CMS–10490  Program Integrity and Additional State Information Collections

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 Collection

1. Type of Information Collection Request: Revision of a currently approved collection; Title of Information Collection: Program Integrity and Additional State Information Collections; Use: On June 19, 2013, HHS published the proposed rule CMS–9957–P: Program Integrity: Exchanges, SHOP, Premium Stabilization Programs, and Market Standards (78 FR 37302) (Program Integrity Proposed Rule). Among other things, the Program Integrity Proposed Rule sets forth financial integrity provisions and protections against fraud and abuse. On January 30, 2013, CMS published Eligibility Appeals and Other Provisions Related to Eligibility and Enrollment for Exchanges under the Affordable Care Act (CMS–2334–P) (E&E II Proposed Rule). On August 30, 2013, HHS published the final rule CMS–9957–F: Program Integrity: Exchanges, SHOP, Eligibility Appeals (Program Integrity final rule), finalizing a number of the provisions from the Program Integrity and E&E II Proposed Rules. The third party disclosure requirements and data collections in the Program Integrity final rule support the oversight of qualified health plan (QHP) issuers in Federally-facilitated Exchanges (FFE)s and other provisions. The data collections will assist HHS in adjudicating eligibility appeals of Exchange eligibility determinations, in accordance with Federal standards. Form Number: CMS–10490 (OMB control number 0938–1213). Frequency: Once, Yearly. Affected Public: Not-for-profit institutions; Number of Respondents: 39; Number of Responses: 39,475; Total Annual Hours: 2,296,860. (For policy questions regarding this collection, contact Lisa Eggleston at 410–786–8990)


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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–10628]

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

AGENCY: Centers for Medicare & Medicaid Services.

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 December 28, 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 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:


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 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: New collection (Request for a new OMB control number); Title of Information Collection: Initial Request for State Implemented Moratorium Form. Use: The CMS promulgated 42 CFR 424.570 in order to comply with that statute, which requires that prior to implementing state Medicaid moratoria the state Medicaid agency must notify the Secretary in writing, including all of the details of the moratoria, and obtain the Secretary’s concurrence with the imposition of the moratoria. The above regulation is promulgated from 1866 (j)(7) of the Social Security Act, which allows for the imposition of temporary moratorium. The Initial Request for State Medicaid Implemented Moratorium, named the “Initial Request
for State Medicaid Implemented Moratorium.” was created to collect that data, in a uniform manner, which the states report to CMS when they request a moratorium. Currently, CMS is collecting this data on an ad-hoc basis, however this process needs to be standardized so that moratoria decisions are being made based on the same criteria each time.

The goal of the Initial Request for State Medicaid Implemented Moratorium form is to provide a uniform application process that all of the states may follow so that CMS is able to administer the Medicaid or Children’s Health Insurance Program moratorium process in a standardized and repeatable manner. This form creates a standardized process so that moratoria decisions are being made with the same criteria each time. Form Number: CMS–10628 (OMB control number: 0938–NEW); Frequency: Occasionally; Affected Public: State, Local, or Tribal Governments; Number of Respondents: 15; Total Annual Responses: 15; Total Annual Hours: 75. (For policy questions regarding this collection contact Cheryl Cooper at 410–786–8624.)

DIRECTOR, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

Title: National Survey of Child and Adolescent Well-Being-Third Cohort (NSCAW III): Data Collection OMB No.: 0970–0202

Description: The Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services (HHS) intends to collect data on a third cohort of children and families for the National Survey of Child and Adolescent Well-Being (NSCAW III). NSCAW is the only source of nationally representative, longitudinal, firsthand information about the functioning and well-being, service needs, and service utilization of children and families who come to the attention of the child welfare system.

Information is collected about children’s cognitive, social, emotional, behavioral, and adaptive functioning, as well as family and community factors that are likely to influence their functioning. Family service needs and service utilization also are addressed in the data collection.

A previous notice provided the opportunity for public comment on the proposed Phase I recruitment and sampling process (FR V.81, 4/8/2016). This notice is specific to the Phase 2 data collection activities: (1) baseline and (2) 18-month follow-up data collection. Data collection includes child interviews and direct assessments, as well as caregiver and caseworker interviews. The overall goal is to maintain the strengths and continuity of the prior surveys while better positioning the study to address changes in the child welfare population.

Respondents: Children, and their associated caregivers and caseworkers.

ANNUAL BURDEN ESTIMATES

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Total number of respondents</th>
<th>Annual number of respondents (rounded)</th>
<th>Number of responses per respondent</th>
<th>Average burden hours per response</th>
<th>Annual burden hours</th>
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</thead>
<tbody>
<tr>
<td>Child Interview and Direct Assessments</td>
<td>4,565</td>
<td>1,522</td>
<td>1</td>
<td>1.33</td>
<td>2,024</td>
</tr>
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<td>Caregiver Interview</td>
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<td>Caseworker Interview</td>
<td>1,826</td>
<td>609</td>
<td>3</td>
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18-Month Follow-up

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Total number of respondents</th>
<th>Annual number of respondents (rounded)</th>
<th>Number of responses per respondent</th>
<th>Average burden hours per response</th>
<th>Annual burden hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Interview and Direct Assessment</td>
<td>3,650</td>
<td>1,217</td>
<td>1</td>
<td>1.33</td>
<td>1,619</td>
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<tr>
<td>Caregiver Interview</td>
<td>3,650</td>
<td>1,217</td>
<td>1</td>
<td>1.67</td>
<td>2,032</td>
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<tr>
<td>Caseworker Interview</td>
<td>840</td>
<td>280</td>
<td>3</td>
<td>1.0</td>
<td>840</td>
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</tbody>
</table>

Estimated Total Annual Burden Hours: 10,427

In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 330 C Street SW., Washington, DC 20201. Attn: OPRE Reports Clearance Officer. Email address: OPREInfocollection@acf.hhs.gov. All requests should be identified by the title of the information collection.

The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency’s estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Mary Jones.

ACF/OPRE Certifying Officer.

[FR Doc. 2016–28431 Filed 11–25–16; 8:45 am]