Information collection title	Total number of respondents	Annual number of responses per respondent	Average burden hours per response	Annual burden hours
Income withholding orders/termination of employment/income status (Employers and other income withholders)	1,214,289	5.23	0.033	209,574
Electronic income withholding orders/termination of employment/income status (Employers and other income withholders)	48,978	41.56	0.008	16,284
State Programming	18	1	534	9,612
Estimated Annual Burden Total				520,955

We are also requesting to extend approval of the currently approved IWO for one additional year to allow states to program their systems to accommodate the proposed changes to the form, sample form, instructions, and e-IWO Record Layout. Once the system is programmed, states will then be required to use the revised version of the IWO and e-IWO.

(Authority: 42 U.S.C. 666(a)(1), (a)(8), and (b)(6).)

Mary C. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2026–13910 Filed 7–9–26; 8:45 am]

BILLING CODE 4184–41–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Office of Management and Budget #: 0970–0519]

Submission for Office of Management and Budget Review; National Human Trafficking Training and Technical Assistance Center Evaluation Package

AGENCY: Office on Trafficking in Persons, Administration for Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Office on Trafficking on Persons (OTIP), Administration for Children and Families (ACF), U.S. Department of Health and Human Services, is requesting to reinstate Office of Management and Budget (OMB) approval of an information collection, with proposed changes: National Human Trafficking Training and Technical Assistance Center (NHTTAC) Evaluation Package (OMB #: 0970–0519). The OMB number was discontinued due to delays in publishing the first **Federal Register** Notice. Data collection has been put on hold until this information collection is reinstated.

DATES: *Comments due* August 10, 2026.

ADDRESSES: The public may view and comment on this information collection request at: *https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202607-0970-003.* You can also obtain copies of the proposed collection of information by emailing *infocollection@acf.hhs.gov.* Identify all emailed requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: OTIP's NHTTAC delivers training and technical assistance (T/TA) to inform and deliver a public health response to trafficking. In applying a public health approach, NHTTAC builds the capacity of professionals, organizations, and communities to identify and respond to the complex needs of all individuals who have experienced trafficking or who have increased risk for trafficking and address the root causes that put individuals, families, and communities at risk of trafficking. These efforts ultimately help improve the availability and delivery of coordinated and trauma-informed services before, during, and after an individual's trafficking exploitation.

NHTTAC hosts a variety of services, programs, and facilitated T/TA sessions to improve service provision to people who have experienced trafficking or who have increased risk factors for trafficking, including the Stop, Observe, Ask, and Respond (SOAR) to Health and Wellness training; specialized T/TA; NHTTAC Customer Support; and information through resources and materials about trafficking. This information collection is intended to collect feedback from participants to assess a diverse range of T/TA provided by NHTTAC. Revisions have been made in order to reduce respondent burden where applicable. Additionally, since this collection was last renewed, the SOAR Demonstration Grant Program went into effect. The program's goal is to fund the implementation of SOAR trainings and related capacity building efforts to identify, treat, and respond to clients who have experienced human trafficking in healthcare settings. Feedback from SOAR Demonstration Grant Program recipients who participate in NHTTAC SOAR offerings is obtained through instruments approved within this NHTTAC Evaluation Package (0970–0519). Burden estimates have been adjusted to account for these SOAR Demonstration Grant Program participants where applicable.

Respondents: NHTTAC T/TA participants include OTIP grant recipients, including SOAR Demonstration Grant program recipients, individuals with lived experience, professionals who interact with and provide services to individuals who have experienced trafficking or are at risk of trafficking, including healthcare, behavioral health, public health, and human service practitioners, organizations, and communities.

Respondents: NHTTAC T/TA participants include OTIP grant recipients, including SOAR Demonstration Grant program recipients, individuals with lived experience, professionals who interact with and provide services to individuals who have experienced trafficking or are at risk of trafficking, including healthcare, behavioral health, public health, and human service practitioners, organizations, and communities.

ANNUAL BURDEN ESTIMATES

Instrument	Total number of respondents	Total number of responses per respondent	Average burden hours per response	Total burden hours	Annual burden hours
Universal T/TA Participant Feedback	1,500	1	0.43	645	215
Long Version (full form); Short Version (partial form)	225,000	1	0.10	22,500	7,500
Intensive T/TA Participant Feedback	600	1	1.17	702	234
Follow-Up Feedback	8,000	1	0.50	4,000	1,333
Qualitative Guide	2,000	1	1.50	3,000	1,000
Network Survey	600	1	1.00	600	200
Client Satisfaction Survey	1,000	1	0.08	80	27
Resources Feedback	500	1	0.08	40	13
Requester Feedback	200	1	0.12	24	8
Estimated Total Annual Burden Hours					10,530

Authority: 22 U.S.C. 7104 and 22 U.S.C. 7105(c)(4).

Mary C. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2026–13922 Filed 7–9–26; 8:45 am]

BILLING CODE 4184–73–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Charter Re-Establishment for the National Advisory Committee on Rural Health and Human Services

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

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act, HHS hereby gives notice that the National Advisory Committee on Rural Health and Human Services (NACRHHS) has been re-established. The effective date of the charter re-establishment is July 17, 2026.

FOR FURTHER INFORMATION CONTACT: Sarah Heppner, Federal Office of Rural Health Policy, HRSA, 5600 Fishers Lane, Rockville, Maryland 20857; 301–443–0835 or *FORHPIOAA@hrsa.gov.*

SUPPLEMENTARY INFORMATION: NACRHHS is authorized by Section 222 of the Public Health Service (PHS) Act (42 U.S.C. 217a). NACRHHS provides advice and recommendations to the Secretary of HHS (Secretary) on issues related to how HHS and its programs serve rural communities. The Committee will focus attention and existing resources on rural health and human service challenges, such as the provision and financing of health care and human services in rural areas.

The re-established charter for the NACRHHS was approved on June 22, 2026. The charter appears to comply with FACA, GSA Final Rule, and current Secretariat guidance. Re-establishment of the NACRHHS charter gives authorization for the committee to operate until July 17, 2028.

A copy of the NACRHHS charter is available on the NACRHHS website at *https://www.hrsa.gov/advisory-committees/rural-health.* A copy of the charter also can be obtained by accessing the FACA database that is maintained by the Committee Management Secretariat under the General Services Administration. The website address for the FACA database is *http://www.facadatabase.gov/.* The public interest determination language is included below.

Information on the following factors for the committee is provided to the Secretariat to demonstrate that reestablishing the committee is in the public interest:

1. Annual budget: $492,358.

a. Federal personnel on a full-time equivalent (FTE) basis: 1.5 FTEs.

b. Other Federal internal costs: $285,358.

c. Proposed payments to members: $27,000.

d. Proposed number of members: 15.

e. Reimbursable costs: $30,000.

2. If applicable, the total dollar value of grants expected to be recommended during the fiscal year: N/A.

3. Criteria for selecting members to ensure the committee has the necessary expertise and fairly balanced membership: Members of the Committee shall be Special Government Employees and knowledgeable in the fields of delivery, financing, research, development, and administration of health care and human services in rural areas. Members shall include representatives from rural community-based organizations, rural health care and human service providers and administrators, and other rural interest groups. Committee members should reflect a broad array of expertise, including Titles XVIII, IX, and XXI of the Social Security Act, and have knowledge of the range of rural-focused health programs under the purview of the Secretary of Health and Human Services. Members should also be knowledgeable in the fields of rural human and social services, including issues related to Native Americans, transportation, children and family services, social work, services for the elderly, and rural economic development. Approximately two thirds of the members should be rural health experts and approximately one third should be rural human services experts. Membership balance is not static, and the points of view needed may change depending on the emerging priorities for rural communities.

The Department will give close attention to geographic distribution to reflect the broad array of perspectives across the country. Appointments shall be made without discrimination on the basis of age, race, sex, religion, or socioeconomic status.

The Committee's membership aims to represent the diversity of the United States by drawing on the wide range of expertise and experience available in the rural population.

4. List of all other Federal advisory committees of the agency:

Advisory Commission on Childhood Vaccines
Advisory Committee on Interdisciplinary, Community-Based Linkages
Advisory Council on Blood Stem Cell Transplantation
Council on Graduate Medical Education
National Advisory Council on Nurse Education and Practice
National Advisory Council on the National Health Service Corps