

### III. Provisions of the Proposed Notice

On June 15, 2018, we published a proposed notice (83 FR 27992) in the **Federal Register** announcing CHAP's request for continued approval of its Medicare hospice accreditation program. In the June 15, 2018 proposed notice, we detailed our evaluation criteria. Under section 1865(a)(2) of the Act and in our regulations at § 488.5, we conducted a review of CHAP's Medicare hospice accreditation application in accordance with the criteria specified by our regulations, which include, but are not limited to, the following:

- An onsite administrative review of CHAP's: (1) Corporate policies; (2) financial and human resources available to accomplish the proposed surveys; (3) procedures for training, monitoring, and evaluation of its hospice surveyors; (4) ability to investigate and respond appropriately to complaints against accredited hospices; and (5) survey review and decision-making process for accreditation.

- A comparison of CHAP's Medicare hospice accreditation program standards to our current Medicare hospice Conditions of Participation (CoPs).

- A documentation review of CHAP's survey process to:

- ++ Determine the composition of the survey team, surveyor qualifications, and CHAP's ability to provide continuing surveyor training.

- ++ Compare CHAP's processes to those we require of state survey agencies, including periodic resurvey and the ability to investigate and respond appropriately to complaints against accredited hospices.

- ++ Evaluate CHAP's procedures for monitoring hospices found to be out of compliance with CHAP's program requirements. This pertains only to monitoring procedures when CHAP identifies non-compliance. If noncompliance is identified by a state survey agency through a validation survey, the state survey agency monitors corrections as specified at § 488.9(c).

- ++ Assess CHAP's ability to report deficiencies to the surveyed hospice and respond to the hospice's plan of correction in a timely manner.

- ++ Establish CHAP's ability to provide CMS with electronic data and reports necessary for effective validation and assessment of the organization's survey process.

- ++ Determine the adequacy of CHAP's staff and other resources.

- ++ Confirm CHAP's ability to provide adequate funding for the completion of required surveys.

- ++ Confirm CHAP's policies to surveys being unannounced.

- ++ Obtain CHAP's agreement to provide CMS with a copy of the most current accreditation survey together with any other information related to the survey as we may require, including corrective action plans.

In accordance with section 1865(a)(3)(A) of the Act, the June 15, 2018 proposed notice also solicited public comments regarding whether CHAP's requirements met or exceeded the Medicare CoPs for hospices. No comments were received in response to our proposed notice.

### IV. Provisions of the Final Notice

#### A. Differences Between CHAP's Standards and Requirements for Accreditation and Medicare Conditions and Survey Requirements

We compared CHAP's hospice accreditation requirements and survey process with the Medicare CoPs of part 418, and the survey and certification process requirements of parts 488 and 489. Our review and evaluation of CHAP's hospice application, which were conducted as described in section III of this final notice, yielded the following areas where, as of the date of this notice, CHAP has completed revising its standards and certification processes in order to ensure that hospices accredited by CHAP meet the requirements at:

- § 418.64(d)(2), to ensure the dietary needs of patients are met.

- § 418.76(b)(1), to ensure training is conducted by a registered nurse, or a licensed practical nurse under the supervision of a registered nurse.

- § 418.76(b)(3)(xiii), to ensure that any other task that the hospice may choose to have an aide perform must be included in the content of the hospice aide classroom and supervised practical training.

- § 418.76(d)(1), to ensure that in-service training is supervised by a registered nurse.

- § 418.76(h)(3)(iv) and (v), to address the requirement that the supervising nurse must assess an aide's ability to demonstrate initial and continued satisfactory performance in meeting outcome criteria for the hospice's infection control policy and procedures and for reporting changes in the patient's conditions.

- § 418.76(k)(3), to address the requirement for homemakers to report concerns to the member of the interdisciplinary group who is responsible for coordinating homemaker services.

- § 418.104, to address the requirement allowing medical records to be maintained electronically.

- § 418.110(d)(3), to address the requirement that provisions of the adopted edition of the Life Safety Code do not apply in a state if CMS finds that a fire and safety code imposed by state law adequately protects patients in hospices.

- § 418.113, to ensure compliance with all applicable federal, state, and local emergency preparedness requirements.

- § 488.5(a)(7) through (9), to ensure that new surveyors receive the required initial orientation training, and that all new surveyors receive an evaluation of performance, in accordance with CHAP policies.

- § 488.5(a)(12), to ensure that complaint surveys are conducted in a manner that meets or exceeds the processes and investigation practices of CMS; that the rationale for the decision whether to conduct an onsite survey or not, is clearly documented in the complaint file, according to CHAP policy; and, to ensure that complaints are closed out properly with appropriate notification to complainants.

#### B. Term of Approval

Based on our review and observations described in section III of this final notice, we approve CHAP as a national accreditation organization for hospices that request participation in the Medicare program, effective November 20, 2018 through November 20, 2024.

### V. Collection of Information Requirements

This document does not impose information collection requirements, that is, reporting recordkeeping or third-party disclosure requirements. Consequently, there is no need for review by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 *et seq.*).

Dated: November 7, 2018.

**Seema Verma,**

*Administrator, Centers for Medicare & Medicaid Services.*

[FR Doc. 2018-25066 Filed 11-15-18; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Proposed Information Collection Activity; Comment Request

*Title:* National Evaluation of the Sexual Risk Avoidance Education

(SRAE) Program—National Descriptive Study

OMB NO.: [NEW]

Description: The Administration for Children and Families (ACF) proposes a data collection effort related to the National Evaluation of the Sexual Risk Avoidance Education (SRAE) Program—National Descriptive Study.

The National Descriptive Study (of the National Evaluation of the SRAE Program) has multiple components. This information collection request only pertains to the Early Implementation Study, which will provide an early catalogue of SRAE programs’

implementation. ACF seeks approval to collect the following information:

—Survey for Use with SRAE grantees. The purpose of this collection effort is to conduct surveys with administrators/program directors in each of the states/organizations that received SRAE grants to better understand what key decisions states/organizations made regarding the design of their SRAE-funded programs and why they made those decisions.

Interview Guide for Use with SRAE grantees. The purpose of this collection

effort is to conduct semi-structured interviews, that follow-on the surveys, with administrators/program directors in each of the states/organizations that received SRAE grants: The interviews will offer long-answer, qualitative responses to key questions, to better understand what key decisions states/organizations made regarding the design of their SRAE-funded programs and why they made those decisions.

Respondents: State level administrators; Agency administrators; Organization heads; Project directors

ANNUAL BURDEN ESTIMATES

Instrument	Total number of respondents	Annual number of respondents	Number of responses per respondent	Average burden hours per response	Annual burden hours
Survey for SRAE Grantees .....	125	1	1	1	125
Interview Guide for SRAE Grantees .....	125	1	1	1	125

Estimated Total Annual Burden Hours: 250 hours.

In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Planning, Research, and Evaluation, 330 C Street SW, Washington, DC 20201, Attn: OPRE Reports Clearance Officer. Email address: [OPREinfocollection@acf.hhs.gov](mailto:OPREinfocollection@acf.hhs.gov). All requests should be identified by the title of the information collection. The Department specifically requests comments on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency’s estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the

collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Emily Jabbour,  
ACF/OPRE Certifying Officer.  
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: National Youth in Transition Database (NYTD) and Youth Outcomes Survey.

OMB No.: 0970–0340.

Description: The Foster Care Independence Act of 1999 (42 U.S.C. 1305 et seq.) as amended by Public Law 106–169 requires State child welfare agencies to collect and report to the Administration on Children and

Families (ACF) data on the characteristics of youth receiving independent living services and information regarding their outcomes. The regulation implementing the National Youth in Transition Database, listed in 45 CFR 1356.80, contains standard data collection and reporting requirements for States to meet the law’s requirements. Additionally, the Family First Prevention Services Act of 2017 (H.R. 253) further outlines the expectation of the collection and reporting of data and outcomes regarding youth who are in receipt of independent living services. ACF will use the information collected under the regulation to track independent living services, assess the collective outcomes of youth, and potentially to evaluate State performance with regard to those outcomes consistent with the law’s mandate.

Respondents: State agencies that administer the John H. Chafee Foster Care Independence Program. The U.S. Virgin Islands have been included in this request as they are expected to begin participating in NYTD data collection efforts during this approval period.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Data file .....	53	2	1,430	151,580
Youth Outcomes Survey .....	16,333	1	.50	8,167