keeping and reporting requirements in order to perform the functions related to hematopoietic stem cell transplantation under contract to the U.S. Department of Health and Human Services (HHS). The Act requires the Secretary to contract for the establishment and maintenance of information related to patients who have received stem cell therapeutic products and to do so using a standardized, electronic format. Data is collected from transplant centers by the Center for International Blood and Marrow Transplant Research and is used for ongoing analysis of transplant outcomes. HRSA uses the information

in order to carry out its statutory responsibilities. Information is needed to monitor the clinical status of transplantation and to provide the Secretary of HHS with an annual report of transplant center-specific survival data. The increase in burden, as reflected in this revised submission request, is due to an increase in the annual number of transplants and increasing survivorship after transplantation.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions, to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information, to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information, and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

## ESTIMATES OF AVERAGE ANNUALIZED HOUR BURDEN

Form name	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Baseline Pre-Transplant Essential Data (TED) Product Form (includes Infusion, HLA, and Infectious Dis-	200	38	7,600	1	7,600
ease Marker inserts)	200	29	5,800	1	5,800
100-Day Post-TED	200	38	7,600	0.85	6,460
6-Month Post-TED	200	31	6,200	1	6,200
12-Month Post-TED	200	27	5,400	1	5,400
Annual Post-TED	200	104	20,800	1	20,800
Total	200		53,400		52,260

Dated: December 5, 2013.

#### Bahar Niakan,

Director, Division of Policy and Information Coordination.

[FR Doc. 2013–29510 Filed 12–10–13; 8:45 am]

BILLING CODE 4165-15-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Notice.

SUMMARY: In compliance with Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Health Resources and Services Administration (HRSA) has submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period.

**DATES:** Comments on this ICR should be received within 30 days of this notice.

ADDRESSES: Submit your comments, including the Information Collection Request Title, to the desk officer for HRSA, either by email to *OIRA\_submission@omb.eop.gov* or by fax to 202–395–5806.

**FOR FURTHER INFORMATION CONTACT:** To request a copy of the clearance requests submitted to OMB for review, email the HRSA Information Collection Clearance Officer at *paperwork@hrsa.gov* or call (301) 443–1984.

#### SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Combating Autism Act Initiative Evaluation OMB No. 0915–0335 [Revision].

Abstract: In response to the growing need for research and resources devoted to autism spectrum disorders (ASD) and other developmental disabilities (DD), the U.S. Congress passed the Combating Autism Act (CAA) in 2006. The Act included funding for the U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), to increase awareness, reduce barriers to screening and diagnosis, promote evidence-based interventions, and train health care professionals to screen for, diagnose or rule out, and provide evidence-based interventions for ASD

and other DD. In 2011, the Combating Autism Reauthorization Act (CARA) was signed into law, reauthorizing funding for the CAA's programs for an additional 3 years at the existing funding levels. Through the CARA, HRSA is tasked with increasing awareness of ASD and other DD, reducing barriers to screening and diagnosis, promoting evidence-based interventions, and training health care professionals in the use of valid and reliable screening and diagnostic tools.

Need and Proposed Use of the Information: HRSA's activities under the CARA legislation are delegated to the Maternal and Child Health Bureau (MCHB), which is implementing the Combating Autism Act Initiative (CAAI) in response to the legislative mandate. The purpose of this evaluation is to design and implement an evaluation to assess the effectiveness of MCHB's activities in meeting the goals and objectives of the CAAI and to provide sufficient data to inform MCHB and the Congress as to the utility of the grant programs funded under the Initiative. The evaluation will focus on indicators related to: (1) Increasing awareness of ASD and other DD among health care providers, other MCH professionals, and the general public; (2) reducing barriers to screening and diagnosis; (3) supporting research on evidence-based interventions; (4) promoting the

development of evidence-based guidelines and tested/validated intervention tools; (5) training professionals; and (6) building capacity for systems of services in states.

Likely Respondents: Grantees funded by HRSA under the CAAI will be the respondents for this data collection activity. The programs to be evaluated are listed below.

#### 1. Training Programs

- Leadership Education in Neurodevelopmental Disabilities (LEND) training programs with fortythree grantees;
- Developmental Behavioral Pediatrics (DBP) training programs with ten grantees; and
- A National Combating Autism Interdisciplinary Training Resource Center grantee.

#### 2. Research Networks Program

• Three Autism Intervention Research Networks that focus on intervention research, guideline development, and information dissemination; and

- 20 R40 Maternal and Child Health (MCH) Autism Intervention Research Program grantees that support research on evidence-based practices for interventions to improve the health and well-being of children and adolescents with ASD and other DD.
- 3. State Implementation Program Grants for Improving Services for Children and Youth With ASD and Other DD
- Nine grantees will implement state autism plans and develop models for improving the system of care for children and youth with ASD and other DD:
- Four grantees will design state plans for improving the system for children and youth with ASD and other DDs; and
- A State Public Health Coordinating Resource Center grantee.

The data gathered through this evaluation will be used to:

• Evaluate the grantees' performance in achieving the objectives of the CAAI during the three year grant period;

- Assess the short- and intermediateterm impacts of the grant programs on children and families affected by ASD and other DD; and
- Measure the CAAI outputs and outcomes for the Report to Congress.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

#### TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

Grant program/form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
LEND interview Protocol	43	1	43	1	43
DBP Interview Protocol	10	1	10	1	10
State Implementation Program Interview Protocol 1	13	1	13	1 1	13
State Implementation Program Questionnaire	13	1	13	.75	9.75
Research Network Interview Protocol	3	1	3	1	3
Research Program R40 Interview Protocol	20	1	20	1	20
Research Network Questionnaire	3	1	3	3	9
Resource Centers Interview Protocol	2	1	2	1	2
Total	107		107		109.75

<sup>&</sup>lt;sup>1</sup> Although a total of 22 state grants have been awarded to date, states that were awarded grants in 2008 and 2009 were interviewed during the previous evaluation. We are seeking clearance to interview only the 13 states that were awarded grants in 2011.

Dated: December 5, 2013.

#### Bahar Niakan,

Director, Division of Policy and Information Coordination.

[FR Doc. 2013-29509 Filed 12-10-13; 8:45 am]

BILLING CODE 4165-15-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# **National Institutes of Health**

## National Institute of Allergy and Infectious Diseases; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting. The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Allergy and Infectious Diseases Special Emphasis Panel; NIAID SBIR Phase II Clinical Trial Implementation Cooperative Agreement (U44) and Clinical Trial Planning Grant (R34).

Date: January 7, 2014. Time: 12:00 p.m. to 4:00 p.m. *Agenda:* To review and evaluate grant applications.

Place: National Institutes of Health, Room 3131, 6700–B Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: Betty Poon, Ph.D., Scientific Review Officer, Scientific Review Program, Division of Extramural Activities, NIAID/NIH/DHHS, 6700B Rockledge Drive, MSC 7616, Bethesda, MD 20892–7616, 301– 402–6891, poonb@mail.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.855, Allergy, Immunology, and Transplantation Research; 93.856, Microbiology and Infectious Diseases Research, National Institutes of Health, HHS).

Dated: December 4, 2013.

### David Clary,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2013–29468 Filed 12–10–13; 8:45 am]

BILLING CODE 4140-01-P