

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

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Clinician (demographics questionnaire)	36	1	5/60	3
Clinician Supervisor (demographics questionnaire)	6	1	5/60	1
Clinician (clinician survey)	36	3	10/60	18
Clinician Supervisor (survey)	6	18	10/60	18
Consumer	108	1	10/60	18
Site Coordinator	6	1	96	576
Total				634

Darius Taylor,

Deputy, Information Collection Clearance Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier: HHS-OS-21376-60D]

Agency Information Collection Activities; Proposed Collection; Public Comment Request

AGENCY: Office of Adolescent Health, Office of the Assistant Secretary for Health, HHS.

ACTION: Notice.

SUMMARY: In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, announces plans to submit a new Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting that ICR to OMB, OS seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on the ICR must be received on or before April 8, 2014.

ADDRESSES: Submit your comments to *Information.Collection.Clearance@hhs.gov* or by calling (202) 690-6162.

FOR FURTHER INFORMATION CONTACT: Information Collection Clearance staff, *Information.Collection.Clearance@hhs.gov* or (202) 690-6162.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the document identifier HHS-OS-21376-60D for reference.

Information Collection Request Title: Pregnancy Assistance Fund Feasibility and Design Study (FADS).

Abstract: The Office of Adolescent Health (OAH), U.S. Department of Health and Human Services (HHS) is requesting approval by OMB on a new collection. The Pregnancy Assistance Fund (PAF) evaluation will provide information about program design, implementation, and impacts through two core components: A rigorous assessment of program impacts and implementation, and a descriptive examination of program design. This proposed information collection activity includes (a) program design and early implementation data collected through telephone interviews with PAF grantees and (b) baseline data in up to three impact sites through self-administered questionnaires.

Need and Proposed Use of the Information: Design and

implementation data will build on knowledge about the grantees and their program plans gathered from other sources as well as identify sites for the impact study. *Baseline survey data* will be used to confirm the integrity of the random assignment process, define subgroups for which impacts will be estimated, adjust impact estimates to account for survey non-response, and to improve the precision of impact estimates.

Likely Respondents: The 17 PAF grantee administrators and expectant or parenting young women in 2-3 grantee sites.

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

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Telephone Interview Protocol	6	1	2	12
Baseline Survey	950	1	30/60	475
Total				487

OS specifically requests comments on (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.

Darius Taylor,

Deputy, Information Collection Clearance Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Scientific Information Request on Public Reporting of Cost Measures in Health

AGENCY: Agency for Healthcare Research and Quality (AHRQ), HHS.

ACTION: Request for scientific information submissions.

SUMMARY: The Agency for Healthcare Research and Quality (AHRQ) is seeking scientific information submissions from the public on public reporting of cost measures in health. Scientific information is being solicited to inform our technical brief on *Public Reporting of Cost Measures in Health*, which is currently being conducted by the Evidence-based Practice Centers for the AHRQ Effective Health Care Program. Access to published and unpublished pertinent scientific information on public reporting of cost measures in health will improve the quality of this technical brief. AHRQ is conducting this technical brief pursuant to Section 1013 of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003, Public Law 108-173, and Section 902(a) of the Public Health Service Act, 42 U.S.C. 299a(a).

DATES: *Submission Deadline* on or before March 10, 2014.

ADDRESSES:

Online submissions: <http://effectivehealthcare.AHRQ.gov/index.cfm/submit-scientific-information-packets/>. Please select the study for which you are submitting information from the list to upload your documents.

Email submissions: SIPS@epc-src.org.

Print submissions:

Mailing Address: Portland VA Research Foundation, Scientific Resource Center, ATTN: Scientific Information Packet Coordinator, PO Box 69539, Portland, OR 97239.

Shipping Address (FedEx, UPS, etc.): Portland VA Research Foundation, Scientific Resource Center, ATTN: Scientific Information Packet Coordinator, 3710 SW U.S. Veterans Hospital Road, Mail Code: R&D 71, Portland, OR 97239.

FOR FURTHER INFORMATION CONTACT:

Robin Paynter, Research Librarian, Telephone: 503-220-8262 ext. 58652 or Email: SIPS@epc-src.org.

SUPPLEMENTARY INFORMATION: The Agency for Healthcare Research and Quality has commissioned the Effective Health Care (EHC) Program Evidence-based Practice Centers to complete a technical brief of the evidence for Public Reporting of Cost Measures in Health.

The EHC Program is dedicated to identifying as many studies as possible that are relevant to the questions for each of its technical briefs. In order to do so, we are supplementing the usual manual and electronic database searches of the literature by requesting information from the public (e.g., details of studies conducted). We are looking for studies that report on public reporting of cost measures in health, including those that describe adverse events. The entire research protocol, including the key questions, is also available online at: <http://effectivehealthcare.AHRQ.gov/ehc/products/562/1838/public-reporting-cost-measures-protocol-140113.pdf>

This notice is to notify the public that the EHC program would find the following information on public reporting of cost measures in health helpful:

- A list of completed studies your organization has sponsored for this indication. In the list, *indicate whether results are available on ClinicalTrials.gov along with the ClinicalTrials.gov trial number.*

- *For completed studies that do not have results on ClinicalTrials.gov, a summary, including the following elements: Study number, study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, primary and secondary outcomes, baseline characteristics, number of patients screened/eligible/enrolled/lost to follow-up/withdrawn/analyzed, effectiveness/efficacy, and safety results.*

- *A list of ongoing studies your organization has sponsored for this indication. In the list, please provide the ClinicalTrials.gov trial number or, if the*

trial is not registered, the protocol for the study including a study number, the study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, and primary and secondary outcomes.

- Description of whether the above studies constitute *ALL Phase II and above clinical trials* sponsored by your organization for this indication and an index outlining the relevant information in each submitted file.

Your contribution is very beneficial to the Program. The contents of all submissions will be made available to the public upon request. Materials submitted must be publicly available or can be made public. Materials that are considered confidential; marketing materials; study types not included in the review; or information on indications not included in the review cannot be used by the Effective Health Care Program. This is a voluntary request for information and all costs for complying with this request must be borne by the submitter.

The draft of this review will be posted on AHRQ's EHC program Web site and available for public comment for a period of 4 weeks. If you would like to be notified when the draft is posted, please sign up for the email list at: <http://effectivehealthcare.AHRQ.gov/index.cfm/join-the-email-list1/>.

The technical brief will answer the following questions. This information is provided as background. AHRQ is not requesting that the public provide answers to these questions. The entire research protocol, is also available online at: <http://effectivehealthcare.AHRQ.gov/ehc/products/562/1838/public-reporting-cost-measures-protocol-140113.pdf>

1. What measures of costs about healthcare providers and facilities have been publicly reported?

a. Who produces these reports and where are they available?

b. For what facilities are costs reported?

c. At what level are these data aggregated (e.g. provider, facility, etc.)?

d. How are the cost data reported (e.g., dollar amounts, symbols, graphs etc.)?

e. How are the costs of providers/facilities compared (e.g., how many facilities, regional verses national comparisons etc.)?

2. Are the measures of costs that are being reported consumer centered?

a. How are consumers instructed to use the data?

b. What techniques are used to guide consumers to interpret the data appropriately?