

for a modification to the MTTCA clearance that granted a three-year Extension and an increase in respondents and burden hours. This MTTCA clearance was approved with 44,216 annualized responses and 10,998 annualized burden hours. In 2018, OSH obtained approval for an Extension to the MTTCA clearance that increased the annualized number of respondents to 46,108 and decreased the annualized burden hours to 7,070. CDC's authority to collect information for public health purposes is provided by the Public Health Service Act (41 U.S.C. 241) Section 301.

CDC has employed the MTTCA clearance to collect information about adult smokers' and nonsmokers' attitudes and perceptions, and to pretest draft messages and materials for clarity, salience, appeal, and persuasiveness. The MTTCA clearance has been used to obtain OMB approval for a variety of message testing activities, with particular emphasis on communications supporting CDC's National Tobacco Education Campaign (NTEC) called the *Tips from Former Smokers*® campaign. This national campaign is designed to

increase public awareness of the health consequences of tobacco use and exposure to secondhand smoke. The MTTCA clearance has also supported formative research relating to the development of health messages that are not specifically associated with the national campaign.

Information collection modes under the MTTCA clearance that are supported include in-depth interviews; in-person focus groups; online focus groups; in-person, or telephone interviews; and online surveys. Each project approved under the MTTCA framework is outlined in a project-specific Information Collection Request (ICR) that describes its purpose and methodology. Messages developed from MTTCA data collection have been disseminated via multiple media channels including television, radio, print, out-of-home, and digital formats.

CDC requests OMB approval to extend the MTTCA clearance, with changes, for three years. No modification is requested for information collection activities, methodology, or populations of interest from the existing approved Generic Clearance. The Extension and

requested changes are needed to support CDC's planned information collections and to accommodate additional needs that CDC may identify during the next three years. For example, the MTTCA Generic Clearance may be used to facilitate the development of tobacco-related health communications of interest for CDC's collaborative efforts with other federal partners including, but not limited to, the Food and Drug Administration's Center for Tobacco Products. The MTTCA clearance should not replace the need for additional Generic Clearance mechanisms of HHS and other federal partners that may need to test tobacco partners related to their campaigns and initiatives.

The existing MTTCA clearance was granted approval for a total of 148,324 respondents and 20,039 annual burden hours over a three-year period. The MTTCA Extension would provide approval for the same number of respondents and the same burden hours. CDC will continue to use the MTTCA clearance to develop and test messages and materials. Participation is voluntary and there are no costs to respondents, other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	Data collection method	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
General public and special populations.	Screening	74,386	1	2/60	2,480
	In-Depth Interviews (In Person, Online)	25	1	1	25
	Focus Groups (In Person, Online)	628	1	1.5	942
	Surveys (Online, Short)	71,000	1	20/60	15,453
	Surveys (Online, Medium)	2,733	1	13/60	1,139
Total	20,039

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 Office of Public Health Ethics and
 Regulations, Office of Science, Centers for
 Disease Control and Prevention.*
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970-0486]

Submission for Office of Management and Budget Review; 2024-2025 Low Income Home Energy Assistance Program (LIHEAP) Residential Energy Consumption Survey (RECS) Data Match

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

ACTION: Request for public comments.

SUMMARY: The Office of Community Services (OCS) is requesting a reinstatement with changes for the collection and reporting of administrative household recipient data from state Low Income Home Energy Assistance Program (LIHEAP) grant recipients. The LIHEAP Residential Energy Consumption Survey (RECS) Data Match request is completed approximately every 5 years, to support research and analysis of LIHEAP program impacts. The Office of Management and Budget (OMB) approved the original collection under #: 0970-0486. ACF published a **Federal Register** notice on February 13, 2026 soliciting 60 days of public comment on requiring state grant recipients to provide household-level recipient data for fiscal years (FYs) 2024 and 2025 and

proposed revisions aimed to reduce the reporting burden by approximately 30 percent compared to the last such data collection in 2021. ACF received one comment in response to that notice.

DATES: *Comments due June 4, 2026.*

ADDRESSES: The public may view and comment on this information collection request at: https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202604-0970-011. 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: Congress established the LIHEAP block grant (42 U.S.C. 8621 *et seq.*) under Title XXVI of the Omnibus Budget Reconciliation Act of 1981, Public Law 97–35, as amended. OCS administers LIHEAP at the federal level.

The LIHEAP statute requires the U.S. Department of Health and Human Services (HHS) to report to Congress annually on program impacts on recipient and eligible households. The primary program goals, as articulated in the statute, are to ensure that benefits are targeted to those households where the greatest program impacts are expected, and to assure that timely resources are available to households experiencing home energy crises.

OCS is seeking to collect data from all state LIHEAP grant recipients and the District of Columbia that will allow OCS to identify LIHEAP recipients that respond to the RECS, and support research and analysis of LIHEAP program impacts. The U.S. Energy Information Administration (EIA) conducted the 2024 RECS in 2024 and early 2025. EIA conducts this survey to provide periodic national and regional data on residential energy use in the United States. OCS uses RECS data to furnish Congress and HHS with important national and regional descriptive data on the energy needs of households with low incomes, as required by the LIHEAP statute (42 U.S.C. 8629). Specific data elements OCS is seeking to collect are detailed below.

ACF is proposing to request the majority of the data elements included in the 2021 request through which state LIHEAP grant recipients provided household-level recipient data to identify LIHEAP recipients that participated in the 2020 RECS. For the upcoming 2024–2025 LIHEAP RECS data match, ACF proposes to eliminate

eight data fields compared to the prior data request: Household name, household telephone number, date of heating assistance, date of cooling assistance, date of crisis assistance, other assistance awarded, amount of other assistance, and date of other assistance. These elements were determined to be either duplicative data from other sources or are not essential to determining residential energy consumption and expenditures. The LIHEAP annual Household Report (OMB Control No. 0970–0060), completed by grant recipients, gives OCS data on household make up. Similarly, the LIHEAP Performance Data report (OMB Control No. 0970–0449) provided OCS with an overview of crisis assistance and expenditures. With these reports, OCS determined the eight elements were not necessary for this data collection. Additionally, ACF has streamlined the brief instructions to state grant recipients.

The LIHEAP data collected for this effort will be used by OCS to study and report on the impact of LIHEAP on income eligible and recipient households in accordance with 42 U.S.C. 8629(b)(2). The information is being collected for use in development of the Department’s annual LIHEAP Report to Congress and the annual LIHEAP Home Energy Notebook. The collection of this data is authorized by the LIHEAP statute, which requires the Secretary of HHS, following consultation with the Secretary of Energy, to provide for the collection of specific information on the characteristics of LIHEAP recipient and LIHEAP eligible households within each state and the RECS provides detailed data on residential end uses of energy. This includes collecting information that is reasonably necessary to carry out the provisions of the LIHEAP statute if that information is not collected by any other agency of the federal government.

State LIHEAP grant recipients will be asked to furnish data for LIHEAP beneficiary households that reside in areas included in the RECS sample.

Consistent with prior requests, state LIHEAP grant recipients will be asked to furnish the following data for LIHEAP recipient households that reside in areas included in the RECS sample:

- Address (including ZIP code)
- Gross Income
- Household Size
- Household or Client ID
- Heating assistance awarded
- Amount of heating assistance

- Cooling assistance awarded
- Amount of cooling assistance
- Crisis assistance awarded
- Amount of crisis assistance
- Presence of children 5 or younger
- Presence of adult 60 or older
- Presence of member with a disability

The following are additional optional data items that grantees can provide if the data are already available in your database:

- Tenancy (*i.e.*, own or rent)
- Type(s) of fuel used
- Heat included in rent

The RECS provides detailed data on residential end uses of energy. This data will also help ACF to analyze specific information for the LIHEAP recipient population in accordance with 42 U.S.C. 8629(b)(2), including information related to benefits targeting, energy usage, and energy insecurity, and it will support analysis of LIHEAP data for the annual Report to Congress and the annual LIHEAP Home Energy Notebook. The collection of this data is authorized in 42 U.S.C. 8629(a) and 42 U.S.C. 8623(a)(4).

State LIHEAP grant recipients can provide the data elements in the selected format of their choosing.

The privacy of client data will be strictly protected as part of the project. OCS plans to maximize rapid file transfer technology by using a secure internet site that employs File Transfer Protocol. LIHEAP application client waivers allow grant recipients to share information with OCS and its contractor(s).

ACF received one comment on the proposed data collection in response to the initial notice for comments in the **Federal Register** (90 FR 6847). The commenter indicated concurrence with the proposed information collection and emphasized a need for one-on-one assistance with fulfilling the request. OCS concurs and confirms that one-on-one assistance will be provided proactively to each state LIHEAP grant recipient regarding how to transfer the requested data.

Respondents: 51 (state governments and the District of Columbia).

Annual Burden Estimates

Eliminating data elements and streamlining instructions is expected to reduce the estimated time per response from 24 to 16 hours, which is a 33 percent reduction in burden compared to the 2021 request.

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total annual burden hours
2024–2025 LIHEAP RECS Data Match	51	1	16	816

Additional Information: As LIHEAP is a block grant, there is varying capacity to collect and report data among grant recipients. The estimated burden hours displayed above are for the average LIHEAP grant recipient. All LIHEAP grant recipients have existing data systems to collect, maintain, and analyze this data to complete annual reporting requirements. This data collection will only be done once in the short to mid-term future because the RECS is only conducted every 5 years or so.

Authority: 42 U.S.C. 8629(a)

Mary C. Jones,

ACF/OPRE Certifying Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Findings of Research Misconduct

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: Findings of research misconduct have been made against Ariel Fernandez, Ph.D. (also known as Ariel Fernandez Stigliano), former Karl F. Hasselmann Chaired Professor of Engineering, Department of Bioengineering, Rice University. Dr. Fernandez engaged in research misconduct under 42 CFR part 93 in research supported by U.S. Public Health Service (PHS) funds, specifically National Institute of General Medical Sciences (NIGMS), National Institutes of Health (NIH), grant R01 GM072614. Administrative actions, including debarment for a period of fifteen (15) years, were implemented and are detailed below.

FOR FURTHER INFORMATION CONTACT:

Sheila R. Garrity, JD, MPH, MBA, Director, Office of Research Integrity, 1101 Wootton Parkway, Suite 240, Rockville, MD 20852, (240) 453–8200.

SUPPLEMENTARY INFORMATION: Notice is hereby given that the Office of Research Integrity (ORI) and the Suspension and Debarment Official (SDO) have taken final action in the following case:

Ariel Fernandez, Ph.D., Rice University (Rice): Based on evidence

and findings of an investigation conducted by Rice, ORI's oversight review of Rice's investigation, and additional evidence obtained and analysis conducted by ORI during its oversight review, ORI found that Dr. Ariel Fernandez (Respondent), former Karl F. Hasselmann Chaired Professor of Engineering, Department of Bioengineering, Rice, engaged in research misconduct under 42 CFR part 93¹ in research supported by PHS funds, specifically NIGMS, NIH, grant R01 GM072614.

ORI found by a preponderance of the evidence that Respondent intentionally, knowingly, or recklessly fabricated and/or falsified the synthesis of six (6) novel chemical compounds; figures of Western blots and confocal microscopy images by copying, manipulating, and relabeling images; and the results of spectrophotometric kinetic assays, high-throughput kinase screening, cell proliferation assays, adsorption/desorption assays, and ATP production assays in twelve (12) PHS-supported papers, four (4) PHS-supported submitted, unpublished manuscripts, one (1) PHS-supported presentation, and three (3) PHS grant applications submitted for PHS funds. ORI found that these acts constitute a significant departure from accepted practices of the relevant research community. The affected published and unpublished papers, grant applications, and presentation are:

- *Structure* 2005;13:1829–36. doi: 10.1016/j.str.2005.08.018 (hereafter referred to as “*Struct05*”). Notice of addendum and supporting information: *Structure* 2006;14:947. doi: 10.1016/j.str.2006.05.006 (“*Struct05* Addendum”).

- *Proc. Natl. Acad. Sci. USA* 2006;103:323–8. doi: 10.1073/pnas.0509351102 (hereafter referred to as “*PNAS06*”). Retraction in: *Proc. Natl.*

¹In 2024, HHS revised 42 CFR part 93. 89 FR 76280 (Sept. 17, 2024). The revised Part 93 applies to allegations received on or after January 1, 2026. *Id.* at 76289. Thus, the version of Part 93 in effect prior to the revision applies to this research misconduct proceeding. That prior version of Part 93 was promulgated in 2005 and is available at 70 FR 28370 (May 17, 2005). Citations to Part 93 within this document refer to Part 93 as set forth in the 2005 **Federal Register** notice, which is available at <https://www.federalregister.gov/documents/2005/05/17/05-9643/public-health-service-policies-on-research-misconduct>.

Acad. Sci. USA 2006;103:4329. doi: 10.1073/pnas.0601034103.

- *J. Med. Chem.* 2006;49:3092–100. doi: 10.1021/jm060163j (hereafter referred to as “*JMC06*”).

- *Biomol. Eng.* 2006;23:307–15. doi: 10.1016/j.bioeng.2006.09.004 (hereafter referred to as “*BioE06*”).

- *Cancer Res.* 2007;67:4028–33. doi: 10.1158/0008–5472.CAN–07–0345 (hereafter referred to as “*CR07*”).

Correction in: *Cancer Res.* 2013;73:6375. doi: 10.1158/0008–5472.CAN–13–2601.

- *Front. Biosci.* 2007;12:3617–27. doi: 10.2741/2338 (hereafter referred to as “*FBS07*”).

- *J. Phys. Chem. B* 2007;111:13987–92. doi: 10.1021/jp074479u (hereafter referred to as “*JPCB07*”).

- *Mol. Pharm.* 2008;5:430–7. doi: 10.1021/mp700148h (hereafter referred to as “*MP08*”).

—Supporting information was made available online at the time *MP08* was published (hereafter referred to as “*MP08* Original Supporting Information”).

—In July 2008, *MP08* Original Supporting Information was replaced with revised supporting information (hereafter referred to as “*MP08* Revised Supporting Information”).

—A notice of the *MP08* Revised Supporting Information was published at *Mol Pharm* 2008;5:680. doi: 10.1021/mp8000777. In December 2009, an addendum to the *MP08* Revised Supporting Information was published (hereafter referred to as “*MP08* Addendum to Supporting Information”). A notice of the addendum was published at *Mol Pharm* 2010;7:306. doi: 10.1021/mp9002893. An acknowledgement addendum was published in March 2010 at *Mol Pharm* 2010;7:1877. doi: 10.1021/mp100057w.

- *J. Med. Chem.* 2008;51:4890–8. doi: 10.1021/jm800453a (hereafter referred to as “*JMC08*”).

- *ACS Nano* 2008;2:61–8. doi: 10.1021/nn700239j (hereafter referred to as “*NANO08*”). Correction in: *ACS Nano* 2012;6:6525. doi: 10.1021/nn302352t.

- *Drug Discov. Today* 2009;14:1–5. doi: 10.1016/j.drudis.2008.10.008 (hereafter referred to as “*DDT09*”).

- *Trends Pharmacol. Sci.* 2009;30:403–10. doi: 10.1016/