Date: October 16, 2013 (Open from 8:00 a.m. to 8:30 a.m. on October 16 and closed for remainder of the meeting)

3. *Health Care Research and Training (HCRT)*

Date: October 17–18, 2013 (Open from 8:00 a.m. to 8:30 a.m. on on October 17 and closed for remainder of the meeting)

4. *Healthcare Safety and Quality Improvement Research (HSQR)*

Date: October 23–24, 2013 (Open from 8:00 a.m. to 8:30 a.m. on October 23 and closed for remainder of the meeting)

5. *Healthcare Information Technology Research (HITR)*

Date: October 31—November 1, 2013 (Open from 8:00 a.m. to 8:30 a.m. on October 31 and closed for remainder of the meeting)

**ADDRESSESS:** The five meetings will take place at the following location: Hyatt Regency Hotel Bethesda, One Metro Center, Bethesda, MD 20814.

**FOR FURTHER INFORMATION CONTACT:** (To obtain a roster of members, agenda or minutes of the non-confidential portions of the meetings.) Mrs. Bonnie Campbell, Committee Management Officer, Office of Extramural Research Education and Priority Populations, AHRQ, 540 Gaither Road, Suite 2000, Rockville, Maryland 20850, Telephone (301) 427–1554.

**SUPPLEMENTARY INFORMATION:** In accordance with section 10(a)(2) of the Federal Advisory Committee Act (5 U.S.C. App. 2), AHRQ announces meetings of the scientific peer review groups listed above, which are subcommittees of AHRQ's Health Services Research Initial Review Group Committee. Each subcommittee meeting will commence in open session before closing to the public for the duration of the meeting. The subcommittee meetings will be closed to the public in accordance with the provisions set forth in 5 U.S.C. App. 2 section 10(d), 5 U.S.C. 552b(c)(4), and 5 U.S.C. 552b(c)(6) The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Agenda items for these meetings are subject to change as priorities dictate.

Dated: September 25, 2013.

**Richard Kronick,**

*Director.*

[FR Doc. 2013–24178 Filed 10–2–13; 8:45 am]

**BILLING CODE 4160–90–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Healthcare Research and Quality

### Correction—Scientific Information Request on Medication Therapy Management

The original date of publication for this **Federal Register** notice was September 17, 2013, 78 FR 57159. On this publication, the Web site that appears under **ADDRESSES** is incorrect in page 57159. The correct Web site is: *http://effectivehealthcare.AHRQ.gov/index.cfm/submit-scientific-information-packets/*

Dated: September 27, 2013.

**Richard Kronick,**

*AHRQ Director.*

[FR Doc. 2013–24182 Filed 10–2–13; 8:45 am]

**BILLING CODE 4160–90–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

**[60Day–13–0787]**

### 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 404–639–7570 or send comments to LeRoy Richardson, at CDC 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an email 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**

Personal Flotation Devices (PFDs) and Commercial Fishermen: Preconceptions and Evaluation in Actual Use—Reinstatement with Change—(OMB Number 0920–0787, expiration date 8/31/2010) National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

NIOSH has the responsibility under Pub. L. 91–596 section 20 (Occupational Safety and Health Act of 1970) to conduct research relating to innovative methods, techniques, and approaches for dealing with occupational safety and health problems.

Commercial fishing is one of the most dangerous occupations in the United States, with a fatality rate 30 times higher than the national average. Most fishermen who die on the job drown subsequent to a vessel sinking (52%) or fall overboard (31%). Because drowning is the leading cause of death for commercial fishermen, its prevention is one of the highest priorities for those who work to make the industry safer.

The risk of drowning for commercial fisherman is high, yet most fishermen do not wear Personal Flotation Devices (PFDs) while on deck. Of the 182 fishermen who died from falls overboard between 2000 and 2011 none of them were wearing a personal flotation device (PFD). Many were within minutes of being rescued when they lost their strength and disappeared under the surface of the water.

NIOSH recently conducted a study to establish a baseline understanding of Alaska fishermen's perceptions of risk, safety attitudes, and beliefs about PFDs; and to evaluate a variety of modern PFDs with commercial fishermen to discover the features and qualities that they like and dislike. Based upon these results, NIOSH developed an intensive risk communication strategy to raise awareness to newer (potentially more satisfactory) PFD models, to address barriers, and to encourage increased PFD use among fishermen working in Alaska.

The purpose of this study is to first, determine if fishermen's perception of risk, safety attitudes, and beliefs about PFDs has shifted or remained the same since the implementation of the initial survey (2008–2009); and second, to evaluate the effectiveness of the NIOSH intensive risk communication intervention.

NIOSH is requesting Office of Management and Budget (OMB) approval to administer a survey to fishermen operating in Alaska fisheries. This questionnaire will contain questions that measure fishermen's risk perceptions, safety attitudes, and beliefs about PFDs, as well as recognition and influence of NIOSH risk communication activities. The questionnaire will take approximately 20 minutes to complete. Consistent with the previous OMB-approved data collection protocol, the sample size was determined to be 400 total respondents to achieve a 95% confidence level. Two hundred independent respondents will be sampled just prior to the 2014 season and an additional two hundred will be sampled just prior to the 2015 season.

This study has the potential to greatly benefit the fishing industry. As a result of previous research, NIOSH has gained a baseline understanding of fishermen's reasons for not wearing PFDs. With this empirical data at hand, an intensive risk communication intervention has been developed to address fishermen's concerns and remove the barriers that are currently in place.

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 hrs) | Total burden (in hrs) |
|---|---|---|---|---|---|
| Fishermen (2014 fishing season) | PFD Survey | 200 | 1 | 20/60 | 67 |
| Fishermen (2015 fishing season) | PFD Survey | 200 | 1 | 20/60 | 67 |
| Total | | | | | 134 |

**Leroy 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 (CDC).*

[FR Doc. 2013–24244 Filed 10–2–13; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

**[Document Identifiers CMS–10484, CMS–R–39 and CMS–10471]**

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

**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 (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 any of the following subjects: (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.

**DATES:** Comments on the collection(s) of information must be received by the OMB desk officer by November 4, 2013.

**ADDRESSES:** When commenting on the proposed information collections, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be received by the OMB desk officer via one of the following transmissions: OMB, Office of Information and Regulatory Affairs, Attention: CMS Desk Officer, Fax Number: (202) 395–6974 *OR* Email: *OIRA_submission@omb.eop.gov.*

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 *http://www.cms.hhs.gov/PaperworkReductionActof1995.*

2. Email your request, including your address, phone number, OMB number, and CMS document identifier, to *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:** 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. 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 (44 U.S.C. 3506(c)(2)(A)) requires federal agencies to publish a 30-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 that summarizes the following proposed collection(s) of information for public comment:

1. *Type of Information Collection Request:* New collection (Request for a new OMB control number); *Title of Information Collection:* End Stage Renal Disease (ESRD) Application Access Request Form; *Use:* We are developing a new suite of systems to support the End Stage Renal Disease (ESRD) program. Due to the sensitivity of the data being collected and reported, we must ensure that only authorized personnel have access to data. Personnel are given access to the ESRD systems through the creation of user IDs and passwords within the QualityNet Identity Management System (QIMS); however, once within the system, the system determines the rights and privileges the personnel has over the data within the system. Such access rights include: Viewing and reporting, updating adding and deleting.

The sole purpose of the ESRD Application Access Request Form is to