

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. 2016-13847 Filed 6-10-16; 8:45 am]

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**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**
**Centers for Disease Control and
Prevention (CDC)**
**Requirements and Registration for
Healthcare Associated Venous
Thromboembolism Prevention
Challenge; Amendment of Notice**

Authority: 15 U.S.C. 3719.

AGENCY: Centers for Disease Control and
Prevention (CDC), Department of Health
and Human Services (HHS).

AWARD APPROVING OFFICIAL: Thomas R.
Frieden, MD, MPH, Director, Centers for
Disease Control and Prevention, and
Administrator, Agency for Toxic
Substances and Disease Registry.

ACTION: Notice.

SUMMARY: The Centers for Disease
Control and Prevention (CDC) located
within the Department of Health and
Human Services (HHS) announces an
amendment to its notice entitled,
Announcement of Requirements and
Registration for Healthcare Associated
Venous Thromboembolism Prevention
Challenge. This amendment is being
made to reflect an increase in the
number of Champions and change the
maximum total prize disbursement.
There are no other changes to the
September 22, 2015 notice.

FOR FURTHER INFORMATION CONTACT:
Michele Beckman, Division of Blood
Disorders, National Center on Birth
Defects and Developmental Disabilities,
Centers for Disease Control and
Prevention, 1600 Clifton Road NE.,
Mailstop E-64, Atlanta, GA 30329,
Telephone: 404-498-6474, Fax: 404-
498-6799, Attention: HA-VTE
Prevention Challenge, Email:
havtechallenge@cdc.gov.

SUPPLEMENTARY INFORMATION:

Subject of Challenge Competition: On
September 22, 2015 CDC announced the
Requirements and Registration for
Healthcare Associated Venous
Thromboembolism Prevention
Challenge (80 FR 57187). This notice
announces an increase in the number of
Champions, from 7 to 8. The Champions
were selected from the highest scoring
U.S. hospitals, multi-hospital systems,
hospital networks, and managed care

organizations. Champions were
recognized as HA-VTE Prevention
Champions and will receive a cash
award of \$10,000. A maximum of
\$80,000 will now be awarded in this
challenge, an increase of \$10,000.
Additional honorable mention awards
were also made to deserving entries.
Federal and international winners
received non-monetary recognition but
no prize.

Authority: 15 U.S.C. 3719.

Dated: June 7, 2016.

Sandra Cashman,

Executive Secretary, Centers for Disease
Control and Prevention.

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**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**
**Centers for Disease Control and
Prevention**

[30-Day-16-16CA]

**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

Update seat belt fit recommendation
for children—New—National Center for
Injury Prevention and Control (NCIPC),
Centers for Disease Control and
Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and
Prevention (CDC) is seeking OMB
approval to conduct a new information
collection for a study entitled, "Update
Seat Belt Fit Recommendation for
Children," over a period of three years.

CDC seeks to measure how seat belts
fit children in vehicles with and
without booster seats. The scientific
basis for the current height
recommendation for when children can
transition from using a booster seat to
just a seat belt is from a 1993 study that
is outdated (Durbin *et al.*, 2011; Reed
et al., 2013). The goal of the new collection
is to use the latest technology among the
largest sample of children to date to
help inform when children can safely
transition from using a booster seat with
a seat belt to using only a seat belt.

Findings from this data collection will
inform CDC's child passenger safety
recommendation regarding when
children can safely transition from using
a booster seat with the seat belt to using
only the seat belt. This study will also
provide information on ways to further
reduce motor vehicle-related injuries
and deaths among children.

Prospective study participants will be
children aged 6-12 years old in the
greater District of Columbia (DC) area.
Parents of prospective study
participants will answer a series of
screening questions to determine
eligibility. Children who meet the
screening criteria and are willing to
participate will complete an in-person
measurement session. Data will be
analyzed using descriptive statistics,
mean, standard deviation, and logistic
regression. Selected findings will
eventually be published in a peer-
reviewed journal.

The estimated annual burden hours
are 466. 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)
Parent/guardian of children aged 6–12 years	Screener Script Guide	667	1	10/60
Child participants aged 6–12 years	Seat Belt Fit Measurements	142	1	2.5

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.*

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**DEPARTMENT OF HEALTH AND
 HUMAN SERVICES**

**Centers for Medicare & Medicaid
 Services**

[Document Identifiers: **CMS–R–142 and
 CMS–588**]

**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
 August 9, 2016.

ADDRESSES: When commenting, please
 reference the document identifier or

OMB control number. 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](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/Paperwork
 ReductionActof1995](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–R–142 Examination and
 Treatment for Emergency Medical
 Conditions and Women in Labor;**

**CMS–588 Electronic Funds Transfer
 Authorization Agreement**

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.

1. *Type of Information Collection
 Request:* Extension of a currently
 approved collection; *Title of
 Information Collection:* Examination
 and Treatment for Emergency Medical
 Conditions and Women in Labor; *Use:*
 In accordance with to regulation
 sections 488.18, 489.20 and 489.24,
 during Medicare surveys of hospitals
 and State agencies CMS will review
 hospital records for lists of on-call
 physicians, and will review and obtain
 the information which must be recorded
 on hospital medical records for
 individuals with emergency medical
 conditions and women in labor, and the
 emergency department reporting
 information Medicare participating
 hospitals and Medicare State survey
 agencies must pass on to CMS.
 Additionally, CMS will use the QIO
 Report assessing whether an individual
 had an emergency condition and
 whether the individual was stabilized to
 determine whether to impose a CMP or
 physician exclusion sanctions. Without
 such information, CMS will be unable to
 make the hospital emergency services
 compliance determinations that
 Congress expects CMS to make under
 sections 1154, 1866 and 1867 of the Act.
Form Number: CMS–R–142 (OMB
 control number: 0938–0667); *Frequency:*
 Occasionally; *Affected Public:* Private
 Sector; *Number of Respondents:* 6,149;
Total Annual Responses: 6,149; *Total
 Annual Hours:* 1. (For policy questions
 regarding this collection contact Renate
 Dombrowski at 410–786–4645.)