

Supporting Statement

Health Resources and Services Administration Ryan White HIV/AIDS Program Expenditure Forms – Revision

OMB Control No. 0915-xxxx - New

Terms of Clearance: None

A. Justification

1. Circumstances Making the Collection of Information Necessary

The Health Resources and Services Administration (HRSA) is requesting approval from the Office of Management and Budget (OMB) for the Ryan White HIV/AIDS Program Expenditures Forms. The Ryan White HIV/AIDS Program Expenditures forms were previously approved under 0915-0318 alongside the Ryan White HIV/AIDS Program Allocations forms. However, HRSA is splitting the collection since the Ryan White HIV/AIDS Program Allocations forms needed to be revised earlier in 2023. Therefore, the Allocations forms are approved under 0915-0318, and the Expenditures forms will be revised under this new control number.

The Expenditures Form, which expires September 30, 2023, is used to collect financial information from grant recipients funded under Parts A, B, C, and D of the Ryan White HIV/AIDS Program (RWHAP). The RWHAP, authorized under Title XXVI of the Public Health Service Act, funds and coordinates with cities, States, and local clinics/community-based organizations to deliver efficient and effective HIV care, treatment, and support to low-income people with HIV. See Attachment A for a copy of the legislation. The Department of Health and Human Services (HHS) HRSA administers funds for the RWHAP.

The HRSA RWHAP supports a comprehensive system of direct health care and support services for more than half a million people diagnosed with HIV¹. The HRSA RWHAP makes financial assistance available for the development, organization, coordination, and operation of more effective and cost-efficient systems for the delivery of essential core medical and support services to low-income people with HIV. Funding priorities are determined by stakeholders at local and state levels, resulting in uniquely structured programs that address their jurisdictions' critical gaps and needs. HRSA also works in partnership with RWHAP recipients at state and local levels to use innovative approaches for community engagement, needs assessment, planning processes, policy development, service delivery, clinical quality improvement, and workforce development activities that are needed to support a robust system of HIV care, support, and treatment.

¹ Health Resources and Services Administration. Ryan White HIV/AIDS Program Annual Client-Level Data Report 2016. <http://hab.hrsa.gov/data/data-reports>. Published November 2017. Accessed July 20, 2018.

The RWHAP Expenditures Reports allow HRSA HIV/AIDS Bureau (HAB) to monitor and track the use of grant funds for compliance with program and grants policies, and requirements as outlined in the legislation.

Expenditures Reports

Recipients funded under RWHAP Parts A, B, C, and D and Ending the HIV Epidemic in the U.S. (EHE) initiative are required to report financial data to HRSA at the beginning (Allocations Report) and at the end (Expenditures Report) of their grant budget period. These Reports request information that recipients already collect, including the use of RWHAP and EHE funds for core medical and support services; and on various program components, such as administration, planning and evaluation, and clinical quality management. The reports are similar in content; however, in the first report, recipients document the allocation of their RWHAP or EHE grant award at the beginning of their grant budget period. In the second report, recipients document actual expenditures of their RWHAP or EHE grant award (including any carryover dollars) at the end of their grant budget period.

Prior packages have included the Allocations and Expenditures Reports together. However, this package only includes the Expenditures Report. The Allocations Report OMB Information Collection Request package was approved on April 5, 2023, under 0915-0318.

2. Purpose and Use of Information Collection

The purpose of collecting these data is to monitor and track the use of grant funds for compliance with program requirements and policies and to ensure that RWHAP or EHE funds are spent on primary care and support services as outlined in the legislation.

The data collected and reported on the Expenditures Forms will be used:

1. To determine whether the following grant requirements were met:
 - a. Recipients expended their entire grant award.
 - b. At least 75% of grant funds were expended to core medical services for Parts A-C.
 - c. No more than 10% of grant funds were used for recipient administration for Parts A, C, and D.
 - d. No more than 10% of Part B grant funds were used for planning and evaluation, or recipient administration. In addition, the combined total of these two categories (planning and evaluation and recipient administration) should not exceed 15%.
2. To monitor grant funds for compliance with the amounts expended to specific program components and service categories.

3. To assess progress toward meeting the national goals for Ending the HIV Epidemic.

In addition to meeting the goal of accountability to Congress, clients, advocacy groups, and the public, the information collected is critical for HRSA, state, and local recipients, and individual providers to assess the status of existing HIV-related service delivery systems. The partnership among HRSA, recipients, providers, and clients has provided a unique opportunity to ensure that all parties share in the benefits of accurate information to promote improved care for people with HIV and their families. The collective responsibility to ensure that grant dollars are being spent as intended requires a commitment at every level.

3. Use of Improved Information Technology and Burden Reduction

All submissions will be fully electronic in the Electronic Handbooks (EHB). To avoid duplication and reduce recipient reporting burden, HRSA also created an electronic grantee contract management system (GCMS) that includes data required for various reports, including the Allocations Reports, the Consolidated List of Contractors CLC, and other HRSA data reports, such as the RWHAP Services Report.

4. Efforts to Identify Duplication and Use of Similar Information

The information that is requested in the Expenditures Report is unique to HRSA's RWHAP and EHE grant programs. Accounting data of the type required are not available elsewhere.

5. Impact on Small Businesses or Other Small Entities

This information collection does not have a significant impact on small businesses or other small entities.

6. Consequences of Collecting the Information Less Frequently

Without annual reporting on the use of grant funds, HRSA would not be able to carry out its responsibility to oversee compliance with the intent of Congressional appropriations in a timely manner. Because the epidemiology of HIV and the characteristics and needs of jurisdictions are changing constantly, annual reporting of recipient expenditures is necessary to determine whether the administration of the funds is responding to these changes.

If the information is not collected at all:

- HRSA will not know or be able to report on how funds are being expended and whether expenditure requirements are being met.
- It would be difficult to determine how the expenditures of RWHAP funds are changing from one year to the next.

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

The data will be collected in a manner fully consistent with the guidelines in 5 CFR 1320.5.

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

Section 8A:

A 60-day Federal Register Notice was published in the *Federal Register* on March 9, 2023 (Vol. 88, No. 46, pp. 14626-27). There was one comment received. There are no changes made to the information collection since the comment received is outside the scope of this information request. A 30-day Federal Register Notice was published in the *Federal Register* on May 31, 2023 (Vol. 88, No. 104, pp. 34867-69).

Section 8B:

In December 2022, five grant recipients (Part A, Part B, Part C, Part D, and HAB EHE) were asked for their input on the potential burden and impact of the new changes in the Expenditures Forms on their data reporting activities. The five recipients stated that the changes would not result in a burden increase and did not anticipate any challenges to their reporting activities.

9. Explanation of any Payment/Gift to Respondents

The proposed collection of information does not involve any remuneration to respondents.

10. Assurance of Confidentiality Provided to Respondents

The Expenditures Form is a financial report and does not require any information that could identify individual clients. Names and personal identifiers are not included in these financial reports. The Privacy Act is not applicable to this activity.

11. Justification for Sensitive Questions

There are no questions of a sensitive nature.

12. Estimates of Annualized Hour and Cost Burden

The estimated average annualized hour burden collected in December 2022, by piloting the recipients per program parts, is shown in Table 1. The total estimated average for a year is 2,568 hours. The burden hours for the individual Expenditures forms themselves is unchanged from the previous package. None of the recipients contacted reported that the changes would result in an increase in their burden.

However, this package does not include the hours required for the completion of the Allocations Report. For this submission, HRSA HAB proposed to uncouple the forms and submit separate packages for OMB approval.

12A. Table 1: Estimated Annualized Burden Hours

The estimated annual time and cost burdens to respondents are presented in the tables below:

Form Name	Number of Respondents	Number of Responses per Respondent	Total Responses	Average Burden per Response (in hours)	Total Burden Hours
Part A Expenditures Report	52	1	52	4	208
Part B Expenditures Report	54	1	54	6	324
Part C Expenditures Report	346	1	346	4	1,384
Part D Expenditures Report	116	1	116	4	464
EHE Expenditures Reports	47	1	47	4	188
Total	615				2,568

12B. Estimated Annualized Burden Costs

The annualized burden costs for recipients are based on the Bureau of Labor Statistics, 2021 Occupational Employment and Wages, for Budget Analysts, <https://www.bls.gov/oes/current/oes132031.htm>. The net total hour cost, \$104,004, is doubled to account for employer overhead and fringe benefits, yielding a total hourly cost of \$208,008.

Type of Respondent	Total Burden Hours	Hourly Wage Rate	Total Respondent Costs
Budget Analysts	2,568	\$40.50	\$104,004 x 2 (overhead/fringe)= \$208,008

13. Estimates of other Total Annual Cost Burden to Respondents or Recordkeepers/Capital Costs

Grant recipients are responsible for maintaining their own data system. There are no direct costs to respondents other than their time in participating in the data collection and quality assurance.

14. Annualized Cost to the Federal Government

HRSA maintains a contract to provide technical assistance, the distribution of OMB-approved forms, data entry and analysis for the expenditures and other RWHAP data collection support

activities. While not a separate budget line item, the contract cost to support the expenditures data collection is estimated to be approximately 12.5%. The estimated average annual cost is \$912,143.78 x 12.5% = \$114,017.98.

Contract year	Task 2 (PTR) cost	Estimated cost (12.5%)
Base year (2022-23)	\$1,767,253.26	\$220,906.66
Option year 1 (2023-24)	\$1,791,354.67	\$223,919.33
Option year 2 (2024-25)	\$1,835,418.84	\$229,427.36
Option year 3 (2025-26)	\$1,903,123.41	\$237,890.43
Total cost		\$912,143.78

In addition, government personnel require 10% time of 1 FTE at a GS-13 level (\$112,015) to review and prepare award notices. The wage is adjusted for the Washington-Baltimore-Arlington, DC-MD-VA-WV-PA locality and then multiplied by 1.5 to account for overhead costs. Therefore, the total estimated annual cost of government personnel is approximately \$16,802.25.

The average annual total cost of the project is \$130,820.23 and the total cost of the four-year project is \$654,101.15.

15. Explanation for Program Changes or Adjustments

HRSA HAB is proposing the following updates to the RWHAP Expenditures Reports.

RWHAP Part A Expenditures Report:

- Revising row and column headers and other language for clarity and alignment with RWHAP requirements;
- Combining the columns for RWHAP Part A Formula and Supplemental Expenditure amounts and updating the title;
- Moving the Prior Fiscal Year (FY) Carryover column row after the Current FY column and updating the title;
- Moving the RWHAP Part A Minority AIDS Initiative (MAI) Award Amount row after the RWHAP Part A Supplemental Award Amount row;
- Re-ordering the MAI rows in the “RWHAP Part A and MAI Service Category Expenditures” table as follows: 3. RWHAP Part A Supplemental Award, 4. RWHAP Part A MAI Award Amount, 5. RWHAP Part A MAI Carryover Amount;
- Updating calculations and language in the Legislative Requirements Checklist; and
- Adding a requirement for Financial Officer/Designee to certify subrecipient aggregated administrative expenditures.

RWHAP Part B Expenditures Report:

- Revising rows and column headers and other language for clarity and alignment with RWHAP requirements;

- Adding the following rows to Table 1: 4b. RWHAP Part B HIV Care Consortia Planning & Evaluation and 4c. RWHAP Part B HIV Care Consortia CQM;
- Blacking out selected cells in the following rows, columns, or tables:
 - 5. Total (including carryover) Percent column:
 - (4a – 4c) RWHAP Part B HIV Care Consortia Admin, P&E, and CQM
 - (6) RWHAP Part B Clinical Quality Management
 - (7) RWHAP Part B Recipient Planning & Evaluation Activities
 - (8) Recipient Administration
 - (9) Column Totals
 - (10) Total RWHAP Part B Expenditures (excluding carryover)
 - 2. RWHAP Part B Health Insurance Premium & Cost Sharing Assistance and 3. RWHAP Part B Home and Community-based Health Services' amounts and percent:
 - (1) Base Award
 - (2) ADAP Earmark + ADAP Supplemental
 - (3) Emerging Communities Award
 - (4) Total Prior FY Carryover
 - (5) Total (Including Carryover)
 - 4b. RWHAP Part B HIV Care Consortia Planning & Evaluation and 4c. RWHAP Part B HIV Care Consortia CQM:
 - (1) Base Award: Prior FY Carryover
 - (2) ADAP Earmark + ADAP Supplemental: Prior FY Carryover, Current FY and Percent
 - (3) Emerging Communities Award: Prior FY Carryover
 - (4) Total Prior FY Carryover: Amount and Percent
 - MAI Expenditure by Program Component:
 - (3) Clinical Quality Management: Prior FY Carryover amount & percent
 - (4) Recipient Planning & Evaluation Activities: Prior FY Carryover amount & percent
 - (5) Recipient Administration: Prior FY Carryover amount & percent
 - (6) Total MAI Expenditures; and percent
- Adding a new row: (10) Total RWHAP Part B Expenditures (excluding carryover);
- Displaying previously blacked out cells in the following two rows under the Expenditures Categories table:
 - d. Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals and e. Home and Community-Based Health Services
 - (2) Direct Services
 - (3) Emerging Communities
 - (4) Prior FY Carryover
- Updating calculations and language in the Legislative Requirements Checklist;
- Removing Consortia Administration and EC Administration from the Legislative

- Requirement from Legislative Requirement;
- Removing the following services under the Legislative Requirements Checklist’s Core Medical Services:
 - Health Insurance Premium & Cost Sharing Assistance
 - Home and Community-based Health Services
- Adding requirement for a Financial Officer/Designee to certify subrecipient aggregated administrative expenditures
- Adding a row for the recipient to certify that administrative expenses for the RWHAP Part B does not exceed allowable cap

RWHAP Part C Expenditures Report:

- There are no proposed changes to the RWHAP Part C Expenditures Report.

RWHAP Part D Expenditures Report:

- There are no proposed changes to the RWHAP Part D Expenditures Report.

HAB EHE Expenditures Reports:

- There are no proposed changes to the HAB EHE Expenditures Reports.

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

There are no plans for formal publication. The information in these reports is reviewed and analyzed to track and monitor allocation requirements to ensure compliance with the statute. HAB project officers review and evaluate the recipient submission and analyze the information to prepare summary reports for internal use. RWHAP and EHE recipients are required to report financial data at the beginning (Allocations Report, approved under 0915-0318) and at the end of their grant budget period (Expenditures Report).

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

The expiration date will be displayed appropriately.

18. Exceptions to Certifications for Paperwork Reduction Act Submissions

There are no exceptions to the certification.