

used, including aggregate data on people served and program development toward stated goals.

In this IC, the new quantitative grant reporting tool will be disseminated to all new Lifespan Respite Program grantees upon grant award. Specifically, the tool will collect information related to respite care services delivered, caregiver demographics, care recipient demographics, respite training, and lifespan respite program systems and providers. Ultimately, this reporting

will assist ACL’s Office of Supportive and Caregiver Services to assess the performance of the Lifespan Respite Program grantees in improving the delivery and quality of respite services for family caregivers of children and adults of all ages with special needs.

The proposed data collection tools may be found on the ACL website for review at: <https://www.acl.gov/about-acl/public-input>.

Estimated Program Burden: ACL estimates the burden of this collection of information as follows:

A maximum of 40 grantees are expected to respond to the grant reporting tool semiannually. The approximate burden for completion may be 6 hours per respondent for a total estimate of 480 hours. The estimated completion burden includes time to review the instructions, read the questions, compile information, and complete responses.

IC BURDEN CHART

Respondent/data collection activity	Number of respondents	Responses per respondent	Hours per response	Annual burden hours
Grantee reporting tool	40	2	6	480
Total	480

Dated: October 21, 2022.
Alison Barkoff,
Acting Administrator and Assistant Secretary for Aging.
 [FR Doc. 2022–23363 Filed 10–26–22; 8:45 am]
BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities: Proposed Collection; Public Comment Request; of the Office of Healthcare Information and Counseling (OHIC) Profiles at ACL OMB #0985–New

AGENCY: Administration for Community Living, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of information listed above. Under the Paperwork Reduction Act of 1995 (PRA), Federal agencies are required to publish a notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This is a new information collection request soliciting comments on the information collection requirements relating to the Office of Healthcare Information and Counseling (OHIC) Profiles project at ACL.

DATES: Comments on the collection of information must be submitted

electronically by 11:59 p.m. (EST) or postmarked by December 27, 2022.

ADDRESSES: Submit electronic comments on the collection of information to: Amanda Cash, Amanda.Cash@acl.hhs.gov, 202–795–7369. Submit written comments on the collection of information to Administration for Community Living, 330 C Street SW, Washington, DC 20201, Attention: Amanda Cash.

FOR FURTHER INFORMATION CONTACT: Amanda Cash, Amanda.Cash@acl.hhs.gov, 202–795–7369.

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. “Collection of information” is defined in the PRA and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. The PRA requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, ACL is publishing a notice of the proposed collection of information set forth in this document. With respect to the following collection of information, ACL invites comments on our burden estimates or any other aspect of this collection of information, including:

(1) whether the proposed collection of information is necessary for the proper performance of ACL’s functions,

including whether the information will have practical utility;

(2) the accuracy of ACL’s estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used to determine burden estimates;

(3) ways to enhance the quality, utility, and clarity of the information to be collected; and

(4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques when appropriate, and other forms of information technology.

The Administration for Community Living (ACL) is currently engaged in an effort to streamline and standardize grantee profiles across three programs managed by the Office of Healthcare Information and Counseling (OHIC): the State Health Insurance Assistance Program (SHIP), Senior Medicare Patrol (SMP), and Medicare Improvements for Patients and Providers Act (MIPPA). Grantees in each program must adhere to a specific set of reporting requirements and associated reporting schedules outlined in their Program Reporting Guidelines. While reporting requirements are effective in ensuring grantees data, there is no consistency or uniformity in how individual grantees submit their data. For example, SHIP profiles currently exist; these profiles are accessible to the SHIP grantee network via the program’s technical assistance center, and they can be updated directly by grantee states. SMP and MIPPA profiles have yet to be developed. The goal of this data collection effort is to obtain consistent data elements for the three programs that will allow ACL to reimagine the

existing profiles into a comparable set of data elements across programs.

These data will allow RTI International, a contractor to ACL, to develop an updated set of grantee profiles that are accessible, visually appealing, and consistent across programs. Specifically, the purpose of this data collection effort is to update the SHIP grantee profiles, which were last updated in 2016, and develop similar profiles for SMP and MIPPA. These profiles will be internal to ACL and will only be shared with grantees.

A web-based questionnaire will be emailed to all 125 grant managers (representing 54 states and territories) electronically via Smartsheet. The collected data will be imported into a dataset and will be used to create program profiles accessible to ACL and grantees.

The proposed data collection tools may be found on the ACL website for review at: <https://www.acl.gov/about-acl/public-input>.

Estimated Program Burden

ACL estimates the burden of this collection of information as follows: A maximum of 125 grantees are expected to respond to the web-based data collection instrument. The approximate burden for pre-data collection preparation is 30 minutes per respondent and approximate burden for form completion is 20 minutes per respondent for a total annual estimate of 103.75 hours. The estimated completion burden includes time to review the instructions, read the questions and complete and responses.

IC BURDEN CHART

Respondent/data collection activity	Number of respondents	Responses per respondent	Hours per response	Annual burden hours
Pre-data collection preparation	125	1	0.5	62.5
Web-based data collection	125	1	0.33	41.25
Total	125	1	0.83	103.75

Dated: October 21, 2022.

Alison Barkoff,

Acting Administrator and Assistant Secretary for Aging.

[FR Doc. 2022-23364 Filed 10-26-22; 8:45 am]

BILLING CODE 4154-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA-2022-N-2588]

Quantitative Brain Amyloid Positron Emission Tomography Imaging in Patients With Alzheimer’s Disease; Public Workshop; Request for Comments

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of public workshop; request for comments.

SUMMARY: The Food and Drug Administration (FDA, the Agency, or we) is announcing the following public workshop entitled “Quantitative Brain Amyloid PET Imaging in Patients with Alzheimer’s Disease.” The purpose of the public workshop is to evaluate the role of quantitative positron emission tomography (PET) measures of amyloid deposition in the brain in clinical trials and clinical use in patients with suspected or confirmed Alzheimer’s disease.

DATES: The public workshop will be held on November 17, 2022, from 8:30 a.m. to 5 p.m. Eastern Time. Submit either electronic or written comments

on this public workshop by December 19, 2022. See the **SUPPLEMENTARY INFORMATION** section for registration date and information.

ADDRESSES: The public workshop will be held at FDA White Oak Campus Great Room. Entrance for the public workshop participants (non-FDA employees) is through Building 1 where routine security check procedures will be performed. For parking and security information, please refer to <https://www.fda.gov/about-fda/visitor-information>.

You may submit comments as follows. Please note that late, untimely filed comments will not be considered. Electronic comments must be submitted on or before December 19, 2022. The <https://www.regulations.gov> electronic filing system will accept comments until 11:59 p.m. Eastern Time at the end of December 19, 2022. Comments received by mail/hand delivery/courier (for written/paper submissions) will be considered timely if they are postmarked or the delivery service acceptance receipt is on or before that date.

Electronic Submissions

Submit electronic comments in the following way:

- **Federal eRulemaking Portal:** <https://www.regulations.gov>. Follow the instructions for submitting comments. Comments submitted electronically, including attachments, to <https://www.regulations.gov> will be posted to the docket unchanged. Because your comment will be made public, you are solely responsible for ensuring that your

comment does not include any confidential information that you or a third party may not wish to be posted, such as medical information, your or anyone else’s Social Security number, or confidential business information, such as a manufacturing process. Please note that if you include your name, contact information, or other information that identifies you in the body of your comments, that information will be posted on <https://www.regulations.gov>.

- If you want to submit a comment with confidential information that you do not wish to be made available to the public, submit the comment as a written/paper submission and in the manner detailed (see “Written/Paper Submissions” and “Instructions”).

Written/Paper Submissions

Submit written/paper submissions as follows:

- **Mail/Hand Delivery/Courier (for written/paper submissions):** Dockets Management Staff (HFA-305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852.
- For written/paper comments submitted to the Dockets Management Staff, FDA will post your comment, as well as any attachments, except for information submitted, marked and identified, as confidential, if submitted as detailed in “Instructions.”

Instructions: All submissions received must include the Docket No. FDA-2022-N-2588 for “Quantitative Brain Amyloid PET Imaging in Patients with Alzheimer’s Disease.” Received comments, those filed in a timely manner (see **ADDRESSES**), will be placed