

comments received from the public and other agencies.

During the comment period for this proposal, a copy of the proposed PRA OMB submission, including the draft reporting form and instructions, supporting statement (which contains more detail about the information collection and burden estimates than this notice), and other documentation, will be made available on the Board's public website at <https://www.federalreserve.gov/apps/reportingforms/home/review> or may be requested from the agency clearance officer, whose name appears above. On the page displayed at the link above, you can find the supporting information by referencing the collection identifier, FR 3052. Final versions of these documents will be made available at <https://www.reginfo.gov/public/do/PRAMain>, if approved.

#### Request for Comment on Information Collection Proposal

The Board invites public comment on the following information collection, which is being reviewed under authority delegated by the OMB under the PRA. Comments are invited on the following:

a. Whether the proposed collection of information is necessary for the proper performance of the Board's functions, including whether the information has practical utility;

b. The accuracy of the Board's estimate of the burden of the proposed information collection, including the validity of the methodology and assumptions used;

c. Ways to enhance the quality, utility, and clarity of the information to be collected;

d. Ways to minimize the burden of information collection on respondents, including through the use of automated collection techniques or other forms of information technology; and

e. Estimates of capital or startup costs and costs of operation, maintenance, and purchase of services to provide information.

At the end of the comment period, the comments and recommendations received will be analyzed to determine the extent to which the Board should modify the proposal.

#### Proposal Under OMB Delegated Authority To Extend for Three Years, Without Revision, the Following Information Collection

*Collection title:* Supervisory and Regulatory Survey.

*Collection identifier:* FR 3052.

*OMB control number:* 7100-0322.

*General description of collection:* This survey collects information from financial institutions specifically tailored to the Federal Reserve's supervisory, regulatory, and operational responsibilities. The frequency and content of the questions may depend on economic, regulatory, supervisory, and legislative developments. The surveys are conducted on a voluntary basis.

*Frequency:* On Occasion.

*Respondents:* Respondents may include bank holding companies, state member banks, savings and loan holding companies, intermediate holding companies, U.S. branches and agencies of foreign banking organizations (FBOs), Edge Act and agreement corporations, non-bank financial companies that the Financial Stability Oversight Council has determined should be supervised by the Board, or the combined domestic operations of FBOs.

*Total estimated number of respondents:* 5,000.

*Estimated average hours per response:* 0.5.

*Total estimated annual burden hours:* 60,000.

Board of Governors of the Federal Reserve System, September 27, 2024.

**Benjamin W. McDonough,**

*Deputy Secretary and Ombuds of the Board.*

[FR Doc. 2024-22634 Filed 10-1-24; 8:45 am]

**BILLING CODE 6210-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Healthcare Research and Quality

#### Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Agency for Healthcare Research and Quality, HHS.

**ACTION:** Notice.

**SUMMARY:** This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve extension of the currently approved information collection project: *Medical Office Survey on Patient Safety Culture Database*. This proposed information collection was previously published in the **Federal Register** on July 31, 2024 and allowed 60 days for public comment. AHRQ received no substantive comments from members of the public. The purpose of this notice is to allow an additional 30 days for public comment.

**DATES:** Comments on this notice must be received by November 1, 2024.

**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](http://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. Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

**FOR FURTHER INFORMATION CONTACT:** Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427-1477, or by email [REPORTSCLEARANCEOFFICER@ahrq.hhs.gov](mailto:REPORTSCLEARANCEOFFICER@ahrq.hhs.gov).

#### SUPPLEMENTARY INFORMATION:

##### Proposed Project

##### *Medical Office Survey on Patient Safety Culture Database*

In 1999, the Institute of Medicine called for health care organizations to develop a "culture of safety" such that their workforce and processes focus on improving the reliability and safety of care for patients (IOM, 1999; *To Err is Human: Building a Safer Health System*). To respond to the need for tools to assess patient safety culture in health care, AHRQ developed and pilot tested the Surveys on Patient Safety Culture® (SOPs®) Medical Office Survey with OMB approval (OMB NO. 0935-0131; Approved July 5, 2007).

The survey is designed to enable medical offices to assess provider and staff perspectives about patient safety issues, medical error, and error reporting. The survey includes 38 items that measure 10 composites of patient safety culture. In addition to the composite items, 14 items measure staff perceptions of how often medical offices have problems exchanging information with other settings as well as other patient safety and quality issues. AHRQ made the survey publicly available along with a Survey User's Guide and other toolkit materials in January 2009, on the AHRQ website.

The AHRQ SOPs Medical Office Database consists of data from the AHRQ Medical Office Survey on Patient Safety Culture and may include reportable, non-required supplemental items. Medical offices in the U.S. can voluntarily submit data from the survey to AHRQ, through its contractor, Westat. The SOPs Medical Office Database (OMB NO. 0935-0196, last approved on September 24, 2021) was developed by AHRQ in 2011 in response to requests

from medical offices interested in tracking their own survey results. Those organizations submitting data receive a feedback report, as well as a report of the aggregated, de-identified findings of the other medical offices submitting data. These reports are used to assist medical office staff in their efforts to improve patient safety culture in their organizations.

The goal of the Medical Office Survey on Patient Safety Culture Database is to promote improvements in the quality and safety of healthcare in medical office settings. The survey, toolkit materials, and database results are all made publicly available on AHRQ’s website. Technical assistance is provided by AHRQ through its contractor at no charge to medical offices, to facilitate the use of these materials for medical office patient safety and quality improvement.

This database:

- (1) Presents results from medical offices that voluntarily submit their data,
- (2) Provides data to medical offices to facilitate internal assessment and learning in the patient safety improvement process, and
- (3) Provides supplemental information to help medical offices identify their strengths and areas with potential for improvement in patient safety culture.

To achieve the goal of this project, the following activities and data collections will be implemented:

- (1) Eligibility and Registration Form—The medical office point-of-contact (POC) completes several data submission steps and forms, beginning with the completion of an online Eligibility and Registration Form. The purpose of this form is to collect basic demographic information about the

medical office and initiate the registration process.

(2) Medical Office Site Information Form—The purpose of the site information form, also completed by the medical office POC, is to collect background characteristics of the medical office. This information will be used to analyze data collected with SOPS Medical Office Survey.

(3) Data Use Agreement—The purpose of the data use agreement, completed by the medical office POC, is to state how data submitted by medical offices will be used and provides privacy assurances.

(4) Data File(s) Submission—POCs upload their data file(s), using the medical office data file specifications, to ensure that users submit their data in a standardized way (e.g., variable names, order, coding, formatting). The number of submissions to the database is likely to vary from submission period to submission period because medical offices do not administer the survey and submit data every year. Data submission is typically handled by one POC who is either an office manager or a survey vendor who contracts with a medical office to collect their data. POCs submit data on behalf of 30 medical offices, on average, because many medical offices are part of a health system that includes many medical office sites, or the POC is a vendor that is submitting data for multiple medical offices.

This study is being conducted by AHRQ through its contractor, Westat, pursuant to AHRQ’s statutory authority to conduct and support research on healthcare and on systems for the delivery of such care, including activities with respect to: the quality, effectiveness, efficiency, appropriateness and value of healthcare services; quality measurement and

improvement; and database development. 42 U.S.C. 299a(a)(1), (2), and (8).

**Method of Collection**

All information collection for the SOPS Medical Office Database is done electronically, except the Data Use Agreement (DUA) that medical offices print, sign and return (either via fax, by scanning and emailing or uploading to a secure website, or by mailing back). Registration, submission of medical office information, and data upload is handled online through a secure website. Customized feedback reports are delivered electronically (the person submitting the data will enter a username and password for access to a secure website from which to download their reports).

**Estimated Annual Respondent Burden**

Exhibit 1 shows the estimated annualized burden hours for the respondents’ time to participate in the database. An estimated 85 POCs, each representing an average of 30 individual medical offices each, will complete the database submission steps and forms. Each POC will submit the following:

- 1. Eligibility and Registration Form—Estimated to take 3 minutes to complete.
- 2. Medical Office Site Information Form—Estimated to take 5 minutes to complete.
- 3. Data Use Agreement—Estimated to take 3 minutes to complete.
- 4. Survey Data File(s) Submission—Estimated to take 1 hour to complete.

The total burden is estimated to be 308 hours.

Exhibit 2 shows the estimated annualized cost burden based on the respondents’ time to submit their data. The cost burden is estimated to be \$19,891 annually.

**EXHIBIT 1—ESTIMATED ANNUALIZED BURDEN HOURS**

| Form name                                     | Number of respondents | Number of responses per POC | Hours per response | Total burden hours |
|---|-----------------------|-----------------------------|--------------------|--------------------|
| 1. Eligibility/Registration Form .....        | 85                    | 1                           | 3/60               | 5                  |
| 2. Medical Office Site Information Form ..... | 85                    | 30                          | 5/60               | 213                |
| 3. Data Use Agreement .....                   | 85                    | 1                           | 3/60               | 5                  |
| 4. Data File(s) Submission .....              | 85                    | 1                           | 1                  | 85                 |
| Total .....                                   | NA                    | NA                          | NA                 | 308                |

**EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN**

| Form name                                     | Total burden hours | Average hourly wage rate * | Total cost burden |
|---|--------------------|----------------------------|-------------------|
| 1. Eligibility/Registration Form .....        | 5                  | \$64.58                    | \$323             |
| 2. Medical Office Site Information Form ..... | 213                | 64.58                      | 13,756            |
| 3. Data Use Agreement .....                   | 5                  | 64.58                      | 323               |

## EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN—Continued

| Form name                        | Total burden hours | Average hourly wage rate * | Total cost burden |
|----------------------------------|--------------------|----------------------------|-------------------|
| 4. Data File(s) Submission ..... | 85                 | 64.58                      | 5,489             |
| Total .....                      | 308                | NA                         | 19,891            |

\* Mean hourly wage rate of \$64.58 for Medical and Health Services Managers (SOC code 11–9111) was obtained from the May 2023 National Industry-Specific Occupational Employment and Wage Estimates, NAICS 621100—Offices of Physicians located at [https://www.bls.gov/oes/current/naics4\\_621100.htm](https://www.bls.gov/oes/current/naics4_621100.htm).

### 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: September 26, 2024.

**Marquita Cullom,**

*Associate Director.*

[FR Doc. 2024–22578 Filed 10–1–24; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10844 and CMS–10157]

#### Agency Information Collection Activities: Submission for OMB Review; Comment Request

**AGENCY:** Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** The Centers for Medicare & Medicaid Services (CMS) is announcing

an opportunity for the public to comment on CMS’ intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency’s functions, the accuracy of the estimated burden, 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.

**DATES:** Comments on the collection(s) of information must be received by the OMB desk officer by November 1, 2024.

**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](http://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.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, please access the CMS PRA website by copying and pasting the following web address into your web browser: <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing>

**FOR FURTHER INFORMATION CONTACT:** William Parham at (410) 786–4669.

**SUPPLEMENTARY INFORMATION:** Under the Paperwork Reduction Act of 1995 (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. The term “collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires federal agencies to publish a 30-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice that summarizes the following proposed collection(s) of information for public comment:

1. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Small Biotech Exception and Biosimilar Delay Information Collection Request (ICR) for Initial Price Applicability Year 2027; *Use:* Under the authority in sections 11001 and 11002 of the Inflation Reduction Act of 2022 (Pub. L. 117–169), the Centers for Medicare & Medicaid Services (CMS) is implementing the Medicare Drug Price Negotiation Program, codified in sections 1191 through 1198 of the Social Security Act (the Act). The Information Collection Request Forms for the Small Biotech Exception and Biosimilar Delay Information Collection Request for Initial Price Applicability Year 2027 must be submitted to CMS before CMS establishes the selected drug list for initial price applicability year 2027.

*Small Biotech Exception:* In accordance with section 1192(d)(2) of the Act, the term “negotiation-eligible drug” excludes, with respect to the initial price applicability years 2026, 2027, and 2028, a qualifying single source drug that meets the requirements for the exception for small biotech drugs (the “Small Biotech Exception,” or “SBE”).