Meeting Registration: The meeting is open to the public. The meeting will be accessible by webcast or by attendance in-person. Pre-registration is required for both web viewing and in-person attendance. Pre-registration is expected to open on September 4, 2013. To pre-register, please go to www.DietaryGuidelines.gov and click on the link for “Meeting Registration.” To register by phone or to request a sign language interpreter or other special accommodations, please call National Capitol Contracting, Laura Walters at (703) 243–9696 by 5:00 p.m. E.D.T., September 30, 2013. Pre-registration must include name, affiliation, phone number or email, days attending, and if participating via webcast or in-person or requesting to provide oral testimony.

Webcast Public Participation: After pre-registration, individuals participating by webcast will receive webcast access information via email.

In-Person Public Participation and Building Access: For in-person participants, the meetings are within the National Institutes of Health (NIH) Clinical Center (Building 10) as noted above in the Addresses section. Details regarding registration capacity and directions will be posted on www.DietaryGuidelines.gov. For in-person participants, check-in at the registration desk onsite at the meeting is required and will begin at 7:30 a.m. each day.

Oral Testimony: The Committee invites requests from the public to present three minutes of oral testimony on the morning of October 3, 2013. Due to time limitations, pre-registration is required by 5 p.m. E.D.T., on September 25, 2013. Pre-registration to present oral testimony will be confirmed on a first-come, first-served basis, as time on the meeting agenda permits. Confirmation by email will include further instructions for participation on October 3, 2013. Requests to present oral testimony can be made by going to www.DietaryGuidelines.gov and clicking on the link for “Meeting Registration” and must include a written outline of the intended testimony not exceeding one page in length. Written comments (separate from oral testimony) are encouraged to be submitted electronically through the public comments database at www.DietaryGuidelines.gov.

Written Public Comments and Meeting Documents: Written comments from the public will be accepted throughout the Committee’s deliberative process. Written public comments can be submitted and/or viewed at www.DietaryGuidelines.gov using the “Submit Comments” and “Read Comments” links, respectively. Written comments received by September 25, 2013 will ensure transmission to the Committee prior to this meeting. Documents pertaining to Committee deliberations, including meeting agendas, summaries, and transcripts will be available on www.DietaryGuidelines.gov under “Meetings” and meeting materials will be available for public viewing at the meeting. Meeting information, thereafter, will continue to be accessible online, at the NIH Library, and upon request at the Office of Disease Prevention and Health Promotion, OASH/HHS; 1101 Wootton Parkway, Suite LL100 Tower Building; Rockville, MD 20852: Telephone (240) 453–8280; Fax: (240) 453–8281.

Dated: August 5, 2013.

Don Wright, 
Deputy Assistant Secretary for Health, Office of Disease Prevention and Health Promotion, Office of the Assistant Secretary for Health, U.S. Department of Health and Human Services.

Dated: August 5, 2013.

Robert Post, 
Acting Executive Director, Center for Nutrition Policy and Promotion, U.S. Department of Agriculture.

Dated: August 5, 2013.

Edward B. Knipling, 
Administrator, Agricultural Research Service, U.S. Department of Agriculture.

Dated: August 5, 2013.

SUPPLEMENTARY INFORMATION:

Purpose and Background

HHS/CDC established the Vessel Sanitation Program (VSP) in the 1970s as a cooperative activity with the cruise ship industry. VSP helps the cruise ship industry prevent and control the introduction, transmission, and spread of gastrointestinal illnesses on cruise ships. VSP operates under the authority of the Public Health Service Act (Section 361 of the Public Health Service Act; 42 U.S.C. 264, “Control of Communicable Diseases”). Regulations found at 42 CFR 71.41 (Foreign Quarantine—Requirements Upon Arrival at U.S. Ports: Sanitary Inspection; General Provisions) state that carriers arriving at U.S. ports from foreign areas are subject to sanitary inspections to determine whether rodent, insect, or other vermin infestations exist, contaminated food or water, or other sanitary conditions requiring measures for the prevention of the introduction, transmission, or spread of communicable diseases are present.

The fee schedule for sanitation inspections of passenger cruise ships by VSP was first published in the Federal Register on November 24, 1987 (52 FR 45019). HHS/CDC began collecting fees on March 1, 1988. This notice announces fees that are effective for FY 2014, beginning on October 1, 2013, through September 30, 2014.

The following formula will be used to determine the fees:

\[
\text{Fee} = \text{Number of Inspections} \times \text{Fee Per Inspection}
\]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Fees for Sanitation Inspections of Cruise Ships

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

ACTION: General notice.

SUMMARY: The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS) announces fees for vessel sanitation inspections for Fiscal Year (FY) 2014. These inspections are conducted by HHS/CDC’s Vessel Sanitation Program (VSP). VSP helps the cruise line industry fulfill its responsibility for developing and implementing comprehensive sanitation programs to minimize the risk for acute gastroenteritis. Every vessel that has a foreign itinerary and carries 13 or more passengers is subject to twice-yearly inspections and, when necessary, re-inspection.

DATES: These fees are effective October 1, 2013, through September 30, 2014.

FOR FURTHER INFORMATION CONTACT: CAPT Jaret T. Ames, Chief, Vessel Sanitation Program, National Center for Environmental Health, Centers for Disease Control and Prevention, 4770 Buford Highway NE., MS F–58, Atlanta, Georgia 30341–3717, phone: 800–323–2132 or 954–356–6650, email: vsp@cdc.gov.
Appendix A

Centers for Disease Control and Prevention.

J. Ronald Campbell

conducted as part of HHS/CDC’s VSP.

cruise vessels for which inspections are

effective date.

Federal Register

with the amended fee

HHS/CDC will publish a notice in the

VSP change, the fee schedule may need

The increase in fees is required due to

1, 2013, through September 30, 2014.

(Appendix A) will be effective October

The size and cost factors for FY 2014 are presented in Appendix A.

Fee

The fee schedule (Appendix A) will be effective October 1, 2013, through September 30, 2014. The fee schedule (Appendix A) will be effective October 1, 2013, through September 30, 2014. The increase in fees is required due to administrative structure support costs within HHS/CDC. The last change in VSP inspection fees was October 1, 2006.

If travel expenses or other charges to VSP change, the fee schedule may need to be adjusted before September 30, 2014. If a fee adjustment is necessary, HHS/CDC will publish a notice in the Federal Register with the amended fee schedule (Appendix A) as soon as possible and at least 30 days before the effective date.

Applicability

The fees will apply to all passenger cruise vessels for which inspections are conducted as part of HHS/CDC’s VSP.


J. Ronald Campbell

Director, Division of Executive Secretariat,

Centers for Disease Control and Prevention.

Appendix A

SIZE/COST FACTORS USED TO DETERMINE INSPECTION FEES IMPACTS

<table>
<thead>
<tr>
<th>Vessel size (GRT)</th>
<th>Approximate cost per GRT (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extra Small (&lt;3,000 GRT)</td>
<td>0.25</td>
</tr>
<tr>
<td>Small (3,001–15,000 GRT)</td>
<td>0.50</td>
</tr>
<tr>
<td>Medium (15,001–30,000 GRT)</td>
<td>1.00</td>
</tr>
<tr>
<td>Large (30,001–60,000 GRT)</td>
<td>1.50</td>
</tr>
<tr>
<td>Extra Large (60,001–120,000 GRT)</td>
<td>2.00</td>
</tr>
<tr>
<td>Mega (&gt;120,001 GRT)</td>
<td>3.00</td>
</tr>
</tbody>
</table>

1 Gross register tonnage in cubic feet, as shown in Lloyd’s Register of Shipping.

Inspections and reinspections involve the same procedures, require the same amount of time, and are therefore charged at the same rates.

APPENDIX A

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Board of Scientific Counselors, National Institute for Occupational Safety and Health (BSC, NIOSH)

In accordance with section 10(a) (2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following meeting for the aforementioned committee:

Time and Date: 8:30 a.m.—3:00 p.m., September 18, 2013.

Place: Patriots Plaza I, 395 E Street SW., Room 2900, Washington, DC 20201.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 33 people. If you wish to attend in person or by webcast, please see the NIOSH Web site to register (http://www.cdc.gov/niosh/bsc/) or call (202) 245–0625 or (202) 245–0626 for building access information. Teleconference is available toll-free: please dial (877) 328–2816, Participant Pass Code 6558291.

Purpose: The Secretary, the Assistant Secretary for Health, and by delegation the Director, Centers for Disease Control and Prevention, are authorized under Sections 301 and 308 of the Public Health Service Act to conduct directly or by grants or contracts, research, experiments, and demonstrations relating to occupational safety and health and to mine health. The Board of Scientific Counselors shall provide guidance to the Director, National Institute for Occupational Safety and Health and the agency for developing, evaluating and disseminating results. The Board shall evaluate the degree to which the National Institute for Occupational Safety and Health:

(1) Conform to appropriate scientific standards,
(2) Address current, relevant needs, and
(3) Produce intended results.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS–10496]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

AGENCY: Center for Medicare and Medicaid Services.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send