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The Director, Office of Strategic  
Business Initiatives, Office of the Chief  
Operating Officer, Centers for Disease  
Control and Prevention, has been  
delegated the authority to sign **Federal  
Register** notices pertaining to  
announcements of meetings and other  
committee management activities, for  
both the Centers for Disease Control and  
Prevention and the Agency for Toxic  
Substances and Disease Registry.

**Kalwant Smagh,**

*Director, Office of Strategic Business  
Initiatives, Office of the Chief Operating  
Officer, Centers for Disease Control and  
Prevention.*

[FR Doc. 2024–27856 Filed 11–26–24; 8:45 am]

**BILLING CODE 4163–18–P**

**DEPARTMENT OF HEALTH AND  
HUMAN SERVICES**

**Centers for Medicare & Medicaid  
Services**

[Document Identifier: CMS–10891]

**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 December 27, 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](http://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](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:* New collection (Request for a  
new OMB control number); *Title of  
Information Collection:* Medicaid  
Program; Medicare Savings Program  
Application and Eligibility  
Determinations; *Use:* The provisions in  
this collection of information request  
are necessary for helping to enroll  
individuals into the Medicare Savings  
Programs (MSPs) as directed by the  
Medicare Improvements for Patients and

Providers Act of 2008 (MIPPA) and for  
implementing the September 21, 2023  
(88 FR 65230) final rule entitled,  
“Streamlining Medicaid: Medicare  
Savings Program Eligibility  
Determination and Enrollment”  
(hereinafter “MSP final rule”) (CMS–  
2421–F; RIN 0938–AU00).

CMS did not previously estimate  
several costs for implementing the  
provisions of MIPPA related to MSPs as  
well as costs related to MSPs that were  
longstanding costs inherent to the  
Medicaid program that predated MIPPA.  
To address that oversight, we estimate  
such burden in this collection of  
information request. We also estimate  
burden and savings associated with the  
provisions in the MSP final rule. Such  
burden was set out in the Regulatory  
Impact Analysis section of the final rule.

The MSPs are essential to the health  
and well-being of those enrolled,  
promoting access to care and helping  
free up individuals’ limited income for  
food, housing, and other life necessities.  
Through the MSPs, Medicaid pays  
Medicare Part B premiums each month  
for over 10 million individuals and Part  
A premiums for over 700,000  
individuals. State Medicaid agencies  
receive applications and adjudicate  
eligibility for MSP coverage.

MIPPA created new requirements for  
states to leverage the Medicare Part D  
Low-Income Subsidy (LIS) program to  
help enroll likely-eligible individuals in  
MSPs, and the MSP final rule expanded  
those requirements. States use  
information collected by the Social  
Security Administration on the LIS  
application (transmitted to states with  
the consent of an individual completing  
an application) to determine eligibility  
for the MSPs. Under the MSP final rule,  
the state Medicaid agency accepts and  
verifies the information provided on the  
LIS application (to the extent allowable  
under the MSP final rule);  
communicates with the applicant or the  
authorized representative about any  
additional information needed to make  
an MSP determination; makes the MSP  
eligibility determination; enrolls the  
individual in an MSP, if eligible; and  
informs the individual about the rights  
and responsibilities for applying for full  
Medicaid eligibility. Applicants include  
anyone who chooses to apply for LIS  
and provides consent for their  
application to be considered for MSPs.

In addition to building on MIPPA and  
strengthening the LIS pathway for  
enrolling in MSPs, the MSP final rule  
streamlined MSP eligibility and  
enrollment processes, reduced  
administrative burden on states and  
applicants, and increased enrollment  
and retention of eligible individuals.

*Form Number:* CMS–10891 (OMB control number: 0938–TBD); *Frequency:* Occasionally; *Affected Public:* State, Local and Tribal Governments and Individuals or households; *Number of Respondents:* 3,460,750; *Total Annual Responses:* 3,460,750; *Total Annual Hours:* 5,517,157. (For policy questions regarding this collection contact: Melissa Heitt at 410–786–2484.)

**William N. Parham, III**

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

[FR Doc. 2024–27871 Filed 11–26–24; 8:45 am]

**BILLING CODE 4120–01–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Medicare & Medicaid Services**

[CMS–3471–N]

**Medicare Program; Public Meeting for Air Ambulance Quality & Patient Safety Advisory Committee—December 12, 2024, February 18, 2025, and May 8, 2025**

**AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS.

**ACTION:** Notice of meeting.

**SUMMARY:** This notice announces virtual public meetings of the Air Ambulance Quality and Patient Safety (AAQPS) Advisory Committee. The AAQPS Advisory Committee will review options to establish quality, patient safety, and clinical capability standards for each clinical capability level of air ambulances.

**DATES:** *Virtual Meeting Dates:* The AAQPS Advisory Committee will hold virtual meetings on December 12, 2024, February 18, 2025, and May 8, 2025, from 10:00 a.m. to 5:00 p.m., Eastern Time (E.T.).

*Deadline for Submitting Requests for Special Accommodations:* Requests for special accommodations must be received at least 2 weeks before each meeting.

*Registration Link:* The virtual meetings will be open to the public and held via the Zoom webinar platform. Virtual attendance information will be provided upon registration. To register for the virtual meeting, please visit: <https://www.cms.gov/medicare/regulations-guidance/advisory-committees/advisory-committee-air-ambulance-quality-and-patient-safety>. Attendance is open to the public subject to any technical or capacity limitations.

*Deadline for Registration:* All individuals who plan to attend the

virtual public meeting must register to attend. Request to provide oral comments are due at least fourteen (14) calendar days prior to the meeting date. Interested parties are encouraged to register as far in advance of the meeting as possible.

A detailed agenda and materials will be available prior to the meeting on the AAQPS Advisory Committee website at: <https://www.cms.gov/medicare/regulations-guidance/advisory-committees/advisory-committee-air-ambulance-quality-and-patient-safety>.

A recording and a summary of the meeting will be made available on the AAQPS Advisory Committee website approximately 45 calendar days after the meeting.

**ADDRESSES:** *Virtual Meeting Location:* All meetings are open to the public and instructions to view will be posted on the AAQPS Advisory Committee website, and upon registration. If you wish to provide oral comments during the meetings you must complete a registration form on the AAQPS Advisory Committee website at: <https://www.cms.gov/medicare/regulations-guidance/advisory-committees/advisory-committee-air-ambulance-quality-and-patient-safety>, and submit a written copy of your remarks to [AAQPS@cms.hhs.gov](mailto:AAQPS@cms.hhs.gov).

**FOR FURTHER INFORMATION CONTACT:** Ashley Spence, CMS, at (410) 786–2000 or via email at [AAQPS@cms.hhs.gov](mailto:AAQPS@cms.hhs.gov).

**SUPPLEMENTARY INFORMATION:**

**I. Background**

The Secretary of the Department of Health and Human Services (HHS) and the Secretary of Transportation established the Air Ambulance Quality and Patient Safety (AAQPS) Advisory Committee on August 22, 2023, in response to section 106 of the No Surprises Act, enacted as part of the Consolidated Appropriations Act, 2021, div. BB, tit. I, Public Law 116–260 (December 27, 2020). The AAQPS Advisory Committee will be tasked with reviewing options to establish quality, patient safety, and clinical capability standards for each clinical capability level of air ambulances.

The AAQPS Advisory Committee is governed by the provisions of the Federal Advisory Committee Act (FACA), Public Law 92–463 (Oct. 6, 1972), as amended by 5 U.S.C. app. 2.

**II. Advisory Committee Membership Roster**

On June 2, 2023, HHS published an Invitation for Member Nominations in the **Federal Register** for the AAQPS Advisory Committee (88 FR 37253).

This notice also announces the members of the AAQPS Advisory Committee.

- Jeff Richey—HHS Secretary’s Designee/Representative.
- Robert Reckert—DoT Secretary’s Designee/Representative.
- Ben Clayton—DoT Representative.
- Colonel Steven L. Coffee—Patient Advocate.
- Dr. Jordan Pritzker—Group Health Plans and Health Insurance Issuers.
- Dr. Mark Gamber—HHS Representative.
- Dr. William Hinckley—Healthcare Provider.
- Eileen Frazer—Accrediting bodies.
- Grace Arnold—State Insurance Regulator.
- Jason Clark—HHS Representative.
- Jason Quisling—DoT Representative.
- Jeff Houser—DoT Representative.
- Paul Julander—DoT Representative.
- Thomas Judge—DoT Representative.

**III. Summary of the Agenda**

During the December 12, 2024, February 18, 2025, and May 8, 2025 meetings, the AAQPS Advisory Committee will review options to establish quality, patient safety, and clinical capability standards for each clinical capability level of air ambulances. A more detailed agenda and meeting materials will be made available 3 days before the meetings on the AAQPS Advisory Committee website at <https://www.cms.gov/medicare/regulations-guidance/advisory-committees/advisory-committee-air-ambulance-quality-and-patient-safety>.

**IV. Public Participation**

The meetings will be open to the public for virtual attendance on a first-come, first-served basis, as there may be capacity or technical limitations. Please see the **ADDRESSES** section to view the meeting link.

The Department is committed to providing equal access to this meeting for all participants. If you need alternative formats or services because of a disability, such as sign language interpreter, please contact the person listed in the **FOR FURTHER INFORMATION CONTACT** section no later than 2 weeks before each meeting.

The Department will accept oral comments, which must be limited to the objectives of the committee and limited to three (3) minutes per person. Individual members of the public who wish to present oral comments must register and provide a written copy of prepared remarks for inclusion in the meeting records and for circulation to