Authority for Conducting the Matching Program

The principal authority for the matching program is 42 U.S.C. 18001, *et seq.*

Purpose(s)

The purpose of the matching program is to assist CMS in determining individuals' eligibility for financial assistance in paying for private health insurance coverage. In this matching program, the Department of War provides CMS with daily files, indicating whether an individual who is seeking eligibility determination for financial assistance is enrolled in TRICARE. CMS makes this data available to state administering entities (AEs) through a data services hub, under a separate matching agreement. CMS and AEs use the Department of War data to verify whether an individual who is applying for or is enrolled in private health insurance coverage under a qualified health plan through a federally-facilitated or state-based health insurance exchange is eligible for coverage under a Department of War health benefit plan, for the purpose of determining the individual's eligibility for financial assistance (including an advance tax credit and cost sharing reduction, which are types of insurance affordability programs) in paying for private health insurance coverage. The Department of War health benefit plans provide minimum essential coverage, and eligibility for such plans precludes eligibility for financial assistance in paying for private coverage. The data provided by the Department of War under this matching program will be used by CMS and AEs to authenticate identity, determine eligibility for financial assistance, and determine the amount of any financial assistance.

Categories of Individuals

The categories of individuals whose information is involved in the matching program are: (1) individuals who are eligible for or enrolled in a TRICARE plan, identified in data CMS receives from the Department of War, and (2) consumers who apply for or are enrolled in private insurance coverage under a qualified health plan through a federally-facilitated or state-based health insurance exchange (and other relevant individuals, such as applicants' and enrollees' household members), whose records are matched against the data CMS receives from the Department of War.

Categories of Records

The categories of records which will be provided by the Department of War to CMS in this matching program are identity records and minimum essential coverage period records, consisting of these data elements: Social Security Numbers (SSNs), Coverage Begin Date(s) and Coverage End Date(s).

System(s) of Records

A. System of Records Maintained by CMS

The applicable CMS system of records is CMS Health Insurance Exchanges System (HIX), CMS System No. 09–70–0560, last published in full at 78 FR 63211 (Oct. 23, 2013), as amended at 83 FR 6591 (Feb. 14, 2018).

B. System of Records Maintained by the Department of War

The applicable Department of War system of records is DMDC 02 DoD, Defense Enrollment Eligibility Reporting System (DEERS), last published in full at 87 FR 32384 (May 31, 2022).

[FR Doc. 2026–15861 Filed 8–4–26; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970–0564]

Proposed Information Collection Activity; Monitoring and Compliance for Office of Refugee Resettlement Care Provider Facilities

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

ACTION: Request for Public Comments.

SUMMARY: The Office of Refugee Resettlement (ORR), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is inviting public comments on the proposed revisions to an information collection. The Monitoring and Compliance for ORR Care Provider Facilities information collection consists of several forms that will allow the Monitoring and Compliance Bureau (MCB) and Unaccompanied Alien Children Bureau (UACB) to better monitor UACB-funded care provider facilities for compliance with federal and state laws and regulations, licensing and accreditation standards, ORR policies and procedures, and child welfare standards. This request includes the addition of nine new instruments, discontinuation of obsolete instruments, and revisions to remaining currently approved instruments.

DATES: *Comments due* October 5, 2026.

ADDRESSES: In compliance with the requirements of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described above. You can obtain copies of the proposed collection of information and submit comments by emailing *infocollection@acf.hhs.gov.* Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: This request is to revise 5 existing forms in this collection, add 9 new forms, and discontinue 33 forms.

Proposed Form Revisions

Global Revisions (made where applicable)

- Changed ''unaccompanied child (UC)'' to ''unaccompanied alien child (UAC)''
- Changed the field label for ''Gender'' to ''Sex'' and limit options to Male or Female

Incident Review Forms (Forms M–5A to M–5B)

- Revised instructions at beginning of the forms for clarity
- Reworded several headings and questions for clarity
- Added several questions to ensure that the information the care provider submits to ORR provides a clear and complete picture of the incident

Home Study and Post-Release Services Site Visit Guide (Form M–7E)

- Revised the form for clarity, consistency, and alignment with current ORR monitoring expectations
- Reorganized and expanded key sections to collect more specific information about program operations, service delivery, safety practices, documentation, and compliance
- Added new content areas on program capacity, personnel onboarding and training, finance, language access, Notifications of Concern, sponsor/address flagging, subrecipient oversight, and background-check compliance
- Updated the pre-site visit materials request to include more detailed documentation on policies, staff background checks, training, post-release services tools, and subrecipient monitoring

ORR–Funded Program Leadership Interview Tool (Form M–13A) and *Home Study and Post-Release Services Caseworker Interview Tool (Form M–13B)*

- Updated the tool titles from ''Home Study and Post-Release Services Director Questionnaire'' to ''ORR-Funded Program Leadership Interview Tool'' and from ''Home Study and Post-Release Services Caseworker Questionnaire'' to ''Home Study and Post-Release Services Caseworker Interview Tool''
- Added more structured fields for program, monitoring visit, interview, interpreter, and timing information
- Added standardized interviewer guidance for preparation, virtual interviews, interpreter use, trauma-informed practices, mandated reporting, confidentiality, and close-out
- Reorganized and clarified the questions into consistent topic areas covering role responsibilities, training, child safety, service quality, role-specific duties, and conclusion questions
- Expanded child safety and incident-response questions, including abuse, maltreatment, sexual abuse/harassment, runaway incidents, trafficking, exploitation, unsafe environments, and other safety concerns
- Revised service delivery, documentation, and role-specific questions to better assess program oversight, subrecipient monitoring, case management, referrals, psychoeducation, documentation accuracy, and safeguarding information.
- Folded several older broad prompts into more targeted questions on program effectiveness, service delivery, safety, compliance, and improvement opportunities.

New Forms

- *Prevention of Sexual Abuse (PSA) Quarterly Report (Form M–18):* This instrument is used by care providers to share with ORR quarterly PSA data on incidents and allegations of sexual abuse and sexual harassment as required under 45 CFR 411.102(c).
- *Business Owner Site Visit Report (Form M–19):* This instrument is used by contract business owners to conduct quarterly site visits for care provider facilities funded under a contract and document their observations and child interview responses.
- *Home Study and Post-Release Services (HSPRS) Interview Tools:* These tools will allow ORR to conduct interviews that are tailored specifically for monitoring HSPRS providers.
  - HSPRS Supervisory Caseworker Interview Tool (Form M–13F)
  - HSPRS Discharged Child-Sponsor Interview Tool (Form M–13G)
  - HSPRS Quality Assurance Staff Interview Tool (Form M–13H)
  - HSPRS Subrecipient Staff Interview Tool (Form M–13I)

The MCB plans to move all their forms into a single web-based application (Monitoring & Compliance App). The forms will also be revised to use focused, compliance-based questions and document requests that will align with ORR's new monitoring standards.

Forms with multiple versions will be consolidated into a single tool, as outlined in the table below. Each tool will populate relevant fields based on program type, level of care, and interviewee role, as applicable.

Thus far, three tools have been developed for the web-based application for programs with the following levels of care: shelter, transitional foster care, long-term foster care, and group home. Word/Excel versions of these three tools will continue to be used for other levels of care until they can be incorporated into the web-based versions in the app. As more tools are developed, ORR will submit additional requests for approval.

- *Monitoring File Checklists (Form M–20):* This web-based tool is used by ORR federal and contractor monitors during monitoring visits to document review of required program files. The tool consolidates multiple Word and Excel file checklist instruments into one web-based tool. The tool includes three sub-tools: the Child File Checklist, Staff File Checklist, and Foster Parent File Checklist.
- *Monitoring Interviews (Form M–21):* This web-based tool is used by ORR federal and contractor monitors to conduct and document interviews during monitoring visits. The tool consolidates the previously approved program staff questionnaires, child questionnaires, foster parent questionnaire, and stakeholder/service provider questionnaires into one web-based interview tool. The tool includes four sub-tools: Child Interview, Staff Interview, Foster Parent Interview, and Stakeholder Interview. The staff interview sub-tool includes interview types such as case manager, clinician, educator, independent living skills coordinator, medical staff, ORR-funded leadership, PSA compliance manager, youth care worker, and interpreter; the stakeholder interview sub-tool includes case coordinator, child advocate, legal service provider, and state licensing representative.
- *Monitoring Site Assessment (Form M–22):* This web-based tool is used by ORR federal and contractor monitors during monitoring visits to document observations from the onsite portion of the review, including facility walk-throughs and assessment of whether observed conditions comply with ORR's monitoring measures. The site assessment supports standardized documentation of onsite monitoring findings and helps align monitoring observations with ORR's newly developed compliance-based monitoring measures.

Discontinued Forms

- *Out-of-Network Site Visit Report (Form M–3B):* ORR proposes discontinuing this instrument. Form M–3B was developed for the UAC Path system, which was never implemented, and Form M–3B was never used. ORR is in the process of developing a different tool for out-of-network site visits and will submit the tool for approval when ready.
- *Remote Site Visit Guides:* ORR proposes discontinuing two versions of the Site Visit Guide that were created for remote monitoring visits. These versions were created in response to the COVID–19 pandemic and are no longer used.
  - Remote Monitoring Site Visit Guide (Form M–7B)
  - Long Term Foster Care Remote Site Visit Guide (Form M–7D)
- *Foster Care Program Checklist and Questionnaires:* ORR proposes discontinuing the following monitoring tools that were used for foster care programs. These tools have been replaced by the new web-based Monitoring File Checklists (Form M–20) and Monitoring Interviews (Form M–21) tools.
  - Foster Parent Checklist (Form M–10D)
  - Foster Care Program Director Questionnaire (Form M–11B)
  - Foster Care Case Manager Questionnaire (Form M–11F)
  - Foster Care Clinician Questionnaire (Form M–11D)
  - Foster Care Education Questionnaire (Form M–11H)
  - Foster Care Home Finder Questionnaire (Form M–11M)
  - Foster Care Independent Living Life Skills Staff Questionnaire (Form M–11N)
  - Foster Care Foster Parent Questionnaire (Form M–11O)
  - Long Term Foster Care Client (Child) Questionnaire (Form M–12C)
  - Foster Care Legal Service Provider Questionnaire (Form M–13D)
- *Unlicensed Facility Tools:* ORR proposes discontinuing the following

monitoring tools developed for monitoring unlicensed (also known as delicensed) facilities. These tools will no longer be used. Instead, monitors will use the standard versions (Word, Excel, and web-based) of their tools to monitor delicensed facilities.

- Unlicensed Facility Monitoring Notes (Form M–6A–UF)
- Unlicensed Facility LTFC Monitoring Notes (Form M–6C–UF)
- Unlicensed Facility Site Visit Guide (Form M–7A–UF)
- Unlicensed Facility Unaccompanied Child Case File Checklist (Form M–8A–UF)
- Unlicensed Facility Foster Care Unaccompanied Child Case File Checklist (Form M–8B–UF)
- Unlicensed Facility Staff Secure Addendum to Case File Checklist (Form M–8D–UF)
- Unlicensed Facility Personnel File Checklist (Form M–10A–UF)
- Unlicensed Facility Program Director Questionnaire (Form M–11A–UF)
- Unlicensed Facility Clinician Questionnaire (Form M–11C–UF)
- Unlicensed Facility Case Manager (Form M–11E–UF)
- Unlicensed Facility Education Staff Questionnaire (Form M–11G–UF)
- Unlicensed Facility Medical Coordinator Questionnaire (Form M–11I–UF)
- Unlicensed Facility Youth Care Worker (Form M–11J–UF)
- Unlicensed Facility Prevention of Sexual Abuse Compliance Manager Staff Questionnaire (Form M–11K–UF)
- Unlicensed Facility Interpreter Questionnaire (Form M–11P–UF)
- Unaccompanied Child Questionnaire–Ages 6–12 Years Old–Unlicensed Facility Quarterly Health and Safety Visit (Form M–12A–UF and M–12As-UF)
- Unaccompanied Child Questionnaire–Ages 13 and Older–Unlicensed Facility Quarterly Health and Safety Visit (Form M–12B–UF and M–12Bs-UF)
- Unaccompanied Child Questionnaire–Ages 5 and Under–Unlicensed Facility Quarterly Health and Safety Visit (Form M–12E–UF and M–12Es-UF)
- Legal Service Provider Questionnaire—Unlicensed Facility Quarterly Health and Safety Visit (Form M–13C–UF)
- Case Coordinator Questionnaire–Unlicensed Facility Quarterly Health and Safety Visit (Form M–13E–UF)

Respondents: ORR-funded grantees and contractors, foster parents, and unaccompanied alien children.

Annual Burden Estimates: The proposed revisions result in a 49.80 percent decrease in burden compared to the currently approved information collection.

The revised burden estimate reflects the following changes:

- A decrease in the number of care provider facilities.
- A 4-hour reduction in the time it takes to complete Site Assessment (also known as Monitoring Notes).
- Removal of several forms, including:
  - Word/Excel monitoring tools that are no longer used or have been consolidated into the web-based monitoring and compliance app
  - Remote visits versions of the Site Visit Guide monitoring tool
  - An out-of-network site visit report that was developed for another system and never used
- Changes in site visit frequency, including:
  - Increasing the frequency of comprehensive site visits to licensed care providers from biennially to annually
  - Decreasing the frequency of comprehensive and follow-up site visits to delicensed care providers from biennially with quarterly follow-up visits to annually with a six-month follow-up visit
  - Introducing additional quarterly site visits for care provider facilities funded under a contract
- The addition of new forms, including:
  - HSPRS interview tools
  - PSA Quarterly Report
  - Business Owner Site Visit Report

Respondents

Respondents include unaccompanied alien children, ORR care provider affiliated foster parents, care provider facilities, HS and PRS providers, legal service providers, child advocates, case coordinators, and state licensing representatives.

Information collection title	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual total burden hours
Corrective Action Report (Form M—1)—Licensed Facility and Ad Hoc Visits	120	1.00	5.00	600.00
Corrective Action Report (Form M—1)—Delicensed Facility Visits	90	2.00	5.00	900.00
Corrective Action Report (Form M—1)—Emergency Influx Facility (EIF) Visits	8	4.00	5.00	160.00
Federal Field Specialist (FFS) Compliance and Safety Site Visit Report (Form M—3)	1,860	1.00	1.00	1,860.00
Checklists for a Child-Friendly Environment (Forms M—4A to M–4B)	155	6.00	0.25	232.50
Incident Reviews (Forms M—5A to M–5B)	155	0.73	2.00	226.30
Site Visit Guide (Form M—7A)—Licensed Facility & Ad Hoc Visits	45	1.00	13.00	585.00
Site Visit Guide (Form M—7A)—Delicensed Facility Visits	37	2.00	13.00	962.00
Foster Care Site Visit Guide (Form M—7C)—Licensed Facility	75	1.00	6.00	450.00
Foster Care Site Visit Guide (Form M—7C)—Delicensed Facility Visits	8	2.00	6.00	96.00
Home Study and Post-Release Services Site Visit Guide (Form M—7E)	25	1.00	6.00	150.00
Voluntary Agency Site Visit Guide (Form M—7F)	10	1.00	6.00	60.00
Influx Care Facility Site Visit Guide (Form M—7G)	2	4.00	15.00	120.00
Program Staff Questionnaires (Forms M—11A to M—11K)—Licensed Facility	14	1.00	1.00	14.00
Program Staff Questionnaires (Forms M—11A to M—11K)—Delicensed Facility Visits	14	2.00	1.00	28.00
Program Staff Questionnaires (Forms M—11A to M—11K)—EIF Visits	14	4.00	1.00	56.00
Secure Detention Officer Questionnaire (Form M—11L)	1	1.00	1.00	1.00
Interpreter Questionnaire (Form M—11P)—Licensed Facility	2	1.00	0.50	1.00
Interpreter Questionnaire (Form M—11P)—Delicensed Facility Visits	2	2.00	0.50	2.00
Interpreter Questionnaire (Form M—11P)—EIF Visits	2	4.00	0.50	4.00
Unaccompanied Child Questionnaires (Forms M—12A to M—12B & M—12E)—Licensed Facility Visits	10	1.00	0.50	5.00

Information collection title	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual total burden hours
Unaccompanied Child Questionnaires (Forms M—12A to M—12B & M—12E)—Delicensed Facility Visits	10	2.00	0.50	10.00
Unaccompanied Child Questionnaires (Forms M—12A to M—12B & M—12E)—EIF Visits	10	4.00	0.50	20.00
Secure Client Questionnaire (Form M—12D)	5	1.00	0.50	2.50
ORR-Funded Program Leadership Interview Tool (Form M—13A)	25	1.00	1.00	25.00
Home Study and Post-Release Services Caseworker Interview Tool (Form M—13B)	25	1.00	1.00	25.00
Home Study and Post-Release Services Supervisory Caseworker Interview (Form M—13F)	25	1.00	1.00	25.00
Home Study and Post-Release Services Discharged Child-Sponsor Interview (Form M—13G)	150	1.00	1.00	150.00
Home Study and Post-Release Services Quality Assurance Staff Interview (Form M—13H)	25	1.00	1.00	25.00
Home Study and Post-Release Services Subrecipient Staff Interview (Form M—13I)	75	1.00	1.00	75.00
Legal Service Provider Questionnaire (Form M—13C)—Licensed Facility	2	1.00	1.00	2.00
Legal Service Provider Questionnaire (Form M—13C)—Delicensed Facility Visits	2	2.00	1.00	4.00
Legal Service Provider Questionnaire (Form M—13C)—EIF Visits	2	4.00	1.00	8.00
Case Coordinator Questionnaire (Form M—13E)—Licensed Facility	2	1.00	1.00	2.00
Case Coordinator Questionnaire (Form M—13E)—Delicensed Facility Visits	2	2.00	1.00	4.00
Case Coordinator Questionnaire (Form M—13E)—EIF Visits	2	4.00	1.00	8.00
Preaudit Questionnaire and Audit Documentation Requested Checklist (Form M—17A)	60	1.00	4.00	240.00
Instructions for Site Visit and Facility Tour (Form M—17B)	60	1.00	2.00	120.00
Interview Guide: Random Sample of Staff Interview (Form M—17C)	240	1.00	1.00	240.00
Interview Guide: Program Director (Form M—17D)	60	1.00	1.00	60.00
Interview Guide: Prevention of Sexual Abuse (PSA) Compliance Manager (Form M—17E)	60	1.00	1.00	60.00
Interview Guide: Specialized Staff (Form M—17F)	120	1.00	1.00	120.00
Interview Guide: Unaccompanied Alien Child (Form M—17G)	600	1.00	0.50	300.00
PSA Audit Corrective Action Report (Form M—17H)	60	1.00	1.00	60.00
PSA Quarterly Report (Form M—18)	155	4.00	1.50	930.00
Business Owner Site Visit Report (Form M—19)	60	1.00	0.75	45.00
Monitoring Interview (Form M—21)—Child-Licensed Facility & Ad Hoc Visits	590	1.00	1.00	590.00
Monitoring Interview (Form M—21)—Child-Delicensed Facility Visits	265	2.00	1.00	530.00
Monitoring Interview (Form M—21)—Staff-Licensed Facility & Ad Hoc Visits	1,062	1.00	1.00	1,062.00
Monitoring Interview (Form M—21)—Staff-Delicensed Facility Visits	477	2.00	1.00	954.00
Monitoring Interview (Form M—21)—Foster Parent-Licensed Facility & Ad Hoc Visits	176	1.00	1.00	176.00
Monitoring Interview (Form M—21)—Foster Parent—Delicensed Facility Visits	38	2.00	1.00	76.00
Monitoring Interview (Form M—21)—Stakeholder-Licensed Facility & Ad Hoc Visits	472	1.00	0.75	354.00
Monitoring Interview (Form M—21)—Stakeholder-Delicensed Facility Visits	212	2.00	0.75	318.00
Estimated Annual Burden Hours Total				13,133.30

PREVENTION OF SEXUAL ABUSE AUDITOR CONTRACTORS

Information collection title	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual total burden hours
Preaudit Questionnaire and Audit Documentation Requested Checklist (Form M—17A)	8	7.50	3.00	180.00
Instructions for Site Visit and Facility Tour (Form M—17B)	8	7.50	1.00	60.00
Interview Guide: Random Sample of Staff Interview (Form M—17C)	8	30.00	1.00	240.00
Interview Guide: Program Director (Form M—17D)	8	7.50	1.00	60.00
Interview Guide: Prevention of Sexual Abuse (PSA) Compliance Manager (Form M—17E)	8	7.50	1.00	60.00
Interview Guide: Specialized Staff (Form M—17F)	8	15.00	1.00	120.00
Interview Guide: Unaccompanied Alien Child (Form M—17G)	8	75.00	0.50	300.00
PSA Audit Corrective Action Report (Form M—17H)	8	7.50	2.00	120.00
Estimated Annual Burden Hours Total				1,140.00

DELICENSED FACILITY MONITOR CONTRACTORS

Information collection title	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual total burden hours
Corrective Action Report (Form M–1)	19	9.47	5.00	899.65
Site Visit Guide Tool (Form M–7A)	19	3.89	29.00	2,143.39
Foster Care Site Visit Guide (Form M–7C)	19	0.84	21.00	335.16
Program Staff Questionnaires (Forms M–11A to M–11K)	19	1.47	1.00	27.93
Interpreter Questionnaire (Form M–11P)	19	0.21	0.50	2.00
Unaccompanied Child Questionnaires (Forms M–12A to M–12B & M–12E)	19	1.05	0.50	9.98
Legal Service Provider Questionnaire (Form M–13C)	19	0.21	1.00	3.99
Case Coordinator Questionnaire (Form M–13E)	19	0.21	1.00	3.99
Monitoring Site Assessment (Form M–22)	19	2.26	8.00	343.52
Monitoring Interview (Form M–21)—Child	19	27.89	1.00	529.91
Monitoring Interview (Form M–21)—Staff	19	50.21	1.00	953.99
Monitoring Interview (Form M–21)—Foster Parent	19	4.00	1.00	76.00
Monitoring Interview (Form M–21)—Stakeholder	19	22.32	0.75	318.06
Monitoring File Checklist (Form M–20)—Child	19	13.58	6.00	1,548.00
Monitoring File Checklist (Form M–20)—Staff	19	13.58	1.00	258.00
Monitoring File Checklist (Form M–20)—Foster Parent	19	2.84	1.00	54.00
Estimated Annual Burden Hours Total	.....	.....	.....	7,507.57

Comments: The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Authority: 6 U.S.C. 279; 8 U.S.C. 1232; 45 CFR part 410; 45 CFR part 411; *Flores* v. *Reno* Settlement Agreement, No. CV85–4544–RJK (C.D. Cal. 1996)

Mary C. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2026–15842 Filed 8–4–26; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970–0466]

Proposed Information Collection Activity; Office of Refugee Resettlement (ORR) Unaccompanied Alien Child Health Forms

AGENCY: Office of Refugee Resettlement, 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 Refugee Resettlement (ORR) is requesting to move the Serious Medical Procedure Request (SMR) Form (Office of Management and Budget (OMB) #: 0970–0561, expiration date December 31, 2026) under the Medical Assessment Form and Dental Assessment Form (OMB #: 0970–0466, expiration October 31, 2026) information collection and update the title of OMB # 0970–0466 to *Office of Refugee Resettlement (ORR) Unaccompanied Alien Child Health Forms.* Revisions are proposed to the forms. The proposed restructuring and revisions will improve transparency, lessen burden, improve data quality, and ensure alignment with ORR requirements. In addition, to ensure continuity of care, the request has been revised to include the sharing of health information with the Department of Homeland Security (DHS) in specific circumstances.

DATES: Comments due October 5, 2026.

ADDRESSES: In compliance with the requirements of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described above. You can obtain copies of the proposed collection of information and submit comments by emailing *infocollection@acf.hhs.gov.* Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: Unaccompanied alien children in ORR custody are placed in care provider programs until unification with a qualified sponsor. Care providers ensure children receive a range of services including routine and emergency medical, dental, and mental health care. Children must also receive medical and dental baseline exams, routine well-child checks, preventive dental care, and counseling services. Care provider staff are expected to implement all recommended treatment plans (*e.g.,* referrals to specialists, procedures, accommodation for physical or mental impairments that impact daily living activities) as directed by the evaluating healthcare provider. All non-emergent procedures performed under anesthesia or IV sedation require ORR approval via the SMR form. Before a decision can be made by ORR, the SMR form must be completed by the treating healthcare provider (*e.g.,* surgeon) and submitted to ORR via the care provider program. ORR will waive the completion of the SMR form requirement if it is deemed to be in the best interest of the child (*e.g.,* during a hospitalization or emergency