DEPARTMENT OF DEFENSE

GENERAL SERVICES ADMINISTRATION

NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

[OMB Control No. 9000–0079; Docket No. 2022–0053; Sequence No. 6]

Submission for OMB Review; Travel Costs

AGENCY: Department of Defense (DOD), General Services Administration (GSA), and National Aeronautics and Space Administration (NASA).

ACTION: Notice.

SUMMARY: Under the provisions of the Paperwork Reduction Act, the Regulatory Secretariat Division has submitted to the Office of Management and Budget (OMB) a request to review and approve an extension of a previously approved information collection requirement regarding travel costs.

DATES: Submit comments on or before May 26, 2022.

ADDRESSES: Written comments and recommendations for this information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting “Currently under Review—Open for Public Comments” or by using the search function.

Additionally, submit a copy to GSA through https://www.regulations.gov and follow the instructions on the site. This website provides the ability to type short comments directly into the comment field or attach a file for longer comments.

Instructions: All items submitted must cite OMB Control No. 9000–0079, Travel Costs. Comments received generally will be posted without change to https://www.regulations.gov, including any personal and/or business confidential information provided. To confirm receipt of your comment(s), please check www.regulations.gov, approximately two-to-three days after submission to verify posting. If there are difficulties submitting comments, contact the GSA Regulatory Secretariat Division at 202–501–4755 or GSARegSec@gsa.gov.

FOR FURTHER INFORMATION CONTACT: Zenaida Delgado, Procurement Analyst, at telephone 202–969–7207, or zenaida.delgado@gsa.gov.

SUPPLEMENTARY INFORMATION:

A. OMB Control Number, Title, and any Associated Form(s)

9000–0079, Travel Costs.

B. Need and Uses

This justification supports an extension of OMB Control No. 9000–0079. This clearance covers the information that contractors must submit to comply with the following Federal Acquisition Regulation (FAR) requirements:

1. FAR 31.205–46(a)(3)—In special or unusual situations, costs incurred by a contractor for lodging, meals, and incidental expenses, may exceed the per diem rates in effect as set forth in the Federal Travel Regulation (FTR) for travel in the contiguous 48 United States. The actual costs may be allowed only if the contractor provides the following:

   a. FAR 31.205–46(a)(3)(ii)—A written justification for use of the higher amounts approved by an officer of the contractor’s organization or designee to ensure that the authority is properly administered and controlled to prevent abuse.

   b. FAR 31.205–46(a)(3)(iii)—Advance approval from the contracting officer if it becomes necessary to exercise the authority to use the higher actual expense method repetitively or on a continuing basis in a particular area.

   c. FAR 31.205–46(a)(3)(iv)—Documentation to support actual costs incurred including a receipt for each expenditure of $75.00 or more.

2. FAR 31.205–46(c) requires firms to maintain and make available manifest/logs for all flights on company aircraft. As a minimum, the manifest/log must indicate:

   a. Date, time, and points of departure;

   b. Destination, date, and time of arrival;

   c. Name of each passenger and relationship to the contractor;

   d. Authorization for trip; and

   e. Purpose of trip.

The information required by (2)(a) and (b) and the name of each passenger (required by (2)(c)) are recordkeeping requirements already established by Federal Aviation Administration regulations. This information, plus the additional required information, is needed to ensure that costs of owned, chartered, or leased aircraft are properly charged against Government contracts and that directly associated costs of unallowable activities are not charged to Government contracts.

The contracting officer will use the information to ensure that the Government does not reimburse contractors for excessive travel costs.

Also, the information is used by Government auditors to identify allowable and unallowable costs under Government contracts.

C. Annual Burden

Respondents/Recordkeepers: 3,743.

Total Annual Responses: 33,202.

Total Burden Hours: 11,472. (7,848 reporting hours + 3,624 recordkeeping hours).

D. Public Comment

A 60-day notice was published in the Federal Register at 87 FR 9356, on February 18, 2022. No comments were received.

Obtaining Copies: Requesters may obtain a copy of the information collection documents from the GSA Regulatory Secretariat Division by calling 202–501–4755 or emailing GSARegSec@gsa.gov. Please cite OMB Control No. 9000–0079, Travel Costs.

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

[FR Doc. 2022–08850 Filed 4–25–22; 8:45 am]

BILLING CODE 6820–EP–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC–2022–0055; NIOSH–348]

World Trade Center Health Program; Request for Information

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

ACTION: Request for information.

SUMMARY: The National Institute for Occupational Safety and Health (NIOSH) within the Centers for Disease Control and Prevention (CDC), an Operating Division of the Department of Health and Human Services (HHS), is soliciting public comment on the scope of an upcoming notice of funding opportunity (NOFO) for FY2023. The scope of the NOFO is the World Trade Center (WTC) Health Program’s research interests in lifestyle medicine (such as sustainable health behaviors and lifestyle interventions) used to optimize management and improve outcomes of WTC-related health conditions. The WTC Health Program’s research program helps answer critical questions about potential WTC-related physical and mental health conditions as well as
diagnosing and treating health conditions on the List of WTC-Related Health Conditions.

DATES: Comments must be received by May 26, 2022.

ADDRESSES: Comments may be submitted through either of the following methods:
- Federal eRulemaking Portal: http://www.regulations.gov (follow the instructions for submitting comments), or

Instructions: All written submissions received in response to this notice must include the agency name (Centers for Disease Control and Prevention, HHS) and docket number (CDC–2022–0055; NIOSH–348) for this action. All relevant comments, including any personal information provided, will be posted without change to http://www.regulations.gov. Do not submit comments by email. CDC does not accept comments by email.

FOR FURTHER INFORMATION CONTACT:
Rachel Weiss, Program Analyst, 1090 Tusculum Avenue, MS: C–46, Cincinnati, Ohio 45226; Telephone: (404) 498–2500 (this is not a toll-free number); Email: NIOSHregs@cdc.gov.

SUPPLEMENTARY INFORMATION: Title I of the James Zadroga 9/11 Health and Compensation Act of 2010 (Pub. L. 111–347, as amended by Pub. L. 114–113 and Pub. L. 116–59), added Title XXXIII to the Public Health Service (PHS) Act, 1 establishing the WTC Health Program within HHS. The WTC Health Program provides medical monitoring and treatment benefits for certified health conditions on the List of WTC-Related Health Conditions 2 to eligible firefighters and related personnel, law enforcement officers, and rescue, recovery, and cleanup workers who responded to the September 11, 2001, terrorist attacks in New York City, at the Pentagon, and in Shanksville, Pennsylvania (responders). The Program also provides benefits to eligible persons who were present in the dust or dust cloud on September 11, 2001, or who worked, resided, or attended school, childcare, or adult daycare in the New York City disaster area (survivors).

The Zadroga Act also requires that the Program establish a research program on health conditions resulting from the September 11, 2001, terrorist attacks, addressing the following topics:
- Physical and mental health conditions that may be related to the September 11, 2001, terrorist attacks;
- Diagnosing WTC-related health conditions for which there have been diagnostic uncertainty; and
- Treating WTC-related health conditions for which there have been treatment uncertainty.

Request for Information
Lifestyle medicine is a highly valuable, evidence-informed clinical approach focused on managing and reversing many of the types of chronic diseases certified by the WTC Health Program. By focusing on sustainable health behaviors and lifestyle factors, including six pillars—nutrition and diet, sleep hygiene, stress management and positive psychology, physical activity, social connectedness, and avoidance of substance misuse—lifestyle medicine has the potential to limit disease progression, to prevent development of additional chronic diseases, and to improve health outcomes, overall member well-being, quality of life, and member satisfaction with the Program.

To establish the scope of the WTC Health Program FY2023 lifestyle medicine research, NIOSH seeks to achieve a suitable mix of projects and interventions focusing on sustainable health behaviors and the lifestyle factors, described above. All these influence quality of life, disease progression and recurrence, survival, adverse events, and other health-related outcomes among WTC Health Program members. Specifically, NIOSH seeks input on the following questions pertaining to WTC Health Program research priorities:

(1) What are the primary lifestyle research needs of both responders and survivors?
(2) What are the primary health outcomes associated with WTC-related health conditions that lifestyle research interventions should target?
(3) What are the most important lifestyle factors (e.g., nutrition and diet, sleep hygiene, stress management and positive psychology, physical activity, social connectedness, cognitive function, and avoidance of substance misuse) that need to be addressed within the scope of the research solicitation?

John J. Howard,
Administrator, World Trade Center Health Program and Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, Department of Health and Human Services.

[FR Doc. 2022–08817 Filed 4–25–22; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers: CMS–10409]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on OMB’s intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (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 a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate 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 on the collection(s) of information must be received by the OMB desk officer by May 26, 2022.

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting “Currently under 30-day Review—Open