• Adoption and Implementation of HIT (including EHR);
• Attainment of Meaningful Use Requirements; and
• QI Measures (e.g., Healthy People 2020 clinical quality measures, PCMH recognition status, etc.).

The annual, non-competing continuation progress reports will describe each grantee’s progress in achieving key activity goals such as quality improvement, data access and exchange, efficiency and effectiveness of network services, and the ability to track and monitor patient outcomes, as well as emerging needs, challenges and barriers encountered, customer satisfaction, and plans to meet goals for the next year. Grantees will submit their work plan updates and annual, non-competing continuation progress report each fiscal year of the grant; the submission and subsequent HRSA approval of each report triggers the budget period renewal and release of each subsequent year of funding. The estimated total number of burden hours is 1662.

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.

The annual estimate of burden is as follows:

<table>
<thead>
<tr>
<th>Form name</th>
<th>Number of respondents</th>
<th>Responses per respondent</th>
<th>Total responses</th>
<th>Hours per response</th>
<th>Total burden hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work Plan Update</td>
<td>30</td>
<td>1</td>
<td>30</td>
<td>10.9</td>
<td>327</td>
</tr>
<tr>
<td>Annual Progress Report/Interim Evaluation Progress Report</td>
<td>30</td>
<td>1</td>
<td>30</td>
<td>44.5</td>
<td>1,335</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td></td>
<td></td>
<td></td>
<td>1,662</td>
</tr>
</tbody>
</table>

**ADDRESSSES:** Submit your comments to the desk officer for HRSA either by email to OIRA_submission@omb.eop.gov or by fax to 202–395–5806. Please direct all correspondence to the “attention of the desk officer for HRSA.”

**Deadline:** Comments on this ICR should be received within 30 days of this notice.


Bahar Niakan,
Director, Division of Policy and Information Coordination.

[FR Doc. 2012–29496 Filed 12–5–12; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

**Proposed Collection: Comment Request (60-Day FRN): The Agricultural Health Study: A Prospective Cohort Study of Cancer and Other Disease Among Men and Women in Agriculture (NCI)**

**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 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 to address 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) The quality, utility, and clarity of the information to be collected; and (4) 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 in writing, request more information on the proposed project, or to obtain a copy of the data collection plans and instruments, contact: Jane Hoppin, Sc.D., Epidemiology Branch, National Institute of Environmental Health Sciences, NIH, 111 T.W. Alexander Drive, PO Box 12233, MD A3–05, Research Triangle Park, NC 27709, or call non-toll-free number 919–541–7622, or email your request, including your address to: hoppin1@niehs.nih.gov.

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:** The Agricultural Health Study: A Prospective Cohort Study of Cancer and Other Disease Among Men and Women in Agriculture, 0925–0406, Expiration Date 5/31/2013—REVISION—National Institute of Environmental Health Sciences (NIEHS), National Institutes of Health (NIH).

**Need and Use of Information Collection:** The purpose of this information collection is to continue and complete updating the occupational and environmental exposure information as well as medical history information for licensed pesticide applicators and their spouses enrolled in the Agricultural Health Study. This represents a request to complete phase IV (2013–2015) of the study and to continue and complete the buccal cell collection and the Study of Biomarkers of Exposures and Effects in Agriculture (BEEA). The primary objectives of the study are to determine the health effects resulting from occupational and environmental exposures in the agricultural environment. The phase IV follow up data will be collected by using one of three methods of the cohort member’s choosing: self-administered computer assisted web survey (CAWI); self-administered paper-and-pen (Paper/pen); or an interviewer administered computer assisted telephone interview (CATI). Proxy interviews for those cohort members unable to complete the follow up will be completed by using one of the three methods as well. Secondary objectives include evaluating...
biological markers that may be associated with agricultural exposures and risk of certain types of cancer. Questionnaire data will be collected by using computer assisted telephone interview (CATI) and in-person interview (CAPI) systems for telephone screeners and home visit interviews, respectively. Some respondents will also be asked to participate in the collection of biospecimens including blood, urine, and buccal cells (loose cells from the respondent’s mouth). The findings will provide valuable information concerning the potential link between agricultural exposures and cancer and other chronic diseases among agricultural Health Study cohort members, and this information may be generalized to the entire agricultural community. OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 10,465.

Estimated Annualized Burden Hours

<table>
<thead>
<tr>
<th>Type of respondent</th>
<th>Form</th>
<th>Number of respondents</th>
<th>Number of responses per respondent</th>
<th>Average time per response (in hours)</th>
<th>Total annual burden hour</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private and Commercial Applicators and Spouses.</td>
<td>Reminder, Missing, and Damaged Scripts for Buccal Cell.</td>
<td>100</td>
<td>1</td>
<td>5/60</td>
<td>8</td>
</tr>
<tr>
<td>Private Applicators</td>
<td>BEEA CATI Screener</td>
<td>480</td>
<td>1</td>
<td>20/60</td>
<td>160</td>
</tr>
<tr>
<td>Private Applicators</td>
<td>BEEA Home Visit CAPI, Blood, &amp; Urine x 1.</td>
<td>160</td>
<td>1</td>
<td>30/60</td>
<td>80</td>
</tr>
<tr>
<td>Private Applicators</td>
<td>BEEA Schedule Home Visit Script ...</td>
<td>20</td>
<td>3</td>
<td>5/60</td>
<td>5</td>
</tr>
<tr>
<td>Private Applicators</td>
<td>BEEA Home Visit CAPI, Blood, &amp; Urine x 3.</td>
<td>20</td>
<td>3</td>
<td>30/60</td>
<td>30</td>
</tr>
<tr>
<td>Private Applicators</td>
<td>Paper/pen, CAWI or CATI</td>
<td>13,855</td>
<td>1</td>
<td>25/60</td>
<td>5,773</td>
</tr>
<tr>
<td>Spouses</td>
<td>Paper/pen, CAWI or CATI</td>
<td>10,201</td>
<td>1</td>
<td>25/60</td>
<td>4,250</td>
</tr>
<tr>
<td>Proxy</td>
<td>Paper/pen, CAWI or CATI</td>
<td>635</td>
<td>1</td>
<td>15/60</td>
<td>159</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>10,465</td>
</tr>
</tbody>
</table>

**Place:** National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892. (Telephone Conference Call).

**Contact Person:** Peter B. Guthrie, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4142, MSC 7850, Bethesda, MD 20892, (301) 435–1239, guthriep@csr.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle. (Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: November 30, 2012

Carolyn A. Baum,
Program Analyst, Office of Federal Advisory Committee Policy.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

National Institutes of Health

Center for Scientific Review; Notice of Closed Meeting

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 meeting.

The meeting 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 materials, 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 Advisory Neurological Disorders and Stroke Council.

**Date:** January 31–February 1, 2013.

**Open:** January 31, 2013, 8:00 a.m. to 2:45 p.m.

**Agenda:** Report by the Director, NINDS; Report by the Associate Director for Extramural Research; and Administrative and Program Developments.

**Place:** National Institutes of Health, Building 31, 1 Center Drive, C Wing, Conference Room 6, Bethesda, MD 20892.

**Closed:** January 31, 2013, 2:45 p.m. to 5:00 p.m.

**Agenda:** To review and evaluate grant applications.