- 66. Mary Swearer, Washington, District of Columbia, Court of Federal Claims No: 18–0289V
- 67. Pamela Vardine, Schenectady, New York, Court of Federal Claims No: 18–0290V
- 68. Gary Smallwood, Washington, District of Columbia, Court of Federal Claims No: 18–0291V
- 69. Tammie Perry on behalf of J. P., Boston, Massachusetts, Court of Federal Claims No: 18–0294V
- 70. Kevin Sparrow and Danielle Sparrow on behalf of L. S., Bay View, Wisconsin, Court of Federal Claims No: 18–0295V
- 71. Ekaterina Kovtun, Brooklyn, New York, Court of Federal Claims No: 18–0296V
- 72. Cheryll Golden, Sebastian, Florida, Court of Federal Claims No: 18– 0297V
- 73. Caroline Walker, Boston, Massachusetts, Court of Federal Claims No: 18–0299V
- 74. Diana Songero, Boston, Massachusetts, Court of Federal Claims No: 18–0300V
- 75. Kristen Moorby, Collingswood, New Jersey, Court of Federal Claims No: 18–0301V
- 76. Dana Broussard, Boston, Massachusetts, Court of Federal Claims No: 18–0302V
- 77. Danny Mitchell, Dresher, Pennsylvania, Court of Federal Claims No: 18–0303V
- Herman Hogge, Sarasota, Florida, Court of Federal Claims No: 18– 0304V
- 79. Cynthia Collins, Beverly Hills, California, Court of Federal Claims No: 18–0305V
- 80. Carolyn Hedrick, Greensboro, North Carolina, Court of Federal Claims No: 18–0307V
- 81. Joseph Zulaski, Beverly Hills, California, Court of Federal Claims No: 18–0309V
- [FR Doc. 2018–06522 Filed 3–29–18; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request; Rural Health Network Development Program, OMB No. 0906– 0010—Revision

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services. **ACTION:** Notice.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, HRSA has submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period.

DATES: Comments on this ICR should be received no later than April 30, 2018.

ADDRESSES: Submit your comments, including the ICR Title, to the desk officer for HRSA, either by email to *OIRA_submission@omb.eop.gov* or by fax to 202–395–5806.

FOR FURTHER INFORMATION CONTACT: To request a copy of the clearance requests submitted to OMB for review, email Lisa Wright-Solomon, the HRSA Information Collection Clearance Officer at *paperwork@hrsa.gov* or call (301) 443–1984.

SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Rural Health Network Development Program OMB No. 0906–0010— Revision.

Abstract: The purpose of the Rural Health Network Development (RHND) program is to support mature, integrated rural health care networks that have combined the functions of the entities participating in the network in order to address the health care needs of the targeted rural community. Awarded programs combine the functions of the entities participating in the network to create innovative solutions to local healthcare needs while addressing the following statutory charges: (i) Achieve

efficiencies; (ii) expand access, coordinate, and improve the quality of essential health care services; and (iii) strengthen the rural health care system as a whole. RHND funded programs promote population health management and the transition towards value based care through diverse network membership that include traditional and non-traditional network partners collaborating to address the local healthcare needs of the targeted community. Evidence of program impact demonstrated by outcome data and program sustainability are integral components of the program. This is a 3year competitive program for mature networks composed of at least three members that are separate, existing health care providers entities.

Need and Proposed Use of the Information: For this program, performance measures provide data to the program and to enable HRSA to provide aggregate program data. These measures cover the principal topic areas of interest to the Federal Office of Rural Health Policy, including: (a) Network infrastructure; (b) sustainability; (c) community impact; and (d) access and quality of healthcare. Several measures will be used for this program.

For this revised ICR, there are proposed changes to several measures that include network infrastructure, sustainability, community impact, and access and quality of healthcare.

Likely Respondents: The respondents would be RHND Program grant recipients.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. 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. The total annual burden hours estimated for this ICR are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Performance Improvement and Measurement System (PIMS) Database	51	1	51	6	306
Total	51		51		306

Amy McNulty,

Acting Director, Division of the Executive Secretariat. [FR Doc. 2018–06431 Filed 3–29–18; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request; Radiation Exposure Screening and Education Program, OMB No. 0906–0012—Revision

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, HRSA has submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. A 60-day **Federal Register** Notice was published on January 9, 2018. There were no comments. OMB will accept further comments from the public during the review and approval period.

DATES: Comments on this ICR should be received no later than April 30, 2018.

ADDRESSES: Submit your comments, including the Information Collection Request Title, to the desk officer for HRSA, either by email to *OIRA_submission@omb.eop.gov* or by fax to 202–395–5806.

FOR FURTHER INFORMATION CONTACT: To

request a copy of the clearance requests submitted to OMB for review, email Lisa Wright-Solomon, the HRSA Information Collection Clearance Officer at *paperwork@hrsa.gov* or call (301) 443– 1984.

SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Radiation Exposure Screening and Education Program, OMB No. 0906– 0012—Revision.

Abstract: The Radiation Exposure Screening and Education Program (RESEP) is authorized by section 417C of the Public Health Service Act (42 U.S.C. 285a–9). The purpose of RESEP is to assist individuals who live (or lived) in areas where U.S. nuclear weapons testing occurred and who are diagnosed with cancer and other radiogenic diseases caused by exposure to nuclear fallout or nuclear materials such as uranium. RESEP funds support eligible health care organizations in implementing cancer screening programs; developing education programs; disseminating information on radiogenic diseases and the importance of early detection; screening eligible individuals for cancer and other radiogenic diseases; providing appropriate referrals for medical treatment; and facilitating documentation of radiation exposure.

Need and Proposed Use of the Information: For this program, performance measures were drafted to provide data useful to the program and to enable HRSA to provide aggregate program data required by Congress under the Government Performance and Results Act of 1993 (Pub. L. 103–62). These measures cover the principal topic areas of interest to the Federal

Office of Rural Health Policy (FORHP), including demographics for the RESEP program user population, medical screening activities for cancers and other radiogenic diseases, exposure and presentation types for eligible radiogenic malignant and nonmalignant diseases, referrals for appropriate medical treatment, eligibility counseling and referral assistance for the Radiation Exposure Compensation Act, and program outreach and education activities. These measures speak to FORHP's progress toward meeting the established goals. In order to reduce the reporting burden by the award recipients, a number of questions have been removed with the new set of measures reflecting an effort to streamline data collection and collect consistent and uniform measures across FORHP's grant programs.

Likely Respondents: RESEP award recipients.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. 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. The total annual burden hours estimated for this ICR are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Radiation Exposure Screening and Education Program	8	1	8	12	96
Total	8		8		96