7700 Arlington Boulevard, Suite 5101, Falls Church, VA 22042–5101, or call 703–681–0039.

SUPPLEMENTARY INFORMATION:

Title; Associated Form; and OMB Number: Women, Infants and Children Overseas Participant Satisfaction Survey; OMB Control Number 0720–0046.

Needs and Uses: The information collection requirement is necessary to obtain the participant's satisfaction levels with the services provided by the WIC overseas staff and the overall program. The findings from the surveys will be used to determine the success of the WIC overseas program and if improvements are necessary.

Affected Public: Individual or Households

Annual Burden Hours: 37.5

Number of Respondents: 150

Responses per Respondent: 1

Average Burden per Response: 15 minutes

Frequency: On occasion

Respondents are individuals who are currently receiving WIC overseas services. The purpose of the WIC overseas survey is to assess the participant's satisfaction level with the services provided by the WIC overseas staff and the overall program. The survey includes questions regarding site access, customer service, quality of health information and overall program satisfaction. The findings of these surveys will be used to determine the success of the WIC overseas program and if improvements are necessary. The WIC overseas program is a legislatively mandated program and it is anticipated that the program will continue indefinitely. As such, DoD is publishing this formal notice.

Dated: January 8, 2014.

Aaron Siegel,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. 2014–00361 Filed 1–10–14; 8:45 am]

BILLING CODE 5001–06–P

DEPARTMENT OF DEFENSE

Office of the Secretary

[Docket ID DoD–2014–HA–0004]

Proposed Collection; Comment Request

AGENCY: Office of the Assistant Secretary of Defense for Health Affairs, DoD.

ACTION: Notice.

SUMMARY: In compliance with Section 3506(c)(2)(A) of the *Paperwork Reduction Act of 1995,* the Office of the Assistant Secretary of Defense for Health Affairs announces a proposed public information collection and seeks public comment on the provisions thereof. 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 information collection; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the information collection on respondents, including through the use of automated collection techniques or other forms of information technology.

DATES: Consideration will be given to all comments received by March 14, 2014.

ADDRESSES: You may submit comments, identified by docket number and title, by any of the following methods:

- *Federal eRulemaking Portal: http://www.regulations.gov*. Follow the instructions for submitting comments.
- *Mail:* Federal Docket Management System Office, 4800 Mark Center Drive, East Tower, Suite 02G09, Alexandria, VA 22350–3100.

Instructions: All submissions received must include the agency name, docket number and title for this **Federal Register** document. The general policy for comments and other submissions from members of the public is to make these submissions available for public viewing on the Internet at *http://www.regulations.gov* as they are received without change, including any personal identifiers or contact information.

Any associated form(s) for this collection may be located within this same electronic docket and downloaded for review/testing. Follow the instructions at http://www.regulations.gov for submitting comments. Please submit comments on any given form identified by docket number, form number, and title.

FOR FURTHER INFORMATION CONTACT: To request more information on this proposed information collection or to obtain a copy of the proposal and associated collection instruments, please write to the Defense Health Agency, Medical Benefits and Reimbursement Systems, 16401 East Centretech Parkway, ATTN: Elan Green, Aurora, CO 80011–9043, or call Defense Health Agency, Medical Benefits and Reimbursement Office, at (303) 676–3907.

SUPPLEMENTARY INFORMATION:

Title; Associated Form; and OMB Number: Application for TRICARE-Provider Status: Corporation Services Provider; DD Form X644; OMB Number 0720–0020.

Needs and Uses: The information collection requirement is necessary to allow eligible providers to apply for Corporate Services Provider status under the TRICARE program.

Affected Public: Business or other for profit; Not-for-profit institutions.

Annual Burden Hours: 100.

Number of Respondents: 300.

Responses Per Respondent: 1.

Average Burden per Response: 20 minutes.

Frequency: On occasion.

On March 10, 1999, TRICARE Management Activity (TMA), formerly known as OCHAMPUS, published a final rule in the **Federal Register** (64 FR 11765), creating a fourth class of TRICARE providers consisting of freestanding corporations and foundations that render principally professional ambulatory or in-home care and technical diagnostic procedures. Effective October 1, 2013, the TRICARE Management Activity is now the Defense Health Agency (DHA). The intent of the rule was not to create additional benefits that ordinarily would not be covered under TRICARE if provided by a more traditional healthcare delivery system, but rather to allow those services which would otherwise be allowed except for an individual provider's affiliation with a freestanding corporate facility. The addition of the corporate class recognized the current range of providers within today's health care delivery structure, and gave beneficiaries access to another segment of the health care delivery industry. Corporate services providers must be approved for Medicare payment, or when Medicare approval status is not required, be accredited by a qualified accreditation organization to gain provider authorization status under TRICARE. Corporate services providers must also enter into a participation agreement which will be sent out as part of the initial authorization process. The participation agreement will ensure that TRICARE-determined allowable payments, combined with the costshare/copayment, deductible, and other health insurance amounts, will be accepted by the provider as payment in full. The application for TRICARE-Provider Status: Corporate Services Provider, will collect the necessary information to ensure that the conditions are met for authorization as a TRICARE corporate services provider: i.e., the provider (1) is a corporation or a foundation, but not a

professional corporation or professional association; (2) provides services and related supplies of a type rendered by TRICARE individual professional providers or diagnostic technical services; (3) is approved for Medicare payment or, when Medicare approval status is not required, is accredited by a qualified accreditation organization; and (4) has entered into a participation agreement approved by the Director, DHA or a designee.

The collected information will be used by TRICARE contractors to process claims and verify authorized provider status. Verification involves collecting and reviewing copies of the provider's licenses, certificates, accreditation documents, etc. If the criteria are met, the provider is granted TRICARE authorization status. The documentation and information are collected when: (1) A provider requests permission to become a TRICARE-authorized provider; (2) a claim is filed for care received from a provider who is not listed on the contractors' computer listing of authorized providers; or (3) when a former TRICARE-authorized provider requests reinstatement. The contractors develop the forms used to gather information based on TRICARE conditions for participation listed above. Without the collection of this information, contractors cannot determine if the provider meets TRICARE-authorization requirements for corporate services providers. If the contractor is unable to verify that a provider meets these authorization requirements, the contractor may not reimburse either the provider or the beneficiary for the provider's health care services. To reduce the reporting burden to a minimum, TRICARE has carefully selected the information requested from respondents. Only that information which has been deemed absolutely essential is being requested. If necessary, contractors may verify credentials with Medicare, JCAHO and other national organizations by telephone. TRICARE is also participating with Medicare in the development of a National Provider System which will eliminate duplication of provider certification data collection among Federal government agencies. TRICARE contractors are required to maintain a computer listing of all providers that have submitted the appropriate authorization information and documentation. To avoid duplicate inquires, the contractors must search the computer provider listing before requesting documentation from providers. Since the providers affected by this information collection generally have not previously been eligible to be authorized providers, TRICARE contractors will have no information on file. The providers will have to submit the information requested on the data collection form (Application for TRICARE-Providers Status: Corporate Services Provider) in order to obtain provider authorization status under TRICARE. The information will usually be collected from each respondent only once. It is estimated that there will be approximately 300 applicants per year. TRICARE will request the provider authorization documentation and information when the provider asks to become TRICARE-authorized or when a claim is filed for a new provider's services. If after a provider has been authorized by a contractor, no claims are filed during two-year period of time, the provider's information will be placed in the inactive file. To reactivate a file, the provider must verify that the information is still correct, or supply new or changed information. The total annual reporting burden is estimated to be approximately 100 hours (approximately 300 respondents with 20 minutes to complete the form).

Dated: January 7, 2014.

Aaron Siegel,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

[FR Doc. 2014–00296 Filed 1–10–14; 8:45 am]

BILLING CODE 5001–06–P

DEPARTMENT OF DEFENSE

Department of the Army

Notice of Availability for Exclusive, Non-Exclusive, or Partially-Exclusive Licensing of an Invention Concerning Anti-Filovirus Therapeutics

AGENCY: Department of the Army, DoD.

ACTION: Notice.

SUMMARY: Announcement is made of the availability for licensing of the invention set forth in U.S. Provisional Patent Application Serial No. 61/761,942, entitled ''Anti-Filovirus Therapeutics,'' filed on February 7, 2013. The United States Government, as represented by the Secretary of the Army, has rights to this invention.

ADDRESSES: Commander, U.S. Army Medical Research and Materiel Command, ATTN: Command Judge Advocate, MCMR–JA, 504 Scott Street, Fort Detrick, Frederick, MD 21702–5012.

FOR FURTHER INFORMATION CONTACT: For patent issues, Ms. Elizabeth Arwine, Patent Attorney, (301) 619–7808. For licensing issues, Dr. Paul Mele, Office of Research and Technology Applications (ORTA), (301) 619–6664, both at telefax (301) 619–5034.

SUPPLEMENTARY INFORMATION: The invention relates to an antisense oligonucleotide directed to a mRNA encoding a mammalian Niemann-Pick C1 (NPC1) receptor, and combinations thereof and compositions comprising such are provided. Also provided are methods of treating or reducing filovirus infection of a subject.

Brenda S. Bowen,

Army Federal Register Liaison Officer.

[FR Doc. 2014–00290 Filed 1–10–14; 8:45 am]

BILLING CODE 3710–08–P

DEPARTMENT OF DEFENSE

Department of the Army

Notice of Availability for Exclusive, Non-Exclusive, or Partially-Exclusive Licensing of an Invention Concerning Imidazenil, or a Combination of Imidazenil and [+]-Huperzine A and/or [-]-Huperzine A for Protection Against and/or Treatment of Seizure/Status Epilepticus and Neuropathology Following Nerve Agent or Organophosphate Exposure, Compositions and Kits

AGENCY: Department of the Army, DoD.

ACTION: Notice.

SUMMARY: Announcement is made of the availability for licensing of the invention set forth in U.S. Provisional Patent Application Serial No. 61/726,753, entitled ''Imidazenil, or a Combination of Imidazenil and [+]-Huperzine A and/or [-]-Huperzine A for Protection Against and/or Treatment of Seizure/Status Epilepticus and Neuropathology Following Nerve Agent or Organophosphate Exposure, Compositions and Kits,'' filed on November 15, 2012. The United States Government, as represented by the Secretary of the Army, has rights to this invention.

ADDRESSES: Commander, U.S. Army Medical Research and Materiel Command, ATTN: Command Judge Advocate, MCMR–JA, 504 Scott Street, Fort Detrick, Frederick, MD 21702–5012.

FOR FURTHER INFORMATION CONTACT: For patent issues, Ms. Elizabeth Arwine, Patent Attorney, (301) 619–7808. For licensing issues, Dr. Paul Mele, Office of Research and Technology Applications (ORTA), (301) 619–6664, both at telefax (301) 619–5034.