

and HIV; and patient centered, integrated care with emphasis on quality of life and emotional well-being, along with issues related to pending committee reports. Agenda items are subject to change as priorities dictate. Refer to the CHAC meeting information page for any updated information concerning the meeting.

Members of the public will have the opportunity to provide comments. Public participants may also submit written statements as further described below. Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to submit a written statement or make oral comments to CHAC should be sent via the meeting website at <https://www.chacfall2021.org/> by Friday, October 29, 2021, at 5:00 p.m. Visit the meeting information page for additional details at <https://www.chacfall2021.org/>.

Individuals who plan to attend and need special assistance or another reasonable accommodation should notify Theresa Jumento at the email address and/or phone number listed above at least 10 business days prior to the meeting.

Maria G. Button,

Director, Executive Secretariat.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection

Activities: Proposed Collection: Public Comment Request; Information Collection Request Title: Advanced Nursing Education Program Specific Form OMB No. 0915-0375—Revision

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

ACTION: Notice.

SUMMARY: In compliance with the requirement for opportunity for public comment on proposed data collection projects of the Paperwork Reduction Act of 1995, HRSA announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on this ICR should be received no later than October 25, 2021.

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 30-day Review—Open for Public Comments” or by using the search function.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email paperwork@hrsa.gov or call Lisa Wright-Solomon, the HRSA Information Collection Clearance Officer at (301) 443-1984.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the information request collection title for reference.

Information Collection Request Title: Advanced Nursing Education (ANE) Program Specific Form OMB No. 0915-0375—Revision.

Abstract: HRSA provides advanced nursing education grants to educational institutions to increase the supply, distribution, quality of, and access to advanced education nurses through the ANE Programs. The ANE Programs are authorized by Section 811 of the Public Health Service Act (42 U.S.C. 296j), as amended. This clearance request is for continued approval of the information collection OMB No. 0915-0375 with revisions.

This revision request includes a title change from the Advanced Nursing Education Workforce (ANEW) Program-Specific Data Collection Forms to ANE Program Specific Form. This revision also merges forms used by the ANEW Program and adds several other new forms from the ANE Programs, including the Advanced Nursing Education Nurse Practitioner Residency (ANE-NPR) Program, Advanced Nursing Education Nurse Practitioner Residency Integration Program (ANE-NPRIP), Nurse Anesthetist Traineeship (NAT) Program, and Advanced Nursing Education Sexual Assault Nurse Examiners (ANE-SANE) Program. The revision of the ANE Program Specific Form incorporates elements from these four programs (ANE-NPR, ANE-NPRIP, NAT, and ANE-SANE) into the ANE Program Specific Form.

A 60-day notice published in the **Federal Register** on July, 13 2021 vol. 86, No. 131; pp. 36756-57. There were no public comments.

Need and Proposed Use of the Information: Section 811 of the Public Health Service Act provides the

Secretary of HHS with the authority to award grants to and enter into contracts with eligible entities to meet the costs of—(1) projects that support the enhancement of advanced nursing education and practice; and (2) traineeships for individuals in advanced nursing education programs. Under this section, HRSA makes awards to entities who train and support nurses characterized as “advanced education nurses.” In awarding such grants, funding preference is given to applicants with projects that will substantially benefit rural or underserved populations, or help meet public health nursing needs in state or local health departments; special consideration is given to an eligible entity that agrees to extend the award to train advanced education nurses who will practice in designated health professional shortage areas.

The ANE Program Specific Form will allow HRSA to effectively target funding and measure the impact of the ANE Programs in meeting the legislative intent and program goals of supporting the enhancement of advanced nursing education, creating opportunities for individuals in advanced nursing education programs, and increasing the number of advanced practice nurses in rural and underserved areas. The proposed updates to this information collection will assist HRSA in: Streamlining the application submission process across programs; enabling an efficient award determination process; and facilitating HRSA’s ability to monitor the use of funds and analyze program outcomes. Additionally, collecting this data assists HRSA in carrying out the most impactful program and ensuring resources are used responsibly.

More specifically, the changes include the following:

- Form name change from ANEW to ANE Program Specific Form.
- Additional instructions for applicants are provided in each funding opportunity.
- Modifications to both Table #1 and Table #2:
 - Revision to instructions to incorporate elements for added programs. Instructions about completion of each table are included within the electronic application materials.
 - Table titles are rephrased for clarity.
 - New “Additional Specialty” column is created to yield a flexible data collection option.
 - Table #1 rows are numbered for clarity and more rows are added to:
 - Capture auto-tabulation, and

- Reformat/separate Statutory Funding Preference data from Special Consideration data.
- Table #2 has:
 - “Students” reworded to “participants/trainees;”
 - One column labeled, “Budget Year,” to identify the project budget year;
 - One column to create a space for entering the sum for each row;
 - Rows to more clearly indicate the budget year for up to 5 years; and,
 - One final row to create a space for entering the total for each column.
- Frequency of data collection: Data is collected (through the two tables)

once during the application period for each funding announcement.

- Information determines:
 - If applicants meet the funding preference or special consideration for funding, and
 - Projected target and baseline numbers of trainees/participants to be supported throughout the project period.

Likely Respondents: Likely respondents will be current ANE Programs awardees and new applicants to the ANE Programs.

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 (includes the ANE program specific tables and attachments)	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
ANEW	236	1	236	7	1,652
NAT	115	1	115	7	805
ANE-NPR	101	1	101	7	707
ANE-NPRIP	15	1	15	7	105
ANE-SANE	54	1	54	7	378
Total	521	521	3,647

HRSA specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency’s functions, (2) the accuracy of the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be collected, and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Maria G. Button,
Director, Executive Secretariat.
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General

OIG Modernization Initiative To Improve Its Publicly Available Resources—Request for Information

AGENCY: Office of Inspector General (OIG), HHS.

ACTION: Request for information.

SUMMARY: This request for information seeks input from the public on OIG resources and how OIG could enhance the usefulness and timeliness of such

resources and improve their accessibility and usability.

DATES: Please submit comments electronically at <http://www.regulations.gov>. Follow the “Submit a comment” instructions and refer to file code OIG-0922-N. Comments must be received no later than January 31, 2022, to ensure consideration. In light of the broad scope of the RFI and to provide adequate opportunity for input from a wide range of stakeholders, we are providing an extended comment period for this RFI. Thank you in advance for your valued input. For information on viewing public comments, please see the **SUPPLEMENTARY INFORMATION** section.

FOR FURTHER INFORMATION CONTACT: Susan Edwards, (202) 619-0335.

SUPPLEMENTARY INFORMATION: Inspection of Public Comments: All comments received before the close of the comment period are available for viewing by the public, including any personally identifiable or confidential business information that is included in a comment. We post all comments received before the close of the comment period on the following website as soon as possible after they have been received: <http://www.regulations.gov>. Follow the search instructions on that website to view public comments.

I. Introduction

The Department of Health and Human Services (HHS) Office of Inspector General (OIG) is working to modernize the accessibility and usability of our publicly available resources, including guidance, program integrity resources, publicly available data, and advisory opinions (collectively, resources). Given the significant passage of time since many of our resources launched and corresponding advancements in technology, we are looking holistically at where we can make improvements to delivering publicly available resources effectively and efficiently. We want to continue producing useful and timely resources that, among other things, advance the health care industry’s voluntary compliance and help prevent fraud, waste, and abuse. Further, we are mindful that stakeholders increasingly use new technologies to ingest, manage, and operationalize data and information, and we are interested in delivering data and information in ways that are compatible with the technologies used by stakeholders. To modernize our publicly available resources, we anticipate a multistep, multiyear process that prioritizes high-value changes. Input collected from this RFI will help inform decisions about which areas to address first. By tailoring our resources in response to stakeholder