

The estimated annual hour burden is as follows:

Type of data collection	Number of respondents	Responses/ respondent	Hours/ response	Total hours
Focus groups .....	250	1	2.50	625
Self-administered, mail, telephone and e-mail surveys .....	89,750	1	.250	22,438
Total .....	90,000	.....	.....	23,063

Send comments to Summer King, SAMHSA Reports Clearance Officer, 5600 Fishers Lane, Room 15E57-B, Rockville, Maryland 20857, *OR* email a copy to [summer.king@samhsa.hhs.gov](mailto:summer.king@samhsa.hhs.gov). Written comments should be received by November 29, 2019.

**Summer King,**  
*Statistician.*

[FR Doc. 2019-21133 Filed 9-27-19; 8:45 am]

**BILLING CODE 4162-20-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276-1112.

*Comments are invited on:* (a) Whether the proposed collections of information are 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) ways to enhance 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.

#### Proposed Project: National Mental Health Services Survey (N-MHSS) (OMB No. 0930-0119)—Revision

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Behavioral Health Statistics and Quality (CBHSQ) is requesting a revision to the National Mental Health Services Survey (N-MHSS) (OMB No. 0930-0119), which expires on January 31, 2020. The N-MHSS provides annual national and state-level data on the number and characteristics of mental health treatment facilities in the United States and biennial national and state-level data on the number and characteristics of persons treated in these facilities. The information in the N-MHSS is needed to assess the nature and extent of these resources, to identify gaps in services, and to provide a database for treatment referrals.

The request for OMB approval will include a request to conduct the N-MHSS and the between-survey updates in 2020, 2021, and 2022. This update is a procedure for collecting services data from newly identified facilities between main cycles of the survey and will be used to improve the listing of treatment facilities in the online Behavioral Health Treatment Services Locator.

The N-MHSS will provide updated information about facilities for SAMHSA's online Behavioral Health Treatment Services Locator (see: <https://findtreatment.samhsa.gov>), which was last updated with information from the N-MHSS in 2018. A full-scale N-MHSS will be conducted in 2020 and 2022 to collect (1) information about facilities needed for updating the online Locator, such as the facility name and address, specific services offered, and special client groups served and (2) additional information about client counts and the demographics of persons treated in these facilities. An abbreviated N-MHSS (N-MHSS-Locator Survey) will be conducted in 2021 only to update the information about facilities in the online Locator. Three small surveys are proposed for adding new facilities to the online Locator as they become known to SAMHSA. Both the 2021 N-MHSS-

Locator Survey and the addition of new facilities to the online Locator will use the same N-MHSS-Locator Survey instrument.

This request for a revision seeks to change the content of the currently approved abbreviated N-MHSS (*i.e.*, N-MHSS-Locator) survey instrument, and the previously approved 2018 full-scale N-MHSS (OMB No. 0930-0119) to accommodate two related N-MHSS activities:

(1) Collection of information from the total N-MHSS universe of mental health treatment facilities during 2020, 2021, and 2022; and

(2) collection of information on newly identified facilities throughout the year as they are identified so that new facilities can quickly be added to the online Locator.

The survey mode for both data collection activities will be web with telephone follow-up. A paper questionnaire will also be available to facilities who request one.

The database resulting from the N-MHSS will be used to update SAMHSA's online Behavioral Health Treatment Services Locator and to produce an electronic version of a national directory of mental health facilities, for use by the general public, behavioral health professionals, and treatment service providers. In addition, a data file derived from the survey will be used to produce a summary report providing national and state-level outcomes. The summary report and a public-use data file will be used by researchers, mental health professionals, State governments, the U.S. Congress, and the general public.

The request for OMB approval will include a request to conduct a full-scale N-MHSS in 2020 and 2022, and an abbreviated N-MHSS-Locator survey in 2021.

The following table summarizes the estimated annual response burden for the I-BHS and the N-MHSS:

SUMMARY OF ESTIMATED ANNUAL BURDEN FOR THE N–MHSS

Facility respondent	Number of respondents	Responses per respondent	Average hours per response	Total burden hours
Facilities in full-survey N–MHSS universe in 2020 and 2022 .....	17,000	1	0.75	12,750
Newly identified facilities in Between-Survey Update in 2017, 2018, and 2019 <sup>1,2</sup> .....	1,700	1	0.42	714
Facilities in N–MHSS-Locator Survey universe in 2021 .....	17,000	1	0.42	7,140
Average Annual Total .....	18,700	1	0.59	11,118

<sup>1</sup> Throughout the year, approximately ten percent of facilities close or merge and a similar number of new facilities are identified.

<sup>2</sup> Collection of information on newly identified facilities throughout the year, as they are identified, so that new facilities can quickly be added to the Locator.

To stay current with the field and to collect policy relevant information, SAMHSA will add a series of questions about facilities offering pharmacotherapy for the treatment of serious mental illness (SMI), in particular information on the first- and second-generation antipsychotics used by these facilities. Also, a series of questions on crisis services were added to the survey. The N–MHSS will also be collecting information on facilities providing services to persons experiencing first episode psychosis (FEP), which was not asked in previous versions of the survey. In consultation with experts in the field, some categories and wording were updated to reflect current terminology in the field.

Send comments to Summer King, SAMHSA Reports Clearance Officer, 5600 Fishers Lane, Room 15E21–B, Rockville, MD 20857 OR email a copy at [summer.king@samhsa.hhs.gov](mailto:summer.king@samhsa.hhs.gov). Written comments should be received by November 29, 2019.

**Summer King,**  
Statistician.

[FR Doc. 2019–21137 Filed 9–27–19; 8:45 am]

BILLING CODE 4162–20–P

**DEPARTMENT OF HOMELAND SECURITY**

**Federal Emergency Management Agency**

[Docket ID FEMA–2019–0002]

**Final Flood Hazard Determinations**

**AGENCY:** Federal Emergency Management Agency, DHS.

**ACTION:** Notice.

**SUMMARY:** Flood hazard determinations, which may include additions or modifications of Base Flood Elevations (BFEs), base flood depths, Special Flood Hazard Area (SFHA) boundaries or zone designations, or regulatory floodways on the Flood Insurance Rate Maps (FIRMs) and where applicable, in the supporting Flood Insurance Study (FIS) reports have been made final for the communities listed in the table below.

The FIRM and FIS report are the basis of the floodplain management measures that a community is required either to adopt or to show evidence of having in effect in order to qualify or remain qualified for participation in the Federal Emergency Management Agency’s (FEMA’s) National Flood Insurance Program (NFIP). In addition, the FIRM and FIS report are used by insurance agents and others to calculate appropriate flood insurance premium rates for buildings and the contents of those buildings.

**DATES:** The date of March 6, 2020 has been established for the FIRM and, where applicable, the supporting FIS report showing the new or modified flood hazard information for each community.

**ADDRESSES:** The FIRM, and if applicable, the FIS report containing the final flood hazard information for each community is available for inspection at the respective Community Map Repository address listed in the tables below and will be available online through the FEMA Map Service Center at <https://msc.fema.gov> by the date indicated above.

**FOR FURTHER INFORMATION CONTACT:** Rick Sacbibit, Chief, Engineering Services Branch, Federal Insurance and Mitigation Administration, FEMA, 400

C Street SW, Washington, DC 20472, (202) 646–7659, or (email) [patrick.sacbibit@fema.dhs.gov](mailto:patrick.sacbibit@fema.dhs.gov); or visit the FEMA Map Information eXchange (FMIX) online at [https://www.floodmaps.fema.gov/fhm/fmx\\_main.html](https://www.floodmaps.fema.gov/fhm/fmx_main.html).

**SUPPLEMENTARY INFORMATION:** The Federal Emergency Management Agency (FEMA) makes the final determinations listed below for the new or modified flood hazard information for each community listed. Notification of these changes has been published in newspapers of local circulation and 90 days have elapsed since that publication. The Deputy Associate Administrator for Insurance and Mitigation has resolved any appeals resulting from this notification.

This final notice is issued in accordance with section 110 of the Flood Disaster Protection Act of 1973, 42 U.S.C. 4104, and 44 CFR part 67. FEMA has developed criteria for floodplain management in floodprone areas in accordance with 44 CFR part 60.

Interested lessees and owners of real property are encouraged to review the new or revised FIRM and FIS report available at the address cited below for each community or online through the FEMA Map Service Center at <https://msc.fema.gov>.

The flood hazard determinations are made final in the watersheds and/or communities listed in the table below. (Catalog of Federal Domestic Assistance No. 97.022, “Flood Insurance.”)

**Michael M. Grimm,**  
Assistant Administrator for Risk Management, Department of Homeland Security, Federal Emergency Management Agency.

Community	Community map repository address
<b>Escambia County, Alabama and Incorporated Areas</b> <b>Docket No.: FEMA–B–1868</b>	
City of Atmore .....	City Hall, 201 East Louisville Avenue, Atmore, AL 36502.