

person participation is required by April 6, 2017. The public is welcome to participate during the public comment period, which is tentatively scheduled from 2:40 p.m. to 2:45 p.m. This meeting will also be available by teleconference. Please dial (888) 324-9970 and enter code 32077657.

*Purpose:* The Advisory Committee to the Director, CDC, shall advise the Secretary, HHS, and the Director, CDC, on policy and broad strategies that will enable CDC to fulfill its mission of protecting health through health promotion, prevention, and preparedness. The committee recommends ways to prioritize CDC's activities, improve results, and address health disparities. It also provides guidance to help CDC work more effectively with its various private and public sector constituents to make health protection a practical reality.

*Matters for Discussion:* The Advisory Committee to the Director will receive updates from the State, Tribal, Local and Territorial Subcommittee; the Health Disparities Subcommittee, the Global Workgroup, and the Public Health—Health Care Collaboration Workgroup, as well as an update from the Acting CDC Director.

Agenda items are subject to change as priorities dictate.

*Contact Person for More Information:* Sarah Wiley, MPH, Designated Federal Officer, ACD, CDC, 1600 Clifton Road NE., M/S D-14, Atlanta, Georgia 30329. Telephone (404) 498-6482, Email: [ACDDirector@cdc.gov](mailto:ACDDirector@cdc.gov). The deadline to register for in-person attendance at this meeting is April 6, 2017. To register, please send an email to [ACDDirector@cdc.gov](mailto:ACDDirector@cdc.gov).

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

**Elaine L. Baker,**

*Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).*

[FR Doc. 2017-04618 Filed 3-8-17; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS-1984-14]

#### Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Centers for Medicare & Medicaid Services, Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. 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 or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**DATES:** Comments must be received by May 8, 2017.

**ADDRESSES:** When commenting, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. *Electronically.* You may send your comments electronically to <http://www.regulations.gov>. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments.

2. *By regular mail.* You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number \_\_\_\_\_, Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following:

1. Access CMS' Web site address at <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html>.

2. Email your request, including your address, phone number, OMB number, and CMS document identifier, to [Paperwork@cms.hhs.gov](mailto:Paperwork@cms.hhs.gov).

3. Call the Reports Clearance Office at (410) 786-1326.

**FOR FURTHER INFORMATION CONTACT:** Reports Clearance Office at (410) 786-1326.

#### SUPPLEMENTARY INFORMATION:

##### Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

##### CMS-1984-14 Hospital Facility Cost Report

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. The term "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 requires federal agencies to publish a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice.

##### Information Collection

1. *Type of Information Collection Request:* Reinstatement of a previously approved collection; *Title of Information Collection:* Hospital Facility Cost Report; *Use:* Providers of services participating in the Medicare program are required under §§ 1815(a), 1833(e), and 1861(v)(1)(A) of the Social Security Act (42 U.S.C. 1395g) to submit annual information to determine costs for health care services rendered to Medicare beneficiaries. In addition,

regulations at 42 CFR 413.20, 413.24 and 418.310 require adequate cost data and cost reports from providers on an annual basis. The Form CMS–1984–14 cost report is needed to determine a provider’s reasonable costs incurred in furnishing medical services to Medicare beneficiaries. The data is used by CMS to calculate: Market basket weight and the labor related shares, Rate setting and payment refinement, and Medicare and total facility margins for Medicare-covered services by type of service. *Form Number:* CMS–1984–14 (OMB Control Number: 0938–0758); *Frequency:* Annually; *Affected Public:* Private sector—Business or other for-profit and Not-for-profit institutions; *Number of Respondents:* 3,545; *Total Annual Responses:* 3,545; *Total Annual Hours:* 666,460. (For policy questions regarding this collection contact Yaakov Feinstein at 410–786–3137.)

Dated: March 3, 2017.

**William N. Parham, III,**

*Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.*

[FR Doc. 2017–04577 Filed 3–8–17; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Office of the Secretary**

[Document Identifier HHS–OS–0990–New–30D]

**Agency Information Collection Activities; Proposals, Submissions, and Approvals**

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

**ACTION:** Notice.

**SUMMARY:** In compliance with section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, has submitted an

Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB) for review and approval. The ICR is for a new collection. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public on this ICR during the review and approval period.

**DATES:** Comments on the ICR must be received on or before April 10, 2017.

**ADDRESSES:** Submit your comments to *OIRA\_submission@omb.eop.gov* or via facsimile to (202) 395–5806.

**FOR FURTHER INFORMATION CONTACT:** Information Collection Clearance staff, *Information.Collection.Clearance@hhs.gov* or (202) 690–5683.

**SUPPLEMENTARY INFORMATION:** When submitting comments or requesting information, please include the Information Collection Request Title and document identifier 0990–New–30D for reference.

*Information Collection Request Title:* Domestic Violence Housing First Demonstration Evaluation.

*Abstract:* The Office of the Assistant Secretary for Planning and Evaluation (ASPE) within the U.S. Department of Health and Human Services, in partnership with the Office for Victims of Crimes within the U.S. Department of Justice, is seeking approval by OMB for a new information collection request entitled, “Domestic Violence Housing First (DVHF) Demonstration Evaluation.” The Washington State Coalition Against Domestic Violence (WSCADV) is overseeing and coordinating an evaluation of the DVHF Demonstration project through a contract with ASPE. This quasi-experimental research study involves longitudinally examining the program effects of DVHF on domestic violence survivors’ safety and housing stability. The findings will be of interest to the general public, to policy-makers, and to

organizations working with domestic violence survivors.

Data collection will include in-depth, private interviews with 320 domestic violence survivors conducted by trained professional staff. At Time 1 study enrollment, they will be interviewed about their backgrounds, housing and safety obstacles, and services desired. There will be three follow-up interviews with them every six months after the Time 1 Interview (*i.e.*, 6, 12, and 18 months) to examine the match between needs and services, as well as their safety and housing stability. Study enrollment will take place over 15 months, so the annualized burden for the Time 1 and follow-up surveys is based on 12/15 (256) of the expected sample (320).

The primary service providers working with the domestic violence survivors will complete self-administered online questionnaires to provide more detailed program implementation data. Service providers will complete a survey about their work history and demographics and a survey about the services provided for each domestic violence survivor in their caseload that is a participant in the study (approximately 16 survivors per provider). This latter data collection will occur six months after a domestic violence survivor enrolls in the study over 15 months to correspond to the study enrollment period. Finally, the study will also include monthly data collection for 19 months from an agency point of contact (POC) in order to verify agency information (*e.g.*, the number of advocates working in the agency, advocate caseloads, dates of study participants’ receipt of services).

*Likely Respondents:* The respondents are domestic violence survivors, primary service providers, and community agency points of contact who work with their agency data systems.

**ANNUALIZED REPORTING BURDEN ON STUDY PARTICIPANTS**

Form name	Type of respondent	Annual number of respondents	Number of responses per respondent	Average burden hours per response	Total annual burden hours
Time 1 (Baseline) Interview .....	Domestic violence survivors .....	256	1	1	256
Follow-up Interviews .....	Domestic violence survivors .....	256	2	1	512
Online survey about advocates’ work history and demographics.	Victim service advocates .....	20	1	15/60	5
Online survey of advocates’ work with survivors.	Victim service advocates .....	20	13	20/60	86
Form for community agency points of contact to verify agency information (monthly).	Community agency point of contact	4	12	15/60	12
Total .....	.....	.....	.....	.....	871