The CMS office in Seattle, Washington, has conducted validation inspections of a representative sample of the laboratories inspected by the Washington State Office of Laboratory Quality Assurance (LQA). The validation inspections were primarily of the concurrent type; that is, our surveyors accompanied Washington State's inspectors, each inspecting against his or her agency's respective regulations. Analysis of the validation data revealed no significant differences between the State and Federal findings. The validation surveys verified that the State of Washington inspection process covers all CLIA conditions applicable to each laboratory being inspected and also verified that the State laboratory licensure requirements meet or exceed CLIA condition-level requirements. The validation surveys found the State inspectors highly skilled and qualified. The LQA inspected laboratories in a timely fashion; that is, all laboratories were inspected within the required 24-month cycle. All parameters monitored by the CMS office in Seattle, Washington, to date, indicate that the State of Washington is meeting all requirements for approval of CLIA exemption. This Federal monitoring will continue as an on-going process.

C. Conclusion

Based on review of the documents submitted by the Washington State licensure program under the requirements of subpart E of part 493, as well as the outcome of the validation inspections conducted by the CMS office in Seattle, Washington, CMS finds that the State of Washington's licensure program meets the requirements of § 493.553(a), and that, as a result, CMS may exempt all State-licensed laboratories from CLIA program requirements.

Approval of the CLIA exemption for laboratories located within and licensed by the State of Washington laboratory licensure program is subject to removal if CMS determines that the outcome of a comparability review or a validation review inspection is not acceptable, as described under §§ 493.573 and 493.575, or if the State of Washington fails to pay the required fee every 2 years as required under § 493.649.

D. Laboratory Data

The approval of this exemption for laboratories located within and licensed by the State of Washington is conditioned on the State of Washington's continued compliance with the assertions made in its application, including the provision of information to us in accordance with our regulations at § 493.557(b)(8) about changes to a laboratory's specialties or subspecialties based on the State's survey, and changes to a laboratory's certification status.

E. Required Administrative Actions

CLIA is a user-fee funded program. The registration fee paid by laboratories is intended to cover the cost of the development and administration of the program. However, when a State's application for exemption is approved, CMS does not charge a fee to laboratories in the State. The State's share of the costs associated with CLIA must be collected from the State, as specified in § 493.649.

The State of Washington must pay for the following:

- Costs of Federal inspections of laboratories in the State to verify that standards are being enforced in an appropriate manner.
- Costs incurred for investigations of complaints against State of Washington laboratories if the complaint is substantiated.
- The State's pro rata share of general overhead to administer the laboratory certification program under section 353 of the PHS Act.

To estimate the State of Washington's proportionate share of the general overhead costs to develop and implement CLIA, CMS determined the ratio of laboratories in the State to the total number of laboratories nationally. Approximately 1.9 percent of the registered laboratories are in the State of Washington. CMS determined that a corresponding percentage of the applicable CMS, CDC, FDA, and their respective contractor costs should be borne by the State of Washington.

The State of Washington has agreed to pay the State's pro rata share of the anticipated overhead costs and costs of actual validation (including complaint investigation surveys) as specified in § 493.655(b). A final reconciliation for all laboratories and all expenses will be made. CMS will reimburse the State for any overpayment or bill it for any balance.

II. Approval

In light of the foregoing, CMS grants approval of the State of Washington's laboratory licensure program under subpart E. All laboratories located in and licensed by the State of Washington under the Medical Test Site law, chapter 70.42 of the Revised Code of Washington, are CLIA-exempt for all specialties and subspecialties until April 1, 2028.

The Administrator of the Centers for Medicare & Medicaid Services (CMS), Chiquita Brooks-LaSure, having reviewed and approved this document, authorizes Trenesha Fultz-Mimms, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Trenesha Fultz-Mimms,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

[FR Doc. 2024–06802 Filed 3–29–24; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Immigration Legal Services for Afghan Arrivals—Eligible Afghan Arrivals Intake Form and Intake Interview (New Collection)

AGENCY: Office of Refugee Resettlement, Administration for Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office of Refugee Resettlement (ORR), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is proposing to collect data from Eligible Afghan Arrivals (EAAs) in need of direct legal services through Immigration Legal Services for Afghan Arrivals (ILSAA) to determine eligibility.

DATES: *Comments due within 30 days of publication.* OMB must make a decision about 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.

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.* Find this particular information collection by selecting ''Currently under 30-day Review—Open for Public Comments'' or by using the search function. You can also obtain copies of the proposed collection of information by emailing *infocollection@acf.hhs.gov.* Identify all emailed requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: In August 2021, Operation Allies Welcome (OAW) was established at President Biden's direction to implement coordinated efforts across the federal government to support vulnerable Afghans, including those who worked alongside the U.S. in Afghanistan (OAW, Homeland Security (*https://www.dhs.gov/allieswelcome*)). Under the Afghanistan Supplemental Appropriations Act, 2022, and Additional Afghanistan Supplemental Appropriations Act, 2022, Congress authorized ORR to provide resettlement assistance and other benefits available to refugees to specific Afghan populations in response to their emergency evacuation and resettlement. ILSAA was established to provide immigration legal services to EAAs. The ILSAA EAA Intake Form and Intake Interview are designed to gather information about EAAs who are interested in receiving legal services through ILSAA. ILSAA staff will review the EAA's information to determine whether they meet the qualifications to receive legal services through ILSAA. This will be done on a rolling basis as EAAs seek legal services through ILSAA.

Respondents: OAW Afghan Populations.

ANNUAL BURDEN ESTIMATES

Instrument	Annual number of respondents	Total number of responses per respondent	Average burden hours per response	Annual burden hours
Eligible Afghan Arrival (EAA) Intake Form	2,000	1	0.08	160
Eligible Afghan Arrival (EAA) Intake Interview	1,600	1	0.75	1,200

Estimated Total Annual Burden Hours: 1,360.

Authority: Division C, Title III, Public Law 117–43,135 Stat. 374; Division B, Title III, Public Law 117–70, 1102 Stat. 4.

Mary C. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2024–06832 Filed 3–29–24; 8:45 am]

BILLING CODE 4184–89–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities; Submission for OMB Review; Public Comment Request; of the ACL Generic Clearance for the Collection of Routine Customer Feedback OMB 0985–NEW

AGENCY: Administration for Community Living, HHS.

ACTION: Notice.

SUMMARY: The Administration for Community Living is announcing that the proposed collection of information listed above has been submitted to the Office of Management and Budget (OMB) for review and clearance as required under the Paperwork Reduction Act of 1995. This 30-Day notice collects comments on the information collection requirements related to the ACL Generic Clearance for the Collection of Routine Customer Feedback OMB 0985–NEW.

DATES: Comments on the collection of information must be submitted electronically by 11:59 p.m. (EDT) or postmarked by May 1, 2024.

ADDRESSES: Submit written comments and recommendations for the proposed information collection within 30 days of publication of this notice to *www.reginfo.gov/public/do/PRAMain* Find the information collection by selecting ''Currently under 30-day Review—Open for Public Comments'' or by using the search function. By mail to the Office of Information and Regulatory Affairs, OMB, New Executive Office Bldg., 725 17th St. NW, Rm 10235, Washington, DC 20503, Attn: OMB Desk Officer for ACL.

FOR FURTHER INFORMATION CONTACT: Tomakie Washington, Administration for Community Living, Washington, DC 20201, (202) 795–7336 or *Tomakie.Washington@acl.hhs.gov.*

SUPPLEMENTARY INFORMATION: In compliance with the Paperwork Reduction Act (44 U.S.C. 3506), the Administration for Community Living (ACL) has submitted the following proposed collection of information to OMB for review and clearance. The Administration for Community Living (ACL) at the Department of Health and Human Services (HHS) is requesting a generic clearance for purposes collecting data with a focus on the awareness, understanding, attitudes, preferences, or experiences of customers or other stakeholders relating to existing or future services, products, or communication materials. ACL defines routine customer feedback as information that provides useful insights to improve existing or future service deliveries, products, or communication materials; responses are voluntary: the collection does not impose a significant burden on respondents; the collection does not employ statistical methods to have practical utility; and the data results are not publicly shared.

The types of information collection activities will include:

1. Customer Comment Card/Complaint Form
2. Customer Satisfaction Qualitative Surveys
3. Technical Assistance
4. Usability Testing (*e.g.,* Website or Software)
5. Small Discussion Group
6. Focus Group
7. One-time or panel discussion groups
8. Moderated, un-moderated, in-person, and/or remote-usability studies
9. Testing of a survey or other collection to refine questions
10. Post-transaction customer surveys
11. On-line surveys

ACL was created around the fundamental principle that older adults and people of all ages with disabilities should be able to live where they choose, with the people they choose, and with the ability to participate fully in their communities. By funding services and supports provided primarily by networks of community-based organizations, and with investments in research, education, and innovation, ACL helps make this principle a reality for millions of Americans. Integral to this role, ACL will use this mechanism to conduct routine customer feedback for ACL programs.

Comments in Response to the 60-Day Federal Register Notice

A 60-day notice published in the **Federal Register** at 88 FR 78370 on