

research projects related to welfare, employment and self-sufficiency, Head Start, child care, healthy marriage and responsible fatherhood, family and youth services, home visiting, child welfare, and other areas of interest to ACF. Under this generic clearance, ACF engages in a variety of formative data collections with researchers, practitioners, technical assistance providers, service providers, and potential participants throughout the field to fulfill the following goals: (1) Inform the development of ACF

research, (2) maintain a research agenda that is rigorous and relevant, (3) ensure that research products are as current as possible, and (4) inform the provision of technical assistance. ACF uses a variety of techniques including semi-structured discussions, focus groups, surveys, and telephone or in-person interviews, in order to reach these goals.

Following standard OMB requirements, OPRE will submit a change request for each individual data collection activity under this generic clearance. Each request will include the individual instrument(s), a justification

specific to the individual information collection, and any supplementary documents. OMB should review requests within 10 days of submission.

*Respondents:* Example respondents include: Key stakeholder groups involved in ACF projects and programs, state or local government officials, service providers, participants in ACF programs or similar comparison groups, experts in fields pertaining to ACF research and programs, or others involved in conducting ACF research or evaluation projects.

ANNUAL BURDEN ESTIMATES

Instrument	Estimated total number of respondents	Number of responses per respondent	Average burden hours per response	Annual burden hours
Semi-Structured Discussions and Focus Groups .....	3000	1	2	6000
Interviews .....	1500	1	1	1500
Questionnaires/Surveys .....	1125	1	.5	563

*Estimated total annual burden hours:* 8,063.

*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:** Social Security Act, Sec. 1110 [42 U.S.C. 1310].

**Mary B. Jones,**

*ACF/OPRE Certifying Officer.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request; Information Collection Request Title: Federal Tort Claims Act (FTCA) Program Deeming Sponsorship Application for Free Clinics, OMB No. 0915-0293—Revision**

**AGENCY:** Health Resources and Services Administration (HRSA), Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** In compliance with of the Paperwork Reduction Act of 1995, HRSA has submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA’s ICR only after the 30 day comment period for this notice has closed.

**DATES:** Comments on this ICR must be received no later than December 3, 2020.

**ADDRESSES:** Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/](http://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.

**FOR FURTHER INFORMATION CONTACT:** To request a copy of the clearance requests submitted to OMB for review, email Lisa Wright-Solomon, the HRSA Information Collection Clearance Officer at [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov) or call (301) 443-1984.

**SUPPLEMENTARY INFORMATION:** When submitting comments or requesting information, please include the information request collection title for reference.

*Information Collection Request Title:* Federal Tort Claims Act Program Deeming Sponsorship Application for Free Clinics, OMB No. 0915-0293—Revision

*Abstract:* Section 224(o) of the Public Health Service (PHS) Act (42 U.S.C. 233(o)), as amended, authorizes the “deeming” of certain individuals as PHS employees for the purposes of receiving liability protections, including Federal Tort Claims Act (FTCA) coverage, for the performance of medical, surgical, dental or related functions within the scope of deemed employment. Section 224(o) extends eligibility for deemed PHS employee status to free clinic health professionals including employees, officers, board members, contractors, and volunteers at qualifying free clinics.

The Free Clinics FTCA Program is administered by HRSA’s Bureau of Primary Health Care. Sponsoring free

clinics seeking FTCA coverage for their employees, officers, board members, contractors, and volunteers must submit deeming applications in the specified form and manner on behalf of named individuals for review and approval, resulting in a “deeming determination” that includes associated FTCA coverage for these individuals.

HRSA is proposing several changes to the FTCA Program Deeming Applications for Free Clinics, to be used for Free Clinic deeming sponsorship applications for Calendar Year 2021 and thereafter, to improve question clarity and clarify required documentation. Specifically, the Application includes the following proposed changes:

- Updated application language: Specifically, throughout the application, alternate terminology was utilized to provide greater clarity and specificity. These changes were based on stakeholder feedback and information received from the HRSA Health Center Program Support. These changes are not substantive in nature.
- Added Service Type and clarifications regarding professional designation: Specifically, section VI of the application was updated to include service type which will allow HRSA to verify whether an individual is performing clinical or non-clinical services. In addition to the inclusion of service type, a note was added to request that free clinics include the professional designation for each individual.

- Deleted remark in section IX: It has been determined that the information requested in this section, which related to offsite events and particularized determinations is no longer necessary to evaluate eligibility for deeming.

The FTCA Program has a web based application system, the Electronic Handbooks. These electronic application forms decrease the time and effort required to complete the older, paper-based OMB approved FTCA application forms. The application includes: Contact Information, Site Information, Information on the Sponsoring Free Clinic Eligibility, Information on the Credentialing and Privileging Systems, Information on the Risk Management Systems, Information on the Free Clinic Volunteer Health Care Professionals, Board Members, Officers, Employees, and Individual Contractors and Patient Visit Data.

A 60-day notice was published in the **Federal Register** on August 6, 2020, vol. 85, No. 152; pp. 47803–04. HRSA received one public comment regarding FTCA coverage of Urban Indian Organizations, which is outside of the scope of this ICR.

*Need and Proposed Use of the Information:* Deeming applications must address certain criteria required by law in order for the Secretary to deem an individual sponsored by a qualifying free clinic as a PHS employee for purposes of liability protections, including FTCA coverage. This determination cannot be made without

the collection of this information. Specifically, the deeming sponsorship application form seeks information verifying that the free clinic meets the criteria to sponsor a deeming application and that the individual being sponsored is eligible to be deemed as a PHS employee. The FTCA application form for free clinics has been updated to improve clarity and thereby improve applicants’ and deemed individuals’ compliance with applicable requirements.

*Likely Respondents:* Respondents include free clinics seeking deemed PHS employee status on behalf of their sponsored individuals for purposes of liability protections including FTCA coverage.

*Burden Statement:* Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
FTCA Program Deeming Application for Free Clinics .....	374	3	1,122	2	2,244
Total .....	374	.....	1,122	.....	2,244

HRSA specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency’s functions, (2) the accuracy of the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be collected, and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**Maria G. Button,**

*Director, Division of the Executive Secretariat.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**National Vaccine Injury Compensation Program: Revised Amount of the Average Cost of a Health Insurance Policy**

**AGENCY:** Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** HRSA is publishing an updated monetary amount of the

average cost of a health insurance policy as it relates to the National Vaccine Injury Compensation Program (VICP).

**FOR FURTHER INFORMATION CONTACT:** Tamara Overby, Acting Director, Division of Injury Compensation Programs, Healthcare Systems Bureau, HRSA, HHS by mail at 5600 Fishers Lane, 08N186B, Rockville, Maryland 20857; or call (301) 443–9350.

**SUPPLEMENTARY INFORMATION:** Section 100.2 of VICP’s implementing regulation (42 CFR part 100) states that the revised amount of an average cost of a health insurance policy, as determined by the Secretary of HHS (the Secretary), is effective upon its delivery by the