

components of the initiative. CDC will use the information collected through the Million Hearts® Hospitals & Health Systems Recognition Program to increase widespread attention on successful and sustainable implementation strategies; improve understanding of these strategies at the

practice level; bring visibility to organizations that commit, implement, or have implemented Million Hearts® strategies; and motivate other hospitals and health systems to strengthen their efforts to prevent cardiovascular events.

OMB approval is requested for three years. Participation is voluntarily and

there are no costs to respondents other than their time spent applying to the program (and responding to any follow up questions about their application) and providing information about their work to be recognized nationally. CDC requests OMB approval for an estimated 149 annual burden hours.

#### ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Medical & Health Service Manager .....	Recognition Program Application.	50	1	160/60
Medical & Health Service Manager .....	Interview Guide .....	30	1	30/60

**Jeffrey M. Zirger,**

*Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, Office of Science, Centers for Disease Control and Prevention.*

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**BILLING CODE 4163-18-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### National Center for Health Statistics, Meeting of the ICD-10 Coordination and Maintenance Committee

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

**ACTION:** Notice of meeting.

**SUMMARY:** The Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Classifications and Public Health Data Standards Staff, announces the following meeting of the ICD-10 Coordination and Maintenance (C&M) Committee. This meeting is open to the public, limited only by the number of audio lines available. Online registration is required.

**DATES:** The meeting will be held on September 9, 2025, from 9 a.m. to 5 p.m., EDT, and September 10, 2025, from 9 a.m. to 5 p.m., EDT.

**ADDRESSES:** This is a virtual meeting. Register in advance for this webinar: [https://cms.zoomgov.com/webinar/register/WN\\_cfwiQyYuR4uyU1x0HZKCKA](https://cms.zoomgov.com/webinar/register/WN_cfwiQyYuR4uyU1x0HZKCKA). After registering, you will receive a confirmation email containing information about joining the webinar. For CDC, NCHS: <https://www.cdc.gov/nchs/icd/icd-10-maintenance/meetings.html>. For the Centers for

Medicare & Medicaid Services, Department of Health and Human Services: <https://www.cms.gov/medicare/coding-billing/icd-10-codes/icd-10-coordination-maintenance-committee-materials>.

#### FOR FURTHER INFORMATION CONTACT:

Traci Ramirez, Medical Classification Specialist, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Hyattsville, Maryland 20782-2064. Telephone: (301) 458-4454; Email: [TRamirez@cdc.gov](mailto:TRamirez@cdc.gov).

#### SUPPLEMENTARY INFORMATION:

**Purpose:** The ICD-10 Coordination and Maintenance (C&M) Committee is a public forum for the presentation of proposed modifications to the International Classification of Diseases, Tenth Revision, Clinical Modification (CM) and ICD-10 Procedure Coding System (PCS).

**Matters to be Considered:** The tentative agenda will include discussions on the ICD-10-CM and ICD-10-PCS topics listed below. Agenda items are subject to change as priorities dictate. Please refer to the posted agenda for updates one month prior to the meeting.

#### ICD-10-PCS Topics:

1. Division of Myocardial Septum \*\*\*
2. Dilation using Electromechanical Obstetrical Dilator\*\*
3. Dilation of the Inferior Vena Cava with an Open-Structure Lattice Stent\*\*
4. Insertion of a Lumenless Small Diameter Defibrillator Lead\*\*
5. Measurement of Whole-Body Mass Composition\*
6. Computer-aided Assessment of Glucose\*\*\*
7. Bypass of Inferior Vena Cava using Autologous Cell Seeded Tissue Engineered Resorbable Scaffold\*
8. Section X Updates
9. Addenda and Key Updates

10. Administration of DB-OTO\*

11. Administration of CPI-601\*

12. Administration of ZEMAIRA\*\*

13. Administration of anitocabtagene autoleucl\*\*

\* Request is for an April 1, 2026 implementation date.

\*\* Request is for an April 1, 2026 implementation date and the requestor intends to submit a new technology add-on payment (NTAP) application for future consideration.

\*\*\* Request is for an October 1, 2026 implementation date and the requestor intends to submit an NTAP application for future consideration.

CMS will not present the Fall 2025 ICD-10-PCS procedure code topics during the virtual meeting. Instead, CMS will post the procedure code topic materials and solicit public comments regarding any clinical questions or coding options consistent with the approach utilized for the Spring 2025 Update and have utilized as of March 2021 for the procedure code requests that involve a new technology add-on payment (NTAP) application for the administration of a therapeutic agent. The deadline to submit comments for procedure code topics being considered for an April 1, 2026, implementation is October 10, 2025, and the deadline to submit comments for procedure code topics being considered for an October 1, 2026, implementation is November 14, 2025.

Members of the public should send any questions or comments related to the procedure code topics that are under consideration for an April 1, 2026 implementation or an October 1, 2026 implementation to the CMS mailbox at: [ICDProcedureCodeRequest@cms.hhs.gov](mailto:ICDProcedureCodeRequest@cms.hhs.gov) by the respective deadline.

All procedure code topic materials and related documents will be made available on the CMS website at <https://www.cms.gov/medicare/coding-billing/>

*icd-10-codes/icd-10-coordination-maintenance-committee-materials*. Additionally, CMS will post a question-and-answer document to address any clinical or coding questions that members of the public submit by the designated October 10, 2025, or November 14, 2025, deadline.

CDC, NCHS will make all meeting materials and related documents available at: <https://www.cdc.gov/nchs/icd/icd-10-maintenance/meetings.html>. Any inquiries related to the diagnoses code topics scheduled for the September 9–10, 2025, ICD–10 C&M Committee meeting should be sent to the CDC, NCHS mailbox at: [nchsicd10cm@cdc.gov](mailto:nchsicd10cm@cdc.gov).

ICD–10–CM Topics:

1. Amyloid-related imaging abnormalities (ARIA)
2. Catatonia
3. Chronic hand eczema
4. Ectopic Pregnancies
5. Glanzmann thrombasthenia
6. Hepatic fibrosis
7. Hypothalamic obesity
8. Ledderhose disease/plantar fibromatosis and plantar fasciitis
9. Lipedema and lipolymphedema
10. Medetomidine withdrawal syndrome
11. Nipple ischemia and nipple necrosis
12. Odontogenic sinusitis
13. Pediatric Healthcare: Impact of Parental Mental Health
14. Pediatric Healthcare: Impact of Social Circumstance
15. Pediatric Healthcare: Screening for and preventing Child Maltreatment
16. Pediatric Hypertrophic pyloric Stenosis
17. Personal history of C diff disease
18. Postprocedural open deep wound without disruption
19. Potts puffy tumor
20. Screening of Diabetes Mellitus
21. Skin changes due to skin failure
22. Topical steroid withdrawal
23. Vanishing twin syndrome
24. Vexas Syndrome
25. Addenda

The Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and

Prevention and the Agency for Toxic Substances and Disease Registry.

**Kalwant Smagh,**

*Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

**[Document Identifier: CMS–1763 and CMS–1696]**

#### Agency Information Collection Activities: Submission for OMB Review; Comment Request

**AGENCY:** Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**DATES:** Comments on the collection(s) of information must be received by the OMB desk officer by September 4, 2025.

**ADDRESSES:** Written 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.

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 Parham at (410) 786–4669.

**SUPPLEMENTARY INFORMATION:** Under the Paperwork Reduction Act of 1995 (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 (44 U.S.C. 3506(c)(2)(A)) requires federal agencies to publish a 30-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 that summarizes the following proposed collection(s) of information for public comment:

1. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Request for Termination of Medicare Premium Part A, Part B, or Part B Immunosuppressive Drug Coverage (Part B–ID) and Supporting Statute and Regulations; *Use:* Sections 1818(c)(5), 1818A(c)(2)(B) and 1838(b)(1) of the Act and corresponding regulations at 42 CFR 406.28(a) and 407.27(c) require that a Medicare enrollee wishing to voluntarily terminate Part B or premium Part A coverage file a written request with CMS or SSA. Pursuant to 1838(h) of the Act and the corresponding regulation at 42 CFR 407.62(a), individuals wishing to terminate their Part B–ID coverage must notify SSA. The statute and regulations also specify when coverage ends based upon the date the request for termination is filed.

The CMS–1763 is the form used by individuals who wish to terminate their Medicare Part A, Part B or Part B–ID. This 2024 iteration is a revision that does not propose any program changes.