

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Availability of the Final Environmental Assessment (Final EA) and a Finding of No Significant Impact (FONSI) for HHS/CDC Fort Collins Campus Proposed Improvements

AGENCY: Centers for Disease Control and Prevention, Department of Health and Human Services (HHS).

ACTION: Notice of Availability of Final Environmental Assessment and a Finding of No Significant Impact (FONSI) for HHS/CDC Fort Collins Campus Proposed Improvements.

SUMMARY: The Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS), is issuing this notice to advise the public that HHS/CDC has prepared and approved on March 22, 2016, a Finding of No Significant Impact (FONSI) based on the Final Environmental Assessment for proposed improvements on the HHS/CDC Fort Collins Campus. HHS/CDC prepared the Final EA in accordance with the National Environmental Policy Act of 1969 (NEPA), as amended (42 U.S.C. 4321 *et seq.*), the Council on Environmental Quality (CEQ) implementing regulations (40 CFR parts 1500–1508) and the HHS General Administration Manual (GAM) Part 30 Environmental Procedures, dated February 25, 2000. HHS/CDC has determined that the proposed action would not have a significant impact on the human or natural environment and therefore, the preparation of an Environmental Impact Statement is not required.

DATES: The FONSI and Final EA are available as of the publication date of this notice.

ADDRESSES: Copies of the FONSI and Final EA are available at the following locations:

- Old Town Library, 201 Peterson Street, Fort Collins, Colorado 80524.
- Harmony Library, 4616 South Shields, Fort Collins, Colorado 80526.

Copies of the FONSI and/or Final EA can also be requested from: Robert Lawson, Centers for Disease Control and Prevention, Asset Management Services Office, MS K80, 1600 Clifton Road, Atlanta, GA 30329, 770–488–2447.

SUPPLEMENTARY INFORMATION: The Centers for Disease Control and

Prevention (CDC), an Operating Division (OPDIV) of the Department of Health and Human Services (HHS) has prepared a Final EA to assess the potential impacts associated with the undertaking of proposed improvements on the HHS/CDC Fort Collins Campus (CDC Fort Collins Campus) located on the Colorado State University (CSU) Foothills Campus in Fort Collins, Colorado. The Final EA analyzed the effects of the Build Alternative (Proposed Action) and the No Build Alternative. The Build Alternative consists of improvements to the CDC Fort Collins Campus which entails the construction of a new approximately 5,600 gsf building which will house laboratory support freezer space and communal space, upgrades to existing parking areas and additional infrastructure improvements. The No Build Alternative represents the continued operation of the existing facilities at the CDC Fort Collins Campus without any new construction or infrastructure upgrades.

The Final EA evaluated the potential impacts to socioeconomic and environmental justice, land use, zoning, public policy, community facilities and services, transportation, air quality, noise, cultural resources, urban design and visual resources, natural resources, utility service, hazardous materials, greenhouse gases and sustainability, and construction. HHS/CDC assessed the potential impacts of the Build Alternative in the Final EA and as a result issued a FONSI indicating that the proposed action will not have a significant impact on the environment.

Dated: March 28, 2016.

Sandra Cashman,

Executive Secretary, Centers for Disease Control and Prevention.

[FR Doc. 2016–07368 Filed 3–31–16; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10545, CMS–10309, CMS–855(A, B, I) and CMS–10468]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid 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 (the 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 any of the following subjects: (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.

DATES: Comments must be received by May 31, 2016.

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, you may make your request using one of following:

1. Access CMS' Web site address at <http://www.cms.hhs.gov/PaperworkReductionActof1995>.

2. Email your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@cms.hhs.gov.

3. Call the Reports Clearance Office at (410) 786-1326.

FOR FURTHER INFORMATION CONTACT:

Reports Clearance Office at (410) 786-1326.

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**).

ADDRESSES

CMS-10545—Outcome and Assessment Information Set (OASIS) OASIS-C2/ICD-10

CMS-10309—Grandfathering Provisions of the Medicare DMEPOS Competitive Bidding Program

CMS-855(A, B, I)—Medicare Enrollment Application

CMS-10468—Essential Health Benefits in Alternative Benefit Plans, Eligibility Notices, Fair Hearing and Appeal Processes, and Premiums and Cost Sharing; Exchanges: Eligibility and Enrollment

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.

1. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Outcome and Assessment Information Set (OASIS) OASIS-C2/ICD-10; *Use:* Home health agencies (HHAs) are required to collect the outcome and assessment

information data set (OASIS) to participate in the Medicare program. The OASIS item set has been revised and is now referred to as OASIS-C2. It is scheduled for implementation on January 1, 2017. The OASIS C2 is being modified to include changes pursuant to the Improving Medicare Post-Acute Care Transformation Act of 2014 (the IMPACT Act), and formatting changes throughout the document. *Form Number:* CMS-10545 (OMB control number: 0938-1279); *Frequency:* Occasionally; *Affected Public:* Private Sector (Business or other for-profit and Not-for-profit institutions); *Number of Respondents:* 12,198; *Total Annual Responses:* 17,900,000; *Total Annual Hours:* 15,812,511. (For policy questions regarding this collection contact Michelle Brazil at 410-786-1648).

2. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Grandfathering Provisions of the Medicare DMEPOS Competitive Bidding Program; *Use:* The grandfathering process was established in the April 10, 2007 final rule for competitive bidding for rented DME and oxygen and oxygen equipment included under the Medicare DMEPOS Competitive Bidding Program. This process only applies to suppliers that rented DME and oxygen and oxygen equipment to beneficiaries who maintain a permanent residence in a CBA before the implementation of the competitive bidding program. The competitive bidding program will require some beneficiaries to change their suppliers. In order to avoid a beneficiary being without medically necessary equipment we felt it necessary to establish this notification process. *Form Number:* CMS-10309 (OMB control number: 0938-1079); *Frequency:* Occasionally; *Affected Public:* Private Sector (Business or other for-profit and Not-for-profit institutions); *Number of Respondents:* 1,125; *Total Annual Responses:* 39,998; *Total Annual Hours:* 4,535. (For policy questions regarding this collection contact Djanira Rivera at 410-786-8646).

3. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Medicare Enrollment Application; *Use:* The primary function of the CMS-855 Medicare enrollment application is to gather information from a provider or supplier that tells us who it is, whether it meets certain qualifications to be a health care provider or supplier, where it practices or renders its services, the

identity of the owners of the enrolling entity, and other information necessary to establish correct claims payments. *Form Number:* CMS-855(A, B, I) (OMB control number: 0938-0685); *Frequency:* Annually; *Affected Public:* Private Sector (Business or other for-profit and Not-for-profit institutions); *Number of Respondents:* 1,735,800; *Total Annual Responses:* 86,480; *Total Annual Hours:* 290,193. (For policy questions regarding this collection contact Kimberly McPhillips at 410-786-5374.)

4. *Type of Information Collection Request:* Extension of a previously approved collection; *Title of Information Collection:* Essential Health Benefits in Alternative Benefit Plans, Eligibility Notices, Fair Hearing and Appeal Processes, and Premiums and Cost Sharing; Exchanges: Eligibility and Enrollment; *Use:* The Patient Protection and Affordable Care Act, Public Law 111-148, enacted on March 23, 2010, and the Health Care and Education Reconciliation Act, Public Law 111-152, expands access to health insurance for individuals and employees of small businesses through the establishment of new Affordable Insurance Exchanges (Exchanges), including the Small Business Health Options Program (SHOP). The Exchanges, which became operational on January 1, 2014, enhanced competition in the health insurance market, expanded access to affordable health insurance for millions of Americans, and provided consumers with a place to easily compare and shop for health insurance coverage. The reporting requirements and data collection in Medicaid, Children's Health Insurance Programs, and Exchanges: Essential Health Benefits in Alternative Benefit Plans, Eligibility Notices, Fair Hearing and Appeal Processes, and Premiums and Cost Sharing; Exchanges: Eligibility and Enrollment (CMS-2334-F) address: (1) Standards related to notices, (2) procedures for the verification of enrollment in an eligible employer-sponsored plan and eligibility for qualifying coverage in an eligible employer-sponsored plan; and (3) other eligibility and enrollment provisions to provide detail necessary for state implementation. *Form Number:* CMS-10468 (OMB control number: 0938-1207); *Frequency:* Annually; *Affected Public:* Individuals, Households and Private Sector; *Number of Respondents:* 13,200; *Total Annual Responses:* 13,200; *Total Annual Hours:* 8,899. (For

policy questions regarding this collection contact Sarah Boehm at 301-492-4429.)

Dated: March 29, 2016.

William N. Parham, III,

Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2016-07423 Filed 3-31-16; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: ORR-3 Placement Report and ORR-4 Progress Report for Unaccompanied Refugee Minors (URM) Program.

OMB No.: 0970-0034.

Description: As required by section 412(d) of the Immigration and Nationality Act, the Administration for Children and Families (ACF), Office of Refugee Resettlement (ORR), is requesting the information from report Form ORR-3 and ORR-4 to administer the Unaccompanied Refugee Minors

(URM) program. The ORR-3 (Placement Report) is submitted to ORR by the State agency at the minor's initial placement in the resettlement State within 30 days of the placement, and whenever there is a change in the minor's status, including termination from the program, within 60 days of the change or closure of the case. The ORR-4 (Progress Report) is submitted every 12 months beginning with 12 months from the date of the initial placement to record outcomes of the child's progress toward the goals listed in the child's case plan. ORR-4 is also submitted along with the initial ORR-3 report for 17 years old or above youth related to independent living and/or educational plans. The ORR regulations per 45 CFR 400.120 describe specific URM program reporting requirements.

Respondents: State governments.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ORR-3	15	Estimated responses 178	0.25 (15 min)	Estimated 667.5.
ORR-4	15	Estimated responses 127	1.25 (1 hour and 15 min)	Estimated 2,381.25.

Estimated Total Annual Burden Hours: 3,048.75.

In compliance with the requirements of Section 506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 330 C Street SW., Washington DC 20201. Attn: ACF Reports Clearance Officer. Email address: *infocollection@acf.hhs.gov*. All requests should be identified by the title of the information collection.

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.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2016-07361 Filed 3-31-16; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Low Income Home Energy Assistance Program (LIHEAP) Leveraging Report.

OMB No.: 0970-0121.

Description: The LIHEAP leveraging incentive program rewards LIHEAP grantees that have leveraged non-federal home energy resources for low-income households. The LIHEAP leveraging report is the application for leveraging incentive funds that the LIHEAP

grantees submit to the U.S. Department of Health and Human Services (HHS) for each fiscal year in which they leverage countable resources. Participation in the leveraging incentive program is voluntary and is described at 45 CFR 96.87. The LIHEAP leveraging report obtains information on the resources leveraged by LIHEAP grantees each federal fiscal year, e.g., as cash, discounts, waivers, and in-kind; the benefits provided to low-income households by these resources, for example, as fuel and payments for fuel, as home heating and cooling equipment, and as weatherization materials and installation; and the fair market value of these resources/benefits.

HHS needs this information in order to carry out federal statutory requirements for administering the LIHEAP leveraging incentive program, to determine accountability and valuation of grantees' leveraged non-federal home energy resources, and to determine grantees' shares of leveraging incentive funds. HHS proposes to request a three-year clearance by OMB for the LIHEAP leveraging report information collection which has received OMB approval in the past. Respondents: State, Local or Tribal Governments.