raise access issues to state Medicaid agencies and work with agencies to address those issues. *Form Number:* CMS–10391 (OMB control number: 0938–1134); *Frequency:* Annually; *Affected Public:* State, Local, or Tribal Governments); *Number of Respondents:* 51; *Total Annual Responses:* 212; *Total Annual Hours:* 12,262. (For questions regarding this collection contact Jeremy Silanskis at 410–786–1592.)

2. Type of Information Collection *Request:* Extension of a currently approved collection; Title of *Information Collection:* Income and Eligibility Verification System Reporting and Supporting Regulations; Use: Section 1137 of the Social Security Act requires that States verify the income and eligibility information contained on the applicant's application and in the applicant's case file through data matches with the agencies and entities identified in this section. The State Medicaid/CHIP agency will report the existence of a system to collect all information needed to determine and redetermine eligibility for Medicaid and CHIP. The State Medicaid/CHIP agency will attest to using the PARIS system in determining beneficiary eligibility in Medicaid or CHIP benefit programs. Form Number: CMS-R-74 (OMB control number: 0938-0467); Frequency: Occasionally; Affected Public: State, Local, or Tribal Governments; Number of Respondents: 55; Total Annual Responses: 3,241; Total Annual Hours: 1,071. (For policy questions regarding this collection contact Stephanie Bell at 410 - 786 - 0617.)

3. Type of Information Collection *Request:* Extension of a currently approved collection; Title of Information Collection: Use of Restraint and Seclusion in Psychiatric Residential Treatment Facilities (PRTFs) for Individuals Under Age 21 and Supporting Regulations; Use: Psychiatric residential treatment facilities are required to report deaths, serious injuries and attempted suicides to the State Medicaid Agency and the Protection and Advocacy Organization. They are also required to provide residents the restraint and seclusion policy in writing, and to document in the residents' records all activities involving the use of restraint and seclusion. Form Number: CMS-R-306 (OMB control number: 0938–0833); Frequency: Occasionally; Affected Public: Private sector (Business or other for-profits); Number of Respondents: 390; Total Annual Responses: 1,466,823; Total Annual Hours: 449,609. (For policy questions regarding this collection contact Kirsten Jensen at 410-786-8146.)

4. Type of Information Collection Request: New collection (Request for a new OMB control number): Title of Information Collection: Requirements Related to Surprise Billing; Part II; Use: On December 27, 2020, the Consolidated Appropriations Act, 2021 (CAA), which includes the No Surprises Act, was signed into law. The No Surprises Act provides Federal protections against surprise billing and limits out-of-network cost sharing under many of the circumstances in which surprise bills arise most frequently. The information requirements of the October 2021 interim final rules included in CMS-10791 have two components: Good Faith Estimates. Providers and facilities must furnish a good faith estimate of expected items and services beginning on or after January 1, 2022, which will allow uninsured (or self-pay) individuals to have access to information about health care pricing before receiving care. This information will allow uninsured (or self-pay) individuals to evaluate options for receiving health care, make costconscious health care purchasing decisions, and reduce surprises in relation to their health care costs for items and services. Additionally, uninsured (or self-pay) individuals will need a good faith estimate to initiate the patient-provider dispute resolution process. HHS will request information from entities seeking to be certified or recertified as an SDR entity. This information will be used to assess whether or not the entity satisfies the requirements for certification. Form Number: CMS-10791 (OMB control number: 0938–NEW); Frequency: Annually; Affected Public: Private sector (Business or other for-profits and Not-for-profit institutions); Number of Respondents: 4,010,691; Total Annual Responses: 4,010,691; Total Annual Hours: 6,242,227. For policy questions regarding this collection contact Janny Frimpong at 301-492-4174.

Dated: April 25, 2022.

### William N. Parham, III,

Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2022–09112 Filed 4–27–22; 8:45 am] BILLING CODE 4120–01–P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Administration for Children and Families

[OMB No. 0970-0427]

# Submission for OMB Review; Head Start Program Information Report

**AGENCY:** Office of Head Start, Administration for Children and Families, HHS.

**ACTION:** Request for public comment.

**SUMMARY:** The Administration for Children and Families' (ACF) is requesting a 3-year extension of the Head Start Program Information Report (PIR), Monthly Enrollment reporting instrument, and Center Locations and Contacts instrument (OMB #0970–0427, expiration 4/30/2022). OHS has made updates to these instruments, as described below.

**DATES:** Comments due within 30 days of publication. OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication.

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. You can also obtain copies of the proposed collection of information by emailing infocollection@ acf.hhs.gov. Identify all emailed requests by the title of the information collection.

## SUPPLEMENTARY INFORMATION:

Description: OHS is requesting an extension, with changes, of the Head Start PIR information collection authority. The following instruments are included in this information collection: (1) PIR, (2) Monthly Enrollment, and (3) Center Locations and Contacts. The PIR is used for federal program management purposes including to promote decisionmaking using data, is a major source of information used to respond to Congressional and public inquiries about Head Start programs, and is used often by researchers. Monthly enrollment reporting supports oversight activities related to promoting full enrollment of programs. Center locations and contact reporting is used

to help parents locate a program in their community. In general, these information collections together create key administrative datasets to support administration of the program.

The proposed changes include new questions on the PIR to collect

information on collaboration activities with Part C agencies and the average benefits provided to certain education staff as part of their compensation.

Additionally, new questions were added to the centers reporting to capture participation in a local or state Quality

#### ANNUAL BURDEN ESTIMATES

Rating Improvement System and licensing status for each center. Lastly, minor changes were made to these instruments for clarification purposes.

*Respondents:* Head Start Grant Recipients.

Instrument	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual burden hours
Head Start PIR	1,600	2.25	1	3,600
Monthly Enrollment	1,600	27	0.05	2,160
Center Locations and Contacts	1,600	15	0.25	6,000

Estimated Total Annual Burden Hours: 11,760.

Authority: 42 U.S.C. 9801 et seq.

#### Mary B. Jones,

ACF/OPRE Certifying Officer. [FR Doc. 2022–09053 Filed 4–27–22; 8:45 am] BILLING CODE 4184–40–P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Administration for Children and Families

### Submission for OMB Review; OPRE Data Collection for State Child Welfare Data Linkages Descriptive Study (New Collection)

**AGENCY:** Office of Planning, Research, and Evaluation, Administration for Children and Families, HHS. **ACTION:** Request for public comment.

**SUMMARY:** The Administration for Children and Families (ACF) is requesting approval from the Office of Management and Budget (OMB) for a new primary data collection about connected child welfare data. We define connected data as child welfare data that are linked or integrated with data from other systems or agencies. The State Child Welfare Data Linkages Descriptive Study (Data Linkages Descriptive Study) will gather systematic information on the extent to which states connect their child maltreatment data to other data sets; how any linked data sets are created, managed, and used; and challenges states face in linking data.

**DATES:** Comments due within 30 days of publication. OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication.

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. You can also obtain copies of the proposed collection of information by emailing OPREinfocollection@acf.hhs.gov. All emailed requests should be identified by the title of the information collection.

## SUPPLEMENTARY INFORMATION:

Description: The State Child Welfare Data Linkages Descriptive Study will examine the extent to which child welfare agencies in 50 states, Puerto Rico, and Washington, DC, link administrative data on child maltreatment to data in other systems and to learn more about states' practices related to sharing and linking data. The study aims to inform the ongoing and accurate surveillance of child maltreatment and identify facilitators and barriers to connected data efforts (integrated data or linked data).

These data are not available from existing sources. This study aims to present an internally valid description of the data capacity of participating state child welfare agencies, not to promote statistical generalization to different sites or service populations.

*Respondents:* State child welfare directors, designated state child welfare agency staff (identified by a state child welfare director as having knowledge about the state's connected data efforts), and designated county staff (identified by a state child welfare director as having knowledge about a county's connected data efforts).

## **ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents (total over request period)	Number of responses per respondent (total over request period)	Average burden per response (in hours)	Total burden (in hours)	Annual burden (in hours)
Initial survey of state child welfare directors Survey of connected data efforts <sup>1</sup> Interviews with individuals responsible for connected data	52 208	1	0.67 0.58	35 121	18 61
efforts	120	1	1	120	60

<sup>1</sup> Estimates for burden hours define respondent by survey administration and not necessarily by the number of different people completing the survey.