



DATE: October 18, 2022

TO: Josh Brammer, OMB Desk Officer

FROM: Samantha Miller, Acting HRSA Information Collection Clearance Officer

Request: The Health Resources and Services Administration (HRSA) Maternal and Child Health Bureau (MCHB) Pediatric Mental Health Care Access (PMHCA) program and the Screening and Treatment for Maternal Depression and Related Behavioral Disorders (MDRBD) program request approval for changes to the DGIS Training Form 15 (OMB 0915-0298 expiration date 8/31/2025).

Purpose: The purpose of this request is to:

- 1) Revise the definition of enrolled and participating providers for item A.1.i to make it easier for respondents to understand the categories, and;
- 2) Add postpartum depression to the list of conditions in item A.1.ii.c, to allow respondents to continue to report on this condition.

This memo explains the changes and supporting rationale.

Changes: **Instruments:** DGIS Training Form 15 (OMB 0915-0298 expiration date 8/31/2025)

The Proposed Clarifications and Non-Substantive Changes section describes the changes and rationale in more detail. The DGIS Training Form 15 with proposed changes included is attached. The requested changes are minimal and will make it easier for respondents to understand and complete the form and provide HRSA with more accurate data.

Time Sensitivity: The data collection changes must be completed in a timely manner to ensure consistent data collection from respondents as soon as the DGIS Training Form 15 is implemented and used for reporting. Approval of these changes is requested by November 23, 2022, to implement the changes in the data collection instruments and to prepare for the timely collection of data critical to HRSA.

Burden: These changes included herein do not substantially change the estimated reporting burden for respondents. The clarification to the definition of enrolled and participating providers will make it easier for respondents to understand the categories and complete the form. The addition of postpartum depression in the conditions list will eliminate the need for respondents to state this category themselves as an entry under “other”.

PROPOSED CLARIFICATIONS AND NON-SUBSTANTIVE CHANGES:

Item A.1.i.: Number and types of providers enrolled for and participating in program consultation (teleconsultation or in-person) and care coordination support services

Proposed: Revise the definitions for enrolled and participating providers as captured under the form’s footnotes to state (new language underlined and language to be removed crossed out):

¹ Enrolled provider: a provider who has formally registered with the program to facilitate use of consultation (teleconsultation or in-person) or care coordination support services, at the time of reporting. An enrolled provider is currently enrolled with the program even if initial enrollment occurred prior to current reporting period. An enrolled provider may or may not be a participating provider.

² Participating provider: a provider who has contacted the program for consultation (teleconsultation or in-person) or care coordination support services, and who may or may not be an enrolled provider.

Rationale:

During the review process the program received comments asking for more clarification on enrolled and participating provider definitions and whether the categories are mutually exclusive. Previous revisions tried to clarify the categories, but the new language is more direct and accurate. The proposed changes do not alter the data collection; the changes make it clear that the categories are not mutually exclusive and should make it easier to complete the DGIS form.

Item A.1.ii.c: Please indicate the condition(s) about which providers contacted the program for consultation (teleconsultation or in-person) or care coordination support services

Proposed: Add postpartum depression to the list of conditions about which a provider may contact the program. Add language to the general depressive disorders item stating the postnatal depression is excluded from that category.

Rationale:

Postpartum depression is directly relevant to the MDRBD program, which focuses on supporting providers in providing behavioral health services to pregnant and postpartum women. Postpartum depression is currently reported as an “other” category on program forms and programs are able to enter as many “other” fields as they need. Currently, the DGIS is only capable of listing one “other” entry field, meaning the program will not be able to distinguish postpartum depression from other conditions reported in that field. Details on postpartum depression would thus either be lost by being reported in a general “other” category or included in the more general “depressive disorders” category. The program is requesting that postpartum depression be added as a condition category to provide more accurate data reporting and to continue the collection of data on postpartum depression.

Attachments:

DGIS Training Form 15 (OMB 0915-0298 expiration date 8/31/2025) showing proposed revisions