

is key to achieving these goals. Section 5 of the Digital Accountability and Transparency Act (Pub. L. 113–101) requires a pilot program to develop recommendations for standardizing reporting, eliminating unnecessary duplication, and reducing compliance costs for recipients of Federal awards.

The pilot participants are required to provide requested reports as well as the cost to collect the data via the pilot. The proposed pilot program will provide an alternative submission method for existing Federal Acquisition Regulation (FAR) requirements, and assess the pilot results against the existing FAR-required method.

B. Annual Reporting Burden

Respondents: 720.

Responses per Respondent: 3 each week.

Total Annual Responses: 2,160.

Hours per Response: .5.

Total Burden Hours: 56,160.

C. Public Comments

Public comments are particularly invited on: Whether this collection of information will have practical utility; whether our estimate of the public burden of this collection of information is accurate, and based on valid assumptions and methodology; ways to enhance the quality, utility, and clarity of the information to be collected; and ways in which we can minimize the burden of the collection of information on those who are to respond, through the use of appropriate technological collection techniques or other forms of information technology.

Obtaining Copies of Proposals: Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat Division (MVCB), 1800 F Street NW, Washington, DC 20405, telephone 202–501–4755. Please cite OMB Control No. 3090–0309, Simplifying Federal Award Reporting, in all correspondence.

Dated: June 25, 2019.

David A. Shive,
Chief Information Officer.

[FR Doc. 2019–14034 Filed 7–1–19; 8:45 am]

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GENERAL SERVICES ADMINISTRATION

[Notice–MA–2019–06; Docket No. 2019–0002, Sequence No. 13]

Federal Travel Regulation (FTR); Relocation Allowances—Relocation Income Tax Allowance (RITA) Tables

AGENCY: Office of Government-wide Policy (OGP), General Services Administration (GSA).

ACTION: Notice.

SUMMARY: The purpose of this notice is to inform agencies that FTR Bulletin 19–05 pertaining to Relocation Allowances—Relocation Income Tax Allowance (RITA) Tables for employees who relocated prior to 2015 with reimbursements received in 2018 and new procedures for employees who relocated prior to 2015 with reimbursements received in 2019 or later is now available online at www.gsa.gov/ftrbulletin.

DATES: *Applicable:* This notice is applicable beginning July 2, 2019.

FOR FURTHER INFORMATION CONTACT: Mr. Rick Miller, Office of Asset and Transportation Management (MA), at 202–501–3822 or via email at rodney.miller@gsa.gov. Please cite FTR Bulletin 19–05.

SUPPLEMENTARY INFORMATION:

FTR Bulletin 19–05: Relocation Allowances—Relocation Income Tax Allowance (RITA) Tables for employees who relocated prior to 2015 with reimbursements received in 2018 and new procedures for employees who relocated prior to 2015 with reimbursements received in 2019 or later is now available and (1) provides the tables necessary to calculate the amount of a transferee's increased tax burden for employees who relocated before January 1, 2015 and received reimbursements during calendar year 2018; (2) informs agencies that for employees who relocated before January 1, 2015, and receive(d) reimbursements in calendar year 2019 or later, GSA has determined that agencies will follow the same procedures for those that relocated after January 1, 2015 in accordance with the current issuance of FTR Part 302–17; and (3) notifies agencies that GSA will no longer issue annual FTR Bulletins for RITA tax tables because all relocations with reimbursements received in 2019 or later will use tables published by the U.S. Internal Revenue Service (IRS), state/district, Puerto Rico, and local tax authorities to compute combined marginal tax rates.

FTR Bulletin 19–05 and all other FTR Bulletins can be found at www.gsa.gov/ftrbulletin.

Jessica Salmoiraghi,
Associate Administrator, Office of
Government-wide Policy.
[FR Doc. 2019–14063 Filed 7–1–19; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Healthcare Infection Control Practices Advisory Committee (HICPAC)

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of meeting.

SUMMARY: In accordance with the Federal Advisory Committee Act, the CDC announces the following meeting for the Healthcare Infection Control Practices Advisory Committee (HICPAC). This meeting is open to the public, limited only by audio phone lines available. The public is also welcome to listen to the meeting by dialing 800–369–3175, passcode: 7383308. A total of 200 lines will be available. Registration is required. To register for this call, please go to www.cdc.gov/hicpac. The public may submit written comments in advance of the meeting. Comments should be submitted in writing by email to the contact person listed below. The deadline for receipt of written public comment is August 6, 2019. All requests must contain the name, address, and organizational affiliation of the speaker, as well as the topic being addressed. Written comments should not exceed one single-spaced typed page in length. Written comments received in advance of the meeting will be included in the official record of the meeting.

DATES: The meeting will be held on August 20, 2019, 2:00 p.m. to 4:00 p.m., EDT.

ADDRESSES: Teleconference Number: 800–369–3175, passcode: 7383308.

FOR FURTHER INFORMATION CONTACT: Koo-Whang Chung, M.P.H., HICPAC, Division of Healthcare Quality Promotion, NCEZID, CDC, 1600 Clifton Road NE, Mailstop H16–3, Atlanta, Georgia 30329; Telephone (404) 498–0730; Email: HICPAC@cdc.gov.

SUPPLEMENTARY INFORMATION:

Purpose: The Committee is charged with providing advice and guidance to the Director, Division of Healthcare

Quality Promotion (DHQP), the Director, National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), the Director, CDC, the Secretary, Health and Human Services regarding (1) the practice of healthcare infection prevention and control; (2) strategies for surveillance, prevention, and control of infections, antimicrobial resistance, and related events in settings where healthcare is provided; and (3) periodic updating of CDC guidelines and other policy statements regarding prevention of healthcare-associated infections and healthcare-related conditions.

Matters To Be Considered: The agenda will include updates from the following HICPAC workgroups: The Healthcare Personnel Guideline Workgroup and the Neonatal Intensive Care Unit (NICU) Guideline Workgroup. Agenda items are subject to change as priorities dictate.

The Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Sherri Berger,

Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2019-14067 Filed 7-1-19; 8:45 am]

BILLING CODE 4163-19-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities; Proposed Collection; Public Comment Request; Performance Data for the Senior Medicare Patrol (SMP) Program; OMB# 0985-0024

AGENCY: Administration for Community Living, HHS.

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of information listed above. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish a notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This Extension without Change (ICR Ext) solicits comments on the information collection requirements

related to the Performance Data for the Senior Medicare Patrol (SMP) Program.

DATES: Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by September 3, 2019.

ADDRESSES: Submit electronic comments on the collection of information to: Phillip McKoy, *Phillip.McKoy@acl.hhs.gov*. Submit written comments on the collection of information to Administration for Community Living, Washington, D.C. 20201, Attention: Phillip McKoy

FOR FURTHER INFORMATION CONTACT: Phillip McKoy, Office of Healthcare Information and Counseling (OHIC), Administration for Community Living, Washington, DC 20201, Phone: 202-795-7397, Email: *Phillip.McKoy@acl.hhs.gov*.

SUPPLEMENTARY INFORMATION: Under the PRA, Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. "Collection of information" is defined as and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party.

The PRA requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, ACL is publishing a notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, ACL invites comments on our burden estimates or any other aspect of this collection of information, including:

(1) Whether the proposed collection of information is necessary for the proper performance of ACL's functions, including whether the information will have practical utility;

(2) the accuracy of ACL's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used to determine burden estimates;

(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 respondents, including through the use of automated collection techniques when appropriate, and other forms of information technology.

The purpose of this data collection is to collect annual performance data from

grantees. This data collection is required by Congress for program monitoring and Government Performance Results Act (GPRA) purposes. The data collected through this request is used by ACL and the SMP Programs to communicate with Congress and the public on SMP activities. There are 54 programs nationally, one in all 50 states, the District of Columbia, Puerto Rico, Guam and the U.S. Virgin Islands. It is imperative that data be collected to ensure that grantees' contacts are captured and that Medicare beneficiaries are given the tools to prevent, detect and report health care fraud, error and abuse. The respondents for this data collection are grantees, SMP team members, and volunteers who meet with Medicare beneficiaries in group settings and in one-on-one sessions to educate them on the importance of being aware of Medicare fraud, error and abuse, and having the knowledge to protect the Medicare system.

Under Public Law 104-208, the Omnibus Consolidated Appropriations Act of 1997, Congress established the Senior Medicare Patrol Projects in order to further curb losses to the Medicare program. The Senate Committee noted that retired professionals, with appropriate training, could serve as educators and resources to assist Medicare beneficiaries and others to detect and report error, fraud and abuse.

Among other requirements, it directed the Administration for Community Living to work with the Office of Inspector General (OIG) and the Government Accountability Office (GAO), to assess the performance of the program. The Administration for Community Living has worked with HHS/OIG to develop project-level performance measures. The HHS/OIG has collected SMP performance data and issued SMP performance reports since 1997. The OIG changed the reporting period from twice a year to once a year in 2008.

This information is used by ACL as the primary method for monitoring the SMP Projects. This information collection reports the number of active team members, number of community outreach activities, number of beneficiaries reached by education and outreach activities, and the number of dollars recoverable for the Medicare Trust Fund among other performance measures. The information from the current collection is reported by the OIG to Congress and the public.

Measures as required by Congress and the Government Performance Results Modernization Act of 2010 (GPRMA), are also supported in ACL tracking