LeRoy A. Richardson,

Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2014–11040 Filed 5–13–14; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-14-0900]

Proposed Data Collections Submitted for Public Comment and Recommendations

The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995. To request more information on the below proposed project or to obtain a copy of the information collection plan and instruments, call 404-639-7570 or send comments to LeRoy Richardson, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an email to omb@cdc.gov.

Comments submitted in response to this notice will be summarized and/or included in the request for Office of Management and Budget (OMB) approval. Comments are invited 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) ways to enhance the quality, utility, and clarity of the information to be collected; (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; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, disclose or provide information to or for a Federal

agency. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information; and to transmit or otherwise disclose the information. Written comments should be received within 60 days of this notice.

Proposed Project

Contact Investigation Outcome Reporting Forms—Revision—(0920– 0900, expiration date: September 30, 2014)—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Division of Global Migration and Quarantine (DGMQ), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC), Division of Global Migration and Quarantine (DGMQ) requests a revision of the currently approved Information Collection Request: "Contact Investigation Outcome Reporting Forms," expiring September 30, 2014. CDC has conducted a thorough review of the data collection tools approved in this information collection request. To streamline the data collected, ease the completion of each data collection tool, and to target information collected to be more specific to the individual illness of public health concern, several changes to the data collection tools have been proposed. The result is a 12% reduction in burden, or a reduction of 32 total burden hours. A summary of changes is as follows:

- Data pertaining to contact investigations for measles, mumps and rubella will no longer be collected using one form for either the air or maritime environments.
- Data collection for measles contact investigations will be collected either by using the Measles Contact Investigation Reporting Form—Air, or the Measles Contact Investigation Reporting Form— Maritime.
- CDC will no longer collect information pertaining to cases of mumps occurring during air travel. Contact investigations for cases of

- mumps occurring onboard maritime conveyances will still be evaluated, using the General Contact Investigation Outcome Form—Maritime.
- Data collection for rubella contact investigations will be collected either by using the Rubella Contact Investigation Reporting Form—Air, or the Rubella Contact Investigation Reporting Form—Maritime. Data collection fields pertaining to pregnant women have been added to assist in recommending the appropriate prophylaxis of those exposed.
- Data pertaining to contact investigations occurring in the air and land-border crossing environments will no longer be collected using the same form. Factors affecting the disease transmission in these environments is very different, thus, CDC has created separate data collection tools and fields. Data collection for contact investigations of illnesses of public health concern occurring in a landborder crossing environment will be collected by using the General Contact Investigation Reporting Form—Land. Data collection for illnesses of public health concern occurring in an air environment will be collected using tools specific to each disease.
- In response to a request from maritime operators (cruise ship physicians/cargo ship managers), CDC has added the option for contact investigation outcome reporting to be completed in either a MS Word or MS Excel format. The excel format allows reporting for multiple patients simultaneously without completing separate documents for each ill traveler. The information collected on each of the data collection tools is the same. Data collection for contact investigations for diseases of public health concern occurring in a maritime environment will be collected using tools specific to each of the diseases listed above.

This data collection supports the need for CDC staff to evaluate cases of communicable diseases of public health concern during travel and conduct investigative contact tracing for those that may have been exposed. The proposed data collection tools facilitate the collection of data pertaining to these contact investigations.

CDC is requesting a total of 248 burden hours in this revision. There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
State/local health department staff	General Contact Investigation Outcome Reporting Form (Air).	12	1	5/60	1
Cruise Ship Physicians/Cargo Ship Managers.	General Contact Investigation Outcome Reporting Form (Maritime—word version).	100	1	5/60	8
Cruise Ship Physicians/Cargo Ship Managers.	General Contact Investigation Outcome Reporting Form (Maritime—Excel version).	100	1	5/60	8
State/local health department staff	General Contact Investigation Outcome Reporting Form (Land).	12	1	5/60	1
State/local health department staff	TB Contact Investigation Outcome Reporting Form (Air).	1,244	1	5/60	104
Cruise Ship Physicians/Cargo Ship Managers.	TB Contact Investigation Outcome Reporting Form (Maritime—word version).	150	1	5/60	13
Cruise Ship Physicians/Cargo Ship Managers.	TB Contact Investigation Outcome Reporting Form (Maritime—Excel version).	150	1	5/60	13
State/local health department staff	Measles Contact Investigation Outcome Reporting Form (Air).	964	1	5/60	80
Cruise Ship Physicians/Cargo Ship Managers.	Measles Contact Investigation Outcome Reporting Form (Maritime—word version).	63	1	5/60	5
Cruise Ship Physicians/Cargo Ship Managers.	Measles Contact Investigation Outcome Reporting Form (Maritime—excel version).	63	1	5/60	5
State/local health department staff	Rubella Contact Investigation Outcome Reporting Form (Air).	95	1	5/60	8
Cruise Ship Physicians/Cargo Ship Managers.	Rubella Contact Investigation Outcome Reporting Form (Maritime—word version).	12	1	5/60	1
Cruise Ship Physicians/Cargo Ship Managers.	Rubella Contact Investigation Outcome Reporting Form (Maritime—excel version).	12	1	5/60	1
Total					248

LeRoy A. Richardson,

Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2014–11041 Filed 5–13–14; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: ADP & Services Conditions for FFP for ACF.

OMB No.: 0970-0417.

Description: State child support agencies are required to establish and operate a federally approved statewide automated data processing and information retrieval system to assist in child support enforcement. States are

required to submit an initial advance automated data processing planning document (APD) containing information to assist the Secretary of the Department of Health and Human Services in determining if the state computerized support enforcement system meets federal requirements and providing federal approval. States are also required to submit annually an updated APD for oversight purposes. Based on assessment of the information provided in the initial or updated APDs, states that do not meet federal requirement approval will need to complete an independent verification and validation.

Advance Planning Document (APD) process, established in the rules at 45 CFR Part 95, Subpart F, is the procedure by which States request and obtain approval for Federal financial The participation in their cost of acquiring Automatic Data Processing (ADP) equipment and services. State agencies that submit APD requests provide the Department of Health and Human Services (HHS) with the following

information necessary to determine the States' needs to acquire the requested ADP equipment and/or services:

(1) A statement of need;

(2) A requirements analysis and feasibility study:

(3) A procurement plan;

(4) A proposed activity schedule; and,

(5) A proposed budget.

The proposed information collection, is authorized by (1) 42 U.S.C. 654A, which provides a state agency to have a single statewide automated data processing and information retrieval system and sets forth the requirements of that system; (2) 42 U.S.C. 654(16), which provides the state must submit an initial, and annually updated, advance automated data processing planning document for project approval; (3) 45 CFR 307.15, which provides the requirements for approval of advance planning documents; (4) 42 U.S.C 652(d), which provides the Secretary with the authority to approve an APD and to assess the computerized support enforcement system status; 45 CFR 95.626, which determines when an