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 [INSERT DATE 30 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER].

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, you may make your request using the following:

1. Access CMS’ Web Site address at


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: 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 for-profit and Not-for-profit institutions; Number of Respondents: 6,939; Total Annual Responses: 972,478; Total Annual Hours: 1,034,655. (For policy questions regarding this collection contact Kimberly Harris at 401-837-1118.)

2. **Type of Information Collection Request:** Extension of a currently approved collection; **Titles of Information Collection:** ASC Forms for Medicare Program Certification; **Use:** The form CMS-370 titled “Health Insurance Benefits Agreement” is used for the purpose of establishing an ASC’s eligibility for payment under Title XVIII of the Social Security Act (the “Act”). This agreement, upon acceptance by the Secretary of Health & Human Services, shall be binding on the ASC and the Secretary. The agreement may be 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.)

3. **Type of Information Collection Request:** Reinstatement with change of a previously 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.)

4. Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Final Peer Review Organizations Sanction Regulations; Use: The Peer Review Improvement Act of 1982 amended Title XI of the Social Security Act (the Act), creating the Utilization and Quality Control Peer Review Organization Program. Section 1156 of the Act imposes obligations on health care practitioners and others who furnish or order services or items under Medicare. This section also provides for sanction actions, if the Secretary determines that the obligations as stated by this section are not met. Quality Improvement Organizations (QIOs) are responsible for identifying violations. The QIOs may allow practitioners or other entities, opportunities to submit relevant information before determining that a violation has occurred. The information collection requirements contained in this information collection request are used by the QIOs to collect the information necessary to make their decision. Form Number: CMS-R-65 (OMB control number: 0938–0444); Frequency: Occasionally; Affected Public: Private sector - Business or other for-profit and Not-for-profit institutions; Number of Respondents: 18; Total Annual Responses: 18; Total Annual Hours: 4,716. (For policy questions regarding this collection contact Kimberly Harris at 401-837-1118.)
Dated: February 1, 2021.

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Office of Strategic Operations and Regulatory Affairs.

4120-01-U-P

[FR Doc. 2021-02358 Filed: 2/3/2021 8:45 am; Publication Date: 2/4/2021]