

(iii) Prescribes the contract clause at FAR 52.215–9, Changes or Additions to Make-or-Buy Programs, which specifies the circumstances under which the contractor is required to submit for the contracting officer's advance approval a notification and justification of any proposed change in the approved make-or-buy program.

The information is used to assure the lowest overall cost to the Government for required supplies and services.

Public comments are particularly invited on: Whether this collection of information is necessary for the proper performance of functions of the Federal Acquisition Regulation (FAR), and whether it will have practical utility; whether our estimate of the public burden of this collection of information is accurate, and based on valid assumptions and methodology; ways to enhance the quality, utility, and clarity of the information to be collected; and ways in which we can minimize the burden of the collection of information on those who are to respond, through the use of appropriate technological collection techniques or other forms of information technology.

## B. Analysis of Public Comments

One respondent submitted public comments on the extension of the previously approved information collection. The analysis of public comments is summarized as follows:

*Comment:* The respondent commented that the extension of the information collection would violate the fundamental purposes of the Paperwork Reduction Act because of the burden it puts on the entity submitting the information and the agency collecting the information.

*Response:* In accordance with the Paperwork Required Act (PRA), agencies can request an OMB approval of an existing information collection. The PRA requires that agencies use the **Federal Register** notice and comment process, to extend the OMB's approval, at least every three years. This extension, to a previously approved information collection, pertains to implementation of requirements of the provisions in FAR 15.407–2, Make-or-buy programs, and the related clause at FAR 52.215–9, Changes or Additions to Make-or-Buy Program. The information is used to assure the lowest overall cost to the Government for required supplies and services.

*Comment:* The respondent commented that the agency did not accurately estimate the public burden challenging that the agency's methodology for calculating it is insufficient and inadequate and does

not reflect the total burden. For this reason, the respondent provided that the agency should reassess the total burden hours and revise the estimate upwards to be more accurate, as was done in FAR Case 2007–006. The same respondent also provided that the burden of compliance with the agency's information collection requirement greatly exceeds the agency's estimate and outweighs any potential utility of the extension. Further, the respondent commented that the estimate of 150 respondents subject to this requirement annually across the entire Government is far too low. The respondent offered that at least ten times and potentially as many as one hundred times as many respondents are subject to these make-or-buy requirements. The respondent stated that the estimate of three responses per respondent is also substantially understated. Contractors that hold cost reimbursement contracts subject to the requirements may be required to submit this type of information upwards of 50 times per year, especially for larger contracts. The respondent further believes that while the estimated eight hours of burden per response is not out of the realm of reasonableness and is more realistic than other estimates provided, the estimate is understated, and that most companies will require two to three times that amount of time per response.

*Response:* Serious consideration is given, during the open comment period, to all comments received and adjustments are made to the paperwork burden estimate based on reasonable considerations provided by the public. This is evidenced, as the respondent notes, in FAR Case 2007–006 where an adjustment was made from the total preparation hours from three to 60. This change was made considering particularly the hours that would be required for review within the company, prior to release to the Government.

The burden is prepared taking into consideration the necessary criteria in OMB guidance for estimating the paperwork burden put on the entity submitting the information. For example, consideration is given to an entity reviewing instructions; using technology to collect, process, and disclose information; adjusting existing practices to comply with requirements; searching data sources; completing and reviewing the response; and transmitting or disclosing information. The estimated burden hours for a collection are based on an average between the hours that a simple disclosure by a very small business might require and the much higher numbers that might be required for a

very complex disclosure by a major corporation. Also, the estimated burden hours should only include projected hours for those actions which a company would not undertake in the normal course of business. Careful consideration went into assessing the estimated burden hours for this collection. An informal survey of the primary agencies that would require submission of the information for this collection indicated that the total estimated annual burden remains a valid estimate. Additionally, a review of the estimated burden by agency experts revealed that the estimated burden was realistic.

At any point, members of the public may submit comments for further consideration, and are encouraged to provide data to support their request for an adjustment.

## C. Annual Reporting Burden

*Respondents:* 150.

*Responses per Respondent:* 3.

*Total Responses:* 450.

*Hours per Response:* 8.

*Total Burden Hours:* 3,600.

*Obtaining Copies of Proposals:*

Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat (MVCB), 1275 First Street NE., Washington, DC 20417, telephone (202) 501–4755. Please cite OMB Control No. 9000–0078, Make-or-Buy Program, in all correspondence.

Dated: May 17, 2013.

**William Clark,**

*Acting Director, Federal Acquisition Policy Division, Office of Governmentwide Acquisition Policy, Office of Acquisition Policy, Office of Governmentwide Policy.*

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**BILLING CODE 6820–EP–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Meeting of the National Vaccine Advisory Committee

**AGENCY:** Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice of meeting.

**SUMMARY:** As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) is hereby giving notice that the National Vaccine Advisory Committee (NVAC) will hold a meeting. The meeting is open to the public. Pre-registration is required for both public attendance and comment. Individuals

who wish to attend the meeting and/or participate in the public comment session should register at <http://www.hhs.gov/nvpo/nvac>, email [nvpo@hhs.gov](mailto:nvpo@hhs.gov), or call 202-690-5566 and provide name, organization, and email address.

**DATES:** The meeting will be held on June 11–12, 2013. The meeting times and agenda will be posted on the NVAC Web site at <http://www.hhs.gov/nvpo/nvac> as soon they become available.

**ADDRESSES:** U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 800, Washington, DC 20201.

**FOR FURTHER INFORMATION CONTACT:** National Vaccine Program Office, U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 715–H, Washington, DC 20201. Phone: (202) 690–5566; fax: (202) 690–4631; email: [nvpo@hhs.gov](mailto:nvpo@hhs.gov).

**SUPPLEMENTARY INFORMATION:** Pursuant to Section 2101 of the Public Health Service Act (42 U.S.C. 300aa–1), the Secretary of Health and Human Services was mandated to establish the National Vaccine Program to achieve optimal prevention of human infectious diseases through immunization and to achieve optimal prevention against adverse reactions to vaccines. The National Vaccine Advisory Committee was established to provide advice and make recommendations to the Director of the National Vaccine Program on matters related to the Program's responsibilities. The Assistant Secretary for Health serves as Director of the National Vaccine Program.

The topics to be discussed at the NVAC meeting will include adult immunizations, pertussis, influenza A(H7N9), immunizations and the Affordable Care Act, and updates from the NVAC working groups on global immunization and maternal immunization. The meeting agenda will be posted on the NVAC Web site: <http://www.hhs.gov/nvpo/nvac> prior to the meeting.

Public attendance at the meeting is limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the National Vaccine Program Office at the address/phone listed above at least one week prior to the meeting. Members of the public will have the opportunity to provide comments at the NVAC meeting during the public comment periods on the agenda. Individuals who would like to submit written statements should email or fax their comments to the

National Vaccine Program Office at least five business days prior to the meeting.

Dated: May 16, 2013.

**Bruce Gellin,**

*Director, National Vaccine Program Office,  
Executive Secretary, National Vaccine  
Advisory Committee.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[60Day–13–0612]

#### Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404–639–7570 or send comments to Ron Otten, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an email to [omb@cdc.gov](mailto:omb@cdc.gov).

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; and (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. Written comments should be received within 60 days of this notice.

#### Proposed Project

Well-Integrated Screening and Evaluation for Women Across the Nation (WISEWOMAN) Reporting System (OMB #0920–0612, exp. 1/31/2014)—Revision—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

Cardiovascular disease (CVD), which includes heart disease, myocardial

infarction, and stroke, is the leading cause of death for women in the United States, and is largely preventable. The WISEWOMAN program (Well-Integrated Screening and Evaluation for Women Across the Nation), administered by the Centers for Disease Control and Prevention (CDC), was established to examine ways to improve the delivery of services for women who have limited access to health care and elevated risk factors for CVD. The program focuses on reducing CVD risk factors and provides screening services for select risk factors such as elevated blood cholesterol, hypertension and abnormal blood glucose levels. The program also provides women with referrals to lifestyle programs and medical care. The WISEWOMAN program currently provides services to approximately 45,000 women who are jointly enrolled in the National Breast and Cervical Cancer Early Detection Program (NBCCEDP), also administered by CDC. The current cooperative agreements for WISEWOMAN awardees end June 30, 2013 and final submissions to CDC are due no later than October 31, 2013. CDC obtained OMB approval to collect information from these awardees through the “WISEWOMAN Reporting System,” OMB No. 0920–0612, exp. 1/31/2014. The information submitted to CDC includes semi-annual progress reports and minimum data elements (MDE) that are also submitted twice per year.

The WISEWOMAN program will continue under a new set of four-year cooperative agreements that begin July 1, 2013 and end June 30, 2017. The new funding period will reflect an increased emphasis on efficient oversight of program awardees and documenting program outcomes. As a result, the WISEWOMAN information collection will be revised to support updated program goals. Changes to be implemented in the new cooperative agreement funding cycle include a reduction in the frequency of progress report submission—from twice per year to once per year—and changes to the content of the MDE submissions. The first reports based on the revised reporting requirements will be submitted to CDC in April 2014.

The hardcopy progress report provides a narrative summary of each awardee's objectives and the activities undertaken to meet program goals, including public education and outreach. The estimated burden per response is 8 hours. In the new cooperative agreement cycle, the frequency of response will decrease from twice per year to once per year, resulting in a net decrease in respondent