The annual burden for this information collection is estimated to be 572,791 hours. This represents an increase of 281,305 hours from the current burden estimate of 291,486 hours. This increase is not due to any new requirements imposed by the FDIC. Rather, it is due to FDIC’s reassessment of the burden hours associated with responding to the existing requirements of the Rule and to guidance, feedback, and additional requests for information by the FDIC as part of the iterative resolution planning process. The revised estimates are informed by feedback received from the CIDIs over the past year. Because submissions have been required no more frequently than biennially, the burden associated with the Annual Update has been multiplied by ½ to represent two Annual Update filings over the three-year period contemplated by this notice and renewal.

Request for Comment

Comments are invited on: (a) Whether the collection of information is necessary for the proper performance of the FDIC’s functions, including whether the information has practical utility; (b) the accuracy of the estimates of the burden of the information collection, including the validity of the methodology and assumptions used; (c) ways to enhance 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. All comments will become a matter of public record.

Dated at Washington, DC, on October 23, 2018.
Federal Deposit Insurance Corporation.
Robert E. Feldman, Executive Secretary.

FEDERAL ELECTION COMMISSION
Sunshine Act Meeting

FEDERAL REGISTER CITATION NOTICE OF PREVIOUS ANNOUNCEMENT: 83 FR 52832.
PREVIOUSLY ANNOUNCED TIME AND DATE OF THE MEETING: Tuesday, October 23, 2018 at 10:00 a.m.
CHANGES IN THE MEETING: The meeting was continued on Thursday, October 25, 2018.

CONTACT PERSON FOR MORE INFORMATION:
Judith Ingram, Press Officer, Telephone: (202) 694–1220.
Laura E. Sinram, Deputy Secretary of the Commission.

GENERAL SERVICES ADMINISTRATION
[Notice MV–2018–01; Docket No. 2018–0002, Sequence No. 29]
Federal Acquisition Regulation; FY 2019 FAR Reissue Posted to the Acquisition.gov Website
AGENCY: General Services Administration (GSA).
ACTION: Notice.
SUMMARY: This notice advises users that the FY 2019 Federal Acquisition Regulation (FAR) Reissue will be available for download at https://www.acquisition.gov/browsefar.
DATES: Applicable date: November 13, 2018.
FOR FURTHER INFORMATION CONTACT: The Regulatory Secretariat Division, at 202–501–4755; or via email at GSARegSec@gsa.gov. Please cite 2019 FAR Reissue Posted to the Acquisition.gov website.
SUPPLEMENTARY INFORMATION: Periodically, the FAR is reissued because of administrative necessity. Although the reissue does not alter the language of the FAR, it does contain several administrative updates to improve the user experience and increase accessibility. The following updates are to features that do not appear in the Code of Federal Regulations:

• Future Federal Acquisition Circulars (FAC) will be renumbered so that the next issued FAC will be FAC 2019–01. This reissue will replace the prior numbering system which used FACS 2005–01 through FAC 2005–101. Because of the renumbering, the Foreword section of the FAR will be updated to reflect the current FAC number.

• The FAR Looseleaf package will no longer be offered. Instead, a List of Sections Affected (LSA) will be included on the https://acquisition.gov website, and updated for each FAC.

• The matrix will continue to be available in the PDF version of the FAR. However, acquisition.gov will be releasing the new Smart Matrix. The new FAR Smart Matrix includes a filterable clause matrix, file saving options, improved search capabilities, as well as hyperlinked clauses, provisions and prescriptions to the current version of the FAR.

• The FAR will be available in HTML, XML, Word, and PDF formats. Users intending to print the FAR can refer to the Adobe PDF file.

• FAR Proposed Rule Publications that are open for comments are available at https://acquisition.gov/requesting_comments.

• The Federal Alert Notices (FAN) are available at https://acquisition.gov/fan_list.

Although these changes do not alter the Code of Federal Regulations, they will provide smoother access to the FAR for new and experienced users alike. Please contact the Regulatory Secretariat Division with any questions or concerns.

Dated: October 24, 2018.
William F. Clark, Director, Office of Government-wide Acquisition Policy, Office of Acquisition Policy, Office of Government-wide Policy.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services
Agency Information Collection Activities: Proposed Collection; 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 (the 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 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our burden estimates 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 must be received by December 28, 2018.

ADDRESSES: When commenting, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. Electronically. You may send your comments electronically to http://www.regulations.gov. Follow the instructions for “Comment or Submission” or “More Search Options” to find the information collection document(s) that are accepting comments.

2. By regular mail. You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number , Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

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: William Parham at (410) 786–4669.

SUPPLEMENTARY INFORMATION:

Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection’s supporting statement and associated materials (see ADDRESSES).

CMS–10492 Data Submission for the Federally-facilitated Exchange User Fee Adjustment

CMS–10664 Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Templates; Use: The templates will help users capture the appropriate information needed to document medical necessity and appropriateness to help qualify for reimbursement under Medicare coverage and payment regulations. The physicians/NPPs complete the DMEPOS F2F encounter documentation or progress note, the DMEPOS order, and the results of required laboratory testing. This will help physicians/NPPs in complying with Medicare policy requirements, thereby reducing improper payments secondary to insufficient documentation. In addition, CMS will use this information to help substantiate the request for payment (e.g., claim) is for devices and services that are medically necessary and appropriate as required by regulation. This will substantially reduce inappropriate payment due to incomplete documentation.

The primary users of these clinical templates will be physicians/NPPs and their support staff. The users of the information will also include other providers and suppliers that must have documentation to substantiate the need for the devices or services as part of the requirements for payment by Medicare FFS. Complete documentation will help with reducing claim denials and improper payments. By using these templates and CDEs, providers and suppliers of DMEPOS devices and services will receive proper documentation/information from the referring provider that is required for payment. Form Number: CMS–10664 (OMB control number: 0938–1285); Frequency: Annually; Affected Public: Private Sector; Business or other for-profits and Not-for-profit institutions; Number of Respondents: 861; Total Annual Responses: 861; Total Annual Hours: 12,930. (For policy questions regarding this collection contact Ernest Ayukawa (301) 492–5213.)

2. Type of Information Collection Request: New collection (Request for a new OMB Control Number); Title of Information Collection: Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Templates; Use: The templates will help users capture the appropriate information needed to document medical necessity and appropriateness to help qualify for reimbursement under Medicare coverage and payment regulations. The physicians/NPPs complete the DMEPOS F2F encounter documentation or progress note, the DMEPOS order, and the results of required laboratory testing. This will help physicians/NPPs in complying with Medicare policy requirements, thereby reducing improper payments secondary to insufficient documentation. In addition, CMS will use this information to help substantiate the request for payment (e.g., claim) is for devices and services that are medically necessary and appropriate as required by regulation. This will substantially reduce inappropriate payment due to incomplete documentation.

The primary users of these clinical templates will be physicians/NPPs and their support staff. The users of the information will also include other providers and suppliers that must have documentation to substantiate the need for the devices or services as part of the requirements for payment by Medicare FFS. Complete documentation will help with reducing claim denials and improper payments. By using these templates and CDEs, providers and suppliers of DMEPOS devices and services will receive proper documentation/information from the referring provider that is required for payment. Form Number: CMS–10664 (OMB control number: 0938–NEW); Frequency: Annually; Affected Public: Private Sector; Business or other for-profit and not-for-profit institutions; Number of Respondents: 522; Number of Annual Burden Hours: 12,930. (For policy questions regarding this collection contact Ernest Ayukawa (301) 492–5213.)

3. Type of Information Collection Request: Extension or reinstatement of an existing information collection requirement, CMS is publishing this notice.

Information Collection

1. Type of Information Collection Request: Extension without change of a currently approved collection; Title of Information Collection: Data Submission for the Federally-facilitated Exchange User Fee Adjustment; Use: Section 2713 of the Public Health Service Act requires coverage without cost sharing of certain preventive health services, including certain contraceptive services, in non-exempt, non-grandfathered group health plans and health insurance coverage. The final rules established rules under which the third party administrator of the plan would provide or arrange for a third party to provide separate contraceptive coverage to plan participants and beneficiaries without cost sharing, premium, fee, or other charge to plan participants or beneficiaries or to the eligible organization or its plan. Eligible organizations are required to self-certify that they are eligible for this accommodation and provide a copy of such self-certification to their third party administrators. The final rules also set forth processes and standards to fund the payments for the contraceptive services that are provided for participants and beneficiaries in self-insured plans or eligible organizations under the accommodation described previously, through an adjustment in the FFE user fee payable by an issuer participating in an FFE. CMS will use the data collections from participating issuers and third party administrators to verify the total dollar amount for such payments for contraceptive services provided under this accommodation for the purpose of determining a participating issuer’s user fee adjustment. The attestation that the payments for contraceptive services were made in compliance with 26 CFR 54.9815–2713A(b)(2) or 29 CFR 2590.715–2713A(b)(2) will help ensure that the user fee adjustment is being utilized to provide contraceptive services for the self-insured plans in accordance with the previously noted accommodation.

Frequency: Annually; Affected Public: Private Sector; Business or other for-profits and Not-for-profit institutions; Number of Respondents: 861; Total Annual Responses: 861; Total Annual Hours: 12,930. (For policy questions regarding this collection contact Ernest Ayukawa (301) 492–5213.)
DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10494]

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 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 November 28, 2018.

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: 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: Revision of a previously approved collection; Title of Information Collection: Exchange Functions: Standards for Navigators and Non-Navigator Assistance Personnel—CAC; 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 (for-profit institutions); individuals or households; Number of Respondents: 30,000; Total Annual Responses: 30,000; Total Annual Hours: 7,500. (For policy questions regarding this collection contact Deborah Bryant at 301–492–5213.)

Deborah Bryant at 301–492–5213.)

Dated: October 24, 2018.
William N. Parham, III,
Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2018–23590 Filed 10–26–18; 8:45 am]
BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects: Office of Child Care CCDF Onsite Monitoring.

Title: Child Care and Development Fund (CCDF) State Monitoring Compliance Demonstration Packet.

OMB No.: New.