

# **Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 2900-0770)**

## **TITLE OF INFORMATION COLLECTION:**

APIs - Healthcare Financial Data API Name Survey

## **PURPOSE:**

The Lighthouse Program is working towards adding a new API to its platform. This survey will be used to get feedback on identifying an accurate name for the API based on its provided description.

## **DESCRIPTION OF RESPONDENTS:**

Participants will consist of developers and/or product managers who have experience working with other APIs under the Lighthouse Program.

## **TYPE OF COLLECTION: (Check one)**

- |  |   |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group       |
| <input type="checkbox"/> Focus Group                                   | <input checked="" type="checkbox"/> Other: Survey     |

## **CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

## **Name, Position Title and Credentials:**

Scott Mericle, UX Designer

Lighthouse Developer Experience, Product Engineering Service (PES)

Office of Information Technology, U.S. Dept. of Veteran Affairs

**To assist review, please provide answers to the following question:**

## **Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? ☐ Yes ☒ No

2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? ☐ Yes ☐ No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? ☐ Yes ☐ No

#### **Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? ☐ Yes ☒ No

#### **BURDEN HOURS**

Category of Respondent	No. of Respondents	Participation Time (mins)	Burden Hours (hrs)
Developers and/or Product Managers	50	7	6
<b>Totals</b>	<b>50</b>	<b>7</b>	<b>6</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is \$1,440.

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

#### **The selection of your targeted respondents**

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?  
☒ Yes ☐ No

**If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?**

Participants in this research are individuals who are already familiar with working with Lighthouse APIs.

#### **Administration of the Instrument**

1. How will you collect the information? (Check all that apply)
  - ☒ Web-based or other forms of social media.
  - ☐ Telephone
  - ☐ In-person
  - ☐ Mail
  - ☐ Other, Explain
2. Will interviewers or facilitators be used? ☐ Yes ☒ No