

Dated: September 22, 2011.

Jennifer J. Johnson,

Secretary of the Board.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS-0990-New; 30-day notice]

Agency Information Collection Request. 30 Day Public Comment Request

AGENCY: Office of the Secretary, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (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.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, e-mail your request, including your address, phone number, OMB number, and OS document identifier, to *Sherette.funncoleman@hhs.gov*, or call the Reports Clearance Office on (202) 690-5683. Send written comments and recommendations for the proposed information collections within 30 days of this notice directly to the OS OMB Desk Officer; faxed to OMB at 202-395-5806.

Proposed Project: The Children's Health Insurance Program Reauthorization Act (CHIPRA) 10-State Evaluation (New)—OMB No. 0990-NEW—Assistant Secretary Planning and Evaluation (ASPE).

Abstract: The Office of the Assistant Secretary for Planning and Evaluation (ASPE) is requesting the Office of Management and Budget (OMB) approval on a new collection to provide the federal government with new and detailed insights into how the Children's Health Insurance Program (CHIP) has evolved since its early years, what impacts on children's coverage and access to care have occurred, and

what new issues have arisen as a result of policy changes related to CHIPRA and the Patient Protection and Affordable Care Act (The Affordable Care Act) of 2010 (Pub. L. 111-148). The evaluation will address numerous key questions regarding the structure and impact of CHIP and Medicaid programs for children. To answer these questions, ASPE will draw on three new primary data collection efforts, including a survey of selected CHIP enrollees and disenrollees in 10 states (and Medicaid enrollees and disenrollees in 3 of these states), qualitative case studies in the 10 states, and a survey of State Program Administrators in all 50 States and the District of Columbia. This current request seeks clearance for the first two information collections; ASPE will seek clearance for the third information collection at a later date. All data collection will take place one time only over a three year period. The survey component includes a sample of children in 10 selected states, recently enrolled or disenrolled in CHIP or Medicaid. Survey data will be collected using computer-assisted telephone interviewing with an in-person follow-up. The qualitative case studies will include site visit interviews with CHIP and Medicaid administrators and public and child health stakeholders, plus focus groups with parents or family members of CHIP enrollees.

ESTIMATED ANNUALIZED BURDEN TABLE

Forms	Type of respondent	Number of respondents	Number of responses per respondent	Average burden (in hours) per response	Total burden hours
Survey of CHIP Enrollees and Disenrollees.	CHIP enrollees and disenrollees	15,000	1	30/60	7,500
Survey of Medicaid Enrollees and Disenrollees.	Medicaid enrollees and disenrollees	4,500	1	30/60	2,250
Site Visits	CHIP and Medicaid personnel—1 ...	300	1	1	300
Focus Groups	Parents and other family members of children—2	80	1	2	160
Total Burden	10,210

Keith Tucker,

Paperwork Reduction Act Clearance Officer, Office of the Secretary.

[FR Doc. 2011-24721 Filed 9-26-11; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Final Effect of Designation of a Class of Employees for Addition to the Special Exposure Cohort

AGENCY: National Institute for Occupational Safety and Health (NIOSH), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: HHS gives notice concerning the final effect of the HHS decision to designate a class of employees from the Sandia National Laboratories, Albuquerque, New Mexico, as an addition to the Special Exposure Cohort (SEC) under the Energy Employees Occupational Illness Compensation Program Act of 2000. On July 29, 2011, as provided for under 42 U.S.C. 7384q(b), the Secretary of HHS designated the following class of employees as an addition to the SEC:

All employees of the Department of Energy, its predecessor agencies, and its contractors and subcontractors who worked in any area at the Sandia National Laboratories in Albuquerque, New Mexico, from January 1, 1949 through December 31, 1962, for a number of work days aggregating at least 250 work days, occurring either solely under this employment, or in combination with work days within the parameters established for one or more other classes of employees in the Special Exposure Cohort.

This designation became effective on September 9, 2011, as provided for under 42 U.S.C. 7384l(14)(C). Hence, beginning on September 9, 2011, members of this class of employees, defined as reported in this notice, became members of the Special Exposure Cohort.

FOR FURTHER INFORMATION CONTACT:

Stuart L. Hinnefeld, Director, Division of Compensation Analysis and Support, National Institute for Occupational Safety and Health (NIOSH), 4676 Columbia Parkway, MS C-46, Cincinnati, OH 45226, Telephone 877-222-7570. Information requests can also be submitted by e-mail to DCAS@CDC.GOV.

John Howard,

Director, National Institute for Occupational Safety and Health.

[FR Doc. 2011-24751 Filed 9-26-11; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Notice of Interest Rate on Overdue Debts

Section 30.18 of the Department of Health and Human Services' claims collection regulations (45 CFR part 30) provides that the Secretary shall charge an annual rate of interest, which is determined and fixed by the Secretary of the Treasury after considering private consumer rates of interest on the date that the Department of Health and Human Services becomes entitled to recovery. The rate cannot be lower than the Department of Treasury's current value of funds rate or the applicable rate determined from the "Schedule of Certified Interest Rates with Range of Maturities" unless the Secretary waives interest in whole or part, or a different rate is prescribed by statute, contract, or repayment agreement. The Secretary of the Treasury may revise this rate quarterly. The Department of Health and Human Services publishes this rate in the **Federal Register**.

The current rate of 11½%, as fixed by the Secretary of the Treasury, is certified for the quarter ended June 30, 2011. This interest rate is effective until the Secretary of the Treasury notifies the Department of Health and Human Services of any change.

Dated: September 7, 2011.

Molly P. Dawson,

Director, Office of Financial Policy and Reporting.

[FR Doc. 2011-24778 Filed 9-26-11; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[CDC-RFA-TP10-1001]

Notice of Intent To Award Affordable Care Act (ACA) Funding

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

ACTION: Notice.

Overview Information

Notice of Intent to Award Affordable Care Act (ACA) funding to 7 Preparedness and Emergency Response Learning Centers (PERLC). This award was proposed in the grantees' Fiscal Year (FY) 2011 non-Competing Continuation applications under Funding Opportunity Announcement CDC-RFA-TP10-1001, "Preparedness and Emergency Response Learning Centers (PERLC)."

SUMMARY: This notice provides public announcement of CDC's intent to award Affordable Care Act (ACA) appropriations to the following 7 grantees: Columbia University Mailman School of Public Health, New York, NY; Johns Hopkins University, Baltimore, MD; Texas A&M School of Rural Public Health, College Station, TX; University at Albany SUNY School of Public Health, Albany, NY; University of Oklahoma College of Public Health, Oklahoma City, OK; University of South Florida College of Public Health, Tampa, FL.

The purpose of the PERLC program is to develop, deliver, and evaluate core competency-based training and education that target the public health workforce, address the public health preparedness and response needs of state, local, and tribal public health authorities and emphasize essential public health security strategies.

These activities are proposed by the above mentioned grantees in their FY

2011 application submitted under Funding Opportunity Announcement CDC-RFA-TP10-1001, "Preparedness and Emergency Response Learning Centers (PERLC)," Catalogue of Federal Domestic Assistance Number (CFDA): 93.069.

Approximately \$5,000,000 in ACA funding will be awarded to the grantee for sustaining approved program activities. Funding is appropriated under the Affordable Care Act (Pub. L. 111-148), Section 4002 (42 U.S.C. 300u-11) (Prevention and Public Health Fund).

Accordingly, CDC adds the following information to the previously published Funding Opportunity Announcement of CDC-RFA-TP10-1001:

Authority: Sections 311 and 317(k)(2) of the Public Health Service Act, [42 U. S. C. Section 243 and 247b(k)(2)] as amended, Patient Protection and Affordable Care Act (ACA), Section 4002 (42 U.S.C. 300u-11). CFDA #: 93.606 (Affordable Care Act—Preparedness and Emergency Response Learning Centers).

Award Information

Type of Award: Non-Competing Continuation Cooperative Agreement.

Approximate Total Current Fiscal Year ACA Funding: \$5,000,000.

Anticipated Number of Awards: 7.

Fiscal Year Funds: 2011.

Anticipated Award Date: September 30, 2011.

Application Selection Process

Funding will be awarded to applicant based on documentation and results from successful past performance review.

Funding Authority

CDC will add the ACA Authority to that which is reflected in the published Funding Opportunity Announcement CDC-RFA-TP10-1001. The revised funding authority language will read:

This program is authorized under the Sections 311 and 317(k)(2) of the Public Health Service Act, [42 U. S. C. 243 and 247b(k)(2)] as amended, Patient Protection and Affordable Care Act (ACA), Section 4002 (42 U.S.C. 300u-11).

DATES: The effective date for this action is the date of publication of this Notice and remains in effect until the expiration of the project period of the ACA funded applications.

FOR FURTHER INFORMATION CONTACT: Joan P. Gioffi, PhD, Associate Director, Learning Office and Program Official for Preparedness and Emergency Response Learning Centers (PERLC), Office of Public Health Preparedness and Response, Centers for Disease Control and Prevention, telephone 404-639-0641. jcioffi@cdc.gov.