400 responses will be required, which is based on over 500,000 group outreach and education event attendees in 2018. ACL will draw a representative sample of event attendees by surveying each of the 54 participating states and territories at least once. An average event surveyed in FY18 or FY19 generated 11 completed surveys, resulting in an estimated minimal collection of 600 responses. In the first three years of the existing survey states and territories had the opportunity to exceed the minimum requirements, in order to collect a larger overall dataset for their state or territory. This opportunity will continue with the renewed survey. Assuming that an average state or territory collects 100 surveys per year, the maximum burden estimate is 5400 responses per year. The proposed data collection tools may be found on the ACL website for review at *https://www.acl.gov/aboutacl/public-input.*

Estimated Program Burden

ACL estimates the burden associated with this collection of information as follows:

Respondent/data collection activity	Number of respondents (minimum)	Responses per respondent	Hours per response	Annual burden hours
Survey, Stratified Random Sample	600	1	5/60	50
Total	600	1	5/60	50
Respondent/data collection activity	Number of respondents (maximum)	Responses per respondent	Hours per response	Annual burden hours
Survey, Stratified Random Sample	5400	1	5/60	450
Total	5400	1	5/60	450

Dated: December 19, 2019. **Mary Lazare,** *Principal Deputy Administrator.*

[FR Doc. 2019–28104 Filed 12–27–19; 8:45 am] BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

[OMB# 0985-0040]

Agency Information Collection Activities; Proposed Collection; Public Comment Request; State Health Insurance Assistance Program (SHIP) Data Performance Reports and Information Collection Tools

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

SUMMARY: The Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of information listed above. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish a notice in the **Federal Register** concerning each proposed collection of information, including each proposed revision of an existing collection of information, and to allow 60 days for public comment in response to the notice.

This is a revision request for the Office of Management and Budget (OMB) approval for the modification and use of the Data Performance Reports and Information Collection tools for the State Health Insurance Assistance Program (SHIP) under OMB 0985–0040 that expires March 31, 2020.

DATES: Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by February 28, 2020. ADDRESSES: Submit electronic comments on the collection of information to: Office of Healthcare Information and Counseling, *OHIC*@ *acl.hhs.gov*, the collection of information to Administration for Community Living, Washington, DC 20201, Attention: Rebecca Kinney. FOR FURTHER INFORMATION CONTACT:

Rebecca Kinney, Office of Healthcare Information and Counseling (OHIC), Administration for Community Living, Washington, DC 20201, Phone: 202– 795–7397, E-Mail: *Rebecca.Kinney*@ *acl.hhs.gov.*

SUPPLEMENTARY INFORMATION: Under the PRA, Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. "Collection of information" is defined as and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. The PRA requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed revision of an existing collection of information, before submitting the

collection to OMB for approval. To comply with this requirement, ACL is publishing a notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, ACL invites comments on our burden estimates or any other aspect of this collection of information, including:

(1) Whether the proposed collection of information is necessary for the proper performance of ACL's functions, including whether the information will have practical utility;

(2) the accuracy of ACL's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used to determine burden estimates;

(3) ways to enhance the quality, utility, and clarity of the information to be collected; and

(4) ways to minimize the burden of the collection of information on respondents, including the use of automated collection techniques when appropriate, and other forms of information technology.

The purpose of this data collection is to collect performance data from grantees, grantee team members, and partners. Congress requires this data collection for program monitoring and Government Performance Results Act (GPRA) purposes. This data collection allows the Administration for Community Living (ACL) and the Center for Innovation and Partnership (CIP) to communicate with Congress and the public on the State Health Insurance Assistance Program (SHIP), the Senior Medicare Patrol (SMP) program, the Medicare Improvements for Patients & Providers Act (MIPPA) program, and Aging and Disability Resource Centers (ADRC) activities. In addition to the SHIP Data Performance Reports and Information Collection (OMB #0985– 0040), this revision incorporates the expired SMP Report collection (OMB #0985–0024) and the ADRC collection (OMB #0985–0062) into one tool.

The SHIP, SMP, MIPPA, and ADRC programs are located in each of the 50 states, the District of Columbia, Puerto Rico, Guam and the U.S. Virgin Islands. In order to ensure that grantees' report activity accurately and consistently it is imperative that these data collection tools remain active. The respondents for this data collection are grantees, grantee team members, and partners who meet with Medicare beneficiaries and older adults' in-group settings and in one-onone sessions to educate them on the importance of being aware of Medicare fraud, error and abuse, and having the knowledge to protect the Medicare system.

ACL is proposing to combine these three collection tools to reduce burden on the grantees, grantee team members, and partners as many of the individuals working on these programs, collecting information, and reporting results are the same at the local level. Combining these tools will reduce the need for duplicate or triplicate reporting of activities in separate tools further reducing the time and effort in reporting outcomes and activities. In addition, this combination will allow for further clarification on when, where, and how activities are being conducted across these ACL programs further informing performance outcomes.

SHIP and MIPPA Data Collection (OMB #0985–0040)

Section 4360(f) of OBRA 1990 created the State Health Insurance Assistance

Program (SHIP) and requires the Secretary to provide a series of reports to the U.S. Congress on the performance of the SHIP program annually. The law also requires ACL to report on the program's impact on beneficiaries and to obtain important feedback from beneficiaries.

This tool captures the information and data necessary for ACL to meet these Congressional requirements, as well as, capturing performance data on individual grantees providing ACL essential insight for monitoring and technical assistance purposes.

In addition, the Medicare Improvements for Patients and Providers Act (MIPPA), initially passed in 2008, provided targeted funding for the SHIPs, area agencies on aging (AAAs), and Aging and Disability Resource Centers (ADRC) to conduct enrollment assistance to Medicare beneficiaries for the Low Income Subsidy (LIS) and Medicare Savings Program (MSP). These activities, collectively known as the MIPPA Program, have been funded nearly annually through a series of funding or extenders bills. Most recently, the Consolidated Appropriations Act, 2018 extended funding for MIPPA to FY 2018 and FY 2019. This tool also collects performance and outcome data on the MIPPA Program providing ACL necessary information for monitoring and oversight.

SMP Data Collection (OMB #0985-0024)

Under Public Law 104–208, the Omnibus Consolidated Appropriations Act of 1997, Congress established the Senior Medicare Patrol Projects in order to further curb losses to the Medicare program. The Senate Committee noted that retired professionals, with appropriate training, could serve as educators and resources to assist Medicare beneficiaries and others to detect and report error, fraud and abuse. Among other requirements, it directed the Administration for Community Living to work with the Office of Inspector General (OIG) and the Government Accountability Office (GAO), to assess the performance of the program. The Administration for Community Living has worked with HHS/OIG to develop project-level performance measures.

The HHS/OIG has collected SMP performance data and issued SMP performance reports since 1997. The information from the current collection is reported by the OIG to Congress and the public. This information is also used by ACL as the primary method for monitoring the SMP Projects.

ADRC Data Collection (OMB #0985– 0062)

The Aging and Disability Resource Center (ADRC) collects data for the No Wrong Door (NWD) System initiative. This tool is tethered to the ADRC program and seeks to connect fragmentation in the network and furthermore supports the need for early community-based interventions.

ACL uses this collection to support states in better coordinating and integrating their existing long-term services and supports (LTSS) access functions to develop a new interface that would make it easier for people to learn about and quickly access options that meet their needs. These programs operate throughout the United States and represent a nationally recognized network.

The proposed data collection tools may be found on the ACL website for review at *https://www.acl.gov/aboutacl/public-input.*

Estimated Program Burden

ACL estimates the burden associated with this collection of information as follows: The burden hours are based on the number of projects for ACL grantees.

Type of respondent	Form/report name	Number of respondents	Number of responses per respondent	Average burden per response (in minutes)	Total burden hours
SMP Grantees	Media Outreach & Education	216	46	15	2,484
SMP Grantees	Group Outreach & Education	6,935	4	4	1,849.33
SMP Grantees	Individual Interaction	6,935	41	5	23,694.58
SMP Grantees	Team Member	216	31	5	558
SMP Grantees	OIG Report	0	0	0	0
SMP Grantees	Time Spent Report	0	0	0	0
SHIP/MIPPA Grantees	Media Outreach & Education	3,750	15	15	14,062.5
SHIP/MIPPA Grantees	Group Outreach & Education	3,750	15	4	3,750
SHIP/MIPPA Grantees	SHIP Team Member	216	75	5	1,350
SHIP/MIPPA Grantees	Beneficiary Contact	15,000	233	5	291,250
SHIP/MIPPA Grantees	Training	216	75	15	1,620
SHIP/MIPPA Grantees	SHIP Performance Report	0	0	0	0
SHIP/MIPPA Grantees	Resource Report	0	0	0	0
SHIP/MIPPA Grantees	MIPPA Performance Report	0	0	0	0

Type of respondent	Form/report name	Number of respondents	Number of responses per respondent	Average burden per response (in minutes)	Total burden hours
ADRC/NWD	NWD Management Tool data collection and entry—Local Level.	556	2	60	112
ADRC/NWD	NWD Management Tool data collection and entry—State Level.	996	2	240	7,968
ADRC/NWD	NWD Management Tool data collection and entry—Local Level.	400	12	30	2,400
SHIP/SMP/MIPPA	Summary Reports	0	0	0	0
SHIP/MIPPA Grantees	Part D Enrollment outcomes Report	0	0	0	0
Totals		39,186	551	403	351,098

Dated: December 19, 2019. **Mary Lazare,** *Principal Deputy Administrator.* [FR Doc. 2019–28105 Filed 12–27–19; 8:45 am] **BILLING CODE 4154–01–P**

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities; Proposed Collection; Comment Request; SHIP–SMP Survey of One-on-One Assistance, Formerly the "National Beneficiary Survey of State Health Insurance Assistance Program (SHIP)", OMB #0985–0057

AGENCY: Administration for Community Living, HHS.

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of information listed above. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish a notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice.

This notice solicits comments on the Proposed Revision and solicits comments on the information collection requirements related to the "SHIP–SMP Survey of One-on-One Assistance". **DATES:** Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by February 28, 2020. **ADDRESSES:** Submit electronic comments on the collection of information to: Sara Vogler. Submit written comments on the collection of information to Administration for Community Living, Washington, DC 20201, Attention: Sara Vogler.

FOR FURTHER INFORMATION CONTACT: Sara Vogler, Administration for Community Living, Washington, DC 20201, 202– 795–7461, Sara.Vogler@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: Under the PRA. Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. "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. The PRA requires Federal agencies to provide a 60-day notice in the Federal **Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, ACL is publishing a notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, ACL invites comments on our burden estimates or any other aspect of this collection of information, including:

(1) Whether the proposed collection of information is necessary for the proper performance of ACL's functions, including whether the information will have practical utility;

(2) the accuracy of ACL's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used to determine burden estimates;

(3) ways to enhance the quality, utility, and clarity of the information to be collected; and

(4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques when appropriate, and other forms of information technology. The SHIP–SMP Survey of One-on-One Assistance is a survey of individuals who meet with team members from the State Health Insurance Assistance Program (SHIP) or the Senior Medicare Patrol (SMP). These services help Medicare beneficiaries understand their Medicare benefits and options. These services also increase the ability of beneficiaries to identify and report fraud, waste, and abuse within health care programs generally, and Medicare/ Medicaid specifically.

The State Health Insurance Assistance Program (SHIP) was created under the Omnibus Budget Reconciliation Act of 1990. This section of the law authorized the Department of Health and Human Services (HHS) to make grants to states to establish and maintain health insurance advisory service programs for Medicare beneficiaries. Grant funds were made available to support information, counseling, and assistance activities related to Medicare, Medicaid, and other health insurance options. SHIP grantees provide free, in-depth, unbiased, one-on-one health insurance counseling and assistance to Medicare beneficiaries, their families, and caregivers.

The Senior Medicare Patrol (SMP) program was authorized in 1997 under Titles II and IV of the Older Americans Act, the Omnibus Consolidated Appropriation Act of 1997 and the Health Insurance Portability and Accountability Act of 1996. The SMP mission is to empower and assist Medicare beneficiaries, their families, and caregivers, to prevent, detect, and report suspected healthcare fraud, errors, and abuse through outreach, counseling, and education.

SMP grantees support ACL's goals of promoting increased choice and greater independence among older adults and individuals with disabilities. SMP activities also serve to enhance the financial, emotional, physical, and mental well-being of older adults, thereby increasing their capacity to