terminated by either party in accordance with regulations. In the event of termination of this agreement, payment will not be available for the ASC's services furnished to Medicare beneficiaries on or after the effective date of termination.

The CMS–377 form is used by ASCs to initiate both the initial and renewal survey by the State Survey Agency, which provides the certification required for an ASC to participate in the Medicare program. An ASC must complete the CMS–377 form and send it to the appropriate State Survey Agency prior to their scheduled accreditation renewal date. The CMS–377 form provides the State Survey Agency with information about the ASC facility's characteristics, such as, determining the size and the composition of the survey team on the basis of the number of ORs/procedure rooms and the types of surgical procedures performed in the ASC. *Form Numbers:* CMS–370 and CMS–377 (OMB control number: 0938–0266); *Frequency:* Occasionally; *Affected Public:* Private Sector—Business or other for-profit and Not-for-profit institutions; *Number of Respondents:* 1,567; *Total Annual Responses:* 1,567; *Total Annual Hours:* 1,012. (For policy questions regarding this collection contact Caroline Gallaher at 410–786–8705.)

5. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Home Health Agency Survey and Deficiencies Report; *Use:* In order to participate in the Medicare Program as a Home Health Agency (HHA) provider, the HHA must meet federal standards. This form is used to record information and patients' health and provider compliance with requirements and to report the information to the federal government. *Form Number:* CMS–1572 (OMB control number: 0938–0355); *Frequency:* Yearly; *Affected Public:* State, Local or Tribal Government; *Number of Respondents:* 3,833; *Total Annual Responses:* 3,833; *Total Annual Hours:* 1,917. (For policy questions regarding this collection contact Tara Lemons at 410–786–3030.)

6. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Disclosure Requirement for the In-Office Ancillary Services Exception; *Use:* Section 6003 of the Affordable Care Act (ACA) established a new disclosure requirement that a physician must perform for certain imaging services to meet the in-office ancillary services exception to the prohibition of the physician self-referral law. This section of the ACA amended section 1877(b)(2) of the Act by adding a requirement that the referring physician informs the patient, at the time of the referral and in writing, that the patient may receive the imaging service from another supplier.

Physicians who provide certain imaging services (MRI, CT, and PET) under the in-office ancillary services exception to the physician self-referral prohibition are required to provide the disclosure notice as well as the list of other imaging suppliers to the patient. The patient will then be able to use the disclosure notice and list of suppliers in making an informed decision about his or her course of care for the imaging service.

CMS would use the collected information for enforcement purposes. Specifically, if we were investigating the referrals of a physician providing advanced imaging services under the in-office ancillary services exception, we would review the written disclosure in order to determine if it satisfied the requirement. *Form Number:* CMS–10332 (OMB control number: 0938–1133); *Frequency:* Occasionally; *Affected Public:* Private Sector, Business or other for-profits, Not-for-profits institutions; *Number of Respondents:* 2,239; *Total Annual Responses:* 989,971; *Total Annual Hours:* 18,694. (For questions regarding this collection contact Laura Dash at 410–786–8623.)

Dated: November 16, 2020.

William N. Parham, III,

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

[FR Doc. 2020–25598 Filed 11–18–20; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Addition of New Instruments to Existing Information Collections by the Office of Refugee Resettlement (OMB #s: 0970–0553, 0970–0554, and 0970–0547)

AGENCY: Office of Refugee Resettlement, Administration for Children and Families, Department of Health and Human Services.

ACTION: Request for public comment.

SUMMARY: The Office of Refugee Resettlement (ORR), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is inviting public comments on several proposed instruments. The instruments will be added to the following existing information collections: Services Provided to Unaccompanied Alien Children (OMB #0970–0553), Placement and Transfer of Unaccompanied Alien Children into ORR Care Provider Facilities (OMB #0970–0554), and Administration and Oversight of the Unaccompanied Alien Children Program (OMB #0970–0547).

DATES: *Comments due within 60 days of publication.* In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described in this notice.

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: The components of these requests and the existing information collections to which each component will be added are as follows:

Services Provided to Unaccompanied Alien Children Into ORR Care Provider Facilities (OMB #0970–0553)

1. Admission: This instrument is used by ORR grantee case managers and clinicians to document the UAC's initial needs, functioning, and history. The Admission Details tab includes a case status timeline; biographic information on the UAC; admission and educational information; medical clearance information; influx transfer information, if applicable; system-generated information; a clickable, auto-generated list of *Admission Assessments* and the ability to create a new assessment; a clickable, auto-generated list of *Transfer Requests* and the ability to create a new transfer requests, if applicable; and a clickable, auto-generated list of *Long Term Foster Care (LTFC) Travel Requests* and the ability to create a new transfer requests, if applicable. The Related tab includes areas to upload case management, education, and medical documents; an area to add Entry Team members (individuals granted read/write access to the Admission instrument); and an auto-generated list of changes made to the

Admission instrument. The Call Logs tab includes a clickable, auto-generated list of calls and the ability to add a new call to the log.

2. Home Study/Post-Release Services (HS/PRS) Primary Provider Entity: This instrument is used by ORR grantee HS/PRS providers to add identifying information about their organization into the UAC Path system. Each organization only needs to be created once. Field values may be updated as often as needed.

3. *Home Study/Post-Release Services (HS/PRS) Subcontractor Entity:* This instrument is used by ORR grantee HS/PRS providers to add identifying information about their sub-grantee organizations into the UAC Path system and link them to their *HS/PRS Primary Provide Entity* record. Each organization only needs to be created once. Field values may be updated as often as needed.

4. Home Study/Post-Release Services (HS/PRS) Primary Provider Profile: This instrument is used by primary HS/PRS providers to add identifying information about caseworkers employed by their organization. Each individual only needs to be entered once. Field values may be updated as often as needed.

5. Home Study/Post-Release Services (HS/PRS) Subcontractor Profile: This instrument is used by primary HS/PRS providers to add identifying information about caseworkers employed their sub-grantee organizations. Each individual only needs to be entered once. Field values may be updated as often as needed.

6. Home Study/Post-Release Services (HS/PRS) Referral: This instrument is used by case managers to refer a UAC for a home study and/or post-release services. The Referral Details tab includes biographic information on the UAC; areas to enter information about the HS/PRS referral, referring program, sponsor, HS/PRS provider, and disposition of the case; an area to add Entry Team members (individuals granted read/write access to the referral); an area to upload related documents; a clickable, auto-generated list of HS/PRS referral assessments and the ability to create a new assessment; an auto-generated list of changes made to the referral; and a clickable, auto-generated list of related entries/records. The Related tab includes clickable, auto-generated lists of sponsor HS/PRS referrals, related UAC contacts, related UAC HS/PRS referrals, and related records/entries.

7. Post-Release Services (PRS) Event: This instrument is used by ORR grantee post-release service caseworkers to document referrals made and services provided at critical junctures of service provision, such as 14-day, 6-month, 12-month, and closure. The instrument contains auto-populated sponsor information and areas to document information about the HS/PRS provider, reason for referral, the minor's placement and safety status, and services areas addressed.

8. UAC Authorized/Restricted Call List and Call Log: This instrument is used by grantee case managers to create a list of authorized and restricted contacts to ensure safe communication for the UAC and document the details of phone calls made by a UAC.

9. Case Manager Call Log and Case Notes: This instrument is used by case managers to log any contact (in-person, phone, video, social media, or mail) they make in relation to the UAC's case, including any related notes.

10. Ohio Youth Assessment System (OYAS) Reentry Tool: This instrument was created by the University of Cincinnati Corrections Institute and consists of an Interview Guide, Self-Report Questionnaire, and Score Sheet. The tool is a risk/needs assessment used by case managers in secure and staff secure facilities to assess UAC for readiness to transition into the community and measure the UAC's progress while in ORR custody.

Placement and Transfer of Unaccompanied Alien Children Into ORR Care Provider Facilities (OMB #0970–0554)

1. Family Group Entity: This instrument is used by the ORR Intakes Team to associate UACs who are member of the same family with each other.

2. Influx Transfer Manifest: This instrument is used by designated care provider and ORR staff to plan, track, and notify stakeholders of group transfers to an influx care facility.

3. Influx Transfer Manual and Prescreen Criteria Review: This instrument is used by designated care provider staff to evaluate each UAC's eligibility to be transferred to an influx care facility. Care provider staff review and update information on daily during times of influx. The status in the prescreen criteria section is auto-populated based on information in the UAC's profile and may be overridden if requested by ORR.

Administration and Oversight of the Unaccompanied Alien Children Program (OMB #0970–0547)

1. Notification of Concern: This instrument is used by home study and post-release service caseworkers, care provider case managers, and the ORR National Call Center to notify ORR of certain concerns that arise after a UAC is released from ORR custody.

Respondents: ORR grantee and contractor staff, UAC, and sponsors.

Annual Burden Estimates:

SERVICES PROVIDED TO UNACCOMPANIED ALIEN CHILDREN

[OMB #0970–0553]

Instrument	Annual total number of respondents	Annual total number of responses per respondent	Average burden minutes per response	Annual total burden hours
Admission	216	278	20	20,016
Case Manager Call Log and Case Notes	216	8,426	5	151,668
Home Study/Post-Release Services Primary Provider Entity	9	1	10	2
Home Study/Post-Release Services Primary Provider Profile	9	13	10	20
Home Study/Post-Release Services Subcontractors Entity	51	1	10	9
Home Study/Post-Release Services Subcontractors Profile	51	13	10	111
Home Study/Post-Release Services (HS/PRS) Referral	216	68	15	3,672
Ohio Youth Assessment System (OYAS) Reentry Tool	506	3	75	1,898
Post-Release Services Event	60	968	60	58,080
UAC Authorized/Restricted Call List and Call Log	216	6,981	5	125,658
Estimated Annual Burden Hours Total				361,132

PLACEMENT AND TRANSFER OF UNACCOMPANIED ALIEN CHILDREN INTO ORR CARE PROVIDER FACILITIES

[OMB #0970–0554]

Instrument	Annual total number of respondents	Annual total number of responses per respondent	Average burden minutes per response	Annual total burden hours
Family Group Entity	16	188	5	251
Influx Transfer Manifest	3	12	20	12
Influx Transfer Manual and Prescreen Criteria Review	216	43,333	30	4,679,964
Estimated Annual Burden Hours Total				4,680,227

ADMINISTRATION AND OVERSIGHT OF THE UNACCOMPANIED ALIEN CHILDREN PROGRAM

[OMB #0970–0547]

Instrument	Annual total number of respondents	Annual total number of responses per respondent	Average burden minutes per response	Annual total burden hours
Notification of Concern	301	15	15	1,129
Estimated Annual Burden Hours Total				1,129

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.

Authority: 6 U.S.C. 279; 8 U.S.C. 1232; *Flores* v. *Reno Settlement Agreement,* No. CV85–4544–RJK (C.D. Cal. 1996).

Mary B. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2020–25477 Filed 11–18–20; 8:45 am]

BILLING CODE 4184–45–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Expedited OMB Review and Public Comment: Community Services Block Grant (CSBG) Annual Report (OMB #0970–0492)

AGENCY: Office of Community Services, Administration for Children and Families, Department of Health and Human Services.

ACTION: Request for public comment.

SUMMARY: The Office of Community Services (OCS), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), is requesting expedited review of an information collection request from the Office of Management and Budget (OMB) and is inviting public comments on the proposed collection of data for the new Community Services Block Grant (CSBG) CARES Act Supplemental and CSBG Disaster Supplemental funding. This information will be collected through modified versions of the currently approved CSBG Annual Report (OMB #0970–0492, expiration 2/28/2023).

DATES: *Comments due within 60 days of publication.* In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, ACF is soliciting public comment on the specific aspects of the information collection described in this notice.

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 ACF, 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: ACF is requesting that OMB grant a 180-day approval for this request under procedures for expedited processing. A request for review under normal procedures will be submitted within 180 days of the approval for this request. Any edits resulting from public comment will be incorporated into the submission under normal procedures. The CSBG Supplemental Annual Reports include modified versions of Modules 1, 2, and 4. Module 1 is modified to align with CSBG Disaster Supplemental and CSBG CARES State Plans and to help reduce the burden to the states. OCS modified Modules 2 and 4 to collect specific data for the supplemental funding and to reduce burden, including the removal of questions that were not pertinent to the data collection for the Supplemental Reports. OCS made additional technical modifications including minor wording, headings, and numbering revisions. Respondents are only expected to submit Module 3 once through the current CSBG Annual Report; OCS made technical revisions to allow respondents to confirm which funding source they are using—CSBG, CARES, or Disaster.

Respondents: State governments, including the District of Columbia and the Commonwealth of Puerto Rico, and U.S. territories and CSBG eligible entities (Community Action Agencies).