Security Administration (EBSA) is requesting Office of Management and Budget (OMB) approval on a new collection to conduct a survey on employers to learn about their experiences and attitudes regarding workplace wellness programs. ASPE will use the employers' experience to assess the effectiveness and impact of workplace wellness programs, as well as identify best practices and lessons learned in program implementation with a particular focus on the use of incentives. As part of the study, a one-time, self-administered survey will be administered to 3,000 employers selected from the Dun & Bradstreet database, a comprehensive listing of private companies and government agencies in the U.S. The survey will assess prevalence and type of wellness programs as well as the use of employee incentives. The survey design and content is informed by a review of the literature on the characteristics, prevalence and impact of workplace wellness programs. Data collection will also include employee focus groups and key informant semi-structured interviews at each of 4 employer sites that will inform in-depth case studies of those employers. The focus groups will consist of 12 employees and will be conducted to get the end-user perspective on the impact and effectiveness of the wellness program. The key informant interviews will be carried out with 5 wellness leaders at each employer, and will gather information on employer background, health insurance and wellness programs offered, and anticipated changes due to the Affordable Care Act. Data collection activities will be completed within 18 months of OMB Clearance.

ESTIMATE OF ANNUALIZED TIME BURDEN TO RESPONDENTS

Forms	Type of respondent	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Survey	Human Resource Manager	3,000	1	30/60	1,500
Focus Group Protocol	Employees in All Occupations	48	1	1.5	72
Key Informant Interview Script	Human Resource Manager	20	1	45/60	15
Total					1,587

Mary Forbes,

Paperwork Reduction Act Clearance Officer, Office of the Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-11–11IN]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404–639–5960 or send comments to Daniel Holcomb, CDC Reports Clearance Officer, 1600 Clifton Road, MS D–74, Atlanta, GA 30333 or send an e-mail to *omb@cdc.gov.*

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; and (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. Written comments should be received within 60 days of this notice.

Proposed Project

Testing and Evaluation of Tobacco Communication Activities—New National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Tobacco use remains the leading preventable cause of death in the United States, causing over 443,000 deaths each year and resulting in an annual cost of more than $96 billion in direct medical expenses. The only proven strategy for reducing the risk of tobacco-related morbidity and mortality is to never smoke, or to quit if tobacco use has been initiated.

Within the Centers for Disease Control and Prevention (CDC), the Office on Smoking and Health (OSH) serves as a primary resource of tobacco and health information for the public, health professionals, various branches of government, and other interested groups. OSH distributes tobacco-related health communications using a wide array of formats and media channels, conducts formative research to develop and test tobacco-related communications, and evaluates the effectiveness of messages and campaigns. OSH employs a strategic and systematic approach to the design and evaluation of high-quality health messages and campaigns, by applying scientific methods to the development of health messages, obtaining input from public health partners, and pre-testing with target audiences.

Recent legislative developments highlight the importance of tobacco control—and appropriate tobacco control messages—in efforts to improve the nation's health. These developments include the Prevention and Public Health Fund, established by the Affordable Care Act (ACA), which supports initiatives designed to reduce the health and financial burden of tobacco use through prevention and cessation approaches. An essential component of this initiative is a national campaign to increase awareness of the health consequences of tobacco use and exposure to secondhand smoke. OSH is primarily responsible for planning, implementing, and evaluating the campaign.

CDC requests OMB approval of a new, generic clearance mechanism to support information collection for the development, implementation and evaluation of tobacco-related health messages and campaigns. The proposed generic mechanism will establish a

unified clearance framework for a broad array of tobacco-related communication activities, which may occur on an as-needed basis, or in the context of a coordinated series of activities. A generic clearance is needed to support the breadth, flexibility and time-sensitivity of information collections required to execute and evaluate the upcoming ACA-funded tobacco communication campaign, and to support OSH's ongoing programmatic needs, including materials development and testing for the Media Campaign Research Center.

Information will be collected through a variety of strategies including in-person focus groups, online focus groups, computer-assisted, in-person, or telephone interviews, and online surveys of variable length (short, medium, in-depth). The average burden per response is expected to range from 6–25 minutes for online surveys, and from 1–1.5 hours for interviews and focus groups. CDC will request OMB approval for each data collection activity through submission of a specific Information Collection Request that describes its purpose, use, methodology, and impact on affected respondents. The information will be used to improve the clarity, salience, appeal, and persuasiveness of messages and campaigns supporting OSH's mission. CDC's authority to collect information for public health purposes is provided by the Public Health Service Act (41 U.S.C. 241) Section 301.

Approval of the generic mechanism is requested for three years. Participation is voluntary. There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hr)	Total burden (in hr)
General Public or Target Population	Focus Group	160	1	1.5	240
	Online Focus Group	120	1	1	120
	Interviews	67	1	1	67
	Short Online Surveys	8,001	1	6/60	800
	Medium Online Surveys	13,334	1	25/60	5,556
	In-depth Online Surveys	1,292	1	1	1,292
					8,075

Catina Conner,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–11–0006]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–5960 or send an e-mail to *omb@cdc.gov.* Send written comments to 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

Statements in Support of Application of Waiver of Inadmissibility (0920–0006) exp. 12/31/2011—Revision—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Section 212(a)1) of the Immigration and Nationality Act states that aliens with specific health related conditions are ineligible for admission into the United States. The Attorney General may waive application of this inadmissibility on health-related grounds if an application for waiver is filed and approved by the U.S. Citizenship and Immigration Services office of the Department of Homeland Security having jurisdiction. CDC uses this application primarily to collect information to establish and maintain records of waiver applicants in order to notify the U.S. Citizenship and Immigration Services when terms, conditions and controls imposed by waiver are not met. CDC is requesting approval from OMB to collect this data for another 3 years. There are no costs to respondents except their time to complete the application. The annualized burden for this data collection is 100 hours.

ESTIMATE OF ANNUALIZED BURDEN HOURS

Form	No. of responses	No. of responses per respondent	Average burden per response (in hours)
Form CDC 4.422–1	200	1	10/60
Form CDC 4.422–1a	200	1	20/60