

State child support agencies are required to establish and operate a federally approved statewide ADP and information retrieval system to assist in child support enforcement. States are required to submit an initial APD containing information to assist the Secretary of the U.S. Department of Health and Human Services (HHS) in determining if the state computerized support enforcement project planning and implementation meets federal certification requirements needed for the approval of FFP. States are then

required to submit annual APD updates to HHS to report project status and request ongoing FFP for systems development, enhancements, operations, and maintenance. As-needed APDs are also submitted to acquire FFP when major milestones are missed or significant changes to project schedules occur. Based on an assessment of the information provided in the APD, states that do not meet the federal requirements necessary for approval are required to conduct periodic independent verification and

validation services for high-risk project oversight.

In addition to the APDs providing HHS with the information necessary to determine the allowable level of federal funding for state systems projects, states also submit associated procurement and data security documents, such as requests for proposals (RFPs), contracts, contract amendments, and the biennial security review reports.

*Respondents:* State child support agencies.

#### ANNUAL BURDEN ESTIMATES

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
RFP and Contract .....	50	4.5	4	900	300
Emergency Funding Request .....	21	1	2	42	14
Biennial Reports .....	54	1.5	1.5	121.5	40.5
Advance Planning Document .....	44	3.6	120	19,008	6,336
Operational Advance Planning Document .....	10	3	30	900	300
Independent Verification and Validation (ongoing) .....	3	12	10	360	120
Independent Verification and Validation (semiannually) .....	4	6	16	384	128
Independent Verification and Validation (quarterly) .....	10	12	30	3,600	1,200
System Certification .....	3	3	240	2,160	720
Estimated Total Annual Burden Hours: .....					9,158.50

*Comments:* 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.

**Authority:** 45 CFR part 95, subpart F.

**John M. Sweet, Jr.**

*ACF/OPRE Certifying Officer.*

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#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

##### Administration for Children and Families

[CFDA NUMBER: 93.568]

##### Reallotment of Fiscal Year 2019 Funds for the Low Income Home Energy Assistance Program (LIHEAP)

**AGENCY:** Division of Energy Assistance (DEA), Office of Community Services (OCS), Administration for Children and Families (ACF), Department of Health and Human Services (HHS).

**ACTION:** Notice of public comment.

**SUMMARY:** Notice is hereby given of a preliminary determination that funds from the fiscal year (FY) 2019 Low Income Home Energy Assistance Program (LIHEAP) are available for reallotment to states, territories, tribes, and tribal organizations that received FY 2020 direct LIHEAP grants. No subgrantees or other entities may apply for these funds.

**DATES:** Submit comments on or before October 5, 2020.

**ADDRESSES:** Comments may be submitted to: Peter Edelman, Program Analyst, Division of Energy Assistance, Office of Community Services, Administration for Children and Families, Department of Health and

Human Services, via email: [peter.edelman@acf.hhs.gov](mailto:peter.edelman@acf.hhs.gov).

**FOR FURTHER INFORMATION CONTACT:** Akm Rahman, Operations Branch Chief, Division of Energy Assistance, Office of Community Services, Administration for Children and Families, Department of Health and Human Services, via email: [akm.rahman@acf.hhs.gov](mailto:akm.rahman@acf.hhs.gov).

**SUPPLEMENTARY INFORMATION:** According to Section 2607(b)(1) of the Low Income Home Energy Assistance Act, (42 U.S.C. 8626(b)(1)), if the Secretary of HHS determines as of September 1, of any fiscal year, an amount in excess of 10 percent of the amount awarded to a grantee for that fiscal year (excluding Leveraging and REACH funds) will not be used by the grantee during that fiscal year, then the Secretary must notify the grantee and publish a notice in the **Federal Register** that such funds may be reallotted to LIHEAP grantees during the following fiscal year. If reallotted, the LIHEAP block grant allocation formula will be used to distribute the funds. No funds may be allotted to entities that are not direct LIHEAP grantees during FY 2020. It has been determined that \$948,485 in LIHEAP funds may be available for reallotment during FY 2020. This determination is based on FY 2019 Carryover and Reallotment Reports submitted by FY 2019 LIHEAP grantees showing 12 grantees as having funds available for reallotment. These grantees

include 2 states and 10 tribes, which are listed in the table below. Grantees submitted the FY 2019 Carryover and Reallotment Reports to the OCS, as required by regulations applicable to LIHEAP at 45 CFR 96.81(b). After publication of this notice DEA will redetermine the final reallotment amounts and make adjustments where necessary.

The LIHEAP statute allows grantees who have funds unobligated at the end of the federal fiscal year for which they are awarded to request that they be allowed to carry over up to 10 percent of their full-year allotments to the next federal fiscal year. Funds in excess of this amount must be returned to HHS and are subject to reallotment under section 2607(b)(1) of the Low Income

Home Energy Assistance Act, (42 U.S.C. 8626(b)(1)). The amount described in this notice was reported by grantees as unobligated FY 2019 funds in excess of the amount that these grantees could carry over to FY 2020. In accordance with section 2607(b)(3) of the Act (42 U.S.C. 8626(b)(3)), HHS has notified each grantee of any balance that will be de-obligated for purpose of this anticipated reallotment and has given 30 days to provide comments directly to HHS. Public comments will be accepted for a period of 30 days from the date of publication of this notice.

All current LIHEAP grantees will be notified of the final reallotment amount redistributed to them for obligation in FY 2020. This decision will also be published in the **Federal Register** and in

a Dear Colleague Letter that is posted to ACF's website at <https://www.acf.hhs.gov/ocs/resource/dear-colleagues>.

If funds are reallotted, they will be allocated in accordance with section 2604 of the Act (42 U.S.C. 8623) and must be treated by LIHEAP grantees receiving them as an amount appropriated for FY 2020. As FY 2020 funds, they will be subject to all requirements of the Act, including section 2607(b)(2) (42 U.S.C. 8626(b)(2)), which requires that a grantee obligate at least 90 percent of its total block grant allocation for a fiscal year by the end of the fiscal year for which the funds are appropriated, that is, by September 30, 2020.

ESTIMATED REALLOTMENT AMOUNTS OF FY 2019 LIHEAP FUNDS

Grantee name	Grantee reported reallotment amount	Amount available for redistribution
Ohio .....	\$206,951	\$206,951
Utah .....	540,516	540,516
Chippewa Cree Tribe .....	13,302	13,302
Coeur d'Alene Tribe .....	1,328	1,328
Colorado River Indian Tribes .....	595	595
Hoh Indian Tribe .....	2,472	0
Karuk Tribe .....	9,337	9,337
Little River Band of Ottawa Indians .....	32,069	3,247
Northern Cheyenne Tribe .....	5,704	5,704
Paiute Tribe of Utah .....	95,125	95,125
Quinault Indian Nation .....	1,285	7
Sac and Fox Nation of Oklahoma .....	30,768	30,767
Sitka Tribe .....	41,606	41,606
Total .....	981,058	948,485

**Statutory Authority:** 42 U.S.C. 8626.

**Karen Shields,**  
Senior Grants Policy Specialist, Office of Grants Policy.

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. FDA-2017-N-1095]

**Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Electronic Submission Process for Voluntary Allegations to the Center for Devices and Radiological Health**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

**DATES:** Submit written comments (including recommendations) on the collection of information by October 5, 2020.

**ADDRESSES:** To ensure that comments on the information collection are received, OMB recommends that written comments be submitted to <https://www.reginfo.gov/public/do/PRAMain>. Find this particular information collection by selecting "Currently under Review—Open for Public Comments" or by using the search function. The OMB control number for this information collection is 0910-0769. Also include the FDA docket number found in brackets in the heading of this document.

**FOR FURTHER INFORMATION CONTACT:** Ila S. Mizrahi, Office of Operations, Food and Drug Administration, Three White Flint North, 10A-12M, 11601 Landsdown St., North Bethesda, MD 20852, 301-796-7726, [PRAStaff@fda.hhs.gov](mailto:PRAStaff@fda.hhs.gov).

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

**Electronic Submission Process for Voluntary Allegations to the Center for Devices and Radiological Health**

OMB Control Number 0910-0769—Extension

This information collection request collects information voluntarily submitted to the Center for Devices and Radiological Health (CDRH) on actual or potential health risk concerns about a medical device or radiological product or its use. Because, prior to the