telephone interviews with NCCCP DP15–1501 grantee program directors and program managers. The data from the survey and semi-structured interviews will provide additional insight into program efforts.

CDC is requesting OMB approval to conduct a web-based Grantee survey using Survey Gizmo to a purposive sample of one program director and one program manager in each of six grantees for a total of 12 respondents, and to conduct a web-based Partner Survey of 10 self-identified key partners in each of six grantees for a total of 60 respondents. The web-based surveys will be administered to the same respondents at two time points for a total estimated burden of eight hours for the web-based Grantee Survey and 40 hours for the web-based Partner Survey. Respondents will be asked to provide information regarding the type of respondent; their use of surveillance data to inform survivorship interventions; communication, education, and training activities to support the implementation of survivorship interventions; partnership engagement; challenges and facilitators regarding the implementation of evidence-based cancer survivorship strategies; reach of cancer survivorship interventions; and respondent background information.

CDC is also requesting OMB approval to conduct semi-structured interviews by telephone with a purposive sample of one program director and one program manager in each of six grantees for a total of 12 respondents. The semi-structured interviews will be conducted with the same respondents at two time points for a total estimated burden of 30 hours. Respondents will be asked to provide information regarding administration of the Behavioral Risk Factor Surveillance System Cancer Survivorship Module; communication, education, and training activities to support the implementation of cancer survivorship interventions; community-clinical linkage strategies to support cancer survivors, knowledge regarding best practices for survivorship care; partnership engagement; dissemination of evidence-based survivorship interventions; and recommendations for improving the implementation of evidence-based survivorship interventions.

Information collected will be analyzed and used in aggregate to inform future efforts to support cancer survivors and to initiate evidence-informed program decisions when rolling this initiative out to all NCCCP grantees. Without this data collection, CDC will not be able to provide tailored technical assistance to its grantees and communicate program efforts. The estimated annual burden hours requested are 28.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs)
NCCCP Grantee Program Director.	Web-based Grantee survey	8	1	20/60
	Semi-structured telephone interview	8	1	90/60
NCCCP Grantee Partner	Web-based Partner survey	40	1	20/60

Jeffrey M. Zirger,

Acting Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–19–18AFX]

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 Traumatic Brain Injury Disparities in Rural Areas (TBIDRA) 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 June 7, 2018 to obtain comments from the public and affected agencies. CDC received two comments 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 or send an email to *omb@cdc.gov*. 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

Traumatic Brain Injury Disparities in Rural Areas (TBIDRA)—New — National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Traumatic Brain Injury (TBI) is a significant public health concern in the United States. Research indicates that residents of rural areas have both higher

incidence and higher mortality rates from TBI than do residents of urban areas, and that the prevalence of TBI-related disability in rural geographical areas is higher than in urban and suburban areas. The obstacles healthcare providers and patients face in rural areas are vastly different from those in urban areas. There is little published research specifically related to the challenges rural providers face in TBI diagnosis and treatment, and even less examination into effective ways to address gaps in service and improve TBI outcomes. The National Center for Injury Prevention and Control at the CDC, in a 2015 ''Report to Congress on TBI in the United States,'' determined that certain population groups, including residents of rural geographic areas, require special consideration when it comes to researching TBI.

This is a New Information Collection Request for two years to collect information on challenges that rural healthcare providers face in diagnosing, treating, and managing TBI of all severities and developing a knowledge base upon which we can begin to address gaps in services to improve clinical care and TBI outcomes in rural communities. The target population for the data collection effort includes physicians, nurse practitioners (NPs), and physician assistants (PAs) in selected specialties (general or family practice, emergency medicine, pediatrics) working in direct patient care in rural and urban areas. The focus of the study is rural healthcare providers; urban healthcare providers will be included in this study to allow for comparison in identifying the distinct challenges and opportunities for rural healthcare providers. This study has two data collection methods. A web survey to gather quantitative data on the unique challenges faced by rural clinicians, and focus groups to gain deeper insight into the context supporting and/or inhibiting access to comprehensive TBI evaluation and treatment, the study will collect qualitative data through focus groups with rural clinicians.

The total estimated annualized burden hours are 200. There is no cost 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 hrs)
Health care providers (Primary Care Physician, Emergency Physician, Nurse Practitioner and Physician Assistant).	TBI Provider Survey	600	1	15/60
	Focus group screener	36	1	5/60
	Focus group consent and questionnaire.	31	1	5/60
	Focus group discussion guide	31	1	85/60

Jeffrey M. Zirger,

Acting Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10511, CMS–10575, and CMS–2552–10]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid 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 (the 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 22, 2019.

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, you may make your request using one of following:

1. Access CMS' website address at website address at *https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html.*

2. Email your request, including your address, phone number, OMB number, and CMS document identifier, to *Paperwork@cms.hhs.gov.*

3. Call the Reports Clearance Office at (410) 786–1326.

FOR FURTHER INFORMATION CONTACT: Reports Clearance Office 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