DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award of a Single-Source Cooperative Agreement To Fund the Kazakhstan Scientific Center for Dermatology and Infectious Diseases (KSCDID)

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces the award of approximately \$500,000, for Year 1 of funding to the Kazakhstan Scientific Center for Dermatology and Infectious Diseases (KSCDID). The award will reduce new HIV infections and AIDS deaths in Kazakhstan through rapidly expanding prevention, testing, care, and effective treatment services to people living with HIV (PLHIV). Funding amounts for years 2–5 will be set at continuation.

DATES: The period for this award will be September 30, 2022 through September 29, 2027.

FOR FURTHER INFORMATION CONTACT:

Patrick Nadol, Center for Global Health, Centers for Disease Control and Prevention, 171 Prospect Mira, Bishkek, 720016, Kyrgyz Republic, Telephone: 800–232–6348, E-Mail: pen5@cdc.gov.

SUPPLEMENTARY INFORMATION: The single-source award will implement prevention, testing, care and treatment, laboratory, and strategic information activities in Kazakhstan. KSCDID is in a unique position to conduct this work, as it is the leading organization implementing the National HIV program in Kazakhstan; it will lead and sustain the national HIV services for prevention, testing, care, treatment, and strategic information according to international standards to achieve epidemic control and ensure resilient and sustained health care systems. KSCDID develops policy and regulations, conducts prevention and testing activities, coordinates care and treatment, and is responsible for quality assurance of laboratory services.

Summary of the Award

Recipient: Kazakhstan Scientific Center for Dermatology and Infectious Diseases (KSCDID).

Purpose of the Award: The purpose of this award is to reduce new HIV infections and AIDS deaths in Kazakhstan through rapidly expanding prevention, testing, care, and effective treatment services to PLHIV.

Amount of Award: The approximate year 1 funding amount will be \$500,000 in Federal Fiscal Year (FFY) 2022 funds, subject to the availability of funds. Funding amounts for years 2–5 will be set at continuation.

Authority: This program is authorized under Public Law 108–25 (the United States Leadership Against HIV AIDS, Tuberculosis and Malaria Act of 2003).

Period of Performance: September 30, 2022 through September 29, 2027.

Dated: February 15, 2022.

Terrance Perry,

Chief Grants Management Officer, Centers for Disease Control and Prevention.

[FR Doc. 2022–03629 Filed 2–18–22; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-22-1268]

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 "Drug Overdose Surveillance and Epidemiology (DOSE)' 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 April 26, 2021, to obtain comments from the public and affected agencies. CDC received four 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. 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. 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

Drug Overdose Surveillance and Epidemiology (DOSE) (OMB Control No. 0920–1268, Exp. 8/31/2022)— Revision—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

In 2020, a total of 91,799 drug overdose deaths occurred, corresponding to an age-adjusted rate of 28.3 per 100,000 population and a 31% increase from the 2019 rate (21.6). From 2013 to 2019, the synthetic opioidinvolved death rate increased 1,040%, from 1.0 to 11.4 per 100,000 ageadjusted (3,105 to 36,359). The psychostimulant-involved death rate increased 317%, from 1.2 (3,627) in 2013 to 5.0 (16,167) in 2019. Non-fatal overdoses are on the rise as well; Emergency Department (ED) data from DOSE indicates increases from 2018 to present. In response to the growing severity of the opioid overdose epidemic, the U.S. government declared the opioid overdose epidemic a public health emergency on October 26, 2017. The opioid overdose epidemic is one of the top priorities of the U.S. Department of Health and Human Services (HHS). In