



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission to OMB for Review and Approval;

Public Comment Request; Behavioral Health Integration Evidence Based Telehealth

Network Program Integration Telehealth Evidence Collection Tool, OMB No. 0906-xxxx -

New

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, HRSA submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA's ICR only after the 30-day comment period for this notice has closed.

DATES: Comments on this ICR should be received no later than **[INSERT DATE 30 DAYS AFTER DATE OF PUBLICATION IN THE *FEDERAL REGISTER*]**.

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under Review - Open for Public Comments" or by using the search function.

FOR FURTHER INFORMATION CONTACT: To request a copy of the clearance requests submitted to OMB for review, email Samantha Miller, the HRSA Information Collection Clearance Officer, at paperwork@hrsa.gov or call (301) 443-3983.

SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Behavioral Health Integration Evidence Based Telehealth Network Program Integration Telehealth Evidence Collection Tool, OMB No. 0906-xxxx – NEW

Abstract: HRSA is requesting OMB approval of a new information collection, the Behavioral Health Integration Evidence Based Telehealth Network Program (BHI EB-TNP) Integration Telehealth Evidence Collection Tool. Under the BHI EB-TNP, HRSA administers grants in accordance with section 330I(d)(1) of the Public Health Service Act (42 U.S.C. 254c-14(d)(1)). The purpose of the BHI EP-TNP program is to integrate behavioral health services into primary care settings using telehealth technology through telehealth networks and evaluate the effectiveness of such integration. This program supports evidence-based projects that utilize telehealth technologies through telehealth networks in rural and underserved areas to: (1) improve access to integrated behavioral health services in primary care settings and (2) expand and improve the quality of health information available to health care providers by evaluating the effectiveness of integrating telebehavioral health services into primary care settings and establishing an evidence-based model that can assist health care providers.

HRSA collaborated with grantees in the development of a set of outcome measures to evaluate the effectiveness of grantees' telebehavioral services and monitor grantees' progress/effectiveness by analyzing performance reporting data. The measures address behavioral health and substance use disorder priorities and will help to assess the effectiveness of evidence-based practices with the use of telehealth for patients, providers, and payers. The data collection instrument will include 27 total data elements addressing patient encounter information.

A 60-day notice was published in the **Federal Register** on September 23, 2025, vol. 90, No. 182; pp. 45774-75. There were no public comments, but HRSA has revised the estimated burden downward to reflect fewer likely respondents and a lower average burden per response.

Need and Proposed Use of the Information: HRSA developed the BHI EB-TNP instrument with the program’s four goals in mind:

- (1) Improving access to the behavioral health services needed,
- (2) Reducing rural and underserved population practitioner isolation,
- (3) Improving health system productivity and efficiency, and
- (4) Improving patient outcomes.

HRSA worked with program grantees to develop outcome measures to evaluate and monitor the progress of the grantees in each of these categories, with specific indicators to be reported annually through a performance monitoring data collection platform/website. Measures capture awardee-level and aggregate data that illustrate the impact and scope of program funding along with assessing these efforts. The measures are intended to inform HRSA’s progress toward meeting program goals, specifically improving access to telebehavioral health services that support primary care providers.

Likely Respondents: BHI EB-TNP award recipients.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

Total Estimated Annualized Burden Hours:

Form Name	Number of Respondents	Number of Responses per Respondent	Total Responses	Average Burden per	Total Burden Hours
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				Response (in hours)	
BHI EB-TNP Outcome Measurement Report	26	1	26	66	1,716
Total	26		26		1,716

Maria G. Button,

Director, Executive Secretariat.

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