

disability service providers, to facilitate more effective delivery of HCBS to people with disabilities. This training may be provided through conferences, workshops, public education programs, in-service training programs, and similar activities.

#### *Final Priority*

We will announce the final priority in a notice in the **Federal Register**. We will determine the final priority after considering responses to this notice and other information available to the Department. This notice does not preclude us from proposing additional priorities, requirements, definitions, or selection criteria, subject to meeting applicable rulemaking requirements.

**Note:** This notice does *not* solicit applications. In any year in which we choose to use this priority, we invite applications through a notice in the **Federal Register** or in a Funding Opportunity Announcement posted at [www.grants.gov](http://www.grants.gov).

#### *Executive Orders 12866 and 13563*

##### Regulatory Impact Analysis

Under E.O. 12866, the Secretary must determine whether this regulatory action is “significant” and, therefore, subject to the requirements of the Executive Order and subject to review by the Office of Management and Budget (OMB). Section 3(f) of E.O. 12866 defines a “significant regulatory action” as an action likely to result in a rule that may—

(1) Have an annual effect on the economy of \$100 million or more, or adversely affect a sector of the economy, productivity, competition, jobs, the environment, public health or safety, or State, local, or tribal governments or communities in a material way (also referred to as an “economically significant” rule);

(2) Create serious inconsistency or otherwise interfere with an action taken or planned by another agency;

(3) Materially alter the budgetary impacts of entitlement grants, user fees, or loan programs or the rights and obligations of recipients thereof; or

(4) Raise novel legal or policy issues arising out of legal mandates, the President’s priorities, or the principles stated in the E.O.

This proposed regulatory action is not a significant regulatory action subject to review by OMB under section 3(f) of E.O. 12866.

We have also reviewed this regulatory action under E.O. 13563, which supplements and explicitly reaffirms the principles, structures, and definitions governing regulatory review established in E.O. 12866. To the extent permitted

by law, E.O. 13563 requires that an agency—

(1) Propose or adopt regulations only upon a reasoned determination that their benefits justify their costs (recognizing that some benefits and costs are difficult to quantify);

(2) Tailor its regulations to impose the least burden on society, consistent with obtaining regulatory objectives and taking into account—among other things and to the extent practicable—the costs of cumulative regulations;

(3) In choosing among alternative regulatory approaches, select those approaches that maximize net benefits (including potential economic, environmental, public health and safety, and other advantages; distributive impacts; and equity);

(4) To the extent feasible, specify performance objectives, rather than the behavior or manner of compliance a regulated entity must adopt; and

(5) Identify and assess available alternatives to direct regulation, including economic incentives—such as user fees or marketable permits—to encourage the desired behavior, or provide information that enables the public to make choices.

E.O. 13563 also requires an agency “to use the best available techniques to quantify anticipated present and future benefits and costs as accurately as possible.” The Office of Information and Regulatory Affairs of OMB has emphasized that these techniques may include “identifying changing future compliance costs that might result from technological innovation or anticipated behavioral changes.”

We are issuing this proposed priority only upon a reasoned determination that its benefits would justify its costs. In choosing among alternative regulatory approaches, we selected those approaches that would maximize net benefits. Based on the analysis that follows, the Department believes that this proposed priority is consistent with the principles in E.O. 13563.

We also have determined that this regulatory action would not unduly interfere with State, local, and tribal governments in the exercise of their governmental functions.

In accordance with both Executive Orders, the Department has assessed the potential costs and benefits, both quantitative and qualitative, of this regulatory action. The potential costs are those resulting from statutory requirements and those we have determined as necessary for administering the Department’s programs and activities.

The benefits of the Disability and Rehabilitation Research Projects and

Centers Program have been well established over the years. Projects similar to one envisioned by the proposed priority have been completed successfully, and the proposed priority would generate new knowledge through research. The new RRTC would generate, disseminate, and promote the use of new information that would improve outcomes for individuals with disabilities in the area of home and community based services.

*Intergovernmental Review:* This program is not subject to E.O. 12372.

*Electronic Access to This Document:* The official version of this document is the document published in the **Federal Register**. Free Internet access to the official edition of the **Federal Register** and the Code of Federal Regulations is available via the Federal Digital System at: [www.gpo.gov/fdsys](http://www.gpo.gov/fdsys). At this site you can view this document, as well as all other documents of this Department published in the **Federal Register**, in text or Adobe Portable Document Format (PDF). To use PDF you must have Adobe Acrobat Reader, which is available free at the site.

You may also access documents of the Department published in the **Federal Register** by using the article search feature at: [www.federalregister.gov](http://www.federalregister.gov). Specifically, through the advanced search feature at this site, you can limit your search to documents published by the Department.

Dated: March 11, 2015.

**Kathy Greenlee,**  
*Administrator.*

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**BILLING CODE 4154–01–P**

## **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **Office of the Secretary**

[Document Identifier: HHS–OS–0990–New–60D]

### **Agency Information Collection Activities; Proposed Collection; Public Comment Request**

**AGENCY:** Office of the Secretary, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, announces plans to submit a new Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting that ICR to OMB, OS seeks comments from the

public regarding the burden estimate, below, or any other aspect of the ICR.

**DATES:** Comments on the ICR must be received on or before May 15, 2015.

**ADDRESSES:** Submit your comments to *Information.CollectionClearance@hhs.gov* or by calling (202) 690–6162.

**FOR FURTHER INFORMATION CONTACT:** Information Collection Clearance staff, *Information.CollectionClearance@hhs.gov* or (202) 690–6162.

**SUPPLEMENTARY INFORMATION:** When submitting comments or requesting information, please include the document identifier HHS–OS–0990–New–60D for reference.

*Information Collection Request Title:* Healthy People User Study.

*Abstract:* Healthy People is a national health promotion and disease

prevention initiative managed out of the Office of the Assistant Secretary for Health (OASH), Office of Disease Prevention and Health Promotion (ODPHP). HHS/OS/OASH/ODPHP is seeking OMB approval to conduct a short survey using a self-administered questionnaire of state, local, and tribal organizations; *Healthy People* Consortium organizations; and *Healthy People* webinar attendees. The survey will be administered via a web-based platform.

The *Healthy People* initiative has provided a comprehensive set of data-driven, national disease prevention and health promotion objectives with 10-year targets aimed at improving the health of all Americans since 1979. *Healthy People 2020 (HP2020)* is the fourth iteration of the *Healthy People*

initiative. Its overarching goals are: To attain high-quality, longer lives free of preventable disease, disability, injury, and premature death; to achieve health equity, eliminate disparities, and improve the health of all groups; to create social and physical environments that promote good health for all; and to promote quality of life, healthy development, and health behaviors across all life stages. *HP2020* consists of over 1200 objectives organized under 42 topic areas.

*Likely Respondents:* *Healthy People* State Coordinators, State Health Department Senior Deputy Directors, local and tribal health organizations, *Healthy People* Consortium organizations, and *Healthy People* webinar attendees.

#### TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

| Type of respondent                                             | Number of respondents | Number responses per respondent | Average burden per response (hours) | Total burden hours |
|----------------------------------------------------------------|-----------------------|---------------------------------|-------------------------------------|--------------------|
| <i>Healthy People</i> State Coordinators (Frame A) .....       | 59                    | 1                               | 18/60                               | 18                 |
| Senior Deputy Directors (Frame A*) .....                       | 57                    | 1                               | 18/60                               | 17                 |
| Local Health Organizations (Frame B) .....                     | 375                   | 1                               | 18/60                               | 113                |
| Tribal Health Organizations (Frame C) .....                    | 100                   | 1                               | 18/60                               | 30                 |
| Tribal Area Health Boards (Frame D) .....                      | 11                    | 1                               | 18/60                               | 3                  |
| <i>Healthy People</i> Consortium Organizations (Frame E) ..... | 250                   | 1                               | 18/60                               | 75                 |
| <i>Healthy People</i> Webinar Attendees (Frame F) .....        | 250                   | 1                               | 18/60                               | 75                 |
| Total .....                                                    | 1,102                 |                                 |                                     | 331                |

OS specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency's functions, (2) the accuracy of the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be collected, and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**Terry S. Clark,**

*Deputy Information Collection Clearance Officer.*

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**BILLING CODE 4150–32–P**

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Substance Abuse and Mental Health Services Administration

#### Notice of Meeting

Pursuant to Public Law 92–463, notice is hereby given of the combined meeting on April 16, 2015, of the

Substance Abuse and Mental Health Services Administration's (SAMHSA) four National Advisory Councils (the SAMHSA National Advisory Council [NAC], the Center for Mental Health Services NAC, the Center for Substance Abuse Prevention NAC, the Center for Substance Abuse Treatment NAC) and the two SAMHSA Advisory Committees (Advisory Committee for Women's Services [ACWS] and the Tribal Technical Advisory Committee [TTAC]).

SAMHSA's National Advisory Councils were established to advise the Secretary, Department of Health and Human Services (HHS); the Administrator, SAMHSA; and SAMHSA's Center Directors concerning matters relating to the activities carried out by and through the Centers and the policies respecting such activities.

Under Section 501 of the Public Health Service Act, the ACWS is statutorily mandated to advise the SAMHSA Administrator and the Associate Administrator for Women's Services on appropriate activities to be undertaken by SAMHSA and its Centers with respect to women's substance abuse and mental health services.

Pursuant to Presidential Executive Order No. 13175, November 6, 2000, and the Presidential Memorandum of September 23, 2004, SAMHSA established the TTAC for working with Federally-recognized Tribes to enhance the government-to-government relationship, honor Federal trust responsibilities and obligations to Tribes and American Indian and Alaska Natives. The SAMHSA TTAC serves as an advisory body to SAMHSA.

The April 16, 2015, combined meeting will include a report from the SAMHSA Administrator, discussion regarding SAMHSA's role in influencing the provision of treatment for mental and substance use disorders, and a presentation and discussion regarding the science of changing social norms.

The meeting is open to the public and will be held at the SAMHSA building, 1 Choke Cherry Road, Rockville, MD 20850. Attendance by the public will be limited to space available. Interested persons may present data, information, or views orally or in writing, on issues pending before the Council. Written submissions should be forwarded to the contact person on or before April 6,