Title: Procedures for Formal Complaints.

Form Number: FCC Form 485.

Type of Review: Extension of a currently-approved collection.

Respondents: Individuals or Households, Business or other for-Profit Entities, Not-for-Profit institutions, Federal Government, and State, Local, or Tribal governments.

Number of Respondents and Responses: 2 respondents; 6 responses.

Estimated Time per Response: 1–68 hours.

Frequency of Response: Recordkeeping requirement, on-occasion reporting requirement, and third-party disclosure requirement.

Obligation to Respond: Required to obtain or retain benefits. Statutory authority for this information collection is contained in 47 U.S.C. 151, 154(i), 154(j), 206, 207, 208, 209, 301, 303, 304, 309, 316, 332, and 1302.

Total Annual Burden: 151 hours.

Total Annual Cost: $39,600.

Needs and Uses: Sections 206–209 of the Communications Act of 1934, as amended (the ''Act''), provide the statutory framework for adjudicating formal complaints against common carriers. To resolve complaints between providers regarding compliance with data roaming obligations, Commission Rule 20.12(e) adopts by reference the procedures already in place for resolving Section 208 formal complaints against common carriers, except that the remedy of damages, is not available for complaints against commercial mobile data service providers. Commission Rule 64.6217(c) adopts the procedures already in place for resolving Section 208 formal complaints for the purpose of resolving complaints against programs certified under the National Deaf-Blind Equipment Distribution Program (''NDBEDP'').

Section 208(a) authorizes complaints by any person ''complaining of anything done or omitted to be done by any common carrier'' subject to the provisions of the Act.

Section 208(a) states that if a carrier does not satisfy a complaint or there appears to be any reasonable ground for investigating the complaint, the Commission shall ''investigate the matters complained of in such manner and by such means as it shall deem proper.'' Certain categories of complaints are subject to a statutory deadline for resolution. See, *e.g.,* 47 U.S.C. 208(b)(1) (imposing a five-month deadline for complaints challenging the ''lawfulness of a charge, classification, regulation, or practice''); 47 U.S.C. 271 (d)(6) (imposing a 90-day deadline for complaints alleging that a Bell Operating Company has ceased to meet conditions imposed in connection with approval to provide in-region interLATA services).

Formal complaint proceedings before the Commission are similar to civil litigation in federal district court. In fact, under section 207 of the Act, a party claiming to be damaged by a common carrier may file its complaint with the Commission or in any district court of the United States, ''but such person shall not have the right to pursue both such remedies'' (47 U.S.C. 207). The Commission has promulgated rules (Formal Complaint Rules) to govern its formal complaint proceedings that are similar in many respects to the Federal Rules of Civil Procedure. See 47 CFR 1.720–1.736. These rules require the submission of information from the parties necessary to create a record on which the Commission can decide complex legal and factual issues. As described in section 1.720 of the rules, the Commission resolves formal complaint proceedings on a written record consisting of a complaint, answer or response, and joint statement of stipulated facts, disputed facts and key legal issues, along with all associated affidavits, exhibits and other attachments.

This collection of information includes the process for electronically submitting a formal complaint against a common carrier. The Commission uses this information to determine the sufficiency of complaints and to resolve the merits of disputes between the parties. The Commission bases its orders in formal complaint proceedings upon evidence and argument produced by the parties in accordance with the Formal Complaint Rules. If the information were not collected, the Commission would not be able to resolve common carrier-related complaint proceedings, as required by section 208 of the Act.

In addition, the Commission has adopted most of this formal complaint process to govern data roaming complaints. Specifically, the Commission has extended, as applicable, the procedural rules in the Commission's Part I, Subpart E rules, 47 CFR 1.716–1.718, 1.720, 1.721, and 1.723–1.735, to disputes arising out of the data roaming rule contained in 47 CFR 20.12(e).

Further, the Commission has adopted this formal complaint process to govern complaint proceedings against programs certified under the National Deaf-Blind Equipment Distribution Program (''NDBEDP'') as authorized by 47 CFR 64.6217(c).

Therefore, in addition to being necessary to resolve common carrier-related complaint proceedings, this collection of information is also necessary to resolve data roaming-related complaint proceedings.

Federal Communications Commission.

Marlene Dortch,

Secretary. Office of the Secretary.

[FR Doc. 2026–08271 Filed 4–28–26; 8:45 am]

BILLING CODE 6712–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

Statement of Delegation of Authority

Notice is hereby given that I have delegated to the Administrator, Centers for Medicare & Medicaid Services (CMS), the authorities vested in the Secretary of Health and Human Services (HHS) under 45 CFR 95.611(a)(4), the Advance Planning Document (APD) process. The APD process governs the authority pertaining to coordination and approval of multi-program state requests for Federal Financial Participation (FFP) for Title XIX and Title XXI expenditures for the acquisition of automated data processing equipment or services when submitted in combination with one or more of the programs under Titles IV–B, IV–D, and IV–E of the Social Security Act. The regulation allows the Secretary to designate an entity to coordinate the review of multi-program APDs across HHS Operating Divisions (Divisions). The designated entity ensures coordinated review across CMS, the Administration for Children and Families (ACF), and other Divisions. These APDs are essential for states to obtain FFP for critical information technology projects supporting Medicaid, the Children's Health Insurance Program, Child Support Enforcement, and Child Welfare. These systems underpin major safety-net programs.

This delegation rescinds the delegation of authority to ACF dated November 8, 2017, to the extent that it granted to ACF the authority to coordinate review and grant approval of multi-program APDs that included Title XIX and XXI program requests. The authority to coordinate and grant approvals of multi-program requests related only to programs under Titles IV–B, IV–D, and IV–E of the Social Security Act will be retained by ACF.

This delegation will be exercised in accordance with HHS's applicable

policies, procedures, guidelines, and regulations.

These authorities may be redelegated, but not below the level of the Director, Division of Performance and Organizational Programs, Office of Human Capital, CMS or its successor. Exercise of this authority shall be in accordance with established policies, procedures, guidelines, and regulations as prescribed by the Secretary. The Secretary retains the authority to promulgate regulations.

This delegation is effective immediately. I hereby affirm and ratify any actions taken by you or your subordinates that involved the exercise of the authorities delegated herein prior to the effective date of the delegation.

Robert F. Kennedy, Jr.,

Secretary, Department of Health and Human Services.

[FR Doc. 2026–08337 Filed 4–28–26; 8:45 am]

BILLING CODE 4150–28–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970–0545]

Submission for Office of Management and Budget Review; Next Generation of Enhanced Employment Strategies Project

AGENCY: Office of Planning, Research, and Evaluation, 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 Planning, Research, and Evaluation (OPRE) is requesting a one-year extension to one of the data collection activities conducted for the Next Generation of Enhanced Employment Strategies (NextGen) Project, the second follow-up survey (OMB #0970–0545, expiration April 30, 026).

DATES: *Comments due May 29, 2026.*

ADDRESSES: The public may view and comment on this information collection request at: *https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202604-0970-008.* You can also obtain copies of the proposed collection of information by emailing *opreinfocollection@acf.hhs.gov.* Identify all emailed requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: OPRE is conducting the NextGen Project to test innovative employment programs designed to help people facing complex challenges (such as physical and mental health conditions, criminal justice system involvement, or limited formal work skills and experience) secure economic independence. The project is partnering with the Social Security Administration to incorporate a focus on employment-related early interventions for people with current or foreseeable disabilities who have limited work history and are potential applicants for Supplemental Security Income.

The project includes an impact study, descriptive study, and cost study. The descriptive and cost studies are now complete. The impact study has concluded enrolling participants and fielding the first follow-up survey. OPRE seeks approval for an extension, without change, to one of the currently approved data collection activities for the impact study, the second follow-up survey. This survey collects data on key outcomes of interest, including service receipt, employment, earnings, economic independence, well-being, health status, substance use, and involvement in the criminal justice system. The second follow-up survey allows the study to assess NextGen programs' impact on these participant outcomes 18 to 21 months after student enrollment, depending on the program. Reporting on the intermediate-term impacts of the programs is critical for fully understanding the programs' effectiveness given that some outcomes are not likely to emerge until 18 to 21 months after program entry. OPRE seeks a one-year extension to capture additional responses to the second follow-up survey and ensure low differential attrition between the treatment and control groups at each NextGen program. Without this extension, participants who enrolled in NextGen most recently would be less likely to have their data captured, which could compromise data quality. The extension is requested to allow all participants to have follow-up periods of similar length (up to six months), which is likely to reduce nonresponse bias in impact estimates of the effectiveness of each NextGen program.

Respondents: Individuals enrolled in the NextGen Project.

Annual Burden Estimates:

This extension request does not change the average burden per response for the remaining data collection. The total/annual burden estimates under this request are for an additional one year of data collection through April 2027. All other previously approved data collection activities under this OMB number have been completed.

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total/annual burden (in hours)
Second follow-up survey—participants	160	1	0.83	133

Authority: Section 413 of the Social Security Act, as amended by the fiscal year 2017 Consolidated Appropriations Act, 2017 (Public Law 115–31).

Mary C. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2026–08308 Filed 4–28–26; 8:45 am]

BILLING CODE 4184–09–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2026–N–4390]

AI-Enabled Optimization of Early-Phase Clinical Trials Pilot Program; Request for Information

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice; request for information.

SUMMARY: The Food and Drug Administration (FDA or the Agency) is issuing this request for information to solicit input on a proposed pilot program to assess how artificial intelligence (AI)-enabled technologies can improve efficiency, speed, and quality of decision-making in early phase clinical trials. Early-phase clinical trials represent a critical bottleneck in drug development, often characterized by high uncertainty, limited patient populations, and inefficient decision-