

paying for private health insurance coverage, under provisions of the Patient Protection and Affordable Care Act. In this matching program, OPM provides CMS with monthly data identifying each active federal employee's status as enrolled in or eligible for coverage under an OPM Health Benefit Plan, and an annual premium spread index file identifying the lowest premium available to a federal employee in each of 32 premium localities. CMS and AEs use the OPM data to verify whether an individual who is applying for or is enrolled in private health insurance coverage under a qualified health plan through a federally-facilitated or state-based health insurance exchange is eligible for coverage under an OPM health benefit plan, for the purpose of determining if the individual is eligible for financial assistance (including an advance tax credit and cost sharing reduction, which are types of insurance affordability programs) in paying for the private coverage. OPM health benefit plans provide minimum essential coverage, and eligibility for such plans precludes eligibility for financial assistance in paying for private coverage.

#### Categories of Individuals

The categories of individuals whose information is involved in the matching program are:

- Active federal employees; and
- Consumers who apply for or are enrolled in a qualified health plan through an exchange established under the Patient Protection and Affordable Care Act and receive determinations of eligibility for insurance affordability programs.

#### Categories of Records

The categories of records used in the matching program are identity information about the above consumers, which are maintained by CMS, and identity information and minimum essential coverage period records about all active federal employees, and annual premium information, maintained by OPM. The data elements provided to CMS by OPM are as follows:

- Monthly status file:
  - a. Record type;
  - b. Record number;
  - c. Unique person ID;
  - d. Social security number;
  - e. Last name;
  - f. Middle name;
  - g. First name;
  - h. Last name suffix;
  - i. Gender;
  - j. Date of birth; and
  - k. Health plan code.
- Annual Premium Spread Index File:

- a. State;
- b. Plan;
- c. Option;
- d. Enrollment code;
- e. Current total bi-weekly premium;
- f. Future total bi-weekly premium;
- g. Future government pays bi-weekly premium;
- h. Future employee pays bi-weekly premium;
- i. Future change in employee payment bi-weekly premium;
- j. Current total monthly premium;
- k. Future total monthly premium;
- l. Future government pays monthly premium;
- m. Future employee pays monthly premium; and
- n. Future change in employee payment monthly premium.

CMS will not send any data about individual applicants or enrollees to OPM in order to receive this data from OPM.

#### System(s) of Records

The records used in the matching program are maintained in these systems of records:

- CMS Health Insurance Exchanges System (HIX), System No. 09–70–0560, last published in full at 78 FR 63211 (Oct. 23, 2013), and amended at 83 FR 6591 (Feb. 14, 2018).
- OPM/GOVT–1 General Personnel Records, last published in full at 77 FR 73694 (Dec. 11, 2012), and amended at 80 FR 42133 (July 16, 2015) and 80 FR 74815 (Nov. 30, 2015). The disclosures of OPM data to CMS are authorized by Routine Use “rr”.

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10215]

#### Agency Information Collection Activities: Proposed Collection; 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 (the 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 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our burden estimates 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 must be received by July 6, 2021.

**ADDRESSES:** When commenting, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. *Electronically.* You may send your comments electronically to <http://www.regulations.gov>. Follow the instructions for “Comment or Submission” or “More Search Options” to find the information collection document(s) that are accepting comments.

2. *By Regular Mail.* You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number: CMS–P–0015A, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following:

1. Access CMS' Website address at Website address at <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html>

**FOR FURTHER INFORMATION CONTACT:** William N. Parham at (410) 786–4669.

#### SUPPLEMENTARY INFORMATION:

##### Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

*CMS-10215 Identifying Medicaid Payment for Physician Administered Drugs*

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. 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 requires federal agencies to publish a 60-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.

**Information Collection**

1. *Type of Information Collection Request:* Extension of currently approved collection; *Title of Information Collection:* Identifying Medicaid Payment for Physician Administered Drugs; *Use:* States are required to provide for the collection and submission of utilization data for certain physician-administered drugs in order to receive federal financial participation for these drugs. Physicians, serving as respondents to states, submit National Drug Code numbers and utilization information for “J” code physician-administered drugs so that the states will have sufficient information to collect drug rebate dollars. *Form Number:* CMS-10215 (OMB control number: 0938-1026); *Frequency:* Weekly; *Affected Public:* Business or other for-profits and Not-for-profit institutions; *Number of Respondents:* 20,000; *Total Annual Responses:* 4,589,433; *Total Annual Hours:* 351,046. (For policy questions regarding this collection contact Michael Forman at 410-786-2666.)

Dated: April 29, 2021,

**William N. Parham, III**

*Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.*

[FR Doc. 2021-09360 Filed 5-3-21; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Request for Nominations to the Advisory Council on Alzheimer’s Research, Care, and Services**

**AGENCY:** Office of the Assistant Secretary for Planning and Evaluation, Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** The Secretary of HHS established the Advisory Council on Alzheimer’s Research, Care, and Services to provide advice and consultation to the Secretary on how to prevent or reduce the burden of Alzheimer’s disease and related dementias on people with the disease and their caregivers. The Secretary signed the charter establishing the Advisory Council on May 23, 2011. *HHS is soliciting nominations for seven (7) new non-federal members of the Advisory Council to replace the seven (7) members whose terms will end September 30, 2021.* Nominations should include, at a minimum, the nominee’s contact information (current mailing address, email address, and telephone number) and current curriculum vitae or resume.

**DATES:** Submit nominations by email or USPS mail before COB on May 31, 2021.

**ADDRESSES:** Nominations should be sent by email to: Helen Lamont, Ph.D., HHS Office of the Assistant Secretary for Planning and Evaluation, Room 424E, Humphrey Building, 200 Independence Avenue SW, Washington, DC 20201, [helen.lamont@hhs.gov](mailto:helen.lamont@hhs.gov) and [napa@hhs.gov](mailto:napa@hhs.gov).

**FOR FURTHER INFORMATION CONTACT:** Helen Lamont (202) 260-6075, [helen.lamont@hhs.gov](mailto:helen.lamont@hhs.gov).

**SUPPLEMENTARY INFORMATION:** The Advisory Council on Alzheimer’s Research, Care, and Services meets quarterly to discuss programs that impact people with Alzheimer’s disease and related dementias and their caregivers. The Advisory Council makes recommendations to Congress and the Secretary of Health and Human Services about ways to reduce the financial impact of Alzheimer’s disease and related dementias and to improve the health outcomes of people with these conditions. The Advisory Council also provides feedback on a National Plan to Address Alzheimer’s disease. On an annual basis, the Advisory Council evaluates the implementation of the recommendations through an updated National Plan. The National Alzheimer’s Project Act, Public Law 111-375 (42

U.S.C. 11225), requires that the Secretary of Health and Human Services (HHS) establish the Advisory Council on Alzheimer’s Research, Care, and Services. The Advisory Council is governed by provisions of Public Law 92-463 (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

The Advisory Council consists of 22 members. Ten members are designees from Federal agencies including the Centers for Disease Control and Prevention, Administration for Community Living, Centers for Medicare and Medicaid Services, Indian Health Service, National Institutes of Health, National Science Foundation, Department of Veterans Affairs, Food and Drug Administration, Agency for Healthcare Research and Quality, and the Health Resources and Services Administration. The Advisory Council also consists of 12 non-federal members selected by the Secretary who represent 6 categories of people impacted by dementia: dementia caregivers (2), health care providers (2), representatives of State health departments (2), researchers with dementia-related expertise in basic, translational, clinical, or drug development science (2), voluntary health association representatives (2), and dementia patient advocates, including an advocate who is currently living with dementia (2). At this time, the Secretary shall appoint one caregiver, one healthcare provider, one representative of a State health department, one researcher, one voluntary health association representative, one dementia patient advocate, and one advocate who is a person living with dementia. These new members will replace the seven members whose terms will end on September 30, 2021. After receiving nominations, the Secretary, with input from his staff, will make the final decision, and the new members will be announced soon after. Members shall be invited to serve 4-year terms. The member living with dementia will serve a 2-year term. A member may serve after the expiration of the member’s term until a successor has taken office. Members will serve as Special Government Employees.

Dated: April 30, 2021.

**Rebecca Haffajee,**

*Acting Assistant Secretary for Planning and Evaluation.*

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