

Supporting Statement A
BHW Program Specific Form
OMB Control No. 0915-xxx
Revision

Terms of Clearance: None

A. Justification

1. Circumstances Making the Collection of Information Necessary

This is a request for approval from the Office of Management and Budget (OMB) submitted by the Health Resources Services Administration (HRSA) for approval of the Bureau of Health Workforce (BHW) Program Specific Form and the Scholarships for Disadvantaged Students (SDS) Form. This clearance request is for approval of both forms. The SDS Program-Specific Form is currently approved under OMB Approval No. 0915 – 0149 with the expiration date of November 30, 2022. For programmatic efficiency, HRSA is consolidating this previous separate ICR with this new ICR and will be discontinuing OMB No. 0915 – 0149.

Currently, disparity related data is not uniformly collected across the bureau from applicants. Historically, only the Scholarships for Disadvantaged Students (SDS) Program collects disparity related data from applicants. This has improved the outcomes of the SDS Program. However, all of the programs in the Bureau provide disparity related data post-award. Being able to establish a baseline for BHW programs and include objective criteria related to health equity will expand the capacity of BHW to fund grantees to increase the representation and retention of underrepresented minorities (URMs) and disadvantaged individuals in education and training pathways as well as the health care workforce. Collecting disparity related data from BHW applicants would close a serious data gap.

Collecting this data in the HRSA Electronic Handbook will help grant reviewers, policy makers and HRSA staff make decisions that advance the health equity mission of the Department. BHW will use this information to inform funding decisions, establish equitable policies, and make programmatic recommendations for underserved populations... The data proposed for collection will aid BHW in advancing equitable health outcomes.

Executive Order 13985, (Advancing Racial Equity and Support for Underserved Communities Through the Federal Government), promotes equity for individuals belonging to groups that have been historically underserved, marginalized, or subject to

discrimination or systemic disadvantage. In July 2021, HHS Awarding Agencies were instructed to consider including funding considerations in the “Review and Selection Process” section of their NOFOs that provide discretion to select awards for funding that best reach the needed underserved communities and/or populations.

This objective review criterion will expand the capacity of BHW to fund grantees to increase the representation and retention of URM and disadvantaged individuals in education and training pathways as well as the health care workforce. In programs, where statutorily supported and in cases where the prevalence of health conditions disproportionately affects underserved communities, these may be included as funding considerations.

BHW is leveraging the legislative and statutory of authority for over thirty-five (35) programs to obtain disparities related data. In Titles VII and VIII of the Public Health Service Act (specifically, sections 748, 799 (c), 806 (b) and (f)) provides for priorities in making grant awards to qualified applicants that have a record of training individuals who are from a rural or disadvantaged background, or from underrepresented minority groups.

Specifically, PHS Act section 799(c), which applies to the authorities found in PHS Act Title VII specifically provides,

“(c) INFORMATION REQUIREMENTS.— (1) IN GENERAL.—Recipients of grants and contracts under this title shall meet information requirements as specified by the Secretary. (2) DATA COLLECTION.—The Secretary shall establish procedures to ensure that, with respect to any data collection required under this title, such data is collected in a manner that takes into account age, sex, **race, and ethnicity.**” [emphasis added]

Title VIII has more general, but similar provisions in PHS Act section 806(b) and (f), which applies to the authorities found in PHS Act Title VIII. That section states,

“(b) INFORMATION REQUIREMENTS.— (1) IN GENERAL.—Recipients of grants and contracts under this title shall meet information requirements as specified by the Secretary.”

“(f) ANALYTIC ACTIVITIES.—The Secretary shall ensure that—
(1) cross-cutting workforce analytical activities are carried out as part of the workforce information and analysis activities under this title; and
(2) discipline-specific workforce information is developed and analytical activities are carried out as part of—
(A) the advanced education nursing activities under part B;
(B) the workforce diversity activities under part C;
and
(C) basic nursing education and practice activities under part D.”

The SDS program is authorized by section 737 of the Public Health Service (PHS) Act. The purpose of the SDS program is to promote diversity among health profession students and practitioners by providing funds to eligible schools for use in awarding scholarships to full-time financially needy students from disadvantaged backgrounds enrolled in health profession and nursing programs. To qualify for participation in the

SDS program, a school must carry out a program for recruiting and retaining students from disadvantaged backgrounds, including students who are members of racial and ethnic minority groups (section 737(d)(1)(B) of the PHS Act). In order to meet this statutory requirement, a school must demonstrate that its program has achieved success based on the number and/or percentage of disadvantaged students who are in enrolled and graduate from the school. In awarding SDS funds to eligible schools, priority points must be given to schools based on the proportion of graduate students practicing in primary care, the proportion of full-time underrepresented minority students, and the proportion of graduates working in medically underserved communities (section 737(c) of the PHS Act).

Collecting this data in advance will help grant reviewers, policy makers and HRSA staff make decisions that advance the health equity mission of the Department. Data collected will not inform funding amounts; rather, funding amounts will be determined by way of the NOFO application process except where statutorily allowable.

2. Purpose and Use of Information Collection

HRSA and BHW will use the data collected in the Notice of Funding Opportunity (NOFO) to establish a baseline for each BHW grantee to track their future progress in meeting the relevant programmatic goals and objectives, and for funding considerations—where statutorily supported—and in cases where the prevalence of health conditions disproportionately affects underserved communities. In some programs, this data will support the determination of priority points and preferences in the funding process. This data will allow BHW to more accurately measure the impact of the selected applicants, and of BHW programs collectively, on target populations and communities.

BHW Notice of Funding Opportunities

Applicants are required to respond to the NOFO of each BHW program from which they are requesting funding. The information collected on the application is needed by HRSA to gather background information on applicants, for the objective review criteria, to establish a baseline for funded recipients, and in cases where statutorily supported, support the determination of priority points and preferences for funding. Each program within BHW has its own criteria for eligible applicants.

Applicants determine the eligibility of individual participants based on a variety of factors including but not limited to financial need and whether a student meets the criteria for being from a disadvantaged background. Each application for a BHW program is prepared and submitted electronically through Grants.gov. The NOFO for each program is available through Grants.gov, including the Program Specific Forms and Instructions. Applicants use the SF 424 R & R as the Application forms package. In order to submit the application electronically, all applicants must register in Grants.gov.

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Each applicant must provide baseline data on the number of students enrolled and

graduated from disadvantaged backgrounds using data from the past three academic years. Disadvantaged background can be demonstrated by students' educational, environmental, or economical background. Educational and environmentally disadvantaged means an individual comes from an environment that traditionally inhibits people from obtaining the knowledge, skills, and abilities required to enroll in and graduate from a health professions school, or from a program providing education or training in an allied health profession. Economically disadvantaged means an individual comes from a family with an annual income that does not exceed 200 percent of the Department's poverty guidelines. The income threshold is adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary of the U.S. Department of Health and Human Services (HHS), for use in all health professions programs. Some BHW programs include a faculty component and only in applicable programs will faculty data be collected.

SDS Specific Form

The information collected for the SDS application is needed by HRSA to determine whether applicant schools are eligible to participate in the program and to establish priority points for funding. Applicant schools are required to complete an application for each discipline or program for which funding is requested. Each school determines the eligibility of individual students based on financial need and whether a student meets the criteria for being from a disadvantaged background. Each grantee must demonstrate that at least 20 percent of the students enrolled and graduated are from disadvantaged backgrounds using data from the past three academic years. Similar to the BHW Program Specific Form, disadvantaged background for the SDS Program can be demonstrated by students' educational, environmental, or economical background. Educational and environmentally disadvantaged means an individual comes from an environment that inhibits people from obtaining the knowledge, skills, and abilities required to enroll in and graduate from a health professions school, or from a program providing education or training in an allied health profession. Economically disadvantaged means an individual comes from a family with an annual income that does not exceed 200 percent of the Department's poverty guidelines. The income threshold is adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary of the U.S. Department of Health and Human Services (HHS), for use in all health professions programs.

HHS Poverty Guidelines for 2022

2022 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA	
Persons in family/household	Poverty guideline
1	\$13,590

2022 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA	
Persons in family/household	Poverty guideline
2	\$18,310
3	\$23,030
4	\$27,750
5	\$32,470
6	\$37,190
7	\$41,910
8	\$46,630
For families/households with more than 8 persons, add \$4,720 for each additional person.	

3. Use of Improved Information Technology and Burden Reduction

The entire application, including the Program Specific data forms, are completed in the Grants.gov system.

4. Efforts to Identify Duplication and Use of Similar Information

Information requested in the application is specific to the applicant and is unique to BHW programs.

5. Impact on Small Businesses or Other Small Entities

This data collection will not have a significant impact on a substantial number of small businesses or entities. Only the minimum information necessary to make awards is requested.

6. Consequences of Collecting the Information Less Frequently

The information requested in the application is collected during each application cycle,

once every three to five years, dependent upon the program. In the absence of collection of this data, the review, selection, approval, and funding of qualified applicants could not be carried out. BHW will be unable to establish a baseline for each BHW grantee and effectively track their progress in meeting the relevant programmatic goals and objectives.

7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

The information collected is consistent with the Guidelines in 5 CFR 1320.5(d)(2).

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

Section 8A:

A 60-day Federal Register Notice was published on May 25, 2022 (87 FR 31893). There were no comments.

A 30-day Federal Register Notice was published on September 26, 2022 (87 FR 58359). There were no comments.

Section 8B:

BHW Program Staff has surveyed a total of nine current Title VII and VIII grantees to obtain constructive feedback to improve the application, improve efficiency, and minimize the collection burden. They provided minimal clarifying and we addressed those clarifying edits in the attached data collection tool. An average of 14 hours is required to complete the BHW Program Specific Form. The SDS form remains at 31 hours.

9. Explanation of any Payment/Gift to Respondents

Respondents will not receive any payments or gifts.

10. Assurance of Confidentiality Provided to Respondents

The HRSA Privacy Act Coordinator has determined that a system of records notice is not required because the participating institutions maintain the student and trainee also known as participant records associated with these programs. Identifiable information is submitted through the Grants.gov system. Data will be kept private to the extent allowed by law.

11. Justification for Sensitive Questions

BHW Program Specific Form

The sensitive information collected is needed by HRSA to gather background information on applicants for the objective review criteria, establish a baseline for the program outcomes of the funded recipients, and in cases where statutorily supported,

determine eligibility and support the determination of priority points and preferences for funding.

SDS Program only

For the SDS Program only, BHW collects data on the race/ethnicity of enrolled students to determine whether the applicant is eligible to receive SDS funds by demonstrating at least 20 percent of the applicant’s enrollees and graduates are from disadvantaged backgrounds. Additionally, the same data is used to determine if an applicant qualifies for the statutory funding-priority points under section 737(c) of the PHS Act based on three priority areas:

1. The proportion of graduating students going into primary care;
2. The proportion of underrepresented minority enrolled students; and
3. The proportion of graduates working in medically underserved communities.

The priority points and preferences to be eligible for this priority, applicants must have a certain percentage for each of three priority areas. Applicants receive two priority points for each priority area they demonstrate 15-29.99 percent compliance, three points for 30-49.99 percent compliance and four points for 50 percent or more.

12. Estimates of Annualized Hour and Cost Burden

The estimated burden hours are reflected in the following table:

12A. Estimated Annualized Burden Hours

Form Name	Number of Respondents	Number of Responses per Respondent	Total Responses	Average Burden per Response (in hours)	Total Burden Hours
BHW Program Specific Form	2,069	1	2,069	14	28,966
SDS Form	323	1	323	31	10,013
Total	2,392	--	2,392	--	38,979

Basis for estimates:

Application: The next anticipated BHW competition cycles will be in FY 2022, 2023, 2024, and 2025. The number of applicants for each program varies. For the BHW Program Specific Form is estimated to be approximately 2,069 and for the SDS Form, the number of applicants is estimated to be approximately 323. Each applicant must complete one application. The application consists of general information, instructions, and a data form. Some information should be readily available and some tracking of graduates/completers will be necessary in order to provide the information necessary to satisfy the requirements and funding considerations for each program. Based on

conversations with entities that are familiar with the program, they estimate that it will take approximately 14 hours to review the instructions, collect data, and complete the BHW Program Specific Form (**2,069 applicants X 14 hours/response = 28,966**) and 31 hours to review the instructions, collect data, and complete the SDS Form (**323 applicants X 31 hours/response = 10,013 hours of response burden**). Please note that the estimated total hours of 38,979 are spread across several fiscal years and approximately thirty-six different BHW programs including the SDS program, which accounts for over 25% of the total estimated burden hours.

12B. Estimated Annualized Burden Costs

Type of Respondent	Total Burden Hours	Hourly Wage Rate	Total Respondent Costs
BHW Eligible Applicants	28,966	\$93.03	\$2,694,706.98
SDS Eligible Applicants	10,013	\$93.74	\$938,618.62
Total	--	--	\$3,633,325.60

Sources: <https://www.bls.gov/ooh/management/postsecondary-education-administrators.htm>, <https://www.bls.gov/ooh/management/training-and-development-managers.htm>, <https://www.bls.gov/ooh/management/social-and-community-service-managers.htm>, and <https://www.bls.gov/ooh/management/medical-and-health-services-managers.htm>. The hourly rate for the BHW applicants were averaged and then doubled to account for employer overhead and fringe benefits.

We estimate that the costs to the public for the BHW program applicants in general will be \$2,694,706.98 (14 hours X \$93.03/hour = \$ 1,302.42 x 2,069 applicants = \$2,694,706.98). An average wage rate for an employee to process the form for the BHW program application is \$ 93.03 per hour.

We estimate that the costs to the public for the SDS program application will be \$908,379.36 (31 hours X \$93.74/1hour = \$ 2,905.94 x 323 applicants = \$938,618.62). An average wage rate for an employee to process the form for the SDS program application is \$ 90.72 per hour.

We estimate that the total cost to the public for the both types of BHW applications will be \$3,633,325.60. Please note that this cost is spread across several fiscal years and approximately thirty-six different BHW programs including the SDS program.

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

Applicants will have no capital and start-up costs and no operational and maintenance

¹ This rate has been doubled to account for employer overhead and fringe benefits.

costs.

14. Annualized Cost to Federal Government

A total annual amount of \$33,027 cost to the Federal Government (includes staff and REI contract) for the BHW Application.

The staff cost for application format, updates to program guidance, application acceptance, reviews and analysis of an estimated 2,069 applications across BHW programs is expected on average to be \$14,822 (5% salary of three GS-12-5, Washington DC Locality Area) per year.

The staff cost for application format, updates to program guidance, application acceptance, reviews and analysis of an estimated 323 applications per year is expected to be \$8,205 (5% salary of one GS-14-9, Washington DC Locality Area) for the year

In addition, the contractors, REI Systems, Inc., provide maintenance on the EHB system for \$10,000 a year.

15. Explanation for Program Changes or Adjustments

This is a new data collection.

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

Tabulation and analysis is currently performed on the information collected to improve program management, evaluate the applicants, establish a baseline for program outcomes, and report to the Congress and the Department, as needed. We are requesting a three (3) year clearance for all BHW applications.

Application: The project periods for the various programs are between three (3) to five (5) years. The next application cycle for BHW Programs is anticipated to be in FY 2022 and FY 2023, and we will need to publish a NOFO for each relevant program. Please note that the programs included will only collect this data once every three to five years. Each BHW program included does not publish a NOFO annually.

If emergency clearance is approved we would like to begin with our remaining FY 2022 relevant programs. The project periods will vary depending on the BHW Program. In general, the first year of the project period for FY2023 programs is October 1, 2022 – September 30, 2023. The second year of the project period will be July 1, 2021 – June 30, 2022. All subsequent years will run from July 1 of one year to June 30 of the next year. Funding beyond the first year is dependent on the availability of appropriated funds for BHW programs in subsequent fiscal years, grantee satisfactory performance, and a decision that continued funding is in the best interest of the Federal Government.

Data is provided on student/trainee enrollment and the gender, race and ethnicity of all students/trainees, disadvantaged enrollment by class year, students/trainees graduated, students/trainees from disadvantaged backgrounds graduated, and graduates/completers serving in medically underserved communities. Numbers of graduates/completers serving in primary care must be provided for schools of medicine, osteopathic medicine, dentistry, nursing (graduate degree program), physician assistants, dental hygiene, and mental and behavioral health programs. Basic information about recruitment, retention and data sources are also provided by the applicants. Tenure status, race/ethnicity and gender data for faculty is provided. Faculty data is only collected for BHW programs with a faculty component.

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

The expiration date will be displayed.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

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