

**SUPPORTING STATEMENT FOR
Report of Medical Examination and Vaccination Record
OMB Control No.: 1615-0033
COLLECTION INSTRUMENT(S): Form I-693**

A. Justification.

- 1. Explain the circumstances that make the collection of information necessary. Identify any legal or administrative requirements that necessitate the collection. Attach a copy of the appropriate section of each statute and regulation mandating or authorizing the collection of information.**

Certain immigration benefits, such as adjustment of status to that of a lawful permanent resident under section 245 of the Immigration and Nationality Act (Act) require establish that they are admissible to the United States, including being admissible on health-related grounds. The health-related grounds of inadmissibility are found in section 212(a)(1)(A) of the Act. In addition, section 232(b) of the Act requires that medical officers of the U.S. Public Health Service (PHS) certify any physical or mental defect or disease observed in arriving aliens. When PHS medical officers are not available, U.S. Citizenship and Immigration Services (USCIS) has the authority to designate private physicians to serve as civil surgeons. Because PHS medical officers have not been available for many years, USCIS has been designating private physicians to serve as civil surgeons, in accordance with section 232(b) of the Act.

Section 212(a)(1)(A) of the Act states that the health-related grounds of inadmissibility are determined according to the regulations prescribed by the Secretary of Health and Human Services. The applicable U.S. Department of Health and Human Services (HHS) regulations are found at 42 CFR Part 34. The corresponding USCIS regulations are found at 8 CFR Part 232. In addition, civil surgeons are responsible for certifying to USCIS the information necessary to determine whether applicants seeking immigration benefits while in the United States, such as adjustment of status, are inadmissible on health-related grounds. The Report of Medical Examination and Vaccination Record, Form I-693, is used by civil surgeons to report the results of the medical examination to USCIS.

- 2. Indicate how, by whom, and for what purpose the information is to be used. Except for a new collection, indicate the actual use the agency has made of the information received from the current collection.**

The information on the Report of Medical Examination and Vaccination Record, Form I-693, will be used by USCIS when considering the eligibility for adjustment of status under 8 CFR [209.1\(c\)](#), [209.2\(d\)](#), [210.2\(d\)](#), [245.5](#) and [245a.3\(d\)\(4\)](#); and for V nonimmigrant status under 8 CFR [214.15\(f\)](#). The information on the Report of Medical Examination and Vaccination Record, Form

I-693, will be used by EOIR in considering the eligibility for immigration benefits in removal proceedings. The information on the Report of Medical Examination and Vaccination Record, Form I-693, may also be used by CBP in determining admissibility at a port of entry.

- 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.**

This form can be downloaded, completed and saved electronically, but cannot be e-filed at this time. This form is the most efficient means for USCIS to collect the required data until full automation can be achieved. USCIS has no estimate for when electronic submission of the Report of Medical Examination and Vaccination Record may be possible. USCIS provides this application to the public via the USCIS Internet Web site at www.uscis.gov/i-693. This information collection is partially compliant with the Government Paperwork Elimination Act by allowing for accessing, completing and saving the form electronically.

- 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.**

No other similar information is currently available which can be used for this purpose. In addition, USCIS has examined whether the information is collected by other DHS components or Federal agencies from which USCIS could obtain the information, and no viable source was found. The law and regulations require a separate and distinct medical examination and a report to be completed in association with the application for adjustment of status. An examination and medical report prepared for other purposes is not sufficient for USCIS's needs in adjudicating applications. This is because routine physical examinations, or other medical examinations not performed specifically for immigration purposes, do not typically cover all of the health conditions required to determine admissibility under section 212(a)(1)(A) of the Act. Further, the assessment of medical conditions for immigration purposes must be conducted according to HHS regulations, as stated above, including the *Technical Instructions for the Medical Examination of Aliens in the United States (Technical Instructions)*.¹ The Report of Medical Examination and Vaccination Record, Form I-693 covers all medical conditions relevant to the admissibility determination and corresponds with the *Technical Instructions* to ensure that the specific medical conditions that may impact admissibility are properly assessed in the medical examination.

¹ Provided by the Centers for Disease Control and Prevention, a component agency of HHS. The *Technical Instructions* are available online at: <http://www.cdc.gov/immigrantrefugeehealth/exams/ti/civil/technical-instructions-civil-surgeons.html>.

5. If the collection of information impacts small businesses or other small entities (Item 5 of OMB Form 83-I), describe any methods used to minimize burden.

This collection of information does not have an impact on small businesses or other small entities. This form is completed by applicants required to establish that they are not inadmissible to the United States based on health-related grounds. While the applicants may engage the services of a doctor, those activities are a normal part of the doctor/small business function. No unnecessary burden is placed upon the applicant or doctor due to the information collected on this form.

Under [5 CFR 1320.3\(b\)\(1\)](#), burden means the total time, effort, or financial resources expended by persons to maintain, retain, or disclose or provide information to or for a Federal Agency. Under [5 CFR 1320.3\(c\)\(4\)](#), for purposes of the definition of ten or more persons, contractors engaged by a respondent for the purpose of complying with the collection of information are not included as persons. Medical professional providing medical certifications are generally paid for their services either by the alien or a third party, and thus are considered contractors engaged by the respondents to comply with this information collection, and do not fall under the category of persons with the associated burden as described above.

6. Describe the consequence 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.

If the required information is not collected, USCIS will not be able to correctly determine the eligibility of an applicant for lawful permanent resident status, creating a potential public health risk or denying the applicant an immigration benefit to which he or she may be legally entitled.

7. Explain any special circumstances that would cause an information collection to be conducted in a manner: requiring respondents to report information to the agency more often than quarterly; requiring respondents to prepare a written response to a collection of information in fewer than 30 days after receipt of it; requiring respondents to submit more than an original and two copies of any document; requiring respondents to 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; requiring the use of a statistical data classification that has not been reviewed and approved by OMB; that includes a pledge of confidentiality that is not supported by authority established in statute or regulation, that is not supported by disclosure and data security policies that are consistent

with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use; or requiring respondents to submit proprietary trade secret, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.

There are no special circumstances associated with this information collection.

- 8. If applicable, provide a copy and identify the data and page number of publication in the Federal Register of the agency'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 agency in response to these comments. Specifically address comments received on cost and hour burden. Describe efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting format (if any), and on the data elements to be recorded, disclosed, or reported. Consultation with representatives of those from whom information is to be obtained or those who must compile records should occur at least once every 3 years – even if the collection of information activity is the same as in prior periods. There may be circumstances that may preclude consultation in a specific situation. These circumstances should be explained.**

On May 10, 2016, USCIS published a 60-day notice in the Federal Register at 81 FR 28884. USCIS received 17 public comments from 6 commenters in response to the 60-day notice. A detailed accounting with USCIS response is available in Supporting Statement Appendix A Comment Summary.

On September 20, 2016, USCIS published a 30-day notice in the Federal Register at 81 FR 64473. USCIS has not received any comments in response to this notice to date.

- 9. Explain any decision to provide any payment or gift to respondents, other than remuneration of contractors or grantees.**

USCIS does not provide payments or gifts to respondents in exchange for a benefit sought.

- 10. Describe any assurance of confidentiality provided to respondents and the basis for the assurance in statute, regulation, or agency policy.**

There is no assurance of confidentiality.

The information collected via this instrument is covered by the Privacy Impact Assessment:

- DHS/USCIS/PIA-003 Integrated Digitization Document Management Program (IDDMP).

NOTE: Coverage will be provided under a forthcoming update.

The information is also covered in the System of Records Notices:

- DHS/USCIS/ICE/CBP-001 Alien File, Index, and National File Tracking System of Records, November 21, 2013, 78 FR 69864.
- DHS/USCIS-007 Benefits Information System September 29, 2008 73 FR 56596

11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private. This justification should include the reasons why the agency considers the questions necessary, the specific uses to be made of the information, the explanation to be given to person’s from whom the information is requested, and any steps to be taken to obtain their consent.

Some of the information requested on this form is of a sensitive nature. The form includes information as to whether an applicant has been diagnosed with tuberculosis, syphilis, or other communicable diseases or suffers from a physical or mental disorder, drug abuse or addiction. These questions are required to obtain information that must be reviewed to determine whether an applicant has or does not have a condition that may make him or her ineligible for adjustment of status on public health-related grounds under 8 CFR [209.1\(c\)](#), [209.2\(d\)](#), [210.2\(d\)](#), [245.5](#) and [245a.3\(d\)\(4\)](#); or for V nonimmigrant status under 8 CFR [214.15\(f\)](#).

12. Provide estimates of the hour burden of the collection of information.

Type of Respondent	Form Name (Form Number)	No. of Respondents	No. of Responses per Respondent	Avg. Burden per Response (in hours)	Total Annual Burden (in hours)	Avg. Hourly Wage Rate	Total Annual Respondent Cost
Individuals or households	Report of Medical Examination and Vaccination Record (Form I-693)	574,000	1	2.5	1,435,000	* \$32.52	\$46,666,200
Total		574,000			1,435,000		\$46,666,200

* The above Average Hourly Wage Rate is the [May 2015 Bureau of Labor Statistics](#) average wage for “All Occupations” of \$23.23 times the wage rate benefit multiplier of 1.4 (to account for fringe benefits) equaling \$32.52. The selection of “All Occupations” (for example) was chosen as the expected respondents for this collection could be expected to be from any occupation.

Annual Reporting Burden

The annual reporting burden is **1,435,000**. This figure was derived by multiplying the estimated number of respondents (574,000) x (1) frequency of response x (2.5) 2 hours and 30 minutes per response.

This estimated time burden is based on USCIS experience with the program and is calculated as follows: learning about the form (30 minutes); making an appointment with a civil surgeon for a medical exam (15 minutes); taking the medical exam (1 hour); reading the results of the Tuberculin Skin Test (TST) or Interferon Gamma Release Assay (IGRA), which requires a second appointment with the civil surgeon (30 minutes); reporting the results of the medical exam on the form (10 minutes); and submitting the medical exam report to USCIS (5 minutes).

13. Provide an estimate of the total annual cost burden to respondents or record keepers resulting from the collection of information. (Do not include the cost of any hour burden shown in Items 12 and 14).

There are no capital or start-up costs associated with this information collection. *(There is no fee associated with this information collection.)*

USCIS estimates that respondents will incur an estimated cost of \$3.75 average postage cost to each respondent to submit the completed package to USCIS. Postage to mail completed package (574,000 x \$3.75 average postage) = **\$2,152,500**.

This information collection may impose some out-of-pocket costs on respondents in addition to the time burden provided under item 12 above. Respondents may incur costs to obtain medical examinations. USCIS estimates the average cost of the medical examinations may vary widely, from as little as \$20 to \$1000 per respondent (from vaccinations to additional medical evaluations and testing that may be required based on the health conditions of the applicant). USCIS estimates that the average cost for these activities is \$490 and that all respondents may incur this cost. The total cost to respondents would be estimated as follows: 574,000 (number of respondents) x average cost per response of \$490 = **\$281,260,000**.

As a result, the estimated total cost to respondents is **\$283,412,500** [\$2,152,500 postage + \$281,260,000 additional out-of-pocket expenses]. The estimated cost per respondent is \$283,412,500 / 574,000 respondents = **\$494**.

14. Provide estimates of annualized cost to the Federal government. Also, provide a description of the method used to estimate cost, which should include quantification of hours, operational 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.

Annualized Cost Analysis:

a.	Printing Cost	\$	109,634
b.	Collection and Processing Cost	\$	36,162,000
c.	Total Annual Cost to the Government	\$	36,271,634

Government Cost

The estimated cost to USCIS, which is covered by fee receipts, is **\$36,271,364**. This figure is calculated by using the estimated number of respondents 574,000 x (1) number of response x (1.5 hours) per response (time required to collect and process information) x \$42 (suggested average hourly rate for clerical, officer, and supervisory time with benefits). In addition, this figure includes the estimated overhead cost for printing, stocking, and distributing the form, which is \$109,634.

15. Explain the reasons for any program changes or adjustments reporting in Items 13 or 14 of the OMB Form 83-I.

Data collection Activity/ Instrument	Program Change (hours currently on OMB Inventory)	Program Change (New)	Difference	Adjustment (hours currently on OMB Inventory)	Adjustment (New)	Difference
Form I-693				1,550,610	1,435,000	-115,610
Total(s)				1,550,610	1,435,000	-115,610

There has been a decrease of **115,610** hours in the total estimated annual burden hours previously reported for this information collection, from 1,550,610 to **1,435,000**. This decrease can be attributed to the decrease in the number of respondents from 620,244 respondents to 574,000. The decrease in the number of respondents is based on the five year average of the number of respondents for the I-485 received by USCIS, for which an I-693 is required for adjustment of status.

USCIS is revising the Report of Medical Examination and Vaccination Record, Form I-693 (see table of changes), but does not estimate that the revisions will result in a change to the estimated time burden as they relate to updates and clarifications. The revisions include the following:

- Updating language on communicable diseases of public health significance: On January 26, 2016, HHS published the final regulation updating its regulation at 42 CFR part 32, and revising the definition of communicable diseases of public health significance. With this revision, and effective March 28, 2016, HHS is removing three medical conditions from its list of communicable diseases of public health significance: Chancroid, granuloma inguinale, and lymphogranuloma venereum. Foreign nationals afflicted with these medical conditions are no longer inadmissible to the United States. Therefore, USCIS is removing these three conditions from the form.
- Updating language on physical and mental disorders, and drug abuse and drug addiction: In its final rule, HHS also revised the definitions and evaluation criteria for physical and mental disorders, and drug abuse and drug addiction, which are medical conditions that render foreign nationals inadmissible to the United States under sections 212(a)(1)(A)(iii) and 212(a)(1)(iv) of the Act.
- Plain language and clarifying edits to the certification and interpreter sections.
- Adding a reference in the form’s instructions that applicants are required to notify USCIS within 10 days of any change of address.
- Adding an additional page that the civil surgeon can use to provide additional information if the space provided on the form is insufficient.
- Standard language updates under sections such as General Instructions, USCIS Information, Processing Information, Penalties, etc. on form instructions. USCIS clearly marked when the language is applicable to the civil surgeon, the applicant, or both.

Data collection Activity/ Instrument	Program Change (cost currently on OMB Inventory)	Program Change (New)	Difference	Adjustment (cost currently on OMB Inventory)	Adjustment (New)	Difference
Form I-693				\$303,919,560	\$281,260,000	-\$22,659,560
Total(s)				\$303,919,560	\$281,260,000	-\$22,659,560

There is a decrease in the estimated public cost burden associated with this information collection by **\$22,659,560**. This decrease results from a lower agency estimate on adjustments of status filings from 620,244 respondents to 574,000, and therefore adjusting the estimated out-of-pocket costs that respondents may incur to obtain medical examinations, as described under item 13 above.

- 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.**

This information collection will not be published for statistical purposes.

- 17. If seeking approval to not display the expiration date for OMB approval of the information collection, explain the reasons that display would be inappropriate.**

USCIS will display the expiration date for OMB approval of this information collection.

- 18. Explain each exception to the certification statement identified in Item 19, “Certification for Paperwork Reduction Act Submission,” of OMB 83-I.**

USCIS does not request an exception to the certification of this information collection.

- B. Collection of Information Employing Statistical Methods.**

There is no statistical methodology involved with this collection.