

**DATES:** *Comment Due Date:* Comments regarding this information collection are best assured of having their full effect if received within 30-days of the date of this publication.

**FOR FURTHER INFORMATION CONTACT:** To obtain a copy of the data collection plans and instruments or request more information on the proposed project contact: Anne Hartman, Health Statistician, Risk Factor Monitoring and Methods Branch, National Cancer Institute, NIH, MSC 9762, 9609 Medical Center Drive, Bethesda, MD or call non-toll-free number 240–276–6704 or Email your request, including your address to: [hartmana@mail.nih.gov](mailto:hartmana@mail.nih.gov). Formal requests for additional plans and instruments must be requested in writing.

*Proposed Collection:* Next Series of Tobacco Use Supplements to the Current Population Survey (TUS–CPS), 0925–0368, Reinstatement with Change, National Cancer Institute (NCI), National Institutes of Health (NIH).

*Need and Use of Information Collection:* The 2014–15 Tobacco Use Supplement—Current Population

Survey (TUS–CPS) will be conducted by the Census Bureau and is co-sponsored by the National Cancer Institute (NCI) and the Food and Drug Administration (FDA). Fielded since 1992, most recently in 2010–11, this survey is part of a continuing series of surveys (OMB No. 0925–0368) sponsored by NCI that has been administered triennially as part of the Census Bureau's and the Bureau of Labor Statistics' CPS. For the TUS–CPS, data will be collected from the U.S. civilian non-institutionalized population on smoking, other tobacco use, including switching, flavors, dependence, cessation attempts, and policy and social norms. The TUS–CPS has been a key source of national, state, some local-level, and health disparity data on these topics in U.S. households because it uses a large, nationally representative sample. The 2014–15 TUS–CPS is designed to meet both NCI's and FDA's goals. The NCI and FDA are co-sponsoring the 2014–15 TUS–CPS through parallel, but separate interagency agreements with the Census Bureau. The NCI is particularly focused on policy information such as home and

workplace smoking policies, cigarette price, and impact of these on subsequent purchase and use behavior; and changes in smoking norms and attitudes. The FDA aims to support research to aid the development and evaluation of tobacco product regulations. The research findings generated from this program are expected to provide data to inform FDA regulation of the manufacture, distribution, and marketing of tobacco products to protect public health. A unique feature is the ability to link other social and economic Census Bureau and Bureau of Labor Statistics data, other sponsor-supported supplement data, and the National Longitudinal Mortality Study cancer incidence and cause-specific mortality data to the TUS–CPS data. Data will be collected in July 2014, January 2015, and May 2015 from about 255,000 respondents.

OMB approval is requested for 2 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 12,750.

#### ESTIMATED ANNUALIZED BURDEN HOURS

| Type of Respondent | Number of respondents | Responses per respondent | Average burden per response (in hour) | Annual burden hours |
|--------------------|-----------------------|--------------------------|---------------------------------------|---------------------|
| Individuals .....  | 127,500               | 1                        | 6/60                                  | 12,750              |

Dated: April 21, 2014.

**Vivian Horovitch-Kelley,**

*NCI Project Clearance Liaison, National Institutes of Health.*

[FR Doc. 2014–09444 Filed 4–24–14; 8:45 am]

**BILLING CODE 4140–01–P**

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

##### National Institutes of Health

##### National Institute of Allergy and Infectious Diseases; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. 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.

*Name of Committee:* National Institute of Allergy and Infectious Diseases Special Emphasis Panel NIAID Investigator Initiated Program Project Applications (P01).

*Date:* May 16, 2014.

*Time:* 1:00 p.m. to 4:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Room 3121, 6700B Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Paul A. Amstad, Ph.D., Scientific Review Officer, Scientific Review Program Division of Extramural Activities, NIAID/NIH/DHHS, 6700B Rockledge Drive, MSC 7616 Bethesda, MD 20892–7616, 301–402–7098, [pamstad@niaid.nih.gov](mailto:pamstad@niaid.nih.gov). (Catalogue of Federal Domestic Assistance Program Nos. 93.855, Allergy, Immunology, and Transplantation Research; 93.856, Microbiology and Infectious Diseases Research, National Institutes of Health, HHS)

Dated: April 22, 2014.

**David Clary,**

*Program Analyst, Office of Federal Advisory Committee Policy.*

[FR Doc. 2014–09425 Filed 4–24–14; 8:45 am]

**BILLING CODE 4140–01–P**

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

##### National Institutes of Health

##### Center for Scientific Review; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. 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.

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; Conference Grant Review Animal Models.

*Date:* May 12, 2014.

*Time:* 11:30 a.m. to 1:30 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Mushtaq A Khan, DVM, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 2176, MSC 7818, Bethesda, MD 20892, 301-435-1778, [khanm@csr.nih.gov](mailto:khanm@csr.nih.gov).

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; Member Conflict: Neurobiology of Disease and Development.

*Date:* May 21, 2014.

*Time:* 12:00 p.m. to 4:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Boris P Sokolov, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 5217A, MSC 7846, Bethesda, MD 20892, 301-408-9115, [bsokolov@csr.nih.gov](mailto:bsokolov@csr.nih.gov).

*Name of Committee:* Center for Scientific Review Special Emphasis Panel; PAR 13-109: Mechanistic Insights from Birth Cohorts.

*Date:* May 22, 2014.

*Time:* 1:30 p.m. to 5:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (Virtual Meeting).

*Contact Person:* Fungai Chanetsa, MPH, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 3135, MSC 7770, Bethesda, MD 20892, 301-408-9436, [fungai.chanetsa@nih.hhs.gov](mailto:fungai.chanetsa@nih.hhs.gov). (Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393-93.396, 93.837-93.844, 93.846-93.878, 93.892, 93.893, National Institutes of Health, HHS).

Dated: April 22, 2014.

**Anna Snouffer,**

*Deputy Director, Office of Federal Advisory Committee Policy.*

[FR Doc. 2014-09423 Filed 4-24-14; 8:45 am]

**BILLING CODE 4140-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276-1243.

Comments are invited on: (a) Whether the proposed collections of information are 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.

#### Proposed Project: Co-location and Integration of HIV Prevention and Medical Care Into Behavioral Health Program-NEW

The Substance Abuse and Mental Health Services Administration's

(SAMHSA) Center for Mental Health Services, (CMHS), Center for Substance Abuse Prevention (CSAP), Center for Substance Abuse Treatment (CSAT) are requesting approval from the Office of Management and Budget (OMB) for new data collection activities associated with their Co-location and Integration of HIV Prevention and Medical Care into Behavioral Health Program. The program is designed to support integrated behavioral health and physical health services for racial/ethnic populations at high risk for behavioral health disorders and at high risk for contracting HIV.

This information collection is needed to provide SAMHSA with objective information to document the reach and impact of the Co-location and Integration of HIV Prevention and Medical Care into Behavioral Health program. The information will be used to monitor quality assurance and quality performance outcomes for organizations funded by this grant program. The information will also be used to assess the impact of services on behavioral health and physical health services for individuals served by this program.

Collection of the information included in this request is authorized by Section 505 of the Public Health Service Act (42 U.S.C. 290aa-4)—Data Collection. Further support for the program was provided in the 2013 Senate Appropriations Report 113-71. The report urged SAMHSA to “focus its efforts on building capacity and outreach to individuals at risk or with a primary substance abuse disorder and to improve efforts to identify such individuals to prevent the spread of HIV.” Additional support for this data collection effort is provided by the 2013 National HIV/AIDS Strategy which instructed SAMHSA to “support and rigorously evaluate the development and implementation of new integrated behavioral health models to address the intersection of substance use, mental health, and HIV.”

The table below reflects the annualized hourly burden.

| Instrument  | Number of respondents | Number of responses per respondent | Total number of responses | Hours per response per respondent | Total burden hours |
|---|-----------------------|------------------------------------|---------------------------|-----------------------------------|--------------------|
| HIV Testing Form .....  | 5,000                 | 1                                  | 5,000                     | 0.13                              | 650                |
| Co-Located and Integrated Care Tool—Baseline  |                       |                                    |                           |                                   |                    |
| Clients with HIV Receiving Integrated Medical Services .....                                    | 200                   | 1                                  | 200                       | 0.58                              | 117                |
| Individuals only Receiving Prevention Services .....  | 1,000                 | 1                                  | 1,000                     | 0.12                              | 120                |
| Co-Located and Integrated Care Tool—Follow Up   |                       |                                    |                           |                                   |                    |
| Clients with HIV Receiving Integrated Medical Services <sup>2</sup> .....                       | 120                   | 1                                  | 120                       | 0.58                              | 69.6               |
| Co-Located and Integrated Care Tool—Discharge   |                       |                                    |                           |                                   |                    |
| Clients with HIV Receiving Integrated Medical Services—Interview with Client <sup>3</sup> ..... | 28                    | 1                                  | 28                        | 0.58                              | 16.2               |