request; object class, appropriation code and Central Accounting Number (CAN) of the item requested; HHS requesting organization name; and location, HHS point of contact name and business contact phone number within the requesting organization; a description of the item requested and corresponding quantity and cost required. Other information collected includes; proposal, solicitation, market research, and contract award documentation.

SYSTEMS EXEMPTED FROM CERTAIN PROVISIONS OF THE ACT:
None.

BILLING CODE 4150–24–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Intent To Award Affordable Care Act Funding to Approved Applications Formerly Received in Response to the Centers for Disease Control and Prevention Funding Opportunity IP11–010, “Enhanced Surveillance for New Vaccine Preventable Disease”

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

ACTION: Notice.

SUMMARY: This notice provides public announcement of CDC’s intent to fund Approved cooperative agreement applications previously received and competed in response to CDC Funding Opportunity, CDC–RFA–IP11–010, “Enhanced Surveillance for New Vaccine Preventable Disease.” It is the intent of CDC to fund the applications with Patient Protection Affordable Care Act (ACA), Section 4002, appropriations.

CFDA Number 93.533 is the ACA-specific CFDA number for this initiative.

Award Information

Approximate Current Fiscal Year Funding: $2,750,000.
Approximate Number of Awards: 3–5.
Approximate Average Award: $500,000.
Fiscal Year Funds: Patient Protection and Affordable Health Care Act of 2011.
Anticipated Award Date: 31 May 2011.
Budget Period: 12 months.
Project Period: 5 years.
Application Selection Process: CDC will apply the same selection methodology published in the FOA, CDC–RFA–IP11–010.

The following will be considered in making funding decisions:

• Scientific and technical merit of the proposed project as determined by scientific peer review.
• Availability of funds.
• Relevance of the proposed project to program priorities.
• Funding decision criteria will include a priority score, programmatic importance/value relative to program priorities, past and current surveillance performance and capabilities, research portfolio, geographic locations, and study population consideration (ethnicity, etc.)
• Preference may be given to a medical institution catchment area having a total population of greater than 500,000 persons.
• Applicants must have a letter of support with a research laboratory for rotavirus analyses or they will not be funded.

CDC will add the following Authority to that which is reflected in the published Funding Opportunity:
—Section 4002 of the Patient Protection and Affordable Care Act (Public Law 111–148.)

DATES: The effective date for this action is April 19, 2011 and remains in effect until the expiration of the project period of the ACA funded applications.

FOR FURTHER INFORMATION CONTACT:
Elmira Benson, Deputy Director, Centers for Disease Control and Prevention, 2920 Brandywine Road, Atlanta, GA 30341, telephone (770) 488–2802, e-mail Elmira.Benson@cdc.gov.

SUPPLEMENTARY INFORMATION: On March 23, 2010, the President signed into law the Patient Protection and Affordable Care Act (ACA). ACA is designed to improve and expand the scope of health care coverage for Americans. Cost savings through disease prevention is an important element of this legislation and ACA has established a Prevention and Public Health Fund (PPHF) for this purpose. Specifically, the legislation states in Section 4002 that the PPHF is to “provide for expanded and sustained national investment in prevention and public health programs to improve health and help restrain the rate of growth in private and public sector health care costs. ACA and the Prevention and Public Health Fund make improving public health a priority with investments to improve public health.

The PPHF states that the Secretary shall transfer amounts in the Fund to accounts within the Department of Health and Human Services to increase funding, over the fiscal year 2008 level, for programs authorized by the Public Health Services Act, for prevention, wellness and public health activities including prevention research and health screenings, such as the Community Transformation Grant Program, the Education and Outreach Campaign for Preventative Benefits, and Immunization Programs.

ACA legislation affords an important opportunity to advance public health across the lifespan and to reduce health disparities by supporting an intensive community approach to chronic disease prevention and control.

Therefore, the FOA program activities CDC proposes to fund with ACA appropriations are authorized by the amendment to the Public Health Services Act which authorized the Prevention and Wellness Program.

Dated: April 8, 2011.

John Murphy,
Business Operation Manager, Centers for Disease Control and Prevention.

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60-Day–11–11EF]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404–639–5960 and send comments to Daniel Holcomb, CDC Reports Clearance Officer, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an e-mail to omb@cdc.gov.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency’s estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the