

seeking input on these and other data fields to be considered and information on the costs associated with submitting this information.

Recommendation 4—FMCSA should structure a user-friendly version of the MCMIS data file used as input to SMS without any personally identifiable information to facilitate its use by external parties, such as researchers, and by carriers. In addition, FMCSA should make user-friendly computer code used to compute SMS elements available to individuals in accordance with reproducibility and transparency guidelines.

FMCSA Comments

FMCSA agrees that there could be benefits from making MCMIS data available to researchers and carriers. Through this **Federal Register** notice, FMCSA seeks input on how the MCMIS data would be used by researchers and others to determine the best method(s) for providing the data file.

The Agency is considering developing the programming, screen shots, and preview capacity so that changes from one month to another are explained to motor carriers to help carriers understand the implications of violations and crashes on their SMS data. Input on the information that would be helpful in reviewing SMS data is requested through this notice.

Recommendation 5—FMCSA should undertake a study to better understand the statistical operating characteristics of the percentile ranks to support decisions regarding the usability of public scores.

FMCSA Comments

Like NAS, FMCSA has been unable to quantify the impacts to motor carriers of publicly displaying the SMS percentiles. The Agency has only anecdotal information about the business impacts of the public percentiles on the SMS Web site. Historically, insurance companies and shippers have been reluctant to share data on how safety data is used to determine rates. And, while the Agency has been contacted by companies advising that they lost business because of SMS, these claims have not been validated or assimilated into a usable analysis.

Through this notice, FMCSA seeks data from motor carriers, insurance companies, and shippers regarding the impacts of the public display of SMS percentiles and alerts on businesses. This information will be used to identify next steps for this recommendation.

Recommendation 6—Given that there are good reasons for both an absolute and a relative metric on safety performance, FMCSA should decide on the carriers that receive SMS alerts using both the SMS percentile ranks and the SMS measures, and the percentile ranks should be computed both conditionally within safety event groups and over all motor carriers.

FMCSA Comments

The Agency has heard from motor carriers with increased measures or percentiles due to an increase in vehicles or clean inspections. Analysis of the number of carriers that received higher measures and percentiles without a violation or crash indicates this happens to a very small number of carriers. However, FMCSA agrees that the methodology should be revised so that a safety event that is not a violation or a crash is not the sole reason for an increased measure or percentile.

In addition, FMCSA anticipates investigating the use of a hybrid measure that combines relative and absolute metrics as part of its development of the IRT model. FMCSA seeks comment from stakeholders on this issue, how it could be implemented, and when such changes would be appropriate.

Issued under the authority delegated in 49 CFR 1.87 on: August 21, 2017.

John Van Steenburg,

Assistant Administrator/Chief Safety Officer.

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DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0606]

Agency Information Collection

Activity: Regulation for Submission of Evidence

AGENCY: Veterans Health Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: Veterans Health Administration, Department of Veterans Affairs (VA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of a currently approved

collection, and allow 60 days for public comment in response to the notice.

DATES: Written comments and recommendations on the proposed collection of information should be received on or before October 27, 2017.

ADDRESSES: Submit written comments on the collection of information through Federal Docket Management System (FDMS) at www.Regulations.gov or to Brian McCarthy, Veterans Health Administration, Office of Regulatory and Administrative Affairs (10B4), Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420 or email to Brian.McCarthy4@va.gov. Please refer to “OMB Control No. 2900-0606” in any correspondence. During the comment period, comments may be viewed online through FDMS.

FOR FURTHER INFORMATION CONTACT:

Brian McCarthy at (202) 461-6345.

SUPPLEMENTARY INFORMATION: Under the PRA of 1995, Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VHA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VHA's functions, including whether the information will have practical utility; (2) the accuracy of VHA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Authority: U.S. Code: 38 U.S.C. 1729.

Title: Regulation for Submission of Evidence—Title 38 CFR 17.101(a)(4).

OMB Control Number: 2900-0606.

Type of Review: Renewal of a currently approved collection.

Abstract: Under the provisions of 38 CFR, Section 17.101(a)(4), entitled “Amount of Recovery or Collection—Third Party Liability”, a third-party payer that is liable for reimbursing VA for health care VA provided to Veterans with non-service-connected conditions continues to have the option of paying either the billed charges as described in Section 17.101 or the amount the health plan demonstrates it would pay to providers other than entities of the United States for the same care or services in the same geographic area. If

the amount submitted for payment is less than the amount billed, VA will accept the submission as payment, subject to verification at VA's discretion. A VA employee having responsibility for collection of such charges may request that the third party payer submit evidence or information to substantiate the appropriateness of the payment amount (e.g., health plan policies, provider agreements, medical evidence, proof of payment to other providers demonstrating the amount paid for the same care and services VA provided). This information would be needed to determine whether the third-party payer has met the test of properly demonstrating its equivalent private sector provider payment amount for the same care or services and within the same geographic area as provided by VA. This form provides for requesting patient medical records, health plan policies, provider agreements and any type or records that provide evidence of medical services and proof of payments made to others for the same medical care and services.

If VA accepts the submitted payment that is less than the billed charges, the third party payer can be subject to rate verification. In the event that rate verification is conducted, the results can be used to negotiate better rates, recoup underpayments, or amend agreements. Absent a third party payer agreement, VA should also be reimbursed billed charges or the amount third party payers would pay to non-government entities.

Affected Public: Individuals and households.

Estimated Annual Burden: 800 hours.

Estimated Average Burden per Respondent: 120 minutes.

Frequency of Response: Annually.

Estimated Number of Respondents: 400.

By direction of the Secretary.

Cynthia Harvey-Pryor,

Department Clearance Officer Office of Quality and Compliance, Department of Veterans Affairs.

[FR Doc. 2017-18158 Filed 8-25-17; 8:45 am]

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DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0219]

Agency Information Collection Activity: CHAMP VA Benefits—Application, Claim, Other Health Insurance & Potential Liability

AGENCY: Veterans Health Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: Veterans Health Administration, Department of Veterans Affairs (VA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed revision of a currently approved collection, and allow 60 days for public comment in response to the notice.

DATES: Written comments and recommendations on the proposed collection of information should be received on or before October 27, 2017.

ADDRESSES: Submit written comments on the collection of information through Federal Docket Management System (FDMS) at www.Regulations.gov or to Brian McCarthy, Veterans Health Administration, Office of Regulatory and Administrative Affairs (10B4), Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420 or email to Brian.McCarthy4@va.gov. Please refer to "OMB Control No. 2900-0219" in any correspondence. During the comment period, comments may be viewed online through FDMS.

FOR FURTHER INFORMATION CONTACT: Brian McCarthy at (202) 461-6345.

SUPPLEMENTARY INFORMATION:

Under the PRA of 1995, Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VHA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VHA's functions, including whether the information will have practical utility; (2) the accuracy of VHA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Authority: 38 U.S.C. Sections 501 and 1781, 10 U.S.C. Sections 1079 and 1086, 42 U.S.C. Sections 2651, 2652 and 2653.

Title: CHAMP VA Benefits—Application, Claim, Other Health Insurance & Potential Liability.

OMB Control Number: 2900-0219.

Type of Review: Revision of a currently approved collection. Titles:

1. VA Form 10-10d, Application for CHAMPVA Benefits
2. VA Form 10-7959a, CHAMPVA Claim Form
3. VA Form 10-7959c, CHAMPVA Other Health Insurance (OHI) Certification
4. VA Form 10-7959d, CHAMPVA Potential Liability Claim
5. VA Form 10-7959e, VA Claim for Miscellaneous Expenses
6. Payment (beneficially claims)
7. Review and Appeal Process
8. Clinical Review

OMB Control Number: 2900-0219.

Type of Review: Revision of a currently approved collection.

Abstracts:

1. VA Form 10-10d, Application for CHAMPVA Benefits, is used to determine eligibility of persons applying for healthcare benefits under the CHAMPVA program in accordance with 38 U.S.C. Sections 501 and 1781.

2. VA Form 10-7959a, CHAMPVA Claim Form, is used to adjudicate claims for CHAMPVA benefits in accordance with 38 U.S.C. Sections 501 and 1781, and 10 U.S.C. Sections 1079 and 1086. This information is required for accurate adjudication and processing of beneficiary submitted claims. The claim form is also instrumental in the detection and prosecution of fraud. In addition, the claim form is the only mechanism to obtain, on an interim basis, other health insurance (OHI) information.

3. Except for Medicaid and health insurance policies that are purchased exclusively for the purpose of supplementing CHAMPVA benefits, CHAMPVA is always the secondary payer of healthcare benefits (38 U.S.C. Sections 501 and 1781, and 10 U.S.C. Section 1086). VA Form 10-7959c, CHAMPVA—Other Health Insurance (OHI) Certification, is used to systematically obtain OHI information and to correctly coordinate benefits among all liable parties.

4. The Federal Medical Care Recovery Act (42 U.S.C. 2651-2653), mandates recovery of costs associated with healthcare services related to an injury/illness caused by a third party. VA Form 10-7959d, CHAMPVA Potential Liability Claim, provides basic information from which potential liability can be assessed. Additional authority includes 38 U.S.C. Section 501; 38 CFR 1.900 *et seq.*; 10 U.S.C. Sections 1079 and 1086; 42 U.S.C. Sections 2651-2653; and Executive Order 9397.

5. VA Form 10-7959e, VA Claim for Miscellaneous Expenses, information collection is needed to carry out the health care programs for certain children of Korea and/or Vietnam veterans authorized under 38