SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Nurse Faculty Loan Program (NFLP)— Annual Performance Report Financial Data Form.

OMB No.: 0915–0314—Revision. Abstract: This clearance request is for approval of a revision to the Nurse Faculty Loan Program, Annual Performance Report (NFLP–APR) Financial Data Form. The form was previously titled the Nurse Faculty Loan Program, Annual Operating Report (NFLP–AOR).

Need and Proposed Use of the Information: The online NFLP-APR Financial Data Form is an online form that exists in the HRSA Electronic Handbooks (EHBs) Performance Report module as part of the NFLP, BHPr performance report under OMB Approval No: 0915–0061, expiration date: June 30, 2016. The revised NFLP-APR Financial Data Form will collect less data from applicants and will no longer include nursing student demographic data that was previously included. The nursing student demographic data is currently collected under OMB Approval No: 0915-0149. The revised NFLP–APR Financial Data Form will only collect financial data to capture the NFLP loan fund account activity related to financial receivables, disbursements, and borrower account data for employment status, loan cancellation, loan repayment, and collections. Participating schools will provide the federal government with current and cumulative information on: (1) NFLP loan funds received, (2) number and amount of NFLP loans

made, (3) number and amount of loans collected, (4) number and amount of loans in repayment, (5) loan default rate percent, (6) number of NFLP graduates employed as nurse faculty, and (7) other related loan fund costs and activities.

Under Title VIII, section 846A of the Public Health Service Act. as amended by Public Law 111–148, the Secretary of Health and Human Services (HHS) enters into an agreement with a school of nursing and makes an award to the school. The award is used to establish a distinct account for the NFLP loan fund at the school. The school of nursing makes loans from the NFLP loan fund account to students enrolled full-time or part-time in a master's or doctoral nursing education program that will prepare them to become qualified nursing faculty. Following graduation from the NFLP lending school, loan recipients may receive up to 85 percent NFLP loan cancellation over a consecutive 4-year period in exchange for service as full-time faculty at a school of nursing. The NFLP lending school collects any portion of the loan that is not cancelled and any loans that go into repayment, and deposits these monies into the NFLP loan fund to make additional NFLP loans.

The school of nursing must keep records of all NFLP loan fund transactions. The NFLP–APR Financial Data Form is used to monitor grantee performance by collection of information relating to the NFLP loan fund operations and financial activities for a specified reporting period (July 1 through June 30, of the academic year). Participating schools are required to complete and submit the NFLP–APR Financial Data Form semi-annually. The data provided in the form are essential for HRSA to effectively monitor the school's use of NFLP funds in accordance with program guidelines. Approval of the revised NFLP–APR Financial Data Form will facilitate our current effort to determine future awards to the school.

The electronic data collection capability will streamline the report submission process, enable an efficient annual performance review process, and serve as a data repository to facilitate reporting on the use of funds and analysis of program outcomes.

Likely Respondents: Participating NFLP schools are required to adhere to reporting requirements.

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
NFLP—Annual Performance Report Financial Data Form	250	1	250	8	2,000
Total	250	1	250	8	2,000

Dated: January 22, 2014.

Jackie Painter,

Deputy Director, Division of Policy and Information Coordination. [FR Doc. 2014–01555 Filed 1–27–14; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Public Comment Request

AGENCY: Health Resources and Services Administration, HHS. **ACTION:** Notice.

SUMMARY: In compliance with the requirement for opportunity for public

comment on proposed data collection projects (Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995), the Health Resources and Services Administration (HRSA) announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR. **DATES:** Comments on this Information Collection Request must be received within 60 days of this notice.

ADDRESSES: Submit your comments to paperwork@hrsa.gov or mail the HRSA Information Collection Clearance Officer, Room 10–29, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email *paperwork@hrsa.gov* or call the HRSA Information Collection Clearance Officer at (301) 443–1984.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the information request collection title for reference.

Information Collection Request Title: Reconciliation Tool for the Teaching Health Center Graduate Medical Education Program.

OMB No.: 0915–0342—Extension. Abstract: The Teaching Health Center Graduate Medical Education (THCGME) program, Section 340H of the Public Health Service (PHS) Act, was established by Section 5508 of Public Law 111–148. The program supports training for primary care residents (including residents in family medicine, internal medicine, pediatrics, internal medicine pediatrics, obstetrics and gynecology, psychiatry, general dentistry, pediatric dentistry, and geriatrics) in community-based ambulatory patient care settings.

The statute provides that eligible Teaching Health Centers receive payments for both direct and indirect expenses associated with training residents in community-based ambulatory patient care centers. Direct medical expenses payments are designed to compensate eligible teaching health centers for those expenses directly associated with resident training, while indirect medical expenses payments are intended to compensate for the additional expenses of training residents in such programs.

Need and Proposed Use of the Information: THCGME payments are prospective payments, and the statute provides for a reconciliation process through which overpayments may be recouped and underpayments may be adjusted at the end of the fiscal year. This data collection instrument will gather information relating to the numbers of residents in THCGME training programs in order to reconcile payments for both direct and indirect expenses.

Likely Respondents: The likely responders to the THCGME Reconciliation Tool are existing THCGME awardees.

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 Information Collection Request 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
THCGME Reconciliation Tool	44	1	44	2	88
Total	44	1	44	2	88

HRSA specifically requests comments on (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.

Dated: January 22, 2014.

Jackie Painter,

Deputy Director, Division of Policy and Information Coordination. [FR Doc. 2014–01552 Filed 1–27–14; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Public Comment Request

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice.

SUMMARY: In compliance with the requirement for opportunity for public comment on proposed data collection projects (Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995), the Health Resources and Services Administration (HRSA) announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on this Information Collection Request must be received within 60 days of this notice.

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FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email *paperwork@hrsa.gov* or call the HRSA Information Collection Clearance Officer at (301) 443–1984.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the information request collection title for reference.