

Title: Application for Cable Television Relay Service Station License, FCC Form 327.

Form Number: FCC Form 327.

Type of Review: Extension of a currently approved collection.

Respondents: Business or other for-profit entities; Not-for-profit institutions.

Number of Respondents and Responses: 400 respondents; 400 responses.

Estimated Time per Response: 3.166 hours.

Frequency of Response: On occasion reporting requirement; Every 5 years reporting requirement.

Total Annual Burden: 1,266 hours.

Total Annual Costs: \$98,000.

Obligation to Respond: Required to obtain or retain benefits. The statutory authority for this collection of information is contained in Sections 154(i), 308 and 309 of the Communications Act of 1934, as amended.

Needs and Uses: This filing is the application for a Cable Television Relay Service (CARS) microwave radio license. Franchised cable systems and other eligible services use the 2, 7, 12 and 18 GHz CARS bands for microwave relays pursuant to part 78 of the Commission's Rules. CARS is principally a video transmission service used for intermediate links in a distribution network. CARS stations relay signals for and supply program material to cable television systems and other eligible entities using point-to-point and point-to-multipoint transmissions. These relay stations enable cable systems and other CARS licensees to transmit television broadcast and low power television and related audio signals, AM and FM broadcast stations, and cablecasting from one point (e.g., on one side of a river or mountain) to another point (e.g., the other side of the river or mountain) or many points ("multipoint") via microwave. The filing is done for an initial license, for modification of an existing license, for transfer or assignment of an existing license, and for renewal of a license after five years from initial issuance or from renewal of a license. Filing is done in accordance with Sections 78.11 to 78.40 of the Commission's Rules. The form consists of multiple schedules and exhibits, depending on the specific action for which it is filed. Initial applications are the most complete, and renewal applications are the most brief. The data collected is used by Commission staff to determine whether grant of a license is in accordance with Commission requirements on eligibility, permissible

use, efficient use of spectrum, and prevention of interference to existing stations.

OMB Control Number: 3060-0310.

Title: Section 76.1801, Registration Statement; Community Cable Registration, FCC Form 322.

Form Number: FCC Form 322.

Type of Review: Extension of a currently approved collection.

Respondents: Business and other for-profit entities; Not-for-profit institutions.

Number of Respondents and Responses: 601 respondents and 601 responses.

Estimated Time per Response: 0.5 hours.

Frequency of Response: One time and on occasion reporting requirements.

Total Annual Burden: 301 hours.

Total Annual Costs: \$36,060.

Obligation to Respond: Required to obtain or retain benefits. The statutory authority for this collection of information is contained in Sections 154(i), 303, 308, 309 and 621 of the Communications Act of 1934, as amended.

Needs and Uses: Cable operators are required to file FCC Form 322 with the Commission prior to commencing operation of a community unit. FCC Form 322 identifies biographical information about the operator and system as well as a list of broadcast channels carried on the system. This form replaces the requirement that cable operators send a letter containing the same information.

Federal Communications Commission.

Marlene Dortch,

Secretary, Office of the Secretary.

[FR Doc. 2023-05996 Filed 3-22-23; 8:45 am]

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FEDERAL COMMUNICATIONS COMMISSION

[OMB 3060-0703; FR ID 133127]

Information Collections Being Reviewed by the Federal Communications Commission

AGENCY: Federal Communications Commission.

ACTION: Notice and request for comments.

SUMMARY: As part of its continuing effort to reduce paperwork burdens, and as required by the Paperwork Reduction Act of 1995 (PRA), the Federal Communications Commission (FCC or Commission) invites the general public and other Federal agencies to take this opportunity to comment on the

following information collections. Comments are requested concerning: whether the proposed collection of information is necessary for the proper performance of the functions of the Commission, including whether the information shall have practical utility; the accuracy of the Commission's burden estimate; ways to enhance the quality, utility, and clarity of the information collected; ways to minimize the burden of the collection of information on the respondents, including the use of automated collection techniques or other forms of information technology; and ways to further reduce the information collection burden on small business concerns with fewer than 25 employees. The FCC may not conduct or sponsor a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. No person shall be subject to any penalty for failing to comply with a collection of information subject to the PRA that does not display a valid OMB control number.

DATES: Written PRA comments should be submitted on or before May 22, 2023. If you anticipate that you will be submitting comments but find it difficult to do so within the period of time allowed by this notice, you should advise the contact listed below as soon as possible.

ADDRESSES: Direct all PRA comments to Cathy Williams, FCC, via email to PRA@fcc.gov and to Cathy.Williams@fcc.gov.

FOR FURTHER INFORMATION CONTACT: For additional information about the information collection, contact Cathy Williams at (202) 418-2918.

SUPPLEMENTARY INFORMATION:

OMB Control Number: 3060-0703.

Title: Determining Costs of Regulated Cable Equipment and Installation, FCC Form 1205.

Form Number: FCC Form 1205.

Type of Review: Extension of a currently approved collection.

Respondents: Business or other for-profit entities.

Number of Respondents and Responses: 2,650 respondents; 4,650 responses.

Estimated Time per Response: 4-12 hours.

Frequency of Response: Recordkeeping requirement, Annual reporting requirement, Third party disclosure requirement.

Obligation to Respond: Required to obtain or retain benefits. The statutory authority for this collection of information is contained in Section 301(j) of the Telecommunications Act of 1996 and 623(a)(7) of the

Communications Act of 1934, as amended.

Total Annual Burden: 35,800 hours.

Total Annual Cost: \$1,800,000.

Needs and Uses: Information derived from FCC Form 1205 filings is used to facilitate the review of equipment and installation rates. This information is then reviewed by each cable system's respective local franchising authority. Section 76.923 records are kept by cable operators in order to demonstrate that charges for the sale and lease of equipment for installation have been developed in accordance with the Commission's rules.

Federal Communications Commission.

Marlene Dortch,

Secretary, Office of the Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Potential Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey on Prenatal and Childbirth Care Experiences in Ambulatory and Inpatient Settings: Request for Information

AGENCY: Agency for Healthcare Research and Quality, HHS.

ACTION: Notice of Request for Information regarding a potential Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey to assess *patients' prenatal and childbirth care experiences* in ambulatory and inpatient settings.

SUMMARY: The Agency for Healthcare Research and Quality (AHRQ) invites public comment in response to this Request for Information (RFI) about a potential Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey to assess *patients' prenatal care and childbirth care experiences* in ambulatory and inpatient care settings. Currently, no CAHPS instrument is available that is specifically designed to measure prenatal and childbirth care from the patient's perspective in these settings. Accordingly, this RFI seeks comments regarding methodologically sound approaches to assessing prenatal and childbirth care experiences in healthcare settings about topics such as communication with providers, respect, access to services, and patients' perceptions of bias in receiving care.

This RFI also seeks comments about any (1) existing patient experience surveys or survey items that might be incorporated into public domain CAHPS ambulatory and inpatient prenatal and childbirth experience surveys; and, (2) special considerations or concerns associated with the collection of such information. This RFI will help inform the development of scientifically sound surveys to potentially measure the experience of patients receiving prenatal and childbirth care.

DATES: Comments on this notice must be received by May 5, 2023.

ADDRESSES: Interested parties may submit comments electronically to CAHPS1@westat.com with the subject line "Prenatal and Childbirth Care Experience Survey RFI."

FOR FURTHER INFORMATION CONTACT:

Questions may be addressed to Caren Ginsberg, Director, CAHPS and SOPS Programs, Center for Quality Improvement and Patient Safety, caren.ginsberg@ahrq.hhs.gov.

SUPPLEMENTARY INFORMATION: AHRQ is seeking public comment about survey characteristics and data collection approaches and strategies to optimize the meaningfulness of patient experience information from patients receiving prenatal and childbirth healthcare, that is, care received in a hospital or birthing center, during labor, delivery, and their stay in the hospital or birthing center. AHRQ's CAHPS Program advances scientific understanding of patient healthcare experiences using surveys developed for different healthcare settings. The CAHPS surveys cover topics that are important to patients and which patients are best able to assess, such as communication with providers, shared decision making, and access to health care services. CAHPS surveys measure care experiences; that is, what happened or how often something happened, in a health care encounter. CAHPS surveys do not collect information about availability of specific services; limitations to receiving specific services or procedures; or patient satisfaction (e.g., patients' expectations for, or how they felt about, their care). Information collected by CAHPS surveys can motivate and focus quality improvement efforts and/or choice of providers by survey sponsors, health care organizations, clinicians, patients, consumers, and other stakeholders.

Specific questions of interest to AHRQ include, but are not limited to:

1. What are the highest priority aspect(s) of patient experiences with

prenatal healthcare that should be asked about in a survey?

a. Why are these aspect(s) of patient experience a high priority for inclusion in a survey of prenatal healthcare?

b. What other topic area(s) should be included in a new survey assessing prenatal healthcare?

2. What are the highest priority aspect(s) of patient experiences with *childbirth healthcare* that should be asked about in a survey?

a. Why are these aspect(s) of patient experience a high priority for inclusion in a survey of childbirth healthcare?

b. What other topic area(s) should be included in a new survey assessing patient experiences with childbirth health care?

3. For which prenatal care settings should measures and/or surveys be developed? For example, should measures and/or surveys be developed for group practices? Hospitals? Birthing centers? Ambulatory care practices? Other settings?

4. For which childbirth care settings should measures and/or surveys be developed? For example, should measures and/or surveys be developed for hospitals? Birthing centers? Ambulatory care practices? Other settings?

5. What, if any, challenge(s) are there to collecting information about patient experiences with prenatal and childbirth healthcare?

6. What actions or approaches would facilitate the collection of information about the experience of patients with prenatal and childbirth healthcare?

(a) What data collection approach(es) would be most likely to promote participation by respondents to a survey of prenatal and childbirth healthcare (e.g., web-based; paper-and-pencil; etc.)?

(b) Are there any way(s) that data collection approach(es) would differ based on whether patients received healthcare in inpatient care settings compared to ambulatory care settings?

7. Which survey measure(s) that assess prenatal and/or childbirth care experiences are currently being used? Please note that these surveys or items might be found in the patient satisfaction domain. Feel free to include them in response to this RFI.

(a) Which respondent groups (e.g., patients in inpatient settings; family members; providers; etc.) are asked to complete these survey(s)?

(b) How are these currently used survey(s) administered (for example, paper-and-pencil; web-based; etc.) to patients?

(c) What information is collected in these survey(s) that assess prenatal care and/or childbirth experiences? How