

## ANNUAL BURDEN ESTIMATES

Type of respondents	Number of respondents	Number of responses per respondent	Annual number of responses	Average burden hours per response	Total burden hours
Non-IV-D CPs .....	2,436,312	1	2,436,312	5 minutes .....	203,026
Employers .....	1,283,228	7.38	9,470,223	2 minutes .....	315,674
e-IWO Employers .....	5,500	131	720,500	3 seconds ....	600

Estimated Total Annual Burden Hours: 519,300.

**Additional Information:** Copies of the proposed collection may be obtained by writing to The Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer.

**OMB Comment:** OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, 725 17th Street NW., Washington, DC 20503, Attn: Desk Officer for ACF.

**Bob Sargis,**

*Reports Clearance Officer.*

[FR Doc. 2014-07830 Filed 4-7-14; 8:45 am]

**BILLING CODE P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Indian Health Service

#### Reimbursement Rates for Calendar Year 2014

**AGENCY:** Indian Health Service, HHS.

**ACTION:** Notice.

**SUMMARY:** Notice is given that the Director of the Indian Health Service (IHS), under the authority of sections 321(a) and 322(b) of the Public Health Service Act (42 U.S.C. 248 and 249(b)), Public Law 83-568 (42 U.S.C. 2001(a)), and the Indian Health Care Improvement Act (25 U.S.C. 1601 *et seq.*), has approved the following rates for inpatient and outpatient medical care provided by IHS facilities for Calendar Year 2014 for Medicare and Medicaid beneficiaries, and beneficiaries of other Federal programs, and for recoveries under the Federal Medical Care Recovery Act (42 U.S.C. 2651-2653). The Medicare Part A

inpatient rates are excluded from the table below as they are paid based on the prospective payment system. Since the inpatient rates set forth below do not include all physician services and practitioner services, additional payment shall be available to the extent that those services are provided.

	Calendar Year 2014
Inpatient Hospital Per Diem Rate (Excludes Physician/Practitioner Services)	
Lower 48 States .....	\$2,413
Alaska .....	\$2,675
Outpatient Per Visit Rate (Excluding Medicare)	
Lower 48 States .....	\$342
Alaska .....	\$564
Outpatient Per Visit Rate (Medicare)	
Lower 48 States .....	\$297
Alaska .....	\$516
Medicare Part B Inpatient Ancillary Per Diem Rate	
Lower 48 States .....	\$502
Alaska .....	\$862
Outpatient Surgery Rate (Medicare):	
Established Medicare rates for freestanding Ambulatory Surgery Centers..	
Effective Date for Calendar Year 2014 Rates:	
Consistent with previous annual rate revisions, the Calendar Year 2014 rates will be effective for services provided on or after January 1, 2014 to the extent consistent with payment authorities including the applicable Medicaid State plan..	

Dated: December 2, 2013.

**Yvette Roubideaux,**

*Acting Director, Indian Health Service.*

[FR Doc. 2014-07796 Filed 4-7-14; 8:45 am]

**BILLING CODE 4165-16-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Proposed Collection; 60-Day Comment Request; Specimen Resource Locator (National Cancer Institute)

**SUMMARY:** In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Cancer Institute (NCI), National Institutes of Health (NIH), will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) 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) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

**To Submit Comments and for Further Information:** To obtain a copy of the data collection plans and instruments, submit comments in writing, or request more information on the proposed project, contact: Joanne Demchok, Program Director, Cancer Diagnosis Program, Division of Cancer Treatment and Diagnosis, 9609 Medical Center Drive, Rockville, Md. 20892 or call non-toll-free number 240-276-5959 or Email your request, including your address to: [peterjo@mail.nih.gov](mailto:peterjo@mail.nih.gov). Formal requests for additional plans and instruments must be requested in writing.

**DATES:** *Comment Due Date:* Comments regarding this information collection are

best assured of having their full effect if received within 60 days of the date of this publication.

*Proposed Collection:* Specimen Resource Locator, Existing Collection in Use without OMB Control Number, National Cancer Institute (NCI), National Institutes of Health (NIH).

*Need and Use of Information Collection:* The availability of specimens and associated data is critical to increase our knowledge of cancer biology, and to translate important

research discoveries to clinical application. The discovery and validation of cancer prevention markers require access, by researchers, to quality clinical biospecimens. In response, to this need, the National Cancer Institute's (NCI) Cancer Diagnosis Program has developed, and is expanding, a searchable database: Specimen Resource Locator (SRL). The SRL allows scientist in the research community and the NCI to locate specimens needed for their research.

The SRL will list all NCI supported repositories and their links. This administrative submission is an on-line form that will collect information to manage and improve a program and its resources for the use of all scientists. This submission does not involve any analysis.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 104.

#### ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total annual burden hour
Private Sector, State and Federal Governments.	Initial Request .....	200	1	30/60	100
	Annual Update .....	50	1	5/60	4

Dated: March 25, 2014.

**Vivian Horovitch-Kelley,**

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

[FR Doc. 2014-07815 Filed 4-7-14; 8:45 am]

**BILLING CODE 4140-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Institute of Diabetes and Digestive and Kidney Diseases; 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:* National Institute of Diabetes and Digestive and Kidney Diseases Special Emphasis Panel, Biomarkers for Diabetes, Digestive, Kidney and Urologic Diseases using Biosamples from NIDDK Repository (R01).

*Date:* June 2, 2014.

*Time:* 11:00 a.m. to 1:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Two Democracy Plaza, 6707 Democracy Boulevard, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Najma Begum, Ph.D., Scientific Review Officer, Review Branch, DEA, NIDDK, National Institutes of Health, Room 749, 6707 Democracy Boulevard, Bethesda, MD 20892-5452, (301) 594-8894, [begumn@nidk.nih.gov](mailto:begumn@nidk.nih.gov).

*Name of Committee:* National Institute of Diabetes and Digestive and Kidney Diseases Special, Emphasis Panel Human Islet Research Network-Consortium on Targeting and Regeneration (HIRN-CTAR)-RFA-DK-13-015.

*Date:* June 9, 2014.

*Time:* 10:00 a.m. to 4:00 p.m.

*Agenda:* To review and evaluate cooperative agreement applications.

*Place:* National Institutes of Health, Two Democracy Plaza, 6707 Democracy Boulevard, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Najma Begum, Ph.D., Scientific Review Officer, Review Branch, DEA, NIDDK, National Institutes of Health, Room 749, 6707 Democracy Boulevard, Bethesda, MD 20892-5452, (301) 594-8894, [begumn@nidk.nih.gov](mailto:begumn@nidk.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.847, Diabetes, Endocrinology and Metabolic Research; 93.848, Digestive Diseases and Nutrition Research; 93.849, Kidney Diseases, Urology and Hematology Research, National Institutes of Health, HHS).

Dated: April 1, 2014.

**David Clary,**

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

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Center for Advancing Translational Sciences; 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:* National Center for Advancing Translational Sciences Special Emphasis Panel SBIR Contract Review 2.

*Date:* April 29, 2014.

*Time:* 2:30 p.m. to 4:30 p.m.

*Agenda:* To review and evaluate contract proposals.

*Place:* National Institutes of Health, One Democracy Plaza, 6701 Democracy Boulevard, Bethesda, MD 20892.

*Contact Person:* Sailaja Koduri, Ph.D., Scientific Review Officer, Office of Scientific Review, National Center for Advancing Translational Sciences, 6701 Democracy Blvd., Room 1074, Bethesda, MD 20892, 301-435-0813, [Sailaja.koduri@nih.gov](mailto:Sailaja.koduri@nih.gov).

*Name of Committee:* National Center for Advancing Translational Sciences Special Emphasis Panel SBIR Contract Review 1.

*Date:* April 30, 2014.