TABLE 1—ESTIMATED ANNUAL REPORTING BURDEN [1]—Continued

21 CFR section; activity	Number of respondents	Number of responses per respondent	Total annual responses	Average burden per response	Total hours
Total	654				

[1] There are no capital costs or operating and maintenance costs associated with this collection of information.

Based on a review of the information collection since our last request for OMB approval, we have made no adjustments to our burden estimate.

Grace R. Graham,

Deputy Commissioner for Policy, Legislation, and International Affairs.

[FR Doc. 2026–19283 Filed 9–18–26; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Notice of Supplemental Funding, Medicare Rural Hospital Flexibility Program Evaluation Cooperative Agreement

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

ACTION: Notice of supplemental funding.

SUMMARY: HRSA is awarding supplemental funding under the Medicare Rural Hospital Flexibility (Flex) Program Evaluation Cooperative Agreement to one award recipient in fiscal year 2026 to expand analysis, evaluation, and dissemination activities that support Critical Access Hospitals (CAHs) and State Flex Programs.

FOR FURTHER INFORMATION CONTACT: Sheena Johnson, Deputy Division Director, Hospital State Division, Federal Office of Rural Health Policy, HRSA, at *sjohnson@hrsa.gov* and 872–271–6370.

SUPPLEMENTARY INFORMATION:

Intended Recipient of the Award: Regents of the University of Minnesota.

Amount of Non-Competitive Award: $420,000.

Project Period: July 1, 2026, to June 30, 2027.

Assistance Listing Number: 93.241.

Award Instrument: Cooperative Agreement.

Authority: Section 711(b)(5) of the Social Security Act.

TABLE 1—RECIPIENT AND AWARD AMOUNT

Grant No.	Award recipient name	City, state	Award amount
U27RH01080	Regents of the University of Minnesota	Minneapolis, MN	$420,000

Justification: The FLEX Program Evaluation Cooperative Agreement supports rural health care improvement by analyzing and presenting CAH data, capturing best practices, and developing resources that inform quality, financial, operational, population health, and emergency medical services improvement efforts. This funding will provide a one-time supplement to the Regents of the University of Minnesota to expand analytic, evaluation, dissemination, and technical assistance support for CAHs and State Flex Programs. The recipient will use supplemental funding to conduct additional analysis using new Flex Program data, feedback on the annual CAH assessment, strengthen dissemination activities and accessibility to products and resources, and develop new resources to help inform tribal hospitals on feasibility of converting to another hospital provider type (*e.g.,* CAH).

Thomas J. Engels,

Administrator.

[FR Doc. 2026–19234 Filed 9–18–26; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Notice of Supplemental Funding, State Offices of Rural Health Coordination and Development Program

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

ACTION: Notice of supplemental funding.

SUMMARY: HRSA is awarding supplemental funding under the State Offices of Rural Health (SORH) Coordination and Development Program to one award recipient in fiscal year 2026 to support expanded technical assistance, capacity-building, and coordination activities for SORH and rural stakeholders nationwide.

FOR FURTHER INFORMATION CONTACT: Sheena Johnson, Deputy Division Director, Hospital State Division, Federal Office of Rural Health Policy, HRSA, at *sjohnson@hrsa.gov* and 872–271–6370.

SUPPLEMENTARY INFORMATION:

Intended Recipient of the Award: National Organization of State Offices of Rural Health, Inc.

Amount of Non-Competitive Award: $345,000.

Project Period: August 1, 2026, to July 31, 2027.

Assistance Listing Number: 93.913.

Award Instrument: Cooperative Agreement.

Authority: Section 711(b) of the Social Security Act.