

THE SUPPORTING STATEMENT

Affordable Care Act Tribal Maternal, Infant, and Early Childhood Home Visiting Program Guidance for Submitting an Annual Report to the Secretary

Specific Instructions

A. Justification

1. Circumstances Making the Collection of Information Necessary

Section 511(h)(2)(A) of Title V of the Social Security Act, as added by Section 2951 of the Patient Protection and Affordable Care Act of 2010 (Pub. L. 111-148, Affordable Care Act or ACA), authorizes the Secretary of HHS to award grants to Indian Tribes (or a consortium of Indian Tribes), Tribal Organizations, or Urban Indian Organizations to conduct an early childhood home visiting program.

The legislation sets aside 3 percent of the total ACA Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program appropriation (authorized in Section 511(j)) for grants to Tribal entities and requires that the Tribal grants, to the greatest extent practicable, be consistent with the requirements of the Maternal, Infant, and Early Childhood Home Visiting Program grants to States and territories (authorized in Section 511(c)), and include (1) Conducting a needs assessment similar to the assessment required for all States under the legislation and (2) establishing quantifiable, measurable 3- and 5-year benchmarks consistent with the legislation.

The Administration for Children and Families, Office of Child Care, in collaboration with the Health Resources and Services Administration, Maternal and Child Health Bureau, has awarded grants for the Tribal Maternal, Infant, and Early Childhood Home Visiting Program (Tribal MIECHV). The Tribal MIECHV grant awards support 5-year cooperative agreements to conduct community needs assessments, plan for and implement (in accordance with an Implementation Plan submitted at the end of Year 1) high-quality, culturally-relevant, evidence-based and promising home visiting programs in at-risk Tribal communities, and participate in research and evaluation activities to build the knowledge base on home visiting among Native populations.

Section 511(e)(8)(A) of the Social Security Act, as added by Section 2951 of the Affordable Care Act, requires that grantees under the MIECHV program for States and Jurisdictions submit an annual report to the Secretary of Health and Human Services regarding the program and activities carried out under the program, including such data and information as the Secretary shall require. As described above, Section 511 (h)(2)(A) further states that the requirements for the MIECHV grants to Tribes, Tribal Organizations, and Urban Indian Organizations are to be consistent, to the greatest extent practicable, with the requirements for grantees under the MIECHV program for States and Jurisdictions. In the Tribal Maternal, Infant, and Early Childhood Home Visiting Program Guidance for Submitting a Needs Assessment and Plan for Responding to Identified Needs (Phase 2 Implementation Plan) (OMB Control No. 0970-0389, Expiration Date 6/30/14), Tribal MIECHV grantees were notified that in Years 2-5 of their grant they must comply with the requirement for submission of an Annual Report to the Secretary

regarding the program and activities carried out under the program. This report shall be submitted to HHS by Tribal MIECHV grantees 90 days following the end of Years 2-5 of the grant.

2. Purpose and Use of the Information Collection

The purpose of the information collection is to gather information from Tribal MIECHV grantees regarding the program and activities carried out under the program. This will allow HHS to prepare a required report on the MIECHV program to Congress and will also provide valuable information to HHS that will guide the provision of technical assistance to Tribal MIECHV Program grantees.

3. Use of Improved Information Technology and Burden Reduction

Reports shall be submitted via GrantSolutions.gov per instructions provided to each grantee by the Federal Project Officer.

4. Efforts to Identify Duplication and Use of Similar Information

The information is not available from any other source.

5. Impact on Small Businesses or Other Small Entities

The information being requested has been held to the absolute minimum required for the intended use.

6. Consequences of Collecting the Information Less Frequently

This is an annual submission that Tribal MIECHV grantees in Years 2-5 of the grant. Collecting information less frequently would make it difficult to assess grantee progress throughout the life of the grant, and would make it more difficult to effectively target and provide technical assistance to grantees.

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

The collection of information will be conducted in accordance with 5 CFR 1320.5.

8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

There was one comment submitted in response to the 60-day Federal Register Notice, which was not relevant to the information collection. HHS also provided Tribal MIECHV grantees with a draft of the guidance and solicited input as part of developing the final instrument. HHS will

work closely with grantees as they develop their annual reports, per the cooperative agreement mechanism.

9. Explanation of Any Payment or Gift to Respondents

No payments or gifts are provided to respondents.

10. Assurance of Confidentiality Provided to Respondents

The information collection not of a confidential nature, and therefore does not require assurance of confidentiality.

11. Justification for Sensitive Questions

There are no personal questions of a sensitive nature.

12. Estimates of Annualized Burden Hours and Costs

Instrument	Number of Respondents	Number of Responses per Respondent	Average Burden Hours Per Response	Total Burden Hours
Affordable Care Act Tribal Maternal, Infant, and Early Childhood Home Visiting Program Needs Assessment and Plan for Responding to Identified Needs	25	1	50	1,250

The monetized value of this time is 1,250 hours times \$50 which equals \$62,500.

13. Estimates of Other Total Annual Cost Burden to Respondents and Record Keepers

None.

14. Annualized Cost to the Federal Government

None.

15. Explanation for Program Changes or Adjustments

Not applicable; this is a new data collection.

16. Plans for Tabulation and Publication and Project Time Schedule

In the Tribal Maternal, Infant, and Early Childhood Home Visiting Program Guidance for Submitting a Needs Assessment and Plan for Responding to Identified Needs (Phase 2 Implementation Plan) (OMB Control No. 0970-0389, Expiration Date 6/30/14), Tribal MIECHV grantees were notified that in Years 2-5 of their grant they must comply with the requirement for submission of an Annual Report to the Secretary regarding the program and activities carried out under the program. This report shall be submitted to HHS by Tribal MIECHV grantees 90 days following the end of Years 2-5 of the grant. HHS plans to provide the guidance for submitting the report to grantees no later than the end of Year 2 of their project.

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

Not applicable.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions.

B. Statistical Methods (used for collection of information employing statistical methods)

Not applicable. Statistical methods will not be used for data collection.