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## EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

Form name	Number of respondents	Total burden hours	Average hourly wage rate *	Total cost burden
1: Site Interest Form	1,060	106	<sup>a</sup> \$97.30	\$10,314
2: Site Information Form	265	88	<sup>a</sup> 97.30	8,562
3: Safer Dx Checklist	219	55	<sup>a</sup> 97.30	5,352
4: Exit Interviews Protocol	69	12	<sup>a</sup> 97.30	1,168
5a: SOPS® Medical Office Survey with Diagnostic Safety Supplemental Item Set	109	27	<sup>a</sup> 97.30	2,627
5b: SOPS® Hospital Survey with Diagnostic Safety Supplemental Item Set	110	28	<sup>a</sup> 97.30	2,724
6: Post-training Evaluation Form	1,350	68	<sup>b</sup> 102.90	6,997
7: Post-technical Assistance Evaluation Form	1,350	135	<sup>b</sup> 102.90	13,892
8: Clinical Sustainability Assessment Tool (CSAT)	219	55	<sup>a</sup> 97.30	5,352
9: Implementation Interviews Protocol	438	876	<sup>b</sup> 102.90	90,140
10: Measure Dx Organizational Self-Assessment	73	37	<sup>b</sup> 102.90	3,807
11: Measure Dx Declaration of Measurement Strategy	73	6	<sup>b</sup> 102.90	617
12: Diagnostic Safety Event Report	73	219	<sup>b</sup> 102.90	22,535
13a: Omnibus Safety and Culture Survey Medical Offices	162	162	<sup>b</sup> 102.90	16,670
13b: Omnibus Safety and Culture Survey Hospitals	167	167	<sup>b</sup> 102.90	17,184
14: Calibrate Dx Survey	329	657	° 102.83	67,559
15: Clinician Self-Efficacy Survey	329	33	° 102.83	3,393
16: Provider Characteristics Form	986	16	° 102.83	1,645
17: Patient Toolkit Survey—Provider	986	164	° 102.83	16,864
18: Provider Interview Protocol	50	38	° 102.83	3,908
19: Patient Toolkit Survey—Patient	62,500	5,208	<sup>d</sup> 29.76	154,990
20: Patient Interview Protocol	50	38	<sup>d</sup> 29.76	1,131
Total				457,432

\* National Compensation Survey: Occupational wages in the United States May 2022, "U.S. Department of Labor, Bureau of Labor Statistics." a Based on the weighted mean hourly wage for physicians (broad) (\$121.15; occupation code 29-1210; 60%) and Medical and Health Services

Managers (\$61.53; Code 11–9111; 40%). <sup>b</sup> Based on the weighted mean hourly wage for physicians (broad) (\$121.15; occupation code 29–1210; 70%); nurse practitioners (broad) (\$59.94; occupation code 29–1170; 15%); physician assistants (broad) (\$60.23; occupation code 29–1070; 10%); and medical and health services managers (broad) (\$61.53; Code 11–9111; 5%).

<sup>c</sup>Based on the weighted mean hourly wage for physicians (broad) (\$121.15; occupation code 29–1210; 70%); nurse practitioners (broad) (\$59.94; occupation code 29–1170; 15%); and physician assistants (broad) (\$60.23; occupation code 29–1070; 15%). <sup>d</sup>Based on the mean wages for All Occupations (Code 00–0000).

#### **Request for Comments**

In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501-3520, comments on AHRQ's information collection are requested with regard to any of the following: (a) whether the proposed collection of information is necessary for the proper performance of AHRQ's health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) of information; (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: May 16, 2024. Mamatha Pancholi,

# Deputy Director.

[FR Doc. 2024-11199 Filed 5-21-24; 8:45 am] BILLING CODE 4160-90-P

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Agency for Healthcare Research and Quality

## Meeting of the National Advisory **Council for Healthcare Research and** Quality

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ), HHS. **ACTION:** Notice of public meeting.

SUMMARY: This notice announces a meeting of the National Advisory Council for Healthcare Research and Quality.

**DATES:** The meeting will be held on two days: Friday, June 28, 2024, and Saturday, June 29, 2024.

ADDRESSES: The meeting will be held inperson at the Hilton Baltimore Inner Harbor, 401 W Pratt St, Baltimore, MD 21201. Seating is limited at this location; however, this meeting will also be broadcast virtually. If you are interested in attending in person, please register at https://cma.ahrq.gov/na. A confirmation will be sent based on availability.

## FOR FURTHER INFORMATION CONTACT:

Jaime Zimmerman, Designated Federal Official, at the Agency for Healthcare Research and Quality, 5600 Fishers Lane, Mail Stop 06E37A, Rockville, Maryland, 20857, (301) 427-1456. For press-related information, please contact Bruce Seeman at (301) 427-1998 or Bruce.Seeman@AHRQ.hhs.gov.

Closed captioning will be provided during the meeting. If another reasonable accommodation for a disability is needed, please contact the Health Resources and Services Administration (HRSA), Office of Disabilities, Diversity, and Inclusion, (301) 443-5636, RA-Request@hrsa.gov, no later than Friday, June 14, 2024. The agenda, roster, and minutes will be available from Jenny Griffith, Committee Management Officer, Agency for Healthcare Research and Quality, 5600 Fishers Lane, Rockville, Maryland, 20857. Jenny Griffith's phone number is (240) 446–6799.

## SUPPLEMENTARY INFORMATION:

#### I. Purpose

In accordance with the Federal Advisory Committee Act, this notice announces a meeting of the National Advisory Council for Healthcare Research and Quality (the Council). 5 U.S.C. 1009. The Council is authorized by section 941 of the Public Health Service Act, 42 U.S.C. 299c. In accordance with its statutory mandate, the Council is to advise the Secretary of the Department of Health and Human Services and the Director of AHRQ on matters related to AHRQ's conduct of its mission including providing guidance on (A) priorities for health care research, (B) the field of health care research including training needs and information dissemination on health care quality and (C) the role of the Agency in light of private sector activity and opportunities for public private partnerships. The Council is composed of members of the public, appointed by the Secretary, and Federal ex-officio members specified in the authorizing legislation.

#### II. Agenda

On Friday, June 28, NAC members will meet to conduct preparatory work prior to convening the Council meeting at 1:45 p.m., with the call to order by the Council Chair, an introduction of NAC members, and approval of previous Council summary notes. The NAC members will then receive an update from the AHRQ Director. The agenda will also include a conversation on the vision for Health Services Research, as well as an update on the Age-Friendly Healthcare Systems Strategic Plan, to be followed by a discussion about opportunities for modernizing the measurement of consumer experience. On Saturday, June 29, NAC members will convene the Council meeting at 9:00 a.m. with welcome and call to order. The NAC members will then discuss priority populations and maternity health, as well as listen to an update on AHRQ's Patient-Centered Outcomes Research Trust Fund (PCORTF) Extension Program. For information regarding how to access the meeting as well as other meeting details, including information on how to make a public comment, please go to https://www.ahrq.gov/news/ events/nac/. The final agenda will be

available on the AHRQ website no later than Thursday, June 14, 2024.

Dated: May 3, 2024. **Mamatha Pancholi,**  *Deputy Director.* [FR Doc. 2024–11200 Filed 5–21–24; 8:45 am]

BILLING CODE P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Agency for Healthcare Research and Quality

## Supplemental Evidence and Data Request on Digestible Carbohydrate Intake and Maternal-Infant Outcomes: A Systematic Review

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ), HHS. **ACTION:** Request for supplemental evidence and data submission.

**SUMMARY:** The Agency for Healthcare Research and Quality (AHRQ) is seeking scientific information submissions from the public. Scientific information is being solicited to inform our review on *Digestible Carbohydrate Intake and Maternal-Infant Outcomes: A Systematic Review*, which is currently being conducted by the AHRQ's Evidence-based Practice Centers (EPC) Program. Access to published and unpublished pertinent scientific information will improve the quality of this review.

**DATES:** *Submission Deadline* on or before June 21, 2024.

## ADDRESSES:

Email submissions: epc@ ahrq.hhs.gov.

Print submissions:

- Mailing Address: Center for Evidence and Practice Improvement, Agency for Healthcare Research and Quality, ATTN: EPC SEADs Coordinator, 5600 Fishers Lane, Mail Stop 06E53A, Rockville, MD 20857
- Shipping Address (FedEx, UPS, etc.): Center for Evidence and Practice Improvement, Agency for Healthcare Research and Quality, ATTN: EPC SEADs Coordinator, 5600 Fishers Lane, Mail Stop 06E77D, Rockville, MD 20857

**FOR FURTHER INFORMATION CONTACT:** Kelly Carper, Telephone: 301–427–1656 or email: *epc@ahrq.hhs.gov.* 

**SUPPLEMENTARY INFORMATION:** The Agency for Healthcare Research and Quality has commissioned the Evidence-based Practice Centers (EPC) Program to complete a review of the evidence for *Digestible Carbohydrate* Intake and Maternal-Infant Outcomes: A *Systematic Review*. AHRQ is conducting this review pursuant to section 902 of the Public Health Service Act, 42 U.S.C. 299a.

The EPC Program is dedicated to identifying as many studies as possible that are relevant to the questions for each of its reviews. In order to do so, we are supplementing the usual manual and electronic database searches of the literature by requesting information from the public (*e.g.*, details of studies conducted). We are looking for studies that report on *Digestible Carbohydrate* Intake and Maternal-Infant Outcomes: A Systematic Review. The entire research protocol is available online at: https:// effectivehealthcare.ahrq.gov/products/ *carbohydrate-intake/protocol*. This is to notify the public that the EPC Program would find the following information on Digestible Carbohydrate Intake and Maternal-Infant Outcomes: A Systematic Review helpful:

• A list of completed studies that your organization has sponsored for this topic. In the list, please *indicate* whether results are available on *ClinicalTrials.gov along with the ClinicalTrials.gov trial number.* 

• For completed studies that do not have results on ClinicalTrials.gov, a summary, including the following elements, if relevant: study number, study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, primary and secondary outcomes, baseline characteristics, number of patients screened/eligible/ enrolled/lost to follow-up/withdrawn/ analyzed, effectiveness/efficacy, and safety results.

• A list of ongoing studies that your organization has sponsored for this topic. In the list, please provide the *ClinicalTrials.gov* trial number or, if the trial is not registered, the protocol for the study including, if relevant, a study number, the study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, and primary and secondary outcomes.

• Description of whether the above studies constitute *ALL Phase II and above clinical trials* sponsored by your organization for this topic and an index outlining the relevant information in each submitted file.

Your contribution is very beneficial to the Program. Materials submitted must be publicly available or able to be made public. Materials that are considered confidential; marketing materials; study types not included in the review; or information on topics not included in the review cannot be used by the EPC Program. This is a voluntary request for