

provide CMS with the following about each individual, as relevant: last name, first name, date of birth, death indicator, disability indicator, incarceration information, Title II (annual and monthly) income information, and confirmation of attestations of citizenship status and SSN. SSA may also provide Quarters of Coverage data when CMS requests it.

Systems of Records

The systems of records and routine uses that support this matching program are identified below:

A. System of Records Maintained by CMS

- CMS Health Insurance Exchanges System (HIX), System No. 09–70–0560, last published in full at 78 FR 63211 (Oct. 23, 2013) and amended at 83 FR 6591 (Feb. 14, 2018). Routine use 3 authorizes CMS' disclosures of identifying information about applicants to SSA for use in this matching program.

B. Systems of Records Maintained by SSA

- Master Files of SSN Holders and SSN Applications (referred to as the Enumeration System), 60–0058, last fully published at 87 FR 263 (Jan. 4, 2022);
- Prisoner Update Processing System (PUPS), 60–0269, last fully published at 64 FR 11076 (Mar. 8, 1999) and updated at 72 FR 69723 (Dec. 10, 2007), 78 FR 40542 (July 5, 2013), and 83 FR 54969 (Nov. 1, 2018);
- Master Beneficiary Record (MBR) 60–0090, last fully published at 71 FR 1826 (Jan. 11, 2006), and updated at 72 FR 69723 (Dec. 10, 2007), at 78 FR 40542 (July 5, 2013), at 83 FR 31250 (July 3, 2018) and at 83 FR 54969 (Nov. 1, 2018); and
- Earnings Recording and Self-Employment Income System (referred to as the Master Earnings File (MEF)), 60–0059, last fully published at 71 FR 1819 (Jan. 11, 2006) and amended at 78 FR 40542 (July 5, 2013) and 83 FR 54969 (Nov. 1, 2018).

[FR Doc. 2023–15027 Filed 7–14–23; 8:45 am]

BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10174]

Agency Information Collection Activities: Submission for OMB Review; 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' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

DATES: Comments on the collection(s) of information must be received by the OMB desk officer by *August 16, 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.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, please access the CMS PRA website by copying and pasting the following web address into your web browser: <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing>.

FOR FURTHER INFORMATION CONTACT: William Parham at (410) 786–4669.

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. The term "collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal agencies to publish a 30-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice that summarizes the following proposed collection(s) of information for public comment:

1. *Type of Information Collection Request:* Revision of the currently approved collection; *Title of Information Collection:* Collection of Prescription Drug Data from MA–PD, PDP and Fallout Plans/Sponsors for Medicare Part D Payments; *Use:* The PDE data is used in the Payment Reconciliation System to perform the annual Part D payment reconciliation, any PDE data within the Coverage Gap Phase of the Part D benefit is used for invoicing in the CGDP, and the data are part of the report provided to the Secretary of the Treasury for Section 9008.

The information users will be pharmacy benefit managers (PBMs), third party administrators and pharmacies, and the PDPs, MA–PDs, Fallbacks, and other plans that offer coverage of outpatient prescription drugs under the Medicare Part D benefit to Medicare beneficiaries. The statutorily required data is used primarily for payment and is used for claim validation as well as for other legislated functions such as quality monitoring, program integrity and oversight. In addition, the PDE data are used to support operations and program development.

CMS has used PDE data to create summarized dashboards and tools, including the Medicare Part D Drug Spending Dashboard & Data, the Part D Manufacturer Rebate Summary Report, and the Medicare Part D Opioid Prescribing Mapping Tool. The data are also used in the Medicare Trustees

Report. Due to the market sensitive nature of PDE data, external uses of the data are subject to significant limitations. However, CMS does analyze the data on a regular basis to determine drug cost and utilization patterns in order to inform programmatic changes and to develop informed policy in the Part D program. *Form Number:* CMS–10174 (OMB control number: 0938–0982); *Frequency:* Monthly; *Affected Public:* Private Sector, Federal Government; *Number of Respondents:* 856; *Total Annual Responses:* 1,499,064,780; *Total Annual Hours:* 62,918. (For policy questions regarding this collection contact Shelly Winston at (443) 934–3621.)

Dated: July 12, 2023.

William N. Parham, III,

Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2023–15061 Filed 7–14–23; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for Office of Management and Budget Review; Mother and Infant Home Visiting Program Evaluation: Long-Term Follow-Up, Third Grade Data Collection (Office of Management and Budget #0970–0402)

AGENCY: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

ACTION: Request for public comments.

SUMMARY: The Administration for Children and Families (ACF), in partnership with the Health Resources and Services Administration, both of the U.S. Department of Health and Human Services (HHS), is proposing to collect data as part of the elementary school phase of the Mother and Infant Home Visiting Program Evaluation (MIHOPE). MIHOPE is a longitudinal study of the effects of Maternal, Infant, and Early Childhood Home Visiting (MIECHV)-funded home visiting on child and family outcomes. The purpose of the MIHOPE Long-Term Follow-Up, Third grade (MIHOPE–3G) data collection, which will focus on children when they are in approximately third grade, is to assess the long-term effects of MIECHV-funded home visiting on families and children when participating children are in elementary school.

DATES: Comments due within 30 days of publication. The Office of Management and Budget (OMB) must make a decision about the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication.

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. You can also obtain copies of the proposed collection of information by emailing OPREinfocollection@acf.hhs.gov.

Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: To date, MIHOPE has been collecting data through the time children in the study were in approximately kindergarten. The currently approved materials under this OMB number include those for the kindergarten follow-up. The kindergarten direct data collection with study participants is complete, but some administrative data are still being collected from states and local education agencies.

This request is to complete administrative data collection for the kindergarten follow-up and to conduct the following data collection activities for MIHOPE–3G: (1) child welfare records data collection from states and (2) school records data collection from states and local education agencies. Future information collection requests and related **Federal Register** notices will describe future data collection efforts for this project.

Data collected during the third grade follow-up study is being used to estimate the effects of MIECHV-funded programs on the following seven domains: (1) maternal health, (2) child health, (3) child development and school performance, (4) child maltreatment, (5) parenting, (6) crime or domestic violence, and (7) family economic self-sufficiency.

Respondents: For MIHOPE–3G, we will seek to obtain child welfare data from 11 states and school records data from up to 48 states and local education agencies. This data will be collected for 4,105 families who are currently participating in MIHOPE.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents (total over request period)	Number of responses per respondent (total over request period)	Avg. burden per response (in hours)	Total burden (in hours)	Annual burden (in hours)
Remaining Burden for Kindergarten Follow-up					
State and local education agency school records: data file submission	8	1	15.6	125	42
State child welfare records: data file submission	5	1	8.4	42	14
New Request for MIHOPE–3G					
State and local education agency school records: data file submission	48	2	33.75	3,240	1,080
State child welfare records: data file submission	11	^a 2.1	21.43	495	165

Estimated Total Annual Burden Hours: 1,301.

Note: The 2.1 responses is a weighted average that reflects that the study team

expects to collect 2 data extracts from 10 states and 3 data extracts from 1 state.