

	Number of responses	Hours per response	Annual burden per grantee	Total annual burden hours
Work-Based System	56	1.428	80	4,480
Performance Measurement	3,242	0.01666	54	3,024
Customer Satisfaction	3,242	0.01666	54	3,024
Subtotal			188	10,528
Program Support	56	4	208	11,648
Record Keeping Burden	56	0.14286	8	448
Subtotal			216	12,096
Total			404	22,624

Dated: September 17, 2020.

Mary Lazare,

Principal Deputy Administrator.

[FR Doc. 2020-21294 Filed 9-25-20; 8:45 am]

BILLING CODE 4154-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

[OMB #0985-0040]

Agency Information Collection Activities; Submission for OMB Review; Public Comment Request; State Health Insurance Assistance Program (SHIP) Data Performance Reports and Information Collection Tools

AGENCY: Administration for Community Living, HHS.

ACTION: Notice.

SUMMARY: The Administration for Community Living is announcing that the proposed collection of information listed above has been submitted to the Office of Management and Budget (OMB) for review and clearance as required under section 506(c)(2)(A) of the Paperwork Reduction Act of 1995. This 30-Day notice collects comments on the information collection requirements related to the modification and use of the Data Performance Reports and Information Collection tools for the State Health Insurance Assistance Program (SHIP) under OMB 0985-0040 that expires September 30, 2020

DATES: Submit written comments on the collection of information by 11:59 p.m. (EST) or postmarked by October 28, 2020.

ADDRESSES: Submit written comments on the collection of information by:

(a) *Email to:* OIRA_submission@omb.eop.gov, Attn: OMB Desk Officer for ACL;

(b) *fax to:* 202.395.5806, Attn: OMB Desk Officer for ACL; or

(c) by mail to the Office of Information and Regulatory Affairs, OMB, New Executive Office Bldg., 725 17th St. NW, Rm. 10235, Washington, DC 20503, Attn: OMB Desk Officer for ACL.

FOR FURTHER INFORMATION CONTACT: Rebecca Kinney, Office of Healthcare Information and Counseling (OHIC), Administration for Community Living, Washington, DC 20201, Phone: 202-795-7397 Email: Rebecca.Kinney@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: In compliance with 44 U.S.C. 3507, ACL has submitted the following proposed collection of information to OMB for review and clearance.

The purpose of this data collection is to collect performance data from grantees, grantee team members, and partners. Congress requires this data collection for program monitoring and Government Performance Results Act (GPRA) purposes. This data collection allows the Administration for Community Living (ACL) and the Center for Innovation and Partnership (CIP) to communicate with Congress and the public on the State Health Insurance Assistance Program (SHIP), the Senior Medicare Patrol (SMP) program, the Medicare Improvements for Patients & Providers Act (MIPPA) program, and Aging and Disability Resource Centers (ADRC) activities. In addition to the SHIP Data Performance Reports and Information Collection (OMB #0985-0040), this revision incorporates the expired SMP Report collection (OMB #0985-0024) and the ADRC collection (OMB #0985-0062) into one tool.

The SHIP, SMP, MIPPA, and ADRC programs are located in each of the 50 states, the District of Columbia, Puerto Rico, Guam and the U.S. Virgin Islands. In order to ensure that grantees report activity accurately and consistently it is imperative that these data collection tools remain active.

The respondents for this data collection are grantees, grantee team members, and partners who meet with Medicare beneficiaries and older adults in-group settings and in one-on-one sessions to educate them on Medicare enrollment, Medicare benefits and subsidy programs, the importance of being aware of Medicare fraud, errors and abuse, and having the knowledge to protect the Medicare system.

ACL is proposing to combine these three collection tools to reduce burden on the grantees, grantee team members, and partners as many of the individuals working on these programs, collecting information, and reporting results are the same at the local level. Combining these tools will reduce the need for duplicate or triplicate reporting of activities in separate tools further reducing the time and effort in reporting outcomes and activities. In addition, this combination will allow clarification on when, where, and how services are being delivered across these ACL programs further informing performance outcomes.

SHIP and MIPPA Data Collection (OMB #0985-0040)

Section 4360(f) of OBRA 1990 created the State Health Insurance Assistance Program (SHIP) and requires the Secretary to provide a series of reports to the U.S. Congress on the performance of the SHIP program annually. The law also requires ACL to report on the program's impact on beneficiaries and to obtain important feedback from beneficiaries.

This tool captures the information and data necessary for ACL to meet these Congressional requirements, as well as, grantee performance data providing ACL essential insight for monitoring and technical assistance purposes.

In addition, the Medicare Improvements for Patients and Providers Act (MIPPA), initially passed in 2008, provided targeted funding for

the SHIPs, Area Agencies on Aging (AAAs), and Aging and Disability Resource Centers (ADRC) to conduct enrollment assistance to Medicare beneficiaries for the Low Income Subsidy (LIS) and Medicare Savings Program (MSP). This tool also collects performance and outcome data on the MIPPA Program providing ACL necessary information for monitoring and oversight.

SMP Data Collection (OMB #0985–0024)

Under Public Law 104–208, the Omnibus Consolidated Appropriations Act of 1997, Congress established the Senior Medicare Patrol Projects in order to further curb losses to the Medicare program. The Senate Committee noted that retired professionals, with appropriate training, could serve as educators and resources to assist Medicare beneficiaries and others to detect and report errors, fraud and abuse.

Among other requirements, it directed the ACL to work with the Office of Inspector General (OIG) and the Government Accountability Office

(GAO), to assess the performance of the program. The ACL employs this tool to collect performance and outcome data on the SMP Program necessary information for monitoring and oversight. ACL has shared this data and worked with HHS/OIG to develop SMP performance measures.

The HHS/OIG has collected SMP performance data and issued SMP performance reports since 1997. The information from the current collection is reported by the OIG to Congress and the public. This information is also used by ACL as the primary method for monitoring the SMP Projects.

ADRC Data Collection (OMB #0985–0062)

The Aging and Disability Resource Center (ADRC) collects data for the No Wrong Door (NWD) System initiative. This tool seeks to connect fragmentation in the network, ease administrative reporting burden, and further support the need for early community-based interventions.

ACL uses this tool to collect performance and outcome data necessary for monitoring and oversight.

Additionally, this collection supports states in better coordinating and integrating their existing long-term services and supports (LTSS) access functions to develop a new interface that would make it easier for people to learn about and quickly access options that meet their needs. These programs operate throughout the United States and represent a nationally recognized network.

Comments in Response to the 60-Day Federal Register Notice

ACL published both a 60-day and 30-day **Federal Register** Notice in the **Federal Register** soliciting public comments on this revision request. The 60-day FRN published on December 30, 2019, Volume 84, Number 249, pages 71954–71956; ACL received seventeen comments in response to the request for comments for the Proposed Collection of data through the OHIC Data System. ACL reviewed all of the comments. Most of the comments were proposed additions to the topics discussed on the various forms. ACL discussed the comments and included additions where it was deemed necessary.

BENEFICIARY CONTACT FORM COMMENTS & RESPONSES

Topic/issue	Public comment	ACL response
Beneficiary Demographics	Please add veteran status to track possible eligibility for benefits.	ACL added a new question to the Beneficiary Contact Form to capture veteran status.
Topics Discussed/Original Medicare	Please add Accountable Care Organizations ..	ACL added “Accountable Care Organizations (ACOs)”.
	Add Part B conditional enrollment	ACL added “Conditional Enrollment”.
	Include something to track equitable relief	ACL added “Equitable Relief”.
	Please include late enrollment penalties	ACL added “Late Enrollment Penalty” to the Original Medicare Topics Discussed field and the Medicare Part D Topics Discussed field.
	Please include something to track issues with provider participation to the form.	ACL added “Provider Participation” to the Original Medicare Topics Discussed field, “Provider Network” to the Medicare Advantage Topics Discussed, “Pharmacy Network” to Medicare Part D Topics Discussed, and “Provider Participation” to the Medicaid Topics Discussed field.
Topics Discussed/Medigap	Include application assistance for Medigap plans.	ACL added “Application Assistance”.
	Please include a way to track Medigap complaints and guaranteed issue right issues.	ACL added “Complaints” and “Guaranteed Issue Rights”.
Topics Discussed/Medicare Advantage (MA and MA–PD).	Add Special Needs Plans to the form	ACL added “Chronic Condition Special Needs Plans”, “Dual Eligible Special Needs Plans”, and “Institutional Special Needs Plans”.
	Include the new benefits for MA plans	ACL added “Supplemental Benefits (please explain)”.
	Include Integrated Care on the Beneficiary Contact Form.	ACL did not include this item because it is included in more detailed Topics Discussed captured throughout the form.
Topics Discussed/Other Prescription Assistance	Add a way to track prescription discount cards	ACL added “Prescription Discount Cards”.
Topics Discussed/Medicaid	Add MSP Application Submission	ACL deleted “Application Submission” from the Medicaid Topics Discussed field and added “Medicaid Application Submission”, “MSP Application Submission”, and “Medicaid Spend Down” to differentiate between the actions.

BENEFICIARY CONTACT FORM COMMENTS & RESPONSES—Continued

Topic/issue	Public comment	ACL response
Topics Discussed/Additional Topic Details	Add Appeals to the Medicaid section	ACL added “Appeals/Grievances” and “QMB Improper Billing”.
	Please include a way to track issues with Medicaid Expansion and Marketplace transitions to Medicare.	ACL added “Medicaid Expansion (ACA) Transitions to Medicare” to the Medicaid Topics Discussed field and “Marketplace Transition to Medicare” to the Other Insurance Topics Discussed field.
	Include a way to track MSP recertification	ACL added “Medicaid Recertification” and “MSP Recertification”.
	Add PACE	ACL added “Program of All-Inclusive Care for the Elderly (PACE)”.
	Please add an easy way to track COVID–19 issues.	ACL added “COVID–19”.
	Add a way to track issues with common benefits such as transportation and home health care.	ACL added “ESRD”, “Mail Order Prescription”, “Mental Health”, “Opioids”, “Physical Therapy”, “Telehealth”, and “Transportation”.
	Add HSAs	ACL added “Health Savings Accounts”.
	Add a way to track IRMA questions	ACL added “Income Related Monthly Adjustment Amount”.
	Please find a way to track assistance with setting up and assisting with MyMedicare accounts.	ACL added “MyMedicare.gov Account”.
	Add Behavioral Health as a topic	ACL did not add this as it is encompassed by “Mental Health”.
Add Pooled Trusts	ACL did not add as it is not within the SHIP scope of work.	
Add the following benefits: SNAP, LIHEAP, SSI, SSDI, Tax Benefits, Veterans Benefits, Housing, Subsidies, Lifeline, Public Assistance, Unemployment Assistance, Subsidized Transit Benefits, Other food Benefits, Other home benefits.	ACL did not add these benefits as it is not within the SHIP scope of work.	

The proposed data collection tools may be found on the ACL website for

review at <https://www.acl.gov/about-acl/public-input>.

Estimated Program Burden: ACL estimates the burden associated with

this collection of information as follows: The burden hours are based on the number of projects for ACL grantees.

Grantee respondent type	Form/report name	Number of respondents	Number of responses per respondent	Average burden per response (in minutes)	Total burden hours
SMP	Media Outreach & Education	216	46	2	662.4
SMP	Group Outreach & Education	6,935	4	4	1,849.33
SMP	Individual Interaction	6,935	41	5	23,694.58
SMP	Team Member	216	31	5	558
SMP	SMP Team Member Activity	216	31	5	558
SMP	SMP Interaction	6,935	2	5	1,155.83
SMP	SMP Subject	3,500	5	5	1,458.33
SMP	OIG Report	0	0	0	0
SMP	Time Spent Report	0	0	0	0
SHIP/MIPPA	Media Outreach & Education	3,750	15	15	14,062.50
SHIP/MIPPA	Group Outreach & Education	3,750	15	4	3,750
SHIP/MIPPA	SHIP Team Member	216	75	5	1,350
SHIP/MIPPA	Beneficiary Contact	15,000	233	5	291,250
SHIP/MIPPA	Training	216	75	15	4,050
SHIP/MIPPA	SHIP Performance Report	0	0	0	0
SHIP/MIPPA	Resource Report	0	0	0	0
SHIP/MIPPA	MIPPA Performance Report	0	0	0	0
SHIP/MIPPA	SHIP Team Member Activity	216	40	7	1,008
SHIP/MIPPA	SHIP Training	216	5	4	72
SHIP/SMP/MIPPA ..	Summary Reports	0	0	0	0
SHIP/MIPPA	Part D Enrollment Outcomes Report	0	0	0	0
Totals	48,317	618	335,166.47

Dated: September 17, 2020.

Mary Lazare,

Principal Deputy Administrator.

[FR Doc. 2020-21293 Filed 9-25-20; 8:45 am]

BILLING CODE 4154-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

[OMB #0985-0039]

Agency Information Collection Activities; Proposed Collection; Comment Request; Prevention and Public Health Fund Evidence-Based Falls Prevention Program Information Collection

AGENCY: Administration for Community Living, HHS.

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of information listed above. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish a notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice.

This notice solicits comments on the Proposed Extension with minor changes and solicits comments on the information collection requirements related to Prevention and Public Health Funds Evidence-Based Falls Prevention Program Information Collection.

DATES: Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by November 27, 2020.

ADDRESSES: Submit electronic comments on the collection of information to: Shannon Skowronski. Submit written comments on the collection of information to Administration for Community Living, Washington, DC 20201, Attention: Shannon Skowronski.

FOR FURTHER INFORMATION CONTACT: Shannon Skowronski, Administration for Community Living, Washington, DC 20201, Shannon Skowronski, 202-795-7438, *shannon.skowronski@acl.hhs.gov*.

SUPPLEMENTARY INFORMATION: Under the 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. "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 provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, ACL is publishing a notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, ACL invites comments on our burden estimates or any other aspect of this collection of information, including:

- (1) Whether the proposed collection of information is necessary for the proper performance of ACL's functions, including whether the information will have practical utility;
- (2) the accuracy of ACL's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used to determine burden estimates;
- (3) ways to enhance the quality, utility, and clarity of the information to be collected; and
- (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques when appropriate, and other forms of information technology. The Evidence-Based Falls Prevention Grant Program is financed through the Prevention and Public Health Fund (PPHF), most recently with FY 2020 PPHF funds. The

statutory authority for these cooperative is contained in Continuing Appropriations Act, 2020 and Health Extenders Act of 2019, Public Law 116-59; the Older Americans Act (OAA) (Section 411); and the Patient Protection and Affordable Care Act, 42 U.S.C. 300u-11 (Prevention and Public Health Fund).

The Evidence-Based Falls Prevention Program supports a national resource center and awards competitive grants to implement and promote the sustainability of evidence-based community programs that have been proven to reduce the falls incidence and risk among for older adults. OMB approval of the existing set of Falls Prevention data collection tools (OMB Control Number, 0985-0039) expires on 03/31/2021. This data collection continues to be necessary for monitoring program operations and outcomes.

ACL/AoA proposes to use the following tools: (1) Semi-annual performance reports to monitor grantee progress; (2) a Host/Implementation Organization Information Form to record location of agencies that sponsor programs that will allow mapping of the delivery infrastructure; and (3) a set of tools used to collect information at each program completed by the program leaders (Program Information Cover Sheet and Attendance Log), a Participant Information Form to be completed by all participants, and a Post Program Survey to be completed by a random sample of participants.

ACL/AoA intends to continue using an online data entry system for the program and participant survey data.

Minor changes are being proposed to the currently approved tools. All changes proposed are based on feedback from a focus group that included a subset of current grantees and consultation with subject-matter experts.

The proposed data collection tools may be found on the ACL website for review at <https://www.acl.gov/about-acl/public-input>.

Estimated Program Burden: ACL estimates the burden associated with this collection of information as follows:

Respondent/data collection activity	Number of respondents	Responses per respondent	Hours per response	Annual burden hours
Project staff, Semi-annual Performance Report	20	Twice a year	8	320
Local agency leaders Program Information Cover Sheet/Participant Information Form/Attendance Log/Post Local data entry staff Program Survey.	436 leaders	Twice a year (one set per program).	.50	436
	40 data entry staff.	Once per program × 872 programs.	.50	436
Local organization staff and local database entry staff Host Organization Data Form.	436 staff	105	22
Program participants Participant Information Form	10,455	110	1,046