

scheduled public comment session. CDC staff will notify individuals regarding their request to speak by email by June 20, 2023. To accommodate the significant interest in participation in the oral public comment session of ACIP meetings, each speaker will be limited to three minutes, and each speaker may only speak once per meeting.

The Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

**Kalwant Smagh,**

*Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.*

[FR Doc. 2023-09548 Filed 5-4-23; 8:45 am]

**BILLING CODE 4163-18-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Medicare & Medicaid Services**

[Document Identifiers: CMS-10704]

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

**AGENCY:** Centers for Medicare & Medicaid Services, Health and Human 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 June 5, 2023.

**ADDRESSES:** Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, please access the CMS PRA website by copying and pasting the following web address into your web browser: <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing>.

**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 currently approved collection; *Title of Information Collection:* Health Reimbursement Arrangements and Other Account-Based Group Health Plans; *Use:* On June 20, 2019, the Department of the Treasury, the Department of Labor, and the Department of Health and Human Services (collectively, the Departments) issued final regulations titled "Health

Reimbursement Arrangements and Other Account-Based Group Health Plans" (84 FR 28888) under section 2711 of the PHS Act and the health nondiscrimination provisions of HIPAA, Public Law 104-191 (HIPAA nondiscrimination provisions). The regulations expanded the use of health reimbursement arrangements and other account-based group health plans (collectively referred to as HRAs) and recognized certain HRAs as limited excepted benefits (the excepted benefit HRA), for plan years beginning on or after January 1, 2020. In general, the regulations expanded the use of HRAs by eliminating the prohibition on integrating HRAs with individual health insurance coverage, thereby permitting employers to offer individual coverage HRAs to employees that can be integrated with individual health insurance coverage or Medicare Parts A and B, or Part C. Under the regulations, employees are permitted to use amounts in an individual coverage HRA to pay expenses for medical care (including premiums for individual health insurance coverage and Medicare), subject to certain requirements. This information collection includes provisions related to substantiation of individual health insurance coverage (45 CFR 146.123(c)(5)), the notice requirement for individual coverage HRAs (45 CFR 146.123(c)(6)), and notification of termination of coverage (45 CFR 146.123(c)(1)(iii)). In the final rule "Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2021; Notice Requirement for Non-federal Governmental Plans" (85 FR 29164), under 45 CFR 146.145(b)(3)(viii)(E), excepted benefit HRAs offered by non-Federal governmental plan sponsors are required to provide a notice that describes conditions pertaining to eligibility to receive benefits, annual or lifetime caps or other limits on benefits under the excepted benefit HRA, and a description or summary of the benefits. This notice must be provided no later than 90 days after the employee becomes a participant in the excepted benefit HRA and annually thereafter.

*Form Number:* CMS-10704 (OMB Control Number 0938-1361); *Frequency:* Annually; *Affected Public:* Private Sector, State Governments; *Number of Respondents:* 11,574; *Total Annual Responses:* 1,037,674; *Total Annual Hours:* 5,889. (For policy questions regarding this collection contact Adam Pellillo at (667) 290-9621.)

Dated: May 1, 2023.

**William N. Parham, III,**

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

[FR Doc. 2023-09553 Filed 5-4-23; 8:45 am]

BILLING CODE 4120-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Community Living

#### **Intent To Award a Single-Source Supplement To Provide the National Aging Network With Timely, Relevant, High-Quality Opportunities To Further Enhance Training and Technical Assistance, Visibility, and Cultural Adaptions Related to Chronic Disease Self-Management Education (CDSME) Programs**

**ACTION:** Notice.

**SUMMARY:** The Administration for Community Living (ACL) announces the intent to award a single-source supplement to the current cooperative agreement held by the National Council on Aging (NCOA) for the Chronic Disease Self-Management Education (CDSME) Resource Center. The purpose of this program is to leverage and expand upon chronic disease self-management education efforts across the nation; work collaboratively in partnership with the aging and disability network and other stakeholders to advance the development of technical assistance, education, and resources to increase public awareness about chronic disease self-management tools to better manage chronic conditions like diabetes, chronic pain, arthritis and depression; increase the number of older adults and adults with disabilities who participate in evidence-based CDSME and self-management support programs; and support the integration and sustainability of evidence-based CDSME and self-management support programs within community integrated health networks.

**FOR FURTHER INFORMATION CONTACT:** For further information or comments regarding this program supplement, contact Lesha Spencer-Brown, U.S. Department of Health and Human Services, Administration for Community Living, Administration on Aging, Office of Nutrition and Health Promotion Programs, [202-795-7331], email [Lesha.Spencer-Brown@acl.hhs.gov](mailto:Lesha.Spencer-Brown@acl.hhs.gov).

**SUPPLEMENTARY INFORMATION:** The purpose of this supplement is to:

- Support enhanced training and technical assistance for CDSME program capacity building and delivery infrastructure through the update and development of evergreen evidence-based training materials and other resources based on needs and gaps identified from the grantees and the network; engagement of individuals from the field to establish cross-sector advisory panels that will advise on the development of best practices and frameworks for evidence-based program adaptation and effective delivery in underserved communities; facilitation of a mini grantee meeting that will offer intensive workshops on capacity building, program delivery and sustainability; further development of evidence-based program providers through a peer mentoring program; and enhance existing sustainability tools to assist the network in strategic planning activities that will lead to enhanced program sustainability.

- Augment marketing resources to include development and fielding of an assessment to better understand capacities, needs and opportunities around marketing; translation of existing and new resources into different languages; development of tip sheets and best practices guides around messaging and platforms for effective dissemination of program benefits and availability; and creation of materials and messaging that can be easily adapted by the network for their own use in increasing awareness about the CDSME programs and recruiting program participants in their communities.

- Improve the visibility of CDSME program data through a public facing interactive dashboard of national-level data that can be used for various purposes by the network; infographics describing CDSME grantee efforts and accomplishments (*e.g.*, reach, cost savings, program outcomes); and a webinar series that will focus on program forecasting, reach and growth across the country, quality improvement, and best practices for data integration.

- Advance action steps in the “*Call to Action to Improve Cultural Relevance and Accessibility: Evidence-Based Programs among American Indian, Alaska native and Native Hawaiian Communities*” by working with researchers to operationalize several of the recommendations including developing program adaptations, improving cultural relevance of existing CDSME approved programs, and assisting with research and other needs to advance programs.

The administrative supplement for FY 2023 will be in the amount of \$1,088,834, bringing the total award for FY 2023 to \$3,088,834.

With this supplement, NCOA will be able to continue to work across the aging and disability network to enhance and expand existing CDSME efforts to increase the number of older adults and adults with disabilities who participate in evidence-based CDSME programs, and further embed CDSME programs in communities. The additional funding will not be used for projects or activities outside the scope of the approved award.

*Program Name: National Chronic Disease Self-Management Education (CDSME) Resource Center.*

*Recipient: National Council on Aging (NCOA).*

*Period of Performance:* The supplement award will be issued for the third year of a five-year project period of August 1, 2021, to July 31, 2026.

*Total Award Amount:* \$3,088,834 in FY 2023.

*Award Type:* Cooperative Agreement Supplement.

*Statutory Authority:* The Older Americans Act, title IV; and the Patient Protection and Affordable Care Act, 42 U.S.C. 300u-11 (Prevention and Public Health Fund).

*Basis for Award:* National Council on Aging (NCOA) is currently funded through a cooperative agreement to carry out the objectives of the project entitled, *National Chronic Disease Self-Management Education (CDSME) Resource Center* for the period of August 1, 2021, through July 31, 2026. Since the project’s implementation, the grantee has made significant progress toward its approved work plan. The supplement will enable the grantee to carry their work even further, enhancing the support they provide to the Aging Network. The additional funding will not be used to begin new projects or activities, but rather to enhance efforts.

NCOA is uniquely positioned to complete the work called for under this project. They have an already established infrastructure and are a known and trusted organization in the Aging Network. Prior to this current award, NCOA competed, and was awarded the *National Chronic Disease Self-Management Education (CDSME) Resource Center* for the past 7 years. Under the current award period, they are providing technical assistance and educational opportunities for the Aging Network’s CDSME efforts, in partnership with a broad network of local and national agencies, to increase the number of older adults and adults with disabilities who participate in