number; (3) session start and end times; (4) conversation start and end times; (5) incoming telephone number and IP address (if call originates with an IP-based device) at the time of call; (6) outbound telephone number and IP address (if call terminates with an IP-based device) at the time of call; (7) total conversation minutes; (8) total session minutes; and (9) the call center (by assigned center ID number) that handles the call.

(6) *Third-party Agreements.* (a) VRS providers shall maintain copies of all third-party contracts or agreements so that copies of these agreements will be available to the Commission and the TRS Fund administrator upon request. Such contracts or agreements shall provide detailed information about the nature of the services to be provided by the subcontractor.

(b) VRS providers shall describe all agreements in connection with marketing and outreach activities, including those involving sponsorships, financial endorsements, awards, and gifts made by the provider to any individual or entity, in the providers' annual submissions to the TRS Fund administrator.

(7) *Whistleblower Protection.* TRS providers shall provide information about these TRS whistleblower protections, including the right to notify the Commission's Office of Inspector General or its Enforcement Bureau, to all employees and contractors, in writing. Providers that already disseminate their internal business policies to their employees in writing (*e.g.* in employee handbooks, policies and procedures manuals, or bulletin board postings—either online or in hard copy) must also explicitly include these TRS whistleblower protections in those written materials.

Lastly, the Commission is revising this collection to remove the ''Required Submission for Waiver Request'' requirement from this collection because it is no longer necessary, as this provision has expired.

Federal Communications Commission.

**Marlene H. Dortch,**

*Secretary, Office of the Secretary, Office of Managing Director.*

[FR Doc. 2014–10893 Filed 5–12–14; 8:45 am]

**BILLING CODE 6712–01–P**

## FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION

### Sunshine Act Notice

May 8, 2014.

**TIME AND DATE:** 10:00 a.m., Thursday, May 22, 2014.

**PLACE:** The Richard V. Backley Hearing Room, Room 511N, 1331 Pennsylvania Avenue NW., Washington, DC 20004 (entry from F Street entrance)

**STATUS:** Open .

**MATTERS TO BE CONSIDERED:** The Commission will hear oral argument in the following matters: *Brody Mining, LLC* v. *Secretary of Labor,* Docket Nos. WEVA 2014–82–R, et al. (Issues include whether the Secretary's pattern of violations (POV) rule is facially valid, whether notice-and-comment rulemaking was required to establish POV screening criteria, and whether the Secretary impermissibly applied the POV rule retroactively.)

Any person attending this oral argument who requires special accessibility features and/or auxiliary aids, such as sign language interpreters, must inform the Commission in advance of those needs. Subject to 29 CFR 2706.150(a)(3) and § 2706.160(d).

**CONTACT PERSON FOR MORE INFORMATION:** Jean Ellen (202) 434–9950/(202) 708–9300 for TDD Relay/1–800–877–8339 for toll free.

**Emogene Johnson,**

*Administrative Assistant.*

[FR Doc. 2014–11051 Filed 5–9–14; 11:15 am]

**BILLING CODE 6735–01–P**

## FEDERAL RETIREMENT THRIFT INVESTMENT BOARD

### Sunshine Act; Notice of Joint Meeting FRTIB and ETAC

**TIME AND DATE:** 8:30 a.m. (Eastern Time) May 19, 2014.

**PLACE:** 10th Floor Board Meeting Room, 77 K Street NE., Washington, DC 20002.

**STATUS:** Open to the public.

**MATTERS TO BE CONSIDERED:**

**Open to the Public**

1. Approval of the minutes of the April 28, 2014 Board Member Meeting
2. Approval of the Minutes of the November 18, 2013 ETAC Meeting
3. Monthly Reports
   a. Monthly Participant Activity Report
   b. Monthly Investment Policy Review
   c. Legislative Report
4. Office of Enterprise Planning Report
   a. Participant Survey Summary
   b. Mutual Fund Window Report
   c. Quarterly Metrics Report
5. Office of Communications Report

**CONTACT PERSON FOR MORE INFORMATION:** Kimberly Weaver, Director, Office of External Affairs, (202) 942–1640.

Dated: May 8, 2014.

**James Petrick,**

*General Counsel, Federal Retirement Thrift Investment Board.*

[FR Doc. 2014–10994 Filed 5–9–14; 4:15 pm]

**BILLING CODE 6760–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Final Effect of Designation of a Class of Employees for Addition to the Special Exposure Cohort

**AGENCY:** National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention, Department of Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** HHS gives notice concerning the final effect of the HHS decision to designate a class of employees from the Joslyn Manufacturing and Supply Company in Fort Wayne, Indiana, as an addition to the Special Exposure Cohort (SEC) under the Energy Employees Occupational Illness Compensation Program Act of 2000.

**FOR FURTHER INFORMATION CONTACT:** Stuart L. Hinnefeld, Director, Division of Compensation Analysis and Support, NIOSH, 4676 Columbia Parkway, MS C–46, Cincinnati, OH 45226, Telephone 877–222–7570. Information requests can also be submitted by email to *DCAS@CDC.GOV*.

**SUPPLEMENTARY INFORMATION:**

**Authority:** 42 U.S.C. 7384q(b). 42 U.S.C. 7384*l*(14)(C).

On March 27, 2014, as provided for under the Secretary of HHS designated the following class of employees as an addition to the SEC:

All Atomic Weapons Employees who worked for Joslyn Manufacturing and Supply Co. at the covered facility in Fort Wayne, Indiana, from March 1, 1943, through July 31, 1948, for a number of work days aggregating at least 250 work days, occurring either solely under this employment, or in combination with work days within the parameters established for one or more other classes of employees included in the Special Exposure Cohort.

This designation became effective on April 26, 2014. Hence, beginning on April 26, 2014, members of this class of

employees, defined as reported in this notice, became members of the SEC.

**John Howard,**

*Director, National Institute for Occupational Safety and Health.*

[FR Doc. 2014–11000 Filed 5–12–14; 8:45 am]

**BILLING CODE 4163–19–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

**[30-Day 14–13AHL]**

### Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is published to obtain comments from the public and affected agencies.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address any of the following: (a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (c) Enhance the quality, utility, and clarity of the information to be collected; (d) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and (e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570 or send an email to *omb@cdc.gov*. Written comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

**Proposed Project**

Colorectal Cancer Screening Survey—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

The Centers for Disease Control (CDC) plans to conduct a study to improve understanding of the reasons that individuals do not get screened for colorectal cancer (CRC). CRC is the second leading cause of cancer related death in the U.S. and early screening can prevent deaths, but screening rates are low. Screening for CRC is recommended for adults starting at age 50. However, as of 2008, only 62.9% of adults aged 50–75 years were screened as recommended.

CDC requests OMB approval to pretest and field the Colorectal Cancer Screening Survey, which will collect information on individuals' preferences for different characteristics of CRC screening tests; and how these preferences are affected by CRC risk perceptions, real-life experiences with CRC screening, and exposure to two different fact sheets on CRC screening.

Information collection will involve a Web-based survey. Preferences for screening tests with different attributes will be measured using the stated-preference discrete choice experiment (DCE) survey approach (also known as conjoint analysis). The DCE format presents respondents with choices between hypothetical CRC tests that vary along key attributes. The attributes that will be assessed for CRC screening tests are: (1) What the test can find, (2) how often an individual can take the test, (3) whether the test can remove cancer and polyps (4) preparation before the test, (5), discomfort and activity limitations during and after the test, and (6) cost of the test. Results will be analyzed to quantify the rate at which respondents are willing to trade-off one attribute for another and to rank the importance of attributes and changes in attribute levels. The DCE questions will include the choice of not getting a test to explore the factors that influence the desire to get screening tests. The impact of respondent risk perceptions and experience with CRC screening on preferences for CRC screening tests and willingness to get a test in the future will be tested.

The survey will also collect information to measure the impact of selected educational materials on preferences for CRC screening tests. Each respondent will be randomly assigned to one of three information treatments: (1) A control group that receives no additional information about CRC screening, (2) a treatment group that receives a ''No Excuses'' educational flyer designed to dispel many common reasons for not getting a colonoscopy, or (3) a treatment group that receives a two-page Fact Sheet about CRC and screening options. The flyer and fact sheet were developed in conjunction with CDC's Screen for Life program.

Information will be collected primarily from a sample of 2,000 adults aged 50–75 through a Web-based survey administered by GfK Knowledge Networks (KN). The estimated burden per response is 22–25 minutes. Respondents will be randomly selected from the KN KnowledgePanel®. A pre-test of study procedures will be conducted prior to initiating the main study.

CDC is authorized to conduct this information collection under the Public Health Service Act (42 U.S.C. 241) Section 301. Results from this study will enhance understanding of public preferences for CRC screening tests, and the impact of education materials, risk perceptions, and real-life experiences on CRC screening preferences. Such information will help CDC and other public health policy makers to design, develop, and implement more effective programs to improve rates of CRC screening among average risk individuals.

OMB approval is requested for one year. Participation is voluntary and there are no costs to respondents other than their time. The total estimated burden hours are 812.