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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[30Day-24-1319]

#### Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled "National Surveillance of Community Water Systems and Corresponding Populations with the Recommended Fluoridation Level" to the Office of Management and Budget (OMB) for review and approval. CDC previously published a "Proposed Data Collection Submitted for Public Comment and Recommendations" notice on August 21, 2023 to obtain comments from the public and affected agencies. CDC received three comments related to the previous notice. All comments were determined to be outside the scope of this project. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639-7570. Comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW, Washington, DC 20503 or by fax to (202) 395-5806. Provide written comments within 30 days of notice publication.

#### Proposed Project

National Surveillance of Community Water Systems and Corresponding Populations with the Recommended Fluoridation Level (OMB Control No. 0920-1319, Exp. 2/29/2024)—Extension—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

Community water fluoridation is the process of adjusting the fluoride concentration of a community water system (CWS) to the level beneficial for prevention of dental caries as recommended by the US Public Health Service (PHS). CWS fluoridation is a major factor contributing to the large decline in caries in the U.S. in the past 75 years and is recognized as one of 10 great public health achievements of the twentieth century. Community water fluoridation reduces dental caries by 25% and is a safe and the most cost-effective way to deliver fluoride to people of all ages, regardless of education and income level. It is especially important for populations with limited access to preventive dental measures.

CDC is authorized to collect the information under the Public Health Service Act. This data collection aligns with CDC's strategy to use public health surveillance to inform programs and policies to improve the oral health of the nation by reducing disparities and expanding access to effective prevention programs. CDC uses the Water Fluoridation Reporting System (WFRS) to collect water fluoridation coverage and quality throughout the US. Respondents to the information collection are state fluoridation managers or other state government officials designated by the state dental director or drinking water administrator. State participation in the data collection is voluntary. This data allows CDC and states to monitor the performance and efficiency of their water fluoridation programs, which will improve and extend program delivery.

CDC requests OMB approval for an estimated 2,783 annual burden hours. There is no cost to respondents other than their time to participate.

#### ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State Official .....	Fluoridation status and population .....	50	1	37.5
State Official .....	Fluoride testing data .....	33	1	27.5

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DEPARTMENT OF HEALTH AND  
HUMAN SERVICES

Centers for Disease Control and  
Prevention

[30Day–24–0006]

Agency Forms Undergoing Paperwork  
Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled “Statement in Support of Application for Waiver of Inadmissibility Under Immigration and Nationality Act” to the Office of Management and Budget (OMB) for review and approval. CDC previously published a “Proposed Data Collection Submitted for Public Comment and Recommendations” notice on November 3, 2023 to obtain comments from the public and affected agencies. CDC received one comment related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including

whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570. Comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW, Washington, DC 20503 or by fax to (202) 395–5806. Provide written comments within 30 days of notice publication.

Proposed Project

Statement in Support of Application for Waiver of Inadmissibility Under Immigration and Nationality Act (OMB Control No. 0920–0006)—Reinstatement with Change—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Section 212(a)(1) of the Immigration and Nationality Act states that aliens with specific health related conditions are ineligible for admission into the United States. The Attorney General may waive application of this inadmissibility on health-related grounds if an application for waiver is filed and approved by the consular office considering the application for visa. CDC uses this application primarily to collect information to establish and maintain records of waiver applicants in order to notify the U.S. Citizenship and Immigration Services when terms, conditions and controls imposed by waiver are not met.

CDC is updating the name, signature, title and address of US public health service reviewing official field on the information collection form 4.422–1 because the previously listed individual has retired and no longer completes this action. The name, signature, title and address will be updated to reflect the current Branch Chief of the Immigrant Refugee and Migrant Health Branch in DGMH. CDC requests OMB approval for an estimated 33 annual burden hours. There is no cost to respondents other than their time to participate.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Physician .....	CDC 4.422–1 .....	200	1	10/60

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DEPARTMENT OF HEALTH AND  
HUMAN SERVICES

Administration for Children and  
Families

Submission for Office of Management  
and Budget (OMB) Review; State Plan  
for Grants to States for Refugee  
Resettlement (OMB #0970–0351)

AGENCY: Office of Refugee Resettlement,  
Administration for Children and  
Families, U.S. Department of Health and  
Human Services.

ACTION: Request for public comments.

SUMMARY: The Administration for  
Children and Families (ACF), Office of  
Refugee Resettlement (ORR) is  
requesting a 3-year extension of the  
State Plan for Grants to States for  
Refugee Resettlement (Office of  
Management and Budget #0970–0351,  
expiration 6/30/2024). ORR is proposing  
changes to the form.

DATES: Comments due within 30 days of  
publication. OMB must make a decision  
about the collection of information  
between 30 and 60 days after  
publication of this document in the  
Federal Register. Therefore, a comment