requesting Office of Management and Budget (OMB) approval of the Information Comparison with Insurance Data (OMB #0970–0342, expiration January 31, 2027) for an additional 3 years. OCSE revised the Insurance Match Implementation Guide and reduced the burden by 43.25 percent.

DATES: Comments due January 4, 2027.

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 by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The Deficit Reduction Act of 2005 amended section 452 of the Social Security Act to authorize the Health and Human Services Secretary, through the Federal Parent Locator Service, to conduct comparisons of information concerning individuals owing past-due child support with information maintained by insurers (or their agents) concerning insurance claims, settlements, awards, and payments. OCSE sends the daily results of the insurance data match in an Insurance Match Response Record to child support agencies, that use the insurance data matches to collect past-due support from the insurance proceeds. OCSE incorporated a separate burden calculation for respondents opting to use electronic quarterly reporting.

On December 19, 2025, ACF published a notice in the **Federal Register** Volume 90, Number 242, Page 59525 to announce that the Office of Child Support Services (OCSS) is now OCSE. Any reference to OCSS is changed to OCSE in the collection instruments. Further, OCSE revised the Insurance Match Implementation Guide to include additional guidance for connectivity, remove obsolete text, and add an additional field in the Debtor File Layout.

Respondents: Insurers or their agents, including the U.S. Department of Labor and state agencies administering workers' compensation programs, and the Insurance Services Office.

Annual Burden Estimates: The burden estimates were updated to reflect current estimates for the respondents and responses over the next 3 years. The burden reduction is attributable to the large reduction in the number of insurers manually reporting daily through the Insurance Match Debt Inquiry application. The total number decreased from 150 to 65. The prior burden was 3,090.86 hours, the current burden is 1,754.09 hours, and this amounts to a burden reduction of 1,336.77 hours, or 43.25 percent.

Information collection instrument	Total annual number of respondents	Total annual number of responses per respondent	Average annual burden hours per response	Total annual burden hours
Insurance Match File: Quarterly Reporting Electronically	2	4	0.083	0.66
Insurance Match File: Monthly Reporting Electronically	25	12	0.083	24.90
Insurance Match File: Weekly Reporting Electronically	8	52	0.083	34.53
Insurance Match File: Daily Reporting Electronically	3	251	0.083	62.50
Insurance Match File: Daily Reporting Manually	65	251	0.1	1,631.50

Estimated Total Annual Burden Hours: 1,754.09.

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: 42 U.S.C. 652(a)(9), 42 U.S.C. 653(a)(1), and 42 U.S.C. 652(m).)

Samantha L. Illangasekare,

ACF/OPRE Certifying Officer.

[FR Doc. 2026–22557 Filed 11–4–26; 8:45 am]

BILLING CODE 4184–41–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director, Notice of Charter Renewal

In accordance with Title 41 of the U.S. Code of Federal Regulations, Section 102–3.65(a), notice is hereby given that the charter for the National Toxicology Program Advisory Committee (NTPAC) is being renewed for an additional two-year period on November 14, 2026.

It is determined that the NTPAC is in the public interest in connection with the performance of duties imposed on the National Institutes of Health by law, and that these duties can best be performed through the advice and counsel of this group.

The Public Interest Determination follows:

National Institutes of Health

National Toxicology Program Advisory Committee

Public Interest Determination

Pursuant to 41 U.S.C. 102–3.60(a), to establish, renew, reestablish, or merge a discretionary (agency discretion) advisory committee, an agency must first consult with the General Services Administration's Committee Management Secretariat (the Secretariat) and, as part of the consultation, provide a written public interest determination approved by the head of the agency to the Secretariat with a copy to the Office of Management and Budget. In addition, pursuant to 41 U.S.C. 102–3.35, an agency shall follow the same consultation process and document in writing the same determination of need before creating a subcommittee under a discretionary committee that is not made up entirely of members of a parent advisory committee.

Information on the following factors for the committee is provided to the Secretariat to demonstrate that renewing the committee is in the public interest:

1. *Annual budget:* The estimated annual costs for operating the Committee include the following:

a. *Federal personnel (based on full-time equivalent (FTE) usage basis) and other Federal internal costs:* The estimated annual person-years of staff support required 0.3 at an estimated cost of $56,927.

b. *Other Federal internal costs:* The estimate for other Federal internal costs is $2,096.

c. *Proposed payments to members:* The estimated payment for 12 non-Federal members is $6,000.

d. *Proposed number of members:* The Committee will consist of up to 12 members appointed by the Secretary.

e. *Reimbursable costs:* The estimate for reimbursable costs, including members' travel expenses, is $88,875.

2. *If applicable, the total dollar value of grants expected to be recommended during the fiscal year:* N/A.

3. *Criteria for selecting members to ensure the committee has the necessary expertise and fairly balanced membership:*

The Committee will consist of up to 12 members appointed by the Secretary. Members will be selected from recognized authorities knowledgeable in and with contemporary expertise relevant to toxicology and the NTP mission, including but not limited to expertise relevant to toxicology, translational science, medicine, communication sciences, and data sciences. Members will be invited to serve for overlapping terms of up to four years. Federal employees are not eligible to be members of this Committee. All members must be eligible to serve as Special Government Employees (SGE) and will serve as SGEs, as defined by 18 U.S.C. 202. A member will serve after the expiration of that member's term until a successor has taken office. Any member appointed to fill a vacancy for an unexpired term will be appointed for the remainder of that term.

4. *List of all other Federal advisory committees of the agency:*

- Advisory Committee on Research on Women's Health
- Advisory Committee to the Director, National Institutes of Health
- Advisory Council on Parkinson's Research, Care and Services
- Aging and Neurodegeneration Integrated Review Group
- AIDS Research Advisory Committee, NIAID
- Applied Immunology and Disease Control Integrated Review Group
- Applied Therapeutics for Cancer Integrated Review Group
- Biobehavioral and Behavioral Processes Integrated Review Group
- Bioengineering Sciences & Technologies Integrated Review Group
- Biological Chemistry and Macromolecular Biophysics Integrated Review Group
- Board of Regents of the National Library of Medicine
- Board of Scientific Counselors Eunice Kennedy Shriver National Institute of Child Health and Human Development
- Board of Scientific Counselors National Human Genome Research Institute
- Board of Scientific Counselors of the National Heart, Lung, and Blood Institute
- Board of Scientific Counselors of the NIH Clinical Center
- Board of Scientific Counselors, Division of Translational Toxicology
- Board of Scientific Counselors, National Cancer Institute
- Board of Scientific Counselors, National Center for Complementary and Integrative Health
- Board of Scientific Counselors, National Eye Institute
- Board of Scientific Counselors, National Institute of Arthritis and Musculoskeletal and Skin Diseases
- Board of Scientific Counselors, National Institute of Biomedical Imaging and Bioengineering
- Board of Scientific Counselors, National Institute of Dental and Craniofacial Research
- Board of Scientific Counselors, National Institute of Diabetes and Digestive and Kidney Diseases
- Board of Scientific Counselors, National Institute of Environmental Health Sciences
- Board of Scientific Counselors, National Institute of Mental Health
- Board of Scientific Counselors, National Institute of Neurological Disorders and Stroke
- Board of Scientific Counselors, National Institute on Aging
- Board of Scientific Counselors, National Institute on Alcohol Abuse and Alcoholism
- Board of Scientific Counselors, National Institute on Deafness and Other Communication Disorders
- Board of Scientific Counselors, National Institute on Drug Abuse
- Board of Scientific Counselors, National Institute on Minority Health and Health Disparities and National Institute of Nursing Research
- Board of Scientific Counselors, National Library of Medicine
- Brain Disorders and Clinical Neuroscience Integrated Review Group
- Cardiovascular and Respiratory Sciences Integrated Review Group
- Cell Biology Integrated Review Group
- Center for Scientific Review Special Emphasis Panel
- Council of Councils
- Cures Acceleration Network Review Board
- Digestive, Kidney and Urological Systems Integrated Review Group
- Division of Intramural Research Board of Scientific Counselors National Institute of Allergy and Infectious Diseases
- Emerging Technologies and Training Neurosciences Integrated Review Group
- Endocrinology, Metabolism, Nutrition and Reproductive Sciences Integrated Review Group
- Fogarty International Center Advisory Board
- Genes, Genomes, and Genetics Integrated Review Group
- Healthcare Delivery and Methodologies Integrated Review Group
- Infectious Diseases and Immunology A Integrated Review Group
- Infectious Diseases and Immunology B Integrated Review Group
- Integrative, Functional and Cognitive Neuroscience Integrated Review Group
- Interagency Autism Coordinating Committee
- Interagency Pain Research Coordinating Committee
- Interdisciplinary Molecular Sciences and Training Integrated Review Group
- Molecular, Cellular and Developmental Neuroscience Integrated Review Group
- Muscular Dystrophy Coordinating Committee
- Musculoskeletal, Oral, and Skin Sciences Integrated Review Group
- National Advisory Allergy and Infectious Diseases Council
- National Advisory Board on Medical Rehabilitation Research
- National Advisory Child Health and Human Development Council
- National Advisory Council for Biomedical Imaging and Bioengineering
- National Advisory Council for Complementary and Integrative Health
- National Advisory Council for Human Genome Research
- National Advisory Council for Nursing Research
- National Advisory Council on Aging
- National Advisory Council on Alcohol Abuse and Alcoholism
- National Advisory Council on Drug Abuse
- National Advisory Council on Minority Health and Health Disparities

- National Advisory Dental and Craniofacial Research Council
- National Advisory Environmental Health Sciences Council
- National Advisory Eye Council
- National Advisory General Medical Sciences Council
- National Advisory Mental Health Council
- National Advisory Neurological Disorders and Stroke Council
- National Arthritis and Musculoskeletal and Skin Diseases Advisory Council
- National Cancer Advisory Board
- National Cancer Institute Clinical Trials and Translational Research Advisory Committee
- National Cancer Institute Council of Research Advocates
- National Center for Advancing Translational Sciences Advisory Council
- National Deafness and Other Communication Disorders Advisory Council
- National Diabetes and Digestive and Kidney Diseases Advisory Council
- National Heart, Lung, and Blood Advisory Council
- National Science Advisory Board for Biosecurity
- National Toxicology Program Advisory Committee
- National Toxicology Program Special Emphasis Panel
- NIH Clinical Center Research Hospital Board
- Office of AIDS Research Advisory Council
- Office of Research Infrastructure Programs Special Emphasis Panel
- Oncology 1—Basic Translational Integrated Review Group
- Oncology 2—Translational Clinical Integrated Review Group
- Population Sciences and Epidemiology Integrated Review Group
- President's Cancer Panel
- Risk, Prevention and Health Behavior Integrated Review Group
- Scientific Advisory Committee on Alternative Toxicological Methods
- Scientific and Technical Review Board on Biomedical and Behavioral Research Facilities
- Scientific Management Review Board
- Sickle Cell Disease Advisory Committee
- Sleep Disorders Research Advisory Board
- Social and Community Influences on Health Integrated Review Group
- Surgical Sciences, Biomedical Imaging and Bioengineering Integrated Review Group
- Vaccine Research Center Board of Scientific Counselors National Institute of Allergy and Infectious Diseases
- Vascular and Hematology Integrated Review Group

5. *Justification that the information or advice provided by the Federal advisory committee or subcommittee is not available from another Federal advisory committee, another Federal Government source, or any other more cost-effective and less burdensome source:*

The committee is a technical advisory group established to provide guidance to the National Toxicology Program Steering Committee and Program Director on issues related to the program's scientific content. The Committee also evaluates the scientific quality of the NTP's interagency and collaborative efforts. Members will be selected from recognized authorities knowledgeable in and with contemporary expertise relevant to toxicology and the NTP mission, including but not limited to expertise in toxicology, translational science, medicine, communication sciences, and data sciences.

6. *If the consultation is a committee renewal, a summary of the previous accomplishments of the committee and the reasons it needs to continue:*

The Board provides advice to the National Toxicology Program Steering Committee and Program Director on matters of scientific program content, to evaluate the scientific merits of the interagency and collaborative programs of the NTP, and to provide external scientific advice on NTP activities. Due to the unique function and objectives of the NTP within the public sector, an independent advisory committee is required that includes a breadth of scientific expertise within the membership and a membership that can evaluate and advise on activities ranging from basic research to large-scale chemical testing.

When the committee last met, they focused on recommendations to advance strategic priorities, program evaluation, stakeholder engagement, climate change impacts, and social determinants of health. They had extensive discussions that resulted in numerous recommendations to strengthen toxicology assessment approaches, improve performance metrics, expand scientific partnerships, and address vulnerable population exposures. This included a unanimous recommendation for approval of a bioinformatics support contract concept to enhance NIEHS research capabilities involving complex multidimensional datasets.

7. *Explanation of why the committee/subcommittee is essential to the conduct of agency business:*

Due to the unique function and objectives of the NTP within the public sector, an independent advisory committee is required that includes a breadth of scientific expertise within the membership and a membership that can evaluate and advise on activities ranging from basic research to large-scale chemical testing.

In conclusion, this public interest determination documents that renewing the committee is in the public interest, essential to the conduct of agency business, and that the information to be obtained is not already available through another advisory committee or source within the Federal Government.

Inquiries may be directed to Patricia Brandt Hansberger, Acting Director, Office of Federal Advisory Committee Policy, Office of the Director, National Institutes of Health, 6701 Democracy Boulevard, Suite 1000, Bethesda, Maryland 20892 (Mail code 4875), Telephone (301) 496–2123, or *patricia.hansberger@nih.gov.*

Dated: October 28, 2026.

Denise M. Santeufemio,

Supervisory Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2026–22549 Filed 11–4–26; 8:45 am]

BILLING CODE 4167–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Center for Scientific Review; Amended Notice of Meeting

Notice is hereby given of a change in the meeting of the Center for Scientific Review Special Emphasis Panel, Topics in Health Services Research: Youth and Young Adult Mental Health November 18, 2026, 10:00 a.m. to November 18, 2026, 05:00 p.m., National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892 which was published in the **Federal Register** on October 21, 2026, 91 FR 66567, Doc No 2026–21526.

This meeting is being amended to change the meeting date from November 18, 2026, to December 2, 2026. The meeting is closed to the public.

Dated: November 2, 2026.

Sterlyn H. Gibson,

Program Specialist, Office of Federal Advisory Committee Policy.

[FR Doc. 2026–22545 Filed 11–4–26; 8:45 am]

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