This matching program meets these requirements.

Barbara Demopulos,

Privacy Advisor, Division of Security, Privacy Policy and Governance, Office of Information Technology, Centers for Medicare & Medicaid Services.

Participating Agencies

Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS), and the AE in each state. Each party (CMS and each AE) is both a source agency, and each AE is a recipient agency, in this matching program, as explained in the Purpose(s) section below.

AEs administer insurance affordability programs, and include Medicaid/Children's Health Insurance Program (CHIP) agencies, state-based exchanges (SBEs), and basic health programs (BHPs). In states that operate a SBE, the AE would include the Medicaid/CHIP agency. Additionally, there are two states—Minnesota and New York—where the AE operates as both a SBE and BHP. In states that have elected to utilize the federally-facilitated exchange (FFE), the AE would include only the Medicaid/CHIP agency.

Authority for Conducting the Matching Program

The principal authority for conducting the matching program is 42 U.S.C. 18001, *et seq.*

Purpose(s)

The matching program will enable CMS to provide information (including information CMS receives from other federal agencies under related matching agreements) to AEs, to assist AEs in verifying applicant information as required by the Patient Protection and Affordable Care Act of 2010 (PPACA) to determine applicants' eligibility for enrollment in applicable state health subsidy programs, including exemption from the requirement to maintain minimum essential coverage (MEC) or from the individual responsibility payment. In addition, to avoid dual enrollment, information will be shared between CMS and AEs, and among AEs, for the purpose of verifying whether applicants and enrollees are currently eligible for or enrolled in a Medicaid/ CHIP program. All information will be shared through a data services hub (Hub) established by CMS to support the federally-facilitated health insurance exchange (which CMS operates) and state-based exchanges.

Categories of Individuals

The individuals whose information will be used in the matching program

are consumers who apply for eligibility to enroll in applicable state health subsidy programs through an exchange established under ACA and other relevant individuals (such as, applicants' household members).

Categories of Records

The categories of records that will be used in the matching program are identifying records; minimum essential coverage period records; return information (household income and family size information); citizenship status records; birth and death information; disability coverage and income information; and imprisonment status records.

The data elements CMS will receive from AEs may include:

- 1. Social security number (if applicable).
 - 2. Last name.
 - 3. First name.
 - 4. Date of birth.

The data elements the AEs will receive from CMS may include:

- 1. Validation of SSN.
- 2. Verification of citizenship or immigration status.
 - 3. Incarceration Status.
- 4. Eligibility and/or enrollment in certain types of MEC.
- 5. Income, based on Federal Tax Information (FTI), Title II benefits, and current income sources.
 - 6. Quarters of Coverage.
 - 7. Death Indicator.

System of Records

The records that CMS will disclose to AEs will be disclosed from the following system of records, as authorized by routine use 3 published in the System of Records Notices (SORN) cited below:

CMS Health Insurance Exchanges System (HIX), CMS System No. 09–70– 0560, last published in full at 78 FR 63211 (Oct. 23, 2013), as amended at 83 FR 6591 (Feb. 14, 2018).

[FR Doc. 2021–08044 Filed 4–22–21; 8:45 am] BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Award of a Single-Source Supplement for the National Center for Benefits Outreach and Enrollment

ACTION: Announcing the Intent to Award a Single-Source Supplement for the National Center for Benefits Outreach and Enrollment (NCBOE).

SUMMARY: The Administration for Community Living (ACL) announces the

intent to award a single-source supplemental to the current cooperative agreement held by the National Council on Aging (NCOA) for the National Center for Benefits Outreach and Enrollment (NCBOE). The purpose of the NCBOE is to provide technical assistance to states, Area Agencies on Aging, Aging and Disability Resource Centers and service providers who conduct outreach and low-income benefits enrollment assistance, particularly to older individuals with greatest economic need for federal and state programs. The administrative supplement for FY 2021 will be for \$3,009,007, bringing the total award for FY 2021 to \$14,509,007.

FOR FURTHER INFORMATION CONTACT: For further information or comments regarding this program supplement, contact Margaret Flowers, U.S. Department of Health and Human Services, Administration for Community Living, Center for Integrated Programs, Office of Healthcare Information and Counseling; telephone (202) 795–7315; email Margaret.flowers@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: This supplemental funding will expand the NCBOE's outreach and education efforts targeting older adults with the greatest economic need, especially people from underserved communities. The NCBOE will build on current efforts to reach and assist beneficiaries, including expanding the work of the Benefits Enrollment Centers, making enhancements to the benefits eligibility and screening tool, and expanding the capacity of the benefits call center. As part of this work, the NCBOE should consider specific strategies to reach and enroll beneficiaries in rural communities, who are under 65, with limited English proficiency, from tribal communities, from communities of color, and/or from other historically underserved and marginalized communities. In its role as the Medicare Improvements for Patients and Providers Act (MIPPA) Resource Center, the NCBOE should expand their support for the MIPPA grantees to develop technical assistance materials for the Older Americans Act Title VI Tribal grantees. Materials may include educational content on Medicare and the Indian Health Service, and training on enrollment assistance for low income beneficiaries. Additionally, the NCBOE should build on the work previously done to support the aging and disability networks (including the Area Agencies on Aging, Centers for Independent Living, and Aging and Disability

Resource Centers) in their efforts to help low income beneficiaries.

The NCBOE works to utilize costeffective strategies to find older individuals and people with disabilities with greatest economic need and facilitate their enrollment in the individuals in the programs for which they are qualified. As part of this effort, the NCBOE should support state and federal efforts to streamline benefits eligibility systems. This should include conducting a feasibility assessment to determine best ways to streamline the application process and centralize the eligibility guidelines for key benefits, including the automation of enrollment through a rules engine. The study should explore the governance structure and technical expertise necessary to create and maintain such a process. Additionally, it should explore what a realistic scope is for the project how the current benefits screening tools could evolve to benefit from further automation of eligibility. NCBOE should collaborate with ACL and the administration in conducting the feasibility assessment to coordinate with planned and emerging efforts to streamline eligibility benefits for low income individuals.

Program Name: The National Center for Benefits Outreach and Enrollment (NCBOE).

Recipient: National Council on Aging (NCOA).

Period of Performance: The award will be issued for the current project period of September 1, 2021 through August 31, 2022.

Total Award Amount: \$14,509,007 in FY 2021.

Award Type: Cooperative Agreement Supplement.

Statutory Authority: The statutory authority is contained in the 2006 Reauthorization of the Older Americans Act and the Medicare Improvements for Patients and Providers Act of 2008, as amended by the Patient Protection and Affordable Care Act of 2010, and reauthorized by the American Taxpayer Relief Act of 2012, Protecting Access to Medicare Act of 2014, Bipartisan Budget Act of 2018, and Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020, and Consolidated Appropriations Act of 2021.

Basis for Award: The National Council on Aging (NCOA) is currently funded to carry out the NCBOE Project for the period of September 1, 2020 through August 31, 2025. Much work has already been completed and further tasks are currently being accomplished. It would be unnecessarily time consuming and disruptive to the NCBOE project and the beneficiaries

being served for the ACL to establish a new grantee at this time when critical services are presently being provided in an efficient manner.

NCOA is uniquely placed to complete the work under the NCBOE grant. Since 2001, NCOA has been the national leader in improving benefits access to vulnerable older adults. They have an unparalleled history of working with community-based organizations to develop and replicate outreach and enrollment solutions, while maintaining and enhancing technology to make it easier and more efficient to find benefits. NCOA through NCBOE accomplishes its mission by developing and sharing tools, resources, best practices, and strategies for benefits outreach and enrollment via its online clearinghouse, electronic and print publications, webinars, and training and technical assistance.

In addition, NCOA has BenefitsCheckUp which is, by far, the nation's most comprehensive and widely-used web-based service that screens older and disabled adults with limited incomes and resources and informs them about public and private benefits for which they are very likely to be eligible. Since the BenefitsCheckUp was launched in 2001, nearly 9.5 million people have discovered \$39.5 billion in benefits. In addition to the focus on Low-Income Subsidy and Medicare Savings Programs, BenefitsCheckUp also includes more than 2,500 benefits programs from all 50 states and DC, including over 50,000 local offices for people to apply for benefits; and more than 1,500 application forms in every language in which they are available. NCOA is successfully meeting all programmatic goals under the current NCBOE grant.

Dated: April 19, 2021.

Alison Barkoff,

Acting Assistant Secretary for Aging and Administrator.

[FR Doc. 2021–08452 Filed 4–22–21; 8:45 am]

BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Single-Source Supplement for the Amputee Coalition of America, Inc. for the National Limb Loss Resource Center Cooperative Agreement

ACTION: Announcing the Intent to Award a Single-Source Supplement for the Amputee Coalition of America, Inc. for

the National Limb Loss Resource Center cooperative agreement.

SUMMARY: The Administration for Community Living (ACL) announces the intent to award a single-source supplement to the current cooperative agreement held by the Amputee Coalition of America, Inc. for the National Limb Loss Resource Center (NLLRC). The purpose of this project is to expand on current grant activities occurring across communities. These activities include programs that promote independence, community living, and the adoption of healthy behaviors that promote wellness and prevent and/or reduce chronic conditions associated with limb loss and increase partnerships and collaborations with ACL programs that will benefit all people living with limb loss or limb differences. The administrative supplement for FY 2021 will be for \$487,857 bringing the total award for FY 2021 to \$3,883,387.

FOR FURTHER INFORMATION CONTACT: For further information or comments regarding this program supplement, contact Elizabeth Leef, U.S. Department of Health and Human Services, Administration for Community Living, Administration on Disabilities, Office of Disability Services Innovation: telephone (202)–475–2486 email: Elizabeth.leef@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: The additional funding will not be used to begin new projects. The funding will be used to enhance and expand existing programs that can serve an increased number of veterans and people living with limb loss and limb differences by providing increased technical assistance activities; promoting health and wellness programs; addressing healthcare access issues, including maternity care; promoting the adoption of healthy behaviors with the objective of preventing and/or reducing chronic conditions associated with limb loss; increasing partnerships and collaborations with ACL programs that will benefit all people living with limb loss or limb differences; enhancing and expanding the evaluation activities currently under way; and enhancing website capacities for improved information dissemination.

Program Name: National Limb Loss Resource Center.

Recipient: The Amputee Coalition of America, Inc.

Period of Performance: The supplement award will be issued for the third year of the five-year project period of April 1, 2019, through March 29, 2024.

Total Supplement Award Amount: \$487,857 in FY 2021.