

SUPPORTING STATEMENT A

VA Pilot Program on Graduate Medical Education and Residency (PPGMER)

[MISSION Act Section 403 - AR01]

OMB Control Number: 2900-NEW

Summary of ICR:

- This is a new information collection that does not have previously approved burden hours.
- No forms will be used – respondent institutions will determine the best method for collecting information.
- No comments were received on the 60-day FRN.
- The 30-day FRN was published in the PRA section of final rule AR01.

A. JUSTIFICATION

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

Section 403 of the John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act of 2018 (Public Law 115-182) mandated that VA create a pilot program to establish additional graduate medical education (GME) physician residency placement positions at certain covered facilities. The pilot program, implemented through 2900-AR01, will place no fewer than 100 resident physicians at covered facilities (sites) operated by Indian tribe or tribal organization (25 USC 5304), Indian Health Service, Federally-Qualified Health Centers (42 USC 1396d(1)(2)(B)) and Department of Defense. Participants in this pilot program are required by the statute to collect and provide VA with programmatic data. VA is required to include this information in an annual report to Congress until the program terminates on August 7, 2031.

See Section 403 of Pub. L. 115-182 (the VA MISSION Act of 2018) codified at [38 U.S.C. § 7302](#)

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 will be collected by the GME sponsoring institutions and the physician residents they place in the participating covered facilities. The sponsors themselves will determine the best method for collection of the necessary data depending on their own resources and staffing. The information to be collected includes required elements for the annual report on implementation of the pilot program that VA submits to Congress.

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 describe any consideration of using information technology to reduce burden.

As stated above, the GME sponsors will determine the best method for collection of the necessary data depending on their own resources and staffing. GME sponsors routinely collect information from their physician residents for other purposes such as tracking resident time and attendance for billing CMS and affiliated institutions (such as VA) and tracking resident educational activities and work hours to meet the accreditation requirements of the Accreditation Council on Graduate Medical Education (ACGME). VA will permit the electronic submission of responses to reduce respondent burden. The required information will be de-identified prior to submission to VA.

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.

The information required by statute to be included in VA's annual report to Congress would be collected by the GME sponsoring institution's participating residents and the VA itself. The information requested pertains to the administration of a new pilot program; therefore, no similar information currently exists. This pilot program permits residents to see non-VA patients in non-VA settings, and thus requires the collection of non-VA data. As this is non-VA data, VA has no data systems that can provide this information.

As a portion of the required information must be provided by the GME sponsor and their residents, VA will be reliant on the GME sponsor to ensure the accuracy of the information they submit to VA. The participants are providing data unique to this specific pilot program. This is a new pilot program; hence, there is no previously collected information or data available for review by VA or the GME sponsoring institution.

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

The collection of this information is a statutory requirement per Section 403 of Pub. L. 115-182 (the VA MISSION Act of 2018). VA does not have the authority to change the requirement to minimize the burden.

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.

The collection of this information is a statutory requirement, which limits VA's authority to reduce the burden. Section 403 of Public Law 115-182 requires this information be included in VA's annual Congressionally Mandated Report on the pilot program. If the information is not collected, the operation of the pilot program would not be affected; however, it would limit any evaluation of the program's efficacy and efficiency; in addition, VA would be unable to provide the required elements of the annual Congressionally Mandated Report.

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 would be no such special circumstances applicable for this information collection request.

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 was not included in the Proposed Rule for AR01 and was published separately in the Federal Register on November 1, 2022 (Vol. 87, No. 210, pages 65852-65853). VA received no comments in response to this notice.

The 30-day notice of Agency Information Collection Activity Under OMB review was published in the Federal Register in the PRA section of the Final Rule for AR01 on November 13, 2023 (Vol. 88, No. 217, pages 77514-77522).

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.

Outside consultation will be conducted with the public through the 60- and 30-day 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.

The information to be collected does not include any protected health information or personally identifiable information on Veterans or non-Veterans receiving care by residents participating in this pilot program, or on the participating residents themselves.

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.

There is no information required in this information collection request that is of a sensitive nature.

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

a. The number of respondents, frequency of responses, annual hour burden, and explanation for each form is reported as follows:

Total Number of Annual Responses: 110
 Total Number of Annual Burden Hours: 1,800 hours

| | Total Number of Residents / Year | Response Collection Minutes / Patient | x Estimated Number of Patients / Day | x Estimated Number of days at the Facility / Resident | Annual Data Collection Hours / Resident | Total Data Collection Hours |
|--|----------------------------------|---------------------------------------|--------------------------------------|---|---|-----------------------------|
| 1. Individual Physician Resident Data Collection | 100 | 1 min | 12 | 30 days | 360 min/60 min = 6 hrs | 600 hours |

| | Number of | Number of Physician | Total Number of | x Annual Data Consolidation | Number of Reporting | Total Data Consolidation |
|--|-----------|---------------------|-----------------|-----------------------------|---------------------|--------------------------|
|--|-----------|---------------------|-----------------|-----------------------------|---------------------|--------------------------|

| | Facilities Reporting Annually | Residents per Facility / Year | Residents Reported on / Year | & Reporting Hours / Resident | Hours per Facility / Year | & Reporting Hours for 10 Facilities |
|---|-------------------------------|-------------------------------|------------------------------|------------------------------|---------------------------|-------------------------------------|
| 2. GME Sponsor Annual Data Consolidation (Institutions) | 10 | 10 | 10 x 10 = 100 | 12 hrs | 120 hrs | 1,200 hours |

| Category of Respondent | Total Annual Number of Respondents | Annual Data Collection Hours | Annual Hour Burden |
|---|------------------------------------|------------------------------|--------------------|
| 1. Physician Resident Data Collection | 100 | 6 hrs | 600 hrs |
| 2. GME Sponsor Annual Data Consolidation (Institutions) | 10 | 120 hrs | 1,200 hrs |
| Total | 110 | | 1,800 hours |

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.

See charts in subparagraph 12a above.

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.

Respondents for this data collection will be the GME sponsoring institutions; these institutions will be providing the residents to participate in the pilot program. VA cannot make assumptions about the GME sponsoring institutions' staff who would be responsible for collecting and collating data for the residents in the pilot program. Therefore, VA used general wage data to estimate the respondents' costs associated with completing the information collection.

The mean hourly wage for a Resident is \$38.34 (for Data Collection), and for a Health Information Technologist is \$29.53 (for Data Consolidation and Reporting). The estimated wage information for Residents was taken from VA's internal data systems, using average salary data for Post Graduate Years (PGY) 1-3 Physician Residents; the wage information for the Health Information Technologist was taken from the Bureau of Labor Statistics (BLS) from the following website: https://www.bls.gov/oes/current/oes_nat.htm.

| | Annual Hour Burden | Estimated Hourly Wage | Estimated Total Annual Cost |
|---|--------------------|-----------------------|-----------------------------|
| Physician Resident Data Collection | 600 | \$ 38.34 | \$ 23,006 |
| GME Sponsor Annual Data Consolidation | 1,200 | \$ 29.53 | \$ 35,436 |
| Total Estimated Hour Burden / Year | 1,800 | | \$ 58,442 |

| Resident PG Level | Salary + Benefits Average | Hourly |
|-------------------|---------------------------|--------|
|-------------------|---------------------------|--------|

| | | |
|----------------|-----------------|----------------|
| PG-01 | \$ 77,347 | \$37.19 |
| PG-02 | \$79,694 | \$38.31 |
| PG-03 | \$82,219 | \$39.53 |
| Average | \$79,753 | \$38.34 |

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 respondents.
- 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.

| | Annual Hour Burden | Estimated Hourly Wage (plus Benefits) | Estimated Total Annual Cost |
|--|---------------------------|--|------------------------------------|
| Data Aggregation Across Sites (GS-14) | 10 | \$ 86.49 | \$ 865.90 |
| Data Review and Validation/ Site Engagement (GS-14) | 15 | \$ 86.49 | \$ 1,297.35 |
| Total Estimated Hour Burden / Year | 25 | | \$ 2,162.25 |

15. Explain the reason for any burden hour changes or adjustments reported in items 13 or 14.

This is a new collection, and all burden hours are considered a program increase.

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.

VA does not intend to publish this data, other than to provide it in a Congressionally Mandated Report.

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

N/A

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.