

Consolidated Appropriations Act (CAA), 2023 (Pub. L. 117–238) established in section 4124 coverage of IOP services in CMHCs. The legislation extended Medicare coverage and payment of IOP services furnished by a CMHC beginning January 1, 2024, adding to the existing coverage and payment for PHP services in CMHCs. Section 4121 of the CAA, 2023 also established a new Medicare benefit category for services furnished and directly billed by Mental Health Counselors (MHCs) and Marriage and Family Therapists (MFTs).

The services provided by CMHCs must be furnished by, or under arrangement with a CMHC participating in the Medicare program. They must include the following:

- Prescribed by a physician and furnished under the general supervision of a physician.
- Subject to certification by a physician in accordance with 42 CFR 424.24(e)(1).
- Furnished under a treatment plan that meets the requirements of 42 CFR 424.24(e)(2).
- Provides outpatient services, including specialized outpatient services for children, elderly individuals, individuals with serious mental illness, and residents of its mental health service area who have been discharged from inpatient mental health facilities.
- Provides 24-hour-a-day emergency care services.
- Provides day treatment, partial hospitalization services (PHP) or intensive outpatient services (IOP) other than an individual's home or in an inpatient or residential setting, or psychosocial rehabilitation services.
- Provides screening for clients being considered for admission to State mental health facilities to determine the appropriateness of such services unless otherwise directed by State law.
- Meets applicable licensing or certification requirements for CMHCs in the state in which it is located.
- Provides at least 40 percent of its services to individuals who are not eligible for benefits under title XVIII of the Act.

We collect information on several health and safety aspects, such as *Client rights* (§ 485.910) *active treatment plans* (§ 485.916), *Quality assessment and performance improvement* (§ 485.917), and *governance* (§ 485.918).

The primary users of this information will be Federal and State agency

surveyors for determining through the survey process, whether a CMHC qualifies for approval or re-approval under Medicare. CMS and its contractors will use this information to review claims to determine whether the patient is eligible for the PHP or IOP benefit and whether the claim meets the criteria for coverage and Medicare payment. Lastly, the information will be used by CMHCs to ensure their own compliance with all requirements to assist in guiding their patient care and quality programs. *Form Number:* CMS–10506 (OMB control number: 0938–1245); *Frequency:* Occasionally; *Affected Public:* Private sector—Business or other for-profits and Not-for-profit organizations; *Number of Respondents:* 1,475; *Total Annual Responses:* 7,420; *Total Annual Hours:* 1,434. (For policy questions regarding this collection contact Claudia Molinar at 410–786–8445.)

William N. Parham, III,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970–0488]

Proposed Information Collection Activity; Provision of Child Support Services in IV–D Cases Under the Hague Child Support Convention; Federally Approved Forms

AGENCY: Office of Child Support Services, Administration for Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office of Child Support Services is requesting a 3-year extension of the Provision of Child Support Services in IV–D Cases under the Hague Child Support Convention; Federally Approved Forms (Office of Management and Budget (OMB) #: 0970–0488, expiration March 31, 2026). There are no changes requested to these forms.

DATES: *Comments due* December 1, 2025.

ADDRESSES: In compliance with the requirements of the Paperwork

Reduction Act of 1995, the Administration for Children and Families (ACF) is soliciting public comment on the specific aspects of the information collection described above. You can obtain copies of the proposed collection of information and submit comments by emailing infocollection@acf.hhs.gov. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: On January 1, 2017, the 2007 Hague Convention on the International Recovery of Child Support and Other Forms of Family Maintenance (the Convention) entered into force for the United States. This multilateral Convention contains provisions that, on a worldwide scale, establish uniform, simple, fast, and inexpensive procedures for processing international child support cases. Under the Convention, U.S. states process child support cases with other countries that have ratified the Convention under the requirements of the Convention and Article 7 of the Uniform Interstate Family Support Act (UIFSA 2008). To comply with the Convention, the United States implements the Convention's case processing forms.

State and federal law require states to use federally approved case processing forms. Section 311(b) of UIFSA 2008, which has been enacted by all 50 states, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands, requires states to use forms mandated by federal law. 45 CFR 303.7 also requires child support programs to use federally approved forms in intergovernmental IV–D cases unless a country has provided alternative forms as a part of its chapter in a Caseworker's Guide to Processing Cases with Foreign Reciprocating Countries.

Respondents: State agencies administering a child support program under title IV–D of the Social Security Act.

Annual Burden Estimates

Annual burden estimates have been updated to reflect a decrease in the nationwide child support case load since the most recent full OMB review and approval process in 2023. Therefore, the annual number of responses per respondent has decreased, resulting in an overall decrease in estimated annual burden. The number of respondents and estimated time per response has not changed.

Instrument	Total number of respondents	Total annual number of responses per respondent	Average burden hours per response	Total burden hours
Annex I: Transmittal form under Article 12(2)	54	37	1	1,998
Annex II: Acknowledgment form under Article 12(3)	54	74	0.5	1,998
Annex A: Application for Recognition and Enforcement, including restricted information on the applicant	54	15	0.5	405
Annex A: Abstract of Decision	54	4	1	216
Annex A: Statement of Enforceability of Decision	54	15	0.17	138
Annex A: Statement of Proper Notice	54	4	0.5	108
Annex A: Status of Application Report—Article 12	54	30	0.33	535
Annex B: Application for Enforcement of a Decision Made or Recognized in the Requested State, including restricted information on the applicant	54	15	0.5	405
Annex B: Status of Application Report—Article 12	54	30	0.33	535
Annex C: Application for Establishment of a Decision, including restricted information on the Applicant	54	4	0.5	108
Annex C: Status of Application Report—Article 12	54	7	0.33	125
Annex D: Application for Modification of a Decision, including Restricted Information on the Applicant	54	4	0.5	108
Annex D: Status of Application Report—Article 12	54	7	0.33	125
Annex E: Financial Circumstances Form	54	37	2	3,996
Annex F: Request for Specific Measures—Article 7(1)	54	2	0.17	18
Annex F: Request for Specific Measures—Response—Article 7(1)	54	7	0.17	64
Estimated Total Annual Burden Hours:	10,882

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. 654(20) and 666(f)

Mary C. Jones,
ACF/OPRE Certifying Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[OMB #: 0970–0554]

Expedited Office of Management and Budget Review and Public Comment: Placement and Transfer of Unaccompanied [Alien] Children Into ORR Care Provider Facilities

AGENCY: Office of Refugee Resettlement, Administration for Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office of Refugee Resettlement (ORR), Administration for Children and Families (ACF), U.S. Department of Health and Human Services, is requesting expedited review of an information collection request from the Office of Management and Budget (OMB) and inviting public comments on the proposed collection. This request will ensure that ORR can continue to properly enact its mandates and comply with all applicable authorities related to the placement of unaccompanied alien children into a restrictive placement.

DATES: *Comments due December 1, 2025.*

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

SUPPLEMENTARY INFORMATION:

Description: ACF is requesting that OMB grant a 180-day approval for this request under procedures for expedited processing (*see* 5 CFR 1320.13). In compliance with the PRA, ACF will request review under normal procedures within 180 days of the approval for this request. Any edits resulting from public comment will be incorporated into the submission under normal procedures.

ORR is proposing the below-listed changes to the *Notice of Placement in a Restrictive Setting (Form P–4)* and *Unaccompanied [Alien] Child Referral (aka Intakes Placement Checklist) (Form P–7)*. The proposed changes are related to current administration priorities, to align the placement criteria in forms with the criteria found in 45 CFR 410.1105 and UAC Policy Guide sections 1.2.4 and 1.4.6 and to meet requirements in the *Lucas R. Disabilities Settlement Agreement* (Case No. 2:18–CV–05741 DMG PLA), and *Flores* litigation (Case No. CV85–4544–RJK (C.D. Cal. 1996)). Some of these are nonsubstantive in nature but are being submitted with the items that warrant emergency approval to ensure all updates are reviewed and approved and ready for use as soon as possible.