

OMB Control No. 9000–0067, Incentive Contracts, in all correspondence.

**Edward Loeb,**

*Acting Director, Federal Acquisition Policy Division, Office of Governmentwide Acquisition Policy, Office of Acquisition Policy, Office of Governmentwide Policy.*

[FR Doc. 2015–16566 Filed 7–6–15; 8:45 am]

**BILLING CODE 6820–EP–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–10137 and CMS–10237]

#### Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Centers for Medicare & Medicaid Services.

**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 (the 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 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 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.

**DATES:** Comments must be received by September 8, 2015.

**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:

1. Access CMS' Web site address at <http://www.cms.hhs.gov/PaperworkReductionActof1995>.

2. Email your request, including your address, phone number, OMB number, and CMS document identifier, to [Paperwork@cms.hhs.gov](mailto:Paperwork@cms.hhs.gov).

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

**FOR FURTHER INFORMATION CONTACT:** Reports Clearance Office at (410) 786–1326.

#### 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–10137 Solicitation for Applications for Medicare Prescription Drug Plan 2017 Contracts

#### CMS–10237 Part C—Medicare Advantage and 1876 Cost Plan Expansion Application

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 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.

#### Information Collection

1. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Solicitation for Applications for Medicare Prescription Drug Plan 2017 Contracts; *Use:* The information will be collected under the solicitation of proposals from prescription drug plans, Medicare Advantage (MA) plans that offer integrated prescription drug and health care coverage (MA–PD) plans, Cost Plan, PACE, and Employer Group Waiver Plan applicants. The information will be used by CMS to: ensure that applicants meet CMS requirements and to support the determination of contract awards. Participation in the Part D program is voluntary. Only organizations that are interested in participating in the program will respond to the solicitation. The MA–PDs that voluntarily participate in the Part C program must submit a Part D application and successful bid. *Form Number:* CMS–10137 (OMB Control Number: 0938–0936); *Frequency:* Yearly; *Affected Public:* Private sector (Business or other For-profits and Not-for-profit institutions); *Number of Respondents:* 254; *Total Annual Responses:* 230; *Total Annual Hours:* 2,109. (For policy questions regarding this collection contact Arianne Spaccarelli at 410–786–5715).

2. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Part C—Medicare Advantage and 1876 Cost Plan Expansion Application; *Use:* The information will be collected under the solicitation of Part C applications from Medicare Advantage, Employer Group Waiver Plan, and Cost Plan applicants and will be used by CMS to ensure that applicants meet CMS requirements, and to support the determination of contract awards. Participation is voluntary whereby only organizations that are interested in participating in the program will respond to the solicitation. Medicare Advantage (MA) organizations that offer integrated prescription drug and health care products (MA–PD plans) that voluntarily participate in the Part C program must submit a Part D application and successful bid. *Form Number:* CMS–10237 (OMB Control Number: 0938–0935); *Frequency:* Yearly; *Affected Public:* Private sector (Business or other For-profits and Not-for-profit institutions); *Number of Respondents:* 566; *Total Annual Responses:* 566; *Total Annual Hours:*

21,926. (For policy questions regarding this collection contact Wanda Pigatt-Canty at 410-786-6177).

Dated: July 1, 2015.

**William N. Parham, III,**

*Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.*

[FR Doc. 2015-16608 Filed 7-6-15; 8:45 am]

**BILLING CODE 4120-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Community Living

#### Notice of Intent to Award a Single Supplement to the Eldercare Locator

**ACTION:** Notice of intent to award a single supplement to the National Association of Area Agencies on Aging.

**SUMMARY:** The Administration for Community Living (ACL) is announcing supplemental funding for the Eldercare Locator program. The Eldercare Locator program helps older adults and their families and caregivers find their way through the maze of services for older adults by linking to a trustworthy network of national, State, Tribal and community organizations and services through a nationally recognized toll-free number. The Eldercare Locator also provides older adults and caregivers who require more in depth support the opportunity to speak with highly trained eldercare consultants who can better triage the situation. The purpose of this announcement is to award supplemental funds to the National Association of Area Agencies on Aging to support additional specialized staff and enhanced technology to better serve callers, mobile and after hour callers.

*Program Name:* Eldercare Locator.

*Award Amount:* \$162,681.

*Budget Period:* 6/1/2015 to 5/31/2016.

*Award Type:* Cooperative Agreement.

**Statutory Authority:** The statutory authority for grants under this notice is contained in Title IV of the Older Americans Act (OAA) (42 U.S.C. 3032), as amended by the Older Americans Act Amendments of 2006. Statutory authority specifically for the Eldercare Locator is contained in Title II of the Older Americans Act (202(a)(21).

*Catalog of Federal Domestic Assistance (CFDA) Number:* 93.048 Discretionary Projects

#### I. Program Description

The Administration on Aging, an agency of the U.S. Administration for Community Living, has been funding the Eldercare Locator (the Locator) since 1991. The Eldercare Locator links older

persons and their caregivers to resources through a nationally recognized toll-free number, 1-800-677-1116 and Web site ([www.eldercare.gov](http://www.eldercare.gov)). The goal is to provide users with the information and resources they need that will help older persons live independently and safely in their homes and communities for as long as possible.

The Eldercare Locator call center utilizes live agents to help callers find their way through the maze of services for older adults by linking to a trustworthy network of national, State, Tribal and community organizations and services. In 2011, an additional feature was added to assist older adults and caregivers who require more in depth support the opportunity to speak with highly trained eldercare consultants who can better triage the situation.

#### II. Justification for the Supplemental Funding

Since 2011, there has been an increase in the number of callers with very complex situations, multiple issues or require assistance with long-term care planning. Because of the complexity, eldercare consultant and senior staff calls are much longer than a regular information specialist call which averages about 5 minutes. There is a need to increase the number of eldercare consultants and/or senior level staff available to handle this higher demand for intense consultation. In addition, there is a need to enhance the technical capabilities of the call center to better serve after hours and mobile callers.

#### III. Agency Contact

For further information or comments regarding this program expansion supplement, contact Sherri Clark, U.S. Department of Health and Human Services, Administration for Community Living, Office of External Affairs, One Massachusetts Avenue NW., Washington, DC 20001; telephone (202) 357-3506; email [sherri.clark@acl.hhs.gov](mailto:sherri.clark@acl.hhs.gov).

Dated: June 29, 2015.

**Kathy Greenlee,**

*Administrator and Assistant Secretary for Aging.*

[FR Doc. 2015-16507 Filed 7-6-15; 8:45 am]

**BILLING CODE 4154-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration on Community Living

#### Availability of Program Instructions for MIPPA Funds Program Title: Medicare Improvements for Patients and Providers Act: State Plans for Medicare Savings Program, Low Income Subsidy & Prescription Drug Enrollment Outreach and Assistance

*Announcement Type:* Initial.  
*Funding Opportunity Number:* HHS-2015-ACL-MI-1502

*Statutory Authority:* The Medicare Improvements for Patients and Providers Act of 2008—Section 119, Public Law (Pub. L.) 110-275 as amended by the Patient Protection and Affordable Care Act of 2010 (Affordable Care Act), reauthorized by the American Taxpayer Relief Act of 2012 (ATRA), reauthorized by section 110 of the Protecting Access to Medicare Act of 2014 and reauthorized by the Medicare Access and CHIP Reauthorization Act of 2015.

Catalog of Federal Domestic Assistance (CFDA) Number: 93.071.

**DATES:** The deadline date for the submission of MIPPA state plans is 11:59 PM EST, August 31, 2015.

#### I. Funding Opportunity Description

The purpose of MIPPA funding is to provide states with an opportunity to expand, extend, or enhance their outreach efforts to beneficiaries on Medicare Part D and for those with limited incomes. In 2014 ACL released a funding opportunity for states to submit a three year state plan to conduct MIPPA activities. With this announcement ACL is reopening the funding announcement for states that did not submit state plans in 2014 to now submit a two-year MIPPA state plan to conduct MIPPA activities over the remaining life of the grant.

States that are currently funded under MIPPA do not have to reapply.

In addition, in 2016 there will be a similar opportunity released for states that are not receiving MIPPA funds at that time to apply for FY 16 funds with a one year state plan.

MIPPA funds are provided to enhance efforts through statewide and local coalition building focused on intensified outreach activities to help beneficiaries likely to be eligible for the Low Income Subsidy program (LIS), Medicare Savings Program (MSP), Medicare Prescription Drug Coverage (Part D) and in assisting beneficiaries in applying for benefits. ACL will provide funding to State Health Insurance