

exempt from taxation under Section 501(c)(3) of the 1954 Internal Revenue Code, and 501(c)(19) for veterans organizations, for public health and homeless assistance purposes. Transfers are made to transferees at little or no cost.

*Need and Proposed Use of the Information:* State and local

governments and non-profit institutions use these applications to apply for excess/surplus, underutilized/unused and off-site government real property. These applications are used to determine if institutions/organizations are eligible to purchase, lease or use property under the provisions of the surplus real property program.

*Likely Respondents:* State, local, or tribal units of government or instrumentalities thereof; not-for-profit organizations

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
Applications for surplus Federal real property .....	15	1	200	3,000
Total .....	15	1	200	3,000

**Darius Taylor,**  
*Information Collection Clearance Officer.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Office of the Secretary**

[Document Identifier: HHS–OS–0990–New–60D]

**Agency Information Collection Activities; Proposed Collection; Public Comment Request**

**AGENCY:** Office of the Secretary, 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 the 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 February 6, 2017.

**ADDRESSES:** Submit your comments to *Information.CollectionClearance@hhs.gov* or by calling (202) 690–5683.

**FOR FURTHER INFORMATION CONTACT:** Sherrette Funn, *Sherrette.funn@hhs.gov* or (202) 690–5683.

**SUPPLEMENTARY INFORMATION:** When submitting comments or requesting information, please include the document identifier HHS–OS–0990–New–60D for reference.

**Information Collection Request Title: Domestic Violence Housing First Demonstration Evaluation**

*Abstract:* The Office of the Assistant Secretary for Planning and Evaluation (ASPE) within the U.S. Department of Health and Human Services, in partnership with the Office for Victims of Crimes within the U.S. Department of Justice, is seeking approval by OMB for a new information collection request entitled, “Domestic Violence Housing First (DVHF) Demonstration Evaluation.” The Washington State Coalition Against Domestic Violence (WSCADV) is overseeing and coordinating an evaluation of the DVHF Demonstration project through a contract with ASPE. This quasi-experimental research study involves longitudinally examining the program effects of DVHF on domestic violence survivors’ safety and housing stability. The findings will be of interest to the general public, to policy-makers, and to organizations working with domestic violence survivors.

Data collection will include in-depth, private interviews with 320 domestic violence survivors conducted by trained professional staff. At Time 1 study enrollment, they will be interviewed about their backgrounds, housing and safety obstacles, and services desired. There will be three follow-up interviews

with them every six months after the Time 1 Interview (*i.e.*, 6, 12, and 18 months) to examine the match between needs and services, as well as their safety and housing stability. Study enrollment will take place over 15 months, so the annualized burden for the Time 1 and follow-up surveys is based on 12/15 (256) of the expected sample (320).

The primary service providers working with the domestic violence survivors will complete self-administered online questionnaires to provide more detailed program implementation data. Service providers will complete a survey about their work history and demographics and a survey about the services provided for each domestic violence survivor in their caseload that is a participant in the study (approximately 16 survivors per provider). This latter data collection will occur six months after a domestic violence survivor enrolls in the study over 15 months to correspond to the study enrollment period. Finally, the study will also include monthly data collection for 19 months from an agency point of contact (POC) in order to verify agency information (*e.g.*, the number of advocates working in the agency, advocate caseloads, dates of study participants’ receipt of services).

*Likely Respondents:* The respondents are domestic violence survivors, primary service providers, and community agency points of contact who work with their agency data systems.

ANNUALIZED REPORTING BURDEN ON STUDY PARTICIPANTS

Form name	Type of respondent	Annual number of respondents	Number of responses per respondent	Average burden hours per response	Total annual burden hours
Time 1 (Baseline) Interview ..	Domestic violence survivors	256	1	1	256
Follow-up Interviews .....	Domestic violence survivors	256	2	1	512
Online survey about advocates' work history and demographics.	Victim service advocates .....	20	1	15/60	5
Online survey of advocates' work with survivors.	Victim service advocates .....	20	13	20/60	86
Form for community agency points of contact to verify agency information (monthly).	Community agency point of contact.	4	12	15/60	12
<b>Total .....</b>	.....	.....	.....	.....	<b>871</b>

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,**  
*Information Collection Clearance Officer.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Meeting Announcement for the Technical Advisory Panel on Medicare Trustee Reports**

**ACTION:** Notice of public meeting.

**SUMMARY:** This notice announces the meeting dates for the Technical Advisory Panel on Medicare Trustee Reports on Monday, December 19, 2016 and Tuesday, December 20, 2016 in Washington, DC.

**DATES:** The meeting will be held on Monday, December 19, 2016 from 9:15 a.m. to 5:00 p.m. and Tuesday, December 20, 2016, from 9:00 a.m. to 3:30 p.m. Eastern Daylight Time (EDT) and it is open to the public.

**ADDRESSES:** The meeting will be held at the Hubert Humphrey Building, 200 Independence Ave. SW., Washington, DC 20201, Room 738G.3.

**FOR FURTHER INFORMATION CONTACT:** Dr. Donald Oellerich, Designated Federal Officer, at the Office of Human Services Policy, Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services, 200

Independence Ave. SW., Washington, DC 20201, (202) 690-8410.

**SUPPLEMENTARY INFORMATION:**

**I. Purpose**

The Panel will discuss the long-term rate of change in health spending and may make recommendations to the Secretary on how the Medicare Trustees might more accurately estimate health spending in the short and long run. The Panel's discussion is expected to be very technical in nature and will focus on the actuarial and economic assumptions and methods by which Trustees might more accurately measure health spending. This Committee is governed by the provisions of the Federal Advisory Committee Act, as amended (5 U.S.C. App. 2, section 10(a)(1) and (a)(2)). The Committee is composed of nine members appointed by the Assistant Secretary for Planning and Evaluation.

**II. Agenda**

The Panel will likely hear presentations from two outside experts; one on prescription drugs spending and a second on spillover effects. In addition the HHS Office of the Actuary will present on issues the panel may wish to address. Additional presentations regarding long range growth, sustainability of provider payments under Affordable Care Act (ACA) and Medicare Access and Chip Reauthorization Act (MACRA), methods for transitioning from short term (10 year) to long term (75 year) projections and methods and the presentation of uncertainty in the report may follow. After any presentations, the Panel will deliberate openly on the topics. Interested persons may observe the deliberations, but the Panel will not hear public comments during this time. The Panel will also allow an open

public session for any attendee to address issues specific to the topic.

**III. Meeting Attendance**

The Monday, December 19, 2016 and Tuesday, December 20, 2016 meetings are open to the public; however, in-person attendance is limited to space available.

*Meeting Registration*

The public may attend the meeting in-person. Space is limited and registration is *required* in order to attend in-person. Registration may be completed by emailing or faxing all the following information to Dr. Donald Oellerich at [don.oellerich@hhs.gov](mailto:don.oellerich@hhs.gov) or fax 202-690-6562:

- Name.
- Company name.
- Postal address.
- Email address.

If sign language interpretation or other reasonable accommodation for a disability is needed, please contact Dr. Oellerich, no later than December 12, 2016 by sending an email message to [don.oellerich@hhs.gov](mailto:don.oellerich@hhs.gov) or calling 202-690-8410.

A confirmation email will be sent to the registrants shortly after completing the registration process.

**IV. Special Accommodations**

Individuals requiring special accommodations must include the request for these services during registration.

**V. Copies of the Charter**

The Secretary's Charter for the Technical Advisory Panel on Medicare Trustee Reports is available upon request from Dr. Donald Oellerich at [don.oellerich@hhs.gov](mailto:don.oellerich@hhs.gov) or by calling 202-690-8410.