

Update; (4) Health Equity Updates; (5) Data Modernization Update; and (6) Liaison Representative Updates. Agenda items are subject to change as priorities dictate.

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. 2023-04238 Filed 3-1-23; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Intent To Award a Single-Source Supplement for the Expanding the National Capacity for Person-Centered, Trauma-Informed (PCTI) Care: Services and Supports for Holocaust Survivors and Other Older Adults With a History of Trauma and Their Family Caregivers Program

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) announces the intent to award a single-source supplement to the current cooperative agreement held by the Jewish Federations of North America for the project *Expanding the National Capacity for Person-Centered, Trauma-Informed (PCTI) Care: Services and Supports for Holocaust Survivors and Other Older Adults with a History of Trauma and Their Family Caregivers* program. The purpose of this program is to advance the development and expansion of PCTI supportive services for Holocaust survivors living in the U.S. Additionally, the project is advancing the capacity of the broader aging services network to deliver services of this type to any older adult with a history of trauma and their family caregivers.

FOR FURTHER INFORMATION CONTACT: For further information or comments regarding this program supplement, contact Greg Link, U.S. Department of Health and Human Services, Administration for Community Living, Administration on Aging, Office of

Supportive and Caregiver Services: telephone (202) 795-7386; email greg.link@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: The overall goals of the program are as follows:

1. Increase the number and type of innovations in PCTI care for Holocaust survivors, older adults with a history of trauma, and their family caregivers, and
2. Expand the capacity of the Aging Network to provide PCTI care to the populations it serves.

The administrative supplement for FY 2023 will be in the amount of \$3,454,500, bringing the total award for FY 2023 to \$8,389,500. The supplement will provide sufficient resources to enable the grantee and their partners, JFNA, to accomplish the following:

- Continue to address the significant needs of Holocaust survivors living in the United States and other older adults with histories of trauma and their family caregivers by:
 - Further expanding Innovations Program, deepening its focus on existing programs to make them more PCTI, and expand the program to additional communities;
 - Expanding the Critical Supports Initiative to federation agencies and aging services providers together to identify and address the most critical needs and allocate additional resources accordingly to those needs. This component of the program allows each participating community to determine how to best allocate the resources available to meet the needs and form new partnerships to prevent emergencies; and
 - Growing the National Networks program to scale PCTI approaches to multiple locations/cities.

- For all of these programs, the supplement will increase outreach, evaluation, technical assistance, and sub-grantee monitoring and financial oversight activities.
 - Expanding Technical Assistance and Capacity Building to establish the infrastructure and framework to realize Congress' intent for the establishment and operation of a national resource center to provide training and technical assistance to agencies in the aging network delivering services to older individuals experiencing the long-term and adverse consequences of trauma, as described in Section 411(14) of the Older Americans Act of 1965, as amended. Doing so will enable JFNA to expand the reach and effectiveness of this project by broadening the technical assistance and capacity building activities in the following ways:
 - Growth and partnerships are essential for PCTI approaches to take

root. The supplement will be used to increase the ways in which this can be accomplished, including re-launching an Aging and Trauma Workgroup and an Educational Advisory Committee, ensuring the voices of Holocaust survivors, other older adults with histories of trauma and their family caregivers are represented; enabling the grantee to develop and implement an action plan to work with foundations.

- Thought leadership in the field of PCTI care is greatly needed for it to take root as standard practice in the aging services network. The supplement will: (1) permit the expansion of the grantee's PCTI training program; (2) provide the resources necessary to fund the development of a family caregiving roadmap to support PCTI approaches to implementing the National Strategy to Support Family Caregivers; and (3) further develop and expand the field and practice of PCTI evaluation approaches and practices already begun under this project, but on a limited basis.

- Sustainability and efficiency are key to any demonstration project. The supplement will enable JFNA to explore technology enhancements to streamline the sub-grant management process, bring on additional staff to manage expanded expectations and work, including growth, and enhance program oversight, monitoring, evaluation, and additional activities proportional to the increased funding and expectations resulting from this supplement.

Program Name: Expanding the National Capacity for Person-Centered, Trauma-Informed (PCTI) Care: Services and Supports for Holocaust Survivors and Other Older Adults with a History of Trauma and Their Family Caregivers.

Recipient: The Jewish Federations of North America.

Period of Performance: The supplement award will be issued for the third year of the five-year project period of September 1, 2020 through August 31, 2025.

Total Award Amount: \$8,389,500 in FY 2023.

Award Type: Cooperative Agreement Supplement.

Statutory Authority: The Older Americans Act (OAA) of 1965, as amended, Public Law 109-365—Title 4, Section 411.

Basis for Award: The Jewish Federations of North America (JFNA) is currently funded to carry out the objectives of the project entitled *Expanding the National Capacity for Person-Centered, Trauma-Informed (PCTI) Care: Services and Supports for Holocaust Survivors and Other Older Adults with a History of Trauma and*

Their Family Caregivers for the period of September 1, 2020 through August 31, 2025. Since project implementation began in late 2020, the grantee has accomplished a great deal. This supplement will enable the grantee to carry their work even further, serving more Holocaust survivors, other older adults with histories of trauma, family caregivers and to train more professionals in the principles of PCTI. The additional funding will not be used to begin new projects or activities.

The JFNA is uniquely positioned to complete the work called for under this project. JFNA's partners on this project include the National Indian Council on Aging, the Japanese American Service Committee, the National Caucus and Center on Black Aging, Inc., the New Jersey Office for Refugees International Rescue Committee, the Asociacion Nacional Pro Personas Mayores (a pioneering organization in the field of Hispanic/minority aging); SAGE (the nation's leading organization devoted to aging in the lesbian, gay, bisexual, and transgender community); and HIAS (which works around the world to protect refugees). Additional project partners include, the Caregiver Center at the Veterans Affairs Medical Center at the University of Tennessee; the Community Care Corps Program, funded by the Administration for Community Living and led by the Oasis Institute; the Caregiver Action Network, and USAging; LeadingAge, an association of 6,000 not for profit organizations across the continuum of aging services; the Center for Health Care Strategies, Inc., which advances models for organizing and financing health care delivery; and the Campaign for Trauma-Informed Policy and Practice, which promotes the building of trauma-informed communities.

Establishing an entirely new grant project at this time would be potentially disruptive to the current work already well under way. More importantly, the Holocaust survivors and other older adults currently being served by this project could be negatively impacted by a service disruption, thus posing the risk of re-traumatization and further negative impacts on health and wellbeing. If this supplement is not provided, the project would be less able to address the significant unmet health and social support needs of additional Holocaust survivors and other older adults with histories of trauma. Similarly, the project would be unable to expand its current technical assistance and training efforts in PCTI concepts and approaches, let alone reach beyond traditional providers of services to this population to train more

“mainstream” providers of aging services. Finally, providing this supplement to JFNA will allow for the greater realization of Congress' intent in section 411(14)(A) of the Older Americans Act, as amended, which calls for the establishment of a national resource center to provide training, technical assistance and sub-grants in this area.

Dated: February 25, 2023.

Alison Barkoff,

Acting Administrator and Assistant Secretary for Aging.

[FR Doc. 2023-04250 Filed 3-1-23; 8:45 am]

BILLING CODE 4154-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities; Submission for OMB Review; Public Comment Request; the Analysis of Senior Medicare Patrol Grantees' Program Implementation OMB Control Number 0985-Now

AGENCY: Administration for Community Living, HHS.

ACTION: Notice.

SUMMARY: The Administration for Community Living is announcing that the proposed collection of information listed above has been submitted to the Office of Management and Budget (OMB) for review and clearance as required under the Paperwork Reduction Act of 1995. This 30-Day notice collects comments on the information collection requirements related to the analysis of Senior Medicare Patrol Grantees' Program Implementation.

DATES: Submit written comments on the collection of information by April 3, 2023.

ADDRESSES: Submit written comments and recommendations for the proposed information collection within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find the information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function. By mail to the Office of Information and Regulatory Affairs, OMB, New Executive Office Bldg., 725 17th St. NW, Rm. 10235, Washington, DC 20503, Attn: OMB Desk Officer for ACL.

FOR FURTHER INFORMATION CONTACT:

Kristen Robinson, Kristen.Robinson@acl.hhs.gov, 202-795-7428.

SUPPLEMENTARY INFORMATION: In compliance with 44 U.S.C. 3507, The Administration for Community Living (ACL) has submitted the following proposed collection of information to OMB for review and clearance. ACL is requesting approval to collect data for the Under ACL's Office of Healthcare Information and Counseling, the Senior Medicare Patrol (SMP) programs recruit and train a national network of staff and volunteers to help “prevent, detect, and report Medicare fraud, errors, and abuse.”¹ The SMP supports programs in every state, the District of Columbia, and in U.S. territories through grants. Additionally, the SMP Resource Center, established in 2003, assists SMP grantees in networking and provides tools, training, and technical assistance to SMPs. To promote and advance equity in its programming, ACL is conducting interviews with SMP program directors or their designee to better understand their activities and their experiences in program implementation and in reaching low-income and rural Medicare beneficiaries.

Specifically, this IC will allow ACL to understand (1) how SMP grantees conceive of program priorities; (2) successes and challenges SMP grantees experience in implementing activities and in reaching low-income and rural Medicare beneficiaries; and (3) which programs need clarification on programmatic priority expectations or additional support to conduct their activities.

Up to 54 SMP grantee representatives and one SMP Resource Center representative will be invited to participate in a 75-minute web-based interview. Findings from the interviews will inform ACL's strategy to support SMP grantees in achieving program priorities and to promote equitable access to SMP activities for low-income and rural Medicare beneficiaries.

Comments in Response to the 60-Day Federal Register Notice

A notice published in the **Federal Register** 87 FR 77849 on 12/20/2022. No comments were received during the 60-day FRN.

Estimated Program Burden: ACL estimates the burden of this collection of information as follows:

A maximum of 54 SMP grantee project directors or their designees and one representative from the SMP Resource Center are expected to

¹ Administration for Community Living. (2022, November 8). *Senior Medicare Patrol (SMP)*. Available at <https://acl.gov/programs/protecting-rights-and-preventing-abuse/senior-medicare-patrol-smp>.