

Paperwork Reduction Act of 1995 (44 U.S.C. 35). The requirements associated with the accreditation process for clinical laboratories under the CLIA program, and the implementing regulations in 42 CFR part 493, subpart E, are currently approved under OMB control number 0938–0686.

VII. Executive Order 12866 Statement

In accordance with the provisions of Executive Order 12866, this notice was not reviewed by the Office of Management and Budget.

The Administrator of the Centers for Medicare & Medicaid Services (CMS), Chiquita Brooks-LaSure, having reviewed and approved this document, authorizes Lynette Wilson, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Dated: March 17, 2022.

Lynette Wilson,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–7066–N]

Announcement of the Advisory Panel on Outreach and Education (APOE) April 7, 2022 Virtual Meeting

AGENCY: Centers for Medicare & Medicaid Services (CMS), Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: This notice announces the next meeting of the APOE (the Panel) in accordance with the Federal Advisory Committee Act. The Panel advises and makes recommendations to the Secretary of the U.S. Department of Health and Human Services (HHS) (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on opportunities to enhance the effectiveness of consumer education strategies concerning the Health Insurance Marketplace[®], Medicare, Medicaid, and the Children's Health Insurance Program (CHIP). This meeting is open to the public.

DATES: *Meeting Date:* Thursday, April 7, 2022 from 12:00 p.m. to 5:00 p.m. eastern daylight time (e.d.t.).

Deadline for Meeting Registration, Presentations, Special

Accommodations, and Comments: Thursday, March 31, 2022 5:00 p.m. (e.d.t.).

ADDRESSES: *Meeting Location:* Virtual. All those who RSVP will receive the link to attend.

Presentations and Written Comments: Presentations and written comments should be submitted to: Lisa Carr, Designated Federal Official (DFO), Office of Communications, Centers for Medicare & Medicaid Services, 200 Independence Avenue SW, Mailstop 325G HHH, Washington, DC 20201, 202–690–5742, or via email at APOE@cms.hhs.gov.

Registration: Persons wishing to attend this meeting must register at the website <https://www.eventbrite.com/e/apoe-april-7-2022-virtual-meeting-tickets-261248299697> or by contacting the DFO listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice, by the date listed in the **DATES** section of this notice. Individuals requiring sign language interpretation or other special accommodations should contact the DFO at the address listed in the **ADDRESSES** section of this notice by the date listed in the **DATES** section of this notice.

FOR FURTHER INFORMATION CONTACT: Lisa Carr, Designated Federal Official, Office of Communications, 200 Independence Avenue SW, Mailstop 325G HHH, Washington, DC 20201, 202–690–5742, or via email at APOE@cms.hhs.gov.

Additional information about the APOE is available at: <https://www.cms.gov/Regulations-and-Guidance/Guidance/FACA/APOE> Press inquiries are handled through the CMS Press Office at (202) 690–6145.

SUPPLEMENTARY INFORMATION:

I. Background and Charter Renewal Information

A. Background

The Advisory Panel for Outreach and Education (APOE) (the Panel) is governed by the provisions of the Federal Advisory Committee Act (FACA) (Pub. L. 92–463), as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of federal advisory committees. The Panel is authorized by section 1114(f) of the Social Security Act (the Act) (42 U.S.C. 1314(f)) and section 222 of the Public Health Service Act (42 U.S.C. 217a).

The Secretary of the U.S. Department of Health and Human Services (HHS) (the Secretary) signed the charter establishing the Citizen's Advisory Panel on Medicare Education¹ (the

¹ We note that the Citizen's Advisory Panel on Medicare Education is also referred to as the

predecessor to the APOE) on January 21, 1999 (64 FR 7899) to advise and make recommendations to the Secretary and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on the effective implementation of national Medicare education programs, including with respect to the Medicare+Choice (M+C) program added by the Balanced Budget Act of 1997 (Pub. L. 105–33).

The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) (Pub. L. 108–173) expanded the existing health plan options and benefits available under the M+C program and renamed it the Medicare Advantage (MA) program. CMS has had substantial responsibilities to provide information to Medicare beneficiaries about the range of health plan options available and better tools to evaluate these options. The successful MA program implementation required CMS to consider the views and policy input from a variety of private sector constituents and to develop a broad range of public-private partnerships.

In addition, Title I of the MMA authorized the Secretary and the Administrator of CMS (by delegation) to establish the Medicare prescription drug benefit. The drug benefit allows beneficiaries to obtain qualified prescription drug coverage. In order to effectively administer the MA program and the Medicare prescription drug benefit, we have substantial responsibilities to provide information to Medicare beneficiaries about the range of health plan options and benefits available, and to develop better tools to evaluate these plans and benefits.

The Patient Protection and Affordable Care Act (Pub. L. 111–148) and Health Care and Education Reconciliation Act of 2010 (Pub. L. 111–152) (collectively referred to as the Affordable Care Act) expanded the availability of other options for health care coverage and enacted a number of changes to Medicare as well as to Medicaid and CHIP. Qualified individuals and qualified employers are now able to purchase private health insurance coverage through a competitive marketplace, called an Affordable Insurance Exchange (also called Health Insurance Marketplace[®], or Marketplace[®] 2). In order to effectively implement and administer these changes, we must provide information

Advisory Panel on Medicare Education (65 FR 4617). The name was updated in the Second Amended Charter approved on July 24, 2000.

² Health Insurance Marketplace[®] and Marketplace[®] are service marks of the U.S. Department of Health and Human Services.

to consumers, providers, and other stakeholders through education and outreach programs regarding how existing programs will change and the expanded range of health coverage options available, including private health insurance coverage through the Marketplace®. The APOE (the Panel) allows us to consider a broad range of views and information from interested audiences in connection with this effort and to identify opportunities to enhance the effectiveness of education strategies concerning the Affordable Care Act.

The scope of this Panel also includes advising on issues pertaining to the education of providers and stakeholders with respect to the Affordable Care Act and certain provisions of the Health Information Technology for Economic and Clinical Health (HITECH) Act enacted as part of the American Recovery and Reinvestment Act of 2009 (ARRA) (Pub. L. 111–5).

On January 21, 2011, the Panel's charter was renewed and the Panel was renamed the Advisory Panel for Outreach and Education. The Panel's charter was most recently renewed on January 19, 2021, and will terminate on January 19, 2023 unless renewed by appropriate action.

B. Charter Renewal

In accordance with the January 19, 2021, charter, the APOE will advise HHS and CMS on developing and implementing education programs that support individuals who are enrolled in or eligible for Medicare, Medicaid, CHIP, or coverage available through the Health Insurance Marketplace® and other CMS programs. The scope of this FACA group also includes advising on education of providers and stakeholders with respect to health care reform and certain provisions of the HITECH Act enacted as part of the ARRA.

The charter will terminate on January 19, 2023, unless renewed by appropriate action. The APOE was chartered under 42 U.S.C. 217a, section 222 of the Public Health Service Act, as amended. The APOE is governed by provisions of Public Law 92–463, as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

In accordance with the renewed charter, the APOE will advise the Secretary and the CMS Administrator concerning optimal strategies for the following:

- Developing and implementing education and outreach programs for individuals enrolled in, or eligible for, Medicare, Medicaid, CHIP, and coverage available through the Health Insurance Marketplace® and other CMS programs.

- Enhancing the federal government's effectiveness in informing Medicare, Medicaid, CHIP, or the Health Insurance Marketplace® consumers, issuers, providers, and stakeholders, pursuant to education and outreach programs of issues regarding these programs, including the appropriate use of public-private partnerships to leverage the resources of the private sector in educating beneficiaries, providers, partners and stakeholders.

- Expanding outreach to minority and underserved communities, including racial and ethnic minorities, in the context of Medicare, Medicaid, CHIP, and the Health Insurance Marketplace® education programs and other CMS programs as designated.

- Assembling and sharing an information base of “best practices” for helping consumers evaluate health coverage options.

- Building and leveraging existing community infrastructures for information, counseling, and assistance.

- Drawing the program link between outreach and education, promoting consumer understanding of health care coverage choices, and facilitating consumer selection/enrollment, which in turn support the overarching goal of improved access to quality care, including prevention services, envisioned under the Affordable Care Act.

The current members of the Panel as of February 4, 2022, are as follows:

- Julie Carter, Senior Federal Policy Associate, Medicare Rights Center.

- Scott Ferguson, Psychotherapist, Scott Ferguson Psychotherapy.

- Jean-Venable Robertson Goode, Professor, Department of Pharmacotherapy and Outcomes Science, School of Pharmacy, Virginia Commonwealth University.

- Ted Henson, Director of Health Center Performance and Innovation, National Association of Community Health Centers.

- Joan Ilardo, Director of Research Initiatives, Michigan State University, College of Human Medicine.

- Cheri Lattimer, Executive Director, National Transitions of Care Coalition.

- Melissa McChesney, Health Policy Advisor, Unidos US.

- Cori McMahon, Vice President, Tridium.

- Alan Meade, Director of Rehabilitation Services, Holston Medical Group.

- Neil Meltzer, President and CEO, LifeBridge Health.

- Michael Minor, National Director, H.O.P.E. HHS Partnership, National Baptist Convention USA, Incorporated.

- Jina Ragland, Associate State Director of Advocacy and Outreach, AARP Nebraska.

- Morgan Reed, Executive Director, Association for Competitive Technology.

- Margot Savoy, Senior Vice President, American Academy of Family Physicians.

- Congresswoman Allyson Schwartz, Senior Advisor, FTI Consulting.

- Tia Whitaker, Statewide Director, Outreach and Enrollment, Pennsylvania Association of Community Health Centers.

II. Provisions of This Notice

In accordance with section 10(a) of the FACA, this notice announces a meeting of the APOE. The agenda for the April 7, 2022 meeting will include the following:

- Welcome and listening session with CMS leadership

- Recap of the previous (February 3, 2022) meeting

- CMS programs, initiatives, and priorities

- An opportunity for public comment
- Meeting summary, review of recommendations, and next steps

Individuals or organizations that wish to make a 5-minute oral presentation on an agenda topic should submit a written copy of the oral presentation to the DFO at the address listed in the **ADDRESSES** section of this notice by the date listed in the **DATES** section of this notice. The number of oral presentations may be limited by the time available.

Individuals not wishing to make an oral presentation may submit written comments to the DFO at the address listed in the **ADDRESSES** section of this notice by the date listed in the **DATES** section of this notice.

III. Meeting Participation

The meeting is open to the public, but attendance is limited to registered participants. Persons wishing to attend this meeting must register at the website <https://www.eventbrite.com/e/apoe-april-7-2022-virtual-meeting-tickets-261248299697> or contact the DFO at the address or number listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice by the date specified in the **DATES** section of this notice. This meeting will be held virtually. Individuals who are not registered in advance will be unable to attend the meeting.

IV. Collection of Information

This document does not impose information collection requirements, that is, reporting, recordkeeping, or third-party disclosure requirements.

Consequently, there is no need for review by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35).

The Administrator of the Centers for Medicare & Medicaid Services (CMS), Chiquita Brooks-LaSure, having reviewed and approved this document, authorizes Lynette Wilson, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Dated: March 16, 2022.

Lynette Wilson,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

[FR Doc. 2022-05963 Filed 3-21-22; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[OMB No. 0970-0278]

Proposed Information Collection Activity; Family Reunification Packet for Sponsors of Unaccompanied Children

AGENCY: Office of Refugee Resettlement, Administration for Children and Families, HHS.

ACTION: Request for public comment.

SUMMARY: The Office of Refugee Resettlement (ORR), Administration for

Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is inviting public comments on revisions to an approved information collection. The request consists of several forms that allow the Unaccompanied Children (UC) Program to assess the suitability of potential sponsors for UC.

DATES: *Comments due within 60 days of publication.* In compliance with the requirements of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described above.

ADDRESSES: You can obtain copies of the proposed collection of information and submit comments by emailing *infocollection@acf.hhs.gov*. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: ORR proposes the following revisions to this information collection:

- Authorization for Release of Information—
 - ORR replaced the term “minor” with “child.”
 - ORR removed the Alien Registration Number field, since it is not required for background checks.
 - ORR removed reference to “past and present immigration status,” since that information will no longer be collected in the Family Reunification application.
- Family Reunification Application—

- ORR replaced the term “minor” with “child.”

- Proof of Identity—ORR added clarification that individuals under the age of 21 may use the ORR Verification of Release form with a photograph to meet this requirement.

- Proof of Immigration Status or U.S. Citizenship—ORR removed the requirement that potential sponsors provide documentation verifying their immigration status or U.S. citizenship. ORR no longer uses this information as a criterion to determine when a sponsor care plan is required; therefore, it is no longer necessary to collect this information.

- Proof of Address—ORR also removed the phrase “dated within the last two months” that appears after the current lease and current mortgage line items, because it is not applicable to those two acceptable forms of documentation.

- Burden Estimate—ORR increased the average burden hours per response from 0.75 hours to a more accurate estimate of 1.0 hour.

- Letter of Designation for Care of a Minor—

- ORR replaced the term “minor” with “child.”

- ORR also increased the average burden hours per response from 0.5 hours to a more accurate estimate of 0.75 hours.

Respondents: Potential sponsors of UC.

Annual Burden Estimates:

Respondents:

Instrument title	Annual total number of respondents	Annual total number of responses per respondent	Average burden hours per response	Annual total burden hours
Authorization for Release of Information (Forms FRP-2 & FRP-2s)	81,532	1	0.50	40,766
Family Reunification Application (Forms FRP-3 & FRP-3s)	122,950	1	1.00	122,950
Fingerprinting Instructions (Forms FRP-7 & FRP-7s)	81,532	1	1.25	101,915
Letter of Designation for Care of Minor (Forms FRP-9 & FRP-9s)	41,181	1	0.75	30,886

Estimated Annual Burden Total: 296,517.

Record Keepers:

Instrument title	Annual total number of record keepers	Annual total number of responses per record keeper	Average burden hours per response	Annual total burden hours
Authorization for Release of Information (Forms FRP-2 & FRP-2s)	235	347	0.25	20,386
Family Reunification Application (Forms FRP-3 & FRP-3s)	235	523	0.25	30,726
Fingerprinting Instructions (Forms FRP-7 & FRP-7s)	235	347	1.00	81,545
Letter of Designation for Care of Minor (Forms FRP-9 & FRP-9s)	235	175	0.25	10,281

Estimated Annual Burden Hours Total: 142,938.

Comments: The Department specifically requests comments on (a) whether the proposed collection of

information is necessary for the proper performance of the functions of the agency, including whether the