

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Health care providers	Study screener	1,138	1	10/60
	Web-based survey	569	1	15/60
	Exploratory Guide—Prevention with Positives In-depth Interview.	95	1	1
	Exploratory Guide—Patient Centered Care In-depth Interview.	95	1	1
	Exploratory Guide—HIV Prevention In-depth Interview.	95	1	1
	Message Testing In-depth Interview Guide ...	95	1	1
	Concept Testing In-depth Interview Guide	95	1	1
	Materials Testing In-depth Interview	95	1	1

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-21-0600; Docket No. CDC-2021-0087]

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 the opportunity to comment on a proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled CDC Model Performance Evaluation Program (MPEP) for Mycobacterium tuberculosis Susceptibility Testing information collection. CDC is requesting a three-year approval for revision to the previously approved project used to monitor and evaluate performances and practices among national laboratories for M. tuberculosis susceptibility testing.

DATES: CDC must receive written comments on or before October 26, 2021.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2021-0087 by any of the following methods:

- *Federal eRulemaking Portal: Regulations.gov.* Follow the instructions for submitting comments.
- *Mail:* Jeffrey M. Zirger, 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. CDC will post, without change, all relevant comments to *Regulations.gov*.

Please note: Submit all comments 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 Jeffrey M. Zirger, 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 the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

1. 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;
2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
3. Enhance the quality, utility, and clarity of the information to be collected;
4. 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 submissions of responses; and
5. Assess information collection costs.

Proposed Project

CDC Model Performance Evaluation Program (MPEP) for *Mycobacterium tuberculosis* Susceptibility testing (OMB Control No. 0920-0600, Exp. 2/20/2022)—Revision—National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC) is requesting a revision to approved information collection from participants in the CDC Model Performance for *Mycobacterium tuberculosis* Drug Susceptibility Testing Program for a period of three years. Revision of this information will not

require changes in the scope of the project. This Revision includes: (a) modification of the Instructions to Participants Letter; (b) modification of the MPEP *Mycobacterium tuberculosis* Results Worksheet; (c) modification of online data collection instrument; (d) modification of the MPEP *Mycobacterium tuberculosis* Minimum Inhibitory Concentration Results Worksheet; (e) removal of Reminder Telephone Script; and (f) modification of Aggregate Report Letter.

While the overall number of cases of TB in the U.S. has decreased, rates still remain high among foreign-born persons, corrections, homeless populations, and individuals infected with HIV in major metropolitan areas. To reach the goal of eliminating TB, the Model Performance Evaluation Program

for *Mycobacterium tuberculosis* susceptibility testing is used to monitor and evaluate performance and practices among US laboratories performing *M. tuberculosis* susceptibility testing. Participation in this program is one way laboratories can ensure high-quality laboratory testing, resulting in accurate and reliable testing results.

By providing an evaluation program to assess the ability of laboratories to test for drug resistant *M. tuberculosis* strains, CDC gives laboratories a self-assessment tool to aid in optimizing their skills in susceptibility testing. The information obtained from the laboratories on susceptibility practices and procedures is used to establish variables related to good performance, assess training needs, and aid with the development of practice standards.

Participants in this program include domestic clinical and public health laboratories. Data collection from laboratory participants occurs twice per year. The data collected in this program will include the susceptibility test results of primary and secondary drugs, drug concentrations, and test methods performed by laboratories on a set of performance evaluation (PE) isolates. The PE isolates are sent to participants twice a year, and participants also report demographic data such as laboratory type and the number of drug susceptibility tests performed annually.

CDC requests approval for an estimated 129 burden hours annually. There is no cost to respondents to participate other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Domestic Laboratory	Participant Biosafety Compliance Letter of Agreement.	80	1	5/60	7
	MPEP <i>Mycobacterium tuberculosis</i> Results Worksheet.	80	2	30/60	80
	Online Survey Instrument	80	2	15/60	40
	MPEP <i>Mycobacterium tuberculosis</i> Minimum Inhibitory Concentration Results Form.	4	2	15/60	2
Total	129

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Board of Scientific Counselors, National Center for Health Statistics (BSC, NCHS)

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

ACTION: Notice of meeting.

SUMMARY: In accordance with the Federal Advisory Committee Act, the CDC announces the following meeting for the Board of Scientific Counselors, National Center for Health Statistics BSC, NCHS). This meeting is open to the public.

DATES: The meeting will be held on October 22, 2021, from 11:00 a.m. to 5:30 p.m., EDT.

ADDRESSES: Instructions to access the meeting are posted on the BSC website: https://www.cdc.gov/nchs/about/bsc/bsc_meetings.htm.

FOR FURTHER INFORMATION CONTACT: Rebecca Hines, M.H.S., Executive Secretary, NCHS/CDC, Board of Scientific Counselors, 3311 Toledo Road, Room 2627, Hyattsville, Maryland 20782, Telephone: (301) 458-4717; Email: RSHines@cdc.gov.

SUPPLEMENTARY INFORMATION: *Purpose:* The Board is charged with providing advice and making recommendations to the Secretary, Department of Health and Human Services; the Director, CDC; and the Director, NCHS, regarding the scientific and technical program goals and objectives, strategies, and priorities of NCHS.

Matters To Be Considered: The meeting agenda includes welcome remarks and a Center update by the NCHS Director; updates on Data Modernization (DMI), including Epidemiology and Laboratory Capacity

for Prevention and Control of Emerging Infectious Diseases (ELC) Collaboration; an update on the National Center for Health Statistics Strategic Planning; presentation on the NCHS Health Equity Strategy; updates on using the National Health Interview Survey (NHIS) as a platform for additional data collection; and an update on several NCHS Programs. Agenda items are subject to change as priorities dictate.

Meeting Information: Please visit the BSC website: https://www.cdc.gov/nchs/about/bsc/bsc_meetings.htm for more information on the meeting agenda, including instructions for accessing the live meeting broadcast.

The Board will reserve time for public comment at the end of the day.

The Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and