

Federal Register notice seeks public comment on one or more of our collection of information requests that we believe are generic and fall within the scope of the umbrella. Interested persons are invited to submit comments regarding our burden estimates or any other aspect of this collection of information, including: the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

DATES: Comments must be received by October 11, 2023.

ADDRESSES: When commenting, please reference the applicable form number (see below) and the OMB control number (0938–1148). To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. *Electronically.* You may send your comments electronically to <http://www.regulations.gov>. Follow the instructions for “Comment or Submission” or “More Search Options” to find the information collection document(s) that are accepting comments.

2. *By regular mail.* You may mail written comments to the following address:

CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: CMS–10398 (#64)/OMB control number: 0938–1148, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, please access the CMS PRA website by copying and pasting the following web address into your web browser: <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing>

FOR FURTHER INFORMATION CONTACT: William N. Parham at (410) 786–4669.

SUPPLEMENTARY INFORMATION: Following is a summary of the use and burden associated with the subject information collection(s). More detailed information can be found in the collection's supporting statement and associated materials (see **ADDRESSES**).

Generic Information Collection

1. *Title of Information Collection:* Model Application Template and Instructions for State Child Health Plan Under Title XXI of the Social Security Act, State Children's Health Insurance Program; *Type of Information Collection Request:* Revision of a currently approved collection; *Use:* This 2023 iteration proposes to revise the State plan template by adding a new section 6.5-Vaccine coverage, which consists of three new assurances to the state plan template to report compliance with the coverage requirements for age-appropriate vaccines. The revisions are intended to conform to statutory amendments made by section 11405(b)(1) of the Inflation Reduction Act. *Form Number:* CMS–10398 (#34) (OMB control number: 0938–1148); *Frequency:* Once; *Affected Public:* State, local, or Tribal governments; *Number of Respondents:* 40; *Total Annual Responses:* 40; *Total Annual Hours:* 160. (For policy questions regarding this collection contact: Chanelle Parkar at (667)-290–9798.)

Dated: September 22, 2023.

William N. Parham, III,

Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2023–21062 Filed 9–26–23; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities: Proposed Collection; Public Comment Request; of the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) Grantee Annual Performance Reporting (APR) and Final Report Forms; OMB No.: 0985–0050

AGENCY: Administration for Community Living, HHS.

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of information listed above. Under the Paperwork Reduction Act of 1995 (PRA), Federal agencies are required to publish a notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the

notice. This IC Extension solicits comments on the information collection requirements relating to the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) Grantee Annual Performance Reporting (APR) and Final Report Forms OMB Control Number 0985–0050.

DATES: Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by November 27, 2023.

ADDRESSES: Submit electronic comments on the collection of information to: Myrial.Earl@acl.hhs.gov. Submit written comments on the collection of information to Administration for Community Living, 330 C Street SW, Washington, DC 20201, Attention: Myrial Earl.

FOR FURTHER INFORMATION CONTACT: Earl Myrial at Myrial.Earl@acl.hhs.gov, Administration for Community Living or (202) 795–7341.

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. “Collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. The PRA requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval.

To comply with this requirement, ACL is publishing a notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, ACL invites comments on our burden estimates or any other aspect of this collection of information, including: (1) whether the proposed collection of information is necessary for the proper performance of ACL's functions, including whether the information will have practical utility; (2) the accuracy of ACL's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used to determine burden estimates; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques

when appropriate, and other forms of information technology.

The National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) Grantee Annual Performance Reporting (APR) and Final Report Forms collect data from all NIDILRR grantees via a web-based reporting system and addresses specific HHS regulations that shall be met by applicants and grantees. HHS regulations that apply to NIDILRR Grant programs include Part 75 of the Uniform Administrative Requirements, Cost Principles and Audit requirements for HHS Awards. Specifically, § 75.342, which requires grantees to submit an annual performance report or, for the last year of a project, a final report that evaluates: (a) the grantee’s progress in achieving the objectives in its approved application, (b) the effectiveness of the project in meeting the purposes of the program, and (c) the results of research and related activities.

Additionally, GPRA requires all Federal agencies to implement performance measurement systems that include: (1) a five-year strategic plan, (2) an annual performance plan, and (3) an annual performance report. Currently, NIDILRR has met these requirements and has established performance indicators to meet the reporting requirements. The NIDILRR APR System currently includes reporting forms for all 10 of NIDILRR’s grant programs.

This information collection system covers 10 grant programs funded or administered by NIDILRR/ACL, and each grantee submits its information using a reporting form that is unique to the program mechanism under which it is funded. The 10 forms meet the reporting requirements for the following programs:

1. Rehabilitation Research Training Centers (RRTC)

2. Rehabilitation Engineering Research Centers (RERC)
3. Field Initiated Research Projects (FIP)
4. Advanced Rehabilitation Research Training Projects (ARRT)
5. Model Systems—(includes spinal cord injury, traumatic brain injury, burn centers)
6. Disability and Rehabilitation Research Projects (DRRP)
7. Knowledge Translation (KT) Projects
8. ADA National Network Centers (ADAs)
9. Small Business Innovation Research Projects (SBIR)
10. Research Fellowships Program (RFP)

Reporting forms for all 10 programs are Web-based.

Data collected through these forms: (a) facilitate program planning and management; (b) respond to ACL/HHS Grants Policy Administration Manual (GPAM) requirements; and (c) respond to the reporting requirements of the Government Performance and Results Act (GPRA) of 1993 (Pub. L. 103–62).

NIDILRR/ACL uses the information gathered annually from these data collection efforts to provide Congress with the information mandated in GPRA, provide OMB information required for assessment of performance on GPRA indicators, and support its evaluation activities. Data collected from the 10 grant programs will provide a national description of the research activities of approximately 313 NIDILRR grantees. NIDILRR’s GPRA plan must collect information to meet the following mandates: (a) implementation of a comprehensive plan that includes goals and objectives; (b) measurement of the program’s progress in meeting its objectives; and (c) submission of an annual report on program performance, including plans for program improvement, as appropriate. The data collection system addresses nearly all of

the agency’s GPRA indicators, either directly or by providing information for the agency’s other review processes.

An important gap in sociodemographic information in the Web-based Reporting System for NIDILRR Grantees is a lack of items collecting sexual orientation and gender identify. Adding sexual orientation and gender identify items to the Annual Performance Reporting Forms for NIDILRR Grantees is part of ACL’s strategy to address “Executive Order 13988 on Preventing and Combating Discrimination on the Basis of Gender Identity and Sexual Orientation.” Issued in January 2021, Executive Order 13988 called upon agencies to identify existing and new policies to promote equal treatment under the law and ensure that all persons can access healthcare and other essential services without being subjected to sex discrimination. To support alignment with Executive Order 13988, as well as Executive Orders 13985 and 14075, three items will be added to the Annual Performance Reporting Forms for NIDILRR Grantees to collect sexual orientation and gender identity. Including sexual orientation and gender identity questions in this information collection will provide data on topics such as accessibility and utilization of services and programs funded by ACL by lesbian, gay, bisexual, and transgender populations and the health disparities that impact this community. Understanding these disparities can and should lead to improved service delivery for ACL’s programs and populations served.

The proposed data collection tools may be found on the ACL website for review at: <https://www.acl.gov/about-acl/public-input>.

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

	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
New Grantees	* 71	1	52	3,692
Continuations of Major Programs	138	1	22	3,036
Other Continuations	104	1	10	1,040
Total	313	7,768

* Does not include SBIR Phase I grants, which do not use the system.

Dated: September 21, 2023.

Alison Barkoff,

Senior Official Performing the Duties of the Administrator and the Assistant Secretary for Aging.

[FR Doc. 2023-21045 Filed 9-26-23; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Announcing the Intent To Award a Single-Source Supplement the Link Center: Bridging Intellectual and/or Developmental Disabilities (I/DD) and Mental Health Systems Cooperative Agreement

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 National Association for State Directors of Developmental Disabilities Services (NASDDDS) for the Link Center: Bridging I/DD and Mental Health Systems cooperative agreement. The purpose of this project is to improve the quality of life for people with intellectual and/or developmental disabilities (I/DD) and mental health conditions by supporting state agencies with policy development, service design, and service coordination resources, and sharing resources to individuals, families, direct support professionals, clinicians, and other policymakers. The administrative supplement for FY 2023 will amount to \$540,000, bringing the total award for FY 2023 to \$1,214,978.

FOR FURTHER INFORMATION CONTACT: For further information or comments regarding this program supplement, contact Allison Cruz, U.S. Department of Health and Human Services, Administration for Community Living, Administration on Disabilities, (202) 795-7334 or via email allison.cruz@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: This supplementary funding from the Substance Abuse and Mental Health Services Administration (SAMHSA) will expand The Link Center: Bridging I/DD and Mental Health Systems by coordinating, planning, and implementing activities to support 988 call centers to support people with I/DD and mental health conditions. A key activity will be the 988 Policy Academy. As a result of this funding, ACL and SAMHSA expect that:

- Up to 6 States will improve their systems to more effectively address the needs of individuals with I/DD and mental health conditions.

- Targeted State teams will have engaged in six (6) virtual learning engagements and participated in a two-day session to finalize actions steps. These States will receive follow-along supports towards implementations and sustainability activities to more effectively address the needs of individuals with I/DD and mental health conditions.

This supplement will fund the following.

Academy Structure

Membership

The policy academy will be open to 5-6 states. Each state will bring a team of partners, including:

- SAMHSA 988 Office and CMHS leadership and/or key staff, including the representatives from the Lifeline network administrator
- State mental health authority leadership and core staff involved in 988 and Crisis Response
- State I/DD authority leadership and core staff involved in supporting individuals with complex support needs
- State Medicaid leader(s) with knowledge and oversight of MH and/or LTSS
- State Head Injury Administrators/core staff or partner organizations
- People with lived experience
- One or more State DD Act Partner organizations (DD Councils, UCEDDs, Protection and Advocacy Organizations)
- Leadership from the National Association of County Behavioral Health & Developmental Disability Directors

Optional:

- Child welfare officials, especially those supporting children with complex support needs
- Law enforcement
- Other partners as determined by the state

Each team should be led by 2-3 individuals from State Mental Health, 988/Lifeline and I/DD Agencies. Each state team may consist of 8-10 individuals. Team composition should reflect a lens toward ensuring that the state-level solutions will be informed by diversity, equity, and inclusion. States may include team members that are key to building a responsive network of information sharing, potential warm hand-offs, and available supports.

Approach

Exploratory survey/Environmental scan:

- Prior to selection of state participants, collect information related to general

areas of need that will inform and give an aggregate scope of focus for succeeding academy activities
State Tailored Interventions:

- State specific planning meetings with state leads
- Convene state-level (virtual) town hall discussions to provide landscape information on areas of need
- Develop target areas for state team Virtual Learning Opportunities:
- Based on state target areas, develop series of six (6) virtual learning engagements for cross-state participation (identifying peers for both elevation of good practice and group solution identification)

In Person Academy:

- Convene a two-day symposium in the Washington DC area focused on cultivating sustainable networks and ongoing information sharing (Strongly encourage in-person participation, accommodate virtual if needed). Will include group learning and state-specific breakout sessions to optimize learning, sharing and action plan development.
 - Will include pre-planning with each state (two meetings)
 - Will include post-meeting follow up activities, including plan for implementation and sustainability
- Post Meeting Activities and Follow-Along Technical Assistance:
 - TA Collaborative will meet with state teams to finalize action steps developed from in person meeting;
 - TA Collaborative will meet monthly with state teams to provide follow-along support toward implementation and sustainability activities.
 - A post convening synthesis will be developed as a resource for partners engaged in this work.

Program Name: The Link Center: Bridging I/DD and Mental Health Systems.

Recipient: The National Association of State Directors of Developmental Disabilities Services.

Period of Performance: The supplement award will be issued for the second year of the five-year project period of September 30, 2023, through August 31, 2024.

Total Supplement Award Amount: \$540,000.

Award Type: Cooperative Agreement.

Statutory Authority: This program is authorized under the Developmental Disabilities Assistance and Bill of Rights Act of 2000 Public Law 106-402, section 161(2)(B), (C), and (D).

Basis for Award: The National Association of State Directors of Developmental Disabilities Services is