DEPARTMENT OF HEALTH AND
HUMAN SERVICES

Centers for Medicare & Medicaid
Services

[Document Identifier: CMS–855R, CMS–
10394, CMS–10371, CMS–10472 and CMS–
10494]

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

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 reassignment 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 any of the
following subjects: (1) The necessity and
utility of the proposed information
collection for the proper performance of
the agency’s functions; (2) the accuracy
of the estimated burden; (3) ways to
enhance the quality, utility, and clarity
of the information to be collected; and
(4) 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 May 20, 2015.

ADDRESSES: When commenting on the
proposed information collections,
please reference the document identifier
or OMB control number. To be assured
consideration, comments and
recommendations must be received by
the OMB desk officer via one of the
following transmissions: OMB, Office of
Information and Regulatory Affairs,
Attention: CMS Desk Officer, Fax
Number: (202) 395–5806 OR Email: 
OIRA_submission@omb.eop.gov.

To obtain copies of a supporting
statement and any related forms for the
proposed collection(s) summarized in
this notice, you may make your request
using one of following:

1. Access CMS’ Web site address at
http://www.cms.hhs.gov/Paperwork
ReductionActof1995.

2. Email your request, including your
address, phone number, OMB number,
and CMS document identifier, to
Paperwork@cms.hhs.gov.

3. Call the Reports Clearance Office at
(410) 786–1326.

FOR FURTHER INFORMATION CONTACT:
Reports Clearance Office at (410) 786–
1326.

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 reassignment 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 Collection

1. Type of Information Collection
Request: Extension of a currently
approved collection; Title of
Information Collection: Medicaid State
Plan Base Plan Pages; Use: State
Medicaid agencies complete the plan
pages while we review the information
to determine if the state has met all of
the requirements of the provisions the
states choose to implement. If the
requirements are met, we will approve
the amendments to the state’s Medicaid
plan giving the state the authority to
implement the flexibilities. For a state to
receive Medicaid Title XIX funding,
there must be an approved Title XIX
state plan. Form Number: CMS–179
(OMB control number 0938–0103);
Frequency: Occasionally; Affected
Public: State, Local, and Tribal
Governments; Number of Respondents:
56; Total Annual Responses: 1,120;
Total Annual Hours: 22,400. (For policy
questions regarding this collection
contact Annette Pearson at 410–786–
6958.)

Dated: April 15, 2015.

William N. Parham, III.
Director, Paperwork Reduction Staff, Office
of Strategic Operations and Regulatory
Affairs.

[FR Doc. 2015–09008 Filed 4–17–15; 8:45 am]
BILLING CODE 4120–01–P

CMS–179 State Plan Under Title XIX
of the Social Security Act (Base Plan
Pages, Attachments, Supplements to
Attachments)

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 reassignment 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 Collection

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Request: Extension of a currently
approved collection; Title of
Information Collection: Medicaid State
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the regarding the organization/group receiving the reassigned benefits and section 3 now collects information on the individual practitioner who is reassigning benefits. No information or data collection within these sections was revised. The sections were merely re-sequenced and re-numbered to maintain sync between online and paper forms. With the exception of this section reversal and adding the word “optional” to sections 4 and 5 (primary practice location and contact person information), there are no other revisions. These revisions offer no new data collection in this revision package. The addition of the optional choice in sections 4 and 5 could potentially reduce the burden to providers who choose not to complete either or both optional sections. Form Number: CMS–855R (OMB control number 0938–1179); Frequency: Occasionally; Affected Public: State, Local, or Tribal Governments, Private sector (For-profit and Not-for-profit institutions); Number of Respondents: 379,619; Total Annual Responses: 379,619; Total Annual Hours: 94,905. (For policy questions regarding this collection contact Kim McPhillips at 410–786–7278).

2. Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Application to Be a Qualified Entity to Receive Medicare Data for Performance Measurement; Use: Section 10332 of the Patient Protection and Affordable Care Act (ACA) requires the Secretary to make standardized extracts of Medicare claims data under parts A, B, and D available to “qualified entities” for the evaluation of the performance of providers of services and suppliers. The statute provides the Secretary with discretion to establish criteria to determine whether an entity is qualified to use claims data to evaluate the performance of providers of services and suppliers. We are proposing at section 42 CFR 401.703 to evaluate an organization’s eligibility across three areas: Organizational and governance capabilities, addition of claims data from other sources (as required in the statute), and data privacy and security. This is the application through which organizations will provide information to CMS to determine whether they will be approved as a qualified entity. Form Number: CMS–10394 (OMB control number: 0938–1144); Frequency: Occasionally; Affected Public: Private sector—Business or other for-profits and Not-for-profit institutions; Number of Respondents: 35; Total Annual Responses: 35; Total Annual Hours: 6,833. (For policy questions regarding this collection contact Kari Gaare at 410–786–8612).

3. Type of Information Collection Request: Revision of a currently approved information collection; Title of Information Collection: Cooperative Agreements to Support Establishment of State-Operated Health Insurance Exchanges; Use: All States (including the 50 States, consortia of States, and the District of Columbia herein referred to as States) had the opportunity under section 1311(b) of the Affordable Care to apply for three types of grants: (1) Planning grants; (2) Early Innovator grants for early development of information technology; and (3) Establishment grants to develop, implement and start-up Marketplaces. As of January 1st, 2015, the Secretary has disbursed over $5.4 billion under this grant program and, as of that date, there were 79 active establishment grants awarded to 28 states. As the State-Based Marketplaces (SBM) and Small Business Health Options Program (SHOP) have matured and moved from the developmental phases to full-operation, the reporting requirements for the states have been modified and streamlined to insure only information necessary to provide effective oversight of their operations by CMS is collected. Given the innovative nature of Exchanges and the statutorily-prescribed relationship between the Secretary and States in their development and operation, it is critical that the Secretary work closely with States to provide necessary guidance and technical assistance to ensure that States can meet the prescribed timelines, federal requirements, and goals of the statute and the grants awarded to them. Form Number: CMS–10371 (OMB control number: 0938–1119); Frequency: Once; Affected Public: State Government agencies, Private sector (Not-for-profit institutions); Number of Respondents: 28; Number of Responses: 48; Total Annual Hours: 31,404. (For policy questions regarding this collection, contact Dena Puskin at (301) 492–4324.)

4. Type of Information Collection Request: Revision of a previously approved information collection; Title of Information Collection: Exchange Functions: Standards for Navigators and Non-Navigator Assistance Personnel; Use: Section 1321(a)(1) of the Affordable Care Act directs and authorizes the Secretary to issue regulations setting standards for meeting the requirements under title I of the Affordable Care Act, with respect to, among other things, the establishment and operation of Exchanges. Pursuant to this authority, regulations have been finalized at 45 CFR 155.215(b)(1) to require Navigators, as well as those non-Navigator personnel to whom 45 CFR 155.215 applies, requires completion of HHS approved training for initial certification and annual recertification prior to providing application and enrollment assistance. The training will include an optional training quality survey providing Navigators and non-Navigator assistance personnel to whom 45 CFR 155.215 applies, an opportunity to provide feedback to CMS regarding the training and any improvements that can be made in the future. Form Number: CMS–10472 (OMB control number. 0938–1220); Frequency: On Occasion; Affected Public: State, Local, or Tribal Governments, Private sector (Not-for-profit institutions), Individuals or Households; Number of Respondents: 5,610; Number of Responses: 5,610; Total Annual Hours: 37,036. (For policy questions regarding this collection, contact Heather Raeburn at 301–492–4224.)

5. Type of Information Collection Request: Revision of a previously approved information collection; Title of Information Collection: Patient Protection and Affordable Care Act; Consumer Assistance Tools and Programs of an Exchange and Certified Application Counselors; Exchange and Insurance Market Standards for 2015; Use: Section 1321(a)(1) of the Affordable Care Act directs and authorizes the Secretary to issue regulations setting standards for meeting the requirements under title I of the Affordable Care Act, with respect to, among other things, the establishment and operation of Exchanges. Pursuant to this authority, regulations establishing the certified application counselor program have been finalized at 45 CFR 155.225. In accordance with 155.225(d)(1) and (7), certified application counselors in all Exchanges are required to be initially certified and recertified on at least an annual basis and successfully complete Exchange-required training. Form Number: CMS–10494 (OMB control number: 0938–1205); Frequency: On Occasion; Affected Public: State, Local, or Tribal Governments, Private sector (Not-for-profit institutions), Individuals or Households; Number of Respondents: 35,000; Number of Responses: 190,000; Total Annual Hours: 27,110. (For policy questions regarding this collection, contact Tricia Beckmann at 301–492–4328.)
DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Applications for New Awards; National Institute on Disability, Independent Living, and Rehabilitation Research—Rehabilitation Research and Training Centers

AGENCY: Administration for Community Living, Department of Health and Human Services.

ACTION: Notice.

Overview Information: National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)—Rehabilitation Research and Training Centers (RRTC)—Employer Practices Leading to Successful Disability and Integration into Society through Training Centers, published in the Federal Register on February 1, 2008 (73 FR 6132) and in the application package for this competition.


Note: The full text of this priority is included in the notice of final priority published elsewhere in this issue of the Federal Register and in the application package for this competition.

Program Authority: 29 U.S.C. 762(g) and 764(b)(2).

Applicable Regulations: (a) The Department of Health and Human Services General Administrative Regulations in 45 CFR part 75; (b) Audit Requirements for Federal Awards in 45 CFR part 75 Subpart F; (c) 45 CFR part 75 Non-procurement Debarment and Suspension; (d) 45 CFR part 75 Requirement for Drug-Free Workplace (Financial Assistance); (e) The regulations for this program in 34 CFR part 350; (f) The notice of final priorities for the RRTC Program published in the Federal Register on February 1, 2008 (73 FR 6132); and (g) The notice of final priority for this program, published elsewhere in this issue of the Federal Register.

II. Award Information

Type of Award: Discretionary grants.

Estimated Available Funds: $875,000. Contingent upon the availability of funds and the quality of applications, we may make additional awards in FY 2015 and any subsequent year from the list of unfunded applicants from this competition.

Maximum Award: $875,000.

We will reject any application that proposes a budget exceeding the Maximum Amount for a single budget period of 12 months. The Administrator of the Administration for Community Living may change the maximum amount through a notice published in the Federal Register.

Estimated Number of Awards: 1.

The Department is not bound by any estimates in this notice.

Project Period: 60 months.

We will reject any application that proposes a project period exceeding 60 months. The Administrator of the Administration for Community Living may change the project period through a notice published in the Federal Register.

III. Eligibility Information

1. Eligible Applicants: States; public or private agencies, including for-profit