

Dated: July 12, 2012.

Jennifer Riggle,

Deputy Director, Office of Management.

[FR Doc. 2012-17776 Filed 7-19-12; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget

(OMB), in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, email paperwork@hrsa.gov or call the HRSA Reports Clearance Office on (301) 443-1984.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: The Health Education Assistance Loan (HEAL) Program: Forms (OMB No. 0915-0034)—[Revision]

The Health Education Assistance Loan (HEAL) program provided federally insured loans to assure the availability of funds for loans to eligible students to pay for their education costs.

In order to administer and monitor the HEAL program the following forms are utilized: the Lenders Application for Contract of Federal Loan Insurance form (used by lenders to make application to the HEAL insurance program); the Borrower's Deferment Request form (used by borrowers to request deferments on HEAL loans and used by lenders to determine borrower's eligibility for deferment); the Borrower Loan Status update electronic submission (submitted monthly by lenders to the Secretary on the status of each loan); and the Loan Purchase/Consolidation electronic submission (submitted by lenders to the Secretary to report sales, and purchases of HEAL loans).

The annual estimate of burden is as follows:

HRSA Form	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Lender's Application for Contract of Federal Loan Insurance	15	1.00	15	0.133	2.00
Borrower's Deferment Request:					
Borrowers	28	1.00	28	0.166	5.00
Employers	23	1.21	28	0.083	3.00
Borrower Loan Status Update	5	15.00	75	0.166	13.00
Loan Purchase/Consolidation	2	2.50	5	0.066	0.33
TOTAL	73	151	23.33

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to the desk officer for HRSA, either by email to OIRA_submission@omb.eop.gov or by fax to 202-395-6974. Please direct all correspondence to the "attention of the desk officer for HRSA."

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Proposed Change in State Title V Maternal and Child Health Block Grant Allocations

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice.

SUMMARY: This notice seeks comments on proposed changes in the State

Title V Maternal and Child Health (MCH) Block Grant allocations. Through the Health Resources and Services Administration's Maternal and Child Health Bureau (MCHB), Title V MCH Block Grant funds are allocated to States based in part on a calculation of the number of children living in poverty (in an individual State) as compared to the total number of children living in poverty in the United States, using data for the number of children in poverty in each State from the U.S. Census Bureau's official decennial census. As the Census Bureau has replaced the decennial census long-form sample questionnaire with the American Community Survey (ACS), MCHB likewise plans to use the ACS as its source for this data. The ACS offers broad, comprehensive information on social, economic, and housing data and is designed to provide this information at many levels of geography. ACS child poverty estimates are produced annually and will allow the Block Grant allocation proportions to be updated more frequently than every 10 years. The Census Bureau produces annual State-level poverty estimates based on the most recent 1, 3, and 5 years of ACS data as well as annual model-based Small Area Income and Poverty

Estimates (SAIPE). It is proposed that MCHB implement annual changes to the State Title V MCH Block Grant allocations using the 3-year ACS poverty estimates, wherein each annual change is buffered by sharing 2 of 3 data years in a 3-year rolling period estimate.

DATES: Interested persons are invited to comment on this proposed change. Submit written comments no later than September 18, 2012. All comments received on or before this date will be considered.

ADDRESSES: All written comments concerning this notice should be submitted to Cassie Lauver, Director, Division of State and Community Health, at the contact information below.

FOR FURTHER INFORMATION CONTACT: Anyone requesting additional details should contact Cassie Lauver, Health Resources and Services Administration, Maternal and Child Health Bureau. Ms. Lauver may be reached in one of the three following methods: (1) Via a written request addressed to: Ms. Cassie Lauver, Health Resources and Services Administration, Maternal and Child Health Bureau, Parklawn Building, Room 18-31, 5600 Fishers Lane, Rockville, Maryland 20857; (2) via

telephone at (301) 443-2204; or (3) via email at mchbformula@hrsa.gov. In addition, an information session with a question and answer period on the proposed change in the State Title V Maternal and Child Health Block Grant Allocations will be held approximately 2 weeks after publication of this notice. Please see <http://www.mchb.hrsa.gov> for more information. Dr. Michael C. Lu, Associate Administrator of MCHB, will serve as a presenter for this session.

SUPPLEMENTARY INFORMATION: HRSA is proposing to use the U.S. Census Bureau's ACS data to determine the annual poverty-based allocations to States under Section 502 of Title V of the Social Security Act (42 U.S.C. 702). Previously, MCHB used the child poverty data obtained from the long-form of the decennial census and the poverty-based allocation was updated every 10 years. The long-form questionnaire has been replaced by the annual ACS. Given the annual availability of updated ACS child poverty data, annual changes in the allocation proportion would enable incremental change and greater currency than updating at periodic non-annual intervals (e.g., every 5 years). State-level poverty data are annually released by the Census Bureau based on the most recent 1, 3, and 5-year ACS data and single-year Small Area Income and Poverty Estimates (SAIPE). Researchers in MCHB's Office of Epidemiology and Research (OER) evaluated the impact of using 1, 3, and 5-year ACS data and the single-year SAIPE on annual poverty-based allocation changes as well as overall allocation changes. Consistent with the Census Bureau documentation and guidelines, the poverty data are most current and least precise through the use of 1-year data and least current but most precise through the use of 5-year data. OER recommends that MCHB implement annual changes to the State Title V MCH Block Grant allocations using the 3-year ACS poverty estimates, which strike a reasonable balance between reliability (strength of 5-year estimates) and currency (strength of 1-year estimates). The 3-year estimates provide necessary stability in annual poverty-based allocation changes for all States, regardless of size, while still allowing the allocations to be responsive to changes in the distribution of children in poverty across States. Since they are not buffered as a multiyear moving period estimate, the 1-year estimates from both ACS and the model-based SAIPE introduce higher levels of volatility in annual changes of the poverty-based

allocation proportions, particularly for smaller States with greater sampling error. The 5-year estimates are least current and do not provide meaningfully different stability in annual changes in comparison with the 3-year estimates. With the 3-year estimates for Fiscal Year 2013 already available, States will have ample opportunity to plan for the adjustment from the existing allocation proportions based on the 2000 census and will be aware of the poverty-based allocation proportions close to a year in advance of each subsequent fiscal year (annually released in October).

Dated: July 12, 2012.

Mary K. Wakefield,

Administrator.

[FR Doc. 2012-17736 Filed 7-19-12; 8:45 am]

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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 August 9, 2012, 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, and the Tribal Technical Advisory Committee).

The Councils were established to advise the Secretary, Department of Health and Human Services (HHS), the Administrator, SAMHSA, and 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 Advisory Committee for Women's Services (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 Tribal Technical Advisory Committee (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 August 9 combined meeting will include a report from the SAMHSA Administrator, an update on SAMHSA's Budget, an update on health reform and a discussion regarding the impact of federal health reform and state budgets on mental health and substance abuse programs.

The meeting is open to the public and will be held online via Microsoft Office 2007 Live Meeting. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions should be forwarded to the contact person on or before August 1, 2012. Oral presentations from the public will be scheduled at the conclusion of the meeting. Individuals interested in making oral presentations are encouraged to notify the contact on or before August 1, 2012. Five minutes will be allotted for each presentation.

Substantive program information may be obtained after the meeting by accessing the SAMHSA Committee web site, <http://nac.samhsa.gov/>, or by contacting Ms. Wood.

Committee Names: Substance Abuse and Mental Health Services, Administration National Advisory Council; Center for Mental Health Services National Advisory Council; Center for Substance Abuse Prevention National Advisory Council; Center for Substance Abuse Treatment National Advisory Council; SAMHSA's Advisory Committee for Women's Services; SAMHSA Tribal Technical Advisory Committee.

Date/Time/Type: Thursday, August 9, 2012, 10:00 a.m.-5:00 p.m. EDT (OPEN)

Place: Live meeting webcast: <https://e-meetings.verizonbusiness.com/nc/join.php?i=PA8938727&p=SAMHSA&t=c>

Contact: Geretta Wood, Committee Management Officer and Designated Federal Official, SAMHSA National Advisory Council, SAMHSA's Advisory Committee for Women's Services, 1 Choke Cherry Road, Rockville, Maryland 20857, Telephone: (240) 276-2326, Fax: (240) 276-2253 and Email: geretta.wood@samhsa.hhs.gov.

Summer King,

Statistician, Substance Abuse and Mental Health, Services Administration.

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