

for grant funds online. A cross-agency work group developed the proposed SF-424 Project/Performance Site Location(s) form and data set that will serve as a common form for various grant programs.

This form will be mandatory for all of the 4040 collections except for 4040-0005 (Individual). The form includes the fields for the following FFATA required data elements: the primary location of performance and the unique

identifier (DUNS number) of the organization performing the project. The SF-424 Individual (4040-0005) does not require a DUNS number as individual applicants are not required to have DUNS numbers.

ESTIMATED ANNUALIZED BURDEN TABLE

Agency	Number of respondents	Number of responses per respondent	Total responses	Average burden per response in hours	Total burden hours
Total	120,722	1	120,722	30/60	60,361

Keith A. Tucker,
Office of the Secretary, Paperwork Reduction Act Clearance Officer.
 [FR Doc. 2011-31848 Filed 12-12-11; 8:45 am]
BILLING CODE 4151-AE-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Board of Scientific Counselors, National Center for Injury Prevention and Control: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Pub. L. 92-463) of October 6, 1972, that the Board of Scientific Counselors, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS), has been renewed for a 2-year period through November 5, 2013.

For information, contact Gwendolyn Cattledge, Ph.D., Designated Federal Officer, Board of Scientific Counselors, National Center for Injury Prevention and Control, CDC, HHS, 1600 Clifton Road NE., M/S F63, Atlanta, Georgia 30333, Telephone (770) 488-4655.

The Director, Management Analysis and Services Office, 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.

Dated: December 6, 2011.

Elaine L. Baker,
Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.
 [FR Doc. 2011-31896 Filed 12-12-11; 8:45 am]
BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-9996-N2]

Early Retiree Reinsurance Program

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice.

SUMMARY: This notice announces that CMS, based on the projected availability of funding under the Early Retiree Reinsurance Program (ERRP), is exercising its authority under the ERRP regulations at 45 CFR 149.45(a) to deny ERRP reimbursement requests, in their entirety, that include claims that are incurred after December 31, 2011. Therefore, plan sponsors must not include such claims in their Claim Lists and Summary Cost Data submitted in support of a reimbursement request. Should circumstances related to the availability of ERRP funding change, CMS may issue a new notice announcing approval of ERRP reimbursement request that include claims incurred after December 31, 2011.

DATES: *Effective Date:* This notice is effective December 9, 2011.

FOR FURTHER INFORMATION CONTACT: David Mlawsky, (410) 786-6851.

SUPPLEMENTARY INFORMATION:

I. Background

The Patient Protection and Affordable Care Act (Pub. L. 111-148, enacted on March 23, 2010) (the Affordable Care Act), included a provision that establishes the temporary Early Retiree Reinsurance Program (ERRP), which provides reimbursement to eligible sponsors of employment-based plans for a portion of the costs of providing health coverage to early retirees (and eligible spouses, surviving spouses, and dependents of such retirees). Section 1102(a)(1) of the Affordable Care Act

required the Secretary to establish the program within 90 days of enactment of the law (by June 21, 2010). In the May 5, 2010 **Federal Register** (75 FR 24450), we published an interim final regulation with comment period, implementing the program as of June 1, 2010. Section 1102(e) of the Affordable Care Act appropriates funding of \$5 billion for the temporary program. The regulation at 45 CFR 149.45(a) states that based on the projected or actual availability of program funding, the Secretary may deny applications that otherwise meet the requirements of this part, and if an application is approved, may deny all or part of a sponsor's reimbursement request. Under that authority, in the April 5, 2011 **Federal Register** (76 FR 18766), the Secretary announced that CMS would stop accepting applications for ERRP as of May 6, 2011.

II. Provisions of This Notice

CMS is exercising our authority under 45 CFR 149.45(a) to deny certain reimbursement requests based on the available amount remaining of the \$5 billion in appropriated program funding, and the rate at which it is being disbursed. We are now announcing that any Claim List submitted to ERRP in support of a reimbursement request, that includes one or more claims with an incurred date identified as January 1, 2012 or after, will be rejected in its entirety. Therefore, to avoid such a consequence, a plan sponsor must not submit any Claim List or Summary Cost Data that includes any claim with an incurred date identified as January 1, 2012 or later.

As specified in 45 CFR 149.325, a claim may be submitted to ERRP only after it has been incurred, and paid. Therefore, under this notice, and consistent with current policy, if a claim is incurred on or before December 31, 2011, but paid after December 31, 2011, the sponsor may submit the claim, but not until it has been paid. Existing guidance defining the date upon which various types of claims are considered

to have been incurred, and paid, for purposes of ERRP, are detailed at <http://www.errp.gov>, by clicking on Common Questions, and then clicking on Costs and Reimbursement.

We note that our decision to deny reimbursement requests that include claims with incurred dates of January 1, 2012, or after, is based on the actual availability of remaining appropriated ERRP funds and the rate at which reimbursements have been disbursed, as opposed to the projected amounts of ERRP reimbursements that applicants listed in their ERRP applications. Should circumstances related to the availability of ERRP funding change, we may decide it is appropriate to approve reimbursement requests that include claims incurred after December 31, 2011. If this occurs, we will provide such notice in the **Federal Register**.

III. Collection of Information Requirements

This document does not impose any new information collection and recordkeeping requirements. Consequently, it need not be reviewed by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995. However, the information collection requirements associated with the ERRP are currently approved under OMB control number 0938-1087, with an expiration date of September 30, 2014.

Authority: 45 CFR 149.45(a).

Dated: December 6, 2011.

Marilyn Tavenner,

Acting Administrator, Centers for Medicare & Medicaid Services.

[FR Doc. 2011-31920 Filed 12-9-11; 11:15 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Family and Youth Services Bureau; Proposed Information Collection Activity; Comment Request

Title: Personal Responsibility Education Program (PREP) Multi-Component Evaluation.

OMB No.: 0970-0398

Description: The Family and Youth Services Bureau (FYSB) and the Office

of Planning, Research, and Evaluation (OPRE), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), are proposing data collection activity as part of the PREP Multi-Component Evaluation.

The goals of the PREP Multi-Component Evaluation are to document how PREP programs are operationalized in the field, collect performance measure data for PREP programs, and assess the effectiveness of selected PREP-funded programs. The PREP Multi-Component Evaluation will make a significant contribution to the teen pregnancy prevention literature and will produce useful findings for state and federal policymakers, researchers, and program administrators.

The evaluation will include the following three primary, interconnected components, or “studies”:

1. *The Impact and Implementation Study (IS):* This study will involve impact and in-depth implementation evaluations of four to five specific PREP-funded sites. The study will consider how selected programs implemented key components of the PREP program, such as adult preparation subjects and substantial emphasis on abstinence and contraception and addressed key implementation considerations, such as adherence, dosage, quality of service delivery, and participant response. The impact of the selected PREP programs will be determined based on a random assignment (at the individual, classroom, or school level) evaluation design, which will involve baseline surveys and two follow-up surveys. This will allow short- and long-term impacts to be measured. One information collection request for a field instrument, focused on discussions with individuals involved in PREP programs (i.e. state-level PREP program coordinators, program directors, program staff, and school administrators) in order to inform site selection for this study, was approved on November 6, 2011.

2. *The Design and Implementation Study (DIS):* This study will be a broad descriptive analysis of how States designed and implemented PREP programs. The study will use multiple methods of information collection, including telephone interviews that will be conducted in every state operating a

PREP program, to better understand the general design and implementation of PREP programs. For this study, two rounds of interviews will be conducted: The first round of interviews, known as the “Design Survey”, will focus on how states designed programs, and the second round of interviews, known as the “Implementation Survey”, will focus on how states and sub-awardees actually implemented their programs. An information collection request has already been submitted to OMB for the “Design Survey” discussion guide.

3. *The Performance Analysis Study (PAS):* This study will focus on the development and collection of performance data for the purpose of semi-annual and annual reporting on state PREP performance outcomes, in order to determine if PREP grantees (i.e. states and sub-awardees) are meeting performance benchmarks related to the program’s mission and priorities. At present, there is only one information collection request for the PAS.

This 60 Day Notice covers (a) the baseline and administrative instruments for the Impact and Implementation Study; (b) all instruments for the Performance Analysis Study; and (c) a request for OMB to waive subsequent 60-day **Federal Register** notices pertaining to the PREP Multi-Component Evaluation.

Impact and Implementation Study Respondents: Respondents to the baseline survey will be participants in PREP-funded programs, including school students and other youth. Administrative respondents include schools and organizations that oversee PREP-funded programs or that have program and/or school participation data.

Performance Analysis Study Respondents: Performance measurement data collection instruments will be administered to individuals representing states (i.e. PREP state-level coordinators), as well as sub-awardees (i.e. program directors), program facilitators, other program staff, and program participants.

Annual Burden Estimates

The following instruments, part of the Impact and Implementation Study (IIS), were approved on November 6, 2011.

Instrument	Annual number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Discussion Guide for use with Macro-Level Coordinators	10	1	1	10
Discussion Guide for Use with Program Directors	20	2	2	80
Discussion Guide for Use with Program Staff	40	1	2	80