

Change Request
Pregnancy Risk Assessment Monitoring System
(OMB Control No. 0920-1273; Exp. date 11/30/2022)
September 8, 2021

Summary

We request OMB approval to implement data collection online through a web version of the Pregnancy Risk Assessment Monitoring System (PRAMS), and to conduct pilot testing of the web module with 5 early adopter states during the Fall of 2021.

Background and Justification

At the time of OMB approval of PRAMS, plans for the web module pilot were specified as an approach to further the use of improved information technology. A web module has been developed for pilot testing with the aim of deployment in the Fall of 2021. The questions to be asked through the web module are the same as those asked in the existing state multimode (phone, mail, and now web) survey. CDC submits this change request to account for this new data collection mode included in the PRAMS Integrated Data Collection System (PIDS) system to collect responses from PRAMS participants.

This pilot will occur among 5 early adopter states for the PRAMS livebirth survey (MD, VA, PR, WY, SC). Respondents will be able to link to the web module using a web address or QR code and will be able to fill out the module on a computer, hand-held device, or smart phone.

The web layout for the questionnaire for 5 early adopter states are included as attachments (Attachments 1-5). States administer their tailored version of the survey (core plus standard modules and ≤ 2 CDC funded supplements) without change throughout the questionnaire phase, which typically lasts between 3 and 5 years. States may choose to customize their informed consents as required by local IRB to reflect their unique circumstances. Therefore, the burden statement on data collection instruments for the livebirth questionnaires are indicated as a range of 25-35 minutes yet may vary by state. This change request does not include a change in estimated respondent burden.

Pilot testing will be used to determine whether the web-based data collection is an appropriate and efficient mode of collecting information from PRAMS participants. The main indicators evaluated will include:

- Change in overall response rates before and after implementation of web module
- Change in response rates before and after web module implementation within subpopulations (classified by maternal race, maternal age, maternal education) that have typically had lower response rates

Because results from previous research have been mixed with respect to the impact of web-based data collection on response rates, this evaluation of the pilot testing will assess whether implementation of the web module improves representativeness of the sample and improves response rates. Other metrics that will be collected include reduced mail and postage costs and reduced staff time for preparing mail packets, conducting phone interviews and data entry.

CDC intends to use lessons learned from this pilot to refine the web module approach as needed. If supported by findings from the pilot, CDC plans, during the next year, to scale up the number

of PRAMS jurisdictions collecting data from respondents using a web module such that all states would be collecting data using the web module by September 2022.

Effect of Proposed Changes on Currently Approved Instruments

The proposed changes will result in the development of a web-based version of the PRAMS survey that is nearly identical to the mail version of the survey in content.

Burden Estimate

The changes will have no impact on study burden for the respondents.

OMB approval is requested, effective immediately.