

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 N. Parham at (410) 786-4669.

SUPPLEMENTARY INFORMATION:

Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

CMS-10320 Health Care Reform Insurance Web Portal Requirements 45 CFR Part 159

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. 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 requires Federal agencies to publish a 60-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.

Information Collections

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Health Care Reform Insurance Web Portal Requirements 45 CFR part 159; *Use:* In accordance with sections 1103 and 10102 of The Patient Protection and Affordability Care Act, Public Law 111-148 (2010) (Affordable Care Act) the U.S. Department of Health and Human Services (HHS) is tasked with developing and implementing an internet website portal to assist consumers with identifying affordable and comprehensive health insurance coverage options that are available in their State. Consistent with minimizing burden and providing consistency in data collection, the Centers for Medicare & Medicaid Services (CMS) updates its *HealthCare.gov* collection requirements

as regulatory developments occur. There have been no developments since the last approved collection that require changes to the Paperwork Reduction Act (PRA) package. Therefore, we are submitting this request as an extension of the currently approved information collection. *Form Number:* CMS-10320 (OMB control number 0938-1086); *Frequency:* Occasionally; *Affected Public:* State, Local, and Tribal Governments; *Number of Respondents:* 814; *Number of Responses:* 814; *Total Annual Hours:* 50,653. (For questions regarding this collection contact Kimberlee Heckstall at 410-786-1647.)

William N. Parham, III,

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

[FR Doc. 2024-27052 Filed 11-19-24; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for Office of Management and Budget (OMB) Review; Sexual Risk Avoidance Education Program Performance Analysis Study—Extension (OMB #0970-0536).

AGENCY: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office of Planning, Research, and Evaluation (OPRE) and the Family and Youth Services Bureau in the Administration for Children and Families (ACF) request an extension without changes of a currently approved information collection activity as part of the Sexual Risk Avoidance Education (SRAE) Program Performance Analysis Study (PAS). The goal of the study is to collect, analyze, and report on performance measures data for the SRAE program (OMB Control No. 0970-0536; expiration date January 31, 2025). The purpose of the requested extension is to continue the ongoing data collection and submission of the performance measures by SRAE grant recipients. Minor updates were identified to incorporate into the OMB-approved versions of instruments.

DATES: *Comments due* December 20, 2024. OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of

having its full effect if OMB receives it within 30 days of publication.

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. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function. You can also obtain copies of the proposed collection of information by emailing OPREinfocollection@acf.hhs.gov. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The purpose of the SRAE program is to educate youth on how to voluntarily refrain from nonmarital sexual activity and prevent other youth risk behaviors. Data will continue to be used to determine if the SRAE grant recipients are meeting performance benchmarks related to their program's mission and priorities.

The SRAE PAS collects performance measures data from SRAE grant recipients, program providers, and participants. The data include information on program structure, cost, and support for implementation; program attendance, reach, and dosage; the characteristics of youth involved in programming; youth sexual and other risky behavior prior to program participation; and youth sexual and other risky behavior intentions at program exit. The performance measures help the ACF program office and grant recipients to monitor and report on progress in implementing SRAE programs and inform technical assistance.

Some of the performance measures data come from youth participants through surveys SRAE grant recipients administer at program entry and exit. There are separate versions of the entry and exit surveys for middle school youth, which exclude some of the more sensitive items that are included in the versions for high school and older youth. There is also a shorter version of the entry survey for programs conducting impact studies, to reduce the burden on participants in those programs who are likely responding to other surveys as part of their impact study. Although there was a version of the exit survey for programs conducting impact studies in the past, it was removed through the previous OMB request, and youth in these programs now complete the same version of the exit survey as other youth.

ACF is currently working on future revisions to this information collection, which will be submitted to OMB for review and approval in 2025. Notices inviting public comment on those revisions will accompany that request, but comments received in response to

this notice could also inform those revisions. Through this request process minor discrepancies were noted between the OMB-approved instruments and those currently in use. These minor errors were fixed in the versions included with the request to OMB.

Respondents: General Departmental (GDSRAE), State (SSRAE), and Competitive (CSRAE) grant recipients, their subrecipients, and program participants.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents (total over request period)	Number of responses per respondent (total over request period)	Avg. burden per response (in hours)	Total/ annual burden (in hours)
(1) Participant Entry Survey				
GDSRAE participants	126,130	1	0.1333	16,813
SSRAE participants	317,633	1	0.1333	42,340
CSRAE participants	20,136	1	0.1333	2,684
(2) Participant Exit Survey				
GDSRAE participants	100,904	1	0.1667	16,821
SSRAE participants	254,106	1	0.1667	42,360
CSRAE participants	16,109	1	0.1667	2,685
(3) Performance reporting data entry form: grant recipients				
GDSRAE grant recipients	119	2	16	3,808
SSRAE grant recipients	39	2	16	1,248
CSRAE grant recipients	34	2	16	1,088
(4) Performance reporting data entry form: subrecipients				
GDSRAE subrecipients	252	2	13	6,552
SSRAE subrecipients	426	2	13	11,076
CSRAE subrecipients	63	2	13	1,638

Estimated Total Annual Burden Hours: 149,113.
Authority: 42 U.S.C. 1310.

Mary C. Jones,
ACF/OPRE Certifying Officer.
[FR Doc. 2024–27053 Filed 11–19–24; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
[Docket No. FDA–2024–P–4163]

Determination That NOXAFIL (Posaconazole) Delayed-Release Tablets, 100 Grams Was Not Withdrawn From Sale for Reasons of Safety or Effectiveness; Correction

AGENCY: Food and Drug Administration, HHS.
ACTION: Notice; correction.

SUMMARY: The Food and Drug Administration (FDA) is correcting a notice that appeared in the **Federal Register** on October 16, 2024. The

document announced that NOXAFIL (posaconazole) delayed-release tablets, 100 grams (g), was not withdrawn from sale for reasons of safety or effectiveness. The document incorrectly listed the dosage strength as 100 g. The correct strength is 100 milligrams (mg). This notice corrects that error.
FOR FURTHER INFORMATION CONTACT: Awo Archampong-Gray, Center for Drug Evaluation and Research, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 51, Rm. 6243, Silver Spring, MD 20993–0002, 301–796–0110, *Awo.Archampong-Gray@fda.hhs.gov*.

SUPPLEMENTARY INFORMATION: In FR Doc. 2024–23811, published in the **Federal Register** of Wednesday, October 16, 2024 (89 FR 83504), appearing on pages 83504 and 83505, the following corrections are made:

1. On page 83504, in the second column, the title of the document is corrected to read “Determination That NOXAFIL (Posaconazole) Delayed-Release Tablets, 100 Milligrams, Was Not Withdrawn From Sale for Reasons of Safety or Effectiveness.”

2. On page 83504, in the third column, in the **SUMMARY**, in the first paragraph, “NOXAFIL (posaconazole) delayed-release tablets, 100 grams (g),” is corrected to read “NOXAFIL (posaconazole) delayed-release tablets, 100 milligrams (mg).”

3. On page 83505, in the first and second columns, all uses of “100 g” are corrected to read “100 mg”.

Dated: November 7, 2024.
Kimberlee Trzeciak,
Deputy Commissioner for Policy, Legislation, and International Affairs.
[FR Doc. 2024–27082 Filed 11–19–24; 8:45 am]
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