

Administration of Children and Families.

**Robert Sargis,**

*Reports Clearance Officer.*

[FR Doc. 2016-08979 Filed 4-18-16; 8:45 am]

**BILLING CODE 4184-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Community Living**

**Agency Information Collection Activities; Submission for OMB Review; Comment Request; State Health Insurance Assistance Program (SHIP) Client Contact Form, Public and Media Activity Report Form, and Resource Report Form**

**AGENCY:** Administration for Community Living, HHS.

**ACTION:** Notice.

**SUMMARY:** The Administration for Community Living (ACL) 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 June 20, 2016.

**ADDRESSES:** Submit written comments on the collection of information by email to [Phillip.Mckoy@acl.hhs.gov](mailto:Phillip.Mckoy@acl.hhs.gov)

**FOR FURTHER INFORMATION CONTACT:** Phillip Mckoy at 202.795.7397 or email: [Phillip.Mckoy@acl.hhs.gov](mailto:Phillip.Mckoy@acl.hhs.gov).

**SUPPLEMENTARY INFORMATION:** In compliance with 44 U.S.C. 3507, ACL has submitted the following proposed collection of information to OMB for review and clearance.

Grantees are required by Congress to provide information for use in program monitoring and for Government Performance and Results Act (GPRA) purposes. This information collection reports Client Contact Form, Public and Media Activity Report Form, and Resource Report Form, which have been used to collect data to evaluate program

effectiveness and improvement. This information is used as the primary method for monitoring the SHIP Projects. ACL estimates the burden of this collection of information as follows: Respondents: 54 SHIP grantees at 18 hours per month (216 hours per year, per grantee). Total Estimated Burden Hours: 11,664 hours per year.

Dated: April 12, 2016.

**Kathy Greenlee,**

*Administrator and Assistant Secretary for Aging.*

[FR Doc. 2016-08958 Filed 4-18-16; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Office of the Secretary**

**[Document Identifier: HHS-OS-0990-New-60D]**

**Agency Information Collection Activities; Proposed Collection; Public Comment Request**

**AGENCY:** Office of the Secretary, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, announces plans to submit a new Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, OS seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

**DATES:** Comments on the ICR must be received on or before June 20, 2016.

**ADDRESSES:** Submit your comments to [Information.CollectionClearance@hhs.gov](mailto:Information.CollectionClearance@hhs.gov) or by calling (202) 690-6162.

**FOR FURTHER INFORMATION CONTACT:** Information Collection Clearance staff, [Information.CollectionClearance@hhs.gov](mailto:Information.CollectionClearance@hhs.gov) or (202) 690-6162.

**SUPPLEMENTARY INFORMATION:** When submitting comments or requesting information, please include the

document identifier HHS-OS-0990-New-60D for reference.

*Information Collection Request Title:* Teen Pregnancy Prevention Tier 1B Design and Implementation Study

*Abstract:* For the TPP Tier 1B Design and Implementation Study, we will document how each of the 50 grantees funded under this grant program are scaling-up efforts to strengthen and expand the reach of evidence-based TPP programs in their respective communities. OAH anticipates that grantees will employ diverse strategies in working within their communities to scale up their initiatives. Because this information collection will contribute to the emerging knowledge base about community-wide efforts to scale up evidence-based programs (EBPs), mobilize community support, and establish linkages to youth-friendly health services at the community level, it will be important to document the variety of grantee approaches and challenges they have encountered as a result of local conditions and strategies. To document these features and experiences, a lead staff member in each grantee organization will be interviewed by phone as well as up to two key grantee partners. Partners to be interviewed will be selected based on the prominence and variety of their roles within each initiative in order to provide multiple perspectives on implementation. To obtain more detail on implementation than can be gathered in a telephone interview, site visits with up to 15 grantees will be conducted to collect data that will illustrate in detail a variety of approaches and strategies for scaling up to the community level evidence-based approaches to teen pregnancy prevention.

*Likely Respondents:* Respondents for telephone interviews will include 50 TPP Tier 1B grantee project directors and 100 implementation partner project directors. Site visit interview participants will include 120 grantee and partner staff members, and 40 Community Advisory Group members. Eighty Youth Leadership Council members will be recruited to participate in 10 focus groups.

**TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS**

Type of respondent	Form name	Number of respondents	Number responses per respondent	Average burden per response (in hours)	Total burden hours
Grantee director (telephone)	Attachment B	50	1	90/60	75
Other grantee staff	Attachment A	60	1	1	60
Partner director (telephone)	Attachment B	100	1	90/60	150
Other partner directors	Attachment A	60	1	1	60
Youth Leadership Council members	Attachment A	80	1	1	80

TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS—Continued

Type of respondent	Form name	Number of respondents	Number responses per respondent	Average burden per response (in hours)	Total burden hours
Community Advisory Group Members .....	Attachment A .....	40	1	1	40
Total .....	.....	390	.....	.....	465

OS specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency's functions, (2) the accuracy of the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be collected, and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**Darius Taylor,**  
*Information Collection Clearance Officer.*  
 [FR Doc. 2016-08975 Filed 4-18-16; 8:45 am]  
**BILLING CODE 4168-11-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Committee on Vital and Health Statistics: Meeting; Privacy, Security & Confidentiality Subcommittee**

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting.

*Name:* National Committee on Vital and Health Statistics (NCVHS), Subcommittee on Privacy, Confidentiality & Security.

*Time and Date:* May 24, 2016, 9:00 a.m.–5:30 p.m. EST; May 25, 2016, 9:00 a.m.–5:15 p.m. EST.

*Place:* U.S. Department of Health and Human Services, Hubert H. Humphrey Building, 200 Independence Avenue, Room 705A, Washington, DC 20201, (202) 690-7100.

*Status:* Open.

*Purpose:* HIPAA sets forth methodologies for de-identifying protected health information (PHI). Once PHI is de-identified, it is no longer subject to the HIPAA rules and can be used for any purpose. The U.S. Department of Health and Human Services (HHS) Services Office for Civil Rights (OCR) issued guidance in 2012, specifying two ways through which a covered entity can determine that health information is de-identified: (1) The Expert Determination Method and (2) the Safe Harbor Method. Much has changed in the health care landscape since that

time, including greater availability and use of “big data.” Concerns have been raised about the sufficiency of the HIPAA de-identification methodologies, the lack of oversight for unauthorized re-identification of de-identified data, and the absence of public transparency about the uses of de-identified data. The purpose of this hearing is to gather industry input on existing guidance and possible limitations of the de-identification methodologies for making recommendations to the Secretary of HHS.

The objectives of this meeting are as follows:

- Increase awareness of current and anticipated practices involving protected health information, such as the sale of information to data brokers and other data-mining companies for marketing and/or risk mitigation activities;
- Understand HIPAA's de-identification requirements in light of these practices, and
- Identify areas where outreach, education, technical assistance, a policy change, or guidance may be useful.

*Contact Person for More Information:* Rebecca Hines, Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Hyattsville, Maryland 20782, telephone (301) 458-4715 or Rachel Seeger, OS/OCR, Room 443D, Department of Health and Human Services, 200 Independence Avenue SW., Washington, DC 20201, Phone: (202) 260-7106. Program information as well as summaries of meetings and a roster of committee members are available on the NCVHS home page of the HHS Web site: <http://www.ncvhs.hhs.gov/>, where further information including an agenda will be posted when available.

Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on 770-488-3204 as soon as possible.

Dated: April 12, 2016.

**James Scanlon,**  
*Deputy Assistant Secretary for Science and Data Policy, Office of the Assistant Secretary for Planning and Evaluation.*

[FR Doc. 2016-09075 Filed 4-18-16; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Office of the Secretary**

[Document Identifier: OMB # 0990-0424-60D]

**Agency Information Collection Activities; Proposed Collection; Public Comment Request**

**AGENCY:** Office of the Assistant Secretary for Health, Office of Adolescent Health, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). The ICR is for revision of the approved information collection assigned OMB control number 0990-0424, which expires on January 31, 2019. Prior to submitting the ICR to OMB, OS seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR. Prior to submitting that ICR to OMB, OS seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

**DATES:** Comments on the ICR must be received on or before June 20, 2016.

**ADDRESSES:** Submit your comments to *Information.CollectionClearance@hhs.gov* or by calling (202) 690-6162.

**FOR FURTHER INFORMATION CONTACT:** Information Collection Clearance staff, *Information.CollectionClearance@hhs.gov* or (202) 690-6162.

**SUPPLEMENTARY INFORMATION:** When submitting comments or requesting information, please include the