

Board of Governors of the Federal Reserve System.

Michele Taylor Fennell,

Associate Secretary of the Board.

[FR Doc. 2024-21683 Filed 9-20-24; 8:45 am]

BILLING CODE P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Fees for Cruise Ship Operational Sanitation, Construction, and Renovation Inspections

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

ACTION: Notice.

SUMMARY: The Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS) announces fees for vessel sanitation inspections for fiscal year (FY) 2025. These inspections are conducted by HHS/CDC’s Vessel Sanitation Program (VSP). VSP helps the cruise line industry fulfill its responsibility for developing and implementing comprehensive sanitation programs to minimize the risk for environmentally associated illnesses and hazards. Every vessel that has a foreign itinerary and carries 13 or more passengers is subject to twice-yearly unannounced operations inspections and, when necessary, reinspection.

DATES: These fees apply to inspections conducted from October 13, 2024, through September 30, 2025.

FOR FURTHER INFORMATION CONTACT: CAPT Luis Rodriguez, Chief, Vessel Sanitation Program, National Center for Environmental Health, Centers for Disease Control and Prevention, 4770 Buford Highway NE, MS 106-6, Atlanta, Georgia 30341-3717; phone: 800-323-2132; email: *vsp@cdc.gov*.

SUPPLEMENTARY INFORMATION:

Purpose and Background

HHS/CDC established the Vessel Sanitation Program (VSP) in the 1970s as a cooperative activity with the cruise ship industry. VSP helps the cruise ship industry prevent and control the introduction and spread of environmentally associated illnesses and hazards on cruise ships. VSP operates under the authority of the Public Health Service Act (Section 361 of the Public Health Service Act; 42 U.S.C. 264, “Control of Communicable Diseases”). Regulations found at 42 CFR 71.41 (Foreign Quarantine—Requirements Upon Arrival at U.S. Ports: Sanitary Inspection; General Provisions) state that carriers arriving at U.S. ports from foreign areas are subject to sanitary inspections to determine potential rodent, insect, or other vermin infestations; contaminated food or water; or other sanitary conditions requiring measures to prevent introduction or spread of communicable diseases.

The FY 2025 fee schedule reflects increases to cover costs to operate and

improve the program. Travel expenses and other costs have increased, and larger ships and more complex features mean more inspectors are needed for each inspection. Fees charged for inspections also support many additional VSP services beyond inspections (plan reviews, equipment reviews, technical assistance, epidemiological investigations, and outbreak response activities). VSP will continue to enhance customer service to cruise lines and shipyards as well as public health efforts onboard by offering additional value-added services requested by industry partners such as modernization of VSP’s data systems to increase functionality and efficiency and updates to VSP training platforms.

Additionally, the fee schedule will be restructured from seven categories to four categories. This new structure addresses comments from industry in July 2019 and more accurately reflects the number of inspectors and inspector-hours needed to perform an inspection.

The fee schedule for sanitation inspections of passenger cruise ships by VSP was first published in the **Federal Register** on November 24, 1987 (52 FR 45019). HHS/CDC began collecting fees on March 1, 1988. The fee schedule was most recently published in the **Federal Register** on August 14, 2023 (88 FR 55048). This notice announces fees for inspections conducted during FY 2025 (beginning on October 13, 2024, through September 30, 2025). The fee schedule for FY 2025 is presented in Appendix A.

The following formula will be used to determine the fees:

$$\text{Average cost per inspection} = \frac{\text{Total cost of VSP}}{\text{Weighted number of annual inspections}}$$

Total cost of VSP = Total cost of operating the program, such as administration, travel, staffing, sanitation inspections, and outbreak response.

Weighted number of annual inspections = Total number of ships and inspections per year accounting for vessel size, number of inspectors

needed for vessel size, travel logistics to conduct inspections, and vessel location and arrivals in U.S. jurisdiction per year.

Fee

The fee schedule (Appendix A) applies to inspections conducted from October 13, 2024, through September 30, 2025.

Applicability

The fees will apply to all passenger cruise vessels for which inspections are conducted as part of HHS/CDC’s VSP.

Noah Aleshire,

Chief Regulatory Officer, Centers for Disease Control and Prevention.

Appendix A

FEE SCHEDULE FOR EACH VESSEL SIZE

Vessel size (GT ¹)	Operational inspection ² fee (US\$)	Construction and renovation inspection ³ fee (US\$)
Tier 1 (<30,000 GT)	8,073	16,146
Tier 2 (30,001–110,000 GT)	16,146	32,292
Tier 3 (110,001–180,000 GT)	32,292	64,584

FEE SCHEDULE FOR EACH VESSEL SIZE—Continued

Vessel size (GT ¹)	Operational inspection ² fee (US\$)	Construction and renovation inspection ³ fee (US\$)
Tier 4 (>180,001 GT)	64,584	129,168

¹ Gross tonnage in cubic feet, as shown in *Lloyd's Register of Shipping* (<https://www.lr.org/en/>).

² Operations inspections and re-inspections involve the same procedures and require the same amount of time, so they are charged at the same rates.

³ Construction and renovation inspections require at least twice the amount of time as operations inspections, so they are charged double the rates.

[FR Doc. 2024–21786 Filed 9–20–24; 8:45 am]
 BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–10170 and CMS–10156]

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 October 23, 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:* Revision of a currently approved collection; *Title of Information Collection:* Retiree Drug Subsidy Payment Request and Instructions; *Use:* Under the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 and implementing regulations at 42 CFR part

423 subpart R plan sponsors (*e.g.*, employers, unions) who offer prescription drug coverage meeting specified criteria to their qualified covered retirees are eligible to receive a 28% subsidy for allowable drug costs, through the Retiree Drug Subsidy (RDS) Program. Section 423.886 describes the payment methods, including the provision of necessary information. The information provided in the payment request provides CMS with the information needed to pay RDS sponsors the subsidy.

The application process for the RDS is a completely electronic process (100%). The basis for the decision for adopting this means of collection was to maximize efficiency. The only instance when hard copy/paper applications can be submitted is when the RDS Center is experiencing technical difficulties. The Plan Sponsor completes and submits the RDS application (including the Plan Sponsor’s Authorized Representative’s electronic signature) on-line, via the secure RDS Secure website, which is accessed at <https://www.rds.cms.hhs.gov>. *Form Number:* CMS–10170 (OMB control number: 0938–0977); *Frequency:* Yearly; *Affected Public:* Private; Business or other for-profits, and Not-for Profits; *Number of Respondents:* 1,245; *Number of Responses:* 1,245; *Total Annual Hours:* 187,995. (For questions regarding this collection, contact Ivan Iveljic at 410–786–3312 or Ivan.iveljic@cms.hhs.gov.)

2. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Retiree Drug Subsidy (RDS) Application and Instructions; *Use:* Under § 1860D–22 of the Social Security Act (Act), added by the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) and implementing regulations at 42 CFR part 423 subpart R, Plan Sponsors (*e.g.*, employers or unions) who offer prescription drug coverage to their qualified covered retirees are eligible to receive a 28% subsidy for allowable drug costs.