

(Director, Consumer Financial Protection Bureau), and Chairman Martin J. Gruenberg, that Corporation business required its consideration of the matters on less than seven days' notice to the public; and that no earlier notice of the meeting than that previously provided on December 9, 2013, was practicable.

The meeting was held in the Board Room on the sixth floor of the FDIC Building located at 550 17th Street NW., Washington, DC.

Dated: December 11, 2013.

Federal Deposit Insurance Corporation.

**Robert E. Feldman,**

*Executive Secretary.*

[FR Doc. 2013-29765 Filed 12-11-13; 11:15 am]

**BILLING CODE 6714-01-P**

## FEDERAL DEPOSIT INSURANCE CORPORATION

### Sunshine Act Meetings

Pursuant to the provisions of the "Government in the Sunshine Act" (5 U.S.C. 552b), notice is hereby given that at 11:34 a.m. on Tuesday, December 10, 2013, the Board of Directors of the Federal Deposit Insurance Corporation met in closed session to consider matters related to the Corporation's supervision, corporate, and resolution activities.

In calling the meeting, the Board determined, on motion of Vice Chairman Thomas M. Hoenig, seconded by Director Jeremiah O. Norton (Appointive), concurred in by Director Thomas J. Curry (Comptroller of the Currency), Director Richard Cordray (Director, Consumer Financial Protection Bureau), and Chairman Martin J. Gruenberg, that Corporation business required its consideration of the matters which were to be the subject of this meeting on less than seven days' notice to the public; that no earlier notice of the meeting was practicable; that the public interest did not require consideration of the matters in a meeting open to public observation; and that the matters could be considered in a closed meeting by authority of subsections (c)(4), (c)(6), (c)(8), (c)(9)(A)(ii), (c)(9)(B), and (c)(10) of the "Government in the Sunshine Act" (5 U.S.C. 552b(c)(4), (c)(6), (c)(8), (c)(9)(A)(ii), (c)(9)(B), and (c)(10)).

The meeting was held in the Board Room of the FDIC Building located at 550—17th Street NW., Washington, DC.

Dated: December 11, 2013.

Federal Deposit Insurance Corporation.

**Robert E. Feldman,**

*Executive Secretary.*

[FR Doc. 2013-29766 Filed 12-11-13; 11:15 am]

**BILLING CODE P**

## GOVERNMENT ACCOUNTABILITY OFFICE

### Advisory Council on Government Auditing Standards

**AGENCY:** U.S. Government Accountability Office.

**ACTION:** Notice of teleconference meeting.

**SUMMARY:** This notice informs the public that the Advisory Council on Government Auditing Standards will hold a public meeting by teleconference on December 17, 2013. The public is invited to listen to the Council's discussion. Members of the public will be provided an opportunity to address the Council with a brief (five-minute) presentation following the Council's discussion. The Advisory Council's primary purpose is to provide input and recommendations to the Comptroller General for revisions to the Government Auditing Standards, to provide for timely resolution of auditing issues, and to maintain the relevance of the standards.

**DATES:** The meeting will be held December 17, 2013, from 3:00 p.m. to 4:00 p.m. EST. For information on how to participate, please see **SUPPLEMENTARY INFORMATION** below.

**FOR FURTHER INFORMATION CONTACT:** For information on Government Auditing Standards or the Advisory Council on Government Auditing Standards, please contact Eric Holbrook, Assistant Director, Financial Management and Assurance, telephone 202-512-5232, 441 G Street NW., Washington, DC 20548-0001.

**SUPPLEMENTARY INFORMATION:** This meeting will allow GAO to obtain the Advisory Council's advice as GAO determines the scope and content of interpretative guidance relating to the 2011 Revision of Government Auditing Standards. To participate, call toll free 1-888-469-1606. When prompted, enter the following passcode: 61406. Any interested person who plans to attend the meeting as an observer should contact Cecil Davis, Council Administrator, 202-512-9362. For further information or to obtain a copy of the Council meeting agenda, please contact Ms. Davis.

**Authority:** Pub. L. 67-13, 42 Stat. 20 (June 10, 1921).

**James Dalkin,**

*Director, Financial Management and Assurance, U.S. Government Accountability Office.*

[FR Doc. 2013-29756 Filed 12-12-13; 8:45 am]

**BILLING CODE 1610-02-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[30Day-14-0214]

### Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call (404) 639-7570 or send an email to [omb@cdc.gov](mailto:omb@cdc.gov). Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

### Proposed Project

The National Health Interview Survey (NHIS), (OMB No. 0920-0214, Expiration 03/31/2016)—Revision—National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC).

### Background and Brief Description

The annual National Health Interview Survey is a major source of general statistics on the health of the U.S. population and has been in the field continuously since 1957. Clearance is sought for three years, to collect data for 2014, 2015, and 2016. This voluntary and confidential household-based survey collects demographic and health-related information on a nationally representative sample of persons and households throughout the country. Personal identification information is requested from survey respondents to facilitate linkage of survey data with health related administrative and other records. Each year we collect information from up to 55,000 households, which contain about 137,500 individuals.

Information is collected using computer assisted personal interviews (CAPI). A core set of data is collected each year that remains largely

unchanged while sponsored supplements vary from year to year. The core set includes sociodemographic characteristics, health status, health care services, health insurance, health conditions, and health behaviors. For 2014, supplemental questions will be cycled on pertaining to hearing and balance, arthritis, and heart disease and stroke. Supplemental topics that continue or are enhanced from previous years will be related to the Affordable Care Act, food security, children's mental health, disability and functioning, smokeless tobacco, hepatitis screening, immunizations, and computer use. In 2015, the primary supplements will be on cancer control and prevention and occupational exposures in addition to continuing topics from 2014. In 2016, topics will include the primary supplement on balance and sensory problems and shorter sets of questions pertaining to

Healthy People 2020 and health disparities. A Web/CATI multimode follow-back survey will be conducted from sample adult respondents from the 2013–2015 NHIS. The follow-back surveys will focus on topics related to the Affordable Care Act including health care access and use, and health insurance coverage and will include Web, telephone, and mail interviews. Questions related to federal and state health insurance marketplaces will be included.

To improve the analytic utility of NHIS data, minority populations are oversampled annually. In 2014, in addition to ongoing sample augmentation procedures, NCHS will introduce a Native Hawaiian and Pacific Islander oversample. Residents in a sample of 4,000 addresses identified from the 2012 American Community Survey will be administered the 2014 NHIS questionnaire. Results will be

released as a separate file from the ongoing NHIS.

In accordance with the 1995 initiative to increase the integration of surveys within the Department of Health and Human Services, respondents to the NHIS serve as the sampling frame for the Medical Expenditure Panel Survey conducted by the Agency for Healthcare Research and Quality. The NHIS has long been used by government, university, and private researchers to evaluate both general health and specific issues, such as cancer, diabetes, and access to health care. It is a leading source of data for the Congressionally-mandated "Health US" and related publications, as well as the single most important source of statistics to track progress toward the National Health Promotion and Disease Prevention Objectives, "Healthy People 2020."

There is no cost to the respondent other than their time.

ESTIMATED ANNUALIZED BURDEN TABLE

Questionnaire (respondent)	Number of respondents	Number of responses per respondent	Average burden per respondent (in hours)	Total burden (in hours)
Screener Questionnaire .....	10,000	1	5/60	833
Family Core (adult family member) .....	45,000	1	23/60	17,250
Adult Core (sample adult) .....	36,000	1	15/60	9,000
Child Core (adult family member) .....	14,000	1	10/60	2,333
Child/Teen Record Check (medical provider) .....	8,000	1	5/60	667
Supplements (adult family member) .....	45,000	1	12/60	9,000
Multi-mode study (adult family Member) .....	12,000	1	10/60	2,000
Native Hawaiian/P Pacific Islander Survey (adult family member) .....	4,000	1	60/60	4,000
Reinterview Survey .....	5,000	1	5/60	417
<b>Total Burden Hours .....</b>				<b>45,500</b>

**LeRoy Richardson,**  
 Chief, Information Collection Review Office,  
 Office of Scientific Integrity, Office of the  
 Associate Director for Science, Office of the  
 Director, Centers for Disease Control and  
 Prevention.

[FR Doc. 2013–29715 Filed 12–12–13; 8:45 am]  
 BILLING CODE 4163–18–P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day–14–0199]

**Agency Forms Undergoing Paperwork Reduction Act Review**

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C.

Chapter 35). To request a copy of these requests, call (404) 639–7570 or send an email to [omb@cdc.gov](mailto:omb@cdc.gov). Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

**Proposed Project**

Importation of Etiologic Agents (42 CFR 71.54) (OMB Control No. 0920–0199, exp. 1/31/2014)—Revision—Office of Public Health Preparedness and Response (OPHPR), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

Section 361 of the Public Health Service Act (42 U.S.C. 264), as amended, authorizes the Secretary of Health and Human Services to make and enforce such regulations as are necessary to prevent the introduction, transmission, or spread of

communicable diseases from foreign countries into the States or possessions, or from one State or possession into any other State or possession. Part 71 of Title 42, Code of Federal Regulations (Foreign Quarantine) sets forth provisions to prevent the introduction, transmission, and spread of communicable disease from foreign countries into the United States. Subpart F—Importations—contains provisions for the importation of infectious biological agents, infectious substances, and vectors (42 CFR 71.54); requiring persons that import these materials to obtain a permit issued by the CDC.

CDC requests Office of Management and Budget approval to collect information for three years using the Application for Permit to Import Biological Agents, Infectious Substances and Vectors of Human Disease into the United States and Application for a Permit to Import or Transport Live Bats.