Participant Service Verification Form for the

Employer takes .12 hours to complete and the employee nurse take an average of .10 hours to complete.

Each academic institution will submit one Data Collection Worksheet, which lists the tuition and fees. This DCW is used to determine the amount of the scholarship award and is submitted once. The Graduation Close-Out Form is used to verify that the NCSP has paid all monies on behalf of the NCSP participant. The School Verification and the Service Verification Forms are to verify that the recipients are in compliance with NCSP program requirements (e.g., are enrolled in an approved nursing degree program, or are providing service as an RN at an approved health care facility with a critical shortage of nurses).

**12 B.
Estimates Annualized Burden Costs**

Type of Respondent	Total Burden Hours	Hourly Wage Rate	Total Respondent Costs
Nursing Scholar Applicants	5,200	\$20.00	\$104,000
School/Academic Institutions	1,194	\$40.00	\$47,760
Nursing Scholars in Service	50	\$41.41	\$2,070.5
Employers	450	\$50.00	\$22,500
Nurse	40	\$41.41	\$1,656.4
Total	6934		\$177,986.9

Basis for Estimates:

Scholarship applicants may be students and/or may be in the workforce and are accepted into a nursing degree program. Since applicant employment status is mixed, a value of \$20 per hour was estimated.

Based on data from the Bureau of Labor Statistics’ (BLS) Occupational Outlook Handbook, the national average hourly wage for registered nurses and nurse practitioners is approximately \$34.14 and \$48.68 per hour. The nursing workforce would earn a mean, hourly wage of approximately \$41.41 per hour ($\$34.14 + \$48.68 = \82.82; $\$82.82/2 = \41.41). As such, the combined total burden hours and total hour cost for the Nurse Corps SP (including employer, academic institution, applicant, and participant burden hours) would be hours and \$ respectively.

13. Estimates of other Total Annual Cost Burden to Respondents or Record keepers/Capital Costs

There are no capital or start-up costs for the respondents. There are no operation or maintenance fees.

14. ESTIMATES OF ANNUALIZED COST TO THE GOVERNMENT

The average annual costs to the government for implementing the on-line application and processing are as follows:

Contract costs for on-line application:	\$83,221
Staff Review	<u>8,500</u>
Total annualized cost:	\$91,721

Contract costs for the on-line application system include upgrades, enhancements, and fixes to the online system. The initial review of the data collection worksheet, school verification and employment certification forms is estimated at 10 minutes at an hourly cost of \$30 (Processing the forms: $1700 \times (1/6) \text{ hour} \times \$30/\text{hour} = 8,500$).

15. Explanation for Program Changes or Adjustments

The current burden inventory for this information collection request is 6,891 hours. This revised request is for 6,934 hours with the slight increase being due to the additional form.

16. Plans for Tabulation, Publication, and Project Time Schedule

Approval is being requested for the maximum allowable time of three years. The information will be used solely for determining scholarship award recipients and ensure program compliance.

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

The OMB number and Expiration date will be displayed on every page of every form/instrument.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

This project fully complies with the guidelines set forth in 5 CFR 1320.9. The required certifications are included in this package.