

and Major Renovations of Federal Buildings” by:

- Allowing assessors and auditors to independently verify the criteria and measurement metrics of the system
- Being developed by a certification organization that provides an opportunity for public comment on the system and provides an opportunity for development and revision of the system through a consensus-based process
- Being nationally recognized within the building industry
- Being subject to periodic evaluation and assessment of the environmental and energy benefits that result under the certification system, and
- Including a verification system for post-occupancy assessment of the rated buildings to demonstrate continued energy and water savings at least every four years after initial occupancy

For existing buildings, GSA recommends that agencies consider the use of BOMA Best, BREEAM In-Use, Green Globes, LEED, Living Building Challenge, Living Building Challenge CORE, or PHIUS CORE Revive. Each of these systems contains requirements and options that align to varying degrees with green building performance criteria and provides a sound approach to certification of high-performance green Federal buildings. It is important for agencies to ensure that the options selected within a certification system are those that align with Federal criteria in order to realize the benefits of using such a system. GSA recommends agencies use the certification system that best meets their mission, building type, and portfolio needs and certify to a level that promotes the high performance sustainable building goals referenced in Executive Orders 14008 and 14057.

It should be noted that on October 14, 2014, the U.S. DOE published its final rule that formally identifies criteria that green building certification systems must meet in order to be used by the Federal Government. This GSA request for public comment is not for the purposes of that final rulemaking, but to inform GSA on its related responsibilities to study green building certification systems and recommend ones to the DOE that may fit within the framework of the final rule. DOE’s final rule can be found at <https://www.regulations.gov/document/DOE-EERE-OT-2010-0007-0084>.

**Kinga Hydras,**

*Acting Director, Office of Federal High-Performance Green Buildings, General Services Administration.*

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**BILLING CODE 6820–14–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Medicare & Medicaid Services**

[Document Identifier: CMS–10434 #82]

**Medicaid and Children’s Health Insurance Program (CHIP) Generic Information Collection Activities: Proposed Collection; Comment Request**

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

**ACTION:** Notice.

**SUMMARY:** On May 28, 2010, the Office of Management and Budget (OMB) issued Paperwork Reduction Act (PRA) guidance related to the “generic” clearance process. Generally, this is an expedited process by which agencies may obtain OMB’s approval of collection of information requests that are “usually voluntary, low-burden, and uncontroversial collections,” do not raise any substantive or policy issues, and do not require policy or methodological review. The process requires the submission of an overarching plan that defines the scope of the individual collections that would fall under its umbrella. This **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 August 13, 2024.

**ADDRESSES:** When commenting, please reference the applicable form number (CMS–10434 #82) and the OMB control number (0938–1188). 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–10434 #82/OMB control number: 0938–1188, 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/medicare/regulations-guidance/legislation/paperwork-reduction-act-1995/pralisting>.

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

**SUPPLEMENTARY INFORMATION:** Because of system limitations, we are submitting this generic collection of information request on an interim basis under CMS–10434 (OMB 0938–1188). At the appropriate time we will move this request under its proper place (CMS–10398, OMB 0938–1148) and subsequently remove it from CMS–10434 to prevent duplication. The public can monitor the status of such activities at [reginfo.gov](http://reginfo.gov).

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:* Quality Improvement Affinity Group Expression of Interest Form; *Type of Information Collection Request:* New information collection request information request; *Use:* The new CMCS Quality Improvement Affinity Group Expression of Interest (EOI) Form will replace the following topic-specific EOI forms: CMS–10398 #72 for Infant Well-Care and CMS–10398 #76 for Maternal Health. Both will be discontinued sometime after the new form is approved by OMB. We host multiple affinity groups with overlapping time frames, with health topics changing to meet state interest and needs as well as to address emerging health disparities as new health data becomes available. In this iteration, we intend for a more general EOI form that will not change with new affinity groups; it will remain the same no matter the subject matter therefore burden will not change. The general

form will allow state participants to list multiple Affinity Groups they may be interested in, as well as provide state participants with a more reliable, streamlined, and consistent process for participation going forward. *Form Number:* CMS–10434 #82 (OMB control number: 0938–1188); *Frequency:* Once; *Affected Public:* State, Local, or Tribal Governments; *Number of Respondents:* 20; *Total Annual Responses:* 20; *Total Annual Hours:* 60. (For policy questions regarding this collection contact: Sarah Leetham at 720–853–2612.)

**William N. Parham, III,**

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

[FR Doc. 2024–16735 Filed 7–29–24; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–10114 and CMS–10829]

#### 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 proposed action. Interested persons are invited to send 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 September 30, 2024.

**ADDRESSES:** When commenting, please reference the document identifier or OMB control number. 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: Document Identifier/OMB Control Number: \_\_\_\_\_, 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:

##### Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

CMS–10114 National Provider Identifier (NPI) Application and Update Form and Supporting Regs in 45 CFR 142.408, 45 CFR 162.408, 45 CFR 162.406  
CMS–10829 Improper Payment Pre-Testing and Assessment (IPPTA) Data Request Form

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. 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 requires federal agencies to publish a 60-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.

#### Information Collections

1. *Type of Information Collection Request:* Extension of a currently approved information collection; *Title of Information Collection:* National Provider Identifier (NPI) Application and Update Form and Supporting Regs in 45 CFR 142.408, 45 CFR 162.408, 45 CFR 162.406; *Use:* The adoption by the Secretary of HHS of the standard unique health identifier for health care providers is a requirement of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The unique identifier is to be used on standard transactions and may be used for other lawful purposes in the health care system. The CMS Final Rule published on January 23, 2004, adopts the National Provider Identifier (NPI) as the standard unique health identifier for health care providers. Health care providers that are covered entities under HIPAA must apply for and use NPIs in standard transactions. Other health care providers are eligible for NPIs but are not required by regulation to apply for them or use them. Health care providers began applying for NPIs on May 23, 2005.

The National Provider Identifier Application and Update Form is used by health care providers to apply for NPIs and furnish updates to the information they supplied on their initial applications. The form is also used to deactivate their NPIs if necessary. The original application form was approved in February 2005 and has been in use since May 23, 2005. The form is available on paper or can be completed via a web-based process. Health care providers can mail a paper application, complete the application via the web-based process via the National Plan and Provider Enumeration System (NPPES), or have a trusted organization submit the application on their behalf via the Electronic File Interchange (EFI) process. The Enumerator uses the NPPES to process the application and generate the NPI. NPPES is the Medicare contractor tasked with issuing NPIs, and maintaining and storing NPI data. *Form Number:* CMS–10114 (OMB control number: 0938–0931); *Frequency:* Occasionally; *Affected Public:* Business or other for-profits, Not for-profits and Federal Government; *Number of Respondents:* 1,275,912; *Number of*