

(Authority: 44 U.S.C. 3101)

Robin D. Bailey, Jr.,
Chief Operating Officer, Centers for Disease
Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Reorganization of the Office of Financial Resources

AGENCY: Centers for Disease Control and
Prevention (CDC), the Department of
Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: CDC has modified its
structure. This notice announces the
reorganization of the Office of Financial
Resources (OFR) and the CDC
Immediate Office of the Director (IOD).
OFR added a branch and a new office
was established within the CDC IOD.

DATES: This reorganization was
approved by the Director of CDC on
June 20, 2024, and became effective.

FOR FURTHER INFORMATION CONTACT:
Victoria Hunter, Centers for Disease
Control and Prevention, 1600 Clifton
Road NE, MS H21–12, Atlanta, GA
30329. Telephone 404–639–7124; Email:
vdp5@cdc.gov.

SUPPLEMENTARY INFORMATION: Part C
(Centers for Disease Control and
Prevention) of the Statement of
Organization, Functions, and
Delegations of Authority of the
Department of Health and Human
Services (45 FR 67772–76, dated
October 14, 1980, and corrected at 45 FR
69296, October 20, 1980, as amended
most recently at 89 FR 19832, dated
March 20, 2024) is amended to reflect
the reorganization of Office of Financial
Resources and the CDC Immediate
Office of the Director, Centers for
Disease Control and Prevention.

Specifically, the changes are as follows:

- I. Under Part C, Section C–B,
Organization and Functions, make the
following changes:
 - Abolish the Office of Appropriations
(CAJE14)
 - Establish the Budget Formulation
Branch (CAJEVR)
 - Establish the Office of Budget Policy
and Appropriations (CAR)
- II. Under Part C, Section C–B,
Organization and Functions, after the
Budget Execution Services Branch 4
(CAJEVQ) insert the following:
Budget Formulation Branch
(CAJEVR). (1) manages and coordinates

development of the budget for CDC and
ATSDR from submissions prepared by
Center//Institute/Office contacts; (2)
formulates the CDC and ATSDR
financial plan, and evaluates and
assures total budget requests conform to
current administration policy and
economic assumptions in coordination
with CIOs; (3) coordinates with the
Office of Planning, Performance, and
Evaluation to include the Government
Performance and Results Act (GPRA)
Modernization Act performance
measures with budget proposals to HHS,
OMB and Congress; (4) prepares
periodic summary analysis and impact
statements on budget allowances and
applicable congressional actions; (5)
develops analyses of proposed budget
estimates and supporting narrative
through the use of available financial
data reporting systems for senior CDC
management; (6) maintains liaison with
HHS, OMB, the Government
Accountability Office, and other
government organizations on CDC's
financial management matters; (7)
collaborates with other parts of CDC in
the development and implementation of
long-range program and financing plans;
(8) completes requirements in timing
and reporting of cleared information to
parties outside the Executive Branch
(i.e., Congress, media, public); and (9)
develops and presents analyses, special
reports, background exhibits, and
graphical material on budget proposals,
budget activities, and related matters.

After the Office of Policy,
Performance, and Evaluation (CAQ)
insert the following: Office of Budget
Policy and Appropriations (CAR). The
Office of Budget Policy and
Appropriations: (1) provides leadership,
consultation, guidance, and advice on
matters of public health and budget
policy; (2) leads all Centers for Disease
Control and Prevention (CDC) and
Agency for Toxic Substances and
Disease Registry (ATSDR) Congressional
appropriations leadership activities
including strategic outreach and
interaction with Congressional
appropriators on appropriations/budget
matters; (3) supports the Office of
Financial Resources in the development
of CDC's and ATSDR's annual funding
request in accordance with Department
of Health and Human Services (HHS),
Office of Management and Budget
(OMB), and Congressional requirements,
policies, procedures, and regulations;
(4) maintains liaison with the HHS
Office of the Secretary (OS), OMB, other
government organizations, and Congress
on appropriations and budget policy
matters; (5) develops materials for, and
participates in, budget policy and

financial reviews and hearings before
HHS, OMB, and Congress; (6)
collaborates with CDC Washington
Office (CDC/W) and other parts of CDC,
and outside stakeholders, in the
development and implementation of
agency-wide legislative strategy; (7)
advances the CDC policy agenda
through interactions with
appropriations leadership; (8)
coordinates with Centers/Institute/
Offices on Congressional appropriations
leadership strategy and interactions,
ensuring a unified presentation of CDC
interests to legislators; (9) leads the
development and updates to spend
plans for CDC supplemental funding,
infectious diseases rapid response
reserve fund requests, and new budget
programs; (10) tracks, analyzes, and
reports on appropriations legislation;
(11) protects and advances the agency's
reputation, scientific credibility, and
interests; (12) informs CDC leadership of
current developments and provides
insight into the budget policy
environment; and (13) coordinates, with
the CDC/W and CIO partnership
activities that relate to budget policy
and appropriations to advance the
agency's priorities.

Delegations of Authority

All delegations and redelegations of
authority made to officials and
employees of affected organizational
components will continue in them or
their successors pending further
redelegation, provided they are
consistent with this reorganization.

(Authority: 44 U.S.C. 3101)

Robin D. Bailey, Jr.,
Chief Operating Officer, Centers for Disease
Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–179, CMS–
10536, CMS–R–153 and CMS–10326]

Agency Information Collection Activities: Proposed Collection; Comment Request; Withdrawal

AGENCY: Centers for Medicare &
Medicaid Services, HHS.

ACTION: Notice; withdrawal.

SUMMARY: On Tuesday, July 2, 2024, the
Centers for Medicare & Medicaid
Services (CMS) published a notice
entitled, “Agency Information

Collection Activities: Proposed Collection; Comment Request.” The document invited public comments on four separate information collection requests notices specific to document identifiers: CMS–179, CMS–10536, CMS–R–153 and CMS–10326. Through the publication of this document, we are withdrawing each of the aforementioned notices.

DATES: The comment period associated with the publication for CMS–179, CMS–10536, CMS–R–153 and CMS–10326 on July 2, 2024 (89 FR 54826), will be null and void upon publication of this document.

SUPPLEMENTARY INFORMATION: Each of the aforementioned notices already published on June 28, 2024 (89 FR 54002) and the comment period associated with that publication remains in full effect.

In FR document, 2024–14581, published on July 2, 2024 (89 FR 54826), we are withdrawing all four of the notices listed in the Information Collections section of the document.

William N. Parham, III,

Director, Division of Information Collections and Regulatory Impacts, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2024–15097 Filed 7–9–24; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–1500/1490S]

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 9, 2024.

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:* Extension of a currently approved collection; *Title of Information Collection:* Health Insurance Common Claims Form and

Supporting Regulations at 42 CFR part 424, subpart C; *Use:* The CMS–1500 and the CMS–1490S forms are used to deliver information to CMS for CMS to reimburse for provided services. Medicare Administrative Contractors use the data collected on the CMS–1500 and the CMS–1490S to determine the proper amount of reimbursement for Part B medical and other health services (as listed in section 1861(s) of the Social Security Act) provided by physicians and suppliers to beneficiaries. The CMS–1500 is submitted by physicians/suppliers for all Part B Medicare. Serving as a common claim form, the CMS–1500 can be used by other third-party payers (commercial and nonprofit health insurers) and other Federal programs (e.g. TRICARE, RRB, and Medicaid). *Form Number:* CMS–1500/1490S (OMB control number: 0938–1197); *Frequency:* Occasionally; *Affected Public:* Private Sector: Business or other for-profit and not-for-profit institutions; *Number of Respondents:* 2,507,992; *Total Annual Responses:* 994,038,623; *Total Annual Hours:* 17,328,912. (For policy questions regarding this collection contact Sadaf Ali-Simpson at 667–414–0004.)

William N. Parham, III,

Director, Division of Information Collections and Regulatory Impacts, Office of Strategic Operations and Regulatory Affairs.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–222–17, CMS–10261, and CMS–R–284]

Agency Information Collection Activities: Proposed Collection; 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 60 days for public comment on the