

*Burden Statement:* Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose

of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to

transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

*Total Estimated Annualized Burden Hours:*

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Rural Health Network Development Planning Program Performance Measures .....	25	1	25	11.25	281.25
Total .....	25	1	25	11.25	281.25

**Maria G. Button,**  
 Director, Executive Secretariat.  
 [FR Doc. 2026-07647 Filed 4-17-26; 8:45 am]  
 BILLING CODE 4165-15-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

[Document Identifier: OS-0955-0019]

**Agency Information Collection Request; 60-Day Public Comment Request**

**AGENCY:** Office of the National Coordinator for Health IT, Office of the Secretary, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with the requirement of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment.

**DATES:** Comments on the ICR must be received on or before June 22, 2026.

**ADDRESSES:** When commenting, please reference the document identifier/OMB control number OS-0955-0019 and title of collection, “National Survey of Health Information Exchange Organizations (HIO)”. You may send your comments electronically to Wei Chang, [wei.chang@hhs.gov](mailto:wei.chang@hhs.gov).

**FOR FURTHER INFORMATION CONTACT:** To obtain copies of supporting material for the proposed collection(s) summarized in this notice, please include the document identifier OS-0955-0019 and title of collection “National Survey of Health Information Exchange Organizations (HIO)” for reference, and address inquiries to Wei Chang, [wei.chang@hhs.gov](mailto:wei.chang@hhs.gov), or call 202-706-8913.

**SUPPLEMENTARY INFORMATION:** Interested persons are invited to send comments

regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency’s functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

*Title of the Collection:* National Survey of Health Information Exchange Organizations (HIO).

*Type of Collection:* Revision of a previously approved collection.

*OMB No.:* 0955-0019.

*Abstract:* Electronic health information exchange (HIE) was one of three goals specified by Congress in the 2009 Health Information Technology for Economic and Clinical Health (HITECH) Act to ensure that the \$30 billion federal investment in certified electronic health records (EHRs) resulted in higher-quality, lower-cost care. Subsequent legislation and regulations have continued to prioritize the sharing of data electronically across EHRs and other health information systems. Within the Department of Health and Human Services, the Office of the National Coordinator for Health IT (hereafter ONC) is responsible for coordinating across the federal government, industry, and the health care community to achieve nationwide interoperability of electronic health information exchange. Health information exchange organizations (HIOs) play a pivotal role facilitating health information exchange across disparate providers, labs, pharmacies, public health departments, and others. This information collection request will gather data from HIOs across the nation through the administration of a survey

of HIOs to generate the most current national statistics and associated actionable insights to inform policy efforts. The timely collection of national data from our survey will assess current capabilities of HIOs to support effective electronic information sharing within the U.S. health care system and further aims to achieve nationwide interoperability.

Since prior to HITECH there has been ongoing assessment of trends in the capabilities of HIOs to support clinical exchange through nationwide surveys of HIOs. These prior surveys and studies have collected data on organizational structure, financial viability, geographic coverage, scope of services, implementation and use of standards, perceptions of information blocking, support for public health exchange, and participation in networks and the Technical Exchange Framework and Common Agreement (TEFCA). Continuing the ongoing data collection will be critical to construct a current and comprehensive picture of HIOs’ role in facilitating exchange and ensuring rapid access to important health care data and information when it matters most, including vital data to address public health emergencies.

The survey will collect data on HIO capabilities to support electronic health information exchange, their maturity, and challenges they face. There are five key areas that require assessment: (1) adoption of technical standards; (2) perceptions related to information blocking; (3) network-to-network connectivity and TEFCA; (4) public health data exchange; and (5) organizational demographics, including technical capabilities offered by HIOs and the challenges they face in supporting electronic health information exchange.

The survey is being revised (previously approved in 2022 and 2024;

OMB Control No: 0955–0019) to reflect progress made and ongoing efforts in areas including public health, TEFCAs, and information blocking to ensure alignment with current priorities such as improving public health interoperability and Make Health Tech Great Again. These updates were developed in consultation with subject matter experts (SMEs) to improve the

relevance, clarity, and usefulness of the data collected in all five key areas of the survey. For example, certain questions with low response rates and have lower relevance to current priorities have been removed or reorganized. Some question and response wording have also been updated to ensure consistency with current policy efforts. For example, in the TEFCAs section, the list of Qualified

Health Information Networks (QHINs) have been updated to reflect the current list. These changes are intended to reduce respondent burden and improve overall data quality while maintaining continuity with prior surveys where appropriate.

This is a 3-year request for OMB approval.

ANNUALIZED BURDEN HOUR TABLE

Forms (if necessary)	Respondents (if necessary)	Number of respondents	Number of responses per respondents	Average burden per response (hours)	Total burden hours
	U.S. based public and private HIOs	100	1	0.75	75
Total .....	.....	.....	.....	.....	75

Based on a review of the information collection since our last request for OMB approval, we have made no adjustments to our burden estimate.

**Catherine Howard,**  
*Paperwork Reduction Act Reports Clearance Officer, Office of the Secretary.*  
 [FR Doc. 2026–07642 Filed 4–17–26; 8:45 am]  
**BILLING CODE 4150–45–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Institute of Dental & Craniofacial Research; Notice of Meeting**

Pursuant to section 1009 of the Federal Advisory Committee Act, as amended, notice is hereby given of a meeting of the National Advisory Dental and Craniofacial Research Council.

The meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting. The open session will be videocast and can be accessed from the NIH Videocasting website (<https://videocast.nih.gov/watch/ed58a6b7-015a-11f1-9f14-124f0a52e769>). Registration is not required to access the videocast.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial

property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* National Advisory Dental and Craniofacial Research Council.

*Date:* May 19–20, 2026.  
*Closed:* May 19, 2026, 4:00 p.m. to 5:30 p.m.

*Agenda:* To review and evaluate grant applications.

*Address:* Porter Neuroscience Research Center, Building 35A, Rooms 620–640, 35 Convent Drive, Bethesda, MD 20892.

*Meeting Format:* In Person and Virtual Meeting.

*Open:* May 20, 2026, 9:00 a.m. to 12:30 p.m.

*Agenda:* Report of the Director, NIDCR and concept clearances.

*Address:* Porter Neuroscience Research Center, Building 35A, Rooms 620–640, 35 Convent Drive, Bethesda, MD 20892.

*Meeting Format:* In Person and Virtual Meeting.

*Contact Person:* Sanoj Suneja, Ph.D., Acting Director, Division of Extramural Activities, National Institute of Dental and Craniofacial Research, National Institutes of Health, 31 Center Drive, Bethesda, MD 20892, 301–402–7710, [sunejas@mail.nih.gov](mailto:sunejas@mail.nih.gov).

The meeting identified below has been scheduled in the event the Council is unable to complete all agenda items identified for the May 19, 2026, meeting. Information on the agenda items and/or the necessity to hold the meeting listed below will be posted on the Institute/Center homepage (link identified below).

*Name of Committee:* National Advisory Dental and Craniofacial Research Council.

*Date:* July 9, 2026.  
*Closed:* July 9, 2026, 3:00 p.m. to 5:00 p.m.

*Agenda:* To review and evaluate grant applications not completed at the May meeting.

*Address:* National Institutes of Health, National Institute of Dental and Craniofacial Research, 31 Center Drive, Bethesda, MD 20892.

*Meeting Format:* Virtual Meeting.

*Contact Person:* Sanoj Suneja, Ph.D., Acting Director, Division of Extramural Activities, National Institute of Dental and Craniofacial Research, National Institutes of Health, 31 Center Drive, Bethesda, MD 20892, 301–402–7710, [sunejas@mail.nih.gov](mailto:sunejas@mail.nih.gov).

Information is also available on the Institute’s/Center’s home page: <http://www.nidcr.nih.gov/about>, where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program No. 93.121, Oral Diseases and Disorders Research, National Institutes of Health, HHS)

Dated: April 15, 2026,  
**Rosalind M. Niamke,**  
*Program Analyst, Office of Federal Advisory Committee Policy.*

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**BILLING CODE 4140–01–P**