that meet project objectives described above.

National and state asthma surveillance data provide information useful to examine progress on long-term outcomes of state asthma programs. To identify appropriate indicators of program implementation and short-term outcomes for AIRS, CDC previously convened and facilitated workgroups comprised of state asthma control program representatives to generate specific questions to collect data on key features of state asthma control programs; partnerships, surveillance, interventions, and evaluation. Since implementation in 2010 AIRS, and technical assistance provided by NCEH staff, has provided states with uniform data reporting methods and linkages to other states’ asthma programs and data. Thus, AIRS has saved state resources and staff time when they embark on asthma activities similar to those being done elsewhere. Also, the AIRS system has been similarly helpful in linking states together on occasions when a given state seeks to report their results at national meetings or publish their findings and program results either in scholarly journals. For example, with CDC staff, three state programs co-presented on a panel regarding evaluations of their asthma partnerships at the November, 2012 American Evaluation Association’s Evaluation 2012 conference.

In addition, CDC staff have regularly made requests from AIRS to obtain standardized summaries of state programs to obtain data summaries regarding such activities as the number of states meeting staffing requirements, number and timeliness of state strategic evaluation plans, topics for individual evaluation selected by states, types and targets of interventions, and use of asthma surveillance data in state programs.

Furthermore, access to standardized AIRS surveillance and programmatic data allows CDC to provide timely and accurate responses to the public and Congress regarding the NCEH asthma program (e.g., how many states have asthma interventions targeting schools, how many children are treated in emergency departments, etc.).

There will be no cost for respondents, other than their time, to participate in AIRS. The total estimated annual burden hours are 288.

<table>
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<tr>
<th>Type of respondents</th>
<th>Form name</th>
<th>Number of respondents</th>
<th>Number of responses per respondent</th>
<th>Average burden per response (in hours)</th>
<th>Total burden (in hours)</th>
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<td>Interim report on activities and objectives. End-of-year report on activities, objectives and aggregate surveillance.</td>
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<td>Total</td>
<td></td>
<td></td>
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</table>


Ron A. Otten,
Director, Office of Scientific Integrity (OSI), Office of the Associate Director for Science (OAD), Office of the Director, Centers for Disease Control and Prevention.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Board of Scientific Counselors,
National Institute for Occupational Safety and Health: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Pub. L. 92–463) of October 6, 1972, that the Board of Scientific Counselors, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, Department of Health and Human Services, has been renewed for a 2-year period through February 3, 2015.

For information, contact Dr. Roger Rosa, Executive Secretary, Board of Scientific Counselors, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, Department of Health and Human Services Office, HHH Building, 200 Independence Ave SW., Room 715H, MS P12, Washington, DC 20201—telephone 202/260–4464.

Elaine L. Baker,
Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Meeting of the ICD–9–CM Coordination and Maintenance Committee; Correction

SUMMARY: This document corrects a notice that was published in the Federal Register on February 7, 2013 (78 FR 9055–9056). The title of the meeting announcement should read as follows: Notice of Meeting of the ICD–9–CM Coordination and Maintenance Committee. The first sentence of the notice should read as follows: National Center for Health Statistics (NCHS), Classifications and Public Health Data Standards Staff announces the following meeting:

Name: ICD–9–CM Coordination and Maintenance Committee (C&M) meeting.

Time and Date: 9:00 a.m.–5:00 p.m., March 5, 2013.

Place: Centers for Medicare and Medicaid Services (CMS) Auditorium, 7500 Security Boulevard, Baltimore, Maryland 21244.

FOR FURTHER INFORMATION CONTACT: Donna Pickett, Medical Systems...
DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Child Support Document Exchange System (CSDES)

OMB No.: New Collection

Description: The federal Office of Child Support Enforcement (OCSE) is implementing a new application, the Child Support Document Exchange System (CSDES), within the Federal Parent Locator Service (FPLS) Child Support Services Portal (CSSP). The CSDES will collect and maintain certain child and spousal support case-related records provided by a state IV–D child support agency to facilitate the dissemination of IV–D child and spousal support information to authorized users acting on behalf of a state IV–D child support agency.

Elaine L. Baker,
Director, Management Analysis and Services Office, Centers for Disease Control and Prevention

[FR Doc. 2013–03794 Filed 2–19–13; 8:45 am]

ANNUAL BURDEN ESTIMATES

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<td>Batch Processing</td>
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Estimated Total Annual Burden Hours: 3,782.41.

ADDITIONAL INFORMATION

Additional Information: Copies of the proposed collection may be obtained by writing to The Administration for Children and Families, Office of Information Services, 370 L’Enfant Promenade SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the Federal Register. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, 725 17th Street NW., Washington, DC 20503, Attn: Desk Officer for ACF.

Robert Sargis,
Reports Clearance Officer.

[FR Doc. 2013–03794 Filed 2–19–13; 8:45 am]