## (b) Disclosure Labor Cost

The estimated annual labor cost for disclosures for all telemarketing entities is \$16,730,552. This total is the product of applying an assumed hourly wage rate of \$13.72 <sup>48</sup> to the earlier stated estimate of 1,219,428 hours pertaining to the pre-sale, general and specific disclosures.

#### (c) Reporting Labor Cost

Estimated labor cost supplying basic identifying information to the Registry operator is \$4,500 (328 hours × \$13.72 per hour).

Thus, cumulatively for both new and existing telemarketing entities total labor costs are \$17,181,914 [(\$446,862 recordkeeping) + (\$16,730,552 disclosure) + (\$4,500 reporting)].

Estimated Annual Non-Labor Cost: \$4,717,991

#### (a) Recordkeeping

Staff believes that the capital and start-up costs associated with the TSR's recordkeeping provisions are de minimis. Although staff believes that most affected entities would maintain the required records in the ordinary course of business, consistent with its prior analyses, staff estimates that the estimated 6,561 telemarketing entities subject to the Rule continue to spend an annual amount of \$50 each on office supplies as a result of the Rule's recordkeeping requirements, for a total recordkeeping cost burden of \$328,050.

### (b) Disclosure

Applying the disclosure estimates of 1,219,428 hours to an estimated commercial calling rate of 6 cents per minute (\$3.60 per hour), staff estimates a total of \$4,389,941 in telephone charges.<sup>49</sup>

Thus, total capital and/or other nonlabor costs are \$4,717,991 (\$328,050 (office supplies) + \$4,389,941 (telephone charges)).

Request for Comment: Pursuant to Section 3506(c)(2)(A) of the PRA, the FTC invites comments on: (1) Whether the disclosure, recordkeeping, and reporting requirements are necessary, including whether the resulting information will be practically useful; (2) the accuracy of our burden estimates, including whether the methodology and assumptions used are valid; (3) how to

improve the quality, utility, and clarity of the disclosure requirements; and (4) how to minimize the burden of providing the required information to consumers.

You can file a comment online or on paper. For the FTC to consider your comment, we must receive it on or before July 19, 2019. Write "TSR PRA Comment, FTC File No. P094400" on your comment. Postal mail addressed to the Commission is subject to delay due to heightened security screening. As a result, we encourage you to submit your comments online, or to send them to the Commission by courier or overnight service. To make sure that the Commission considers your online comment, you must file it through the https://www.regulations.gov website by following the instructions on the webbased form. Your comment—including your name and your state—will be placed on the public record of this proceeding, including the https:// www.regulations.gov website. As a matter of discretion, the Commission tries to remove individuals' home contact information from comments before placing them on the regulations.gov site.

If you file your comment on paper, write "TSR PRA Comment, FTC File No. P094400" on your comment and on the envelope, and mail it to the following address: Federal Trade Commission, Office of the Secretary, 600 Pennsylvania Avenue NW, Suite CC-5610 (Annex J), Washington, DC 20580, or deliver your comment to the following address: Federal Trade Commission, Office of the Secretary, Constitution Center, 400 7th Street SW, 5th Floor, Suite 5610 (Annex J), Washington, DC 20024. If possible, submit your paper comment to the Commission by courier or overnight service.

Because your comment will be placed on the publicly accessible website at www.regulations.gov, you are solely responsible for making sure that your comment does not include any sensitive or confidential information. In particular, your comment should not include any sensitive personal information, such as your or anyone else's Social Security number: date of birth; driver's license number or other state identification number, or foreign country equivalent; passport number; financial account number; or credit or debit card number. You are also solely responsible for making sure that your comment does not include any sensitive health information, such as medical records or other individually identifiable health information. In addition, your comment should not

include any "trade secret or any commercial or financial information which... is privileged or confidential"—as provided by Section 6(f) of the FTC Act, 15 U.S.C. 46(f), and FTC Rule 4.10(a)(2), 16 CFR 4.10(a)(2)—including in particular competitively sensitive information such as costs, sales statistics, inventories, formulas, patterns, devices, manufacturing processes, or customer names.

Comments containing material for which confidential treatment is requested must be filed in paper form, must be clearly labeled "Confidential," and must comply with FTC Rule 4.9(c). In particular, the written request for confidential treatment that accompanies the comment must include the factual and legal basis for the request, and must identify the specific portions of the comment to be withheld from the public record. See FTC Rule 4.9(c). Your comment will be kept confidential only if the General Counsel grants your request in accordance with the law and the public interest. Once your comment has been posted publicly at www.regulations.gov, we cannot redact or remove your comment unless you submit a confidentiality request that meets the requirements for such treatment under FTC Rule 4.9(c), and the General Counsel grants that request.

The FTC Act and other laws that the Commission administers permit the collection of public comments to consider and use in this proceeding as appropriate. The Commission will consider all timely and responsive public comments that it receives on or before July 19, 2019. For information on the Commission's privacy policy, including routine uses permitted by the Privacy Act, see <a href="https://www.ftc.gov/site-information/privacy-policy">https://www.ftc.gov/site-information/privacy-policy</a>.

### Heather Hippsley,

Deputy General Counsel.
[FR Doc. 2019–10388 Filed 5–17–19; 8:45 am]
BILLING CODE 6750–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Agency for Healthcare Research and Quality

## Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Agency for Healthcare Research and Quality, Department of Health and Human Services (HHS).

**ACTION:** Request for information (RFI).

**SUMMARY:** The Agency for Healthcare Research and Quality (AHRQ) requests

<sup>&</sup>lt;sup>48</sup> This figure is derived from the mean hourly wage shown for Telemarketers. *See supra* note 57. It is applied additionally to the ensuing calculation of reporting labor cost regarding the Registry operator.

<sup>&</sup>lt;sup>49</sup> Staff believes that other non-labor costs would be incurred largely by affected entities in the ordinary course of business and, beyond that, would not materially exceed those ordinary costs.

public comments about the impact and use of Evidence-based Practice Center (EPC) Program evidence reviews.

Members of the public include health care delivery organizations, guideline developers, payers, quality measure developers, research funders, and other organizations, including patient organizations, that have used AHRQ EPC evidence reviews.

**DATES:** Comments must be received by xxxx, 2019.

**ADDRESSES:** Send responses to *epc@ ahrq.hhs.gov*.

**FOR FURTHER INFORMATION CONTACT:** The AHRQ EPC Program at *epc@ ahrg.hhs.gov.* 

### SUPPLEMENTARY INFORMATION:

Established in 1997, the mission of the EPC Program (https://effectivehealthcare.ahrq.gov/about/epc) is to create evidence reviews that improve health care by supporting evidence-based decision making by patients, providers, and policymakers. Evidence reviews summarize and synthesize existing literature and evidence using rigorous methods.

Understanding that knowledge synthesis is, by itself, insufficient to change health care practice and improve patient outcomes, the EPC Program has relied on partners who are committed to using these reports. Over the 20 years of its existence, the EPC Program has partnered with clinical professional organizations, federal agencies, and other health care organizations. These organizations have used EPC evidence reviews for a variety of activities, including developing clinical practice guidelines, coverage decisions, program planning, funding opportunities and more.

The EPC Program is committed to innovation and improving the utility of its evidence reviews. AHRQ wants to hear specific details about how organizations and people have used the information from EPC evidence reviews. This is especially important since 2019 is the last fiscal year in which funds appropriated to the Patient-Centered Outcomes Research Trust Fund, which has funded many EPC evidence reviews, will be made available to HHS. Therefore, the EPC Program wants to understand the impact of the AHRQ EPC evidence reviews and the effectiveness of its partnerships.

AHRQ seeks feedback:

- From clinical professional societies or other groups who used AHRQ EPC evidence reviews for developing guidelines
- From payers who used an AHRQ EPC evidence review to make coverage or other decisions

- From health systems who used an AHRQ EPC evidence review to change how health care is practiced or delivered
- From research funders who used an AHRQ EPC evidence review to set a research agenda
- From other organizations including patient organizations that have used AHRQ EPC evidence reviews for various purposes

Specific questions of interest to AHRQ include, but are not limited to:

- How you heard about the AHRQ EPC review
- How you used the AHRQ EPC evidence review
- How the AHRQ EPC evidence review changed your decision, recommendation, or action
- What you would have done in the absence of an EPC report
- Was the AHRQ EPC evidence review acknowledged or referenced in your decision, recommendation, or action? If so, how? And if not, why not?
- Your assessment of the value of the unique contribution provided by AHRQ in conducting evidence reviews for improving patient care and outcomes
- Based on your experiences, suggestions for how the EPC program can make its evidence reviews more useful and impactful

AHRQ is interested in all of the questions listed above, but respondents are welcome to address as many or as few as they choose and to address additional areas of interest not listed.

This RFI is for planning purposes only and should not be construed as a policy, solicitation for applications, or as an obligation on the part of the Government to provide support for any ideas in response to it. AHRO will use the information submitted in response to this RFI at its discretion, and will not provide comments to any respondent's submission. However, responses to the RFI may be reflected in future solicitation(s) or policies. Respondents are advised that the Government is under no obligation to acknowledge receipt of the information received or provide feedback to respondents with respect to any information submitted. No proprietary, classified, confidential or sensitive information should be included in your response. The Government reserves the right to use any non-proprietary technical information in any resultant solicitation(s). The contents of all submissions will be made available to the public upon request. Submitted

materials must be publicly available or able to be made public.

#### Gopal Khanna,

Director.

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# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Agency for Healthcare Research and Quality

#### **Notice of Meeting**

**AGENCY:** Agency for Healthcare Research and Quality, HHS.

**ACTION:** Notice.

SUMMARY: The Agency for Healthcare Research and Quality (AHRQ) is announcing a Special Emphasis Panel (SEP) meeting on AHRQ-HS-19-001, "Patient Safety Learning Laboratories (2019): Pursuing Safety in Diagnosis and Treatment at the Intersection of Design, Systems Engineering, and Health Services Research (R18)."

DATES: June 12, 2019 (Open on June 12th from 8:00 a.m. to 8:15 a.m. and closed for the remainder of the meeting).

ADDRESSES: Bethesda Marriott Hotel, 5151 Pooks Hill Rd., Bethesda, MD 20852.

## FOR FURTHER INFORMATION CONTACT:

Anyone wishing to obtain a roster of members, agenda or minutes of the nonconfidential portions of this meeting should contact: Heather Phelps, Acting Committee Management Officer, Office of Extramural Research, Education and Priority Populations, AHRQ, 5600 Fishers Lane, Rockville, Maryland 20850, Telephone: (301) 427–1128.

Agenda items for this meeting are subject to change as priorities dictate.

SUPPLEMENTARY INFORMATION: A Special Emphasis Panel is a group of experts in fields related to health care research who are invited by AHRQ, and agree to be available, to conduct on an as needed basis, scientific reviews of applications for AHRQ support. Individual members of the SEP do not attend regularly-scheduled meetings and do not serve for fixed terms or a long period of time. Rather, they are asked to participate in particular review meetings which require their type of expertise.

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (5 U.S.C. App. 2), announcement is made of an AHRQ SEP meeting on AHRQ– HS–19–001, "Patient Safety Learning Laboratories (2019): Pursuing Safety in Diagnosis and Treatment at the Intersection of Design, Systems