sector laboratory organizations, provides technical assistance, consultation and training to GDD health centers and other international partners to develop and maintain international public health laboratories.

Global Health Security Branch (CWLE): (1) Serves as the WHO Collaborating Center for Implementation of National IHR Surveillance and Response Capacities; (2) provides leadership and coordination of CDC 's relationships with WHO for IHR international capacity development activities; (3) responsible for CDC's support to WHO's Integrated Disease Surveillance and Response (IDSR) strategy; (4) supports the implementation of IHR and IDSR at the country level; (5) assess, coordinates, implements and measures the effectiveness of international public health preparedness activities in partnership with WHO, ministries of health and United States Government (USG) security, development, and disaster response agencies in the context of IHR; (6) manages CDC's relationship and develops partnerships with U.S. government security (National Security Staff (NSS), Department of Defense, Department of State) and development agencies (USAID) engaged in global health security activities; (7) leads in the development and implementation of CDC's Global Health Strategic Goals for Global Health Security (GHS); (8) ensures CDC's activities supported by Interagency Global Health Security Partners align with CDC GHS goals and partner country public health preparedness priorities and meet CDC 'S high standard for quality and fiduciary responsibility; (9) serves as principal point of coordination for USG interagency partners involved in international disease surveillance and situational awareness activities; (10) ensures CDC's interests are represented at NSS GHS policy committees; (11) provides support, coordination and issues management services to HHS Office of Global Affairs (OGA) for U.S. government Global Health Security policy development activities; (12) provides early warning on disease threats via CDC's event based surveillance and other epidemic intelligence activities conducted in partnership with U.S. government agencies, WHO, ministries of health, other international, public health and security partners to assure compliance with IHR; (13) serves as CDC's lead for supporting and facilitating CDC's response to international outbreaks; (14) develops and implements in coordination with other CDC CIOs and

U.S. government partners, information technology solutions for emergency preparedness information management, surveillance and executive decision support to enhance the effectiveness of public health emergency detection and response around the globe; and (15) coordinates international aspects of CDC's public health preparedness and emergency response activities in collaboration with the Office of Public Health Preparedness and Response, the National Center for Emerging and Zoonotic Infectious Diseases, the National Center for Environmental Health and other CDC organizational units involved in chemical, biological, radiological and nuclear hazard preparedness and emergency response activities.

Delete in its entirety the title and function statements for the Laboratory Systems Development Branch (CVLGG), Division of Preparedness and Emerging (CVLG), National Center for Emerging and Zoonotic Infectious Diseases (CVL).

Dated: November 26, 2013.

Sherri A. Berger,

Chief Operating Officer, Centers for Disease Control and Prevention. [FR Doc. 2013–29056 Filed 12–5–13; 8:45 am]

BILLING CODE 4160-18-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS-18F5, CMS-10120, and CMS-10346]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, HHS. **ACTION:** Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our burden estimates 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.

DATES: Comments must be received by *February 4, 2014.*

ADDRESSES: When commenting, please reference the document identifier or OMB control number (OCN). To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. *Electronically*. You may send your comments electronically to *http://www.regulations.gov*. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments.

2. *By regular mail.* You may mail written comments to the following address:, CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number ____, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following:

1. Access CMS' Web site address at http://www.cms.hhs.gov/

PaperworkReductionActof1995. 2. Email your request, including your address, phone number, OMB number, and CMS document identifier, to

Paperwork@cms.hhs.gov.

3. Call the Reports Clearance Office at (410) 786–1326.

FOR FURTHER INFORMATION CONTACT:

Reports Clearance Office at (410) 786–1326.

SUPPLEMENTARY INFORMATION:

Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

CMS–18F5 Application for Hospital Insurance and Supporting Regulations CMS–10120 1932(a) State Plan

Amendment Template, State Plan Requirements, and Supporting Regulations CMS–10346 Appeals of Quality Bonus Payment Determinations

Under the PRA (44 U.S.C. 3501-3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. The term "collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA requires federal agencies to publish a 60-day notice in the Federal Register concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information. before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice.

Information Collections

1. Type of Information Collection *Request:* Extension of a currently approved collection; Title of Information Collection: Application for Hospital Insurance and Supporting Regulations; Use: Regulations at 42 CFR 406.6 specifies the individuals who must file an application for Medicare Hospital Insurance (Part A) and those who need not file an application for Part A. Section 406.7 lists CMS-18F5 as the application form. The form elicits information that the Social Security Administration and CMS need to determine entitlement to Part A and Supplementary Medical Insurance (Part B); Form Number: CMS-18F5 (OCN: 0938–0251); Frequency: Once; Affected Public: Individuals or households; Number of Respondents: 50,000; Total Annual Responses: 50,000; Total Annual Hours: 12,500. (For policy questions regarding this collection contact Naomi Rappaport at 410-786-2175).

2. Type of Information Collection *Request:* Revision of a currently approved collection; Title of Information Collection: 1932(a) State Plan Amendment Template, State Plan Requirements, and Supporting Regulations; Use: Section 1932(a)(1)(A) of the Social Security Act (the Act) grants states the authority to enroll Medicaid beneficiaries on a mandatory basis into managed care entities (managed care organization (MCOs) and primary care case managers (PCCMs)). Under this authority, a state can amend its Medicaid state plan to require certain categories of Medicaid beneficiaries to enroll in managed care entities without

being out of compliance with provisions of section 1902 of the Act on statewideness (42 CFR 431.50), freedom of choice (42 CFR 431.51) or comparability (42 CFR 440.230). The template may be used by states to easily modify their state plans if they choose to implement the provisions of section 1932(a)(1)(A); Form Number: CMS-10120 (OCN: 0938-0933); Frequency: Once and occasionally; Affected Public: State, Local, or Tribal Governments; Number of Respondents: 56; Total Annual Responses: 15; Total Annual Hours: 65. (For policy questions regarding this collection contact Camille Dobson at 410-786-7062).

3. Type of Information Collection *Request:* Extension of a currently approved collection; Title of Information Collection: Appeals of Quality Bonus Payment Determinations; *Use:* The information collected from Medicare Advantage organizations is considered by the reconsideration official and potentially the hearing officer to review our determination of the organization's eligibility for a quality bonus payment. Form Number: CMS-10346 (OCN: 0938-1129; Frequency: Yearly; Affected Public: Private sector-Business or other forprofits; Number of Respondents: 350; Total Annual Responses: 25; Total Annual Hours: 200. (For policy questions regarding this collection contact Sarah Gaillot at 410-786-4637).

Dated: December 3, 2013.

Martique Jones,

Deputy Director, Regulations Development Group, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2013–29144 Filed 12–5–13; 8:45 am] BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS-416, CMS-R-26 and CMS-10487]

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

ACTION: Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, and to allow a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the 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.

DATES: Comments on the collection(s) of information must be received by the OMB desk officer by January 6, 2014. ADDRESSES: When commenting on the proposed information collections, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be received by the OMB desk officer via one of the following transmissions: OMB, Office of Information and Regulatory Affairs, Attention: CMS Desk Officer, Fax Number: (202) 395–6974 *OR*, Email: *OIRA submission@omb.eop.gov.*

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following:

1. Access CMS' Web site address at http://www.cms.hhs.gov/ PaperworkReductionActof1995.

2. Email your request, including your address, phone number, OMB number, and CMS document identifier, to *Paperwork@cms.hhs.gov*.

3. Call the Reports Člearance Office at (410) 786–1326.

FOR FURTHER INFORMATION CONTACT:

Reports Clearance Office at (410) 786– 1326

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501–3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. The term "collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires federal agencies to publish a 30-day notice in the