DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Title: Multi-site Implementation Evaluation of Tribal Home Visiting (MUSE).

OMB No.: New Collection.

Description: The Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services has launched a national multi-site evaluation of Tribal Maternal, Infant, and Early Childhood Home Visiting (TMIECHV) programs. MUSE is the first multi-site, multi-model study that will systematically explore how home visiting programs are operating across diverse tribal contexts and identify factors that lead to programs’ success. The evaluation will provide information that will help the federal government design and support federal home visiting initiatives in tribal communities and similar populations. Evaluation findings will also assist programs with improving home visiting services for children and families. The aims of MUSE are to (1) identify and describe the primary influences shaping tribal home visiting program planning; (2) identify and describe how home visiting programs are being implemented; and (3) explore supports to home visiting implementation in tribal communities. To address these aims, the evaluation will gather data from program participants at baseline and 12 months, (3) the MUSE Family Resources Check-in administered to parent program participants at baseline and 12 months (4) a Rapid Reflect self-completed questionnaire completed by parent program participants after selected home visits; (5) a Rapid Reflect self-completed questionnaire completed by home visitors after selected home visits; (6) a one-time survey of home visitors; (7) a one-time survey of program coordinators/managers; (8) a one-time survey of program directors; (9) a one-time survey of local program evaluators; (10) qualitative interviews of home visitors at each site; (11) qualitative interviews of program coordinators/managers and program directors at each site; (12) qualitative interviews of local program evaluators at each site; (13) qualitative interviews of program participants; (14) a log of implementation activities completed by program coordinators/managers on staffing, training, family group activities, and supervision; and (15) electronic compilation and submission of administrative program data.

All data collection will be used to generate information about how tribal home visiting program services are planned and delivered, and about what individual, organizational, community, and external factors support successful program implementation.

Respondents: Parent participants enrolled in TMIECHV programs and TMIECHV program staff (program directors, program coordinators/managers, home visitors, and local program evaluators).

Annual Burden Estimates

We will request approval for three years, which will accommodate an approximate two-year data collection period and any potential delays in the data collection timeline.
Consideration will be given to other forms of information technology. Respondents, including through the use of collection of information on ways to minimize the burden of the information to be collected; and (d) the quality, utility, and clarity of the proposed collection of information; (c) agency’s estimate of the burden of the practical utility; (b) the accuracy of the whether the information shall have functions of the agency, including for the proper performance of the collection of information is necessary comments on (a) whether the proposed identified by the title 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. 2018–04039 Filed 2–27–18; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Committee on Vital and Health Statistics: Meeting

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting.

Name: National Committee on Vital and Health Statistics (NCVHS), Standards Subcommittee Meeting.

Date and Times: Monday, March 26, 2018: 9:00 a.m.–3:30 p.m. (EDT).

Place: Virtual.

Status: Open. There will be an open comment period during the final 15 minutes of the committee meeting.

Purpose: Health Insurance Portability and Accountability Act (HIPAA) legislation from 1996, as amended, directed the Secretary of HHS to publish regulations adopting standards, code sets and identifiers to support the exchange of electronic health information between covered entities. The standards are for retail pharmacy and medical transactions. New versions of the adopted standards may be brought forward to NCVHS by the standards development organizations (SDOs) or through the Designated Standards Maintenance Organization (DSMO) after completion of a consensus based review and evaluation process.

On January 9, 2018, the DSMO submitted a letter to NCVHS recommending the adoption of two National Council of Prescription Drug Program (NCPDP) updates to the adopted retail pharmacy standards. These updates include: (1) An update to the retail pharmacy standard, the NCPDP Telecommunication and Batch standard version D.0, which was adopted in 2009. The update would be NCPDP Telecommunication and Batch standard version F2, which would enable eligibility verification, claims, services, information reporting, prior authorization for (pharmacy), and pre-determination of benefits; and (2) an update to the Medicaid subrogation standard, also adopted in 2009, to expand subrogation to all payers, including Medicare Parts C and D. The updated subrogation standard is the Batch Standard version 10, and replaces version 3.0. It will enable all payers to conduct a uniform process to support compliance with requirements for recovery of federal, state and other plan overpayments, mitigating manual processes currently in place.

The purpose of this NCVHS Standards Subcommittee hearing is to obtain input from stakeholders for the costs and benefits of implementing the updated versions of the two pharmacy standards: NCPDP F2 and pharmacy subrogation, and to understand how they would reduce existing barriers to the use of standards, or mitigate burdens.

The times and topics are subject to change. Please refer to the posted agenda for any updates.

Contact Persons for More Information: Substantive program information may be obtained from Rebecca Hines, MHS, Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Hyattsville, Maryland 20782, telephone (301) 458–4715. Information pertaining to meeting content may be obtained from Lorraine Doo, MSW, MPH, or Geanelle G. Herring, MSW, Centers for Medicare & Medicaid Services, Office of Information Technology, Division of National Standards, 7500 Security Boulevard, Baltimore, Maryland, 21244, telephone (410) 786–6597. Summaries of meetings and a roster of Committee members are available on the NCVHS website: https://www.ncvhs.hhs.gov/, where further information including an agenda and instructions to access the live audio broadcast of the meetings will also be posted.

Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on (770) 488–3210 as soon as possible.


Laina Bush,

Deputy Assistant Secretary for Planning and Evaluation, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 2018–04057 Filed 2–27–18; 8:45 am]

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1 The annual number of respondents is annualized over 2 years for instruments that are completed by respondents on an ongoing basis.