investigation. The minimum background investigation is Tier 1 and the Office of Personnel Management offers a Tier 1C for child care.

However, there is no requirement in the law or HSPD-12 that requires childcare employees to be subject to the Tier 1C since employees of childcare providers are neither government employees nor government contractors. The childcare providers are required to complete the criminal history background checks mandated in the Crime Control Act of 1990, Public Law 101-647, dated November 29, 1990, as amended by Public Law 102–190, dated December 5, 1991. These statutes require that each employee of a childcare center located in a federal building or in leased space must undergo a background check.

According to GSA policy, childcare workers (as described above) will need to submit the following:

1. An original signed copy of a *Basic* National Agency Check Criminal History, GSA Form 176; and

2. Two sets of fingerprints on FBI Fingerprint Cards, for SF–87 and/or electronic prints from an enrollment center.

3. Electronically submit the e-qip (SF85) application for completion of the Tier 1C.

This is not a request to collect new information; this is a request to change the form that is currently being used to collect this information.

B. Annual Reporting Burden

Respondents: 1,200. Responses per Respondent: 1. Hours per Response: 1. Total Burden Hours: 1,200.

C. Public Comments

A 60-day notice published in the **Federal Register** at 89 FR 59099 on July 22, 2024. One comment was received.

Comment: There have been suggestions that the child care provider keep form 176 on file for each employee—seems redundant—since HSPD and OPM have these files requiring the provider is over kill and really these clearance documents that the federal government require should not be in a private company's file as many of the questions asked are not things the private sector employers can ask for and by having them it can lead to the suggestion that we have used these question to dismiss employees or used to not hire them based on answers to clearance questions.

Response: There is no requirement to keep a Form 176 on file for each employee. However, the childcare provider must comply with applicable requirements and adequately demonstrate such compliance, if necessary.

Lois Mandell,

Director, Regulatory Secretariat Division, General Services Administration. [FR Doc. 2024–25741 Filed 11–5–24; 8:45 am] BILLING CODE 6820–23–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10829]

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

DATES: Comments on the collection(s) of information must be received by the OMB desk officer by *December 6, 2024*.

burden.

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 an approved collection; Title of Information Collection: Improper Payment Pre-Testing and Assessment (IPPTA) Data Request Form; Use: To comply with the Payment Integrity Information Act of 2019 (PIIA), HHS finalized the IPPTA to prepare State Exchanges for the measurement of improper payments of advance payments of the premium tax credit (APTC), to test processes and procedures that support HHS's review of determinations of APTC made by State Exchanges, and to provide a mechanism for HHS and State Exchanges to share information that would aid in developing an efficient measurement process. The PIIA requires executive agencies to report on Federal programs susceptible to significant improper payments. The APTC program was identified as a Federal program susceptible to significant improper payments. Currently in operation are 19 State Exchanges, which do not use the Federal platform to perform eligibility and enrollment determinations. Each State Exchange was selected to participate in the IPPTA data collection

for a period of 2 calendar years, which began in 2024 or will begin in 2025 depending on which group the State Exchange is assigned. HHS has revised the approved data request form to include new instructions and a data mapping tool to aid State Exchanges in their understanding and collecting of necessary data. This collection of data and data documentation is intended to allow HHS to test the data elements as specified in the scenarios provided to each State Exchange in the pre-testing and assessment data request form to enable HHS to comply with the requirements of the Payment Integrity Information Act of 2019 (PIIA) and implementing guidance. Form Number: CMS–10829 (OMB control number: 0938-1439); Frequency: Annually; Affected Public: State, Local, and Federal Government; Number of Respondents: 11; Number of Responses: 11; Total Annual Hours: 265. (For policy questions regarding this collection contact Halina DeSantis at 410-786-1000).

William N. Parham, III,

Director, Division of Information Collections and Regulatory Impacts, Office of Strategic Operations and Regulatory Affairs. [FR Doc. 2024–25791 Filed 11–5–24; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS-R-71 and CMS-R-262]

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 ČMS' 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 proposed action. Interested persons are invited to send comments regarding our burden estimates 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 must be received by

January 6, 2025. ADDRESSES: When commenting, please

reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. *Electronically*. You may send your comments electronically to *http://www.regulations.gov*. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments.

2. *By regular mail.* You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number: ____, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

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 N. Parham at (410) 786–4669. SUPPLEMENTARY INFORMATION:

SUPPLEMENTARY INFORMATION

Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

CMS–R–71 Quality Improvement Organization (QIO) Assumption of Responsibilities and Supporting Regulations

CMS–R–262 CMS Plan Benefit Package (PBP) and Formulary CY 2026

Under the 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 requires Federal agencies to publish a 60-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.

Information Collections

1. Type of Information Collection *Request:* Extension of a currently approved collection; Title of Information Collection: Quality Improvement Organization (QIO) Assumption of Responsibilities and Supporting Regulations; Use: The Peer Review Improvement Act of 1982 amended Title XI of the Social Security Act to create the Utilization and Quality Control Peer Review Organization (PRO) program which replaces the Professional Standards Review Organization (PSRO) program and streamlines peer review activities. The term PRO has been renamed Quality Improvement Organization (QIO). This information collection describes the review functions to be performed by the QIO. It outlines relationships among QIOs, providers, practitioners, beneficiaries, intermediaries, and carriers. Form Number: CMS-R-71 (OMB control number: 0938–0445); Frequency: Yearly; Affected Public: Business or other forprofit and Not-for-profit institutions; Number of Respondents: 6,120; Total Annual Responses: 502,246; Total Annual Hours: 1,091,597. (For policy questions regarding this collection contact Cheryl Lehane at 617-461-4888.)

2. Type of Information Collection *Request:* Revision of a currently approved collection; Title of Information Collection: CMS Plan Benefit Package (PBP) and Formulary CY 2026; Use: Under the Medicare Modernization Act (MMA), Medicare Advantage (MA) and Prescription Drug Plan (PDP) organizations are required to submit plan benefit packages for all Medicare beneficiaries residing in their service area. The plan benefit package submission consists of the Plan Benefit Package (PBP) software, formulary file, and supporting documentation, as necessary. MA and PDP organizations