## A. JUSTIFICATION

**1. Explain the circumstances that make the collection of information necessary. Identify legal or administrative requirements that necessitate the collection of information.**

 Public Law (P.L.) 111-163, Caregivers and Veterans Omnibus Health Services Act of 2010 amended title 38 United States Code Chapter 17 by adding a new section, 1720G, “Assistance and Support Services for Caregivers.” Section 1720G required the Department of Veterans Affairs (VA) to develop a Program of Comprehensive Assistance for Family Caregivers and Support Services. Under the law, primary family caregivers may be eligible to receive a stipend, access to health care coverage, mental health counseling, comprehensive caregiver education and training and expanded respite services. Caregivers also may be eligible for travel benefits when they accompany the Veteran for care or attending training.

 In order to administer these benefits to caregivers, it is necessary that the VA receive information about the nature of benefit being sought and the persons who will be serving as caregivers and receiving benefits. This information is collected with VA Form 10-10CG. Additional information will be collected by VA when a participating veteran provides required notice of a change of address and will be added to OMB Control Number 2900-0768.

 Section 161 of the VA Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act of 2018 (Pub. L. 115-182) – the MISSION Act of 2018 -- made several changes to PCAFC’s authorizing statute, including expanding eligibility to all service eras. The VA proposes to revise its regulations that govern Program of Comprehensive Assistance for Family Caregivers (PCAFC). The new rulemaking (AQ48) will make several improvements to PCAFC and will update the regulations to comply with the enactment of the MISSION Act of 2018. The proposed changes would allow PCAFC to address the needs of Veterans of all eras and standardize the current program to focus on Veterans with moderate to severe needs.

 This rule at 38 CFR 71.25 includes a provision constituting a modification to a collection of information under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3521) that requires approval by the Office of Management and Budget (OMB). Accordingly, under 44 U.S.C. 3507(d), VA has submitted a copy of this rulemaking to OMB for review.

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

 The information collected with VA Form 10-10CG will be used to determine if a post-9/11 Veteran or activeduty service member undergoing medical dischargequalifies for Caregiver Support Services and whether the individuals designated to serve as a primary or secondary family caregiver meet VA’s criteria to serve in these roles.

 The form is completed by the Veteran, activeduty service member undergoing medical discharge, caregiver, or persons having power of attorney or legal guardianship as described in 38 C.F.R. § 17.32, Informed Consent and Advance Health Care Planning. The form can be mailed, completed online, or hand carried to the VA. Individuals completing the form will certify that the information is correct and true to the best of their knowledge and belief.

 Veteran change of address notifications will be used to confirm that appropriate payments made to caregivers, as determined by cost of living allowances in that geographic location.

**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 described any consideration of using information technology to reduce burden.**

 The online Application for Comprehensive Assistance for Family Caregivers Program fillable and fileable form with instructions can be accessed at http://www.va.gov/vaforms/medical/pdf/10-10CG.pdf Veteran change of address notifications are submitted by whatever manner is expedient.

**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.**

 VA Form 10-10EZ, Application for Health Benefits and VA Form 10-10EZR, Health Benefits Renewal Form, under OMB Approval number 2900-0091, is used as VA’s information collection for Veterans. The process for determining eligibility for Comprehensive Assistance for Family Caregivers and Support Services is initially based upon Veteran’s eligibility. To avoid duplication of information collection, VA will only require the Veteran’s and Servicemember’s information to be obtained via VA Form 10-10EZ or updated information via VA Form 10-10EZR. The 10-10EZ Form will be submitted along with the Caregiver Joint Application form to determine Veterans’ and Caregivers’ eligibility. VA has cross-walked the Caregiver Joint Application form with the existing 10-10EZ or the 10-10EZR and reduced the amount of information requested on the Caregiver Joint Application, thereby removing duplicative data collection.

**5. If the collection of information impacts small businesses or other small entities, describe any methods used to minimize burden.**

 This information collection will not have any impact on small businesses or other small entities.

**6. Describe the consequences 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.**

 VA's failure to collect this information would mean:

 a. Veterans and their primary and secondary family Caregivers would not be allowed to apply for this benefit as authorized by Public Law (P.L.) 111-163, Caregivers and Veterans Omnibus Health Services Act of 2010, specifically, title 1, section 101 through 104.

 b. The failure to apply for and receive these benefits would result in: a) negatively affecting financial resources for the Caregiver; b) reducing the quality of life and care for the Veteran; and c) potentially limiting the health care options for Caregivers.

**7**. **Explain any special circumstances that would cause an information collection to be conducted more often than quarterly or require respondents to prepare written responses to a collection of information in fewer than 30 days after receipt of it; submit more than an original and two copies of any document; 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 and require the use of a statistical data classification that has not been reviewed and approved by OMB.**

 There are no such special circumstances.

**8. a. If applicable, provide a copy and identify the date and page number of publication in the Federal Register of the sponsor’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 sponsor in responses to these comments. Specifically address comments received on cost and hour burden.**

 The 60-day notice of Proposed Information Collection Activity under 2900-0768 was published in the Federal Register on July 15, 2020 (Volume 85, Number 136, Page 42983). So far, we have not received comments in response to this notice.

 **b. Describe efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, clarity of instructions and recordkeeping, disclosure or reporting format, and on the data elements to be recorded, disclosed or reported. Explain any circumstances which preclude consultation every three years with representatives of those from whom information is to be obtained.**

 In addition, outside consultation is conducted with the public through the rulemaking Federal Register notices.

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

 No payment or gift is provided to respondents.

**10. Describe any assurance of privacy to the extent permitted by law provided to respondents and the basis for the assurance in statute, regulation, or agency policy.**

 Assurances of privacy are contained in 38 U.S.C. 5701 and 7332. Respondents are informed that the information collected will become part of the Consolidated Health Record which complies with the Privacy Act of 1974. This is part of the system of records identified as 24VA19 “Patient

Medical Record – VA,” “Enrollment and Eligibility Records --VA” (147VA16), and “Health Administration Center Civilian Health and Medical program Records--VA” (54VA17) as set forth in the 2003 Compilation of Privacy Act Issuances via online GPO access at <http://www.gpoaccess.gov/>.

**11. Provide additional justification for any questions of a sensitive nature (Information that, with a reasonable degree of medical certainty, is likely to have a serious adverse effect on an individual's mental or physical health if revealed to him or her), such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private; include specific uses to be made of the information, the explanation to be given to persons from whom the information is requested, and any steps to be taken to obtain their consent.**

 The only potentially sensitive information requested on the form is respondent’s gender. We do not believe this information would have adverse effect on any individual’s mental or physical health if revealed to him or her.

**12. Estimate of the hour burden of the collection of information:**

 **a. The average annual number of respondents, frequency of responses, and annual hour burden is estimated as follows:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **VA Form****10-10CG** | **No. of respondents (annually)** | **x No. of responses (annually)** | **x No. of minutes** | **÷****by 60 minutes** | **Number of Hours** |
| PCAFC Application | 2021 = 76,635 | 1  | 15 = 1,149,525 | ~ 19,159 |
| PCAFC Application | 2022 = 47,465 | 1 | 15 = 711,975 |  | ~ 11,866 |
| PCAFC Application | 2023 = 64,229 | 1 | 15 = 963,435 |  | ~ 16,057 |
| **Average Annual** | **62,776** | **1** | **15 = 941,640** |  | **~ 15,694 hours** |

The average number of respondents (over 3 years) is estimated at **62,776 annually**. The time estimate to complete the form is 15 minutes. The annual hour burden is estimated at **15,694 hours**.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Notice of Veteran Change of Address** | **No. of respondents****(annually)** | **x No. of responses****(annually)** | **x No. of minutes** | **÷****by 60 minutes** | **Number of Hours** |
| Notification  | **3,250** | 1 | 10 = 32,500 | **542** |

 **b. If this request for approval covers more than one form, provide separate hour burden estimates for each form and aggregate the hour burdens in Item 13.**

 This request covers one form, VA Form 10-10CG: Application for Comprehensive Assistance for Family Caregivers Program, as well as the collection of Veteran change of address notifications.

 **c. Provide estimates of annual cost to respondents for the hour burdens for collections of information. The cost of contracting out or paying outside parties for information collection activities should not be included here. Instead, this cost should be included in Item 14.**

The respondent population for VA Form 10-10CG is composed of individuals who are applying for PCAFC.  VA cannot make further assumptions about the population of respondents because of the variability of factors such as the educational background and wage potential of respondents.  Therefore, VBA used general wage data to estimate the respondents’ costs associated with completing the information collection.

The Bureau of Labor Statistics (BLS) gathers information on full-time wage and salary workers.  In accordance with the latest available BLS Occupational Wage Code Median Hourly (May 2019), the mean hourly wage is $25.72 based on the BLS wage code – “00-0000 All Occupations.”  This information was taken from the following website: <https://www.bls.gov/oes/current/oes_nat.htm>.

Legally, respondents may not pay a person or business for assistance in completing the information collection. Therefore, there are no expected overhead costs for completing the information collection.  VBA estimates the total cost to all respondents to be $417,589.92 (16,236 burden hours x $25.72 per hour).

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

 a. There are no capital, start-up, operation or maintenance costs.

 b. Cost estimates are not expected to vary widely. The only cost is that for the time of the respondent.

 c. There is no anticipated recordkeeping burden beyond that which is considered usual and customary.

14. Provide estimates of annual cost to the Federal Government. Also, provide a description of the method used to estimate cost, which should include quantification of hours, operation 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.

 The cost to the Federal Government is estimated at $649,427.

|  |  |  |
| --- | --- | --- |
| Administrative review by Caregiver Support Coordinator | GS12/5 ($40/hr) x 15 min x 62,776 applic. GS12/5 ($40/hr) x 10 min x 3,250 notices  | $627,760$ 21,667 |

***Note:*** *The per hour rate of a GS 12/5 is based on the average 2019 hourly rate table.*

**15. Explain the reason for any burden hour changes since the last submission.**

#####  Since the initial application phase, the program office has received tens of thousands of applications for PCAFC. Over the past eight (8) years since the program has been in existence, the program office has determined that 16,500 would be a fair estimate of continued annual applications. However, as the MISSION Act of 2018 expanded program eligibility to Veterans of all eras, the estimated number of respondents has been increased significantly to an annual average of 62,776.

 Further, the information collection under OMB Control Number 2900-0768 will now include notifications sent by Veterans when they have a change of address. The average number of notifications is estimated to be 3,250 annually.

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.

 There are no plans to publish the results of the information collected.

17. If seeking approval to omit the expiration date for OMB approval of the information collection, explain the reasons that display would be inappropriate.

 VA will display the expiration date.

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

 There are no exceptions.

## B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS

 No statistical methods are used in this data collection.