settlement of costs for health care services rendered to Medicare beneficiaries. In addition, regulations at 42 CFR 413.20 and 413.24 require adequate cost data and cost reports from providers on an annual basis. The Form CMS–1728–94 cost report is needed to determine a provider’s reasonable cost incurred in furnishing medical services to Medicare beneficiaries and reimbursement due to or from a provider. Form Number: CMS–1728–94 (OMB control number: 0938–0022); Frequency: Annually; Affected Public: Private sector (Business or other for-profits and Not-for-profit institutions); Number of Respondents: 11,352; Total Annual Responses: 11,352; Total Annual Hours: 2,576,904. (For policy questions regarding this collection contact Angela DiGorgio at 410–786–4516.)

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

[FR Doc. 2016–02685 Filed 2–9–16; 8:45 am]
BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: State Self-Assessment Review and Report.
OMB No.: 0970–0223.
Description: Section 454(15)(A) of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, requires each State to annually assess the performance of its child support enforcement program in accordance with standards specified by the Secretary of the Department of Health and Human Services, and to provide a report of the findings to the Secretary. This information is required to determine if States are complying with Federal child support mandates and providing the best services possible. The report is also intended to be used as a management tool to help States evaluate their programs and assess performance.

Respondents: State Child Support Enforcement Agencies or the Department/Agency/Bureau responsible for Child Support Enforcement in each State.

ANNUAL BURDEN ESTIMATES

<table>
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<th>Instrument</th>
<th>Number of respondents</th>
<th>Number of responses per respondent</th>
<th>Average burden hours per response</th>
<th>Total burden hours</th>
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<tr>
<td>Self-assessment report</td>
<td>54</td>
<td>1</td>
<td>4</td>
<td>216</td>
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</tbody>
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Estimated Total Annual Burden Hours: 216.

Additional Information

Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 370 L’Enfant Promenade SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. Email address: infocollection@acf.hhs.gov.

OMB Comment

OMB is required to make a decision concerning 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. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Fax: 202–395–7285, Email: OIRA SUBMISSION@OMB.EOP.GOV, Attn: Desk Officer for the Administration for Children and Families.

Robert Sargis,
Reports Clearance Officer.
[FR Doc. 2016–02629 Filed 2–9–16; 8:45 am]
BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects
Title: Refugee Microenterprise and Refugee Home-Based Child Care Microenterprise Development Programs
OMB No.: New
Description: The Office of Refugee Resettlement (ORR) within the Administration for Children and families (ACF) is responsible for resettling thousands of refugees every year from all over the world. The main goal of the ORR (US) refugee domestic resettlement program is to assist the refugees in becoming self-reliant at the shortest time possible. ORR has many different discretionary grants that it employs to accomplish this goal. Two of the discretionary grants are the Refugee Microenterprise Development (MED) and the Refugee Home-Based Child Care Microenterprise Development (HBCC MED) Programs. The goals of the MED program are to assist refugees in becoming economically self-sufficient, assist refugee serving organizations galvanize resources to strengthen their capacities to expand and continue their microenterprise services at an expanded and sustainable level, and enhance the integration to the mainstream and realize the American Dream. The focus of the HBCC Program is on women that have limited opportunity to get employment at livable wages because of limited transferable skills and lack of knowledge of the English language. Through the program women refugees are provided basic training in child care and development, state and local legal requirements to get a license and to establish a home-based child care service. The ultimate goal of the program is to enable the women refugees establish a home-based child care service in their neighborhood.

ORR works with nonprofit organizations in implementing these projects. Currently, there are 22 projects in the Refugee Microenterprise Development Program and 23 projects in the Refugee Home-Based Child Care Microenterprise Development Program. It is critical to collect data through a semi-annual report in order to determine whether or not the programs are achieving their intended goals, to address concerns, issues, and challenges...