

document(s) that are accepting comments.

2. By *regular mail*. You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier: ___/OMB Control Number: __, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, please access the CMS PRA website by copying and pasting the following web address into your web browser: <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing>.

FOR FURTHER INFORMATION CONTACT: William N. Parham at (410) 786–4669.

SUPPLEMENTARY INFORMATION:

Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

Under the PRA (44 U.S.C. 3501–3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. The term “collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA requires federal agencies to publish a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice.

Information Collection

1. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Social Security Office (SSO) Report of State Buy-in

Problems; *Use:* A State can enter into an agreement to provide Medicare protection to individuals who are members of a Buy-in coverage group, as specified in the State's Buy-in agreement. When problems arise that cannot be resolved through the normal data exchange process, clerical actions are required. This collection is intended to help identify and resolve beneficiary complaints and inquiries regarding State Buy-in eligibility. *Form Number:* CMS–1957 (OMB control number: 0938–0035); *Frequency:* On occasion; *Affected Public:* Individuals and households; *Number of Respondents:* 1,400; *Total Annual Responses:* 1,400; *Total Annual Hours:* 467. (For policy questions regarding this collection contact Keith Johnson at 410–786–1148.)

William N. Parham, III,

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

[FR Doc. 2026–06018 Filed 3–26–26; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Temporary Assistance for Needy Families (TANF) Pilot Evaluation

AGENCY: Office of Planning, Research, and Evaluation; Administration for Children and Families; U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office of Planning, Research, and Evaluation (OPRE), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is proposing to collect data for the new Temporary Assistance for Needy Families (TANF) Pilot Evaluation.

DATES: Comments due May 26, 2026.

ADDRESSES: In compliance with the requirements of the Paperwork Reduction Act of 1995, 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 opreinfocollection@acf.hhs.gov. Identify

all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The *TANF Pilot Evaluation* will include implementation and outcomes studies of pilot programs authorized under the Fiscal Responsibility Act (FRA) of 2023 (Pub. L. 118–5), which authorizes HHS to select up to five states to test new outcomes-based performance benchmarks in the TANF program. The implementation study will describe pilot design, staffing, service provision, partnerships, contextual details, and factors that support or hinder the pilot's implementation. The outcomes study will assess changes in participant outcomes using surveys and administrative data. This new information collection request includes a semi-structured discussion guide, staff survey, time-use survey, cost and resource workbooks, and in-depth participant interview guide for the implementation study. It also includes a 12-month post-TANF-exit survey for the outcomes study. These instruments will provide information on how states implement the pilots, how services and staffing evolve, and how outcomes change under the new performance benchmarks. The data will be used to produce a report on outcomes to be submitted to Congress, as required by the FRA; inform future TANF policy development; and contribute to the broader evidence base on outcomes-based performance monitoring.

Respondents: Most of the implementation study data collection instruments will be conducted with TANF staff including state and local-level leadership staff, data specialists, supervisors, and frontline staff. The in-depth interview guide will be conducted with TANF participants. The 12-month post-TANF-exit survey will be conducted with TANF participants who provided contact information through the Study Information Form, which was approved under ACF's generic clearance for formative research (Office of Management and Budget #: 0970–0356), and agreed to be contacted for this survey.

Annual Burden Estimates

Instruments 1, 2, and 5 will be tailored based on the respondent and, therefore, the burden table shows the breakdown by respondent type.

Instrument	Respondent	Total number of respondents	Total number of responses per respondent	Average burden per response	Total burden hours (3 years)	Annual burden hours
Instrument 1: Semi-structured program discussion guide.	state-level leadership staff	50	6	1.5	450	150
	local-level leadership staff	200	6	1.5	1,800	600
	data specialists	10	6	1	60	20
	supervisors	100	6	1	600	200
	frontline staff	200	6	1	1,200	400
Instrument 2: Leadership and staff survey	local-level leadership staff	500	2	0.33	330	110
	supervisors	500	2	0.33	330	110
Instrument 3: Staff survey	frontline staff	2,140	2	0.33	1412	471
Instrument 4: Staff time use survey	frontline staff	2,140	9	0.17	3274	1,091
Instrument 5: Pilot costs and resources workbook	state-level leadership staff	10	3	4	120	40
	local-level leadership staff	10	3	4	120	40
Instrument 6: In-depth participant interview guide	participants	100	1	1.25	125	42
Instrument 7: 12-Month Post-TANF-Exit Survey	participants	3,000	1	0.75	2,250	750
Estimated Total Annual Burden Hours	4,024

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. 613.)

Mary C. Jones,
ACF/OPRE Certifying Officer.
 [FR Doc. 2026-05938 Filed 3-26-26; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970-0604]

Submission for Office of Management and Budget Review; Administration for Children and Families Congressionally Directed Community Projects—Uniform Project Description

AGENCY: Office of Planning, Research, and Evaluation, Administration for

Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Administration for Children and Families (ACF) Office of Planning, Research, and Evaluation (OPRE) is requesting a 3-year extension with revisions to the information collection activities approved by the Office of Management and Budget (OMB): ACF Congressionally Directed Community Projects—Universal Project Description (CDCP-UPD)(OMB#: 0970-0604, expiration March 31, 2026). Revisions are based on lessons learned from previous years. Language is simplified for application requirements. This is expected to reduce the application burden.

DATES: *Comments due April 27, 2026.*

ADDRESSES: The public may view and comment on this information collection request at: https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202603-0970-013. You can also obtain copies of the proposed collection of information by emailing opreinfocollection@acf.hhs.gov. Identify all emailed requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: CDCP-UPD recipients are identified annually by Congress through Appropriations for ACF. The CDCP-UPD provides standard language and sections available for use by ACF program offices to solicit the required project description and project budget information from recipients of CDCP projects. Applications are required for CDCP as prescribed by HHS regulations 2 CFR 200.206. In addition to the

information required by regulation, the CDCP-UPD provides a selection of text options for the program offices to communicate the application requirements to the recipients, as required by 2 CFR 200.207.

The CDCP-UPD gathers information regarding the CDCP recipients' project activities, timeline, organizational capacity, and budget justification. The CDCP-UPD ensures sufficient information is obtained to assess risk, identify needs for technical assistance and monitoring, and address other requirements of Congress, ACF, HHS, OMB, and funding and statutory regulation.

The CDCP-UPD has been streamlined and revised to improve navigation and usability. Critical required information is highlighted and easier to find, unnecessary or redundant information removed, language simplified and some sections reformatted for easier reading.

Respondents: The CDCP-UPD recipients are organizations identified annually by Congress under annual appropriations. It is estimated that 125 CDCP recipients will be identified annually in future ACF appropriations.

Annual Burden Estimates

The revisions will reduce respondent burden by decreasing the average time required to complete the application. The streamlined format will improve navigability, allowing applicants to more easily identify required information. Simplified language and formatting will clarify application requirements and reduce the submission of unnecessary information.

Instrument	Annual number of respondents	Total number of responses per respondent	Average burden hours per response	Annual burden hours
CDCP-UPD	125	1	20	2,500