

## **SUPPORTING STATEMENT**

### **COVID-19 Provider Relief Programs Single and Commercial Audits and Delinquent Audit Reporting Submission Activities**

**OMB Control No. 0906-0083 - Revision**

**Terms of Clearance: None**

#### **A. Justification**

##### **1. Circumstances Making the Collection of Information Necessary**

The Health Resources and Services Administration (HRSA) is submitting this revision information collection request to OMB for continued approval of audit materials for COVID-19 Provider Relief Programs (i.e., Provider Relief Fund (PRF), American Rescue Plan Act Rural (ARP-R), Coverage Assistance Fund (CAF), and Uninsured Program (UIP) Single and Commercial Audits and Delinquent Audit Reporting Submission Activities). The only change to the collection is making minor revisions to the Delinquent Audit Follow-up General Email to provide additional information to recipients as well as adding the attestation form.

The Coronavirus Aid, Relief, and Economic Security (CARES) Act (P.L. 116-136), the Paycheck Protection Program (PPP) and Health Care Enhancement Act (P.L. 116-139), the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act (P.L. 116-260), the Families First Coronavirus Response Act (P.L. 116-127), and the American Rescue Plan Act of 2021 (P.L. 117-2) appropriated funds to reimburse eligible health care providers for health care-related expenses, lost revenues attributable to COVID-19, and claim reimbursement to health care providers for providing COVID-19 care to uninsured or underinsured individuals. These funds were distributed by HRSA. Recipients of these funds agreed to the Terms and Conditions, which require compliance with reporting requirements as specified by the Secretary of the U.S. Department of Health and Human Services (HHS). Recipients are Providers who include public entities, Medicare or Medicaid enrolled suppliers and providers, and for-profit and not-for-profit entities that provide diagnosis, testing, vaccination, or care for individuals with possible or actual cases of COVID-19. Providers who have accepted the Terms and Conditions regarding their Provider Relief Program payment(s).

OMB approved this information collection in February 2024 using emergency clearance, since waiting 6-9 months for approval of this information collection would have limited HRSA's ability to monitor the Federal program and collecting this information is essential to HRSA's mission. Without Emergency Clearance, HRSA would have been delayed in following 45 CFR 75 Subpart F and recovering Federal funds not utilized in accordance with the Provider Relief Program Terms and Conditions. There are no changes to the current OMB-approved instruments.

##### **2. Purpose and Use of Information Collection**

HRSA will use the information for the purpose of ensuring that providers who received over \$750,000 in funding from any of the Provider Relief Program combined to 1) submit an audit per 45 CFR 75 Subpart F, 2) any documentation and attestation needed to resolve any audit findings, and 3) an attestation or documentation to prove an audit is not required. If the information is not collected, HRSA will not be in compliance with 45 CFR 75 Subpart F and will limit HRSA's ability to monitor the Federal programs. In addition, HRSA's ability to conduct delinquent audit follow-up on appropriate entities will be jeopardized if we cannot verify who has submitted their audit. There would be a harm to the public if this collection is

not approved quickly because HRSA would be delayed in following 45 CFR 75 Subpart F and recovering Federal funds not utilized in accordance with the Provider Relief Program Terms and Conditions.

### **3. Use of Improved Information Technology and Burden Reduction**

Information technology has been used to reduce burden. All data requested - which is the minimum necessary to achieve proper oversight of the almost \$200 billion of the Provider Relief Programs - can be provided electronically by answering questions and submitting the already mandated audits per 45 CFR 75 Subpart F via easily accessible portals or email, thus meeting the requirements of the Government Paperwork Elimination Act, P.L. 105-277, title XVII.

### **4. Efforts to Identify Duplication and Use of Similar Information**

The information is not duplicative of any other information collection. The Provider Relief Programs were established by Congress in 2020 and early 2021 and have had no precedent in U.S. history; therefore, no data collection has previously occurred.

### **5. Impact on Small Businesses or Other Small Entities**

The collection of information will impact small businesses, including physician practices that identify as such. The information requested has been held to the absolute minimum required for the intended use of the data.

### **6. Consequences if Information Collected Less Frequently**

The information is collected only once per provider fiscal year, if applicable. If it is collected less than once per fiscal year, effective program and fiscal oversight of PRF would be severely jeopardized.

### **7. 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(d)(2).

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

A 60-day Federal Register Notice was published in the Federal Register on May 2, 2024, vol. 89, No. 86; pp. 35842-43. A 30-day Federal Register Notice was published in the Federal Register on August 12, 2024, vol. 89, No. 155; pp. 65637-38.

### **9. Explanation of any Payment/Gift to Respondents**

Respondents will not receive any payments or gifts.

### **10. Assurance of Confidentiality Provided to Respondents**

The information collected will be kept secure and protected. HRSA and its contractors will comply with the HHS Standard for Encryption of Computing Devices and Information to prevent unauthorized access to government information. Data will be kept private to the extent allowed by law.

## 11. Justification for Sensitive Questions

Sensitive questions (such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private), will not be asked.

## 12. A. Estimates of Annualized Hour Burden

The following is the hour burden estimate for this information collection request. HRSA determined these figures based on quantitative analysis on how long it would take an average reader to read the instruments. The estimated number of respondents is based on the number of providers that received over the \$750K single audit threshold from HRSA's internal recordkeeping.

| Form Name  | Number of Respondents | Number of Responses per Respondent | Total Responses | Average Burden per Response (in hours) | Total Burden Hours |
|--|-----------------------|------------------------------------|-----------------|--|--------------------|
| Provider Relief Bureau Commercial Audit Reporting Portal       | 21,000                | 1                                  | 21,000          | 0.75                                   | 15,750             |
| Commercial Audit Compliance Email                              | 500                   | 1                                  | 500             | 0.25                                   | 125                |
| Delinquent Audit Follow-up General Email Blast and Attestation | 42,000                | 6                                  | 252,000         | 0.25                                   | 63,000             |
| Delinquent Audit Targeted Follow-up Email and Attestation      | 21,000                | 2                                  | 42,000          | 0.25                                   | 10,500             |
| Questioned Cost Attestation                                    | 7,000                 | 10                                 | 70,000          | 5.00                                   | 350,000            |
| Total  | 91,500                |                                    | 385,500         |  | 439,375            |

## 12 B. Estimated Annualized Burden Costs to Respondents

The following is the burden cost estimate for this information collection request. The burden hours are based on the documentation the provider should retain and for them to prepare for an independent audit.

| Type of Respondent   | Total Estimated Burden Hours | Hourly Wage Rate          | Total Respondent Costs |
|----------------------|------------------------------|---------------------------|------------------------|
| Financial Specialist | 800                          | \$70.96/hour <sup>1</sup> | \$64,288               |
| Accountant           | 800                          | \$75.00/hour <sup>1</sup> | \$66,720               |

| Type of Respondent        | Total Estimated Burden Hours | Hourly Wage Rate           | Total Respondent Costs |
|---------------------------|------------------------------|----------------------------|------------------------|
| Authorized Representative | 800                          | \$182.24/hour <sup>1</sup> | \$189,568              |
| <b>Estimated Total</b>    | <b>2,400</b>                 | <b>-</b>                   | <b>\$0</b>             |

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

Other than their time, there is no cost to respondents.

### **14. Annualized Cost to the Federal Government**

The total annualized cost to the Federal Government for this information collection is estimated to be \$5,598,937.60 (cost of the contracts plus the salaries of Government employees).

- The cost of the contracts associated with the information collection is approximately \$8 million total for years 2024 through 2025, which amounts to \$4 million per year.
- In addition, the cost to the Government includes the salaries of the HRSA staff (table below) who manage the contract and use the collected information in their audits. The burden hours are based on the number of hours worked for in a year for eight GS-13, Step 5 employees in the Washington-Baltimore-Arlington, DC-MD-VA-WV-PA Locality. The reason for the increase compared to the Emergency Clearance memo is because we updated the Hourly Wage Rate to the 2024 OPM Pay Schedule (Hourly Wage Rate \* 1.5 changing from \$91.25 to \$96.09 per hour). The total cost for federal employee support is estimated to be \$1,598,937.60 per year.

| Type of Federal Program Staff        | Number of Employees | Average Total Annual Burden Hours | Hourly Wage Rate* | Total Costs    |
|--------------------------------------|---------------------|-----------------------------------|-------------------|----------------|
| Public Health Analyst GS-013, Step 5 | 8                   | 2,080                             | \$96.09           | \$1,598,937.60 |

\*Wage rate is based on 2024 OPM Pay Schedule for Washington DC area. Please note that this figure has been multiplied times 1.5 to account for benefits to Federal government workers.

### **15. Explanation for Program Changes or Adjustments**

The Delinquent Audit Follow-up General Email Blast that was included in the Emergency Clearance Package has been adjusted to provide additional clarification to providers about the audit requirements and include the attestation form. Therefore, the burden table has been adjusted to account for the additional time to complete the attestation form.

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

The Single Audit Act at 31 USC 7502(h) and 2 CFR 200.512 require submission of non-profit Single Audits to the FAC and for the FAC to make the audits publicly available. There is no similar government-wide reporting requirement for commercial audits. Therefore, HRSA will publish a summary table of the commercial audits received on the <https://www.hrsa.gov/provider-relief/reporting-auditing/audit->

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<sup>1</sup> The annualized burden costs for recipients reflects current Bureau of Labor Statistics data (May 2022), which we have doubled to account for overhead costs and benefits.

[requirements#hrsa-review](#) website by late December 2024. The data will be published in a PDF format and updated quarterly. The file will include the number of audits received, number of audits without findings, number of audits with findings, number of audit findings that are procedural, number of audit findings that are monetary, the amount of questioned costs based on the audit findings, and amount of questioned costs that are disallowed and needs to be returned to HRSA. HRSA is publishing aggregate data instead of the commercial audit reports because the audit reports contain Taxpayer Identification Numbers (TINs). Some TINs are Social Security Numbers (SSNs) and HRSA is unable to distinguish SSNs from TINs. Additionally, HRSA is publishing the data in a PRF format instead of a machine-readable format as there is a lower chance of the data being manipulated. Furthermore, actual commercial audit reports can be provided through a FOIA request.

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

No exemption is being requested. The OMB number and Expiration date will be displayed on every page of every form/instrument.

**18. Exceptions to Certification for Paperwork Reduction Act Submissions**

There are no exceptions to the certification.