

systems-level. The HIVQM Module also supports the requirement imposed by the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards that recipients relate financial data to performance accomplishments for their federal awards (2 CFR 200.301). The HIVQM Module helps recipients set goals and monitor performance measures and quality improvement projects. The use of the HIVQM Module is voluntary for RWHAP recipients. HRSA proposes the following modifications:

- “Gender” will be removed and replaced with “Sex at Birth.”
- The available response options are: “Male,” “Female,” “Unknown.”

A 60-day notice was published in the **Federal Register** on June 3, 2025, Volume 90, No. 105, pages 23532–33. There was one request for clarification about the nature of the revisions in the collection. Therefore, the 30-day FRN has language explaining the changes to the collection.

Need and Proposed Use of the Information: The HIVQM Module supports recipients and subrecipients in

their clinical quality management programs, performance measurement, service delivery, and monitoring of client health outcomes and quality of HIV services. The HIVQM Module is accessible via the RWHAP Services Report, an existing online portal that RWHAP recipients use for required data collection of their services. Recipients may enter performance measure data into the HIVQM Module four times a year and then generate reports to assess their performance. Recipients have the option to enter data for specific populations for a subset of performance measures. Recipients may also compare their performance to other recipients in their state, region, and in the nation. Additionally, recipients can choose the performance measures they want to monitor and enter data accordingly. For recipients and sub-recipients participating in the Centers for Medicare & Medicaid Incentive Programs, such as the Medicare Promoting Interoperability Program and the Merit-based Incentive Payment System, the HIVQM Module may be used to monitor the HRSA measures that qualify and comply with

the requirements to receive incentives from these programs.

Likely Respondents: RWHAP Part A, Part B, Part C, and Part D recipients and their sub-recipients.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and use technology and systems for the purpose of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

The average burden per response declined from 1 hour to 0.2333 hours (approximately 14 minutes) based on pilot testing of the HIVQM Module.

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
HIVQM Report	2,063	4	8,252	0.2333	1,925
Total	2,063	8,252	1,925

Maria G. Button,
Director, Executive Secretariat.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Docket No. OS–0945–New–60D]

Agency Information Collection Request; Reopening of Comment Period

AGENCY: Office of the Secretary, HHS.
ACTION: Notice; reopening of comment period.

SUMMARY: The Department of Health and Human Services (the Department) is reopening the comment period for the Notice, “Agency Information Collection Request; 60-Day Public Comment Request”, published in the **Federal Register** on September 11, 2025. The Department is taking this action to allow

interested persons additional time to submit comments.

DATES: The comment period for the Notice published September 11, 2025, at 90 FR 44077, is reopened. Comments must be received by 5 p.m., eastern time, on January 5, 2026.

ADDRESSES: You may submit comments on this information collection request, identified by Docket No. OS–0945–New–60D, by emailing Conner O’Brien at *OCRPrivacy@hhs.gov*.

FOR FURTHER INFORMATION CONTACT: Conner O’Brien at *OCRPrivacy@hhs.gov* or (202) 240–3110.

SUPPLEMENTARY INFORMATION: On September 11, 2025, the Department published a Notice in the **Federal Register** to solicit public comments on a new agency information collection request for the form, “Confidentiality of Substance Use Disorder Patient Records Complaint.”

Because of a technical issue, the Department was unable to receive public comments on the information

collection request for part of the comment period, between September 27, 2025, and November 10, 2025.

Therefore, to fulfill the requirement under the Paperwork Reduction Act of 1995 to provide 60 days for public comment on an information collection request, the Department is reopening the comment period until January 5, 2026.

Catherine Howard,
Paperwork Reduction Act Reports Clearance Officer, Department of Health and Human Services, Office of the Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Aging; Notice of Meeting

Pursuant to section 1009 of the Federal Advisory Committee Act, as