their work settings; and (4) programmatic and population foci of their work. The NNPTC HPAT takes approximately three minutes to complete. This data collection provides CDC with information to determine whether the training grantees are reaching their target audiences in terms of provider type, the types of organizations in which participants work, the focus of their work and the population groups and geographic areas served. The evaluation instruments are used to assess training and capacity-building outcomes (knowledge, confidence, intention to use information, actual changes made as a result of training) immediately after and again 90 days after training events. The evaluation instruments vary based on the type of training offered and take between approximately 10 minutes to complete (for intensive multi-day trainings) to three minutes to complete (for short didactic or webinar sessions). In the latest grant year, 94% of participants reported having most or all of the knowledge on a topic after completing the training; 88% of participants reported feeling confident or very confident in their skills after completing the training. Of participants that completed the pre- and post-training knowledge and confidence evaluation, 77% indicated an increase in knowledge and 67% reported an increase in skills confidence. Aside from minor updates to ensure compliance with Executive Orders issued since January 2025, there are no substantive changes to the previously approved data collection instruments.

The CDC's Funding Opportunity Announcement PS 20–2024, National Network of Sexually Transmitted Diseases Clinical Prevention Training Centers (NNPTC), requires the collection of national demographic information on grantees' trainees and national evaluation outcomes. There is no change to the previously approved burden estimate. The estimated annualized burden hours for this data collection are 453 hours. There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (hours)	Total burden (hours)
Healthcare Professionals	NNPTC Abbreviated Health Professional Application for Training (NNPTC HPAT).	4,500	1	3/60	225
Healthcare Professionals	Immediate Post-Course email invitation.	4,500	1	1/60	75
Healthcare Professionals	3 Month Long-Term email invitation	660	1	1/60	11
Healthcare Professionals	Basic Post-Course Evaluation	1200	1	3/60	60
Healthcare Professionals	Basic Long-Term Evaluation	400	1	3/60	20
Healthcare Professionals	Intensive Complete Post-Course Evaluation.	300	1	10/60	50
Healthcare Professionals	Intensive Complete Long-Term Evaluation.	120	1	6/60	12
Total					453

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, Office of Science, Centers for Disease Control and Prevention.

[FR Doc. 2026–01619 Filed 1–26–26; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–26–0976]

Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled ''Million Hearts® Hypertension Control Champions Challenge'' to the Office of Management and Budget (OMB) for review and approval. CDC previously published a ''2025 Million Hearts® Hypertension Control Champions Challenge'' notice on June 16, 2025 to obtain comments from the public and affected agencies. CDC received two comments related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.,* permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570. 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. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th

Street NW, Washington, DC 20503 or by fax to (202) 395–5806. Provide written comments within 30 days of notice publication.

Proposed Project

Million Hearts® Hypertension Control Champions Challenge (OMB Control No. 0920–0976, Exp. 3/31/2026)—Revision—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Cardiovascular disease is a leading cause of death for men and women in the United States, among the most costly health problems facing our nation today, and among the most preventable. Heart disease and stroke also contribute significantly to disability. High blood pressure, also known as hypertension, is one of the leading causes of heart disease and stroke. Currently, about 120 million American adults have high blood pressure but only 27 million or one in four adults with hypertension have their blood pressure adequately controlled. The costs of hypertension are estimated at $48.6 billion annually in direct medical costs.

In September 2011, CDC launched the Million Hearts® initiative to prevent one million heart attacks and strokes by 2017. In February 2022, CDC launched Million Hearts® 2027 to continue to prevent one million heart attacks, strokes, and related health conditions. In order to achieve this goal, at least 10 million more Americans must have their blood pressure under control. Million Hearts® is working to reach this goal through the promotion of clinical practices that are effective in increasing blood pressure control among patient populations. There is scientific evidence that provides general guidance on the types of system-based changes to clinical practice that can improve patient blood pressure control, but additional information is needed to fully understand implementation practices so that they can be shared and promoted.

In 2012, CDC launched the Million Hearts® Hypertension Control Challenge, authorized by Public Law 111–358, the America Creating Opportunities to Meaningfully Promote Excellence in Technology, Education and Science Reauthorization Act of 2010 (COMPETES Act). The Challenge is designed to help CDC (1) identify clinical practices and health systems that have been successful in achieving high rates of hypertension control, and (2) develop models for dissemination. The Challenge is open to single practice providers, group practice providers, and healthcare systems. Providers whose hypertensive population achieves exemplary levels of hypertension control are recognized as Million Hearts® Hypertension Control Champions.

Interested clinicians or practices complete a web-based application form which collects the minimum amount of data needed to demonstrate hypertension control among their adult patients, including: (a) Two point-in-time measures of the clinical hypertension control rate for the patient population; (b) the size of the clinic population served; (c) a brief description of the characteristics of the patient population served and geographic location; and (d) a description of the sustainable systems and strategies adopted to achieve and maintain hypertension control rates. The estimated burden for completing the application form is 30 minutes. CDC scientists or contractors review each application form and rank applications by reported hypertension control rate.

In the second phase of assessment, applicants with the highest preliminary scores are asked to participate in a two-hour data verification and validation process. The applicant reviews the application form with a reviewer, describes how information was obtained from the providers' (or practices') electronic records, chart reviews, or other sources, and reviews the methodology used to calculate the reported hypertension control rate. Data verification and validation is conducted to ensure that all applicants meet eligibility criteria and assure accuracy of their reported hypertension control rate according to a standardized method. Applicants must have achieved a hypertension control rate of at least 80% among their adult patients aged 18–85 years with hypertension.

Up to 35 finalists who pass the data verification and background check are selected as Champions. Several Champions participate in a one-hour, semi-structured interview and provide detailed information about the patient population served, the geographic region served, and the strategies employed by the practice or health system to achieve exemplary rates of hypertension control, including barriers and facilitators for those strategies. Based on the information collected for Challenges in 2013 through 2024, CDC recognized a total of 199 public and private health care practices and systems as Million Hearts® Hypertension Control Champions. The Champions are announced annually, approximately six months after the Challenge application period ends. The current OMB approval for information collection expires March 31, 2026.

CDC plans to conduct the Million Hearts® Hypertension Control Challenge annually through 2027. The 2026 Challenge is planned to launch in early 2026. The application period will be open for approximately 30–60 days, with recognition of the 2026 Champions in the fall of 2026.

The overall goal of the Million Hearts® initiative is to prevent one million heart attacks and strokes, and controlling hypertension is one focus of the initiative. CDC will use the information collected through the Million Hearts® Hypertension Control Challenge to increase widespread attention to hypertension at the clinical practice level, improve understanding of successful and sustainable implementation strategies at the practice or health system level, bring visibility to organizations that invest in hypertension control, and motivate individual practices to strengthen their hypertension control efforts. Information collected through the Million Hearts® Hypertension Control Challenge will link success in clinical outcomes of hypertension control with information about strategies that can be used to achieve similar favorable outcomes so that the strategies can be replicated by other providers and health care systems.

OMB approval is requested for three years. CDC requests OMB approval for an estimated 165 annual burden hours. Participation is voluntary. There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Clinicians, practices, and healthcare systems	Million Hearts® Hypertension Control Champion Application form.	100	1	30/60
Finalists	Data Verification Form	40	1	2
Champions	Semi-structured interview guide	35	1	1

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, Office of Science, Centers for Disease Control and Prevention.

[FR Doc. 2026–01614 Filed 1–26–26; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–26–0019; Docket No. CDC–2026–0101]

Proposed Data Collection Submitted for Public Comment and Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), as part of its continuing efforts to reduce public burden and maximize the utility of government information, invites the general public and other federal agencies the opportunity to comment on a proposed information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled, Evaluation of the Supporting Young Breast Cancer Survivors, Metastatic Breast Cancer Patients, and their Families Program. CDC is requesting to collect information about this program using a web-based survey and in-depth interviews to assess whether a specific cooperative agreement has been implemented as intended and to understand recipients' achievements of the program goals and outcomes.

DATES: CDC must receive written comments on or before March 30, 2026.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2026–0101 by either of the following methods:

- *Federal eRulemaking Portal: www.regulations.gov.* Follow the instructions for submitting comments.
- *Mail:* Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to *www.regulations.gov.*

Please note: Submit all comments through the Federal eRulemaking portal (*www.regulations.gov*) or by U.S. mail to the address listed above.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329; Telephone: 404–639–7570; Email: *omb@cdc.gov.*

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. In addition, the PRA also requires federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

1. Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
3. Enhance the quality, utility, and clarity of the information to be collected;
4. Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.,* permitting electronic submissions of responses; and
5. Assess information collection costs.

Proposed Project

Evaluation of the Supporting Young Breast Cancer Survivors, Metastatic Breast Cancer Patients, and their Families Program—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Supporting Young Breast Cancer Survivors, Metastatic Breast Cancer Patients, and their Families program is part of a nationwide initiative of the Centers for Disease Control and Prevention (CDC). In response to the 2010 Education and Awareness Requires Learning Young (EARLY) Act, CDC established the Young Breast Cancer Survivors (YBCS) program, which aims to increase the health and quality of life for women under 45 diagnosed with breast cancer. The YBCS program addresses the unique challenges young women diagnosed with breast cancer encounter such as late detection, aggressive treatment options, severe side effects from treatments, and reproductive health needs such as counseling about premature menopause or fertility changes, which can complicate their care. Recognizing the severity of late-stage cancer, the YBCS program expanded to include young metastatic breast cancer (MBC) patients as they often face significantly aggressive and costly treatments due to harder-to-treat subtypes. CDC awards cooperative agreements to organizations that