build confidence within communities for people with disabilities.

Summary of the Award

Recipient: Association of University Centers on Disability (AUCD)

Purpose of the Award: The purpose of this award is to identify people with disabilities, their families and family caregivers, and their direct support professionals who remain unvaccinated against COVID–19 and focus on interpersonal engagement and unique and innovative strategies to reduce hesitancy and improve vaccine uptake in these individuals. The recipient will be expected to work with a range of national disability and direct support professional organizations to train known and trusted vaccination champions to increase interpersonal communication with trusted and familiar messengers within disability networks, as well as develop culturally relevant, accessible, easy-to-read and understandable communication resources on COVID–19 vaccination.

Amount of Award: $3,190,000 in Federal Fiscal Year (FFY) 2021 funds for a one-year period of performance, subject to availability of funds.

Authority: 42 U.S.C. 247b–8 and Public Law 116–260, Division M, Title III.


Dated: August 20, 2021.

Joseph I. Hun gate III,
Deputy Director, Office of Financial Resources, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

For Further Information Contact: William Parham at (410) 786–4669.

Supplementary Information: Under the Paperwork Reduction Act of 1995 (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 (44 U.S.C. 3506(c)(2)(A)) requires federal agencies to publish a 30-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 that summarizes the following proposed collection(s) of information for public comment:

1. Type of Information Collection Request: Revision of a currently approved collection; Title of Information Collection: Medicaid State Plan Base Plan Pages; Use: State Medicaid agencies complete the plan pages while we review the information to determine if the state has met all of the requirements of the provisions the states choose to implement. If the requirements are met, we will approve the amendments to the state’s Medicaid plan giving the state the authority to implement the flexibilities. For a state to receive Medicaid Title XIX funding, there must be an approved Title XIX state plan. Form Number: CMS–179 (OMB control number 0938–0193); Frequency: Occasionally; Affected Public: State, Local, and Tribal Governments; Number of Respondents: 56; Total Annual Responses: 1,120; Total Annual Hours: 22,400. (For policy questions regarding this collection contact Gary Knight at 304–347–5723.)


William N. Parham, III,
Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review: Refugee Support Services (RSS) and RSS Set Aside Sub-Agency List (0970–0556)

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

Action: Request for public comment.

Summary: The Administration for Children and Families (ACF) Office of Refugee Resettlement (ORR) seeks approval for a revision to an existing information collection, requesting Refugee Support Services (RSS) grantees and RSS Set Aside grantees to provide the agency name, city, state, website, and funding amount for each contracted sub-grantee. Additionally, ORR seeks approval to have the option to make this information public. This would enhance the accessibility of refugee service provider information to eligible clients.