

and associated materials (see **ADDRESSES**).

**CMS-R-142 Examination and Treatment for Emergency Medical Conditions and Women in Labor (EMTALA)**

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.

*Information Collection*

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Examination and Treatment for Emergency Medical Conditions and Women in Labor (EMTALA); *Use:* Pursuant to section 1866(a)(1)(I) of the Act, Congress has mandated that the Secretary enforce section 1867 of the Act. Under section 1867, effective August 1, 1986, hospitals may continue to participate in the Medicare program only if they are not out of compliance with its provisions. Continued Paper Work Reduction Act (PRA) approval of the regulation sections cited below will promote uniform and thorough application of the section 1866 and 1867 requirements. They will also provide information when requested by Congress and other interested parties regarding the implementation of the statute. During 2004 through 2018, approximately 8,146 complaints were received, approximately 7,770 of those complaints were investigated, and approximately 3,567 EMTALA deficiencies were found. During Federal fiscal years 2001 through 2005 the Inspector General’s Office imposed civil monetary penalties on hospitals in 105 cases, for a total of \$2,645,750 in penalties. An audit completed by the Office of Inspector General (OIG) (entitled, Office of Inspector General: Implementation and Enforcement of the Examination and Treatment for

Emergency Medical Conditions and Women in Labor by the Health Care Financing Administration, April 1995, A-06-93-00087) determined that CMS’s implementation of the Act was generally effective, but Regional Offices (RO) were not consistent with conducting timely investigations, sending acknowledgments to complaints, ensuring that investigations were thorough, or ensuring that violations were referred to the OIG in accordance with CMS policy for possible civil monetary penalty action. OIG further concluded that without proper compliance, there is an increased risk that individuals with emergency medical conditions will not receive the treatment needed to stabilize their condition, which may place them in greater risk of death. *Form Number:* CMS-R-142 (OMB control number: 0938-0667); *Frequency:* Occasionally; *Affected Public:* Private Sector; Business or other for-profits, Not-for-profit institutions; *Number of Respondents:* 5,291; *Total Annual Responses:* 5,291; *Total Annual Hours:* 5,291. (For policy questions regarding this collection contact Renate Dombrowski at (410) 786-4645.)

Dated: November 14, 2019.

**William N. Parham, III,**  
*Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Evaluation of the National Human Trafficking Hotline Program (New Collection)**

**AGENCY:** Office of Planning, Research, and Evaluation; Administration for Children and Families; HHS.

**ACTION:** Request for public comment.

**SUMMARY:** The Office of Planning, Research, and Evaluation (OPRE) is proposing a data collection activity as part of the Evaluation of the National Human Trafficking Hotline (NHTH) Program. This data collection activity will examine the experiences of individuals who seek assistance from the NHTH after their interactions with the NHTH. The study will collect information via voluntary phone and Web-based surveys at two time points: (1) Immediately after an individual has

contacted the NHTH by phone, text, or live online chat; and (2) two weeks later.

**DATES:** *Comments due within 30 days of publication.* OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication.

**ADDRESSES:** Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Email: [OIRA\\_SUBMISSION@OMB.EOP.GOV](mailto:OIRA_SUBMISSION@OMB.EOP.GOV), Attn: Desk Officer for the Administration for Children and Families.

Copies of the proposed collection may be obtained by emailing [OPREinfocollection@acf.hhs.gov](mailto:OPREinfocollection@acf.hhs.gov). Alternatively, copies can also be obtained by writing to the Administration for Children and Families, Office of Planning, Research, and Evaluation, 330 C Street SW, Washington, DC 20201, Attn: OPRE Reports Clearance Officer. All requests, emailed or written, should be identified by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**

*Description:* The purpose of the proposed data collection activity is to document and examine the following: Why individuals contact the NHTH; hotline users’ perceptions of hotline staff’s knowledge and skills; the extent to which users felt their interaction was helpful, they were supported by the NHTH, they were satisfied with the NHTH, and their needs were met by the interaction; and outcomes from NHTH interactions (*e.g.*, users’ knowledge and use of available resources and referrals). The proposed data collection activity includes a two-phase approach to obtain information from individuals after their contact (via phone, text, or live online chat) with the NHTH. The proposed information collection activities are (1) an integrated voice response telephone survey or Web-based survey immediately after NHTH contact; and (2) a telephone or Web-based survey approximately two weeks after completion of the first survey. The survey immediately after contact with the NHTH will be offered to all individuals who contact the NHTH during the data collection period and includes questions focused on users’ experiences and satisfaction with their NHTH interaction. The follow-up survey will be administered two weeks later with a sample of respondents who completed the immediate survey and

consented to be contacted two weeks later. This second survey includes questions focused on the extent to

which NHTH users were satisfied with their NHTH contact and felt that the NHTH contact was helpful.

*Respondents:* Individuals who contact the NHTH by telephone, text, or live online chat.

ANNUAL BURDEN ESTIMATES

Instrument	Total/annual number of respondents	Number of responses per respondent	Average burden hours per response	Annual burden hours
Immediate Follow-Up Survey .....	2,000	1	.12	240
2-Week Follow-Up Survey .....	310	1	.15	47

*Estimated Total Annual Burden Hours:* 247.

**Authority:** Section 105(d)(2) of the Trafficking Victims Protection Act of 2000 (TVPA) (Pub. L. 106–386) § 105 [22 U.S.C. 7103].

**Mary B. Jones,**

*ACF/OPRE Certifying Officer.*

[FR Doc. 2019–25059 Filed 11–18–19; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; National Human Trafficking Training and Technical Assistance Center (NHTTAC) Evaluation Package (OMB #0970–0519)**

**AGENCY:** Office on Trafficking in Persons, Administration for Children and Families, Department of Health and Human Services.

**ACTION:** Request for public comment.

**SUMMARY:** The Office on Trafficking in Persons (OTIP), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is requesting to continue data collection with an increased number of respondents to the previously approved information collection, National Human Trafficking Training and Technical Assistance Center (NHTTAC) Evaluation Package (OMB #0970–0519, expiration 10/31/2021). This request was originally approved under expedited review and increased the estimated burden hours from 689 hours to 9,497 hours. In addition, the previously approved Stop, Observe, Ask, and Respond to human trafficking (SOAR) Online Participant

Feedback Form was restructured into a long and short form to reduce burden for information collected on SOAR Online training participants outside of the NHTTAC learning management system. There are no changes requested to the items on any forms.

**DATES:** *Comments due within 60 days of publication.* In compliance with the requirements of Section 3506(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.

**ADDRESSES:** Copies of the proposed collection of information can be obtained and comments may be forwarded by emailing *infocollection@acf.hhs.gov*. Alternatively, copies can also be obtained 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. All requests, emailed or written, should be identified by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**

*Description:* These changes are requested due to the passage of the Stop, Observe, Ask, and Respond to Health and Wellness Act of 2018 (SOAR to Health and Wellness Act of 2018) (Pub. L. 115–398), which expands the SOAR to Health and Wellness Training Program. To meet the provisions of the SOAR to Health and Wellness Act of 2018, OTIP’s NHTTAC had to expand the administration of SOAR nationwide.

The NHTTAC delivers training and technical assistance (T/TA) to inform and deliver a public health response to trafficking. In applying a public health approach, NHTTAC holistically builds the capacity of communities to identify and respond to the complex needs of all individuals who have been trafficked,

and addresses the root causes that put individuals, families, and communities at risk of trafficking. This will ultimately help improve the availability and delivery of coordinated and trauma-informed services before, during, and after an individual’s trafficking exploitation, regardless of their age, gender, nationality, sexual orientation, or type of exploitation.

NHTTAC hosts a variety of services, programs, and facilitated sessions to improve service provision to individuals who have been trafficked, or who are at risk of trafficking, including the Human Trafficking Leadership Academy (HTLA); the Survivor Fellowship Program; the NHTTAC Call Center; both short-term and specialized T/TA requests (requests that take less than 3 hours or 3 or more hours to fulfill, respectively); OTIP-funded grantees; and information through NHTTAC’s website, resources, and materials about trafficking.

*Respondents:* Individuals and organizations such as NHTTAC consultants, T/TA participants, HTLA program participants, Survivor fellows, OTIP grantees, visitors to the NHTTAC website, NHTTAC-supported conference and meeting attendees, members of the National Advisory Council, and scholarship applicants.

**Annual Burden Estimates**

The following instruments have an increased number of respondents. The number of respondents for all other previously approved instruments remains the same. The increase in respondents increased the overall burden under OMB #0970–0519 from 689 hours to 9,497 hours. See *https://www.reginfo.gov/public/do/PRAViewICR?ref\_nbr=201910-0970-012* for all instruments and related burden under OMB #0970–0519.

Instrument	Original estimate— number of respondents	Updated estimate— number of respondents	Number of responses per respondent	Average burden hours per response	Updated annual burden hours
HTLA Fellowship Pre-Program Feedback .....	24	36	1	0.25	9