PURPOSE (S) OF THE MATCHING PROGRAM:

The purpose of this matching program is to reduce improper payments by authorizing Fiscal Service to provide CMS, through the U.S. Department of the Treasury's Working System as defined by OMB Memorandum M–13–20 (Protecting Privacy while Reducing Improper Payments with the Do Not Pay Initiative), identifying information from Fiscal Service's SOR Treasury/Fiscal Service .023 about individuals and entities excluded from receiving federal payments, contract awards, and other benefits. The information resulting from this matching program will be provided to CMS for use in determining whether an individual or entity is eligible to receive federal payments, contract awards, or other benefits. The CMS Center for Program Integrity intends to use information resulting from this matching program in a variety of activities related to the enrollment of healthcare professionals, to check payments made to providers and physicians, to verify that providers submitting claims are not deceased, and to collect debts owed to federal or state governments.

Using a CMP for this purpose eliminates the need for each payment, procurement and benefit program to execute several Memoranda of Agreements with multiple federal agencies, provides access to up-to-date information, and avoids the need to manually compare files.

DESCRIPTION OF RECORDS TO BE USED IN THE MATCHING PROGRAM:

The matching program will be conducted with data maintained by CMS in the "Provider Enrollment, Chain, and Ownership System (PECOS)," System No. 09–70–0532, established at 66 FR 51961 (October 11, 2001). PECOS routine use number 2 will allow PECOS data to be disclosed to

Fiscal Service to assist Fiscal Service in contributing to the accuracy of CMS Medicare benefit payments. PECOS routine use number 1 will allow match results data that PECOS obtains from Treasury's Working System to be disclosed to CMS contractors, consultants, and grantees assisting CMS with PECOS purposes.

Fiscal Service will provide CMS with information comprised of match results originating from the matching activities between CMS SOR data and Fiscal Service's Treasury/Fiscal Service .023, as published at 78 **Federal Register** (FR), 73923, December 9, 2013. Fiscal Service data will be used in matching activities and match results released to CMS via Treasury's Working System. Routine use A allows the Fiscal Service to disclose information to CMS in identifying, preventing, or recouping improper payments.

INCLUSIVE DATES OF THE MATCH:

The CMP shall become effective no sooner than 40 days after the report of the matching program is sent to OMB and Congress, or 30 days after publication in the **Federal Register**, whichever is later. The matching program shall be valid for a period of less than 3 years from the effective date and may be extended for not more than 3 years thereafter, if certain conditions are met.

[FR Doc. 2014–21240 Filed 9–5–14; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Information Comparison with Insurance Data

OMB No.: 0970–0342.

Description: The Insurance Match program is a cooperative effort between state child support agencies, insurers, and the federal Office of Child Support Enforcement (OCSE). Using an efficient, secure, and cost effective automated matching process, OCSE works with participating insurers to help state child support agencies collect past-due support for families by comparing information maintained in the OCSE Debtor File pertaining to delinquent noncustodial parents to information pertaining to individuals eligible to receive a payment from an insurance claim, settlement, award, or payment. State child support agency and insurer participation in the Insurance Match program is voluntary.

The information collection activities associated with the Insurance Match program are authorized by: 42 U.S.C. 652(l) (to be redesignated (m)) which authorizes the Secretary of the U.S. Department of Health and Human Services through the Federal Parent Locator Service (FPLS), to conduct comparisons of information concerning individuals owing past-due child support with information maintained by insurers (or their agents) concerning insurance claims, settlements, awards and payments.

Respondents: Insurers or their agents, state agencies administering workers' compensation programs, and the Insurance Services Office (ISO).

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Insurance Match File	28	12	0.5	168

Estimated Total Annual Burden Hours: 168.

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 370 L'Enfant Promenade SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be

identified by the title of the information collection. Email address: *infocollection@acf.hhs.gov.*

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it

within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Fax: 202–395–7285, Email: *OIRA_SUBMISSION@ OMB.EOP.GOV,* Attn: Desk Officer for

the Administration for Children and Families.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2014–21318 Filed 9–5–14; 8:45 am]

BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Public Comment Request

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice.

SUMMARY: In compliance with the requirement for opportunity for public comment on proposed data collection projects (Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995), the Health Resources and Services Administration (HRSA) announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on this Information Collection Request must be received within 60 days of this notice.

ADDRESSES: Submit your comments to *paperwork@hrsa.gov* or mail the HRSA Information Collection Clearance Officer, Room 10–29, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email *paperwork@hrsa.gov* or call the HRSA Information Collection Clearance Officer at (301) 443–1984.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the information request collection title for reference.

Information Collection Request Title: Data System for Organ Procurement and Transplantation Network

OMB No.: 0915–0157—Revision

Abstract: Section 372 of the Public Health Service (PHS) Act requires that the Secretary, by contract, provide for the establishment and operation of an Organ Procurement and Transplantation Network (OPTN). This is a request for revisions to current OPTN data collection forms associated with donor organ procurement and an individual's clinical characteristics at the time of registration, transplant, and follow-up after the transplant. Data for the OPTN data system are collected from transplant hospitals, organ procurement organizations, and tissue-typing laboratories. The information is used to indicate the disease severity of transplant candidates, to monitor compliance of member organizations with OPTN rules and requirements, and to report periodically on the clinical and scientific status of organ donation and transplantation in this country. Data are used to develop transplant, donation, and allocation policies, to determine whether institutional members are complying with policy, to determine member-specific performance, to ensure patient safety and to fulfill the requirements of the OPTN Final Rule. The practical utility of the data collection is further enhanced by requirements that the OPTN data must be made available, consistent with applicable laws, for use by OPTN members, the Scientific Registry of Transplant Recipients, the Department of Health and Human Services, and members of the public for evaluation, research, patient information, and other important purposes.

Likely Respondents: Transplant programs, organ procurement organizations, histocompatibility laboratories, medical and scientific organizations, and public organizations.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to: review instructions; develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; train personnel to respond to a request for collection of information; search data sources; complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this Information Collection Request are summarized in the table below.

Section/activity	Number of respondents	Average number of responses per respondent	Total number of responses	Average burden per response (in hours)	Total burden hours
Deceased Donor Registration	58	158.2	9174	1.1	10091.4
Living Donor Registration	290	20.6	5984	1.8	10771.2
Living Donor Follow-up	290	60.7	17610	1.3	22893.0
Donor Histocompatibility	151	96.7	14598	0.2	2919.6
Recipient Histocompatibility	151	173.5	26199	0.4	10479.6
Heart Candidate Registration	131	30.5	3991	0.9	3591.9
Heart Recipient Registration	131	19.3	2525	1.4	3535.0
Heart Follow Up (6 Month)	131	17.0	2229	0.4	891.6
Heart Follow Up (1–5 Year)	131	73.9	9683	0.9	8714.7
Heart Follow Up (Post 5 Year)	131	115.2	15091	0.5	7545.5
Heart Post-Transplant Malignancy Form	131	11.0	1447	0.9	1302.3
Lung Candidate Registration	64	39.6	2534	0.9	2280.6
Lung Recipient Registration	64	30.0	1923	1.4	2692.2
Lung Follow Up (6 Month)	64	26.2	1677	0.5	838.5
Lung Follow Up (1–5 Year)	64	99.4	6364	1.1	7000.4
Lung Follow Up (Post 5 Year)	64	65.6	4201	0.6	2520.6
Lung Post-Transplant Malignancy Form	64	1.5	99	0.4	39.6
Heart/Lung Candidate Registration	63	0.7	46	1.1	50.6
Heart/Lung Recipient Registration	63	0.3	21	1.4	29.4
Heart/Lung Follow Up (6 Month)	63	0.3	20	0.8	16
Heart/Lung Follow Up (1–5 Year)	63	1.5	97	1.1	106.7
Heart/Lung Follow Up (Post 5 Year)	63	3.1	194	0.6	116.4