

EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

Form name	Total burden hours	Average hourly wage rate *	Adjusted hourly wage rate **	Total cost burden
Registration Form	4.25	^a 66.22	132.44	\$563
Program Information Form	4.25	^a 66.22	132.44	563
Data Use Agreement	2.5	^b 126.41	252.82	632
Data Files Submission	52	^c 49.83	99.66	5,182
Total	63	NA	NA	6,940

* National Compensation Survey: Occupational wages in the United States May 2024, "U.S. Department of Labor, Bureau of Labor Statistics."

** The Adjusted Hourly Rate was estimated at 200% of the hourly wage.

^a Based on the mean hourly wage for Medical and Health Services Managers (11–9111).

^b Based on the mean hourly wage for Chief Executives (11–1011).

^c Based on the mean hourly wages for Computer Programmers (15–1251).

Request for Comments

In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501–3520, comments on AHRQ's information collection are requested with regard to any of the following: (a) whether the proposed collection of information is necessary for the proper performance of AHRQ's health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) of information; (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: November 24, 2025.

Mamatha Pancholi,
Deputy Director.

[FR Doc. 2025–21348 Filed 11–26–25; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–4210–N2]

Medicare Program; Inflation Reduction Act (IRA) Medicare Drug Price Negotiation Program Final Guidance

AGENCY: Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing the availability of CMS' final guidance for the third cycle of the Medicare Drug Price Negotiation Program (hereafter the "Negotiation Program"), the first cycle of renegotiation, and manufacturer effectuation of the maximum fair price (MFP) in 2026, 2027, and 2028 for the implementation of the Inflation Reduction Act of 2022 (IRA) (*Pub. L. 117–169*). This and other IRA-related guidance can be viewed on the dedicated IRA section of the CMS website at <https://www.cms.gov/inflation-reduction-act-and-medicare/>. **ADDRESSES:** Inquiries related to the final guidance should be sent to IRAREbateandNegotiation@cms.hhs.gov with the subject line, "Medicare Drug Price Negotiation Program Final Guidance."

FOR FURTHER INFORMATION CONTACT: Elisabeth Daniels, 410–786–0549.

SUPPLEMENTARY INFORMATION: The IRA was signed into law on August 16, 2022. Sections 11001 and 11002 of the IRA established the Negotiation Program to negotiate MFPs for certain high expenditure, single source drugs and biological products. The requirements for this program are described in sections 1191 through 1198 of the Social Security Act (the Act) as added by sections 11001 and 11002 of the IRA. On July 4, 2025, the "Working Families Tax Cuts Act" (*Pub. L. 119–21*) was signed into law. Section 71203 of the "Working Families Tax Cuts Act" expanded protections for orphan drugs in section 1192(e) of the Act. The final guidance describes how CMS will implement the Negotiation Program for Initial Price Applicability Year (IPAY) 2028 (January 1, 2028 to December 31, 2028), which includes renegotiation, and specifies the requirements for manufacturer effectuation of the MFPs in 2026, 2027, and 2028.

To obtain copies of this Negotiation Program final guidance and other IRA-related documents, please access the CMS IRA website by copying and pasting the following web address into your web browser: <https://www.cms.gov/inflation-reduction-act-and-medicare>. If interested in receiving CMS IRA updates by email, individuals may sign up for CMS IRA's email updates at <https://www.cms.gov/About-CMS/Agency-Information/Aboutwebsite/EmailUpdates>.

The Administrator of CMS, Dr. Mehmet Oz, having reviewed and approved this document, authorizes Chyana Woodyard, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Chyana Woodyard,

Federal Register Liaison, Centers for Medicare & Medicaid Services.

[FR Doc. 2025–21501 Filed 11–26–25; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

Privacy Act of 1974; Matching Program; Correction

AGENCY: Centers for Medicare & Medicaid Services, Department of Health and Human Services.

ACTION: Notice; correction.

SUMMARY: The Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS) published a notice of a new (re-established) matching program in the **Federal Register** of November 18, 2025, describing a matching program between CMS and State-Based Administering Entities (AEs), titled "Determining Eligibility for Enrollment in Applicable State Health Subsidy Programs Under

the Patient Protection and Affordable Care Act.” The notice failed to include a plain-language description of the matching program in the Summary, stated incorrect dates, and mistakenly used the term “return information” instead of “Federal Tax Information (FTI)” consistently throughout.

FOR FURTHER INFORMATION CONTACT: If you have questions about the matching program, you may contact: Robert Yates, Deputy Director, Division of State and Grant Operations, State Marketplace and Insurance Programs Group, Center for Consumer Information and Insurance Oversight, Centers for Medicare & Medicaid Services, 7500 Security Blvd., Baltimore, MD 21224, or by email to Robert.Yates@cms.hhs.gov, or Jenny Chen, Director, Division of State Technical Assistance, State Marketplace and Insurance Programs Group, Center for Consumer Information and Insurance Oversight, Centers for Medicare & Medicaid Services, 7501 Wisconsin Ave., Bethesda, MD 20814, or by email to Jenny.Chen@cms.hhs.gov.

SUPPLEMENTARY INFORMATION:

Correction

In the **Federal Register** of November 18, 2025, in FR Doc. 2025–20058, on page 51764, in the first column, correct the “Summary” caption to read: In accordance with subsection (e)(12) of the Privacy Act of 1974, as amended, the Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS) is providing notice of the re-establishment of a matching program between CMS and State-Based Administering Entities (AEs), titled “Determining Eligibility for Enrollment in Applicable State Health Subsidy Programs Under the Patient Protection and Affordable Care Act (PPACA).” The matching program provides AEs with data CMS receives from federal agencies under other matching programs to use in determining individuals’ eligibility for enrollment in state health subsidy programs under the Patient Protection and Affordable Care Act and to avoid dual enrollments.

In the **Federal Register** of November 18, 2025, in FR Doc. 2025–20058, on page 51764, in the first and second columns, correct the “Dates” caption to read: The deadline for comments on this notice is December 29, 2025. The re-established matching program will commence not sooner than 30 days after publication of this notice, provided no comments are received that warrant a change to this notice. The matching program will be conducted for an initial term of 18 months (from approximately

January 2026 to July 2027) and, within three months of expiration, may be renewed for up to one additional year if the parties make no changes to the matching program and certify that the program has been conducted in compliance with the matching agreement.

In the **Federal Register** of November 18, 2025, in FR Doc. 2025–20058, on page 51765, in the first column, correct the “Categories of Records” caption to read: The categories of records that will be used in the matching program are identifying records; minimum essential coverage period records; Federal Tax Information (FTI) (household income and family size information); citizenship status records; birth and death information; disability coverage and income information; and imprisonment status records. The data elements CMS will receive from AEs may include: Social Security Number (if applicable), Last Name, First Name, and Date of Birth. The data elements the AEs will receive from CMS may include: Validation of SSN; Verification of citizenship or immigration status; Incarceration status; Eligibility and/or enrollment in certain types of MEC; Income, based on FTI, Title II benefits, and current income sources; Quarters of Coverage; and Death Indicator.

Barbara Demopoulos,

Privacy Act Officer, Division of Security, Privacy Policy and Governance, Office of Information Technology, Centers for Medicare & Medicaid Services.

[FR Doc. 2025–21394 Filed 11–26–25; 8:45 am]

BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–10500 and CMS–10344]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

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 (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 the necessity and utility of the proposed information collection for the proper performance of the agency’s functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

DATES: Comments must be received by January 27, 2026.

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, please access the CMS PRA website by copying and pasting the following web address into your web browser: <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing>.

FOR FURTHER INFORMATION CONTACT: William N. Parham at (410) 786–4669.

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**).

Under the PRA (44 U.S.C. 3501–3520), federal agencies must obtain approval from the Office of Management