

be certified as a Housing Associate over the next three years will be one, with one response per applicant. The estimate for the average hours per application is 14 hours. Therefore, the estimate for the total annual hour burden for all applicants is 14 hours (1 applicant × 1 response per applicant × 14 hours = 14 hours).

II. Current Housing Associates

FHFA estimates that the total annual average number of existing Housing Associates over the next three years will be 75, with one response per Housing Associate required to comply with the regulatory reporting requirements. The estimate for the average hours per response is 4 hours. Therefore, the estimate for the total annual hour burden for current Housing Associates is 300 hours (75 certified Housing Associates × 1 response per associate × 4 hours = 300 hours).

C. Comments Request

In accordance with the requirements of 5 CFR 1320.8(d), FHFA published an initial notice and request for public comments regarding this information collection in the **Federal Register** on August 20, 2025.⁶ The 60-day comment period closed on October 20, 2025. FHFA received no comments.

FHFA requests written comments on the following: (1) Whether the collection of information is necessary for the proper performance of FHFA functions, including whether the information has practical utility; (2) the accuracy of FHFA's estimates of the burdens of the collection of information; (3) ways to enhance the quality, utility, and clarity of the information collected; and (4) 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.

Shawn Bucholtz,

Chief Data Officer, Federal Housing Finance Agency.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Public Comment Request; Health Workforce Connector, OMB No. 0906–0031 Revision

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In compliance with the requirement for opportunity for public comment on proposed data collection projects of the Paperwork Reduction Act of 1995, HRSA announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on this ICR should be received no later than March 2, 2026.

ADDRESSES: Submit your comments to paperwork@hrsa.gov or mail the HRSA Information Collection Clearance Officer, Room 13N82, 5600 Fishers Lane, Rockville, Maryland 20857.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email paperwork@hrsa.gov or call Samantha Miller, the HRSA Information Collection Clearance Officer, at (301) 443–3983.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the ICR title for reference.

Information Collection Request Title: Bureau of Health Workforce Health Workforce Connector OMB No. 0906–0031–Revision.

Abstract: The Health Workforce Connector's (HWC) goal is to help connect skilled professionals to communities in need by allowing approved site points of contact (POCs) at National Health Service Corps (NHSC), Nurse Corps Scholarship and Loan Repayment Programs (Nurse Corps), Substance Use Disorder Treatment and Recovery (STAR) Loan Repayment Program, Pediatric Specialty (PS) Loan Repayment Program, Nursing Training, and Teaching Health Center Graduate Medical Education (THCGME) sites to post available opportunities and update site profiles. The HWC provides a central platform to connect

participants, including but not limited to those in the NHSC, Nurse Corps, STAR, PS, Nursing Training, and THCGME programs with facilities that are approved for their programs. The HWC has become a resource that connects any health care professional or student interested in providing primary care services in underserved communities with facilities in need of health care providers. The HWC also allows users to create a profile, search for approved sites, find job and training opportunities, and connect with other clinicians who are similarly interested in working with underserved populations. The HWC is searchable by site POCs. Individuals can use the HWC's search capability with Google Maps.

Need and Proposed Use of the Information: Information will be collected from users in two ways:

(1) Account Creation: For job seekers, creating an account is optional. To create an account the user must enter their first name, last name, and email address. Those mandatory fields will be used to send an automated email allowing the user to validate their login credentials. In addition, for job seekers participating in the programs listed above, their HWC account will be linked to their existing program file in the Bureau of Health Workforce Management Information Systems Solution database and allow an initial import of existing data at the request of the user.

(2) Profile Completion: Users may fill out a profile, but this function will be optional and includes fields such as location, discipline, specialty, and languages spoken. The information collected, if published by the user, can be searched by approved site POCs seeking potential candidates for health care job opportunities at their site. Job seekers also can set their security and privacy settings on their accounts to make their profiles searchable by other end users or private at any time. In addition, all information collected through the HWC will be stored within existing secure Bureau of Health Workforce Management Information Systems Solution databases and will be used internally for report generation on an as-needed basis.

HRSA is requesting a revision and is seeking to use the previously approved forms. The revisions are because of an increase in the estimated annual burden due to an increase in web page traffic, leading to an increase in the number of accounts created.

Likely Respondents: Potential users include individuals searching for a health care job opportunity at a NHSC,

⁶ See 90 FR 40601 (Aug. 20, 2025).

Nurse Corps, STAR, PS, Nursing Training, or THCGME approved health care facility and health care facility POCs searching for potential candidates to fill open health care job opportunities at their sites.

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 utilize 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.

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
Account Creation	5,330	1	5,330	0.08	426.40
Complete Profile	5,014	1	5,014	1.00	5,014.00
Total	15,330	5,330	5,440.40

¹ The 5,014 respondents who complete their profiles are a subset of the 5,330 respondents who create accounts.

HRSA specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Maria G. Button,

Director, Executive Secretariat.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Public Comment Request; Information Collection Request Title: Ryan White HIV/AIDS Program: Expenditures Reports, OMB No. 0915-0390—Revision

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In compliance with the requirement for opportunity for public comment on proposed data collection projects of the Paperwork Reduction Act of 1995, HRSA announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to

OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on this ICR should be received no later than March 2, 2026.

ADDRESSES: Submit your comments to paperwork@hrsa.gov or mail the HRSA Information Collection Clearance Officer, Room 13N82, 5600 Fishers Lane, Rockville, Maryland 20857.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email paperwork@hrsa.gov or call Samantha Miller, the HRSA Information Collection Clearance Officer, at (301) 443-3983.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the ICR title for reference.

Information Collection Request Title: Ryan White HIV/AIDS Program: Expenditures Reports Forms, OMB No. 0915-0390—Revision.

Abstract: HRSA administers the Ryan White HIV/AIDS Program (RWHAP) authorized under Title XXVI of the Public Health Service Act. The RWHAP Expenditures Reports allow HRSA to monitor and track the use of grant funds for compliance with statutory, program and grants requirements. Recipients funded under RWHAP Parts A, B, C, and D are required to report financial data to HRSA at the end of their grant budget period. The Expenditures Report requests information recipients already collect, including the use of RWHAP grant funds for core medical and support services; and on various program components, such as administration, planning and evaluation, and clinical quality

management. RWHAP Parts A and B recipients funded under the Ending the HIV Epidemic in the U.S. (EHE) initiative are required to report expenditures of the grant budget period in the EHE Expenditure Report. This allows HRSA to track and report progress toward meeting the EHE goals.

For this submission, HRSA proposes to extend the following reports:

- *RWHAP Part A Expenditures Report.*
- *RWHAP Part B Expenditures Report.*
- *RWHAP Part B Supplemental Expenditures Report.*
- *RWHAP Part C Expenditures Report.*
- *RWHAP Part D Expenditures Report.*
- *Ending the HIV Epidemic (EHE) Initiative Expenditures Reports.*

Need and Proposed Use of the Information: Accurate expenditure and service contract records of recipients receiving RWHAP and EHE funding are necessary for HRSA to fulfill its monitoring and oversight responsibilities.

Likely Respondents: RWHAP Part A, Part B, Part C, Part D and EHE 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