

POLICIES AND PRACTICES FOR RETENTION OF DISPOSAL OF RECORDS:

All records are retained and disposed of in accordance with General Records Schedule 6.4, issued by the National Archives and Records Administration, and FMCS. Records are destroyed when three years old or when they are no longer needed for business use.

ADMINISTRATIVE, TECHNICAL, AND PHYSICAL SAFEGUARDS:

Regarding the Conference system, on premises there is a NetApp Network attached Windows File System shared folder with permissions set to only allow those with designated access by membership thru a Windows Azure group membership. Group access and modification is controlled by IT which uses a privileged administrator account. Array is physically located in a locked computer room with limited badge access. Cvent and GovDelivery are remote hosted subscription systems accessed by username/password maintained by the host company and created by the user of the systems. FMCS administrators maintain accounts/access and content for the hosted spaces. Cvent and GovDelivery are both FedRAMP authorized vendors and use government accepted procedures for keeping data safe.

RECORD ACCESS PROCEDURES:

Attendees and participants may access the GovDelivery system via links placed on client web pages or in system-generated emails. GovDelivery subscribers have access to their own personal data in the system. Cvent registrants may access their personal data through their registration confirmation or by contacting FMCS. Individuals must provide the following information for their records to be located and identified: (1) Full name, (2) Address, and (3) A reasonably identifying description of the record content requested. Requests can be submitted via fmcs.gov/foia/, via email to privacy@fmcs.gov, or via mail to FMCS, Privacy Office, 250 E Street SW, Washington, DC 20427. See 29 CFR 1410.3, Individual access requests.

CONTESTING RECORDS PROCEDURES:

See 29 CFR 1410.6, Requests for correction or amendment of records, on how to contest the content of any records. Privacy Act requests to amend or correct records may be submitted to the Privacy Office at privacy@fmcs.gov or Privacy Officer at FMCS, Privacy Office, 250 E Street SW, Washington, DC 20427. Also, see <https://www.fmcs.gov/privacy-policy/>.

NOTIFICATION PROCEDURES:

See 29 CFR 1410.3(a), Individual access requests.

EXEMPTIONS PROMULGATED FOR THE SYSTEM:

None.

HISTORY:

None.

Dated: July 19, 2022.

Anna Davis,

Deputy General Counsel.

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BILLING CODE 6732-01-P

OFFICE OF GOVERNMENT ETHICS**Agency Information Collection Activities; Proposed Collection; Comment Request for Modified Qualified Trust Model Certificates and Model Trust Documents**

AGENCY: Office of Government Ethics (OGE).

ACTION: Notice of request for agency and public comments.

SUMMARY: After this first round notice and public comment period, the U.S. Office of Government Ethics (OGE) intends to submit modified versions of the 12 OGE model certificates and model documents for qualified trusts to the Office of Management and Budget (OMB) for review and approval under the Paperwork Reduction Act of 1995.

DATES: Written comments by the public and the agencies on this proposed extension are invited and must be received on or before September 20, 2022.

ADDRESSES: Comments may be submitted to OGE by any of the following methods:

Email: usoge@oge.gov (Include reference to "OGE qualified trust model certificates and model trust documents paperwork comment" in the subject line of the message.)

Mail, Hand Delivery/Courier: Office of Government Ethics, 1201 New York Avenue NW, Suite 500, Attention: Jennifer Matis, Associate Counsel, Washington, DC 20005-3917.

Instructions: Comments may be posted on OGE's website, www.oge.gov. Sensitive personal information, such as account numbers or Social Security numbers, should not be included. Comments generally will not be edited to remove any identifying or contact information.

FOR FURTHER INFORMATION CONTACT:

Jennifer Matis at the U.S. Office of Government Ethics; telephone: 202-482-9216; TTY: 800-877-8339; Email:

jmatis@oge.gov. Copies of the model documents as currently approved are available on OGE's website, www.oge.gov. Electronic copies of these documents may also be obtained, without charge, by contacting Ms. Matis.

SUPPLEMENTARY INFORMATION:

Title: Executive Branch Qualified Trust Documents.

OMB Control Number: 3209-0007.

Type of Information Collection: Revision of a currently approved collection.

Type of Review Request: Regular.

Respondents: Any current or prospective executive branch officials who seek to establish or have established a qualified blind or diversified trust under the Ethics in Government Act of 1978 as a means to avoid conflicts of interest while in office.

Estimated Average Annual Number of Respondents: 2.

Total Estimated Time per Response: 20 minutes to 100 hours (see table below for detailed explanation).

Estimated Average Total Annual Burden: 120 hours.

Abstract: OGE is the supervising ethics office for the executive branch of the Federal Government under the Ethics in Government Act of 1978 (EIGA). Accordingly, OGE administers the qualified trust program for the executive branch. Presidential nominees to executive branch positions subject to Senate confirmation and any other executive branch officials may seek OGE approval for EIGA-qualified blind or diversified trusts as one means to avoid conflicts of interest. The requirements for EIGA-qualified blind and diversified trusts are set forth in section 102(f) of the Ethics in Government Act, 5 U.S.C. app. § 102(f), and OGE's implementing financial disclosure regulations at subpart D of 5 CFR part 2634.

In order to ensure that all applicable requirements are met, OGE is the sponsoring agency for 12 model certificates and model trust documents for qualified blind and diversified trusts. See 5 CFR 2634.402(e)(3), 2634.402(f)(3), 2634.404(e) through (g), 2634.405(d)(2), 2634.407(a); 2634.408(b)(1) through (3), 2634.408(d)(4), 2634.409, and 2634.414. The various model certificates and model trust documents are used by settlors, trustees, and other fiduciaries in establishing and administering these qualified trusts. OGE plans to submit these model certificates and model trust documents (described in detail in the table below) to OMB for renewed approval pursuant to the Paperwork Reduction Act of 1995, 44 U.S.C. chapter 35.

The 12 model documents, along with their burden estimates, are as follows:

Model qualified trust documents	Estimated burden
(A) Blind Trust Communications (Expedited Procedure for Securing Approval of Proposed Communications)	20 minutes per communication.
(B) Model Qualified Blind Trust Provisions	100 hours per model.
(C) Model Qualified Diversified Trust Provisions	100 hours per model.
(D) Model Qualified Diversified Trust Provisions (For Use in the Case of Multiple Fiduciaries)	100 hours per model.
(E) Model Qualified Blind Trust Provisions (For Use in the Case of an Irrevocable Pre-Existing Trust)	100 hours per model.
(F) Hybrid Version of the Model Qualified Diversified Trust Provisions	100 hours per model.
(G) Model Qualified Blind Trust Provisions (For Use in the Case of Multiple Fiduciaries)	100 hours per model.
(H) Model Qualified Diversified Trust Provisions (For Use in the Case of an Irrevocable Pre-Existing Trust)	100 hours per model.
(I) Model Confidentiality Agreement Provisions (For Use in the Case of a Privately Owned Business)	2 hours per agreement.
(J) Model Confidentiality Agreement Provisions (For Use in the Case of Investment Management Activities)	2 hours per agreement.
Model Trust Certificates	Estimated Burden.
(K) Certificate of Independence	20 minutes per certificate.
(L) Certificate of Compliance	20 minutes per certificate.

These estimates are based on the amount of time imposed on professional trust administrators or private representatives. OGE notes that only one set of the various model trust provisions (items (B) through (H)) will be prepared for a single qualified trust, and only prior to the establishment of that qualified trust. Likewise, other model documents listed above are used in connection with establishing the qualified trust (items (I), (J), and (K)). The remaining model documents are used after the trust’s creation (items (A) and (L)). Accordingly, OGE notes that the majority of the time burden for any given trust is imposed during the creation of the trust.

At the present time, there are no active qualified trusts in the executive branch. However, OGE anticipates possible limited use of these model documents during the forthcoming three-year period. OGE estimates that there may be an average of one individual per year who initiates a qualified trust using these model documents during calendar years 2023 through 2025. OGE has accordingly estimated the average annual number of respondents to be two, which represents one respondent establishing a qualified trust and one respondent maintaining a previously established qualified trust. Based on the above, OGE estimates an average annual time burden during the next three years of 120 hours. Using an estimated rate of \$300 per hour for the services of a professional trust administrator or private representative, the estimated annual cost burden is \$36,000.

Under OMB’s implementing regulations for the Paperwork Reduction Act, any recordkeeping, reporting, or disclosure requirement contained in a rule of general applicability is deemed to involve ten or more persons. See 5 CFR 1320.3(c)(4)(i). Therefore, OGE intends to submit, after this first round

notice and comment period, all 12 qualified trust model certificates and model documents described above (all of which are included under OMB paperwork control number 3209–0007) for a three-year extension of approval. At that time, OGE will publish a second notice in the **Federal Register** to inform the public and the agencies.

OGE is committed to making ethics records publicly available to the extent possible. The communications documents and the confidentiality agreements (items (A), (I) and (J) on the table above), once completed, will not be available to the public because they contain sensitive, confidential information. The other completed certificates and documents (except for any trust provisions that relate to the testamentary disposition of trust assets) are retained and made publicly available based upon a proper request under section 105 of the EIGA until the periods for retention of all other reports (usually the OGE Form 278 Public Financial Disclosure Reports) of the individual establishing the trust have lapsed (generally six years after the filing of the last report). See 5 U.S.C. app. 105; 5 CFR 2634.603(g)(2). The information collected with these model trust certificates and model trust documents is part of the OGE/GOVT–1 Governmentwide Privacy Act system of records.

In seeking an extension of approval, OGE is proposing several nonsubstantive changes to the 12 qualified trust certificates and model documents.

First, OGE proposes updating the dates in Document A (Blind Trust Communications) to make them more contemporary.

Second, OGE proposes replacing “OGE” and “the Office” with “the U.S. Office of Government Ethics” to make references to the agency consistent with that of the actual model trust language.

Third, OGE proposes replacing references to the Ethics in Government Act of 1978 as “the Ethics Act” with “the Act” in order to maintain consistency.

Fourth, OGE proposes fixing a typo by removing the period (.) following the “NW” in OGE’s address.

Request for Comments: Agency and public comment is invited specifically on the need for and practical utility of this information collection, on the accuracy of OGE’s burden estimate, on the enhancement of quality, utility, and clarity of the information collected, and on minimizing the burden to the public. Comments received in response to this notice will be summarized for, and may be included with, the OGE request for extension of OMB approval. The comments will also become a matter of public record.

Specifically, OGE seeks public comment on the following:

- Do the model qualified blind trusts provide sufficient direction to establish a trust under the Qualified Trust Program? If not, what provisions could be clearer or what language should be changed?
- Do the model qualified diversified trusts provide sufficient direction to establish a trust under the Qualified Trust Program? If not, what provisions could be clearer or what language should be changed?
- Do the Additional Trust Documents provide sufficient information for individuals to comply with the logistical requirements (e.g., procedure for securing approval of proposed communications) of the Qualified Trust Program? If not, what provisions could be clearer or what language should be changed?

Approved: July 19, 2022.

Emory Rounds,

Director, Office of Government Ethics.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–22–0824]

Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled “National Syndromic Surveillance Program (NSSP)” to the Office of Management and Budget (OMB) for review and approval. CDC previously published a “Proposed Data Collection Submitted for Public Comment and Recommendations” notice on May 6, 2022, to obtain comments from the public and affected agencies. CDC received one comment related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

- (a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
- (b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- (c) Enhance the quality, utility, and clarity of the information to be collected;
- (d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and
- (e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and

instruments, call (404) 639–7570. 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. Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW, Washington, DC 20503 or by fax to (202) 395–5806. Provide written comments within 30 days of notice publication.

Proposed Project

National Syndromic Surveillance Program (NSSP)(OMB Control No. 0920–0824, Exp. 7/31/2022)—Revision—Center for Surveillance, Epidemiology and Laboratory Services (CSELS), Centers for Disease Control and Prevention (CDC)

Background and Brief Description

Syndromic surveillance uses syndromic data and statistical tools to detect, monitor, and characterize unusual activity for further public health investigation or response. Syndromic data include electronic extracts of electronic health records (EHRs) from patient encounter data from emergency departments, urgent care, ambulatory care, and inpatient healthcare settings, as well as laboratory data. Though these data are being captured for different purposes, they are monitored in near real-time as potential indicators of an event, a disease, or an outbreak of public health significance. On the national level, these data are used to improve nationwide situational awareness and enhance responsiveness to hazardous events and disease outbreaks to protect America’s health, safety, and security.

The BioSense Program was created by congressional mandate as part of the Public Health Security and Bioterrorism Preparedness and Response Act of 2002 and was launched by the CDC in 2003. The BioSense Program has since been expanded into the National Syndromic Surveillance Program (NSSP) which promotes and advances development of a syndromic surveillance system for the timely exchange of syndromic data.

CDC requests a three-year approval for a Revision for NSSP (OMB Control No. 0920–0824, Exp. 7/31/2022). This Revision includes a request for approval to continue to receive onboarding data from state, local and territorial public health departments about healthcare

facilities in their jurisdiction; registration data needed to allow users access to the BioSense Platform tools and services; and data sharing permissions so that state, local and territorial health departments can share data with other state, local and territorial health departments and CDC.

NSSP features the BioSense Platform and a collaborative Community of Practice. The BioSense Platform is a secure integrated electronic health information system that CDC provides, primarily for use by state, local and territorial public health departments. It includes standardized analytic tools and processes that enable users to rapidly collect, evaluate, share, and store syndromic surveillance data. NSSP promotes a Community of Practice in which participants collaborate to advance the science and practice of syndromic surveillance. Health departments use the BioSense Platform to receive healthcare data from facilities in their jurisdiction, conduct syndromic surveillance, and share the data with other jurisdictions and CDC.

The BioSense Platform provides the ability to analyze healthcare encounter data from EHRs, as well as laboratory data. All EHR and laboratory data reside in a cloud-enabled, web-based platform that has Authorization to Operate from CDC. The BioSense Platform sits in the secure, private Government Cloud which is used as a storage and processing mechanism, as opposed to on-site servers at CDC. This environment provides users with easily managed on-demand access to a shared pool of configurable computing resources such as networks, servers, software, tools, storage, and services, with limited need for additional IT support. Each site (*i.e.*, state or local public health department) controls its data within the cloud and is provided with free secure data storage space with tools for posting, receiving, controlling and analyzing their data; an easy-to-use data display dashboard; and a shared environment where users can collaborate and advance public health surveillance practice. Each site is responsible for creating its own data use agreements with the facilities that are sending the data, retains ownership of any data it contributes to its exclusive secure space, and can share data with CDC or users from other sites.

NSSP has three different types of information collection:

- (1) Collection of onboarding data about healthcare facilities needed for state, local, and territorial public health departments to submit EHR data to the BioSense Platform;