

Office of Child Support Enforcement, was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. 42 U.S.C. 653(i)(1). In accordance with section 453A(g)(2) of the Social Security Act, employers are required to report information pertaining to newly hired employees to their state directory of new hires (SDNH) and, within three days of receiving employer information,

states are required to transmit SDNH information to the NDNH. States are also required to transmit wage and unemployment compensation claims information to the NDNH on a quarterly basis. Federal agencies are required to report new hires and quarterly wage information directly to the NDNH.

The information maintained in the NDNH is collected electronically and assists states administering child

support programs locate parents and enforce child support orders. Additionally, Congress authorized specific state and federal agencies to receive NDNH information for authorized purposes to assist in administering certain programs.

*Respondents:* Employers, State Child Support Enforcement Agencies, and State Workforce Agencies.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
New Hire: Employers Reporting Manually .....	<sup>1</sup> 5,294,970	<sup>2</sup> 1.98	.025 hours (1.5 minutes).	262,101.02
New Hire: Employers Reporting Electronically .....	<sup>3</sup> 635,162	<sup>4</sup> 76.40	.00028 hours (1 second) <sup>5</sup> .	13,587.39
New Hire: States .....	54	<sup>6</sup> 193,947.41	.016667 hours (1 minute) <sup>7</sup> .	174,556.16
Quarterly Wage & Unemployment Compensation .....	53	<sup>8</sup> 27	.00028 hours (2 minutes).	.40
Multistate Employers' Notification Form .....	4,632	1	.050 hours (3 minutes).	231.60
Total .....				450,477

<sup>1</sup> Eighty-nine percent of all employers report manually (based on SSA's experience).

<sup>2</sup> For the "Employers" tiers, "response" is defined as the number of new hire reports. Only 18 percent of all new hire reports are reported manually and 82 percent are reported electronically (based on OCSE's experience).

<sup>3</sup> Eleven percent of all employers report electronically (based on SSA's experience).

<sup>4</sup> "Response" is defined as the number of new hire reports. Eighty-two percent of new hire reports are reported electronically (based on OCSE's experience).

<sup>5</sup> Based on the assumption that employers reporting new hires electronically transmit their reports in a batch file, thus significantly reducing the per-response burden.

<sup>6</sup> Based on the average number of reports per transmission and the average burden per new hire report that are submitted manually. Reports submitted electronically are automated. The average number of reports per transmission is calculated by dividing 10,473,160 (total number of manual new hire reports) by 54 (total number of states).

<sup>7</sup> The average burden per new hire report is estimated to be one minute.

<sup>8</sup> "Response" is defined here as the number of transmissions to the NDNH. States are required to transmit quarterly wage and unemployment compensation data four times a year.

*Estimated Total Annual Burden Hours:* 450,477 hours.

**Additional Information**

Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 370 L'Enfant Promenade SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. Email address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov).

**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, Fax: 202-395-7285, Email: [OIRA\\_SUBMISSION@OMB.EOP.GOV](mailto:OIRA_SUBMISSION@OMB.EOP.GOV). Attn: Desk Officer for the Administration for Children and Families.

**Robert Sargis,**  
*Reports Clearance Officer.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Community Living**

**Agency Information Collection Activities; Proposed Collection; Comment Request; Chronic Disease Self-Management Education Program Standardized Data Collection**

**AGENCY:** Administration on Aging (AoA), Administration for Community Living (ACL), HHS.

**ACTION:** Notice.

**SUMMARY:** The Administration on Aging (AoA), now part of the Administration for Community Living, is announcing that the proposed collection of information listed below has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

**DATES:** Submit written comments on the collection of information by April 19, 2013.

**ADDRESSES:** [OIRA\\_submission@omb.eop.gov](mailto:OIRA_submission@omb.eop.gov) or by fax to 202.395.5806. Attn: OMB Desk Officer for ACL, Office of Information and Regulatory Affairs, OMB.

**FOR FURTHER INFORMATION CONTACT:** Michele Boutaugh, 404-987-3411 or [Michele.boutaugh@acl.hhs.gov](mailto:Michele.boutaugh@acl.hhs.gov).

**SUPPLEMENTARY INFORMATION:** In compliance with 44 U.S.C. 3507, the Administration on Aging (now part of the Administration for Community

Living) has submitted the following proposed collection of information to OMB for review and clearance.

The “Empowering Older Adults and Adults with Disabilities through Chronic Disease Self-Management Education (CDSME) Programs” cooperative agreement program is financed through 2012 Prevention and Public Health Funds. The proposed data collection is necessary for monitoring grant program operations and outcomes. AoA proposes to gather information to monitor grantee progress, record location of sites where workshops are held which will allow mapping of the delivery infrastructure, and document participant attendance and demographic and health characteristics. The proposed Participant Survey requests the participants’ gender, zip code and birthdate to allow for potential Medicare claims matching and an analysis of changes in health care utilization post participation.

In response to the 60-day **Federal Register** notice related to this proposed data collection and published on July 23, 2013, four sets of comments were received. Concern was expressed about the collection of sensitive personal information. Most of the remaining comments provided suggestions for enhancing the quality and clarity of the information to be collected. The comments resulted in some revisions to the proposed data collection tools. The originally proposed data collection tools, the comments with responses and a revised set of data collection tools may be found on the AoA Web site at: [http://www.aoa.gov/AoARoot/AoA\\_Programs/Tools\\_Resources/collection\\_tools.aspx](http://www.aoa.gov/AoARoot/AoA_Programs/Tools_Resources/collection_tools.aspx).

ACL estimates the burden of this collection of information as 440 hours for State Governments, 1050 hours for local agency staff, and 2,500 hours for individuals—Total burden is 3,990 hours per year.

Dated: March 15, 2013.

**Kathy Greenlee,**

*Administrator and Assistant Secretary for Aging.*

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**BILLING CODE 4154-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. FDA-2013-N-0242]

#### Agency Information Collection Activities: Proposed Collection; Comment Request; Current Good Manufacturing Practice for Positron Emission Tomography Drugs

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing an opportunity for public comment on the proposed collection of certain information by the Agency. 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 of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on the information collection contained in FDA’s regulations on current good manufacturing practice (CGMP) for positron emission tomography (PET) drugs.

**DATES:** Submit either electronic or written comments on the collection of information by May 20, 2013.

**ADDRESSES:** Submit electronic comments on the collection of information to <http://www.regulations.gov>. Submit written comments on the collection of information to the Division of Dockets Management (HFA-305), Food and Drug Administration, 5630 Fishers Lane., Rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number found in brackets in the heading of this document.

**FOR FURTHER INFORMATION CONTACT:** Ila S. Mizrahi, Office of Information Management, Food and Drug Administration, 1350 Piccard Dr., P150-400B, Rockville, MD 20850, 301-796-7726, [Ila.mizrahi@fda.hhs.gov](mailto:Ila.mizrahi@fda.hhs.gov).

**SUPPLEMENTARY INFORMATION:** 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. “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 (44 U.S.C. 3506(c)(2)(A)) requires Federal Agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, FDA is publishing notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, FDA invites comments on these topics: (1) Whether the proposed collection of information is necessary for the proper performance of FDA’s functions, including whether the information will have practical utility; (2) the accuracy of FDA’s estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques, when appropriate, and other forms of information technology.

#### Current Good Manufacturing Practice for Positron Emission Tomography Drugs—(OMB Control Number 0910-0667)—Extension

Positron emission tomography is a medical imaging modality involving the use of a unique type of radiopharmaceutical drug product. FDA’s CGMP regulations at 21 CFR part 212 are intended to ensure that PET drug products meet the requirements of the Federal Food, Drug, and Cosmetic Act (the FD&C Act) regarding safety, identity, strength, quality, and purity. The CGMP requirements for PET drugs are issued under the provisions of the Food and Drug Administration Modernization Act (FDAMA). These CGMP requirements are designed to take into account the unique characteristics of PET drugs, including their short half-lives and the fact that most PET drugs are produced at locations that are very close to the patients to whom the drugs are administered.

The CGMP regulations are intended to ensure that approved PET drugs meet the requirements of the FD&C Act as to safety, identity, strength, quality, and purity. The regulations address the following matters: Personnel and resources; quality assurance; facilities and equipment; control of components, in-process materials, and finished products; production and process controls; laboratory controls; acceptance