

Systems (CAHPS) Survey for Merit-based Incentive Payment Systems (MIPS); *Use:* CMS is submitting updates to one information collection request associated with the CAHPS for MIPS survey. The CAHPS for MIPS survey is used in the Quality Payment Program (QPP) to collect data on fee-for-service Medicare beneficiaries' experiences of care with eligible clinicians participating in MIPS and is designed to gather only the necessary data that CMS needs for assessing physician quality performance, and related public reporting on physician performance, and should complement other data collection efforts. The survey consists of the core Agency for Healthcare Research and Quality (AHRQ) CAHPS Clinician & Group Survey, version 3.0, plus additional survey questions to meet CMS's information and program needs. The survey information is used for quality reporting, the Care Compare website, and annual statistical experience reports describing MIPS data for all MIPS eligible clinicians.

This 2021 information collection request addresses changes to the CAHPS for MIPS Survey associated with the CY 2021 Physician Fee Schedule (PFS) final rule. In order to address the increased use of telehealth care due to the Public Health Emergency (PHE) for COVID-19, an additional question is added to the CAHPS for MIPS survey to integrate one telehealth item to assess the patient-reported usage of telehealth services. In addition, the cover page of the CAHPS for MIPS Survey is revised to include a reference to care in telehealth settings. The CAHPS for MIPS survey results in burden to three different types of entities: Groups and virtual groups, vendors, and beneficiaries associated with administering the survey. Virtual groups are subject to the same requirements as groups; therefore, we will refer only to groups as an inclusive term for both unless otherwise noted. The estimated time to administer the 2021 CAHPS for MIPS survey has increased from 12.9 minutes to 13.1 minutes; however, there was an overall decrease in burden as the number of respondents decreased. *Form Number:* CMS-10450 (OMB control number: 0938-1222); *Frequency:* Yearly; *Affected Public:* Business or other for-profits and Not-for-profit institutions and Individuals and Households; *Number of Respondents:* 30,249; *Total*

Annual Responses: 30,249; *Total Annual Hours:* 6,902 (For policy questions regarding this collection contact Alesia Hovatter at 410-786-6861.)

Dated: July 16, 2021.

William N. Parham, III,
Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; National Survey of Early Care and Education COVID-19 Follow-Up (OMB #0970-0391)

AGENCY: Office of Planning, Research, and Evaluation, Administration for Children and Families, HHS.

ACTION: Request for public comment.

SUMMARY: The Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), plans to request from the Office of Management and Budget (OMB) an extension to complete data collection for a two-wave COVID-19 Follow-up data collection currently underway as part of the National Survey of Early Care and Education (NSECE). The objective of the NSECE COVID-19 Follow-up is to document the nation's current supply of early care and education services (that is, home-based providers, center-based providers, and the center-based provider workforce). There are no changes proposed.

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: Copies of the proposed collection of information can be obtained and comments may be forwarded by emailing OPREinfocollection@acf.hhs.gov. Alternatively, copies can also be obtained by writing to the Administration for Children and Families, Office of Planning, Research,

and Evaluation, 330 C Street SW, Washington, DC 20201, Attn: OPRE Reports Clearance Officer. All requests, emailed or written, should be identified by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: In the context of the COVID-19 pandemic, the NSECE COVID-19 Follow-up will deepen our understanding of the state of ECE supply and the ECE workforce following the initial period of crisis, including changes in supply or departures from and re-entries to the workforce. The NSECE COVID-19 Follow-up will collect information from center-based ECE providers to children birth through age 5 years, not yet in kindergarten, home-based ECE providers that serve children under age 13, as well as the ECE workforce providing these services. The collection consists of three coordinated nationally representative surveys:

1. A two-wave survey of individuals who provided paid care for children under the age of 13 in a residential setting as of 2019 and participated in the 2019 NSECE (Home-based Provider Interview),

2. a two-wave survey of providers of care to children ages 0 through 5 years of age (not yet in kindergarten) in a non-residential setting (Center-based Provider Interview) as of 2019 and that participated in the 2019 NSECE, and

3. a two-wave survey conducted with individuals employed in center-based child care programs working directly with children in classrooms (Center-based Classroom Staff [Workforce] Interview) as of 2019 and who participated in the 2019 NSECE.

Respondents: Home-based providers as of 2019 serving children under 13 years (listed and unlisted paid)—regardless of their status serving children in 2020–2022, center-based child care providers as of 2019 serving children ages 0 through 5 years of age (not yet in kindergarten)—regardless of their status serving children in 2020–2022, and classroom-assigned instructional staff members working with children ages 0 through 5 years of age (not yet in kindergarten) in center-based child care providers as of 2019, regardless of their employment status in 2020–2022.

Annual Burden Estimates: This request is for an extension through spring 2022.

Instrument	Number of respondents (total over request period)	Number of responses per respondent (total over request period)	Average burden per response (in hours)	Total burden (in hours)
Home-based Provider Interview, Wave 2—In ECE during focal week	2,025	1	0.35	709
Home-based Provider Interview, Wave 2—Not in ECE during focal week	506	1	0.25	126
Center-based Provider Interview, Wave 2 spring or fall; in ECE during focal week	3,291	1	0.38	1,251
Center-based Provider Interview, Wave 2 spring or fall; not in ECE during focal week	1,097	1	0.22	241
Center-based Provider Fall 2021 Funding Receipt Supplement	1,255	1	0.20	251
Center-based Provider Interview Wave 2 fall; Centers completing in Wave 2 spring also	1,136	1	0.29	329
(Center-based) Workforce Interview—Wave 2; In ECE during Focal Week ..	1,775	1	0.37	657
(Center-based) Workforce Interview—Wave 2; Not in ECE during Focal Week	874	1	0.24	210

Estimated Total Burden Hours: 3,774.

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: Child Care and Development Block Grant (CCDBG) Act of 1990 as amended by the CCDBG Act of 2014 (Pub. L. 113–186).

Mary B. Jones,

ACF/OPRE Certifying Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; National Human Trafficking Hotline (NHTH) Performance Indicators

AGENCY: Office on Trafficking in Persons, Administration for Children and Families, Health and Human Services (HHS).

ACTION: Request for public comment.

SUMMARY: The Administration for Children and Families (ACF) is requesting approval for a new information collection: National Human

Trafficking Hotline (NHTH) Performance Indicators.

DATES: *Comments due within 60 days of publication.* In compliance with the requirements of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above.

ADDRESSES: Copies of the proposed collection of information can be obtained and comments may be forwarded by emailing infocollection@acf.hhs.gov. Alternatively, copies can also be obtained by writing to the Administration for Children and Families, Office of Planning, Research, and Evaluation (OPRE), 330 C Street SW, Washington, DC 20201, Attn: ACF Reports Clearance Officer. All requests, emailed or written, should be identified by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: Section 107(b)(1)(B)(ii) of the Trafficking Victims Protection Act of 2000, as amended at 22 U.S.C. 7105(b)(1)(B)(ii), authorizes the Secretary of Health and Human Services (HHS) to make a grant for a national communication system—the NHTH—to assist victims of severe forms of trafficking in persons in seeking help, receiving referrals, and reporting potential trafficking cases.

HHS made an award in the form of a Cooperative Agreement to a single, competitively selected grantee to maintain and support operation of the NHTH throughout the United States and U.S. territories. The NHTH is a toll-free hotline that operates 24 hours a day, every day of the year.

The Cooperative Agreement delineates the roles and responsibilities for the administration of the grant program, which include:

1. Operating the NHTH with experienced and trained anti-trafficking advocates;
2. Operating the NHTH website and responding to online signals;
3. Promoting NHTH services to increase the identification and protection of victims of severe forms of human trafficking;
4. Providing timely information and service referrals to human trafficking victims using a trauma-informed, person-centered, culturally responsive, and linguistically appropriate approach;
5. Notifying law enforcement agencies of potential cases of human trafficking as well as instances when a trafficking victim is in imminent danger; and
6. Documenting emerging trafficking schemes to assist in the detection and investigation of trafficking cases.

The NHTH grantee collects information about signalers (individuals who contact the hotline) and from signalers regarding potential victims of a severe form of trafficking in persons and human trafficking cases. Given the unique relationship the NHTH has to the public, OTIP is seeking clearance to collect information about and from these signalers that will be summarized and reported to OTIP by the NHTH grantee in the aggregate. The NHTH Performance Indicators information collection will provide data for OTIP to assess the extent to which the grantee meets required program activities to:

- Ensure potential victims of trafficking remain able to access assistance by constantly monitoring and mitigating factors impacting NHTH operations;
- Assist the grantee to assess and improve their project over the course of the project period;
- Disseminate insights related to human trafficking cases and trends to inform anti-trafficking strategies and policies; and