

16. Dilation of Peripheral Vascular System with Intraluminal Device
17. Restriction and Replacement of Thoracic Aorta with Self-expanding Intraluminal Device
18. Cardiac Conduction Mapping using Computed Tomography Angiography
19. Dilation using Image-Guided Crossing and Re-Entry Catheter System
20. Inspection of Hepatobiliary System and Pancreas using a Single Use Cholangioscope
21. Inspection of Hepatobiliary System and Pancreas using a Single Use Choledochoscope
22. Transcatheter Aortic Valve Replacement using an Integrated Leaflet Clipping Mechanism
23. Replacement of Pulmonary Valve with Size Adjustable Device
24. Insertion of a Cardiac Contractility Modulation Device with Defibrillator
25. Computer-Aided Detection and Notification Software for Electrocardiograms
26. Monitoring of Cardiac Electrical Activity using Computer-aided Detection and Assessment Software
27. Administration of clemidsogene lanparvovec-sngl
28. Administration of etuvetidigene autotemcel
29. Administration of ifezuntirgene inilparvovec
30. Allogeneic Stem Cell-Derived, Insulin-producing Islet cell Therapy for Hepatic Portal Vein Infusion
31. Administration of landiolol
32. Administration of elamipretide
33. Section X
34. Addenda and Reference Key Updates

CMS will not present the Spring 2026 ICD-10-PCS procedure code topics during a public meeting. Instead, CMS will post the procedure code topic materials and solicit public comments regarding any clinical questions or coding options consistent with the approach utilized for the Fall 2025 Update and have utilized as of March 2021 for the procedure code requests that involve a new technology add-on payment (NTAP) application for the administration of a therapeutic agent. The deadline to submit comments for procedure code topics being considered for an October 1, 2026, implementation is April 17, 2026.

Members of the public should send any questions or comments related to the procedure code topics that are under consideration for an October 1, 2026 implementation to the CMS mailbox at: [ICDProcedureCodeRequest@cms.hhs.gov](mailto:ICDProcedureCodeRequest@cms.hhs.gov) by the respective deadline.

All procedure code topic materials and related documents will be made available on the CMS website at <https://www.cms.gov/medicare/coding-billing/icd-10-codes/icd-10-coordination-maintenance-committee-materials>. Additionally, CMS will post a question-and-answer document to address any clinical or coding questions that members of the public submit by the designated April 17, 2026 deadline.

CDC, NCHS will make all meeting materials and related documents available at: <https://www.cdc.gov/nchs/icd/icd-10-maintenance/meetings.html>. Any inquiries related to the diagnosis code topics scheduled for the March 17–18, 2026, ICD-10 C&M Committee meeting should be sent to the CDC, NCHS mailbox at: [nchsicd10cm@cdc.gov](mailto:nchsicd10cm@cdc.gov).

#### ICD-10-CM Topics:

1. Biological Aging
2. Biomarkers for Alzheimer's Disease
3. COVID-19 Vaccination Adverse Effect
4. Detransition
5. Pneumothorax that occurs after CPR
6. Postprocedural open deep wound without disruption
7. Sepsis
8. Addenda

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

[FR Doc. 2026-03627 Filed 2-23-26; 8:45 am]

**BILLING CODE 4163-18-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

**[60Day-26-1422; Docket No. CDC-2026-0266]**

#### 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 effort 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 continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled: National Wastewater Surveillance System for Infectious Diseases to Inform Public Health Action. Data is collected by jurisdictions and submitted to CDC for analysis and presentation for public awareness and health actions.

**DATES:** CDC must receive written comments on or before April 27, 2026.

**ADDRESSES:** You may submit comments, identified by Docket No. CDC-2026-0266 by either of the following methods:

- *Federal eRulemaking Portal:* [www.regulations.gov](http://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](http://www.regulations.gov).

**Please note:** Submit all comments through the *Federal eRulemaking portal* ([www.regulations.gov](http://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](mailto: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**

National Wastewater Surveillance System for Infectious Diseases to Inform Public Health Action (OMB Control No. 0920-1422, Exp. 12/31/2026)—Revision—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC)

**Background and Brief Description**

The National Wastewater Surveillance System (NWSS) was established in 2020 at CDC and continues to serve as a public health tool to provide wastewater surveillance for SARS-CoV-2. It has since expanded to include wastewater surveillance for emerging infectious diseases of public health concern such as Influenza, RSV, monkeypox virus, and measles, and is designed to permit

the rapid addition or exchange of infectious disease targets for wastewater testing. This built-in flexibility will allow jurisdictions to adapt wastewater surveillance to changing public health needs, enable rapid responses to outbreaks or emergencies, and support broad capacity to detect future infectious disease threats.

Wastewater surveillance provides aggregated, anonymized data at the community level to indicate RSV and influenza infection trends, measles prevalence, and data on other infectious disease targets. This data collection could also help inform jurisdictions early about outbreaks leading to efficient resource allocation, providing health departments with additional, independent surveillance data to assess community-level infections.

CDC requests OMB approval for an additional three years and for an estimated 453,505 annual burden hours. There are no costs to respondents other than their time to participate.

**ESTIMATED ANNUALIZED BURDEN HOURS**

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Annual burden hours
State, tribal, local, territorial health departments.	Component 1 Forms: ..... <ul style="list-style-type: none"> <li>• Attachment-02 NWSS Data Dictionary_v6.2.1_2025-09-29_NEW.</li> <li>• Attachment-03 Wastewater_Master-Reference-Guide_v4-2-2.</li> <li>• Attachment-04 Component-1_BioSample_ww_template_v1.9_NWSS.csv.</li> <li>• Attachment-05 SRA_ww_template_v5.8_NWSS.csv</li> <li>• Attachment-06 Component-1_NCBI_DCIPHER_Crosswalk_DataDictionary.csv_NEW.</li> <li>• Attachment-07 Component-1-2_NWSS_DCIPHER_CSVBulkUploadTool_screenshot.pdf.</li> <li>• Attachment-08 Component-1_NWSS_1CDP_Wastewater_Data_CSV_Upload_Template_v4_All_Fields_NEW.csv.</li> </ul>	64	2,080 .....	139/60	308,395.
Private laboratory .....	Component 1 Forms: ..... <ul style="list-style-type: none"> <li>• Attachment-02 Component-1_NWSS Data Dictionary_v5.0.0.</li> <li>• Attachment-03 Component-1_CDC_seq_manifest_data_dict.csv.</li> <li>• Attachment-04 Component-1_BioSample_ww_template_v1.9_NWSS.csv.</li> <li>• Attachment-05 Component-1_SRA_ww_template_v5.7_NWSS.csv.</li> <li>• Attachment-06 Component-1_NCBI_DCIPHER_Crosswalk_DataDictionary.csv.</li> <li>• Attachment-07 Component-1-2_NWSS_DCIPHER_CSVBulkUploadTool_screenshot.pdf.</li> <li>• Attachment-08 Component-1_NWSS_1CDP_Wastewater_Data_CSV_Upload_Template_v4_All_Fields_NEW.csv.</li> <li>• Attachment-10 Component-1_CDC_seq_manifest_data_dict.xlsx.</li> </ul>	1	Up to 62,400 (800 samples per week plus 400 sequenced samples per week is 62,400 annually).	139/60	144,560.
State, tribal, local, territorial health departments and wastewater utilities.	Component 2 Forms: ..... <ul style="list-style-type: none"> <li>• Sewershed spatial files, no form required.</li> <li>• Attachment-07 Component-1-2_NWSS_DCIPHER_CSVBulkUploadTool_screenshot.pdf.</li> <li>• Attachment-09 Component-2_NWSS_DCIPHER_Sewershed_Name_Crosswalk_CSV_Upload_Template_NEW.</li> </ul>	213	1 .....	155/60	550 (collection only required once).
Total .....	.....	.....	.....	.....	453,505.

**Jeffrey M. Zirger,**

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

[FR Doc. 2026-03599 Filed 2-23-26; 8:45 am]

**BILLING CODE 4163-18-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

[Office of Management and Budget #: 0970-0599]

**Submission for Office of Management and Budget Review; Office of Refugee Resettlement Services for Survivors of Torture Program Data Points and Performance Progress Report**

**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 Administration for Children and Families’ (ACF) Office of Refugee Resettlement (ORR) intends to continue collecting demographic, programmatic, and outcome data on Services for Survivors of Torture (SOT) grant recipients and the clients they serve. ORR collects information from the grantee cohort under the Survivors of Torture Program Data Points (PDP) and Program Performance Progress

Report (PPR) (Office of Management and Budget (OMB) #0970-0599; Expiration date: February 28, 2026) to learn more about the populations served; the types and effectiveness of services provided; methods, challenges, and facilitators of implementing services; and grant recipients’ progress towards programmatic goals. Revisions are proposed as described in the discussion section that follows.

**DATES:** *Comments due* March 26, 2026.

**ADDRESSES:** The public may view and comment on this information collection request at: [https://www.reginfo.gov/public/do/PRAViewICR?ref\\_nbr=202602-0970-009](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202602-0970-009). You can also obtain copies of the proposed collection of information by emailing [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). Identify all emailed requests by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**

*Description:* ORR proposes to continue to use the PDP Form and PPR, with revisions, to collect data on the Services for SOT grant recipients and their clients.

The recipients will continue to report their PDP through the ORR Refugee Arrivals Data System (RADS), an information technology platform used for enhanced data collection and record keeping.

Grant recipients will provide aggregated data on new and continuing clients annually, including demographic information, characteristics related to experiences of torture, services received,

length of service, and wellbeing across six outcome domains.

Grant recipients will also provide information about community attendance at trainings and pro-bono services donated to the program. In the PPR, grant recipients will provide program narrative and program metric information on grant-funded activities and progress towards grant goals semi-annually.

Information collected will be used in aggregate by ORR to provide reports to stakeholders, including a required Report to Congress, and responses to funding requests.

ORR has made changes to the data collection, which include removing a total of twelve subcategories for two program indicators and reducing the frequency of reporting percentage-based outcomes in the program metrics. ORR has also added one subcategory in one program indicator. Overall, these changes have reduced the estimated reporting burden by 30 percent.

*Respondents:* Services for SOT grant programs (this may include non-profit social service, health, and higher education organizations, states, municipalities, and for-profit organizations).

*Annual Burden Estimates:* Estimated annual burden has been updated to reflect a reduction in estimated time per response from an average of 6 hours per response to an average of 4 hours per response.

Instrument	Total number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual burden hours
PDP Form .....	35	1	4.2	147
PPRs—Parts A and B .....	35	2	4.2	294
<b>Total Annual Burden .....</b>	<b>.....</b>	<b>.....</b>	<b>.....</b>	<b>441</b>

*Authority:* Section 5(a) of the “Torture Victims Relief Act of 1998,” Public Law 105-320 (22 U.S.C. 2152 note) Assistance for Treatment of Torture Victims.

**Mary C. Jones,**

*ACF/OPRE Certifying Officer.*

[FR Doc. 2026-03617 Filed 2-23-26; 8:45 am]

**BILLING CODE 4184-46-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. FDA-2026-N-0686]

**Agency Information Collection Activities; Proposed Collection; Comment Request; Current Good Manufacturing Practice in Manufacturing, Packaging, Labeling, or Holding Operations for Dietary Supplements**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA or Agency) is announcing an opportunity for public comment on the proposed collection of certain information by the Agency. 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 of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on the information collection provisions of FDA’s regulations regarding current good