

ACTION: Request for information and comment.

SUMMARY: The National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention, announces the availability of draft procedures pertaining to classifications referred to the NIOSH Respiratory Health Division (RHD) by the Department of Labor, Office of Workers' Compensation Programs, for quality assurance review and corrective measures. The draft, titled, *National Institute for Occupational Safety and Health (NIOSH) Quality Assurance Review of B Readers' Classifications Submitted in the Department of Labor (DOL) Black Lung Benefits Program*, is available for public comment. To view the notice and related materials, visit www.regulations.gov and enter CDC-2016-0020 in the field and click "Search." This draft document does not have the force or effect of the law.

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DATES: Comments must be received by April 18, 2016.

ADDRESSES: You may submit comments, identified by CDC-2016-0020 and docket number NIOSH-289, by any of the following methods:

- *Federal eRulemaking Portal:* www.regulations.gov. Follow the instructions for submitting comments.
- *Mail:* National Institute for Occupational Safety and Health, NIOSH Docket Office, 1090 Tusculum Avenue, MS C-34, Cincinnati, Ohio 45226-1998.

Instructions: All information received in response to this notice must include the agency name and docket number [CDC-2016-0020; NIOSH-289]. All relevant comments received will be posted without change to www.regulations.gov, including any personal information provided. For access to the docket to read background materials and comments received, go to www.regulations.gov. All information received in response to this notice will also be available for public examination and copying at the NIOSH Docket Office, 1150 Tusculum Avenue, Room 155, Cincinnati, OH 45226-1998.

FOR FURTHER INFORMATION CONTACT: Dr. Eileen Storey, NIOSH, Respiratory Health Division, Surveillance Branch, 1095 Willowdale Road, Morgantown, WV, 26505. Telephone (304) 285-5754 (this is not a toll-free number).

SUPPLEMENTARY INFORMATION: In 2015, NIOSH and the DOL Office of Workers'

Compensation Programs (OWCP) entered into a Memorandum of Understanding (MOU)¹ designed to establish a joint quality assurance program for the assessment of classifications of chest radiographic images performed by physicians in Black Lung Benefits proceedings who are "B Readers" certified by NIOSH. The B Reader Certification Program was established by NIOSH pursuant to the Federal Mine Safety and Health Act of 1977, 30 U.S.C. 843. NIOSH B Readers are physicians who have demonstrated proficiency in the use of the International Labour Organization (ILO) Classification of Radiographs of Pneumoconioses by passing a proficiency examination offered by NIOSH, as specified in 42 CFR 37.51. B Readers may submit classifications as part of OWCP's process of evaluating claims for compensation under the federal Black Lung Benefits Act, 30 U.S.C. 901 to 944.

To implement the MOU, NIOSH has developed a draft quality assurance review procedure entitled, *NIOSH Quality Assurance Review of B Readers' Classifications Submitted in the Department of Labor (DOL) Black Lung Benefits Program*, to provide a mechanism to assess the quality of classifications of certain chest radiographs performed by B Readers. NIOSH quality assurance review will focus on the classification of the presence or absence of large opacities as described in the ILO classification system in chest radiographs, because coal miners with large opacities are irrefutably presumed to be totally disabled, or to have died, from pneumoconiosis, pursuant to 30 U.S.C. 921(c)(3). Thus, determinations of large opacities have a significant impact on awarding benefits under the Black Lung Benefits Act.

NIOSH seeks comment from B Readers and other interested parties on the draft procedure. All comments submitted will be considered; the final version of this procedure will be published on the NIOSH Web site.

Dated: February 8, 2016.

John Howard,

Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention.

[FR Doc. 2016-03242 Filed 2-16-16; 8:45 am]

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¹ The Memorandum of Understanding between the Department of Labor Office of Workers' Compensation Programs (OWCP) and the Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health (NIOSH) establishing a B reader quality assurance program, is found in the docket for this action.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-16-0968]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is published to obtain comments from the public and affected agencies.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address any of the following: (a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (c) Enhance the quality, utility, and clarity of the information to be collected; (d) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and (e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639-7570 or send an email to omb@cdc.gov. Written comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: 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

Monitoring and Reporting System for DELTA FOCUS Awardees (OMB Control No. 0920-0968, Expires May 31, 2016)—Revision—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

This is a revision request for three years for the currently approved OMB Control Number 0920–0968, with an expiration date of May 31, 2016. This request is to extend the time and slightly reduce burden.

Intimate Partner Violence (IPV) is a serious, preventable public health problem that affects millions of Americans and results in serious consequences for victims, families, and communities. IPV occurs between two people in a close relationship. The term “intimate partner” describes physical, sexual, or psychological harm by a current or former partner or spouse. IPV can impact health in many ways, including long-term health problems, emotional impacts, and links to negative health behaviors. Given these factors, the Family Violence Prevention and Services Act (42 U.S.C. 10401) provides an important opportunity for the advancement of public health and reduction of IPV. Support and guidance

for programs addressing IPV have been provided through cooperative agreement funding and technical assistance administered by CDC’s National Center for Injury Prevention and Control (NCIPC). NCIPC will continue collecting information needed to monitor cooperative agreement programs funded under Domestic Violence Prevention Enhancement and Leadership through Alliances, Focusing on Outcomes for Communities United with States (DELTA FOCUS).

Information to be collected will provide crucial data for program performance monitoring and provide CDC with the capacity to respond in a timely manner to requests for information about the program from the Department of Health and Human Services (HHS), the White House, Congress, and other sources. Awardees will report progress and activity information to CDC on an annual schedule using the Program Management Information System (PMIS)

consisting of fillable electronic templates and submitted via Grant Solutions. CDC will use the information collected to monitor each awardee’s progress and to identify facilitators and challenges to program implementation and achievement of outcomes. Monitoring allows CDC to determine whether an awardee is meeting performance goals and to make adjustments in the type and level of technical assistance provided to them, as needed, to support attainment of their objectives. CDC’s monitoring and evaluation activities also allow CDC to provide oversight of the use of federal funds, and to identify and disseminate information about successful prevention and control strategies implemented by awardees.

Participation in the information collection is required as a condition of funding. The estimated annual burden hours are 60. There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State Domestic Violence Coalitions	Instrument PMIS DELTA Elements	10	2	3

Leroy A. 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. 2016–03144 Filed 2–16–16; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers For Medicare & Medicaid Services

Privacy Act of 1974; CMS Computer Match No. 2016–10; HHS Computer Match No. 1607; Effective Date—April 2, 2016; Expiration Date—October 2, 2016

AGENCY: Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS).

ACTION: Notice of Computer Matching Program (CMP).

SUMMARY: In accordance with the requirements of the Privacy Act of 1974, as amended, this notice announces the re-establishment of a CMP that CMS plans to conduct with the Department of

Homeland Security (DHS), United States Citizenship and Immigration Services (USCIS).

Effective Dates

Comments are invited on all portions of this notice. The effective date of the Computer Matching Agreement (CMA) is April 2, 2016, provided that the following review periods have lapsed: thirty (30) days from the date CMS publishes a Notice of Computer Matching in the **Federal Register**; thirty (30) days from the date the matching program report is transmitted to the Congressional committees of jurisdiction consistent with the provisions of 5 U.S.C. 552a (r), (o)(2)(A), and (o)(2)(B); and forty (40) days from the date the matching program report is sent to OMB, consistent with the provisions of 5 U.S.C. 552a (r) and OMB Circular A–130, Revised (Transmittal Memorandum No. 4), November 28, 2000, Appendix I, entitled “Federal Agency Responsibilities for Maintaining Records about Individuals” (A–130 Appendix I).

ADDRESSES: The public should send comments to: CMS Privacy Officer, Division of Security, Privacy Policy & Governance, Information Security &

Privacy Group, Office of Enterprise Information, CMS, Room N1–24–08, 7500 Security Boulevard, Baltimore, Maryland 21244–1850. Comments received will be available for review at this location, by appointment, during regular business hours, Monday through Friday from 9:00 a.m.–3:00 p.m., Eastern Time zone.

FOR FURTHER INFORMATION CONTACT: Elizabeth Kane, Acting Director, Verifications Policy & Operations Division, Eligibility and Enrollment Policy and Operations Group, Center for Consumer Information and Insurance Oversight, CMS, 7501 Wisconsin Avenue, Bethesda, MD 20814, Office Phone: (301) 492–4418, Facsimile: (443) 380–5531, E-Mail: Elizabeth.Kane@cms.hhs.gov

SUPPLEMENTARY INFORMATION: The Computer Matching and Privacy Protection Act of 1988 (Public Law (Pub. L.) 100–503), amended the Privacy Act (5 U.S.C. 552a) by describing the manner in which computer matching involving Federal agencies could be performed and adding certain protections for individuals applying for and receiving Federal benefits. Section 7201 of the Omnibus Budget