

05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

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:

Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

CMS–10550 Hospital National Provider Survey

CMS–10551 Nursing Home National Provider Survey

Under the 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 requires federal agencies to publish a 60-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.

Information Collection

1. *Type of Information Collection Request:* New collection (Request for a new OMB control number); *Title of Information Collection:* Hospital National Provider Survey; *Use:* Section 3104 of the Patient and Protection and Affordable Care Act (ACA) requires that the Secretary of the Department of Health and Human Services (HHS) conduct an assessment of the quality

and efficiency impact of the use of endorsed measures in specific Medicare quality reporting and incentive programs. The ACA further specifies that the initial assessment must occur no later than March 1, 2012, and once every 3 years thereafter. This planned data collection activity was developed and tested as part of the 2015 Impact Report and data collection will be conducted for reporting in the 2018 Impact Report.

There are two modes of data collection with hospital quality leaders: (1) A semi-structured qualitative interview and (2) a standardized survey. The data from the qualitative interviews and standardized surveys will be analyzed to provide us with information on the quality and efficiency impact of measures that we use to assess care in the hospital inpatient and outpatient settings. The surveys seek to understand whether the use of performance measures has led to changes in provider behavior, and where undesired effects are occurring as a result of implementing quality and efficiency measures. The survey will also help identify characteristics associated with high performance, which if understood, could be used to leverage improvements in care among lower performing hospitals. The focus of the survey is to assess the impacts of the measures that we use in the context of public reporting (pay-for-reporting) and value-based purchasing programs. *Form Number:* CMS–10550 (OMB control number: 0938–NEW); *Frequency:* Occasionally; *Affected Public:* Private Sector (Business or other for-profit and Not-for-profit institutions); *Number of Respondents:* 940; *Total Annual Responses:* 940; *Total Annual Hours:* 639. (For policy questions regarding this collection contact Noni Bodkin at 410–786–7837.)

2. *Type of Information Collection Request:* New collection (Request for a new OMB control number); *Title of Information Collection:* Nursing Home National Provider Survey; *Use:* Section 3104 of the Patient and Protection and Affordable Care Act (ACA) requires that the Secretary of the Department of Health and Human Services (HHS) conduct an assessment of the quality and efficiency impact of the use of endorsed measures in specific Medicare quality reporting and incentive programs. The ACA further specifies that the initial assessment must occur no later than March 1, 2012, and once every 3 years thereafter. This planned data collection activity was developed and tested as part of the 2015 Impact Report and data collection will be conducted for reporting in the 2018 Impact Report.

There are two modes of data collection with nursing home quality leaders: (1) A semi-structured qualitative interview and (2) a standardized survey. The data from the qualitative interviews and standardized surveys will be analyzed to provide us with information on the quality and efficiency impact of measures that we use to assess care in nursing homes delivering skilled nursing care. The surveys seek to understand whether the use of performance measures has led to changes in provider behavior (both at the nursing home-level and at the frontline of care), and whether undesired effects are occurring as a result of implementing quality and efficiency measures. The survey will also help identify characteristics associated with high performance, which if understood, could be used to leverage improvements in care among lower performing nursing homes. The focus of the survey is to assess the impacts of the measures that we use in the context of public reporting (pay-for-reporting) and quality improvement. *Form Number:* CMS–10551 (OMB control number: 0938–NEW); *Frequency:* Occasionally; *Affected Public:* Private Sector (Business or other for-profit and Not-for-profit institutions); *Number of Respondents:* 940; *Total Annual Responses:* 940; *Total Annual Hours:* 639. (For policy questions regarding this collection contact Noni Bodkin at 410–786–7837.)

Dated: March 17, 2015.

William N. Parham, III,
Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2015–06408 Filed 3–19–15; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Drug Abuse: 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 materials, 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 on Drug Abuse Special Emphasis Panel; Review of Project Grant Applications for Multi-site Clinical Trials.

Date: March 31, 2015.

Time: 8 a.m. to 8:30 a.m.

Agenda: To review and evaluate grant applications.

Place: Hilton Garden Inn Bethesda, 7301 Waverly Street, Bethesda, MD 20814.

Contact Person: Susan O. McGuire, Ph.D., Scientific Review Officer, Office of Extramural Affairs, National Institute on Drug Abuse, National Institutes of Health, DHHS, 6001 Executive Blvd., Room 4245, Rockville, MD 20852, 301-435-1426, mcguireso@mail.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

Name of Committee: National Institute on Drug Abuse Special Emphasis Panel; Cohort Studies of HIV/AIDS and Substance Use (U01).

Date: April 2, 2015.

Time: 8:30 a.m. to 4 p.m.

Agenda: To review and evaluate cooperative agreement applications.

Place: Hilton Garden Inn Bethesda, 7301 Waverly Street, Bethesda, MD 20814.

Contact Person: Susan O. McGuire, Ph.D., Scientific Review Officer, Office of Extramural Affairs, National Institute on Drug Abuse, National Institutes of Health, DHHS, 6001 Executive Blvd., Room 4245, Rockville, MD 20852, 301-435-1426, mcguireso@mail.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

Name of Committee: National Institute on Drug Abuse Special Emphasis Panel; Cutting-Edge Basic Research Awards (CEBRA) (R21).

Date: April 2, 2015.

Time: 12 p.m. to 3 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Neuroscience Center, 6001 Executive Boulevard, Rockville, MD 20852, (Virtual Meeting).

Contact Person: Jagadeesh S. Rao, Ph.D., Scientific Review Officer, Office of

Extramural Affairs, National Institute on Drug Abuse, National Institutes of Health, DHHS, 6001 Executive Boulevard, Room 4234, MSC 9550, Bethesda, MD 20892, 301-443-9511, jrao@nida.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos.: 93.279, Drug Abuse and Addiction Research Programs, National Institutes of Health, HHS)

Dated: March 13, 2015.

Michelle Trout,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2015-06349 Filed 3-19-15; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Title: Multi-Site Evaluation of Project LAUNCH.

(OMB No.: 0970-0373)

Description: The Administration for Children and Families (ACF), U.S. Department of Health and Human Services, is planning to collect data for the multi-site evaluation (MSE) of Project LAUNCH (Linking Actions for Unmet Needs in Children's Health). Project LAUNCH is intended to promote healthy development and wellness in children from birth to eight years of age. Project LAUNCH grantees are funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) to improve coordination among child-serving systems, enhance systems coordination, integrate child behavioral health services with other health services, and implement evidence-based programs to address children's healthy development.

The Project LAUNCH MSE seeks to determine the impact of the combined LAUNCH services and strategies on child, family, and systems level outcomes. Data for the MSE will be collected through several mechanisms. First, all LAUNCH grantees will submit semi-annual reports through a web-based data entry system. Second, Project LAUNCH grantees will be systematically sampled to include 10 non-tribal and 5 tribal sites, and matched comparison communities (10 non-tribal and 5 tribal) will be recruited to participate in data collection efforts. Within each site, 2 elementary schools and 4 early childhood education (ECE) centers will be selected as data collection sites. Data collected from this sample of LAUNCH and comparison communities will include:

- Surveys of parents of a sample of young children (birth through age eight). Topics include child health, social emotional health, school readiness, parent-child relationships, parent depression, home environment, and parental social support.

- Surveys of a sample of kindergarten teachers. The survey will assess kindergarten students' school readiness in the areas of physical health and well-being; social competence; emotional maturity; language and cognitive development; and communication skills.

- Surveys of elementary school and ECE administrators. The survey will assess child suspension and expulsion.

In addition, key informant interviews will be conducted with local and state early childhood leaders to gather contextual information about systems-level activities and change.

Respondents: All Project LAUNCH grantees for the web-based data collection; a systematic sample of parents, teachers, elementary school and ECE administrators in both LAUNCH and comparison communities; and key informants at the local and state levels in both LAUNCH and comparison communities.

ANNUAL BURDEN ESTIMATES

Instrument	Total No. of respondents	Annual No. of respondents	Number of responses per respondent	Average burden hours per response	Annual burden hours
Direct Service Activities web-based data collection	96	32	6	8.5	1632
Systems Activities and Outcomes web-based data collection	96	32	3	8	768
Parent Survey	8100	2700	3	0.5	4050
Teacher Survey	720	240	3	10	7200
School Suspension and Expulsion Survey	540	180	3	1	540
Systems Change Interview	315	105	3	1	315