

(Authority: 44 U.S.C. 3101)

Robin D. Bailey, Jr.,

Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2024–15100 Filed 7–9–24; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Reorganization of the Office of Financial Resources

AGENCY: Centers for Disease Control and Prevention (CDC), the Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: CDC has modified its structure. This notice announces the reorganization of the Office of Financial Resources (OFR) and the CDC Immediate Office of the Director (IOD). OFR added a branch and a new office was established within the CDC IOD.

DATES: This reorganization was approved by the Director of CDC on June 20, 2024, and became effective.

FOR FURTHER INFORMATION CONTACT: Victoria Hunter, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–12, Atlanta, GA 30329. Telephone 404–639–7124; Email: vdp5@cdc.gov.

SUPPLEMENTARY INFORMATION: Part C (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (45 FR 67772–76, dated October 14, 1980, and corrected at 45 FR 69296, October 20, 1980, as amended most recently at 89 FR 19832, dated March 20, 2024) is amended to reflect the reorganization of Office of Financial Resources and the CDC Immediate Office of the Director, Centers for Disease Control and Prevention.

Specifically, the changes are as follows:

- I. Under Part C, Section C–B, Organization and Functions, make the following changes:
 - Abolish the Office of Appropriations (CAJE14)
 - Establish the Budget Formulation Branch (CAJEVR)
 - Establish the Office of Budget Policy and Appropriations (CAR)
- II. Under Part C, Section C–B, Organization and Functions, after the Budget Execution Services Branch 4 (CAJEVQ) insert the following:
 - Budget Formulation Branch (CAJEVR). (1) manages and coordinates

development of the budget for CDC and ATSDR from submissions prepared by Center//Institute/Office contacts; (2) formulates the CDC and ATSDR financial plan, and evaluates and assures total budget requests conform to current administration policy and economic assumptions in coordination with CIOs; (3) coordinates with the Office of Planning, Performance, and Evaluation to include the Government Performance and Results Act (GPRA) Modernization Act performance measures with budget proposals to HHS, OMB and Congress; (4) prepares periodic summary analysis and impact statements on budget allowances and applicable congressional actions; (5) develops analyses of proposed budget estimates and supporting narrative through the use of available financial data reporting systems for senior CDC management; (6) maintains liaison with HHS, OMB, the Government Accountability Office, and other government organizations on CDC's financial management matters; (7) collaborates with other parts of CDC in the development and implementation of long-range program and financing plans; (8) completes requirements in timing and reporting of cleared information to parties outside the Executive Branch (*i.e.*, Congress, media, public); and (9) develops and presents analyses, special reports, background exhibits, and graphical material on budget proposals, budget activities, and related matters.

After the Office of Policy, Performance, and Evaluation (CAQ) insert the following: Office of Budget Policy and Appropriations (CAR). The Office of Budget Policy and Appropriations: (1) provides leadership, consultation, guidance, and advice on matters of public health and budget policy; (2) leads all Centers for Disease Control and Prevention (CDC) and Agency for Toxic Substances and Disease Registry (ATSDR) Congressional appropriations leadership activities including strategic outreach and interaction with Congressional appropriators on appropriations/budget matters; (3) supports the Office of Financial Resources in the development of CDC's and ATSDR's annual funding request in accordance with Department of Health and Human Services (HHS), Office of Management and Budget (OMB), and Congressional requirements, policies, procedures, and regulations; (4) maintains liaison with the HHS Office of the Secretary (OS), OMB, other government organizations, and Congress on appropriations and budget policy matters; (5) develops materials for, and participates in, budget policy and

financial reviews and hearings before HHS, OMB, and Congress; (6) collaborates with CDC Washington Office (CDC/W) and other parts of CDC, and outside stakeholders, in the development and implementation of agency-wide legislative strategy; (7) advances the CDC policy agenda through interactions with appropriations leadership; (8) coordinates with Centers/Institute/Offices on Congressional appropriations leadership strategy and interactions, ensuring a unified presentation of CDC interests to legislators; (9) leads the development and updates to spend plans for CDC supplemental funding, infectious diseases rapid response reserve fund requests, and new budget programs; (10) tracks, analyzes, and reports on appropriations legislation; (11) protects and advances the agency's reputation, scientific credibility, and interests; (12) informs CDC leadership of current developments and provides insight into the budget policy environment; and (13) coordinates, with the CDC/W and CIO partnership activities that relate to budget policy and appropriations to advance the agency's priorities.

Delegations of Authority

All delegations and redelegations of authority made to officials and employees of affected organizational components will continue in them or their successors pending further redelegation, provided they are consistent with this reorganization.

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Robin D. Bailey, Jr.,

Chief Operating Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–179, CMS–10536, CMS–R–153 and CMS–10326]

Agency Information Collection Activities: Proposed Collection; Comment Request; Withdrawal

AGENCY: Centers for Medicare & Medicaid Services, HHS.

ACTION: Notice; withdrawal.

SUMMARY: On Tuesday, July 2, 2024, the Centers for Medicare & Medicaid Services (CMS) published a notice entitled, “Agency Information

Collection Activities: Proposed Collection; Comment Request.” The document invited public comments on four separate information collection requests notices specific to document identifiers: CMS–179, CMS–10536, CMS–R–153 and CMS–10326. Through the publication of this document, we are withdrawing each of the aforementioned notices.

DATES: The comment period associated with the publication for CMS–179, CMS–10536, CMS–R–153 and CMS–10326 on July 2, 2024 (89 FR 54826), will be null and void upon publication of this document.

SUPPLEMENTARY INFORMATION: Each of the aforementioned notices already published on June 28, 2024 (89 FR 54002) and the comment period associated with that publication remains in full effect.

In FR document, 2024–14581, published on July 2, 2024 (89 FR 54826), we are withdrawing all four of the notices listed in the Information Collections section of the document.

William N. Parham, III,

Director, Division of Information Collections and Regulatory Impacts, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2024–15097 Filed 7–9–24; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–1500/1490S]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS’ intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate 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 on the collection(s) of information must be received by the OMB desk officer by August 9, 2024.

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.

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 Parham at (410) 786–4669.

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (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. The term “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. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires federal agencies to publish a 30-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice that summarizes the following proposed collection(s) of information for public comment:

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Health Insurance Common Claims Form and

Supporting Regulations at 42 CFR part 424, subpart C; *Use:* The CMS–1500 and the CMS–1490S forms are used to deliver information to CMS for CMS to reimburse for provided services. Medicare Administrative Contractors use the data collected on the CMS–1500 and the CMS–1490S to determine the proper amount of reimbursement for Part B medical and other health services (as listed in section 1861(s) of the Social Security Act) provided by physicians and suppliers to beneficiaries. The CMS–1500 is submitted by physicians/suppliers for all Part B Medicare. Serving as a common claim form, the CMS–1500 can be used by other third-party payers (commercial and nonprofit health insurers) and other Federal programs (e.g. TRICARE, RRB, and Medicaid). *Form Number:* CMS–1500/1490S (OMB control number: 0938–1197); *Frequency:* Occasionally; *Affected Public:* Private Sector: Business or other for-profit and not-for-profit institutions; *Number of Respondents:* 2,507,992; *Total Annual Responses:* 994,038,623; *Total Annual Hours:* 17,328,912. (For policy questions regarding this collection contact Sadaf Ali-Simpson at 667–414–0004.)

William N. Parham, III,

Director, Division of Information Collections and Regulatory Impacts, Office of Strategic Operations and Regulatory Affairs.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–222–17, CMS–10261, and CMS–R–284]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS’ intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the