1. Principal Deputy, Chief Operating Officer;
2. Deputy Director, Field Operations;
3. Deputy Director for Labor Policy and Communications;
4. Director, Procurement and Operational Support;
5. General Counsel;
6. Associate Deputy Director for Field Operations, National;
7. Associate Deputy Director for Field Operations, Regional;
8. Director, Human Resources; and
9. Director, Budget.

No individual who is serving in an office listed in this order in an acting capacity, by virtue of so serving, shall be delegated the functions and duties of the Director.

Dated: December 4, 2024.

Gregory Goldstein,

Chief Operating Officer Performing the Duties of the Director.

[FR Doc. 2024–28847 Filed 12–6–24; 8:45 am]

BILLING CODE 6732–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Supplemental Evidence and Data Request on Medical Care for Adults With Down Syndrome

AGENCY: Agency for Healthcare Research and Quality (AHRQ), HHS.

ACTION: Request for supplemental evidence and data submission.

SUMMARY: The Agency for Healthcare Research and Quality (AHRQ) is seeking scientific information submissions from the public. Scientific information is being solicited to inform our review on *Medical Care for Adults with Down Syndrome,* which is currently being conducted by the AHRQ's Evidence-based Practice Centers (EPC) Program. Access to published and unpublished pertinent scientific information will improve the quality of this review.

DATES: *Submission Deadline* on or before January 8, 2025.

ADDRESSES:

Email submissions: epc@ahrq.hhs.gov.

Print submissions:

Mailing Address: Center for Evidence and Practice Improvement, Agency for Healthcare Research and Quality, ATTN: EPC SEADs Coordinator, 5600 Fishers Lane Mail Stop 06E53A, Rockville, MD 20857

Shipping Address (FedEx, UPS, etc.): Center for Evidence and Practice Improvement, Agency for Healthcare Research and Quality, ATTN: EPC SEADs Coordinator, 5600 Fishers Lane, Mail Stop 06E77D, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: Kelly Carper, telephone: 301–427–1656 or email: *epc@ahrq.hhs.gov.*

SUPPLEMENTARY INFORMATION: The Agency for Healthcare Research and Quality has commissioned the Evidence-based Practice Centers (EPC) Program to complete a review of the evidence for *Medical Care for Adults with Down Syndrome.* AHRQ is conducting this review pursuant to section 902 of the Public Health Service Act, 42 U.S.C. 299a.

The EPC Program is dedicated to identifying as many studies as possible that are relevant to the questions for each of its reviews. In order to do so, we are supplementing the usual manual and electronic database searches of the literature by requesting information from the public (*e.g.,* details of studies conducted). We are looking for studies that report on *Medical Care for Adults with Down Syndrome.* The entire research protocol is available online at: *https://effectivehealthcare.ahrq.gov/products/care-adults-down-syndrome/protocol.*

This is to notify the public that the EPC Program would find the following information on *Medical Care for Adults with Down Syndrome* helpful:

- A list of completed studies that your organization has sponsored for this topic. In the list, please *indicate whether results are available on ClinicalTrials.gov along with the ClinicalTrials.gov trial number.*
- *For completed studies that do not have results on ClinicalTrials.gov,* a summary, including the following elements, if relevant: study number, study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, primary and secondary outcomes, baseline characteristics, number of patients screened/eligible/enrolled/lost to follow-up/withdrawn/analyzed, effectiveness/efficacy, and safety results.
- *A list of ongoing studies that your organization has sponsored for this topic.* In the list, please provide the ClinicalTrials.gov trial number or, if the trial is not registered, the protocol for the study including, if relevant, a study number, the study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, and primary and secondary outcomes.
- Description of whether the above studies constitute *ALL Phase II and above clinical trials* sponsored by your organization for this topic and an index outlining the relevant information in each submitted file.

Your contribution is very beneficial to the Program. Materials submitted must be publicly available or able to be made public. Materials that are considered confidential; marketing materials; study types not included in the review; or information on topics not included in the review cannot be used by the EPC Program. This is a voluntary request for information, and all costs for complying with this request must be borne by the submitter.

The draft of this review will be posted on AHRQ's EPC Program website and available for public comment for a period of 4 weeks. If you would like to be notified when the draft is posted, please sign up for the email list at: *https://effectivehealthcare.ahrq.gov/email-updates.*

The review will answer the following questions. This information is provided as background. AHRQ is not requesting that the public provide answers to these questions.

Key Questions (KQ)

1. What are the benefits, harms, and considerations of screening and diagnostic interventions, for co-occurring medical and behavioral health conditions in adults with Down syndrome?

2. What are the benefits and harms, and considerations of interventions to treat co-occurring medical and behavioral health conditions specifically in adults with Down syndrome?

Contextual Questions (CQ)

1. What conditions occur at an increased or decreased prevalence in adults with Down syndrome compared to the general adult population. How does prevalence vary by age/decade of age, gender, setting (rural), and race/ethnicity?

2. How do clinical symptoms and the presentation of common co-occurring behavioral/mental health conditions (*e.g.,* anxiety and depression) differ among adults with Down syndrome compared to their presentation in the general adult population?

PICOTS (POPULATIONS, INTERVENTIONS, COMPARATORS, OUTCOMES, TIMING, AND SETTING)

PICOTS	KQ1	KQ2
Population	Adults 18+ years of age with Down syndrome. *Subgroups:* demographics (age, race, ethnicity, gender), geography (rural and urban), socioeconomic status.	Adults 18+ years of age with Down syndrome *Subgroups:* demographics (age, race, ethnicity, gender), geography (rural and urban), socioeconomic status.
Intervention	Screening/diagnostic tests for co-occurring medical conditions in adults with Down syndrome.	Treatment interventions for co-occurring medical conditions in adults with Down syndrome.
Comparator	Alternative test for screening/diagnosis or no screening.	For all conditions, compared with usual care or alternative intervention for treatment.
Outcome	*Benefits:* accurate diagnosis, time to diagnosis or intervention/treatment. Health and quality of life outcomes. *Harms:* adverse events related to screening/diagnosis (mortality, medical trauma, unnecessary testing, etc.).	*Intermediate outcomes:* Treatment adherence. Lab values. Healthcare utilization. *Final outcomes:* Change in standardized symptom measures. Morbidity/mortality. Quality of life. Functional outcomes (*e.g.,* activities of daily living, assisted living/nursing home status). Caregiver or family outcomes (including caregiver health and quality of life). *Harm outcomes:* Adverse treatment effects.
Timing	All duration and follow up.	All duration and follow up.
Setting	US and non-US settings. All healthcare settings (*e.g.*, primary care, specialty care, specialized clinics, etc.)	US and non-US settings. All healthcare settings (*e.g.*, primary care, specialty care, specialized clinics, etc.).

Abbreviations: KQ = key question.

Dated: December 3, 2024.

Marquita Cullom,

Associate Director.

[FR Doc. 2024–28830 Filed 12–6–24; 8:45 am]

BILLING CODE 4160–90–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–319, CMS–2088–17, CMS–224–14 and CMS–R–297/CMS–L564]

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 January 8, 2025.

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. 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:* Reinstatement without change of a previously approved collection; *Use:* Title XIX and title XXI State agencies are required to submit the MEQC pilot planning document in accordance with § 431.814(b), and the MEQC case level and CAP reports based on pilot findings in accordance with §§ 431.816 and 431.820, respectively.