

II. Advisory Committee Membership Roster

On November 23, 2021, HHS published a Notice of Charter and Invitation for Member Nominations in the **Federal Register** for the GAPB Advisory Committee (86 FR 66565 through 66566). On December 16, 2022, HHS published a **Federal Register** Notice Announcing the 17 Members of the GAPB Advisory Committee (87 FR 77122 through 77123). A subsequent update to the Committee Roster was published on April 14, 2023 (88 FR 23046).

The 17 Members of the GAPB Advisory Committee are as follows:

- Asbel Montes—Committee Chairperson; Additional Representative determined necessary and appropriate by the Secretaries.
 - Ali Khawar—Secretary of Labor's Designee.
 - Carol Weiser—Secretary of the Treasury's Designee.
 - Rogelyn McLean—Secretary of Health and Human Services' Designee.
 - Gamunu Wijetunge—Department of Transportation—National Highway Traffic Safety Administration.
 - Suzanne Prentiss—State Insurance Regulators.
 - Adam Beck—Health Insurance Providers.
 - Patricia Kelmar—Consumer Advocacy Groups.
 - Gary Wingrove—Patient Advocacy Groups.
 - Ayobami Ogunsola—State and Local Governments.
 - Ritu Sahni—Physician specializing in emergency, trauma, cardiac, or stroke.
 - Peter Lawrence—State Emergency Medical Services Officials.
 - Shawn Baird—Emergency Medical Technicians, Paramedics, and Other Emergency Medical Services Personnel.
 - Edward Van Horne—Representative of Various Segments of the Ground Ambulance Industry.
 - Regina Godette-Crawford—Representative of Various Segments of the Ground Ambulance Industry.
 - Rhonda Holden—Representative of Various Segments of the Ground Ambulance Industry.
 - Loren Adler—Additional Representative determined necessary and appropriate by the Secretaries.
- The GAPB Advisory Committee Roster is also available on the GAPB Advisory Committee website at: <https://www.cms.gov/medicare/regulations-guidance/advisory-committees/ground-ambulance-patient-billing-gapb>. All future updates to the Advisory Committee Roster will be published on this website.

III. Meeting Agenda

The third public meeting of the GAPB Advisory Committee will take place on October 31, 2023 and November 1, 2023. On October 31, 2023, the Committee will be presented with findings and recommendations from its subcommittees for discussion and deliberation. On November 1, 2023, the Committee will formally vote on which recommendations to adopt in its Report to the Secretaries. A more detailed agenda and materials will be made available prior to the meeting on the GAPB Advisory Committee website (listed previously).

IV. Public Participation

The October 31, 2023 and November 1, 2023 GAPB Advisory Committee meeting will be open to the public. Attendance may be limited due to virtual meeting constraints. Interested parties are encouraged to register as far in advance of the meeting as possible. To register for the meeting, visit: <https://www.cms.gov/medicare/regulations-guidance/advisory-committees/ground-ambulance-patient-billing-gapb>. The Centers for Medicaid Services (CMS) is committed to providing equal access to this meeting for all participants and to ensuring Section 508 compliance. Closed captioning will be provided. To request alternative formats or services because of a disability, such as sign language interpreters or other ancillary aids, refer to the contact person listed in the **FOR FURTHER INFORMATION CONTACT** section.

V. Submitting Written Comments

Members of the public may submit written comments for consideration by the Committee at any time via email to gapbadvisorycommittee@cms.hhs.gov. Additionally, members of the public will have the opportunity to submit comments during the October 31, 2023 and November 1, 2023 virtual meeting through the chat feature of the Zoom webinar platform. Members of the public are encouraged to submit lengthy written comments (more than 3 sentences) to the email address above.

VI. Viewing Documents

You may view the documents discussed in this notice at: <https://www.cms.gov/medicare/regulations-guidance/advisory-committees/ground-ambulance-patient-billing-gapb>.

The Administrator of CMS, Chiquita Brooks-LaSure, having reviewed and approved this document, authorizes Chyana Woodyard, who is the Federal Register Liaison, to electronically sign

this document for purposes of publication in the **Federal Register**.

Chyana Woodyard,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

[FR Doc. 2023–21676 Filed 9–29–23; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[CFDA Number: [93.569]]

Announcement of the Intent To Award Three Supplements to Community Services Block Grant Award Recipients

AGENCY: Office of Community Services (OCS), Administration for Children and Families (ACF), Department of Health and Human Services (HHS).

ACTION: Notice of issuance of supplements.

SUMMARY: OCS announces the intent to award a supplement in the amount of up to \$3.6 million (\$1.2 million per year for 3 fiscal years at \$400,000 per individual award) to three Community Services Block Grant (CSBG) award recipients under Notice of Funding Opportunity (NOFO): Regional Performance and Innovation Consortia (RPIC) (HHS–2019–ACF–OCS–ET–1582, HHS–2019–ACF–OCS–ET–1586, and HHS–2019–ACF–OCS–ET–1587). The purpose of the RPIC awards is to support robust regional training and technical (T/TA) strategies for the CSBG Network—states, territories, directly-funded tribes and tribal organizations, and CSBG-eligible entities, and state associations within the 10 ACF regions. The RPICs are designed to assist in meeting high organizational standards in the areas of consumer input and involvement, community engagement, community assessment, organizational leadership, board governance, strategic planning, human resource management, financial operations and oversight, and data and analysis. In addition, the RPICs identify, promote, and support multiyear T/TA efforts to ensure high-quality programs and services and impactful outcomes for individuals, families, and communities.

DATES: The proposed period of performance is September 30, 2023, to September 29, 2026.

FOR FURTHER INFORMATION CONTACT: Dr. Lanikque Howard, Ph.D., Director, Office of Community Services, 330 C Street SW, Washington, DC 20201.

Telephone: (202) 740-5951; Email: lanique.howard@acf.hhs.gov.

SUPPLEMENTARY INFORMATION: In Fiscal Year 2023, OCS published a total of 11 separate new competitive grant opportunities for the RPIC, each corresponding to a specific ACF region.¹ Each NOFO mandated that applicants

must be physically located in the ACF region of their application. As the merit review process was initiated, OCS identified that Regions 3, 6, and 7 were not represented by eligible applicants due to their inadvertent error of applying for a different region's NOFO rather than their own. This supplement will enable the current award recipients

to support and sustain the continuance of vital regional CSBG T/TA strategies and activities to align the period of performance, activities, timelines, and OCS oversight among all CSBG regional T/TA award recipients.

OCS announces the intent to award the following supplement awards:

Recipient	Award amount
Maryland Association of Community Action Agencies, Annapolis, Maryland	\$1,200,000
Oklahoma Association of Community Action Agencies, Inc., Edmond, Oklahoma	1,200,000
Kansas Association of Community Action Program, Inc., Topeka, Kansas	1,200,000

Statutory Authority: Sections 674(b)(2)(A) and 678A of the CSBG Act, as amended (42 U.S.C. 9903(b)(2)(A) and 9913).

Karen D. Shields,

Senior Grants Policy Specialist, Office of Grants Policy, Office of Administration.

[FR Doc. 2023-21779 Filed 9-28-23; 4:15 pm]

BILLING CODE 4184-XX-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Home-Based Child Care Toolkit for Nurturing School-Age Children Study (New Collection)

AGENCY: Office of Planning, Research, and Evaluation, Administration for Children and Families, United States Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Administration for Children and Families (ACF) Office of Planning, Research, and Evaluation (OPRE) at the U.S. Department of Health and Human Services (HHS) is proposing to collect information to examine a toolkit of new measures designed to assess and strengthen the quality of child care, the Home-Based Child Care Toolkit for Nurturing School-Age Children (HBCC-NSAC Toolkit). This study aims to build evidence about the English version of the HBCC-NSAC

Toolkit for use by/with providers caring for children in a residential setting (*i.e.*, home-based child care [HBCC]).

DATES: *Comments due within 60 days of publication.* In compliance with the requirements of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described above.

ADDRESSES: You can obtain copies of the proposed collection of information and submit comments by emailing OPREinfocollection@acf.hhs.gov. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The HBCC-NSAC Toolkit is designed for home-based providers who regularly care for at least 1 school-age child who is not their own. The purpose of the HBCC-NSAC Toolkit is to help home-based providers identify their caregiving strengths and areas for growth. The HBCC-NSAC Toolkit consists of a self-administered provider questionnaire (composed of multiple newly developed measures) and a family communication questionnaire (composed of 1 communication tool). For validation purposes, the study will include the provider questionnaire from the HBCC-NSAC Toolkit with additional items from existing measures and a separate family survey with child and family background information items and items from an existing measure. A subset of providers will be observed with an existing observation measure. Study participants will include home-based providers who can complete the

provider questionnaire in English. They must currently care for at least 1 school-age child (age 5 and in kindergarten, or ages 6 through 12) in a home for at least 10 hours per week and for at least 8 weeks in the past year. These providers may also care for younger children (ages birth through 5 and not yet in kindergarten). Families (a parent or guardian of school-age children receiving care in the HBCC setting) who can complete the family survey in English will also be included in the study. The study will be based on a purposive sample of home-based providers in at least 10 geographic locations to maximize variation in the sample. OPRE proposes to collect survey and observational data from home-based providers who are licensed or regulated by states to provide child care and early education (CCEE) and providers who are unlicensed or legally exempt from state regulations for CCEE. Study participants may or may not participate in the child care subsidy program. The data collection activities are designed to provide critical information that is needed to analyze the reliability and validity of the HBCC-NSAC Toolkit's provider questionnaire. The resulting data will help ACF understand if the HBCC-NSAC Toolkit's provider questionnaire can be used to support home-based providers in identifying and reflecting on their caregiving strengths and areas for growth.

Respondents: Home-based providers; families of the children cared for by the providers.

¹ Note: Due to the size of Region 4, OCS funds two RPICs in the region (4a and 4b).