Control and Prevention, 1090 Tusculum Avenue, Mailstop C–24, Cincinnati, Ohio 45226. Email: *ocas@cdc.gov.*

Written comments received in advance of the meeting will be included in the official record of the meeting.

Meeting Information: Audio Conference Call via FTS Conferencing. The USA toll-free dial-in number is 1–866–659–0537; the passcode is 9933701.

FOR FURTHER INFORMATION CONTACT: Rashaun Roberts, Ph.D., Designated Federal Officer, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, 1090 Tusculum Avenue, Mailstop C–24, Cincinnati, Ohio 45226, Telephone: (513) 533–6800, Email: *ocas@cdc.gov.*

SUPPLEMENTARY INFORMATION:

Background: The Advisory Board was established under the Energy Employees Occupational Illness Compensation Program Act of 2000 to advise the President on a variety of policy and technical functions required to implement and effectively manage the compensation program. Key functions of the Advisory Board include providing advice on the development of probability of causation guidelines, which have been promulgated by the Department of Health and Human Services (HHS) as a final rule; advice on methods of dose reconstruction, which have also been promulgated by HHS as a final rule; advice on the scientific validity and quality of dose estimation and reconstruction efforts being performed for purposes of the compensation program; and advice on petitions to add classes of workers to the Special Exposure Cohort (SEC). In December 2000, the President delegated responsibility for funding, staffing, and operating the Advisory Board to HHS, which subsequently delegated this authority to the CDC. NIOSH implements this responsibility for CDC.

The charter was issued on August 3, 2001, renewed at appropriate intervals, and rechartered under Executive Order 14109 (September 29, 2023) on March 22, 2024. Unless continued by the President, the Advisory Board will terminate on September 30, 2027, consistent with Executive Order 14354 of September 29, 2025.

Purpose: The Advisory Board is charged with (a) providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; (b) providing advice to the Secretary, HHS, on the scientific validity and quality of dose reconstruction efforts performed for this program; and (c) upon request by the Secretary, HHS, advising the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class. The ABRWH Subcommittee on Procedure Reviews (SPR) is responsible for overseeing, tracking, and participating in the reviews of all procedures used in the dose reconstruction process by the NIOSH Division of Compensation Analysis and Support (DCAS) and its dose reconstruction contractor (Oak Ridge Associated Universities—ORAU).

Matters to be Considered: The agenda will include discussions on the following:

1. Administrative items, including: a. SPR-approved documents for December Board meeting and b. Updated list of documents awaiting National Institute for Occupational Safety and Health (NIOSH) responses; 2. Carry-over items from June 5, 2026, SPR Meeting including a. DCAS–PER–090, rev. 0 ''Grand Junction Operation Office'' presentation and b. ORAUT–TKBS–0016–4, rev. 02 ''Mound Plant—Occupational Environmental Dose'' presentation. 3. NIOSH responses to SC&A reviews including: a DCAS–PER–040, rev. 0 ST4 ''Mallinckrodt TBD (ORAUT–TKBS–0005) Revision, b. DCAS–PER–051, rev 0 ST–1–3 ''Weldon Spring Plant Program, '' and c. DCAS–PER–073, rev. 0 ''Birdsboro Steel and Foundry Company Program Evaluation Report''; 4. Documents with no SPR formal close-out: a. ORAUT–OTIB–0022, rev. 00 ''Guidance on Wound Modeling for Internal Dose Reconstruction'' presentation and b. ORAUT–OTIB–0011, rev. 00, ''Tritium Calculated and Missed Dose Estimates'' presentation, and 5. Recently issued SC&A report: a. ''Assessment of Professional Judgements in Six Case Reviews Performed under Program Evaluation Report'' (PER)-017. Agenda items are subject to change as priorities dictate. For additional information, please contact Toll Free 1 (800) 232–4636.

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. 2026–14661 Filed 7–20–26; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–R–284 and CMS–10105]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. 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 or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

DATES: Comments must be received by September 21, 2026.

ADDRESSES: When commenting, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. *Electronically.* You may send your comments electronically to *http://www.regulations.gov.* Follow the instructions for ''Comment or Submission'' or ''More Search Options''

to find the information collection document(s) that are accepting comments.

2.*By regular mail.* You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier: __/OMB Control Number: __, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, please access the CMS PRA website by copying and pasting the following web address into your web browser: *https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.*

FOR FURTHER INFORMATION CONTACT: William N. Parham at (410) 786–4669.

SUPPLEMENTARY INFORMATION:

Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

Under the 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. The term ''collection of information'' is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA requires federal agencies to publish a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice.

Information Collections

1. *Type of Information Collection Request:* Revision of a currently approved collection*; Title of Information Collection:* Transformed—Medicaid Statistical Information System (T–MSIS)*; Use:* The data reported in T–MSIS are used by federal, state, and local officials, as well as by private researchers and corporations to monitor past and projected future trends in the Medicaid and CHIP programs. The data provides the only national level information available on enrollees, beneficiaries, and expenditures. It also provides the only national level information available on Medicaid utilization. The information is the basis for analyses and for cost savings estimates for the Department's cost sharing legislative initiatives to Congress. The collected data are also crucial to our actuarial forecasts.

Section 71109 of the Working Families Tax Cut legislation (WFTC) (Pub. L. 119–21) amended sections 1903(v) and 2107(e)(1) of the Social Security Act (the Act) by restricting, with limited exceptions, Federal Financial Participation (FFP) for medical assistance (Medicaid) and child or pregnancy-related health assistance (CHIP) to the following groups beginning October 1, 2026: (1) U.S. citizens and U.S. nationals; (2) Lawful Permanent Residents (LPRs); (3) Cuban/Haitian entrants; and (4) Compact of Free Association (COFA) migrants (collectively referred to as ''FFP-eligible noncitizens'').

The statutory amendments necessitate an update to the valid value set for the IMMIGRATION–STATUS data element reported to CMS through T–MSIS to accurately reflect updates to state eligibility determination processes and support compliance, program oversight, and proper FFP claiming. To support oversight of the implementation of changes to IMMIGRATION–STATUS, two valid values are being added to the ELIGIBILITY–TERMINATION–REASON data element to identify disenrollment reasons related to changes in immigration status or immigration verifications.

The TRANSACTION–TYPE (FTX388) data element will be updated to include a new valid value with an effective date of October 1, 2026, for per-member-per-month home health service payments. These payments are already expected to be reported as part of state T–MSIS submissions but are not currently uniquely identifiable as states typically report these data in the ''other'' valid value. Implementation of this data element will support oversight of home health programs.

We also propose three non-substantive changes that would not impact current state T–MSIS reporting. The purpose of these updates is to eliminate ambiguity and potentially reduce both CMS and state burden by reducing the need for technical assistance to address any questions on these topics.

Form Number: CMS–R–284 (OMB control number: 0938–0345)*; Frequency:* Quarterly, monthly, and once*; Affected Public:* State, Local, or Tribal Governments*; Number of Respondents:* 54*; Total Annual Responses:* 648*; Total Annual Hours:* 15,390. (For policy questions regarding this collection contact Brian Johnston at 410–786–0143.)

2. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* The In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems Survey Mode Experiment; *Use:* The national implementation of the ICH CAHPS Survey is designed to allow third-party, CMS-approved survey vendors to administer the ICH CAHPS Survey using mail-only, telephone-only, or mixed (mail with telephone follow-up) modes of survey administration. Experience from previous CAHPS surveys shows that mail, telephone, and mail with telephone follow-up data collection modes work well for respondents, vendors, and health care providers. Any additional forms of information technology, such as web surveys, is under investigation as a potential survey option in this population.

Data collected in the national implementation of the ICH CAHPS Survey are used for the following purposes:

To provide a source of information from which selected measures can be publicly reported to beneficiaries as a decision aid for dialysis facility selection.

To aid facilities with their internal quality improvement efforts and external benchmarking with other facilities.

To provide CMS with information for monitoring and public reporting purposes.

To support the ESRD Quality Improvement Program. To determine if and by how much patient characteristics affect the patients' rating of the care they receive and adjust results based on those factors. *Form Number:* CMS–10105 (OMB control number: 0938–0926); *Frequency:* Yearly; *Affected Public:* Individuals and Households; *Number of Respondents:* 211,770; *Total Annual Responses:* 211,770; *Total Annual Hours:* 42,267. (For policy questions regarding this collection

contact Lauren Popham at 410–786–8568.)

William N. Parham, III,

Director, Division of Information Collections and Regulatory Impacts, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2026–14699 Filed 7–20–26; 8:45 am]

BILLING CODE 4169–6901–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970–0157]

Submission for Office of Management and Budget Review; Temporary Assistance for Needy Families (TANF) Financial Report, ACF–196T

AGENCY: Office of Family Assistance, 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) is requesting a 3-year extension of the Guidance for the Tribal Temporary Assistance for Needy Families (TANF) Program, Form 123 (Office of Management and Budget (0970–0157, expiration date: August 31, 2026). While the statutory requirements remain unchanged, ACF is proposing revisions to the instructions for clarification and to ensure they are as clear and streamlined as possible. ACF estimates a 33 percent reduction in response time with the proposed revisions to the instructions.

DATES: *Comments due* August 20, 2026.

ADDRESSES: The public may view and comment on this information collection request at: *https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202607-0970-008.* 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: 42 U.S.C. 612 (section 412 of the Social Security Act) requires each Indian tribe that elects to administer and operate a TANF program to submit a TANF Tribal Plan. This request includes the renewal of the guidance for completing the initial Tribal TANF Plan. The TANF Tribal Plan is a mandatory statement submitted to the Secretary of HHS by the Indian tribe, which consists of an outline of how the Indian Tribes TANF program will be administered and operated. It is used by the Secretary to determine whether the plan is approvable and to determine that the Indian tribe is eligible to receive a TANF assistance grant. It is also made available to the public. The instructions have been edited for clarification and general improvements for respondents, including the following types of updates:

- Eliminated redundant explanations and revised text to use shorter, clearer sentences.
- Streamlined content and focused on the elements tribes need to develop and submit an approvable TANF plan.
- Removed or condensed material that does not directly support plan preparation.
- Organized plan requirements in a clearer, checklist-like format aligned with how federal staff review plans, making it easier for tribes to identify and address required elements without cross-referencing multiple sections.

Respondents: Indian tribes applying to operate a TANF program and to renew their Tribal Family Assistance Plan.

Annual Burden Estimates

The proposed edits are expected to result in reduced reading time, improved usability, reduced cognitive load and enhanced accessibility. Overall, the edits are expected to reduce the estimated time per response. ACF has reduced the estimated response time from 68 hours to 45.6 hours. The number of agencies has been increased to reflect current grant recipients. Overall, annual burden estimates have decreased from 1,700 hours to 1,170 hours.

Instrument	Total number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual burden hours
Guidance For the Tribal TANF Program	77	*⅓	45.6	1,170

* **Note:** Over the 3-year approval period, ACF estimates one-third of tribes will submit a plan each year. To estimate total annual burden, we use one-third as the annual number of responses per respondent.

(Authority: 42 U.S.C. 612)

Mary B. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2026–14619 Filed 7–20–26; 8:45 am]

BILLING CODE 4184–36–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2026–N–4699]

Expedited Investigational New Drug Pilot Program; Request for Information; Extension of the Comment Period

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice; request for information; establishment of a public docket; extension of the comment period.

SUMMARY: The Food and Drug Administration (FDA or the Agency) is extending the comment period for the notice that appeared in the **Federal Register** of June 24, 2026, to open a public docket to solicit input and comments on a proposal to establish a pilot program, the Expedited Investigational New Drug (IND) pilot program, to shorten the time it takes from drug identification to first-in-human (FIH) study, while protecting clinical trial participants.

DATES: FDA is extending the comment period on the notice published on June 24, 2026 (91 FR 37996). Either electronic or written comments, data, or information must be received by August 24, 2026.

ADDRESSES: You may submit comments, data, and information as follows. Please note that late, untimely filed comments