

project will be included in the specific GenIC submissions.

CDC requests a three-year clearance. The estimated annualized burden for this generic data collection is 59,465

hours. There is no cost to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Individuals or Households	Developmental Projects & Focus Group documents.	35,000	1	1.5
Volunteers	Developmental Projects & Focus Group documents.	300	1	1.5
Individuals or households, Volunteers, NHANES Participants.	24-hour developmental projects	200	1	25
NHANES Participants	Developmental Projects	1,000	1	1.5
Subject Matter Experts	Focus Group/Developmental Project Documents.	15	1	1

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-1800-NC2]

Inflation Reduction Act (IRA) Initial Program Guidance; 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' initial guidance for the Medicare Drug Price Negotiation Program for the implementation of the Inflation Reduction Act. CMS will be releasing additional Inflation Reduction Act-related guidance; all can be viewed on the dedicated Inflation Reduction Act section of the CMS website at <https://www.cms.gov/inflation-reduction-act-and-medicare/>.

DATES: Comments must be received by April 14, 2023.

ADDRESSES: Written comments should be sent to IRAREbateandNegotiation@cms.hhs.gov with the relevant subject line, "Medicare Drug Price Negotiation Program Guidance."

SUPPLEMENTARY INFORMATION: The Inflation Reduction Act was signed into law on August 16, 2022. Sections 11001 and 11002 of the Inflation Reduction Act (IRA) (Pub. L. 117-169) established the Medicare Drug Price Negotiation

Program (hereafter the "Negotiation Program") to negotiate Maximum Fair Prices (MFPs) for certain high expenditure, single source drugs and biological products. The requirements for this program are described in sections 1191 through 1198 of the Social Security Act (hereafter "the Act") as added by sections 11001 and 11002 of the Inflation Reduction Act.

To obtain copies of the Negotiation Program initial guidance and other Inflation Reduction Act-related documents, please access the CMS Inflation Reduction Act website by copying and pasting the following web address into your web browser: <https://www.cms.gov/inflation-reduction-act-and-medicare>. If interested in receiving CMS Inflation Reduction Act updates by email, individuals may sign up for CMS Inflation Reduction Act's email updates at <https://www.cms.gov/About-CMS/Agency-Information/Aboutwebsite/EmailUpdates>.

The Administrator of the Centers for Medicare & Medicaid Services (CMS), Chiquita Brooks-LaSure, having reviewed and approved this document, authorizes Evell J. Barco Holland, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Dated: March 13, 2023.

Evell J. Barco Holland,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

[FR Doc. 2023-05411 Filed 3-15-23; 4:15 pm]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity: Adoption and Foster Care Analysis and Reporting System (OMB #0970-0422)

AGENCY: Children's Bureau, Administration for Children and Families, Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Children's Bureau, the Administration for Children and Families (ACF), in the U.S. Department of Health and Human Services (HHS) is requesting a three-year extension of the data information collection for the Adoption and Foster Care Analysis and Reporting System (AFCARS) that was implemented as part of the AFCARS final rule published in May 2020 (85 FR 28410). There are no proposed changes to the information collection published as the final rule in May 2020.

DATES: *Comments due within 60 days of publication.* 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.

ADDRESSES: You can obtain copies of the proposed collection of information and submit comments by emailing infocollection@acf.hhs.gov. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: State and tribal title IV-E agencies are required to report AFCARS case-level information on all children in foster care and children who have been adopted or placed in a

guardianship with title IV–E agency involvement. The data collected will inform policy decisions, program management, and responses to Congressional and Departmental inquiries. Specifically, the data are used for short/long-term budget projections, trend analysis, child and family service reviews, and to target areas for improved technical assistance. The data

will provide information on the number of children in foster care, the reasons they enter and exit care, and how to prevent their unnecessary placement in foster care. Specifically, the data include information about children who enter foster care, their entries and exits, placement details, and foster/adoptive parent information. This extension request is unrelated to any potential

new regulatory activity that may occur subsequently. This request is for public comment on the burden calculations. It does not seek comment on the data elements that have been through the rulemaking process.

Respondents: Title IV–E State and Tribal Child Welfare Agencies.

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
AFCARS-Recordkeeping	69	3	8,358	1,730,106	576,702
AFCARS-Reporting	69	6	17	21,114	7,038

Estimated Total Annual Burden Hours: 583,740.

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: Section 479 of the Social Security Act and 45 CFR 1355.44–45.

John M. Sweet, Jr.,

ACF/OPRE Certifying Officer.

[FR Doc. 2023–05427 Filed 3–16–23; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; National Child Abuse and Neglect Database System (Office of Management and Budget #0970–0424)

AGENCY: Children's Bureau, Administration for Children and Families, United States Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Children's Bureau, the Administration for Children and

Families (ACF), in the United States (U.S.) Department of Health and Human Services (HHS) is requesting a three-year extension of the National Child Abuse and Neglect Data System (NCANDS) collection (Office of Management and Budget (OMB) #0970–0424, expiration August 31, 2023). There are no changes requested to this data collection.

DATES: *Comments due within 60 days of publication.* 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.

ADDRESSES: You can obtain copies of the proposed collection of information and submit comments by emailing infocollection@acf.hhs.gov. Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The Child Abuse Prevention and Treatment Act (CAPTA) was amended in 1988 to direct the Secretary of HHS to establish a national data collection and analysis program, which would make available state child abuse and neglect reporting information. HHS responded by establishing NCANDS as a voluntary national reporting system.

During 1996, CAPTA was amended to require all states that receive funds from the Basic State Grant program to work with the Secretary of HHS to provide specific data elements, to the maximum extent practicable, about children who had been maltreated. Most of the required data elements were added to the NCANDS data collection. Subsequent CAPTA reauthorizations and amendments added required data elements. The current list of CAPTA required data elements includes:

(1) *The number of children who were reported to the state during the year as victims of child abuse or neglect.*

(2) *Of the number of children described in paragraph (1), the number with respect to whom such reports were—*

- (a) *Substantiated;*
- (b) *Unsubstantiated; or*
- (c) *Determined to be false.*

(3) *Of the number of children described in paragraph (2)—*

(a) *the number that did not receive services during the year under the state program funded under this section or an equivalent state program;*

(b) *the number that received services during the year under the state program funded under this section or an equivalent state program; and*

(c) *the number that were removed from their families during the year by disposition of the case.*

(4) *The number of families that received preventive services, including use of differential response, from the state during the year.*

(5) *The number of deaths in the state during the year resulting from child abuse or neglect.*

(6) *Of the number of children described in paragraph (5), the number of such children who were in foster care.*

(7) *The number of child protective service personnel responsible for the—*

- (i.) *intake of reports filed in the previous year;*
- (ii.) *screening of such reports;*
- (iii.) *assessment of such reports; and*
- (iv.) *investigation of such reports.*

(b) *The average caseload for the workers described in subparagraph (A).*

(8) *The agency response time with respect to each such report with respect to initial investigation of reports of child abuse or neglect.*

(9) *The response time with respect to the provision of services to families and*