OMB Approval Number: XXXX-XXX Expiration Date: XX/XX/XXXX

Questions for States to Estimate the Time and Cost for Synopses of State Dental Public Health Programs Data Collection

The Centers for Disease Control and Prevention (CDC) supports the Association of State and Territorial Dental Directors (ASTDD) through Cooperative Agreement NU58DP006573, to **distribute the Synopses of State Dental Public Health Program Data (herby referred to as State Synopses) questionnaire to the 50 states and the District of Columbia**. The purpose of the questionnaire is to obtain current information from each state on infrastructure, workforce, and administrative factors that impact the state's oral health program. Data are publicly available on CDC Oral Health Data Portal and ASTDD website. It is distributed every January as a fillable Word document and is returned through e-mail or an online system.

When data collection systems require responses, the federal Office of Management and Budget (OMB) mandates that federal agencies request approval under the authority of the Paperwork Reduction Act. OMB requires CDC to estimate the time and cost for states to participate in the State Synopses questionnaire.

To better understand the State Synopses data collection burden by states and DC, we are asking some states to provide us with an estimate of the time it took to collect and provide these data for the 2021 survey concerning 2019–2020. Your specific information will not be released to any other entity. Only summarized information across the states will be presented in the application.

To answer these questions, you may need to estimate the hours by job titles. Some states will not use all these job titles, but they are the *types of roles* that could potentially be required. If you do include these in the estimates, please provide an <u>estimate of hours used each year on average for each job title listed below</u>. Use 15-minute (i.e., .25 hours) increments. Please note we are only looking for generalized estimates based on your history of participation, and not an exact accounting.

Question 1. From when the annual State Synopses questionnaire is received from ASTDD, how much time is expended by each role below to review the instructions and complete the fillable Word document or online survey?

Job Title	Number of Hours Expended
Dental Director (if applicable)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	

Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	

Question 2. What is an estimated hourly wage rate for each role used to estimate the time burden?

Job Title	Hourly Wage Rate
Dental Director (if applicable)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	
Other Individuals Involved (please list job title, no name)	

Question 3: Has your state used the State Synopses reports and data to inform oral health programs and policies? If yes, please briefly describe your state use of these data.

Response		