

EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

Form name	Total burden hours	Average hourly wage rate**	Total burden cost
1. Structural Assessment .....	75	<sup>a</sup> \$119.54	\$8,966
2. AHRQ Medical Office Survey on Patient Safety Culture MOSOPS (brick-and-mortar only).			
a. Physicians .....	219	<sup>a</sup> 119.54	26,179
b. Other Health Practitioners .....	219	<sup>b</sup> 34.04	7,455
3. Participant Experience Survey .....	63	<sup>a</sup> 119.54	7,115
4. Semi-structured qualitative interviews .....	18	<sup>a</sup> 119.54	2,152
5. Antibiotic Prescription Data Template .....	4,050	<sup>c</sup> 76.79	311,000
<b>Total .....</b>	<b>4,644</b>		<b>366,163</b>

\*\* Annualized number of respondents is based on maximum practices recruited, assuming 50% of the practices are telemedicine-only and 50% are brick-and-mortar, and 75% response rate for forms 1 and 3, 50% response rate for form 2, and 90% response rate for forms 4 and 5.

\*\* National Compensation Survey: Occupational wages in the United States May 2023 “U.S. Department of Labor, Bureau of Labor Statistics:” [https://www.bls.gov/oes/current/oes\\_stru.htm](https://www.bls.gov/oes/current/oes_stru.htm).

<sup>a</sup> Based on the mean wages for 29–1229 Physicians and Surgeons, All Other.

<sup>b</sup> Based on the mean wages for 29–9099 Other Healthcare Practitioners and Technical Occupations: Healthcare Practitioners and Technical Workers, All Other.

<sup>c</sup> Based on an average of the mean wages for 29–1229 Physicians and Surgeons, All Other and 29–9099 Other Healthcare Practitioners and Technical Workers: Healthcare Practitioners and Technical Workers, All Other.

**Request for Comments**

In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501–3520, comments on AHRQ’s information collection are requested with regard to any of the following: (a) whether the proposed collection of information is necessary for the proper performance of AHRQ’s health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ’s estimate of burden (including hours and costs) of the proposed collection(s) of information; (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency’s subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: July 8, 2024.

**Marquita Cullom,**

*Associate Director.*

[FR Doc. 2024–15250 Filed 7–10–24; 8:45 am]

**BILLING CODE 4160–90–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Medicare & Medicaid Services**

[Document Identifier: CMS–10398]

**Emergency Reinstatement: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)**

**AGENCY:** Centers for Medicare & Medicaid Services.

**ACTION:** Notice.

**SUMMARY:** The Centers for Medicare & Medicaid Services (CMS) is requesting that this information collection request (ICR), for the reinstatement of certain generic information collection requests (GenICs) be processed under the emergency Paperwork Reduction Act of 1995 (PRA) clearance process. Such GenICs are without change. We seek emergency reinstatement since we believe that public harm is reasonably likely to ensue if the normal, non-emergency clearance procedures are followed.

**DATES:** Comments must be received by July 16, 2024.

**ADDRESSES:** *Submitting Comments.* When commenting, please reference the applicable collection’s CMS ID number and/or the OMB control number (both numbers are listed below under the **SUPPLEMENTARY INFORMATION** caption). To be assured consideration, comments and recommendations must be submitted in any one of the following ways and by the applicable due date:

1. *Electronically.* We encourage you to submit comments through the Federal eRulemaking portal at the applicable

web address listed below under the **SUPPLEMENTARY INFORMATION** caption under “Docket Information.” If needed, instructions for submitting such comments can be found on that website.

2. *By regular mail.* Alternatively, you can submit written comments to the following address:

CMS, Office of Strategic Operations and Regulatory Affairs (OSORA), Division of Regulations Development, Attention: CMS–10398/OMB 0938–1148, Room C4–26–05, 7500 Security Boulevard, Baltimore, MD 21244–1850.

*Obtaining Documents.* To obtain copies of supporting statements and any related forms and supporting documents for the collections listed in this notice, we encourage you to access the Federal eRulemaking portal at the applicable web address listed below under the **SUPPLEMENTARY INFORMATION** caption under “Docket Information” and “Docket Web Address.” If needed, follow the online instructions for accessing the applicable docket and the documents contained therein.

**FOR FURTHER INFORMATION CONTACT:** For general information contact William N. Parham at 410–786–4669. For policy related questions contact the individual listed below under the **SUPPLEMENTARY INFORMATION** caption under “Docket Information.”

**SUPPLEMENTARY INFORMATION:** Under the PRA (44 U.S.C. 3501–3520), Federal agencies must obtain approval from OMB for each collection of information that they conduct or sponsor. The term “collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c). Generally, it applies to voluntary and mandatory requirements that are related to any one or more of the following activities: the collection of information,

the reporting of information, the disclose of information to a third-party, and/or recordkeeping.

While there are some exceptions (such as collections having non-substantive changes and collections requesting emergency approval) section 3506(c)(2)(A) of the PRA requires Federal agencies to publish a notice in the **Federal Register** and solicit comment on each of its proposed collections of information, including: new collections, extensions of existing collections, revisions of existing collections, and reinstatements of previously approved collections before submitting such collections to OMB for approval. To comply with this requirement, CMS is publishing this notice.

Interested parties are invited to submit comments regarding our burden estimates or any other aspect of the collection, including: the necessity and utility of the proposed information collection for the proper performance of our agency's functions; the accuracy of burden estimates; ways to enhance the quality, utility, and clarity of the information to be collected; and the use of automated collection techniques or other forms of information technology to minimize the information collection burden. See **DATES** and **ADDRESSES** for instructions for submitting comments.

While we will review all comments received, we may choose not to post off-topic or inappropriate comments. Otherwise, all comments will be posted without edit under the applicable docket number, including any personal information that the commenter provides. Our response to such comments will be posted at [reginfo.gov](https://www.reginfo.gov) under the applicable OMB control number.

### Emergency Reinstatement

Given the essential role the subject ICRs play and the severe beneficiary and programmatic harms that would occur without them, CMS is seeking emergency reinstatement of such collections. The public harm caused by the severe disruptions of the Medicaid and CHIP programs that would result from a further lapse in PRA approval are not speculative. The collection of such information are actively used to ensure fiscal integrity and the maintenance and expansion of coverage. Waiting to reinstate the GenICs until the full package has been processed under standard clearance procedures would threaten CMS' essential mission and cause substantial disruption and far-reaching harm to the Medicaid and CHIP programs and the beneficiaries we serve. Our justification for the

emergency reinstatement is attached to the posting at: <https://www.regulations.gov/docket/CMS-2024-0201>.

### Generic Umbrella for Medicaid and CHIP State Plan, Waiver, and Program Submissions

At this time, our collection is made up of the main umbrella (see collection number 1 in the following list) and fifty individual generic collections of information. We are requesting emergency reinstatement of the main umbrella and the generic collections listed below under *Docket Information*. Details such as the collection's requirements and burden estimates can be found in the collection's supporting statement and associated materials (see **ADDRESSES** for instructions for obtaining such documents).

#### Docket Information

1. *Title:* Generic Clearance for Medicaid and CHIP State Plan, Waiver, and Program Submissions.

*Type of Request:* Reinstatement of a previously approved collection.

*CMS ID Number:* CMS-10398.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0201.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0201>.

*For Policy Related Questions Contact:* William N. Parham at 410-786-4669.

2. *Title:* CHIP Annual Report Template System (CARTs).

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #1.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0202.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0202>.

*For Policy Related Questions Contact:* Gigi Raney at 410-786-6117.

3. *Title:* Medicaid Managed Care Data Collection.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #2.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0203.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0203>.

*For Policy Related Questions Contact:* Alexis Gibson at 410-786-2813.

4. *Title:* Medicaid Payment Suspensions.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #5.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0204.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0204>.

*For Policy Related Questions Contact:* Vikki Guarisco at 443-764-4776.

5. *Title:* Cycle IV (AI/AN Round II Outreach & Enrollment Grant Final Report Addendum) and Cycle V (Connecting Kids to Coverage Outreach and Enrollment Semi-Annual and Final).

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #7.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0205.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0205>.

*For Policy Related Questions Contact:* Stephanie Bell at 410-786-0617.

6. *Title:* Application for Section 1915(b)(4) Waiver—Fee For Service Selective Contracting Program.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #9.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0206.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0206>.

*For Policy Related Questions Contact:* Rebecca Burch Mack at 303-844-7355.

7. *Title:* Section 1115 Demonstration and Waiver Application.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #10.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0207.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0207>.

*For Policy Related Questions Contact:* Teresa DeCaro at 202-384-6309.

8. *Title:* MAGI-Based Eligibility Verification Plan.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #11.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0208.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0208>.

*For Policy Related Questions Contact:* Martin Burian at 410-786-3246.

9. *Title:* Medicaid Accountability—Nursing Facility, Outpatient Hospital and Inpatient Hospital Upper Payment Limits.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #13.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0209.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0209>.

*For Policy Related Questions Contact:* Richard Kimball at 410-786-2278.

10. *Title:* Federally-Facilitated Marketplace (FFM) Integration Data Collection Tool.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #16.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0210.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0210>.

*For Policy Related Questions Contact:* Pascale Ghafari at 410-786-0719.

11. *Title:* CHIP State Plan Eligibility.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #17.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0211.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0211>.

*For Policy Related Questions Contact:* Joyce Jordan at 410-786-3413.

12. *Title:* FMAP Claiming State Plan Amendment.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #21.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0212.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0212>.

*For Policy Related Questions Contact:* Robert Lane at 410-786-2015.

13. *Title:* Medicaid Accountability—UPL ICF/IID, Clinic Services, Medicaid Qualified Practitioner Services and Other Inpatient & Outpatient Facility Providers.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #24.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:*

CMS-2024-0213.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0213>.

*For Policy Related Questions Contact:* Richard Kimball at 410-786-2278.

14. *Title:* MAGI Conversion Plan Part 2.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #27.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0214.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0214>.

*For Policy Related Questions Contact:* Martin Burian at 410-786-3246.

15. *Title:* MMIS APD Template NCCI Coding Initiative.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #28.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0215.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0215>.

*For Policy Related Questions Contact:* Wendy Alexander at 410-786-5245.

16. *Title:* Medicaid Cost Sharing.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #29.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0216.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0216>.

*For Policy Related Questions Contact:* Stephanie Bell at 410-786-0617.

17. *Title:* State Reporting Medicaid Payment Suspension.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #30.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0217.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0217>.

*For Policy Related Questions Contact:* Wendy Alexander at 410-786-5245.

18. *Title:* Statewide HCBS Transition Plans.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #31.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:*

CMS-2024-0218.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0218>.

*For Policy Related Questions Contact:* Michele MacKenzie at 410-786-5929.

19. *Title:* Provider-Preventable Conditions under 42 CFR 438.6 and 447.26 and Title 2702 Non-Payment Preprint (Attachment 4.19).

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #32.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0219.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0219>.

*For Policy Related Questions Contact:* Andrew Badaracco at 410-786-4589.

20. *Title:* Opportunity for families of Disabled Children to Purchase Medicaid Coverage for Such Children (DRA 6062).

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #33.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0220.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0220>.

*For Policy Related Questions Contact:* Martin Burian at 410-786-3246.

21. *Title:* Model Application Template and Instructions for State Child Health Plan Under Title XXI of the Social Security Act, State Children's Health Insurance Program.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #34.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0221.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0221>.

*For Policy Related Questions Contact:* Chanelle Parker at 667-290-9798.

22. *Title:* Eligibility and Enrollment Performance Indicators.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS-10398 #35.

*OMB Control Number:* 0938-1148.

*eRulemaking Docket ID Number:* CMS-2024-0222.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0222>.

*For Policy Related Questions Contact:* Vikki Guarisco at 443-764-4776.

23. *Title:* Managed Care Rate Setting Guidance.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #37.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0223.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0223>.

*For Policy Related Questions Contact:* Rebecca Burch Mack at 303–844–7355.

24. *Title:* Section 223 Demonstration Programs to Improve Community Mental Health Services.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #43.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0224.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0224>.

*For Policy Related Questions Contact:* Beverly Boston at 410–786–4186.

25. *Title:* 1915(i) State Plan Home and Community Based Services.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #46.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0225.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0225>.

*For Policy Related Questions Contact:* Kathy Poisal at 410–786–5940.

26. *Title:* Section 223 Demonstration Programs to Improve Community Mental Health Services.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #48.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0226.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0226>.

*For Policy Related Questions Contact:* Beverly Boston at 410–786–4186.

27. *Title:* Community First Choice State Plan.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #50.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0227.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0227>.

*For Policy Related Questions Contact:* Adrienne Delozier at 410–786–0278.

28. *Title:* Fast Track Federal Review Process for Section 1115 Medicaid and CHIP Demonstration Extensions.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #51.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0228.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0228>.

*For Policy Related Questions Contact:* Teresa DeCaro at 202–384–6309.

29. *Title:* Delivery System and Provider Payment Initiatives Under Medicaid Managed Care Products.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #52.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0229.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0229>.

*For Policy Related Questions Contact:* John Giles at 667–290–8626.

30. *Title:* Section 1115 Substance Use Disorder (SUD) Demonstration: Guide for Developing Implementation Plan Protocols.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #53.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0230.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0230>.

*For Policy Related Questions Contact:* Teresa DeCaro at 202–384–6309.

31. *Title:* Electronic Visit Verification (EVV) Good Faith Effort Exemption Requests.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #54.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0231.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0231>.

*For Policy Related Questions Contact:* Ryan Shannahan at 410–786–0295.

32. *Title:* Limit on Federal Financial Participation for Durable Medical Equipment in Medicaid.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #55.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0232.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0232>.

*For Policy Related Questions Contact:* Richard Kimball at 410–786–2278.

33. *Title:* Section 1115 Demonstration: Budget Neutrality Workbook.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #56.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0233.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0233>.

*For Policy Related Questions Contact:* Teresa DeCaro at 202–384–6309.

34. *Title:* Section 1115 Substance Use Disorder (SUD) Demonstration: Monitoring Reports Documents and Templates.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #57.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0234.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0234>.

*For Policy Related Questions Contact:* Teresa DeCaro at 202–384–6309.

35. *Title:* Medicaid Section 1115 Eligibility and Coverage Demonstration Implementation Plan and Monitoring Reports Documents and Templates.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #58.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0235.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0235>.

*For Policy Related Questions Contact:* Teresa DeCaro at 202–384–6309.

36. *Title:* Medicaid Section 1115 Severe Mental Illness and Children with Serious Emotional Disturbance Demonstrations.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #59.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:*

CMS–2024–0236.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0236>.

*For Policy Related Questions Contact:* Teresa DeCaro at 202–384–6309.

37. *Title:* Medicaid Disaster Relief for the COVID–19 National Emergency State Plan Amendment Template and Instructions.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #61.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0237.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0237>.

*For Policy Related Questions Contact:* Anne Marie Costello at 410–786–5075.

38. *Title:* Data Collection for Section 1003 of the SUPPORT Act.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #62.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0238.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0238>.

*For Policy Related Questions Contact:* Melanie Brown at 410–786–1095.

39. *Title:* 1932(a) State Plan Amendment Template.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #63.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0239.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0239>.

*For Policy Related Questions Contact:* Amy Gentile at 410–786–3499.

40. *Title:* Federal Meta-Analysis Support: Section 1115 Substance Use Disorder Demonstrations.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #64.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0240.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0240>.

*For Policy Related Questions Contact:* Danielle Daly at 410–786–0897.

41. *Title:* Medicaid and CHIP COVID 19 Public Health Emergency Unwinding Reports.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #66.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0241.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0241>.

*For Policy Related Questions Contact:* Jessica Stephens at 410–786–3341.

42. *Title:* Section 1006(b) of the SUPPORT Act: Medicaid Assisted Treatment (MAT).

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #68.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0242.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0242>.

*For Policy Related Questions Contact:* Kirsten Jensen at 410–786–8146.

43. *Title:* Reporting Requirements for Additional Funding for Medicaid HCBS During the COVID–19 Emergency.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #69.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0243.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0243>.

*For Policy Related Questions Contact:* Stephanie Bell at 410–786–0617.

44. *Title:* Reporting Requirements for State Planning Grants for Qualifying Community Based Mobile Crisis Intervention Services During the COVID–19 Emergency.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #71.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0244.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0244>.

*For Policy Related Questions Contact:* Effie George at 410–786–8639.

45. *Title:* Supplemental Payment Reporting under the Consolidated Appropriations Act, 2021.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #73.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0245.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0245>.

*For Policy Related Questions Contact:* Richard Kimball at 410–786–2278.

46. *Title:* Coverage of Routine Patient Cost for Items & Services in Qualifying Clinical Trials.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #74.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0246.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0246>.

*For Policy Related Questions Contact:* Myla Adams at 410–786–8107.

47. *Title:* ARP 1135 State Plan Amendment.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #75.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0247.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0247>.

*For Policy Related Questions Contact:* Kirsten Jensen at 410–786–8146.

48. *Title:* Expressions of Interest in the Improving Maternal Health by Reducing Low-Risk Cesarean Delivery Affinity Group.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #76.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0248.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0248>.

*For Policy Related Questions Contact:* Richard Kimball at 410–786–2278.

49. *Title:* COVID–19 Risk Corridor Reconciliation Reporting Template.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #79.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS–2024–0249.

*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0249>.

*For Policy Related Questions Contact:* Elizabeth Jones at 410–786–7111.

50. *Title:* Improving Quality of Care and Outcomes Data for Pregnant Medicaid Beneficiaries and Newborn Infants through Linkage and Evaluation of VR, BC, DC, and TAF.

*Type of Request:* Reinstatement of a previously approved information collection.

*CMS ID Number:* CMS–10398 #81.

*OMB Control Number:* 0938–1148.

*eRulemaking Docket ID Number:* CMS-2024-0250.  
*Docket Web Address:* <https://www.regulations.gov/docket/CMS-2024-0250>.

*For Policy Related Questions Contact:* Ali Fokar at 410-786-0020.

**William N. Parham, III,**

*Director, Division of Information Collections and Regulatory Impacts, Office of Strategic Operations and Regulatory Affairs.*

[FR Doc. 2024-15185 Filed 7-10-24; 8:45 am]

**BILLING CODE 4120-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Intergovernmental Reference Guide (IRG) (Office of Management and Budget No.: 0970-0209)**

**AGENCY:** Office of Child Support Services, Administration for Children and Families, U.S. Department of Health and Human Services.

**ACTION:** Request for public comments.

**SUMMARY:** The Administration for Children and Families (ACF), Office of Child Support Services (OCSS), is requesting the Office of Management and Budget (OMB) to approve the Intergovernmental Reference Guide

(IRG), for an additional three years. The IRG contains State and Tribal child support information that helps child support agencies (CSAs) administer their respective programs. Minor updates are proposed, as described below. The current OMB approval (OMB #: 0970-0209) expires on February 28, 2025.

**DATES:** *Comments due* September 9, 2024. In compliance with the requirements of the Paperwork Reduction Act of 1995, the 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](mailto:infocollection@acf.hhs.gov). Identify all requests by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**

*Description:* The IRG is a centralized and automated repository of State and Tribal profiles that contains high-level descriptions of each CSA program. These profiles provide State, Tribal, and foreign country CSAs with an effective and efficient method for updating and accessing information needed to process intergovernmental child support cases.

Revisions are proposed as a result of feedback from respondents suggesting changes, recommendations from the program team, or from the program team workgroup of interested partners. The

workgroup is engaged to evaluate the efficacy of the instruments. Specifically, the following changes are proposed:

- Minor edits to change Office of Child Support Enforcement (OCSE) to Office of Child Support Services (OCSS).
  - Edits to the State profile based on recommendations that were received but not implemented in 2022 when the current version of the profile went through the OMB approval process. OCSS has an overview of those recommendations and OCSS responses available upon request.
  - Edits to clarify the State profile questions to make it easier for respondents to understand and complete them. Some of these edits were based on the comments referenced in the prior bullet and others based on other feedback from program staff and workgroup members.
  - Addition of questions in the State profile instrument that are designed to help States establish health care coverage and manage the financial aspects of child support services. The new questions pertain to policies and procedures associated with new hire reporting, income withholdings, lump sum payments, medical support, and State electronic funds transfers. The addition of these questions slightly increased the estimated time per response from .3 hours to .5 hours.
- Respondents:* State and Tribal CSAs.

**ANNUAL BURDEN ESTIMATES**

Information collection instrument	Total number of annual respondents	Number of annual responses per respondent	Average annual burden hour per response	Annual burden hours
IRG: State Profile Guide (states and territories) .....	54	18	0.5	486
IRG: Tribal Profile Guide .....	62	18	0.3	335

*Estimated Total Annual Burden Hours:* 821.

*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:* 42 U.S.C. 652(a)(7); 42 U.S.C. 666(f); 45 CFR 301.1; 45 CFR 303.7, and 45 CFR 309.120.

**Mary C. Jones,**

*ACF/OPRE Certifying Officer.*

[FR Doc. 2024-15277 Filed 7-10-24; 8:45 am]

**BILLING CODE 4184-41-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. FDA-2023-E-3084]

**Determination of Regulatory Review Period for Purposes of Patent Extension; SPEVIGO**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA or the Agency) has determined the regulatory review period for SPEVIGO and is publishing this notice of that determination as required