

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–0576]

Agency Information Collection Activity: Certification of Affirmation of Enrollment Agreement Correspondence Course**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.**ACTION:** Notice.

SUMMARY: The Veterans Benefits Administration (VBA), Department of Veterans Affairs (VBA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed revision of a currently approved collection, and allow 60 days for public comment in response to the notice.

DATES: Written comments and recommendations on the proposed collection of information should be received on or before January 3, 2022.

ADDRESSES: Submit written comments on the collection of information through Federal Docket Management System (FDMS) at www.Regulations.gov or to Nancy J. Kessinger, Veterans Benefits Administration (20M33), Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420 or email to nancy.kessinger@va.gov. Please refer to “OMB Control No. 2900–0576” in any correspondence. During the comment period, comments may be viewed online through FDMS.

FOR FURTHER INFORMATION CONTACT: Maribel Aponte, Office of Enterprise and Integration, Data Governance Analytics (008), 1717 H Street NW, Washington, DC 20006, (202) 266–4688 or email maribel.aponte@va.gov. Please refer to “OMB Control No. 2900–0576” in any correspondence.

SUPPLEMENTARY INFORMATION: Under the PRA of 1995, Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VBA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VBA’s functions, including whether the information will have practical utility;

(2) the accuracy of VBA’s estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Authority: 38 U.S.C. 3686(b); 38 U.S.C. 3323(a); 10 U.S.C. 16131, and 38 CFR 21.74256(b).

Title: Certification of Affirmation of Enrollment Agreement Correspondence Course.

OMB Control Number: 2900–0576.

Type of Review: Revision of a currently approved collection.

Abstract: VA uses information from the current collection to pay education benefits for correspondence training. This information allows VA to determine if the claimant has been informed of the 5-day reflection period required by law.

Affected Public: Individuals and households.

Estimated Annual Burden: 3 hours.

Estimated Average Burden per Respondent: 3 minutes.

Frequency of Response: Annually.

Estimated Number of Respondents: 69.

By direction of the Secretary.

Maribel Aponte,

VA PRA Clearance Officer, Office of Enterprise and Integration/Data Governance Analytics, Department of Veterans Affairs.

[FR Doc. 2021–24069 Filed 11–3–21; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS**VA Standards for Quality****AGENCY:** Department of Veterans Affairs.**ACTION:** Solicitation of public comment.

SUMMARY: The Secretary of the Department of Veterans Affairs (VA) is soliciting public comment on VA’s current standards for quality to ensure that they include the most up to date and applicable measures for veterans.

DATES: Comments must be received on or before December 6, 2021.

ADDRESSES: Comments may be submitted through www.regulations.gov. Comments should indicate that they are submitted in response to “VA Standards for Quality.” Comments received will be available at www.regulations.gov for public viewing, inspection or copies.

FOR FURTHER INFORMATION CONTACT: Joseph Francis, VHA Office of Analytics

and Performance Integration (API), 17 API, Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue NW, Room 668, Washington, DC 20420, (202) 461–5517. This is not a toll-free number.

SUPPLEMENTARY INFORMATION: In accordance with section 1703C of 38 U.S.C., as added by section 104 of the VA Maintaining Internal Systems and Strengthening Integrated Outside Networks Act of 2018 or the VA MISSION Act of 2018, VA formally established standards for quality regarding hospital care, medical services, and extended care services furnished by the Department in October 2019 (84 FR 52932). VA’s quality standards were chosen based on a comprehensive assessment of health care industry standards for quality, their relevance to veterans, and the availability of comparative data for community providers. Wide ranging expert guidance and stakeholder input was also sought from veterans, Veteran Service Organizations, federal partners, health care specialty associations and organizations, and the public through focus groups, meetings, and requests for information. The current VA standards for quality and associated measures are publicly available on VA’s Access to Care website (<https://www.accesstocare.va.gov>).

After internal review of VA’s standards for quality in 2021, significant changes were not made to the initial standards established in 2019. The current quality standards address important dimensions of care for veterans and are aligned with industry standards. The addition of new metrics is limited in many cases by the lack of appropriate community comparison data; and this has been compounded in CY 2020 and 2021 by the impact of the COVID–19 pandemic. Notably, the pandemic resulted in gaps in the available healthcare data and temporary suspension of some measures (e.g., COVID–19 Quality Reporting Programs Guidance Memo—Centers for Medicare and Medicaid Services (CMS) (March 27, 2020); <https://www.cms.gov/files/document/guidance-memo-exceptions-and-extensions-quality-reporting-and-value-based-purchasing-programs.pdf>). This has created a problematic situation where, in some cases, VA’s current quality data results are being compared to pre-COVID periods of community data. VA has an ongoing commitment to evolving the quality standards in accordance with veteran needs and industry advancements. The quality standards will be reviewed internally again in FY 2022 to ensure they are up-

to-date and addressing veteran priorities. As required by 38 U.S.C. 1703C(b)(2), this notice is to solicit and consider public comment on potential changes to VA's current quality standards to ensure that they include the most up-to-date and applicable measures for veterans. VA will use the comments it receives to help update the quality standards. Changes to the standards can be accessed by veterans and the public on VA's Access to Care website (<https://www.accesstocare.va.gov>).

VA's current standards for quality consist of quality domains and quality measures.

- **Quality domains**—broad categories of quality used to describe the desired characteristics of care received by veterans, whether furnished by VA or community-based providers.

- **Quality measures**—an evolving series of numeric indicators that evaluate clinical performance within each of the quality domains.

The standards for quality and included domains are:

- **Timely Care**—provided without inappropriate or harmful delays.
- **Effective Care**—based on scientific knowledge of what is likely to provide benefits to veterans.
- **Safe Care**—avoids harm from care that is intended to help veterans.
- **Veteran-Centered Care**—anticipates and responds to veterans' and their caregivers' preferences and needs and ensures that veterans have input into clinical decisions.

The current quality measures for the quality domains are detailed below along with relevant annotations regarding changes since October 2019:

- **Timely Care**
 - Patient-reported measures on getting timely appointments, care, and information
 - Wait times for outpatient care
- **Effective Care**
 - Risk adjusted mortality rate for heart attack
 - Risk adjusted mortality rate for pneumonia
 - Risk adjusted mortality rate for heart failure
 - Risk adjusted mortality rate for chronic obstructive pulmonary disease
 - Smoking and tobacco use cessation—advising smokers to quit
 - Immunization for influenza
 - Controlling high blood pressure
 - Beta-blocker treatment after a heart attack
 - Comprehensive diabetes care—blood pressure control
 - Comprehensive diabetes care—

Hemoglobin A1c poor control

- Breast cancer screening
- Cervical cancer screening
- Improvement in function (short-stay skilled nursing facility patients)
- Newly received antipsychotic medications (short-stay skilled nursing facility patients)
- **Safe Care**
 - Catheter associated urinary tract infection rate
 - Central line associated bloodstream infection rate
 - Clostridioides difficile infection rate (Note: VA does not currently have patient level comparison data for this measure. VA is undertaking improvements to strengthen the reporting approach going forward as data availability changes.)
 - Death rate among surgical patients with serious treatable complications (Note: Availability of accurate community comparison data has improved since initial publication of this measure in 2019 and related updates will be made to VA's external reporting of this measure.)
 - New or worsened pressure ulcers/pressure injuries (short-stay skilled nursing facility patients)
 - Falls with major injury (long-stay skilled nursing facility patients)
 - Physical restraints (long-stay skilled nursing facility patients)
- **Veteran-Centered Care** (Note: VA now utilizes the measure or composite for these key indicators of patient experience, rather than the star rating, because this allows more precision in comparisons and can better track improvement over time.)
 - Hospital Consumer Assessment of Health Providers and Systems (HCAHPS) overall rating of hospital
 - HCAHPS care transition composite
 - Patient's overall rating of the provider on the Consumer Assessment of Health Providers and Systems (CAHPS) survey
 - Patient's rating of coordination of care on the CAHPS survey

Signing Authority

Denis McDonough, Secretary of Veterans Affairs, approved this document on October 28, 2021, and authorized the undersigned to sign and submit the document to the Office of the Federal Register for publication electronically as an official document of the Department of Veterans Affairs.

Michael P. Shores,

Director, Office of Regulation Policy & Management, Office of General Counsel, Department of Veterans Affairs.

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BILLING CODE 8320-01-P

DEPARTMENT OF VETERANS AFFAIRS

Notice of Request for Information Regarding Health Care Access Standards

AGENCY: Department of Veterans Affairs.

ACTION: Request for information.

SUMMARY: The Department of Veterans Affairs (VA) is requesting information from the public to inform VA's review of access standards for furnishing hospital care, medical services and extended care services to covered veterans, for purposes of the Veterans Community Care Program (VCCP). Specifically, VA requests information regarding access standards, including but not limited to, information regarding health plans on the use of access standards for the design of health plan provider networks; referrals from network providers to out-of-network providers; the appeals process for exemptions from benefit limits to out-of-network providers; and the measurement of performance against Federal or State regulatory standards. Further, VA is requesting input on Veterans' experience with the access standards established in 2019.

DATES: Comments must be received on or before December 6, 2021.

ADDRESSES: Comments may be submitted through www.regulations.gov. Comments should indicate that they are submitted in response to "Notice of Request for Information Regarding Health Care Access Standards."

FOR FURTHER INFORMATION CONTACT: Natalie Frey, Management Analyst, Office of the Assistant Under Secretary for Health, Office of Community Care, Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420; 720-429-9171. This is not a toll-free number.

SUPPLEMENTARY INFORMATION: The John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Integrated Outside Networks Act of 2018, Public Law 115-182, (VA MISSION Act of 2018) added section 1703B to title 38, United States Code, which required VA to establish access standards for furnishing hospital care, medical services or extended care services to covered Veterans under VCCP. VA established these access standards through rulemaking on June 6, 2019, at 38 CFR 17.4040. Section 1703B(c) specifically requires VA to consult with all pertinent Federal entities, entities in the private sector