

discussions conducted each year to elicit qualitative insights that help explain quantitative patterns and illuminate system functioning across the portfolio. Topics will rotate across the evaluation period to address priority themes (e.g., awareness and dissemination; expanding and advancing the workforce; translating research to practice improving outcomes; improving youth transition to adulthood; and cross-cutting systems effects). Participant selection will purposefully include input from across grantee program components (grantee leadership/staff, trainees, researchers) and key stakeholders (family members/self-advocates, partner organizations) to capture a range of perspectives and surface actionable implementation lessons and promising practices. Sessions will follow standardized

discussion guides, be recorded on secure platforms, securely transcribed, and analyzed alongside administrative and survey data to support annual products and recommendations for improvement.

To reduce burden, the evaluation will use data collected through existing HRSA grant reporting. These sources include Discretionary Grants Information System (currently approved under 0915–0298), as well as grantee progress and final reports.

Likely Respondents: The respondents to the Grantee Survey will be the 99 Project Directors or Principal Investigators of each award within the universe of Autism CARES awardees. The focus groups will engage with grantee leadership, staff, trainees, and researchers as well as other key stakeholders, including family

members/self-advocates, and partner organizations.

Burden Statement: Burden in this context means the time expended by people 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
Grantee Survey	^a 99.0	1	99.0	0.5	49.5
Grantee Focus Groups	^b 40.0	1	40.0	1.5	60.0
Stakeholder Focus Groups	^c 12.5	1	12.5	1.5	18.8
Total	^d 151.5	151.5	128.3

General: The table reports integer values for the annual number of respondents and responses. In cases when underlying assumptions about totals over the 4-year period covered by PRA clearance resulted in a fractional count of respondents per year, that count was rounded upward to the nearest integer. When the estimated average burden hours are less than one, the table reports the value as the fraction of 60 minutes.

^a Assumes all 99 grantees will respond to the survey in each year.

^b Assumes 16 focus group meetings with 10 grantee participants over the course of 4 years. Number of respondents is the average number of participants per year.

^c Assumes 5 focus group meetings with 10 stakeholder participants over the course of 4 years. Stakeholders include self-advocates, family members of individuals with autism, and grantee partner organizations. Number of respondents is the average number of participants per year.

^d The total annual number of respondents is a sum of the rows in the table above and does not adjust for potential overlap between respondent groups across rows.

HRSA specifically requests comments on (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.

Maria G. Button,

Director, Executive Secretariat.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Notice of Interest Rate on Overdue Debts

Section 30.18 of the Department of Health and Human Services' claims collection regulations (45 CFR part 30) provides that the Secretary shall charge an annual rate of interest, which is determined and fixed by the Secretary of the Treasury after considering private consumer rates of interest on the date that the Department of Health and

Human Services becomes entitled to recovery. The rate cannot be lower than the Department of Treasury's current value of funds rate or the applicable rate determined from the "Schedule of Certified Interest Rates with Range of Maturities" unless the Secretary waives interest in whole or part, or a different rate is prescribed by statute, contract, or repayment agreement. The Secretary of the Treasury may revise this rate quarterly. The Department of Health and Human Services publishes this rate in the **Federal Register**.

The current rate of 11¹/₈%, as fixed by the Secretary of the Treasury, is certified for the quarter ended September 30, 2025; 11⁵/₈% for the quarter ended December 31, 2025; and 11³/₈% for the quarter ended March 31, 2026. This rate is based on the Interest Rates for Specific Legislation, "National Health

Services Corps Scholarship Program (42 U.S.C. 2540(b)(1)(A))" and "National Research Service Award Program (42 U.S.C. 288(c)(4)(B))." This interest rate will be applied to overdue debt until the Department of Health and Human Services publishes a revision.

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Acting Director, Office of Financial Policy and Reporting.

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