The purpose of this project is to examine the facilitators and barriers to receiving clinical preventive services among newly insured medically underserved women who had previously been served by the NBCCEDP. The Women's Preventive Services Study aims to survey newly insured women about what clinical preventive health services they receive, what barriers and facilitators they experience, and their ability to maintain consistent health insurance coverage.

While having newly acquired health insurance will improve access to preventive services, insurance coverage alone would not result in improved clinical preventive services utilization for all women, especially among underserved populations. This project proposes to follow a group of women previously served by the NBCCEDP over 3 years by administering a yearly questionnaire.

This study will focus on the following research questions:

1. What are the insurance coverage patterns (*e.g.,* public or private insurance) for a sample of medically underserved women previously screened through the NBCCEDP?

2. What barriers and facilitators do these women face in enrolling in new insurance coverage?

3. What preventive health services, including cancer screening, do these women receive?

4. What barriers and facilitators do these women face in accessing preventive health services through their new coverage?

5. What are the non-financial and financial costs to these women?

The respondents will be uninsured or underinsured women who previously had been screened through the NBCCEDP but now have health insurance coverage. To be potentially eligible for the study, women must be between the ages of 30–62 years, a U.S. Citizen or U.S. permanent resident, resident of the state where they received NBCCEDP services, and English or Spanish speaking. Additionally, women must meet one of the prior screening criteria: (1) Having received a Pap test through a NBCCEDP state program not less than 1 year but not more than 4 years from the time of study implementation OR (2) received a Pap/HPV co-test through a NBCCEDP grantee not less than 3 years but not more than 5 years from the time of study implementation OR (3) received a mammogram through a NBCCEDP grantee not less than 1 year but not more than 3 years from the time of study implementation.

NBCCEDP state programs will identify potentially eligible women and consent the women to have their contact information shared for the study. The women who agree will receive an invitation letter to participate in the study through an on-line survey. The first step of the on-line survey will be a set of screener questions to determine whether they have insurance coverage. Only those who currently have insurance will be eligible to continue with the main survey instrument. Women who complete the survey will be asked to repeat the survey annually the next 2 years.

The sample design proposes that 14,240 women be identified as eligible. We estimate that 80% will be contacted and agree to participate. Of that, we expect 9,683 completed on-line screenings to occur during year one, representing an annualized 3,288 respondents. With an 85% expected completion rate and annual attrition, we estimate that 3,292 surveys will be completed in Year 1; 2,222 completed surveys in Year 2; and 1,500 completed surveys in Year 3. This represents an annualized 2,338 respondents for the survey.

OMB approval is requested for three years. Participation is voluntary and there are no costs to respondents other than their time. The estimated annualized burden hours for this data collection are 1,243 hours.

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)
Women aged 30–62 who previously received services in the NBCCEDP.	Screener	3,228	1	5/60	269
	Survey	2,338	1	25/60	974
Total					1,243

Jeffrey M. Zirger,

Health Scientist, Acting Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day–16–16AWN: Docket No. CDC–2016–0080]

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 efforts to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995. This notice invites comment on the National Youth Tobacco Survey (NYTS) 2017 Computer Based Pilot. The NYTS is currently administered in a paper and pencil format. The NYTS Computer Based Pilot will assess the feasibility of administering the survey in an electronic format.

DATES: Written comments must be received on or before October 11, 2016.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2016–0080 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. All relevant comments received will be posted without change to *Regulations.gov*, including any personal information provided. For access to the docket to read background documents or comments received, go to *Regulations.gov*.

Please note: All public comment should be submitted 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 the 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 OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

Comments are invited on: (a) Whether the proposed collection of information is 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; (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; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, disclose or provide information to or for a Federal agency. 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.

Proposed Project

National Youth Tobacco Survey (NYTS) 2017 Computer Based Pilot—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Tobacco use is a major preventable cause of morbidity and mortality in the U.S. A limited number of health risk behaviors, including tobacco use, account for the overwhelming majority of immediate and long-term sources of morbidity and mortality. Because the majority of tobacco users begin using tobacco before the age of 18, there is a critical need for public health programs directed towards youth, and for information to support these programs.

In 1999, 2000, and 2002, the American Legacy Foundation funded surveys to assess tobacco use among adolescents. Building on these efforts, CDC conducted the National Youth Tobacco Survey (NYTS, OMB no. 0920–0621) in 2004, 2006, 2009, 2011, 2012, 2013, 2014, 2015, and 2016. At present, the NYTS is the most comprehensive source of nationally representative tobacco data among students in grades 9–12, moreover, the NYTS is the only national source of such data for students in grades 6–8. The NYTS has provided national estimates of tobacco use behaviors, information about exposure to pro- and anti-tobacco influences, information about racial and ethnic disparities in tobacco-related topics, and most recently, estimates of use of emerging products such as water pipes (hookahs) and electronic cigarettes (e-cigarettes). Information collected through the NYTS is used by CDC, the Food and Drug Administration (FDA), and public health practitioners and researchers to identify and monitor trends over time, to inform the development of tobacco cessation programs for youth, and to evaluate the effectiveness of existing interventions and programs.

The NYTS is currently conducted by a paper and pencil (PAP) method in a classroom setting, scheduled by each school. At this time, many schools have experience with electronic technologies that offer several potential advantages compared to PAP survey administration. For example, electronic information collection methods support conditional 'skip logic' routing and adaptive survey design, and may improve respondent satisfaction, data reliability, and data management. As a result, CDC plans to conduct a computer based pilot of the 2017 NTYS using a hand-held tablet. The specific aims of the 2017 NYTS pilot are to (1) assess respondent burden; (2) determine the reliability and efficiencies of electronic mode data collection; (3) assess the reliability and validity of survey results obtained from electronic data; (4) assess the cost-effectiveness of electronic administration; (5) measure the length of time between data collection and dissemination of findings; and (6) assess student expectations about survey participation, given changes in classroom technology.

The computer-based pilot study is designed to complement the ongoing, paper-based NYTS. In 2017, the PAP version of the NYTS will be administered as usual according to established methods (OMB No. 0920–0621, exp. 1/31/2018). Sampling, recruitment, and survey administration for both studies will be coordinated to prevent overlap, maximize participation, and maximize the comparison of results. The sampling vendor for the traditional NYTS will oversample from the NYTS sampling frame, assigning a smaller population to participate in the pilot study. The sample for the pilot study will be approximately 75% of the size of the sample for the paper-based NYTS. The samples for each mode of the survey will be drawn at the same time to ensure that the same schools are not approached for the different versions. Additionally, the paper version of the survey will start collecting data prior to the pilot version beginning data collection to ensure schools in the same district do not face multiple collectors during the same time period.

The 2017 computer-based pilot of the NYTS will be conducted among a

nation-wide sample of students attending public schools in grades 6–12. Participating students will complete the survey in person in a classroom setting using a tablet provided by CDC's information collection contractor. The tablet will be distributed at the beginning of the class session and returned at the end of the class session. This is similar to administration of the PAP NYTS, in which a paper questionnaire booklet is distributed to students at the beginning of a class session, completed, and returned at the end of the session.

The content of the 2017 pilot survey will mirror the paper-based survey. The questions, developed in cooperation with the Food and Drug Administration (FDA), examine the following topics: Use of cigarettes, smokeless tobacco, cigars, pipes, bidis, snus, hookahs, electronic vapor products, and dissolvable tobacco products; knowledge and attitudes; media and advertising; access to tobacco products; secondhand smoke exposure; and cessation. In addition, specific questions will be included in the pilot survey to better understand respondents' feelings about safety and security around utilizing a computer based survey.

Findings from the NYTS pilot will be used to assess the feasibility of conducting the computer-based NYTS compared to the paper-based survey. Results will also be used to help evaluate the impact of automated collection techniques and computer-based survey administration on response burden. After data collection, the computer-based data will be compared to the paper-based data to determine which method provides the most validity and reliability.

OMB approval will be requested for one year. There are no changes in the estimated burden per response for any type of respondent compared to the paper version. Participation is voluntary and there are no costs to respondents other than their time. The estimated annualized burden hours for this data collection are 3,689 hours.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)	Total burden (in hrs.)
State Administrators	State-level Recruitment Script for the National Youth Tobacco Survey.	6	1	30/60	3
District Administrators	District-level Recruitment Script for the National Youth Tobacco Survey.	45	1	30/60	23
School Administrators	School-level Recruitment Script for the National Youth Tobacco Survey.	64	1	30/60	32
Teachers	Data Collection Checklist for the National Youth Tobacco Survey.	292	1	15/60	73
Students	National Youth Tobacco Survey	6,100	1	35/60	3,558
Total					3,689

Jeffrey M. Zirger,

Health Scientist, Acting Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–16–16AXC; Docket No. CDC–2016–0077]

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 efforts to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed field survey to assess safety and health hazards to workers in oil and gas (O&G.) extraction.

DATES: Written comments must be received on or before October 11, 2016.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2016–0077 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. All relevant comments received will be posted without change to *Regulations.gov*, including any personal information provided. For access to the docket to read background documents or comments received, go to *Regulations.gov.*

Please note: All public comment should be submitted 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 the 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