for comments and other submissions from members of the public is to make these submissions available for public viewing on the internet at <a href="http://www.regulations.gov">http://www.regulations.gov</a> as they are received without change, including any personal identifiers or contact information.

DOD Clearance Officer: Mr. Frederick Licari.

Requests for copies of the information collection proposal should be sent to Mr. Licari at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil.

Dated: December 20, 2018.

# Shelly E. Finke,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. 2018–28036 Filed 12–26–18; 8:45 am]

BILLING CODE 5001-06-P

# **DEPARTMENT OF DEFENSE**

# Office of the Secretary

[Docket ID: DOD-2018-HA-0080]

# Submission for OMB Review; Comment Request

**AGENCY:** Office of the Assistant Secretary of Defense for Health Affairs, DoD

**ACTION:** 30-day information collection notice.

**SUMMARY:** The Department of Defense has submitted to OMB for clearance the following proposal for collection of information under the provisions of the Paperwork Reduction Act.

**DATES:** Consideration will be given to all comments received by January 28, 2019.

ADDRESSES: Comments and recommendations on the proposed information collection should be emailed to Ms. Cortney Higgins, DoD Desk Officer, at oira\_submission@omb.eop.gov. Please identify the proposed information collection by DoD Desk Officer, Docket ID number, and title of the information collection.

FOR FURTHER INFORMATION CONTACT: Fred Licari, 571–372–0493, or whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil.

# SUPPLEMENTARY INFORMATION:

Title; Associated Form; and OMB Number: Diagnosis Related Groups (DRG) Reimbursement Two Parts; OMB Control Number 0720–0017.

Type of Request: Revision.
Number of Respondents: 5,600.
Responses per Respondent: 1.
Annual Responses: 5,600.
Average Burden per Response: 1 hour.
Annual Burden Hours: 5,600.
Needs and Uses: This information
collection is in conjunction with a

notice of proposed collection. The Department of Defense Authorization Act. 1984, P.L. 98-94 amended Title 10. section 1079(j)(2)(A) of the U.S.C. and provided the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) with the statutory authority to reimburse institutional providers based on diagnosis-related groups (DRGs). The TRICARE/ CHAMPUS DRG-based payment system is modeled on the Medicare Prospective Payment System (PPS) and was implemented on October 1, 1987. The TRICARE/CHAMPUS DRG-based payments apply only to hospital's operating costs and do not include any amounts for hospitals' capital or direct medical education costs. Any hospital subject to the DRG-based payment system, except for children's hospitals (whose capital and direct medical education costs are incorporated in the children's hospital differential), who want to be reimbursed for allowed capital and direct medical education costs must submit a request for payment to the TRICARE/CHAMPUS contractor. The request allows TRICARE to collect the information necessary to properly reimburse hospitals for its share of these

Affected Public: Individuals or households.

Frequency: On occasion.

Respondent's Obligation: Voluntary.

*OMB Desk Officer:* Ms. Cortney Higgins.

You may also submit comments and recommendations, identified by Docket ID number and title, by the following method:

• Federal eRulemaking Portal: http://www.regulations.gov. Follow the instructions for submitting comments.

Instructions: All submissions received must include the agency name, Docket ID number, and title for this **Federal Register** document. The general policy for comments and other submissions from members of the public is to make these submissions available for public viewing on the internet at <a href="http://www.regulations.gov">http://www.regulations.gov</a> as they are received without change, including any personal identifiers or contact information.

DOD Clearance Officer: Mr. Frederick Licari.

Requests for copies of the information collection proposal should be sent to Mr. Licari at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil.

Dated: December 20, 2018.

#### Shelly E. Finke,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. 2018–28034 Filed 12–26–18; 8:45 am]

BILLING CODE 5001-06-P

# **DEPARTMENT OF DEFENSE**

# Office of the Secretary

[Docket ID: DOD-2018-HA-0081]

# Submission for OMB Review; Comment Request

**AGENCY:** The Office of the Assistant Secretary of Defense for Health Affairs, DoD.

**ACTION:** 30-day information collection notice.

**SUMMARY:** The Department of Defense has submitted to OMB for clearance the following proposal for collection of information under the provisions of the Paperwork Reduction Act.

**DATES:** Consideration will be given to all comments received by January 28, 2019.

ADDRESSES: Comments and recommendations on the proposed information collection should be emailed to Ms. Cortney Higgins, DoD Desk Officer, at oira\_submission@omb.eop.gov. Please identify the proposed information collection by DoD Desk Officer, Docket ID number, and title of the information collection.

FOR FURTHER INFORMATION CONTACT: Fred Licari, 571–372–0493, or whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil.

#### SUPPLEMENTARY INFORMATION:

Title; Associated Form; and OMB Number: Defense Medical Human Resources System internet; OMB Control Number 0720–0041.

Type of Request: Revision.
Number of Respondents: 89,250.
Responses per Respondent: 1.
Annual Responses: 89,250.
Average Burden per Response: 7.5

Annual Burden Hours: 11,156.25.

Needs and Uses: The DoD is required to provide and account for personnel, medical training and readiness and to establish a Joint strategy to justify Medical Resources for Readiness and Peacetime Care. In response, the Assistant Secretary of Defense, HA/TMA and the Service Surgeon Generals of the Army, Navy and Air Force approved development of a single Joint electronic database to provide visibility of and to support the preparedness of all Military Healthcare System (MHS) medical personnel (to meet national