

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

[OMB #0970-0466]

**Submission for OMB Review; Information Collection Activity; Initial Medical Exam Form and Dental Exam Form**

**AGENCY:** Office of Refugee Resettlement, Administration for Children and Families, HHS.

**ACTION:** Request for public comment.

**SUMMARY:** The Office of Refugee Resettlement (ORR), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is requesting to continue the data collection approved by the Office of Management and Budget (OMB) under expedited review.

**DATES:** *Comments due within 30 days of publication.* 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.

**ADDRESSES:** Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Email: *OIRA\_SUBMISSION@OMB.EOP.GOV*, Attn: Desk Officer for the Administration for Children and Families.

Copies of the proposed collection may be obtained by emailing *infocollection@acf.hhs.gov*. Alternatively, copies can also be obtained by writing to the Administration for Children and Families, Office of Planning, Research,

and Evaluation, 330 C Street SW, Washington, DC 20201, Attn: ACF Reports Clearance Officer. All requests, emailed or written, should be identified by the title of the information collection.

**SUPPLEMENTARY INFORMATION:**

*Description:* ACF was granted a 180-day approval by OMB to collect information about instances of COVID-19. A request for review under normal procedures will now be submitted to continue collection of this information as part of the information collection under OMB #0970-0466.

*Respondents:* Healthcare providers (Pediatricians and Dentists) and ORR Grantee Staff.

*Annual Burden Estimates:*

**Estimated Opportunity Costs for Respondents**

*Pediatricians, General*

Information collection title	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
Initial Medical Exam Form (excluding Appendix A: Supplemental TB Screening Form) .....	195	271	0.22	34,878	11,626

*Estimated Annual Burden Total:* ORR Grantee Staff  
11,626.

Information collection title	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
Appendix A: Supplemental TB Screening Form .....	195	271	0.05	7,926	2,642

*Estimated Annual Burden Total:* Dentists  
2,642.

Information collection title	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
Dental Exam Form .....	195	46	0.08	2,154	718

*Estimated Annual Burden Total:* 718. **Estimated Recordkeeping Costs**

**Estimated Recordkeeping Costs**

ORR Grantee Staff

ORR Grantee Staff

Information collection title	Annual number of respondents	Annual number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
Initial Medical Exam Form (including Appendix A: Supplemental TB Screening Form) .....	195	271	0.33	52,317	17,439
Dental Exam Form .....	195	46	0.17	4,575	1,525

*Estimated Annual Burden Total:* 18,964.  
**Authority:** 6 U.S.C. 279; Exhibit 1, part A.2 of the Flores Settlement Agreement (*Jenny Lisette Flores, et al., v. Janet Reno, Attorney General of the United States, et al.*, Case No. CV 85–4544–RJK [C.D. Cal. 1996]).

**John M. Sweet, Jr.,**  
*ACF/OPRE Certifying Officer.*  
 [FR Doc. 2020–21265 Filed 9–25–20; 8:45 am]  
**BILLING CODE 4184–45–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Application Requirements for the Low Income Home Energy Assistance Program (LIHEAP) Model Plan Application (OMB #0970–0075)**

**AGENCY:** Office of Community Services, Administration for Children and Families, HHS.

**ACTION:** Request for public comment.

**SUMMARY:** The Office of Community Services (OCS), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is requesting a 3-year extension of the form OCS–0024: Low Income Home Energy Assistance Program (LIHEAP) Model Plan Application (OMB #0970–0075, expiration 09/30/2020). There are no changes requested to the form.  
**DATES:** *Comments due within 30 days of publication.* OMB must make a decision about 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.  
**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](http://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.

**SUPPLEMENTARY INFORMATION:**  
*Description:* States, including the District of Columbia, tribes, tribal organizations, and U.S. territories applying for LIHEAP block grant funds must, prior to receiving federal funds, submit an annual application (Model Plan, ACF–122) that meets the LIHEAP statutory and regulatory requirements. In addition to the Model Plan, grantees are also required to complete the Mandatory Grant Application, SF–424—Mandatory, which is included as the first section of the Model Plan.  
 The LIHEAP Model Plan is an electronic form and is submitted to OCS/ACF through the On-line Data Collection (OLDC) system within GrantSolutions, which is currently being used by all LIHEAP grantees to submit other required LIHEAP reporting forms. In order to reduce the reporting burden, all data entries from each grantee’s prior year’s submission of the Model Plan in OLDC are saved and re-populated into the form for the following fiscal year’s application.  
*Respondents:* States, the District of Columbia, U.S. territories, and tribal governments.

**ANNUAL BURDEN ESTIMATES**

Instrument	Total annual number of respondents	Total annual number of responses per respondent	Average burden hours per response	Total annual burden hours
LIHEAP Detailed Model Plan .....	210	1	.50	105

*Estimated Total Annual Burden Hours:* 105.  
**Authority:** 42 U.S.C. 8621.  
**John M. Sweet Jr.,**  
*ACF/OPRE Certifying Officer.*  
 [FR Doc. 2020–21267 Filed 9–25–20; 8:45 am]  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Information Collection Activity; Health Assessment Form, Public Health Investigation Form: Non-TB Illness, and Public Health Investigation Form: Active TB (OMB #0970–0509)**

**AGENCY:** Office of Refugee Resettlement, Administration for Children and Families, HHS.

**ACTION:** Request for public comment.

**SUMMARY:** The Office of Refugee Resettlement (ORR), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is requesting to continue the data collection approved by the Office of Management and Budget (OMB) under expedited review.  
**DATES:** *Comments due within 30 days of publication.* 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.  
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Copies of the proposed collection may be obtained by emailing [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). Alternatively, copies can also be obtained by writing to the Administration for Children and Families, Office of Planning, Research, and Evaluation, 330 C Street SW, Washington, DC 20201, Attn: ACF Reports Clearance Officer. All requests, emailed or written, should be identified by the title of the information collection.  
**SUPPLEMENTARY INFORMATION:**  
*Description:* ACF was granted a 180-day approval by OMB to collect information about instances of COVID–19. A request for review under normal procedures will now be submitted to continue collection of this information as part of the information collection under OMB #0970–0509.  
*Respondents:* Healthcare providers (Pediatricians) and ORR Grantee Staff.  
*Annual Burden Estimates:*  
*Estimated Opportunity Costs for Respondents:*