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**DATE:** May 15, 2025

**TO:** Dan Cline, Desk Officer, Office of Management and Budget

**FROM:** Samantha Miller, Information Collection Clearance Officer, Office of Planning, Analysis and Evaluation, Health Resources and Services Administration

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**Request:** The Health Resources and Services Administration’s Bureau of Primary Health Care requests approval for changes to “Form 1C: Documents on File” (Attachment A) in the information collection titled “The Health Center Program Application Forms” (OMB 0915-0285 expiration date April 30, 2026).

**Purpose:** The purpose of this request is to make non-substantive changes to “Form 1C: Documents on File” to align with [Executive Order 14273](#), Section 7 (April 15, 2025), which requires the Secretary to take action to ensure future grants available under section 330(e) of the Public Health Service Act, as amended, 42 U.S.C. 254b(e), are conditioned upon health centers establishing practices to make insulin and injectable epinephrine available at or below the discounted price to individuals with low incomes. This memo explains the changes.

**Changes:** The following changes will be made to Form 1C:

- Note the format to be used under “Date of Last Review/Revision” should be MM/DD/YYYY to enhance consistency.
- Add the following under “Management and Finance”:  
*Policies/procedures consistent with E.O. 14273 and terms of awards to make insulin and injectable epinephrine available at or below the discounted price paid by the health center awardee or sub-awardee under the 340B Drug Pricing Program (plus a minimal administration fee) to individuals with low incomes who: (a) have a high cost-sharing requirement for either insulin or injectable epinephrine; (b) have a high unmet deductible; or (c) have no health care insurance. For this purpose, “a low-income individual” means an individual living in a household with an income level at or below 200 percent of the Federal Poverty Guidelines.*

**Time Sensitivity:** The data collection changes must be completed in a timely manner to ensure that they are included in the Fiscal Year 2026 Service Area Competition Notice of Funding Opportunity (NOFO) and that the NOFO

is released on time. Approval of these changes is needed by May 21, 2025, to implement the changes in the form, NOFO materials, and application system build for online submissions.

**Burden:** The changes included herein do not substantially change the estimated reporting burden for health centers. The burden is expected to increase by no more than 0.5 hours.

## PROPOSED CLARIFICATIONS AND NON-SUBSTANTIVE CHANGES:

**Table A**

Instrument	Section	Existing Language	Change Made	Rationale
Form 1C: Documents on File	Instructions	Note: Example date formats for use on this form are 01/15/2018, First Monday of every April, and bi-monthly (last rev 01/18).	Delete sentence and replace with: “Note: Date of Last Review/Revision must use the date format of MM/DD/YYYY.”	To ensure consistency across completed forms
Form 1C: Documents on File	Table Headers	Date of Last Review/Revision (maximum 100 characters)	Date of Last Review/Revision (MM/DD/YYYY)	To ensure consistency across completed forms
Form 1C: Documents on File	Management and Finance	Language not in document	Add the following: <i>Policies/procedures consistent with E.O. 14273 and terms of awards to make insulin and injectable epinephrine available at or below the discounted price paid by the health center awardee or sub-awardee under the 340B Drug Pricing Program (plus a minimal administration fee) to individuals with low incomes who: (a) have a high cost-sharing requirement for either insulin or injectable epinephrine; (b) have a high unmet deductible; or (c) have no health care insurance. For this purpose, “a low-income individual” means an individual living in a household with an income</i>	Alignment with <a href="#">Executive Order 14273</a> : Lowering Drug Prices by Once Again Putting Americans

<b>Instrument</b>	<b>Section</b>	<b>Existing Language</b>	<b>Change Made</b>	<b>Rationale</b>
			<i>level at or below 200 percent of the Federal Poverty Guidelines.</i>	

**Attachments:**

1A. HRSA BPHC Form 1C Documents on File - OMB 0915-0285\_05.13.2025