qualified to participate in the auction and has complied with the various applicable regulatory and statutory auction requirements for such participation. This approach provides an appropriate screen to ensure serious participation without being unduly burdensome.

Federal Communications Commission.

Marlene H. Dortch,

Secretary, Office of the Secretary. [FR Doc. 2017–12830 Filed 6–19–17; 8:45 am] BILLING CODE 6712–01–P

### FEDERAL ELECTION COMMISSION

#### **Sunshine Act Meetings**

AGENCY: Federal Election Commission.

DATE AND TIME: Thursday, June 22, 2017
At 11:15 a.m.

**PLACE:** 999 E Street NW., Washington, DC (Ninth Floor).

**STATUS:** This meeting will be open to the public.

#### Items To Be Discussed

Draft Advisory Opinion 2017–01:
American Urological Association
Draft Advisory Opinion 2017–03:
American Association of Clinical
Urologists, Inc./UROPAC
Draft Advisory Opinion 2017–04:
Lancman for Congress

Audit Division Recommendation Memorandum on the American Financial Services Association PAC (AFSAPAC) (A15–11)

Discussion of Commission's Response to Alleged Foreign Interference in American Elections

MANAGEMENT AND ADMINISTRATIVE
MATTERS: Individuals who plan to
attend and require special assistance,
such as sign language interpretation or
other reasonable accommodations,
should contact Dayna C. Brown,
Secretary and Clerk, at (202) 694–1040,
at least 72 hours prior to the meeting
date.

## PERSON TO CONTACT FOR INFORMATION:

Judith Ingram, Press Officer. *Telephone:* (202) 694–1220.

### Dayna C. Brown,

Secretary and Clerk of the Commission. [FR Doc. 2017–12896 Filed 6–16–17; 11:15 am]

BILLING CODE 6715-01-P

## FEDERAL RETIREMENT THRIFT INVESTMENT

Board Member Meeting, June 26, 2017, 8:30 A.M. (In-Person)

Open Session

- 1. Approval of the Minutes for the May 31, 2017 Board Member Meeting
- 2. Monthly Reports
- (a) Participant Activity Report
- (b) Investment Performance Report
- (c) Legislative Report
- 3. Vendor Financials
- 4. EBSA Audit Reports Update
- 5. IT Update

### **Closed Session**

Information covered under 5 U.S.C. 552b(c)(4) and (c)(9)(B).

**CONTACT PERSON FOR MORE INFORMATION:** Kimberly Weaver, Director, Office of External Affairs, (202) 942–1640.

Dated: June 15, 2017.

### Megan Grumbine,

General Counsel, Federal Retirement Thrift Investment Board.

[FR Doc. 2017–12847 Filed 6–19–17; 8:45 am]

BILLING CODE 6760-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Centers for Medicare & Medicaid Services

[Document Identifiers: CMS-10265 and CMS-10638]

Agency Information Collection Activities: Submission for OMB Review; 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 (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 a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate 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 on the collection(s) of information must be received by the OMB desk officer by July 20, 2017.

ADDRESSES: When commenting on the proposed information collections, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be received by the OMB desk officer via one of the following transmissions: OMB, Office of Information and Regulatory Affairs, Attention: CMS Desk Officer, Fax Number: (202) 395–5806 OR Email: OIRA\_submission@omb.eop.gov

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 Web site address at https:// www.cms.gov/Regulations-and-Guidance/Legislation/Paperwork ReductionActof1995/PRA-Listing.html.

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: William Parham at (410) 786–4669.

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (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 (44 U.S.C. 3506(c)(2)(A)) requires federal agencies to publish a 30-day notice in the Federal Register concerning each proposed collection of information, including each proposed extension, revision 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 that summarizes the following proposed collection(s) of information for public comment:

1. Type of Information Collection Request: Reinstatement of a currently approved collection; Title of Information Collection: Mandatory Insurer Reporting Requirements of Section 111 of the Medicare, Medicaid and SCHIP Act of 2007; Use: The CMS is responsible for oversight and implementation of the MSP provisions as part of its overall authority for the Medicare program. The CMS accomplishes this through a combination of direct CMS action and work by CMS' contractors. The CMS efforts include policy and operational guidelines, including regulations (as necessary), as well as oversight over contractor MSP responsibilities. As a result of litigation in the mid-1990's, certain GHP insurers were mandated to report coverage information for a number of years. Subsequent to this litigation related mandatory reporting, CMS instituted a Voluntary Data Sharing Agreement (VDSA) effort which expanded the scope of the GHP participants and added some NGHP participants. This VDSA process complemented the IRS/SSA/CMS Data Match reporting by employers, but clearly did not include the universe of primary payers and had few NGHP participants. Both GHP and NGHP entities have had and continue to have the responsibility for determining when they are primary to Medicare and to pay appropriately, even without the mandatory Section 111 process. In order to make this determination, they should already and always be collecting most of the information CMS will require in connection with Section 111 of the MMSEA. Section 111 establishes separate mandatory reporting requirements for GHP arrangements as well as for liability insurance (including self-insurance), no-fault insurance, and workers' compensation, these may collectively be referred to as "Non-GHP or NGHP." Form Number: CMS-10265 (OMB control number: 0938-1074); Frequency: Yearly, Quarterly; Affected Public: Private Sector (Business or other for-profits); Number of Respondents: 19,248; Total Annual Responses: 5,019,248; Total Annual Hours: 557,826. (For policy questions regarding this collection contact John Albert at 410-786-7457.)

2. Type of Information Collection Request: New collection (Request for a new OMB control number); Title of Information Collection: Add-On Payments for New Medical Services and Technologies Paid Under the Inpatient Prospective Payment System; Use: Sections 1886(d)(5)(K) and (L) of the Act establish a process of identifying and ensuring adequate payment for new medical services and technologies (sometimes collectively referred to in this section as "new technologies") under the IPPS. Section1886(d)(5)(K)(vi) of the Act specifies that a medical

service or technology will be considered new if it meets criteria established by the Secretary after notice and opportunity for public comment. Section 1886(d)(5)(K)(ii)(I) of the Act specifies that a new medical service or technology may be considered for new technology add-on payment if, "based on the estimated costs incurred with respect to discharges involving such service or technology, the DRG prospective payment rate otherwise applicable to such discharges under this subsection is inadequate." The regulations at 42 CFR 412.87 implement these provisions and specify three criteria for a new medical service or technology to receive the additional payment: (1) The medical service or technology must be new; (2) the medical service or technology must be costly such that the DRG rate otherwise applicable to discharges involving the medical service or technology is determined to be inadequate; and (3) the service or technology must demonstrate a substantial clinical improvement over existing services or technologies. We use the application in order to determine if a technology meets the new technology criteria. Form Number: CMS-10638 (OMB Control Number: 0938—New); Frequency: Yearly; Affected Public: Individuals and households, Private sector (Business or other for-profits and Not-for-profits institutions; Number of Respondents: 15; Total Annual Responses: 15; Total Annual Hours: 600. (For policy questions regarding this collection contact Noel Manlove at 410-786-5161.)

Dated: June 15, 2017.

### William N. Parham, III,

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

[FR Doc. 2017–12849 Filed 6–19–17; 8:45 am] **BILLING CODE 4120–01–P** 

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **Administration for Community Living**

Agency Information Collection Activities; Proposed Collection; Comment Request; Data Collection Materials for the Evaluation of the Administration for Community Living's American Indian, Alaska Natives and Native Hawaiian Programs (OAA Title VI)

**AGENCY:** Administration for Community Living, HHS.

**ACTION:** Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing that the proposed collection of information listed above has been submitted to the Office of Management and Budget (OMB) for review and clearance as required under section 506(c)(2)(A) of the Paperwork Reduction Act of 1995. This 30-Day notice collects comments on the information collection requirements related to a new collection (ICR New).

**DATES:** Submit written or electronic comments on the collection of information by July 20, 2017.

ADDRESSES: Submit written comments on the collection of information by fax 202.395.5806 or by email to OIRA\_submission@omb.eop.gov, Attn: OMB Desk Officer for ACL; or by mail to the Office of Information and Regulatory Affairs, OMB, New Executive Office Bldg., 725 17th St. NW., Rm. 10235, Washington, DC 20503, Attn: OMB Desk Officer for ACL.

### FOR FURTHER INFORMATION CONTACT:

Kristen Hudgins, 202–795–7732; email: kristen.hudgins@acl.hhs.gov.

**SUPPLEMENTARY INFORMATION:** In compliance with 44 U.S.C. 3507, ACL has submitted the following proposed collection of information to OMB for review and clearance.

The Data Collection Materials for the Evaluation of the Administration for Community Living's American Indian, Alaska Natives and Native Hawaiian Programs (OAA Title VI) is a new data collection (ICR-New) that will include focus groups for elders and caregiver program participants, interviews with Title VI staff, and a survey for caregiver program participants. The Evaluation of the Administration for Community Living's American Indian, Alaska Natives and Native Hawaiian Programs will allow ACL/AoA to document the value of the Title VI programs for individuals, families, communities and Tribes/Tribal Organizations. ACL estimates the annual burden of this collection of information as follows:

The proposed data collection tools may be found on the ACL Web site at: https://www.acl.gov/about-acl/policy-and-regulations.