

C. Public Comments

Public comments are particularly invited on: Whether this collection of information is necessary for the proper performance of functions of the FAR, and whether it will have practical utility; whether our estimate of the public burden of this collection of information is accurate, and based on valid assumptions and methodology; ways to enhance the quality, utility, and clarity of the information to be collected; and ways in which we can minimize the burden of the collection of information on those who are to respond, through the use of appropriate technological collection techniques or other forms of information technology.

Obtaining Copies of Proposals: Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat Division (MVCB), 1800 F Street NW., Washington, DC 20405, telephone 202-501-4755. Please cite OMB Control No. 9000-0179, Service Contracts Reporting Requirements, in all correspondence.

Dated: August 16, 2017.

Lorin S. Curit,

Director, Federal Acquisition Policy Division, Office of Governmentwide Acquisition Policy, Office of Acquisition Policy, Office of Governmentwide Policy.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-17-0739]

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. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395-5806. Written comments are due within 30 days of this notice.

Proposed Project

CDC Oral Health Management Information System (OMB Control Number 0920-0739, expiration date 5/31/2017)—Reinstatement with Change. Division of Oral Health (DOH), National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The CDC works with state health departments to improve the oral health

of the nation. Targeted efforts include building and/or maintaining an effective public health capacity for the implementation, evaluation, and dissemination of evidence-based practices in oral health disease prevention and advancement of oral health. Through a cooperative agreement program (Program Announcement DP13-1307), CDC has provided funding to 21 states over a 5-year period. This cooperative agreement went into effect in September 2013 and builds upon previously funded collaborations between CDC and state-based oral health programs.

Currently, CDC does not have approval to collect annual progress and activity reports from state-based oral health programs using the Chronic Disease Management Information System (CDMIS). The information collected in the Management Information System (MIS) improves CDC's ability to disseminate information about successful public health approaches that are potentially replicable and adaptable for use in other states.

CDC requests a reinstatement with change to continue collecting information for two additional years. The estimated burden decreased from 255 to 171 hours as programs no longer have to repeat the initial entry of administrative data after the first year. The estimated burden for system maintenance and annual reporting is three hours for Basic-level awardees. The estimated burden for system maintenance and annual reporting is nine hours for Enhanced-level awardees. State awardees submit reports to CDC annually; however, states may enter updates in the MIS at any time.

CDC collects all information electronically and uses this information to monitor awardee activities and to provide any needed technical assistance or follow-up support.

There are no costs to respondents other than their time. The total estimated annualized burden hours are 171.

ESTIMATED ANNUALIZED BURDEN OF HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Program Awardees Basic Level	Annual Progress Report	3	1	3
Program Awardees Enhanced Level	Annual Progress Report	18	1	9

Leroy A. Richardson,

Chief, Information Collection Review Office,
Office of Scientific Integrity, Office of the
Associate Director for Science, Office of the
Director, Centers for Disease Control and
Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-17-0214; Docket No. CDC-2017-
0063]

Proposed Data Collection Submitted for Public Comment and Recommendations

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

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease
Control and Prevention (CDC), as part of
its continuing effort to reduce public
burden and maximize the utility of
government information, invites the
general public and other Federal
agencies to take this opportunity to
comment on proposed and/or
continuing information collections, as
required by the Paperwork Reduction
Act of 1995. This notice invites
comment on the National Health
Interview Survey (NHIS). The annual
National Health Interview Survey is a
major source of general statistics on the
health of the U.S. population.

DATES: Written comments must be
received on or before October 20, 2017.

ADDRESSES: You may submit comments,
identified by Docket No. CDC-2017-
0063 by any of the following methods:

- *Federal eRulemaking Portal:*
Regulations.gov. Follow the instructions
for submitting comments.

- *Mail:* Leroy A. Richardson,
Information Collection Review Office,
Centers for Disease Control and
Prevention, 1600 Clifton Road NE., MS-
D74, Atlanta, Georgia 30329.

Instructions: All submissions received
must include the agency name and
Docket Number. All relevant comments
received will be posted without change
to *Regulations.gov*, including any
personal information provided. For
access to the docket to read background
documents or comments received, go to
Regulations.gov.

*Please note: All public comment
should be submitted through the
Federal eRulemaking portal
(regulations.gov) or by U.S. mail to the
address listed above.*

FOR FURTHER INFORMATION CONTACT: To
request more information on the
proposed project or to obtain a copy of
the information collection plan and
instruments, contact Leroy A.
Richardson, Information Collection
Review Office, Centers for Disease
Control and Prevention, 1600 Clifton
Road NE., MS-D74, Atlanta, Georgia
30329; phone: 404-639-7570; Email:
omb@cdc.gov.

SUPPLEMENTARY INFORMATION: Under the
Paperwork Reduction Act of 1995 (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. In addition, the PRA also
requires Federal agencies to provide a
60-day notice in the **Federal Register**
concerning each proposed collection of
information, including each new
proposed collection, each proposed
extension of existing collection of
information, and each reinstatement of
previously approved information
collection before submitting the
collection to OMB for approval. To
comply with this requirement, we are
publishing this notice of a proposed
data collection as described below.

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 collection of information; (c)
ways to enhance the quality, utility, and
clarity of the information to be
collected; (d) ways to minimize the
burden of the collection of information
on respondents, including through the
use of automated collection techniques
or other forms of information
technology; and (e) estimates of capital
or start-up costs and costs of operation,
maintenance, and purchase of services
to provide information. Burden means
the total time, effort, or financial
resources expended by persons to
generate, maintain, retain, disclose or
provide information to or for a Federal
agency. This includes the time needed
to review instructions; to develop,
acquire, install and utilize technology
and systems for the purpose of
collecting, validating and verifying
information, processing and
maintaining information, and disclosing
and providing information; to train
personnel and to be able to respond to
a collection of information, to search
data sources, to complete and review
the collection of information; and to
transmit or otherwise disclose the
information.

Proposed Project

National Health Interview Survey
(NHIS) (OMB Control No. 0920-0124,
Exp. 12/31/2019)—Revision—National
Center for Health Statistics (NCHS),
Centers for Disease Control and
Prevention (CDC).

Background and Brief Description

Section 306 of the Public Health
Service (PHS) Act (42 U.S.C.), as
amended, authorizes that the Secretary
of Health and Human Services (HHS),
acting through NCHS, shall collect
statistics on the extent and nature of
illness and disability of the population
of the United States.

The annual National Health Interview
Survey (NHIS) is a major source of
general statistics on the health of the
U.S. population and has been in the
field continuously since 1957. This
voluntary and confidential household-
based survey collects demographic and
health-related information from a
nationally-representative sample of
households and noninstitutionalized,
civilian persons throughout the country.
NHIS data have long been used by
government, academic, and private
researchers to evaluate both general
health and specific issues, such as
smoking, diabetes, health care coverage,
and access to health care. The survey is
also a leading source of data for the
Congressionally-mandated "Health US"
and related publications, as well as the
single most important source of
statistics to track progress toward
Departmental health objectives.

The 2018 NHIS questionnaire remains
largely unchanged from its 2017
version, with the exception of new
supplements that are being added on
asthma and cancer control. These
supplements replace those from 2017 on
receipt of culturally and linguistically
appropriate health care services,
epilepsy, cognitive disability,
complementary health, hepatitis B/C
screening, vision, and heart disease and
stroke prevention. Continuing from
2017 are questions about access to and
utilization of care and barriers to care,
chronic pain, diabetes, disability and
functioning, family food security, ABCS
of heart disease and stroke prevention,
immunizations, smokeless tobacco and
e-cigarettes, and children's mental
health.

In addition, in the last quarter of
2018, a portion of the regular 2018 NHIS
sample will be used to carry out a dress
rehearsal and systems test of the
redesigned NHIS questionnaire that is
scheduled for launch in January 2019.
The redesigned questionnaire revises
the NHIS both in terms of content and