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 _, Room C4–26– Control Number: 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, please access the CMS PRA website by copying and pasting the following web address into your web browser: https://www.cms.gov/ Regulations-and-Guidance/Legislation/ PaperworkReductionActof1995/PRA-Listing.

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-10391 Methods for Assuring Access to Covered Medicaid Services Under 42 CFR 447.203 and 447.204

CMS-10856 Medicaid Managed Care and Supporting Regulations

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: Revision of a currently approved collection; Title of Information Collection: Methods for Assuring Access to Covered Medicaid Services Under 42 CFR 447.203 and

447.204; Use: Sections 447.203 and 447.204 require that states: "assure that payments are consistent with efficiency, economy, and quality of care and are sufficient to enlist enough providers so that care and services are available under the plan at least to the extent that such care and services are available to the general population in the geographic area." The information is used by states to document that access to care is in compliance with section 1902(a)(30)(A) of the Social Security Act, to identify issues with access within a state's Medicaid program, and to inform any necessary programmatic changes to address issues with access to care. CMS will use the information to monitor ongoing compliance with section 1902(a)(30)(A) of the Act, and to make informed approval decisions on State plan amendments that propose to make Medicaid rate reductions or restructure payment rates. Beneficiaries, providers, and other affected stakeholders may use the information to raise access issues to state Medicaid agencies and work with agencies to address those issues. Form Number: CMS-10391 (OMB control number: 0938-1134); Frequency: Annually; Affected Public: State, Local, or Tribal Governments; Number of Respondents: 51; Total Annual Responses: 341; Total Annual Hours: 15,305. (For questions regarding this collection contact Jeremy Silanskis at 410-786-1592.)

2. Type of Information Collection *Request:* Revision of a currently approved collection; Title of Information Collection: Medicaid Managed Care and Supporting Regulations; Use: The collection of information request pertains to the attestation collection requirement at 42 CFR 438.6(c)(2)(ii)(H), which requires that providers receiving payment under a State directed payment attest that they do not participate in any hold harmless arrangement for any health care-related tax as specified in §433.68(f)(3) in which the State or other unit of government imposing the tax provides for any direct or indirect payment, offset, or waiver such that the provision of the payment, offset, or waiver directly or indirectly guarantees to hold the taxpayer harmless for all or any portion of the tax amount, and ensure either that (upon CMS request) such attestations are available, or that the State provides an explanation that is satisfactory to CMS about why specific providers are unable or unwilling to make such attestations. Form Number: CMS-10856 (OMB control number: 0938-1453); Frequency: Yearly and once; Affected Public: Private sector and State, Local,

or Tribal Governments; Number of Respondents: 1,088,094; Total Annual Responses: 1,088,138; Total Annual Hours: 145,523. (For questions regarding this collection contact Abigail Walker at 410 - 786 - 1725.

William N. Parham, III,

Director, Division of Information Collections and Regulatory Impacts, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2024-11041 Filed 5-20-24; 8:45 am] BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Behavioral Interventions To Advance Self-Sufficiency-Next Generation (BIAS-NG) (Office of Management and Budget #0970-0502)

AGENCY: Office of Planning, Research, and Evaluation; Administration for Children and Families; U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office of Planning, Research, and Evaluation (OPRE) in the Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS) requests Office of Management and Budget (OMB) approval to modify and extend the approval of the ACF Behavioral Interventions to Advance Self-Sufficiency-Next Generation (BIAS–NG) Project Overarching Generic (OMB #: 0970-0502; Expiration date: 8/31/2025.) Under this overarching clearance, ACF collects data as part of rapid cycle testing and evaluation, to inform the design of interventions informed by behavioral science and to better understand the mechanisms and effects of such interventions.

Interventions have been and will continue to be developed in the program area domains of Temporary Assistance for Needy Families (TANF), child welfare, and Early Head Start/Head Start (EHS/HS). This revision would also allow for collection of data in the child care program area, and would extend the approval of the overarching generic. These interventions are intended to improve outcomes for participants in these programs.

DATES: Comments due within 60 days of publication. In compliance with the requirements of the Paperwork Reduction Act of 1995 (PRA), 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: OPRE is conducting the BIAS–NG project, which uses behavioral insights to design and test interventions intended to improve the efficiency, operations, and efficacy of human services programs. The BIAS-NG project is applying and testing behavioral insights to ACF programs including TANF, child welfare, and EHS/HS, and intends to expand these efforts to child care. This notice is a request for comments on ACF's proposal to revise and extend a previously approved collection, which included data collection to design and test interventions in the TANF, child welfare, and EHS/HS domains. Under the approved pilot generic clearance, OPRE has already conducted work with seven sites to conduct seven tests, and

is planning to continue to work with at least one additional site, conducting one or more tests of behavioral interventions for a total of nine tests of behavioral interventions. All approved information collection activities can be found here: https://www.reginfo.gov/public/do/ PRAICList?ref_nbr=202206-0970-002.

In addition to extending approval, this approval would also allow OPRE to conduct tests in the newly added program area of child care. The design and testing of BIAS–NG interventions is rapid and, to the extent possible, iterative. Each specific intervention is designed in consultation with agency leaders and launched as quickly as possible. To maximize the likelihood that the intervention produces measurable, significant, and positive effects on outcomes of interest, rapid cycle evaluation techniques will be employed in which proximate outcomes will be measured to allow the research team to more quickly iterate and adjust the intervention design, informing subsequent tests. Due to the rapid and iterative nature of this work, OPRE sought and received approval for an

overarching generic clearance to conduct this research. Following standard OMB requirements for generic clearances, once instruments subject to PRA are tailored to a specific site and the site's intervention. OPRE submits an individual generic information collection request under this umbrella clearance. Each request includes the individual instrument(s), a justification specific to the individual information collection, a description of the proposed intervention, and any supplementary documents. Each specific information collection includes up to two submissions—one submission for the formative stage research and another submission for any further data collection requiring burden during the testing phase. The type of information to be collected and the uses of the information is described in the supporting statements, found here: https://www.reginfo.gov/public/do/ PRAViewDocument?ref nbr=202206-0970-002.

Respondents: (1) Program Administrators, (2) Program Staff, and (3) Program Clients.

ANNUAL BURDEN ESTIMATES (TANF, CHILD WELFARE, EHS/HS, CHILD CARE)

Instrument	Number of respondents (TANF, CW, EHS/HS, CC) (total over request period)	Number of responses per respondent (total over request period)	Average burden hours per response (in hours)	Total burden (in hours)	Annual burden (in hours)
Phase 3: Diagnosis and Design					
Administrator interviews/focus groups Staff interviews/focus groups Client interviews/focus groups Client survey Staff Survey	48 400 400 400 400	1 1 1 1 1	1 1 .25 .25	48 400 400 100 100	16 133 133 33 33
Phase 4: Evaluation					
Administrator interviews/focus groups Staff interviews/focus groups Client interviews/focus groups Client survey Staff Survey	96 800 800 12,000 1,200	1 1 1 1	1 1 .25 .25	96 800 800 3,000 300	32 267 267 1,000 100

Estimated Total Annual Burden Hours: 2,014.

Comments: The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Authority: 42 U.S.C. 1310.

Mary C. Jones,

ACF/OPRE Certifying Officer. [FR Doc. 2024–11077 Filed 5–20–24; 8:45 am] **BILLING CODE 4184–07–P**

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Statement of Organization, Functions, and Delegations of Authority

AGENCY: Office of Population Affairs, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services (HHS).

ACTION: Notice.