information in the same format as on the packaged product (*e.g.*, Nutrition Facts label format)? If pictures of the product are used, how does the manufacturer, retailer, or third-party online grocery provider ensure the information in the picture is consistent with the package label, readable, and accessible on all devices (*e.g.*, laptops, smartphones etc.)? Please provide any data and evidence to support your response.

### 2. Industry Considerations and Logistics of Food Labeling in Online Grocery Shopping

2.1 Grocery foods may be sold in various ways through e-commerce, (*e.g.,* directly from the manufacturer, a retailer, or through a third-party online grocery provider). How do manufacturers, grocery retailers, and third-party online grocery providers decide what label information to display for grocery foods sold through online platforms (websites, mobile applications, etc.)? Please provide any data and evidence to support your response.

2.2 What challenges and limitations do online grocery retailers, manufacturers and third-party online grocery providers encounter when seeking to display food labeling information on their respective platforms? Please provide any data and evidence to support your response. Also, what, if any, are the labeling challenges for international websites selling groceries online?
2.3 How do manufacturers, retailers,

2.3 How do manufacturers, retailers, and third-party online grocery providers ensure that information online is consistent with the actual product package and that the information is accurate and up to date? Please provide any data and evidence to support your response.

2.4 How do online retailers and third-party online grocery providers address manufacturer reformulations that may alter a product's nutrition, ingredient, or major food allergens information? If there is a change or error detected, how do online grocery shopping platforms collect the information and update the website (*e.g.*, is there a customer feedback loop or internal quality assurance process to detect and correct online labeling errors)? Please provide any data and evidence to support your response.

2.5 What measures are online grocery shopping platforms taking to ensure that consumers can access accurate nutrition, ingredient, and major food allergens information when purchasing groceries online? Have online grocery shopping platforms identified or capitalized on opportunities to leverage online platforms (*e.g.*, interactive labeling) to improve consumer engagement with and accessibility to food labeling information? Please provide any data and evidence to support your response.

2.6 How are online grocery shopping platforms seeking to ensure online access to labeling information is equitable for consumers? Do current online labeling presentations present barriers to accessing labeling information for certain consumers? Please provide any data and evidence to support your response.

## 3. Consumer Use of Food Label Information in Online Grocery Shopping

3.1 What food label information do consumers expect to see when shopping for groceries online? For example, do consumers expect all the information presented online to be the same as the retail food package label? When there is a picture of a product label online, do consumers expect the picture of the label to be the same as the label on the retail food package? Please provide any data and evidence to support your response.

3.2 To what extent, and how, do consumers use nutrition, ingredient, and major food allergens information when grocery shopping online? For example, what percentage of consumers use the label to get information to support eating healthier? What percentage of consumers use the label information because of specific dietary concerns? We would be especially interested in demographic data on consumers who view label information when grocery shopping online. Please provide any data and evidence to support your response.

3.3 What do consumers find most challenging about navigating online shopping platforms for specific label information needs? Please provide any data and evidence to support your response.

3.4 What data are available on the most effective ways for presenting nutrition, ingredient, and major food allergens information specifically through online grocery shopping platforms (websites, mobile applications, etc.), so that consumers can easily access the information? For example, is there a specific format (*e.g.*, Nutrition Facts label format) that consumers find useful in an online grocery shopping platform? What are effective means of displaying this information on the platform (e.g., link to additional product information, viewable on the top 50 percent of the web page) to ensure consumers have

ready access? Please provide any data and evidence to support your response.

#### V. References

The following references are on display at the Dockets Management Staff (see **ADDRESSES**) and are available for viewing by interested persons between 9 a.m. and 4 p.m., Monday through Friday; they are also available electronically at *https:// www.regulations.gov.* FDA has verified the website addresses, as of the date this document publishes in the **Federal Register**, but websites are subject to change over time.

- 1. eMarketer Editors. "In 2021, Online Grocery Sales Will Surpass \$100 Billion" Insider Intelligence, February 24, 2021, available at: https://www.emarketer.com/ content/2021-online-grocery-sales-willsurpass-100-billion. Accessed on October 3, 2022.
- 2. FDA. "Guidance for Industry and FDA: Dear Manufacturer Letter Regarding Food Labeling." January 2007. Available at: https://www.fda.gov/regulatoryinformation/search-fda-guidancedocuments/guidance-industry-and-fdadear-manufacturer-letter-regarding-foodlabeling. Accessed on October 3, 2022.
- Pomeranz, Jennifer L., et al., "Opportunities to Address the Failure of Online Food Retailers to Ensure Access to Required Food Labelling Information in the USA", March 2022. Available at: https://www.cambridge.org/core/ journals/public-health-nutrition/article/ opportunities-to-address-the-failure-ofonline-food-retailers-to-ensure-access-torequired-food-labelling-information-inthe-usa/9520BF4CB0E2CDDF 9760276729F0DBE2. Accessed on October 3, 2022.
- 4. Olzenak, Kelly, et al., "How Online Grocery Stores Support Consumer Nutrition Information Needs", March 2022. Available at: https:// www.sciencedirect.com/science/article/ pii/S1499404620305248. Accessed on October 3, 2022.

Dated: April 18, 2023.

#### Lauren K. Roth,

Associate Commissioner for Policy. [FR Doc. 2023–08543 Filed 4–21–23; 8:45 am] BILLING CODE 4164–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS-0990-new]

### Agency Information Collection Request; 60-Day Public Comment Request

**AGENCY:** Office of the Secretary, HHS. **ACTION:** Notice.

**SUMMARY:** In compliance with the requirement of the Paperwork

Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment.

**DATES:** Comments on the ICR must be received on or before June 23, 2023. **ADDRESSES:** Submit your comments to *Sherrette.Funn@hhs.gov* or by calling (202) 264–0041 and *PRA@HHS.GOV*. **FOR FURTHER INFORMATION CONTACT:** 

When submitting comments or requesting information, please include the document identifier 0990–New–60D and project title for reference, to Sherrette A. Funn, email: Sherrette.Funn@hhs.gov, PRA@ HHS.GOV or call (202) 264–0041 the Reports Clearance Officer.

**SUPPLEMENTARY INFORMATION:** Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (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.

*Title of the Collection:* Customer Experience in The Office of the Assistant Secretary for Financial Resources Service Delivery.

*Type of Collection:* Quantitative & Qualitative.

*OMB No.:* 0990–new.

Abstract: The U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Financial Resources (ASFR) is requesting OMB approval for the Customer Experience in The Office of the Assistant Secretary for Financial Resources Service Delivery initiative. The proposed information collection activity provides a means to garner quantitative and qualitative customer and stakeholder feedback in an efficient, timely manner, in accordance with the Administration's commitment to improving access to and service delivery. This feedback will (1) provide insights into customer or stakeholder perceptions, experiences and expectations; (2) provide a warning of issues that create barriers to funding or the system to deliver them; and (3) focus attention on areas where communication, training or changes in operations might improve delivery of such opportunities and services. These voluntary collections will allow for ongoing, collaborative and actionable communications between HHS and its

# ANNUALIZED BURDEN HOUR TABLE

customers and stakeholders. It will also allow feedback to contribute directly to the improvement of program management.

The solicitation of feedback will target areas such as: (1) legibility, readability, comprehension, and accessibility and inclusion of ASFR services; (2) timeliness, appropriateness, and accuracy of information within services delivered by ASFR; (3) efficiency of service delivery, and resolution of issues with service delivery; and (4) any other reasonable area of exploration engendered by this review. Responses will be assessed to plan and inform efforts to improve or maintain the quality of service offered to the public.

The collections are low-burden for respondents (based on considerations of total burden hours, total number of respondents, or burden-hours per respondent) and are low-cost for both the respondents and the Federal Government. Moreover, Personally identifiable information (PII) will be collected only to the extent necessary. If this information is not collected, vital feedback from customers and stakeholders on the Agency's services will be unavailable. Such assessments would better equip HHS to develop policies and programs that deliver resources and benefits equitably to all.

Forms (if necessary)	Respondents (if necessary)	Number of respondents	Number of responses per respondents	Average burden per response within hrs.	Total burden hours
Applicant Survey Testing Session Individual In-Depth Interviews Focus Group	HHS Potential Applicant HHS Potential Applicant HHS Applicant/HHS Staff HHS Applicant/HHS Staff	1,000 300 200 200	1 1 1 1	15/60 1.5 1 1	250 450 200 200
Total					1,100

### Sherrette A. Funn,

Paperwork Reduction Act Reports Clearance Officer, Office of the Secretary.

[FR Doc. 2023–08568 Filed 4–21–23; 8:45 am]

BILLING CODE 4150-04-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Indian Health Service

# Produce Prescription Pilot Program

### Announcement Type: New.

*Funding Announcement Number:* HHS–2023–IHS–PPPP–0001. Assistance Listing (Catalog of Federal Domestic Assistance or CFDA) Number: 93.933.

#### Key Dates

Application Deadline Date: June 8, 2023.

*Earliest Anticipated Start Date:* June 23, 2023.

## I. Funding Opportunity Description

### Statutory Authority

The Indian Health Service (IHS) is accepting applications for a cooperative agreement for the Produce Prescription Pilot Program (P4). This program is authorized under the Snyder Act, 25 U.S.C. 13; the Transfer Act, 42 U.S.C. 2001(a); and the Consolidated Appropriations Act, 2022, Public Law 117–103, 136 Stat. 49, 398 (2022). The Assistance Listings section of *SAM.gov* (*https://sam.gov/content/home*) describes this program under 93.933.

# Background

Social determinants of health (SDOH) are the conditions in the environments where individuals are born, live, learn, work, play, worship, and age, that affect health and quality of life risks and outcomes. One of the SDOH that can contribute significantly to various health disparities and inequities is access to nutritious foods. If people or communities do not have nutrition