CHES, Scientific Review Official, National Center for HIV, Viral Hepatitis, STD, and TB Prevention, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop H24–6, Atlanta, Georgia 30329. Telephone: (770) 488–6115; Email: spe6@cdc.gov.

The Director, Office of Strategic
Business Initiatives, Office of the Chief
Operating Officer, Centers for Disease
Control and Prevention, has been
delegated the authority to sign Federal
Register notices pertaining to
announcements of meetings and other
committee management activities, for
both the Centers for Disease Control and
Prevention and the Agency for Toxic
Substances and Disease Registry.

Kalwant Smagh,

Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2023–26642 Filed 12–4–23; 8:45 am] **BILLING CODE 4163–18–P**

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS 3452-PN]

Medicare Program; Application by the Utilization Review Accreditation Commission (URAC) for Continued CMS Approval of Its Home Infusion Therapy (HIT) Accreditation Program

Correction

In Notice document, 2023–24850, appearing on pages 77321 through 77323, in the issue of Thursday, November 9, 2023, make the following correction:

On page 77321, in the second column, in the **DATES** section, the date

"December 11, 2023" should read "December 8, 2023".

[FR Doc. C1–2023–24850 Filed 12–4–23; 8:45 am] BILLING CODE 0099–10–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; State Personal Responsibility Education Program (PREP) (Office of Management and Budget #0970–0380)

AGENCY: Family and Youth Services Bureau, Administration for Children and Families, Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Family and Youth Services Bureau (FYSB) within the Administration on Children, Youth and Families (ACYF) is requesting a 3-year extension of the State Personal Responsibility Program (PREP) state plans and performance progress report (OMB #0970–0380, expiration 12/31/2023). There are no changes requested to the state plan, but there are changes requested to the performance progress report. Changes include the addition of information related to equity activities and strategies to mitigate challenges.

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: The State PREP has mandatory, formula allotments for state and territories to apply. The process is for states and territories to submit and for ACYF/FYSB to collect their state plans and semi-annual performance progress reports.

Purpose and Use of the Information Collection:

The state plan offers information about the proposed state project and has been and will continue to be used as the primary basis to determine whether or not the project meets the minimum requirements of the legislation for the grant award. There are no changes proposed to the state plan; FYSB is requesting to use these plans for another 3 years.

The Performance Progress Reports are collected semi-annually and inform the monitoring of the grantees' program design, program evaluation, management improvement, service quality, and compliance with agreed upon goals. ACYF/FYSB has and will continue to use the information to ensure effective service delivery for program participants. Finally, the data from this collection will be used to report outcomes and efficiencies and will provide valuable information to policy makers and key stakeholders in the development of program and research efforts. Changes are proposed to the Performance Progress Reports and include the addition of information related to equity activities and strategies to mitigate challenges.

Respondents: All 52 states and territories that are still eligible to accept their State PREP mandatory, formula allotments for funding.

ANNUAL BURDEN ESTIMATES

Instrument	Total number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual burden hours
State Plans Performance Progress Reports	52	1	40	2,080
	52	2	30	3,120

Estimated Total Annual Burden Hours: 5,200.

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 information shall have practical utility;

(b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information

technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Authority: Section 513 of the Social Security Act (42 U.S.C. 713), as amended by section 50503 of the Bipartisan Budget Act of 2018 (Pub. L. 115–123) extended by Division CC, Title III, Section 302 of the Consolidated Appropriations Act, 2021 (Pub. L. 116–260).

Mary B. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2023–26658 Filed 12–4–23; 8:45 am]

BILLING CODE 4184-37-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities; Proposed Collection; Comment Request; ACL Program Performance Report Generic Information Collection, OMB 0985– NEW

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.

DATES: Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by February 5, 2024.

ADDRESSES: Submit electronic comments on the collection of information to: Shannon Skowronski to the ACL Office of Performance and Evaluation public comment inbox at evaluation@acl.hhs.gov. Submit written comments on the collection of information to Administration for Community Living, 330 C Street SW, Washington, DC 20201, Attention: Shannon Skowronski Office of Performance and Evaluation.

FOR FURTHER INFORMATION CONTACT:

Shannon Skowronski at the ACL Office of Performance and Evaluation public comment inbox evaluation@acl.hhs.gov or at 202–795–7438 or shannon.skowronski@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: This announcement solicits comments on the ACL Program Performance Report Generic Information Collection, a mechanism to collect program performance reports for programs authorized by the Older Americans Act (Pub. L. 89–27 of 1965, as amended through Pub. L. 116–131 of 2020), and the Elder Justice Act (title XX of the Social Security Act, subtitle B, the Elder Justice Act of 2009).

Under the PRA, 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 as 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.

ACL invites comments on burden estimates or other aspects 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.

ACL will adhere to best practices for collection of all demographic information when this information is collected for the programs listed below in accordance with OMB guidance. This includes, but is not limited to, guidance specific to the collection of sexual orientation and gender identity (SOGI) items that align with Executive Order 13985 on Advancing Racial Equity and Support for Underserved Communities Through the Federal Government, Executive Order 14075 on Advancing Equality for Lesbian, Gay, Bisexual, Transgender, Queer, and Intersex Individuals and Executive Order 13988 on Preventing and Combating Discrimination on the Basis of Gender Identity and Sexual Orientation. Understanding these disparities can and should lead to improved service delivery for ACL's programs and populations served.

Authorizing Legislation

In 1965, the Older Americans Act (OAA) was passed in response to concerns by policymakers about a lack of community social services for older adults. The original legislation established authority for grants for community planning and social services, research and development projects, and personnel training in the field of aging. The OAA was last amended in 2020 (Pub. L. 116-131) and authorizes a variety of social and health services programs for older adults, families, and caregivers. The Elder Justice Act (EJA), passed in 2010, is the first comprehensive legislation to address the abuse, neglect, and exploitation of older adults at the federal level. The law authorized programs and initiatives that coordinate federal responses to elder abuse, promote elder justice research and innovation, support Adult Protective Services systems, and provide additional protections for residents of long-term care facilities. OAA and EJA programs help advance ACL's mission of supporting the independence, wellbeing, and health of older adults, older adults with disabilities, and their families and caregivers.

The OAA, EJA, 45 CFR 75.342 (monitoring and reporting program performance), 45 CFR 75.301 (performance measurement), and the GPRA Modernization Act of 2010 (Pub. L. 111–352, Sec 12) require grantee program performance monitoring and reporting. Grantee program performance reporting serves several functions, enabling ACL to: (1) monitor program achievement of performance objectives; (2) identify areas of performance that may benefit from technical assistance and/or corrective action; (3) establish program policy and direction; and (4) prepare responses and reports for Congress, the OMB, other federal departments, and public and private agencies, including legislatively required reports.

In order to streamline the collection of performance data and enhance efficacy, ACL is requesting approval of a generic IC for performance reporting for programs authorized under the OAA and EJA.

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

Estimated Program Burden: ACL estimated total annual burden for this generic IC is 50,335.60 hours. This estimate is based on the current number of grantees for these programs, their number of program performance indicators, and previous ACL experience with program performance reporting.