is E=7@trcA. The number of available audio and web conference lines is 1,000.

FOR FURTHER INFORMATION CONTACT:

Marah Condit, MS, Committee Management Lead, National Center for HIV, Viral Hepatitis, STD, and TB Prevention, CDC, 1600 Clifton Road NE, Mailstop US8–6, Atlanta, Georgia 30329-4027; Telephone: (404) 639-3423; Email: nchhstppolicy@cdc.gov.

SUPPLEMENTARY INFORMATION:

Purpose: The Council advises and makes recommendations to the Secretary of Health and Human Services, the Assistant Secretary for Health, and the Director, CDC, regarding the elimination of tuberculosis (TB). Specifically, the Council makes recommendations regarding policies, strategies, objectives, and priorities; addresses the development and application of new technologies; and reviews the extent to which progress has been made toward eliminating tuberculosis.

Matters To Be Considered: The agenda will include discussions on (1) electronic data systems for overseas medical evaluations; (2) TB commercial diagnostics; (3) TB screening in the Uniting for Ukraine response; (4) CDC electronic directly observed therapy recommendations; and (5) the TB Elimination Alliance. Agenda items are subject to change as priorities dictate.

Public Participation

Written Public Comment: Members of the public are welcome to submit written comments in advance of the meeting. Written comments must be submitted by emailing *nchhstppolicy*@ *cdc.gov* with subject line "December 2022 ACET Public Comment Registration" by November 29, 2022.

Oral Public Comment: Individuals who would like to make an oral comment during the public comment period must register by emailing nchhstppolicy@cdc.gov with subject line "December 2022 ACET Public Comment Registration" by November 29, 2022. The public comment period is on December 13, 2022, at 4:45 p.m., EST.

The Director, Strategic Business Initiatives Unit, Office of the Chief **Operating Officer**, Centers for Disease Control and Prevention, has been delegated the authority to sign Federal **Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and

Prevention and the Agency for Toxic Substances and Disease Registry.

Kalwant Smagh,

Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention. [FR Doc. 2022-23641 Filed 10-28-22; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-1790-N]

Medicare Program; Public Meeting for New Revisions to the Healthcare **Common Procedure Coding System** (HCPCS) Coding—November 29– December 1, 2022

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS. **ACTION:** Notice.

SUMMARY: This notice announces the dates and times of the virtual Healthcare Common Procedure Coding System (HCPCS) public meetings to be held November 29, 2022 through December 1, 2022 to discuss our preliminary coding, Medicare benefit category, and payment determinations for new revisions to the HCPCS Level II code set, as well as how to register for those meetings.

DATES:

Virtual Meeting Dates: Tuesday, November 29, 2022, 9 a.m. to 5 p.m., eastern standard time (e.s.t.), Wednesday, November 30, 2022, 9 a.m. to 5 p.m. e.s.t., and Thursday, December 1, 2022, 9 a.m. to 5 p.m. e.s.t.

Deadline for Primary Speaker Registrations and Presentation *Materials:* The deadline for primary speakers to register and submit any supporting PowerPoint presentation, as well as any relevant studies published after the date the applicant submitted its HCPCS code application, is 5 p.m., e.s.t., Tuesday, November 15, 2022.

Deadline for 5-Minute Speaker Registrations: The deadline for registering to be a 5-minute speaker is 5 p.m., e.s.t., Tuesday, November 15, 2022.

Deadline for Registration for all Other Attendees: All individuals who plan to attend the virtual public meetings to listen, but do not plan to speak, must register to attend. Attendees can attend more than one meeting. Except for individuals who require special assistance, the deadline to register for each public meeting is the date of that

public meeting. Individuals who plan to attend one or more of the virtual public meetings and require special assistance must register and request special assistance services by Tuesday, November 15, 2022.

Registration Link: The registration link will be posted in the Guidelines for Participation in HCPCS Public Meetings document on the CMS website at https://www.cms.gov/Medicare/Coding/ MedHCPCSGenInfo/HCPCSPublic Meetings and in an announcement on the HCPCS General Information page at https://www.cms.gov/Medicare/Coding/ MedHCPCSGenInfo. The same website also contains detailed information on how attendees can join the virtual public meetings using Zoom, including dial-in information for primary speakers, 5-minute speakers, and all other attendees.

Deadline for Submission of Written Comments: In addition to the primary speaker presentation materials noted above, CMS will accept written comments from any stakeholder pertaining to a HCPCS code application or agenda item scheduled for discussion at the public meetings. The deadline for submission of written comments pertaining to a specific HCPCS code application or agenda item is 5 p.m., e.s.t., on the date of the virtual public meeting at which the applicable HCPCS code application or agenda item is scheduled for discussion. Written comments will only be accepted when emailed to: HCPCS@cms.hhs.gov.

ADDRESSES: Virtual Meeting Location: The November 29, 2022 through December 1, 2022 HCPCS public meetings will be held virtually via Zoom only.

FOR FURTHER INFORMATION CONTACT:

Sundus Ashar, (410) 786 0750, Sundus.ashar1@cms.hhs.gov, or HCPCS@cms.hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Background

On December 21, 2000, Congress enacted the Medicare, Medicaid, and State Children's Health Insurance Program (SCHIP) Benefits Improvement and Protection Act of 2000 (BIPA) (Pub. L. 106-554). Section 531(b) of BIPA mandated that the Secretary establish procedures that permit public consultation for coding and payment determinations for new durable medical equipment (DME) under Medicare Part B of title XVIII of the Social Security Act (the Act). In the November 23, 2001 Federal Register (66 FR 58743), we published a notice providing information regarding the establishment

of the annual public meeting process for DME.

In 2020, we implemented changes to our Healthcare Common Procedure Coding System (HCPCS) coding procedures, including the establishment of quarterly coding cycles for drugs and biological products and biannual coding cycles for non-drug and non-biological items and services.

In the December 28, 2021 **Federal Register** (86 FR 73860), we published a final rule that established procedures for making Medicare benefit category and payment determinations for new items and services that are DME, prosthetic devices, orthotics and prosthetics, therapeutic shoes and inserts, surgical dressings, or splints, casts, and other devices used for reductions of fractures and dislocations under Medicare Part B.

II. Virtual Meeting Registration

The November 29, 2022 through December 1, 2022 HCPCS public meetings will be virtual and available for remote audio attendance and participation only via Zoom.

A. Required Information for Registration

The following information must be provided when registering online to attend:

- Name;
- Company name (if applicable);
- Email address;

• Any special assistance requests (which, as stated above, will be considered if the registration is submitted by 5 p.m., e.s.t., Tuesday, November 15, 2022);

• Whether the registrant is a primary speaker or a 5-minute speaker for an agenda item;

• Agenda item and Application number;

• Whether the primary speaker will use a PowerPoint presentation; and

• Whether the registrant will participate in a practice Zoom session, to be held on Monday, November 28, 2022.

B. Additional Information

1. Primary Speakers

Each applicant that submitted a HCPCS code application that will be discussed at the virtual public meetings is permitted to designate a primary speaker. As stated above, we will accept PowerPoint presentations and relevant studies published after the date the applicant submitted its HCPCS code application if those materials are emailed to: *HCPCS@cms.hhs.gov* by 5 p.m., e.s.t., Tuesday, November 15, 2022. Due to the timeframe needed for the planning and coordination of the HCPCS virtual public meetings, materials that are not submitted in accordance with these deadlines cannot be accommodated.

All PowerPoint presentation materials must not exceed 10 pages. Relevant studies that were published after the date the applicant submitted its HCPCS code application are not subject to this page limit.

Fifteen minutes is the total time interval for each presentation. In establishing the public meeting agenda, we may group multiple, related code requests under the same agenda item.

On the day of the virtual meeting that the primary speaker attends and speaks on a HCPCS code application, before 5 p.m., e.s.t., the primary speaker must email a brief written summary (one paragraph) of their comments and conclusions to: HCPCS@cms.hhs.gov.

Every primary speaker must also declare at the beginning of their presentation at the meeting, as well as in their written summary, whether they have any financial involvement with the manufacturer of the item that is the subject of the HCPCS code application that the primary speaker presented, or any competitors of that manufacturer with respect to the item. This includes any payment, salary, remuneration, or benefit provided to that speaker by the applicant.

2. 5-Minute Speakers

As noted above, the deadline for registering to be a 5-minute speaker is 5 p.m., e.s.t., Tuesday, November 15, 2022.

On the day of the virtual meeting that the 5-minute speaker attends and speaks on a HCPCS code application or agenda item, before 5 p.m., e.s.t., the 5-minute speaker must email a brief written summary of their comments and conclusions to: *HCPCS@cms.hhs.gov.* CMS will not accept any other written materials from a 5-minute speaker.

Every 5-minute speaker must also declare at the beginning of their presentation at the meeting, as well as in their written summary, whether they have any financial involvement with the manufacturer of the item that is the subject of the HCPCS code application or agenda item that the 5-minute speaker presented, or any competitors of that manufacturer with respect to the item. This includes any payment, salary, remuneration, or benefit provided to that speaker by the applicant.

C. Additional Virtual Meeting/ Registration Information

Prior to registering to attend a virtual public meeting, all potential participants and other stakeholders are

advised to review the public meeting agendas at https://www.cms.gov/ Medicare/Coding/MedHCPCSGenInfo/ HCPCSPublicMeetings which identify our preliminary coding, Medicare benefit category, and payment determinations, and the date each item will be discussed. All potential participants and other stakeholders are also encouraged to regularly check the HCPCS section of the CMS website at https://www.cms.gov/Medicare/Coding/ MedHCPCSGenInfo/HCPCSPublic Meetings for publication of the draft agendas, including a summary of each HCPCS code application, our preliminary coding, Medicare benefit category, and payment determinations.

The HCPCS section of the CMS website also includes details regarding the public meeting process for new revisions to the HCPCS code set, including information on how to join the meeting remotely, and guidelines for an effective presentation. The HCPCS section of the CMS website also contains a document titled "Healthcare Common Procedure Coding System (HCPCS) Level II Coding Procedures," which is a description of the HCPCS coding process, including a detailed explanation of the procedures CMS uses to make HCPCS coding determinations.

When CMS refers to HCPCS code or HCPCS coding application above, CMS may also be referring to circumstances when a HCPCS code has already been issued but a Medicare benefit category and/or payment has not been determined. At this meeting, CMS may or may not be able to provide preliminary Medicare benefit category and payment determinations for HCPCS codes that were effective October 1, 2022 or earlier, or that will be considered during this public meeting for coding actions. CMS is working diligently to address Medicare benefit category and payment determinations for new items and services that may be DME, prosthetic devices, orthotics and prosthetics, therapeutic shoes and inserts, surgical dressings, or splints, casts, and other devices used for reductions of fractures and dislocations under Medicare Part B. Please check the CMS website listed above for the final agenda.

III. Written Comments From Meeting Attendees Who Are Not Speakers

Written comments from anyone who is not a primary speaker or 5-minute speaker will only be accepted when emailed to: *HCPCS@cms.hhs.gov* before 5 p.m., e.s.t., on the date of the virtual public meeting at which the HCPCS code application that is the subject of the comments is discussed. The Administrator of CMS, Chiquita Brooks-LaSure, having reviewed and approved this document, authorizes Lynette Wilson, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Dated: October 26, 2022.

Lynette Wilson,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

[FR Doc. 2022–23640 Filed 10–28–22; 8:45 am] BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for Office of Management and Budget (OMB) Review; Building Capacity To Evaluate Child Welfare Community Collaborations To Strengthen and Preserve Families (CWCC) Cross-Site Process Evaluation (OMB #0970–0541)

AGENCY: Office of Planning, Research, and Evaluation (OPRE); Administration for Children and Families (ACF); Department of Health and Human Services (HHS).

ACTION: Request for public comments.

SUMMARY: The Administration for Children and Families at HHS is requesting an extension to continue data collection for an evaluation of the initiative, Community Collaborations to Strengthen and Preserve Families (also referred to as Child Welfare Community Collaborations [CWCC]). The cross-site process evaluation will provide insight to ACF about the various factors that promote or impede the implementation of child welfare community collaborations.

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 within 30 days of publication of this notice to www.reginfo.gov/public/do/ PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function. You can also obtain copies of the proposed collection of information by emailing OPREinfocollection@acf.hhs.gov. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The evaluation involves seven data collection activities. Initial interviews with Project Directors and leaders from partner organizations and initial interviews with staff from lead and partner organizations have been completed. This request includes the remaining five activities:

• *Survey Invitee Template:* This template requests the Project Director of

each CWCC grant to fill out a Survey Invitee Template to gather contact information for leaders and staff from lead and partner organizations who the evaluation team will invite to complete the Collaboration Survey (see below).

• *Collaboration Survey*: This electronic survey documents perceptions that leaders and staff from the CWCC lead and partner organizations have regarding their organizational/group processes, implementation activities, and progress towards goals. This survey is administered to staff at all grantee and partner organizations on an annual basis during each cohort's grant period.

• *Site Visit Planning Template:* Each project director (or their designee) will complete a Site Visit Planning Template to schedule site visit activities prior to each annual site visit.

• Two Site Visit Discussion Guides: To systematically document the approaches and strategies used by the first two cohorts of CWCC grantees (fiscal year (FY) 18 and FY 19 awardees), the evaluation team will conduct follow-up interviews with: (1) Project Directors from lead grantee organizations and leaders from partner organizations, and (2) Staff from the lead and partner organizations. These interviews will take place during site visits. Each grantee will participate in four site visits in total. As noted above, the first two have already been completed.

Respondents: Leadership and staff from CWCC lead (grantee) organizations and from partner organizations.

ANNUAL BURDEN ESTIMATES

Instrument	Total number of respondents (over request period)	Number of responses per respondent (total over request	Average burden hours per response (in hours)	Total burden (in hours)	Annual burden (in hours)
Cohort 1 Data Collection for FY 18 grantees					
Site Visit Discussion Guide for Project Directors and Lead- ers from Partner Organizations—Follow-Up Interviews Site Visit Discussion Guide for Staff from Lead and Part-	12	1	1.5	18	9
ner Organizations—Follow-Up Interviews Survey Invitee Template	36 4	1	1	36 4	18 2
Annual Collaboration Survey Site Visit Planning Template	268 4	1	.5 2	134 8	67 4
Cohort 2 Data Collection for FY19 grantees					
Site Visit Discussion Guide for Project Directors and Lead- ers from Partner Organizations—Follow-Up Interviews Site Visit Discussion Guide for Staff from Lead and Part-	27	2	1.5	81	41
ner Organizations—Follow-Up Interviews Survey Invitee Template	81 9	2	1	162 18	81 9
Annual Collaboration Survey Site Visit Planning Template	990 9	2	.5 2	990 36	495 18