

their behalf, may use this optional model form to request information from plans regarding the medical necessity and claims denials disclosures referenced above. *Form Number:* CMS-10307 (OMB control number: 0938-1080); *Frequency:* Occasionally; *Affected Public:* State, Local, or Tribal Governments, Private Sector, Individuals; *Number of Respondents:* 282,657; *Total Annual Responses:* 1,125,558; *Total Annual Hours:* 93,797. (For policy questions regarding this collection contact Erik Gomez at 667-414-0682.)

2. Type of Information Collection

Request: Revision of a currently approved collection; *Title of Information Collection:* On-Site Inspection for Durable Medical Equipment (DME) Supplier Location and Supporting Regulations in 42 CFR, Section 424.57; *Use:* CMS is mandated to identify and implement measures to prevent fraud and abuse in the Medicare program. To meet this challenge, CMS has moved forward to improve the quality of the process for enrolling suppliers into the Medicare program by establishing a uniform application for enumerating suppliers of durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS). Implementation of enhanced procedures for verifying the enrollment information has also improved the enrollment process. As part of this process, verification of compliance with supplier standards is necessary. The site investigation form has been used in the past to aid the Medicare contractor (the National Supplier Clearinghouse and/or its subcontractors) in verifying compliance with the required supplier standards found in 42 CFR 424.57(c). The primary function of the site investigation form is to provide a standardized, uniform tool to gather information from a DMEPOS supplier that tells us whether it meets certain qualifications to be a DMEPOS supplier (as found in 42 CFR 424.57(c)) and where it practices or renders its services. *Form Number:* CMS-R-263 (OMB control number: 0938-0749); *Frequency:* Yearly; *Affected Public:* Private sector, Business or other for-profits; *Number of Respondents:* 48,087; *Number of Responses:* 48,087; *Total Annual Hours:* 48,087. (For policy questions regarding this collection

contact Alisha Sanders at 410-786-0671.)

William N. Parham, III,

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

[FR Doc. 2024-18745 Filed 8-20-24; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-7076-N]

Announcement of the Advisory Panel on Outreach and Education (APOE) In-Person Meeting

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

ACTION: Notice.

SUMMARY: This notice announces the next meeting of the APOE (the Panel) in accordance with the Federal Advisory Committee Act. The Panel advises and makes recommendations to the Secretary of the U.S. Department of Health and Human Services (HHS) (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on opportunities to enhance the effectiveness of consumer education strategies concerning the Health Insurance Marketplace[®],¹ Medicare, Medicaid, and the Children's Health Insurance Program (CHIP). This meeting is open to the public.

DATES:

Meeting Date: Thursday, September 19, 2024, from 8:30 a.m. to 4 p.m. eastern daylight time (e.d.t).

Deadline for Meeting Registration, Presentations, Special Accommodations, and Comments: Thursday, September 5, 2024, 5 p.m. (e.d.t).

ADDRESSES:

Meeting Location: U.S. Department of Health and Human Services, Hubert H. Humphrey Building, 200 Independence Avenue SW, Washington, DC 20201.

Presentations and Written Comments: Presentations and written comments should be submitted to: Walt Gutowski, Designated Federal Official (DFO), Office of Communications, Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Mailstop S1-04-08, Baltimore, MD 21244-1850, 410-786-

6818, or via email at APOE@cms.hhs.gov.

Registration: Persons wishing to attend this meeting must register at the website <https://CMS-APOE-September2024.rsvpify.com> or by contacting the DFO listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice, by the date listed in the **DATES** section of this notice. Individuals requiring sign language interpretation or other special accommodations should contact the DFO at the address listed in the **ADDRESSES** section of this notice by the date listed in the **DATES** section of this notice.

FOR FURTHER INFORMATION CONTACT: Walt Gutowski, Designated Federal Official, Office of Communications, 7500 Security Boulevard, Mailstop S1-04-08, Baltimore, MD 21244-1850, 410-786-6818, or via email at APOE@cms.hhs.gov.

Additional information about the APOE is available at: <https://www.cms.gov/Regulations-and-Guidance/Guidance/FACA/APOE>. Press inquiries are handled through the CMS Press Office at (202) 690-6145.

SUPPLEMENTARY INFORMATION:

I. Background and Charter Renewal Information

A. Background

The Advisory Panel for Outreach and Education (APOE) (the Panel) is governed by the provisions of the Federal Advisory Committee Act (FACA) (Pub. L. 92-463), as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of federal advisory committees. The Panel is authorized by section 1114(f) of the Social Security Act (the Act) (42 U.S.C. 1314(f)) and section 222 of the Public Health Service Act (42 U.S.C. 217a).

The Panel, which was first chartered in 1999, advises and makes recommendations to the Secretary of the U.S. Department of Health and Human Services (the Department) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on the effective implementation of national Medicare, Medicaid, Children's Health Insurance Program (CHIP) and Health Insurance Marketplace[®] outreach and education programs.

The APOE has focused on a variety of laws, including the Medicare Modernization Act of 2003 (Pub. L. 108-173), and the Affordable Care Act (Patient Protection and Affordable Care Act, (Pub. L. 111-148) and Health Care and Education Reconciliation Act of 2010 (Pub. L. 111-152)).

The APOE helps the Department determine the best communication

¹ Health Insurance Marketplace[®] is a registered service mark of the U.S. Department of Health & Human Services.

channels and tactics for various programs and priorities, as well as new rules and laws. In the coming years, we anticipate the American Rescue Plan, the Inflation Reduction Act, and the SUPPORT Act will be some of the topics the Panel will discuss. The Panel will provide feedback to CMS staff on outreach and education strategies, communication tools and messages and how to best reach minority, vulnerable and Limited English Proficiency populations.

B. Charter Renewal

The Panel's charter was renewed on January 19, 2023, and will terminate on January 19, 2025, unless renewed by appropriate action. The Charter can be found at <https://www.cms.gov/regulations-and-guidance/guidance/faca/apoe>.

In accordance with the renewed charter, the APOE will advise the Secretary and the CMS Administrator concerning optimal strategies for the following:

- Developing and implementing education and outreach programs for individuals enrolled in, or eligible for, Medicare, Medicaid, the CHIP, and coverage available through the Health Insurance Marketplace® and other CMS programs.
- Enhancing the federal government's effectiveness in informing Medicare, Medicaid, CHIP, or the Health Insurance Marketplace® consumers, issuers, providers, and stakeholders, pursuant to education and outreach programs regarding these programs, including public-private partnerships to leverage the resources of the private sector in educating beneficiaries, providers, partners and stakeholders.
- Expanding outreach to minority and underserved communities, including racial and ethnic minorities, in the context of Medicare, Medicaid, CHIP, and the Health Insurance Marketplace® education programs and other CMS programs as designated.
- Assembling and sharing an information base of "best practices" for helping consumers evaluate health coverage options.
- Building and leveraging existing community infrastructure for information, counseling, and assistance.
- Drawing the program link between outreach and education, promoting consumer understanding of health care coverage choices, and facilitating consumer selection/enrollment, which in turn support the overarching goal of improved access to quality care, including prevention services, envisioned under the Affordable Care Act.

The current members of the Panel as of April 18, 2024, are as follows:

- Mitchell Balk, President, The Mt. Sinai Health Foundation.
- Paula Campbell, Director of Health Equity and Emergency Response, Illinois Primary Care Association.
- Dr. Matthew Fullen, Associate Professor of Counselor Education, Virginia Tech.
- Justin Gust, Vice President of Community Engagement, El Centro, Inc.
- Andrea Haynes, MD, Family Medicine Physician, PPC Austin Family Health Center.
- Lydia Isaac, Vice President for Health Equity and Policy, National Urban League.
- Vacheria Keys, Director of Policy and Regulatory Affairs, National Association of Community Health Centers.
- Daisy Kim, Assistant Director for Government Relations and Legislative Analysis, University of California System.
- Lynn Kimball, Executive Director, Aging and Long-Term Care of Eastern Washington.
- Erin Loubier, Senior Director for Health and Legal Integration and Payment Innovation, Whitman-Walker Health.
- Dr. Alister Martin, Physician and Assistant Professor, Harvard Medical School and Harvard Kennedy School.
- Neil Meltzer, President and CEO, LifeBridge Health.
- Dr. Carol Podgorski, Professor of Psychiatry, Associate Chair of Academic Affairs, University of Rochester Medical Center.
- Melanie Prince, CEO MAPYourWay, LLC; Immediate Past President, Case Management Society of America.
- Carrie Rogers, Associate Director, Community Catalyst.
- Tricia Sandiego, Senior Advisor, Caregiving and Health Team, AARP.
- Marsha Schofield, President, Marsha Schofield & Associates LLC.
- Mina Schultz, Health Policy and Advocacy Manager, Young Invincibles.
- Daniel Spirn, Vice President, Government Relations, Utilization Review Accreditation Commission.
- Emily Whicheloe, Director of Education, Medicare Rights Center.

II. Meeting Format and Agenda

In accordance with section 10(a) of the FACA, this notice announces a meeting of the APOE. The agenda for the September 19, 2024, meeting will include the following:

- Welcome and opening remarks from CMS leadership.
- Recap of the previous (April 18, 2024) meeting.

- Presentations on CMS programs, initiatives, and priorities; discussion of panel recommendations.
- An opportunity for public comment.

• Meeting adjourned.

Individuals or organizations that wish to make a 5-minute oral presentation on an agenda topic should submit a written copy of the oral presentation to the DFO at the address listed in the **ADDRESSES** section of this notice by the date listed in the **DATES** section of this notice. The number of oral presentations may be limited by the time available. Individuals not wishing to make an oral presentation may submit written comments to the DFO at the address listed in the **ADDRESSES** section of this notice by the date listed in the **DATES** section of this notice.

III. Meeting Participation

The meeting is open to the public, but attendance is limited to the space available. Persons wishing to attend this meeting must register at the following weblink <https://CMS-APOE-September2024.rsvpify.com> or by contacting the DFO at the address or telephone number listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice by the date specified in the **DATES** section of this notice.

IV. Security, Building, and Parking Guidelines

This meeting will be held in a federal government building, the Hubert H. Humphrey (HHH) Building; therefore, federal security measures are applicable.

The REAL ID Act of 2005 (Pub. L. 109-13) establishes minimum standards for the issuance of state-issued driver's licenses and identification (ID) cards. It prohibits federal agencies from accepting an official driver's license or ID card from a state for any official purpose unless the Secretary of the Department of Homeland Security determines that the state meets these standards. Beginning October 2015, photo IDs (such as a valid driver's license) issued by a state or territory not in compliance with the Real ID Act will not be accepted as identification to enter federal buildings. Visitors from these states/territories will need to provide alternative proof of identification (such as a valid passport) to gain entrance into federal buildings. The current list of states from which a federal agency may accept driver's licenses for an official purpose is found at <http://www.dhs.gov/real-id-enforcement-brief>.

We recommend that confirmed registrants arrive reasonably early, but no earlier than 45 minutes prior to the start of the meeting, to allow additional

time to clear security. Security measures include the following:

- Presentation of a government-issued photographic identification to the Federal Protective Service or Guard Service personnel.
- Inspection, via metal detector or other applicable means, of all persons entering the building. We note that all items brought into the HHH Building, whether personal or for the purpose of presentation or to support a presentation, are subject to inspection. We cannot assume responsibility for coordinating the receipt, transfer, transport, storage, set up, safety, or timely arrival of any personal belongings or items used for presentation or to support a presentation.

Note: Individuals who are not registered in advance will not be permitted to enter the building and will be unable to attend the meeting.

V. Collection of Information

This document does not impose information collection requirements, that is, reporting, recordkeeping, or third-party disclosure requirements. Consequently, there is no need for review by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35).

The Administrator of the Centers for Medicare & Medicaid Services (CMS), Chiquita Brooks-LaSure, having reviewed and approved this document, authorizes Chyana Woodyard, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Chyana Woodyard,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

[FR Doc. 2024-18691 Filed 8-20-24; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Notice of Supplemental Award; Pediatric Mental Health Care Access Program

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice of supplemental award.

SUMMARY: HRSA is announcing supplemental funding to expand existing Pediatric Mental Health Care Access Program (PMHCA) activities. The recipients of the supplemental awards will enhance workforce capacity in pediatric primary care, school settings, and emergency departments to address growing behavioral health needs among children and adolescents.

FOR FURTHER INFORMATION CONTACT: Lauren Ramos, Maternal and Child Health Bureau, HRSA, at *LRamos@hrsa.gov* or 301-443-6091.

SUPPLEMENTARY INFORMATION:

Intended Recipient(s) of the Awards: Fifty-four PMHCA award recipients will receive supplemental funding awards to continue to address behavioral health needs of children and adolescents. Funds are provided from the Bipartisan Safer Communities Act (BSCA) (Pub. L. 117-159) and PMHCA program annual appropriations. HRSA is providing supplemental funding for all PMHCA current award recipients in a manner that will ensure that, as a result of all PMHCA funding provided over the past two fiscal years (FY), all award recipients will be offered consistent funding over a consistent timeframe.

Number of Award Recipients, Project Periods, and Amount of Non-Competitive Award Offered:

- FY 2021 and FY 2022 awards (HRSA-21-122 and HRSA-22-121) have 29 award recipients:
 - FY 2021 award project period: September 30, 2021, to September

29, 2026

- FY 2022 award project period: September 30, 2022, to September 29, 2026
- \$4,582,000 supplemental budget offered (U4A grant numbers). This is \$158,000 for each of the 29 award recipients. The project period will be July 31, 2024, to September 29, 2025.
- FY 2023 awards (HRSA-23-081) have 25 award recipients:
 - FY 2023 award project period: September 30, 2023, to September 29, 2026
 - \$3,950,000 supplemental budget offered (U4C grant numbers). This is \$158,000 for each award recipient. Funds will be awarded on or before September 30, 2024.
- FY 2021 and FY 2022 awards (HRSA-21-122 and HRSA-22-121) have 19 award recipients:
 - FY 2021 award project period: September 30, 2021, to September 29, 2026
 - FY 2022 award project period: September 30, 2022, to September 29, 2026
 - \$4,845,000 supplemental budget offered (U4A grant numbers). This is \$255,000 for each award recipient that did not receive these supplemental funds in FY 2023. The project period will be July 31, 2024, to September 29, 2025.

Supplemental funding for similar activities may be considered in future years, subject to the availability of funding for the activity and the satisfactory performance of the recipient. A statutory requirement at 42 U.S.C. 254c-19(f) (§ 330M(f) of the Public Health Service Act) requires that PMHCA award recipients match federal funding with a 20 percent non-federal match.

Assistance Listing (CFDA) Number: 93.110.

Award Instrument: Supplements for Services.

Authority: 42 U.S.C. 254c-19 (§ 330M of the Public Health Service Act).

TABLE 1—ACTION 1: 29 U4A RECIPIENTS AND SUPPLEMENTAL AWARD AMOUNT

Original Award No. (supplements will be issued on new awards)	Organization name	Supplement/increase to base for all 29 U4A PMHCA awardees
U4AMC45817	My Health Resources of Tarrant County	\$158,000
U4AMC44236	Government of the District of Columbia	158,000
U4AMC44241	Kentucky Cabinet for Health & Family Services	158,000
U4AMC44256	West Virginia Department of Health and Human Resources	158,000
U4AMC44237	Florida Department of Health	158,000
U4AMC44247	New Mexico Department of Health	158,000
U4AMC44240	Indiana Family and Social Services Administration	158,000
U4AMC44246	Republic Of Palau	158,000
U4AMC44234	Regents of the University of California, San Francisco	158,000
U4AMC44235	Connecticut Department of Children and Families	158,000