Affected Public: Businesses or other for-profit and not-for-profit institutions.

Respondent's Obligation: Required to obtain or retain benefits.

Frequency: On occasion.

Type of Request: Revision and extension.

Number of Respondents: 34,842.

Responses per Respondent: ~1.55.

Annual Responses: 122,024.

Average Burden per Response: ~17.05.

Annual Burden Hours: 2,075,685 (includes 39,075 reporting hours and 2,036,610 recordkeeping hours).

Needs and Uses: The information collections under OMB Control Number 0704–0441 pertain to all information that offerors or contractors must submit related to DFARS contract quality assurance programs. This renewal includes the incorporation of OMB Control Number 0704–0541.

a. 252.246–7003, Notification of Potential Safety Issues. Contracting officers require timely notification of potential safety defects so that (1) systems and equipment likely affected by the situation can be readily identified, and (2) appropriate engineering investigation and follow-on actions can be taken to establish and mitigate risk.

b. 252.246–7005, Notice of Warranty Tracking of Serialized Items. The information provided by offerors under this provision alerts contracting officers in those cases where the offeror is proposing to provide a warranty for an individual contract line item for which DoD has not specified a warranty in the solicitation. The warranty notice will permit the Government to recognize and utilize any warranty after contract award.

c. 252.246–7006, Warranty Tracking of Serialized Items, implements section 818 of the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2012 (Pub. L. 112–81 as amended by section 817 of the NDAA for FY 2015 (Pub. L. 113–291). The information provided by contractors allows DoD to track warranties for item unique item identification (IUID) required items in the IUID registry to obtain maximum utility of warranties provided on contracted items. The identification and enforcement of warranties is essential to the effectiveness and efficiency of DoD's material readiness. Providing visibility and accountability of warranty data associated with acquired goods, from the identification of the requirement to the expiration date of the warranted item, significantly enhances DoD's ability to take full advantage of warranties, resulting in—

(1) Reduced costs;

(2) Ability to recognize benefits included at no additional cost;

(3) Ability to compare performance against Government-specified warranties; and

(4) Identification of sufficient durations for warranties for specific goods.

d. 252.246–7008, Sources of Electronic Parts. The notification and documentation requirements are necessary to comply with statute. The contracting officer will use the information to ensure that the contractor performs the traceability of parts, additional inspection, testing, and authentication required when an electronic part is not obtained from a trusted supplier. The Government may also use this information to more actively perform acceptance.

Comments and recommendations on the proposed information collection should be sent to Ms. Jasmeet Seehra, DoD Desk Officer, at *Oira_submission@omb.eop.gov.* Please identify the proposed information collection by DoD Desk Officer and the Docket ID number and title of the information collection

You may also submit comments, identified by docket number and title, by the following method: *Federal eRulemaking Portal: http://www.regulations.gov.* Follow the instructions for submitting comments.

DoD Clearance Officer: Ms. Angela James. Requests for copies of the information collection proposal should be sent to Ms. James at *whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil.*

Jennifer Lee Hawes,

Regulatory Control Officer, Defense Acquisition Regulations System.

[FR Doc. 2019–20845 Filed 9–24–19; 8:45 am]

BILLING CODE 5001–06–P

DEPARTMENT OF DEFENSE

Defense Acquisition Regulations System

[Docket Number DARS–2019–0044; OMB Control Number 0704–0434]

Information Collection Requirement; Defense Federal Acquisition Regulation Supplement (DFARS); Radio Frequency Identification Advance Shipment Notices; Submission for OMB Review; Comment Request

AGENCY: Defense Acquisition Regulations System, Department of Defense (DoD).

ACTION: Notice.

SUMMARY: The Defense Acquisition Regulations System has submitted to OMB for clearance, the following proposed revision of a collection of information under the provisions of the Paperwork Reduction Act.

DATES: Consideration will be given to all comments received by October 25, 2019.

SUPPLEMENTARY INFORMATION: *Title, Associated Form, and OMB Number:* Defense Federal Acquisition Regulation Supplement (DFARS); Radio Frequency Identification Advance Shipment Notices; OMB Control Number 0704–0434.

Affected Public: Businesses or other for-profit and not-for-profit institutions.

Respondent's Obligation: Required to obtain or retain benefits.

Frequency: On Occasion.

Type of Request: Revision.

Number of Respondents: 5,217.

Responses per Respondent: 3,782.

Annual Responses: 19,732,850.

Average Burden per Response: Approximately 1.16 seconds.

Annual Burden Hours: 6,358.

Needs and Uses: The clause at DFARS 252.211–7006, Passive Radio Frequency Identification, requires the contractor to ensure that the data on each passive RFID tag are unique and conform to the requirements that they are readable and affixed to the appropriate location on the specific level of packaging in accordance with MIL–STD–129 tag placement specifications. The contractor shall encode an approved RFID tag using the appropriate instructions at the time of contract award. Regardless of the selected encoding scheme, the contractor is responsible for ensuring that each tag contains a globally unique identifier. The contractor shall electronically submit advance shipment notices with the RFID tag identification in advance of the shipment in accordance with the procedures at *https://wawf.eb.mil/.* DoD uses advance shipment notices for the shipment of material containing Radio Frequency Identification (RFID) tag data. DoD receiving personnel use the advance shipment notice to associate the unique identification encoded on the RFID tag with the corresponding shipment. Use of the RFID technology permits DoD an automated and sophisticated end-to-end supply chain that has increased visibility of assets and permits delivery of supplies to the warfighter more quickly.

Comments and recommendations on the proposed information collection should be sent to Ms. Jasmeet Seehra, DoD Desk Officer, at *Oira_submission@omb.eop.gov.* Please identify the proposed information collection by DoD

Desk Officer and the Docket ID number and title of the information collection.

You may also submit comments, identified by docket number and title, by the following method: *Federal eRulemaking Portal: http://www.regulations.gov.* Follow the instructions for submitting comments.

DoD Clearance Officer: Ms. Angela James. Requests for copies of the information collection proposal should be sent to Ms. James at *whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil.*

Jennifer Lee Hawes,

Regulatory Control Officer, Defense Acquisition Regulations System.

[FR Doc. 2019–20844 Filed 9–24–19; 8:45 am]

BILLING CODE 5001–06–P

DEPARTMENT OF DEFENSE

Office of the Secretary

TRICARE; Civilian Health and Medical Program of the Uniformed Services (CHAMPUS); Adoption of Medicare's Home Health Value-Based Purchasing (HHVBP) Adjustments for Reimbursement Under TRICARE's Home Health Prospective Payment System Demonstration

AGENCY: Office of the Secretary, Department of Defense.

ACTION: Notice of TRICARE's adoption of Medicare's Home Health Value-Based Purchasing Model as a Demonstration.

SUMMARY: This notice describes the adoption of Medicare's Home Health Value-Based Purchasing (HHVBP) adjustments for reimbursement under TRICARE's Home Health Prospective Payment System (HH PPS). In recognition that the Defense Health Agency (DHA) strongly supports the implementation of value-based incentive programs, in accordance with Section 705(a) of National Defense Authorization Act (NDAA) for Fiscal Year 2017, the adoption of this model establishes a new value-based initiative within the TRICARE program, based on Medicare's similar pilot. In the Medicare HHVBP model, the Centers for Medicare and Medicaid Services (CMS) determines a payment adjustment up to the maximum percentage, upward or downward, based on the Home Health Agency's (HHA) Total Performance Score (TPS). As a result, the model incentivizes quality improvements and encourages efficiency. States selected for participation in the Medicare HHVBP model include Arizona, Florida, Iowa, Maryland, Massachusetts, Nebraska, North Carolina, Tennessee, and Washington.

CMS cannot release HHVBP adjustment factors to TRICARE, so Home Health Agencies (HHAs) in the participating states will be required to send their annual payment adjustment reports to the applicable TRICARE contractors prior to January 1 each year. Failure to submit the required payment adjustment documentation would result in full application of the negative adjustment factor for the calendar year. This requirement allows TRICARE to mirror Medicare's HHVBP payment adjustments. The TRICARE HHVBP model will only apply to Medicare-certified HHAs in the nine participating states. Specialized HHAs that qualify for corporate services provider status but are not Medicare-certified will continue to be reimbursed under the CHAMPUS Maximum Allowable Charge (CMAC) system and will not be subject to the TRICARE HHVBP model.

DATES: This demonstration project will be effective January 1, 2020, through December 31, 2022, unless terminated earlier by Medicare or by TRICARE.

ADDRESSES: Defense Health Agency (DHA), TRICARE, Medical Benefits and Reimbursement Office, 16401 East Centretech Parkway, Aurora, CO 80011–9066.

FOR FURTHER INFORMATION CONTACT: Mr. Jahanbakhsh Badshah, Medical Benefits and Reimbursement Section, TRICARE, telephone (303) 676–3881. Questions regarding payment of specific claims should be addressed to the appropriate TRICARE contractor.

SUPPLEMENTARY INFORMATION:

A. Background

As authorized by section 1115A of the Social Security Act and finalized in the Medicare calendar year (CY) 2016 Home Health Prospective Payment System (HH PPS) final rule (80 FR 68624), CMS began testing the Home Health Value-Based Purchasing (HHVBP) Model in January 2016. The specific goals of the Model are to: (1) Provide incentives for better quality care with greater efficiency; (2) study new potential quality and efficiency measures for appropriateness in the home health setting; and (3) enhance the current public reporting process. It is expected that tying quality to payment through a system of value-based purchasing for all Medicare-certified Home Health Agencies (HHAs) providing services in the states of Arizona, Florida, Iowa, Maryland, Massachusetts, Nebraska, North Carolina, Tennessee, and Washington will improve the beneficiaries' experience and outcomes. It is also expected that payment adjustments that both reward improved quality and penalize poor performance will incentivize quality improvement and encourage efficiency. TRICARE's adoption of the HHVBP model will strengthen the impact of the incentives included within the model by adding TRICARE's market share to Medicare's. Adoption of this model by the TRICARE program will also continue DHA's efforts to transition payments to reward high-quality providers, and leverages Medicare's experience to implement the most effective value-based payment methodologies.

The distribution of payment adjustments under this HHVBP Model are based on quality performance, as measured by both achievement and improvement, across a set of quality measures constructed to minimize the burden as much as possible and improve care. The degree of the payment adjustment is dependent on the level of quality achieved or improved from the base year, with the highest upward performance adjustment going to competing HHAs with the highest overall level of performance based on either achievement or improvement in quality. The size of a competing HHA's payment adjustment for each year under the Model is dependent upon the HHA's performance with respect to that calendar year relative to other competing HHAs of similar size in the same state, and relative to its own performance during the baseline year. Medicare utilizes quarterly performance reports, annual payment adjustment reports and annual publicly available performance reports to align the competitive forces within the market to deliver care based on value. The quality performance scores and relative peer rankings are determined through the use of a baseline year and subsequent performance periods for each HHA. A payment adjustment report is provided once a year to each of the HHAs by CMS. The annual report from CMS provides the HHA's payment adjustment percentage and explains how the adjustment was determined relative to its performance scores. This is the document that the HHAs in the selected states will be required to submit to TRICARE contractors prior to the beginning of each calendar year, upon adoption of the HHVBP by TRICARE.

The Medicare model will be implemented over a total of seven years that began on January 1, 2016, and ends December 31, 2022. (However, if Medicare decides to terminate or expand the demonstration TRICARE