

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hr)	Total burden (in hr)
Program Participant	Chronic Disease Self-Management Workshop Evaluation.	190	1	10/60	32
Program Participant	Chronic Disease Self-Management Questionnaire (Pre-Post Test).	190	2	10/60	63
Total	95

Jeffrey M. Zirger,

Lead, Information Collection Review Office,
Office of Scientific Integrity, Office of Science,
Centers for Disease Control and Prevention.

[FR Doc. 2022–21318 Filed 9–30–22; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Healthcare Infection Control Practices Advisory Committee (HICPAC)

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of meeting.

SUMMARY: In accordance with the Federal Advisory Committee Act, the CDC announces the following meeting for the Healthcare Infection Control Practices Advisory Committee (HICPAC). This virtual meeting is open to the public, limited only by the number of audio and web conference lines (500 audio and web conference lines are available). Time will be available for public comment. Registration is required.

DATES: The meeting will be held on November 3, 2022, from 12 p.m. to 2:30 p.m., EST.

ADDRESSES: To register for this web conference, please go to: www.cdc.gov/hicpac. All registered participants will receive the meeting link and instructions shortly before the meeting. Please click the link below to join the webinar: <https://cdc.zoomgov.com/j/1618328215?pwd=NWx1cGZGS3Y0THdzS1RraHBpZFNZZz09>.

Meeting ID: 161 832 8215.

Passcode: 76683972.

FOR FURTHER INFORMATION CONTACT:

Sydnee Byrd, M.P.A., Program Analyst, HICPAC, Division of Healthcare Quality Promotion (DHQP), National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), CDC, 1600 Clifton Road NE, Mailstop H16–3, Atlanta,

Georgia 30329–4027, Telephone: (404) 718–8039; Email: HICPAC@cdc.gov.

SUPPLEMENTARY INFORMATION:

Purpose: The Committee is charged with providing advice and guidance to the Director, DHQP; the Director, NCEZID; the Director, CDC; and the Secretary, Department of Health and Human Services, regarding (1) the practice of healthcare infection prevention and control; (2) strategies for surveillance, prevention, and control of infections, antimicrobial resistance, and related events in settings where healthcare is provided; and (3) periodic updating of CDC guidelines and other policy statements regarding prevention of healthcare-associated infections and healthcare-related conditions.

Matters To Be Considered: The agenda will include the following updates: The Healthcare Personnel Guideline Workgroup; Isolation Precautions Guideline Workgroup; Neonatal Intensive Care Unit Guideline Workgroup; Neonatal Pediatric Surveillance Workgroup; and Dental Unit Waterlines Guideline Update. Agenda items are subject to change as priorities dictate.

Public Participation

Oral Public Comment: Time will be available for public comment. Members of the public who wish to provide public comments should plan to attend the public comment session at the start time listed. Please note that the public comment period may end before the time indicated, following the last call for comments.

Written Public Comment: The public may submit written comments in advance of the meeting. Comments should be submitted in writing by email to the contact person listed above. The deadline for receipt of written public comment is October 24, 2022. All requests must contain the submitter's name, address, and organizational affiliation, as well as the topic being addressed. Written comments should not exceed one single-spaced typed page in length. Written comments received in

advance of the meeting will be included in the official record of the meeting.

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

[FR Doc. 2022–21406 Filed 9–30–22; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–3424–CN]

Medicare and Medicaid Programs: Approval of Application From Det Norske Veritas for Continued Hospital Accreditation Program; Correction

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

ACTION: Final notice; correction.

SUMMARY: This document corrects a technical error that appeared in the final notice published in the **Federal Register** on September 6, 2022, entitled “Approval of Application From Det Norske Veritas for Continued Hospital Accreditation Program.”

Effective date: This correction is effective October 3, 2022.

Applicability date: The decision announced in the final notice is effective through September 26, 2026.

FOR FURTHER INFORMATION CONTACT: Joy Webb, (410) 786–1667 or Lillian Williams, (410) 786–8636.

SUPPLEMENTARY INFORMATION:

I. Background

In FR Doc. 2022–19099 of September 6, 2022 (87 FR 54510), there was a technical error that is identified and corrected in this correcting document. The provision in this correction document is effective as if it had been included in the document published September 6, 2022. Accordingly, the correction is effective through September 26, 2026.

II. Summary of Errors

On page 54512, we inadvertently listed the accrediting organization as “TJC”. Therefore, we are replacing “TJC’s” with “DNV’s”.

III. Waiver of Proposed Rulemaking

We ordinarily publish a notice of proposed rulemaking in the **Federal Register** to provide a period for public comment before the provisions of a rule take effect in accordance with section 553(b) of the Administrative Procedure Act (APA) (5 U.S.C. 553(b)). However, we can waive this notice and comment procedure if the Secretary finds, for good cause, that the notice and comment process is impracticable, unnecessary, or contrary to the public interest, and incorporates a statement of the finding and the reasons therefore in the notice.

We believe that this final notice correction does not constitute a rule that would be subject to the notice and comment requirements. This document corrects a technical and typographical error in the final notice. This final notice correction is intended to ensure that the information in the final notice is accurate.

We find that there is good cause to waive such requirements as unnecessary, as we are not altering our decision to approve the application by DNV for its continued hospital accrediting program, but rather, we are simply making a technical correction. This final notice correction is intended solely to ensure that the final notice accurately reflects the correct information.

IV. Correction of Errors

In FR Doc. 2022–19099 of September 6, 2022 (87 FR 54510), make the following correction:

1. On page 54512, in the first column; in the first partial paragraph, line 4, correct “TJC’s” to read “DNV’s”.

The Director, Office of Strategic Operations and Regulatory Affairs of the Centers for Medicare & Medicaid Services (CMS), Kathleen Cantwell, having reviewed and approved this document on September 20, 2022, authorizes Lynette Wilson, who is the

Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Dated: September 27, 2022.

Lynette Wilson,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

[FR Doc. 2022–21344 Filed 9–28–22; 4:15 pm]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–1776–N]

Medicare Program; Town Hall Meeting on the FY 2024 Applications for New Medical Services and Technologies Add-On Payments

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

ACTION: Notice of meeting.

SUMMARY: This notice announces a town hall meeting in accordance with the Social Security Act (the Act) to discuss fiscal year (FY) 2024 applications for add-on payments for new medical services and technologies under the hospital inpatient prospective payment system (IPPS). Interested parties are invited to this virtual meeting to present their comments, recommendations, and data regarding whether the FY 2024 new medical services and technologies applications meet the substantial clinical improvement criterion.

DATES:

Meeting Dates: The New Technology Town Hall meeting announced in this notice will be held virtually on Wednesday, December 14, 2022 and Thursday, December 15, 2022 (the number of new technology applications submitted will determine if a second day for the meeting is necessary; see the **SUPPLEMENTARY INFORMATION** section for details regarding the second day of the meeting and the posting of the final schedule). The New Technology Town Hall meeting will begin each day at 9 a.m. eastern standard time (EST) and check-in via online platform will begin at 8:30 a.m. EST.

Deadline for Requesting Special Accommodations: The deadline to submit requests for special accommodations is 5 p.m., EST on Monday, November 21, 2022.

Deadline for Registration of Presenters at the New Technology Town Hall Meeting: The deadline to register to present at the New Technology Town

Hall meeting is 5 p.m., EST on Monday, November 21, 2022.

Deadline for Submission of Agenda Item(s) or Written Comments for the New Technology Town Hall Meeting: Written comments and agenda items (public comments to be delivered at the New Technology Town Hall meeting) for discussion at the New Technology Town Hall meeting, including agenda items by presenters (presentation slide decks), must be received by 5 p.m. EST on Monday, November 28, 2022.

Deadline for Submission of Written Comments after the New Technology Town Hall Meeting for Consideration in the Fiscal Year (FY) 2024 Hospital Inpatient Prospective Payment System/ Long Term Care PPS (IPPS/LTCH PPS) Proposed Rule: Individuals may submit written comments after the New Technology Town Hall meeting, as specified in the **ADDRESSES** section of this notice, on whether the service or technology represents a substantial clinical improvement. These comments must be received by 5 p.m. EST on Thursday, December 22, 2022, to ensure consideration in the FY 2024 IPPS/ LTCH PPS proposed rule.

ADDRESSES:

Meeting Location: The New Technology Town Hall meeting will be held virtually via live stream technology or webinar and listen-only via toll-free teleconference. Live stream or webinar and teleconference dial-in information will be provided through an upcoming listserv/email notice and will appear on the final meeting agenda, which will be posted on the New Technology website when available at: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/newtech.html>. Continue to check the website for updates.

Registration and Special Accommodations: Individuals wishing to present at the meeting must follow the instructions located in section III. of this notice. Individuals who need special accommodations should send an email to newtech@cms.hhs.gov.

Submission of Agenda Item(s) or Written Comments for the New Technology Town Hall Meeting: Each presenter must submit an agenda item(s) regarding whether a FY 2024 application meets the substantial clinical improvement criterion. Agenda items, written comments, questions or other statements must not exceed three single-spaced typed pages and may be sent via email to newtech@cms.hhs.gov.

FOR FURTHER INFORMATION CONTACT:

Drew Kasper, (410) 786–8926, drew.kasper@cms.hhs.gov and newtech@cms.hhs.gov.