

Occasionally; *Affected Public*: Private Sector; Businesses or other for-profits, Not-for-profits institutions; *Number of Respondents*: 1,701,558; *Total Annual Responses*: 323,947,630; *Total Annual Hours*: 37,794,970. (For policy questions regarding this collection contact Jennifer McCormick at 410-786-2852.)

3. *Type of Information Collection Request*: Extension of a currently approved collection; *Title of Information Collection*: Medical Necessity and Contract Amendments Under Mental Health Parity; *Use*: Upon request, regulated entities must provide a medical necessity disclosure. Receiving this information will enable potential and current enrollees to make more educated decisions given the choices available to them through their plans and may result in better treatment of their mental health or substance use disorder (MH/SUD) conditions. States use the information collected and reported as part of its contracting process with managed care entities, as well as its compliance oversight role. In states where a Medicaid Managed Care Organization (MCO) is responsible for providing the full scope of medical/surgical and MH/SUD services to beneficiaries, the state will review the parity analysis provided by the MCO to confirm that the MCO benefits are in compliance. CMS uses the information collected and reported in an oversight role of State Medicaid managed care programs. *Form Number*: CMS-10556 (OMB control number: 0938-1280); *Frequency*: Once and occasionally; *Affected Public*: Individuals and households, the Private sector, and State, Local, or Tribal Governments; *Number of Respondents*: 71,104,769; *Total Annual Responses*: 426,628; *Total Annual Hours*: 71,294. (For policy questions regarding this collection contact Matthew Rodriguez at 303-844-4724.)

Dated: September 1, 2022.

William N. Parham, III,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers CMS-10328]

Agency Information Collection Activities: Submission for OMB Review; 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 (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 a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate 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 on the collection(s) of information must be received by the OMB desk officer by October 7, 2022.

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. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function.

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>.

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*: Medicare Self-Referral Disclosure Protocol; *Use*: Section 6409 of the ACA requires the Secretary to establish a voluntary self-disclosure process that allows providers of services and suppliers to self-disclose actual or potential violations of section 1877 of the Act.

The SRDP is a voluntary self-disclosure process that allows providers of services and suppliers to disclose actual or potential violations of section 1877 of the Act. For purposes of the SRDP, a person submitting a disclosure to the SRDP will be referred to as a "disclosing party." CMS analyzes the disclosed conduct to determine compliance with section 1877 of the Act and the application of the exceptions to the physician self-referral prohibition.

Specifically, under the proposal a physician practice disclosing group practice noncompliance will submit an SRDP form consisting of the following components: (1) the SRDP Disclosure Form, (2) a single Group Practice Information Form covering all the physicians in the practice who made prohibited referrals to the practice, and (3) a Financial Analysis Worksheet. All other entities will continue to submit disclosures using the SRDP Disclosure Form, separate Physician Information Forms for each physician covered in the self-disclosure, and a Financial Analysis Worksheet. *Form Number*: CMS-10328 (OMB control number: 0938-1106);

Frequency: Yearly; Affected Public: Private Sector (Business or other for-profits, Not-for-Profit Institutions); Number of Respondents: 100; Total Annual Responses: 200; Total Annual Hours: 5,000. (For policy questions regarding this collection contact Matthew Edgar at 410-786-0698.)

Dated: September 1, 2022.

William N. Parham, III,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for Office of Management and Budget (OMB) Review; Sexual Risk Avoidance Education Performance Analysis Study—Extension (OMB #0970-0536)

AGENCY: Office of Planning, Research, and Evaluation (OPRE), Administration for Children and Families (ACF), U.S.

Department of Health and Human Services (HHS).

ACTION: Request for public comment.

SUMMARY: OPRE and the Family and Youth Services Bureau (FYSB) request an extension without changes to a currently approved information collection activity as part of the Sexual Risk Avoidance Education Performance Analysis Study (SRAE PAS) (OMB Control No. 0970-0536; expiration date October 31, 2022). The goal of the study is to collect, analyze, and report on performance measures data for the SRAE program.

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. Find this particular

information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function. You can also obtain copies of the proposed collection of information by emailing OPREinfocollection@acf.hhs.gov. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The purpose of the SRAE program is to educate youth on how to voluntarily refrain from nonmarital sexual activity and prevent other youth risk behaviors. The requested extension will allow ACF to continue to collect the performance measures from SRAE grantees. Data will continue to be used to determine if the SRAE grantees are meeting performance benchmarks related to their program’s mission and priorities. The program office will continue to use the data to provide technical assistance to grantees and for its own reporting purposes.

Respondents: Departmental SRAE (DSRAE), State SRAE (SSRAE), and Competitive SRAE (CSRAE) grantees, their sub recipients, and program participants.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents (total over request period)	Number of responses per respondent (total over request period)	Average burden per response (in hours)	Total burden (in hours)	Annual burden (in hours)
(1) Participant Entry Survey					
DSRAE participants	378,390	1	0.1333	50,439	16,813
SSRAE participants	952,899	1	0.1333	127,021	42,340
CSRAE participants	60,408	1	0.1333	8,052	2,684
(2) Participant Exit Survey					
DSRAE participants	302,712	1	0.1667	50,462	16,821
SSRAE participants	762,319	1	0.1667	127,079	42,360
CSRAE participants	48,326	1	0.1667	8,056	2,685
(3) Performance reporting data entry form: grantees					
DSRAE grantees	119	6	16	11,424	3,808
SSRAE grantees	39	6	16	3,744	1,248
CSRAE grantees	34	6	16	3,264	1,088
(4) Performance reporting data entry form: subrecipients					
DSRAE subrecipients	252	6	13	19,656	6,552
SSRAE subrecipients	426	6	13	33,228	11,076
CSRAE subrecipients	63	6	13	4,914	1,638

Estimated Total Annual Burden Hours: 149,113.

Authority: 42 U.S.C 1310.