



DEPARTMENT OF HEALTH AND HUMAN SERVICES

[OS-0990-0488]

Agency Information Collection Request. 60-Day Public Comment Request

AGENCY: Office of the Secretary, Administration for Strategic Preparation and Response (ASPR), U.S. Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Administration for Strategic Preparation and Response (ASPR), HHS, is publishing the following summary of a proposed collection for public comment.

DATES: Comments on the information collection request (ICR) must be received on or before [INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER].

ADDRESSES: Submit your comments to wayland.coker@hhs.gov or by calling (202) 875-1103.

FOR FURTHER INFORMATION CONTACT: When submitting comments or requesting information, please include the document identifier OS-0990-0488, and project title for reference, and send to Wayland Coker, the ASPR Center for Industrial Base Management and Supply Chain, Chief Supply Chain Strategist, wayland.coker@hhs.gov, or call (202) 875-1103.

SUPPLEMENTARY INFORMATION: Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Title of the Collection: Ensure a Strong Public Health Supply Chain Through Streamlined Oversight and American Priorities.

Type of Collection: Extension

Office of Management and Budget (OMB) No. 0990–0488—Administration for Strategic Preparedness and Response—Center for Industrial Base Management and Supply Chain.

Abstract

HHS, Administration for Strategic Preparedness and Response (ASPR) is seeking approval by OMB on an extension of the existing clearance (OMB Control Number: 0990-0488, Expiration Date: March 31, 2026). HHS is working with the White House and across the federal interagency to launch a multiyear implementation involving the identification and coordination of measurable activities across the United States government, state, local, tribal, and territorial (SLTT) jurisdictions, and private sector partners. Cross-sectoral engagement is the underpinning of many of the interdependent implementation activities. For example, one such activity involves information collection from SLTT partners on facility, local, and state stockpiling plans to ensure coordinated plans are in place for a future public health emergency. Potential engagements include, and are not limited to, surveys, stakeholder meetings, requests for information (RFI), town hall meetings, and workshops. With each of these different mechanisms of engagement, there is a varied frequency ranging from single engagements to regularly recurring meetings.

In 2025, the White House capacity and strengthening the public health supply chain through a series of executive actions focused on reducing foreign dependency, enhancing domestic manufacturing capacity, and improving emergency preparedness. This includes the establishment of the Strategic Active Pharmaceutical Ingredients Reserve (SAPIR), directed by HHS and managed through ASPR, to ensure a secure, domestic supply of essential drug components. The administration has also invoked Section 232 of the *Trade Expansion Act* of 1962 to assess whether reliance on imports of materials such as processed critical minerals and

copper poses a national security risk, including risks to the production of pharmaceuticals and other medical countermeasures. These coordinated efforts reflect a broader federal strategy to increase the resilience, agility, and visibility of the public health supply chain in support of future emergency response operations. To support White House priorities, HHS seeks a 3-year extension to its Paperwork Reduction Act clearance and will engage with SLTT, trade groups, mixed cross-sector audiences, non- governmental organizations, manufacturers, academia, healthcare providers and facilities, and local communities.

Estimated Annualized Burden Table Over Three Years

Type of Respondent	Form Name	No. of Respondents	No. Responses per Respondent	Average Burden per Response (in hours)	Total Burden Hours
Private sector companies, SLTT, Trade groups and associations, NGOs, Manufacturers, distributors, Academia, Healthcare delivery providers/facilities, Public, USG Supply chain inventory holders, Biopharmaceutical industry, Biotechnology development companies, Communities, GPOs, standards development organizations, logistics, third party contractors, purchasing organizations, professional associations/societies, Mixed cross-sector audience, labor unions, workforce training providers, organizations, state and local workforce boards, and individuals who rely on wearable	Informed consent	32800	1	0.08	2624
	Demographics standardized questionnaire with decision logic allowing some questions to be omitted	32800	1	0.25	8200
	Cognitive questionnaire	5990	1	8	47920
	Formative interviews and focus groups	6600	2	4	52800
	Town halls and public meetings	10200	2	8	163200
	Supply chain questionnaires	1000	156	0.5	78000
	Knowledge-based questionnaires	6000	1	0.5	3000
	Interviews and focus groups	3000	1	1	3000
	Instrumented information collection	160	1	0.5	80

medical countermeasures					
Total Burden Hours Over Three Years					358,824

Catherine Howard,

Paperwork Reduction Act Reports Clearance Officer,

Office of the Secretary.

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