Leroy A. Richardson,  
Chief, Information Collection Review Office,  
Office of Scientific Integrity, Office of the  
Associate Director for Science, Office of the  
Director, Centers for Disease Control and  
Prevention.

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/  
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.

DEPARTMENT OF HEALTH AND  
HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10455 and CMS– 
R–290]

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

AGENCY: Centers for Medicare &  
Medicaid 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 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 September 23,  
2016.

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 transmisions:

OMB, Office of Information and  
Regulatory Affairs.

The proposal that was published on  
May 16, 2012 (77 FR 29034) included  
a reduction in the reporting requirement  
related to hospital deaths associated  
with the use of restraint or seclusion,  
§ 482.13(g). Hospitals are no longer  
required to report to CMS those deaths  
where there was no use of seclusion and  
the only restraint was 2-point soft wrist  
restraints. It is estimated that this will  
reduce the volume of reports that must  
be submitted by 90 percent for  
hospitals. In addition, the final rule  
replaced the previous requirement for  
reporting via telephone to CMS, which  
proved to be cumbersome for both CMS  
and hospitals, with a requirement that  
allows submission of reports via  
technology to minimal the information  
techniques or other forms of information  
enhance the quality, utility, and clarity  
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 September 23,  
2016.

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 transmisions:

OMB, Office of Information and  
Regulatory Affairs.
open, responsive, and understandable to the public. We share the goal of increasing public participation in the development of Medicare coverage issues. This will assist us in obtaining the information we require to make a national coverage determination in a timely manner and ensuring that the Medicare program continues to meet the needs of its beneficiaries. Form Number: CMS–R–290 (OMB control number: 0938–0776); Frequency: Annual; Affected Public: Private sector: Business or other for-profits; Number of Respondents: 200; Total Annual Responses: 200; Total Annual Hours: 8,000. (For policy questions regarding this collection contact Katherine Tillman at 410–786–9252.)

Dated: August 18, 2016.

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

[FR Doc. 2016–20216 Filed 8–23–16; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–7042–N]

Health Insurance MarketplaceSM, and the Medicare, Medicaid, and Children’s Health Insurance Programs; Meeting of the Advisory Panel on Outreach and Education (APOE), September 21, 2016

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice of meeting.

SUMMARY: This notice announces the new meeting of the Advisory Panel on Outreach and Education (APOE) (the Panel) in accordance with the Federal Advisory Committee Act. The Panel advises and makes recommendations to the Secretary of the U.S. Department of Health and Human Services (HHS) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on opportunities to enhance the effectiveness of Health Insurance MarketplaceSM, and the Medicare, Medicaid, and Children’s Health Insurance Programs consumer education strategies. This meeting is open to the public.

DATES: Meeting Date: Wednesday, September 21, 2016, 8:30 a.m. to 4:00 p.m. eastern daylight time (e.d.t.). Deadline for Meeting Registration, Presentations, Special Accommodations and Comments: Wednesday, September 7, 2016, 5:00 p.m., e.d.t.


Presentations and Written Comments: Presentations and written comments should be submitted to: Abigail Huffman, Designated Federal Official (DFO), Division of Forum and Conference Development, Office of Communications, Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Mailstop S1–05–06, Baltimore, MD 21244–1850 or via email at Abigail.Huffman1@cms.hhs.gov.

Registration: The meeting is open to the public, but attendance is limited to the space available. Persons wishing to attend this meeting must register at the Web site https://www.regonline.com/apoesept2016meeting or by contacting the DFO as listed in the FOR FURTHER INFORMATION CONTACT section of this notice, by the date listed in the DATES section of this notice. Individuals requiring sign language interpretation or other special accommodations should contact the DFO at the address listed in the ADDRESSES section of this notice by the date listed in the DATES section of this notice.


SUPPLEMENTARY INFORMATION:

I. Background

The Advisory Panel for Outreach and Education (APOE) (the Panel) is governed by the provisions of Federal Advisory Committee Act (FACA) (Pub. L. 92–463), as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of federal advisory committees. The Panel is authorized by section 1114(f) of the Social Security Act (42 U.S.C. 1314(f)) and section 222 of the Public Health Service Act (42 U.S.C. 217a).

The Secretary of the U.S. Department of Health and Human Services (HHS) (the Secretary) signed the charter establishing the Citizen’s Advisory Panel on Medicare Education 1 (the predecessor to the APOE) on January 21, 1999 (64 FR 7899, February 17, 1999) to advise and make recommendations to the Secretary and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on the effective implementation of national Medicare education programs, including with respect to the Medicare+Choice (M+C) program added by the Balanced Budget Act of 1997 (Pub. L. 105–33).

The Medicare Modernization Act of 2003 (MMA) (Pub. L. 108–173) expanded the existing health plan options and benefits available under the M+C program and renamed it the Medicare Advantage (MA) program. We have had substantial responsibilities to provide information to Medicare beneficiaries about the range of health plan options available and better tools to evaluate these options. The successful MA program implementation required CMS to consider the views and policy input from a variety of private sector constituents and to develop a broad range of public-private partnerships.

In addition, Title I of the MMA authorized the Secretary and the Administrator of CMS (by delegation) to establish the Medicare prescription drug benefit. The drug benefit allows beneficiaries to obtain qualified prescription drug coverage. In order to effectively administer the MA program and the Medicare prescription drug benefit, we have substantial responsibilities to provide information to Medicare beneficiaries about the range of health plan options and benefits available, and to develop better tools to evaluate these plans and benefits.

The Affordable Care Act (Patient Protection and Affordable Care Act, Public Law 111–148, and Health Care and Education Reconciliation Act of 2010, Public Law 111–152) expanded the availability of other options for health care coverage and enacted a number of changes to Medicare as well as to Medicaid and the Children’s Health Insurance Program (CHIP). Qualified individuals and qualified employers are now able to purchase private health insurance coverage through competitive marketplaces, called Affordable Insurance Exchanges (we also call an Exchange a Health

1 We note that the Citizen’s Advisory Panel on Medicare Education is also referred to as the Advisory Panel on Medicare Education (65 FR 4617). The name was updated in the Second Amended Charter approved on July 24, 2000.