

**FOR FURTHER INFORMATION CONTACT:** For additional information about the information collection, contact Nicole Ongele, (202) 418–2991.

**SUPPLEMENTARY INFORMATION:**

*OMB Control Number:* 3060–0790.

*Title:* Section 68.110 (b), Availability of Inside Wiring Information.

*Form Number:* N/A.

*Type of Review:* Extension of a currently approved collection.

*Respondents:* Business or other for-profit.

*Number of Respondents and Responses:* 200 respondents; 1,200 responses.

*Estimated Time per Response:* 1 hour.

*Frequency of Response:*

Recordkeeping requirement and third party disclosure requirement.

*Obligation to Respond:* Mandatory.

Providers of wireline telecommunications services that willfully or repeatedly fail to comply with this rule are subject to forfeitures under 47 CFR 1.80. Statutory authority for this collection of information is contained in 47 U.S.C. 151, 154, 201–205, 218, 220 and 405 of the Communications Act of 1934, as amended.

*Total Annual Burden:* 1,200 hours.

*Total Annual Cost:* \$5,000.

*Needs and Uses:* Section 68.110(b) requires that any available technical information concerning carrier-installed wiring on the customer's side of the demarcation point, including copies of existing schematic diagrams and service records, shall be provided by the telephone company upon request of the building owner or agent thereof. The provider of wireline telecommunications services may charge the building owner a reasonable fee for this service, which shall not exceed the cost involved in locating and copying the documents. In the alternative, the provider may make these documents available for review and copying by the building owner or his agent. In this case, the wireline telecommunications carrier may charge a reasonable fee, which shall not exceed the cost involved in making the documents available, and may also require the building owner or his agent to pay a deposit to guarantee the documents' return. The information is needed so that building owners may choose to contract with an installer of their choice on inside wiring maintenance and installation services to modify existing wiring or assist with the installation of additional inside wiring.

*OMB Control Number:* 3060–0859.

*Title:* Suggested Guidelines for Petitions for Ruling Under Section 253

of the Communications Act of 1934, as amended.

*Form Number:* N/A.

*Type of Review:* Extension of a currently approved collection.

*Respondents:* Business or other for-profit entities and State, Local, or Tribal Governments.

*Number of Respondents and*

*Responses:* 24 respondents; 24 responses.

*Estimated Time per Response:* 63–125 hours.

*Frequency of Response:* On occasion reporting requirement.

*Obligation to Respond:* Voluntary. Statutory authority for this information collection is contained in 47 U.S.C. 253 of the Communications Act of 1934, as amended.

*Total Annual Burden:* 1,698 hours.

*Total Annual Cost:* No cost.

*Needs and Uses:* The Commission will submit this expiring information collection to the OMB after this 60-day comment period in order to obtain the full three-year clearance from them. The Commission is requesting an extension (with no change in the reporting requirement). There is no reduction in the estimated number of respondents/responses and the annual burden hours. Although very few petitions for preemption under section 253 have been filed in the past few years, there is reason to believe that the current estimate is more likely to reflect future developments than a reduction in the number of estimated filings. The Commission published a Public Notice in November 1998 which established suggested guidelines for the filing of petitions for preemption pursuant to section 253 of the Communications Act of 1934, as amended, as well as suggested guidelines for the filing of comments opposing such requests for preemption. The Commission will use this information to resolve petitions for preemption of state or local statutes, regulations, or other state or local legal requirements that are alleged to prohibit or have the effect of prohibiting any entity from providing a telecommunications service. Section 253 of the Communications Act of 1934, as amended, which was added by the Telecommunications Act of 1996, requires the Commission, with certain important exceptions, to preempt (to the extent necessary) the enforcement of any state or local statute or regulation, or other state or local legal requirement that prohibits or has the effect of prohibiting any entity from providing any interstate or intrastate telecommunications service. The Commission's consideration of preemption under section 253 typically

begins with the filing of a petition by an aggrieved party. The Commission typically places such petitions on public notice and requests comment by interested parties. The Commission's decision is based on the public record, generally composed of the petition and comments. The Commission has considered a number of preemption items since the passage of the Telecommunications Act of 1996, and believes it is in the public interest to inform the public of the information necessary for full consideration of the issues likely to be involved in section 253 preemption proceedings. In order to render a timely and informed decision, the Commission expects petitioners and commenters to provide it with relevant information sufficient to describe the legal regime involved in the controversy and to provide the factual information necessary for a decision.

Federal Communications Commission.

**Marlene Dortch,**

*Secretary, Office of the Secretary.*

[FR Doc. 2026–00890 Filed 1–16–26; 8:45 am]

**BILLING CODE 6712–01–P**

## FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION

### Sunshine Act Meetings

**TIME AND DATE:** 10 a.m., Thursday, February 19, 2026.

**PLACE:** The meeting will be held via remote means and/or in the Richard V. Backley Hearing Room, Room 511, 1331 Pennsylvania Avenue NW, Suite 504 North, Washington, DC 20004.

**STATUS:** Closed.

**MATTERS TO BE CONSIDERED:** The Commission will conduct a meeting closed to the public to consider: *Secretary of Labor v. Rulon Harper Construction, Inc.*, (Issues include: (1) whether the Judge abused her discretion in denying the motions to approve settlement and (2) whether the Secretary has unreviewable discretion to remove an S&S designation from a contested citation without the Commission's approval under section 110(k) of the Mine Act). Commissioners will attend the meeting. Commission staff members who provide technological support and other Commission staff may also be present as necessary. This meeting is closed to the public pursuant to 5 U.S.C. 552b(c)(10) on the basis of the Commission's consideration or disposition of a "particular case of formal agency adjudication."

**CONTACT PERSON FOR MORE INFORMATION:** Rory P. Smith (202) 525–8649/(202)

708–9300 for TDD Relay/1–800–877–8339 for toll free.

*Authority:* 5 U.S.C. 552b.

Dated: January 15, 2026.

**Rory P. Smith,**

*Attorney-Advisor.*

[FR Doc. 2026–01000 Filed 1–15–26; 4:15 pm]

**BILLING CODE 6735–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[30Day–26–0666]

#### Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled “National Healthcare Safety Network (NHSN)” to the Office of Management and Budget (OMB) for review and approval. CDC previously published a “Proposed Data Collection Submitted for Public Comment and Recommendations” notice on July 18, 2025 to obtain comments from the public and affected agencies. CDC received three comments related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570.

Comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW, Washington, DC 20503 or by fax to (202) 395–5806. Provide written comments within 30 days of notice publication.

#### Proposed Project

National Healthcare Safety Network (NHSN) (OMB Control No. 0920–0666—Exp. 12/31/2027)—Revision—National Center for Emerging Zoonotic and Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

The Division of Healthcare Quality Promotion (DHQP), National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC) collects data from healthcare facilities in the National Healthcare Safety Network (NHSN) under OMB Control No. 0920–0666. NHSN provides facilities, health departments, states, regions, and the nation with data necessary to identify problem areas, measure the progress of prevention efforts, and ultimately eliminate healthcare-associated infections (HAIs) nationwide. NHSN also allows healthcare facilities to track blood safety errors and various HAI prevention practice methods such as healthcare personnel influenza vaccine status and corresponding infection control adherence rates.

Enrollment in NHSN has continuously increased, with over 37,000 actively reporting healthcare facilities across the U.S. Of the total enrolled healthcare facilities, there are over 6,000 acute care facilities; 8,400 dialysis facilities; 600 long-term acute care facilities; 400 inpatient rehabilitation facilities; 800 inpatient psychiatric facilities; nearly 20,000 long-term care facilities; and 6,000 ambulatory surgery facilities. NHSN currently has eight components: Patient Safety (PS), Healthcare Personnel Safety (HPS), Biovigilance (BV), Long-Term Care Facility (LTCF), Outpatient Procedure (OPC), Dialysis Component, Neonatal Component, and Medication Safety Component.

This Revision includes proposed changes to 68 approved and five new NHSN data collections. CDC requests OMB approval for an estimated 3,836,550 annual burden hours. There are no additional costs to respondents other than their time to participate.

#### ESTIMATED ANNUALIZED BURDEN HOURS

Form No. & name	Number of respondents	Number of responses per respondent	Average burden per response (min/hour)
57.100 NHSN Registration Form .....	2,000	1	5/60
57.101 Facility Contact Information .....	2,000	1	10/60
57.102 NHSN Help Desk Customer Satisfaction Survey .....	26,400	1	2/60
57.103 Patient Safety Component—Annual Hospital Survey .....	5,400	1	138/60
57.104 NHSN Facility Administrator Change Request Form .....	800	1	5/60
57.105 Group Contact Information .....	1,000	1	5/60
57.106 Patient Safety Monthly Reporting Plan .....	7,821	12	15/60
57.108 Primary Bloodstream Infection (BSI) .....	6,000	12	43/60
57.111 Pneumonia (PNEU) .....	1,800	2	33/60
57.112 Ventilator-Associated Event (VAE) .....	5,463	8	31/60
57.113 Pediatric Ventilator-Associated Event (PedVAE) .....	334	1	33/60
57.114 Urinary Tract Infection (UTI) .....	6,000	12	25/60
57.115 Custom Event .....	600	91	38/60