

MATTERS TO BE CONSIDERED:

Proposed Directive Regarding
Investigations Conducted by the
Office of General Counsel
Audit Division Recommendation
Memorandum on Citizens for Waters
(A21-01)
Management and Administrative
Matters

Additional Information:

This meeting will be cancelled if the
Commission is not open due to a
funding lapse.

CONTACT PERSON FOR MORE INFORMATION:
Judith Ingram, Press Officer, Telephone:
(202) 694-1220.

Individuals who plan to attend in
person and who require special
assistance, such as sign language
interpretation or other reasonable
accommodations, should contact Laura
E. Sinram, Secretary and Clerk, at (202)
694-1040 or secretary@fec.gov, at least
72 hours prior to the meeting date.

(Authority: Government in the Sunshine Act,
5 U.S.C. 552b)

Vicktoria J. Allen,

Deputy Secretary of the Commission.

[FR Doc. 2023-21715 Filed 9-27-23; 4:15 pm]

BILLING CODE 6715-01-P

FEDERAL FINANCIAL INSTITUTIONS EXAMINATION COUNCIL

[Docket No. AS23-14]

Submission for OMB Review; Comment Request

AGENCY: Appraisal Subcommittee of the
Federal Financial Institutions
Examination Council (ASC).

ACTION: Notice.

SUMMARY: The ASC as part of a
continuing effort to reduce paperwork
and respondent burden, invites the
general public and other Federal
agencies to comment on the following
extension of a currently approved
collection, as required by the Paperwork
Reduction Act of 1995. On June 27,
2023, the ASC requested comment for
60 days on a proposal to renew this
information collection. No comments
were received. The ASC hereby gives
notice of its plan to submit to the Office
of Management and Budget (OMB) a
request to approve the renewal of this
collection and again invites comment on
its renewal.

DATES: Written comments must be
received on or before October 30, 2023
to be assured of consideration.

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. Find this particular
information collection by selecting
“Currently under 30-day Review—Open
for Public Comments” or by using the
search function.

FOR FURTHER INFORMATION CONTACT: Lori
Schuster, Management and Program
Analyst, at (202) 595-7578, Appraisal
Subcommittee, 1325 G Street NW, Suite
500, Washington, DC 20005. View the
entire information collection request at
www.reginfo.gov.

SUPPLEMENTARY INFORMATION:

Title: Collection and Transmission of
Annual AMC Registry Fees.

OMB Number: 3139-0008.

Type of Review: Extension of a
currently approved collection.

Abstract: States that register and
supervise appraisal management
companies (AMCs) are required to
collect and transmit annual AMC
registry fees to the ASC. 12 CFR part
1102, and in particular section
1102.402, established the annual AMC
registry fee for States that register and
supervise AMCs as follows: (1) in the
case of an AMC that has been in
existence for more than a year, \$25
multiplied by the number of appraisers
who have performed an appraisal for the
AMC on a covered transaction in such
State during the previous year; and (2)
in the case of an AMC that has not been
in existence for more than a year, \$25
multiplied by the number of appraisers
who have performed an appraisal for the
AMC on a covered transaction in such
State since the AMC commenced doing
business. Performance of an appraisal
means the appraisal service requested of
an appraiser by the AMC was provided
to the AMC. Section 1102.403 requires
AMC registry fees to be collected and
transmitted to the ASC on an annual
basis by States that register and
supervise AMCs. Only those AMCs
whose registry fees have been
transmitted to the ASC are eligible to be
on the AMC Registry for the 12-month
period following the payment of the fee.
Section 1102.403 clarified that States
may align a one-year period with any
12-month period, which may, or may
not, be based on the calendar year. The
registration cycle is left to the
individual States to determine.

Current Action: There are no changes
being made to this regulation.

Affected Public: States, businesses, or
other for-profit organizations.

Estimated Number of Respondents:
389 AMCs, 49 States. Based on a review
of AMC Registry data as of September
14, 2023, there are approximately 389

distinct AMCs listed on the AMC
Registry as reported by 49 States.
Therefore, we have changed the
estimated number of AMCs from 350 to
389. Currently 50 States have AMC
Programs with 49 States reporting data
to the AMC Registry.

Estimated Total Annual Burden

Hours: For States—We estimate that a
State will spend approximately 60 hours
annually submitting data to the ASC.

For AMCs—5,145 hours. This
estimate has increased from 4,437. As of
September 14, 2023, there were 5,147
active AMC entries on the AMC
Registry. We estimate that it takes each
AMC one hour to report its data to each
State in which the AMC is registered.
Assuming an average of 105 AMCs per
State, this would total 5,145 active
AMCs in 49 States.

Frequency of Response: Event
generated.

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By the Appraisal Subcommittee.

James R. Park,

Executive Director.

[FR Doc. 2023-21436 Filed 9-28-23; 8:45 am]

BILLING CODE 6700-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities: Proposed Collection; Comment Request; Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery

AGENCY: Agency for Healthcare Research
and Quality, HHS.

ACTION: Notice.

SUMMARY: This notice announces the
intention of the Agency for Healthcare
Research and Quality (AHRQ) to request
that the Office of Management and
Budget (OMB) approve the proposed
information collection project “*Generic
Clearance for the Collection of
Qualitative Feedback on Agency Service
Delivery.*”

DATES: Comments on this notice must be
received by October 30, 2023.

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. Find this particular
information collection by selecting
“Currently under 30-day Review—Open
for Public Comments” or by using the
search function.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

FOR FURTHER INFORMATION CONTACT:

Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427-1477, or by email at doris.lefkowitz@AHRQ.hhs.gov.

SUPPLEMENTARY INFORMATION:

Proposed Project

Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery

The information collection activity will garner qualitative customer and stakeholder feedback in an efficient, timely manner, in accordance with the Administration's commitment to improving service delivery. By qualitative feedback we mean information that provides useful insights on perceptions and opinions, but are not statistical surveys that yield quantitative results that can be generalized to the population of study. This feedback will provide insights into customer or stakeholder perceptions, experiences, and expectations, provide an early warning of issues with service, or focus attention on areas where communication, training or changes in operations might improve delivery of products or services. These collections will allow for ongoing, collaborative and actionable communications between the Agency and its customers and stakeholders. It will also allow feedback to contribute directly to the improvement of program management. The current clearance was approved on November 2, 2020 (OMB Control Number 0935-0179) and will expire on November 30, 2023. Feedback collected under this generic clearance will provide useful information, but it will not yield data that can be generalized to the overall population. This type of generic clearance for qualitative information will not be used for quantitative information collections that are designed to yield reliably actionable results, such as monitoring trends over time or documenting program performance. Such data uses require more rigorous designs that address: (1) the target population to which generalizations will be made; (2) the sampling frame; (3) the sample design (including stratification and clustering); (4) the precision requirements or power calculations that justify the proposed sample size; (5) the expected response rate; (6) methods for assessing potential nonresponse bias; (7) the protocols for data collection; (8) and any testing procedures that were or will be

undertaken prior to fielding the study. Depending on the degree of influence the results are likely to have, such collections may still be eligible for submission for other generic mechanisms that are designed to yield quantitative results.

Below we provide AHRQ's projected average annual estimates for the next three years:

Current Actions: New collection of information.

Type of Review: New Collection.

Affected Public: Individuals and Households, Businesses and Organizations, State, Local or Tribal Government.

Average Expected Annual Number of Activities: 10.

Respondents: 10,900.

Annual responses: 10,900.

Frequency of Response: Once per request.

The total number of respondents across all 10 activities each year is 10,900.

Average minutes per response: 19.

Burden hours: 3,383.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget control number.

Request for Comments

In accordance with the Paperwork Reduction Act, comments on AHRQ's information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of AHRQ healthcare research and healthcare information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology. Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: September 26, 2023.

Marquita Cullom,

Associate Director.

[FR Doc. 2023-21551 Filed 9-28-23; 8:45 am]

BILLING CODE 4160-90-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, HHS.

ACTION: Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed updates to the currently approved information collection project: "Medical Expenditures Panel Survey—Household and Medical Provider Components." In accordance with the Paperwork Reduction Act of 1995, AHRQ invites the public to comment on this proposed information collection.

DATES: Comments on this notice must be received by November 28, 2023.

ADDRESSES: Written comments should be submitted to: Doris Lefkowitz, Reports Clearance Officer, AHRQ, by email at doris.lefkowitz@AHRQ.hhs.gov.

FOR FURTHER INFORMATION CONTACT:

Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427-1477, or by email at doris.lefkowitz@AHRQ.hhs.gov.

SUPPLEMENTARY INFORMATION:

Proposed Project

Medical Expenditures Panel Survey—Household and Medical Provider Components

AHRQ requests that OMB approve a change to AHRQ's collection of information for the Medical Expenditures Panel Survey—Household and Medical Provider Components: OMB Control number 0935-0118, expiration November 30, 2025. Requested changes are for the Household Component (MEPS-HC) only.

The MEPS was initiated in 1996. Each year a new panel of sample households is selected. Recent annual MEPS-HC sample sizes average about 13,500 households. Data can be analyzed at either the person, family, or event level. The panel design of the survey, which includes 5 rounds of interviews covering 2 full calendar years, provides data for examining person level changes in selected variables such as expenditures, health insurance coverage, and health status.

This research has the following goals:

(1) To produce nationally representative estimates of health care