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 (the PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information (including each proposed extension or re-statement 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 November 21, 2017.

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, you may make your request using one of following:


2. Email your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@cms.hhs.gov.

3. Call the Reports Clearance Office at (410) 786–1326.

FOR FURTHER INFORMATION CONTACT: William Parham at (410) 786–4669.

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–185 Granting and Withdrawal of Deeming Authority to Private Nonprofit Accreditation Organizations and CLIA Exemption under State Laboratory Programs

CMS–718–721 Business Proposal Forms for Quality Improvement Organizations (QIOs)

CMS–10123/–10124 Fast Track Appeals Notices: NOMNC/DENC

CMS–10142 Bid Pricing Tool (BPT) for Medicare Advantage (MA) Plans and Prescription Drug Plans (PDP)


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 re-statement 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 Collection

1. Type of Information Collection Request: Extension of currently approved collection: Title of Information Collection: Granting and Withdrawal of Deeming Authority to Private Nonprofit Accreditation Organizations and CLIA Exemption Under State Laboratory Programs: Use: The information required is necessary to determine whether a private accreditation organization/State licensure program standards and accreditation/licensure process is at least equal to or more stringent than those of the Clinical Laboratory Improvement Amendments of 1988 (CLIA). If an accreditation organization is approved, the laboratories that it
accredits are “deemed” to meet the CLIA requirements based on this accreditation. Similarly, if a State licensure program is determined to have requirements that are equal to or more stringent than those of CLIA, its laboratories are considered to be exempt from CLIA certification and requirements. The information collected will be used by HHS to: Determine comparability/equivalency of the accreditation organization standards and policies or State licensure program standards and policies to those of the CLIA program; to ensure the continued comparability/equivalency of the CLIA program; to ensure the continued comparability/equivalency of the requirements. The information collected from CLIA certification and laboratories are considered to be exempt stringent than those of CLIA, its requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State accredits are “deemed” to meet the requirements that are equal to or more stringent than those of CLIA, its accreditation. Similarly, if a State ac...