3. Call the Reports Clearance Office at (410) 786–1326.

FOR FURTHER INFORMATION CONTACT: Reports Clearance Office at (410) 786–1326.

SUPPLEMENTARY INFORMATION:

Contents

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

CMS–10463 Cooperative Agreement To Support Navigators in Federally-Facilitated and State Partnership Exchanges

CMS–10521 Improving Quality of Care in Medicaid and CHIP through Increased Access to Preventive Services, State Survey

Under the 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. The term ''collection of information'' is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA requires federal agencies to publish a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice.

Information Collection

1. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges; *Use:* Section 1311(i) of the Affordable Care Act requires Exchanges to establish a Navigator grant program as part of its function to provide consumers with assistance when they need it. Navigators will assist consumers by providing education about and facilitating selection of qualified health plans (QHPs) within Exchanges, as well as other required duties. Section 1311(i) requires that an Exchange operating as of January 1, 2014, must establish a Navigator Program under which it awards grants to eligible individuals or entities who satisfy the requirements to be Exchange Navigators. For Federally-facilitated Exchanges (FFE) and State Partnership Exchanges (SPEs), we will be awarding these grants. Navigator awardees must provide weekly, monthly, quarterly, and annual progress reports to us on the activities performed during the grant period and any sub-awardees receiving funds. *Form Number:* CMS–10463 (OCN: 0938–1215); *Frequency:* Annually; Quarterly, Monthly, Weekly; *Affected Public:* Private sector; *Number of Respondents:* 99; *Total Annual Responses:* 5,148; *Total Annual Hours:* 35,640. (For policy questions regarding this collection contact Julia Dreier at 301–492–4123.)

2. *Type of Information Collection Request:* New collection (Request for a new OMB control number); *Title of Information Collection:* Improving Quality of Care in Medicaid and CHIP through Increased Access to Preventive Services State Survey; *Use:* This survey will be used to gain a better understanding of state efforts to increase utilization of preventive services and to develop resources (including educational and outreach resources) to help states increase utilization of preventive services. The results will provide a baseline on regarding coverage of preventive services and will help us identify ways to assist states with materials focusing on prevention and technical assistance. *Form Number:* CMS–10521 (OCN: 0938-New); *Frequency:* Once; *Affected Public:* State, Local, or Tribal Governments; *Number of Respondents:* 51; *Total Annual Responses:* 51; *Total Annual Hours:* 128. (For policy questions regarding this collection contact Mary Beth Hance at 410–786–4299).

Dated: April 8, 2014.

Martique Jones,

Deputy Director, Regulations Development Group, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2014–08209 Filed 4–10–14; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities; Proposed Collection; Comment Request; Reinstatement With Changes to Title III Supplemental Form to the Financial Status Report

AGENCY: Administration for Community Living, HHS

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information and to allow 60 days for public comment in response to the notice. This notice solicits comments on the information collection requirements relating to the Supplemental Form to the Financial Status Report for all ACL/AoA Title III Grantees.

DATES: Submit written or electronic comments on the collection of information by June 10, 2014.

ADDRESSES: Submit electronic comments on the collection of information to: *Alice.Kelsey@acl.hhs.gov.* Submit written comments on the collection of information to the Administration for Community Living, attn: Alice Kelsey, 233 N. Michigan Ave., Suite 790, Chicago, IL 60661.

FOR FURTHER INFORMATION CONTACT: Alice Kelsey, Financial Operations Specialist, Administration for Community Living, attn: Alice Kelsey, 233 N. Michigan Ave., Suite 790, Chicago, IL 60661.

SUPPLEMENTARY INFORMATION: Under the 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. ''Collection of information'' is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency request or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal agencies to provide a 60 day notice in the **Federal Register** concerning each proposed collection of information, before submitting the collection to OMB for approval. To comply with this requirement, ACL is publishing notice of the proposed collection of information set forth in this document. With respect to the following collection of information, ACL invites comments on: (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; (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 template may be found on the ACL Web site at *http://www.acl.gov/NewsRoom/NewsInfo/docs/FFR-ACL-AoA-TitleIII-Supplemental_SF-425.pdf.*

The supplemental form to the Financial Status Report for all ACL/AoA Title III Grantees provides an understanding of how projects funded by the Older Americans Act are being administered by grantees, in conformance with legislative requirements, pertinent Federal regulations and other applicable instructions and guidelines issued by the Administration for Community Living (ACL). This information will be used for Federal oversight of Title III projects. ACL estimates the burden of this collection of information as follows: 56 State Units on Aging (SUA) respond semi-annually which should have an average burden of 2 hours per grantee for a total of 112 hours per submission.

Dated: April 8, 2014.

Kathy Greenlee,

Administrator and Assistant Secretary for Aging.

[FR Doc. 2014–08200 Filed 4–10–14; 8:45 am]

BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Paralysis Resource Center

Summary: The Administration for Community Living (ACL) is proud to announce the Paralysis Resource Center (PRC) is moving to ACL as a result of the 2014 budget recently signed by President Obama.

ACL was formed in April 2012 to advance policy and implement programs that support the rights of older Americans and people with disabilities to live in their communities throughout their lifespan. The mission of the PRC aligns perfectly with ACL's mission and provides the Administration with important new programmatic opportunities to help persons with physical disabilities as well as older adults and people with developmental disabilities.

The PRC provides a comprehensive, national source of information for people living with paralysis and their families to promote health, foster involvement in the community, and improve quality of life. Resources on spinal cord injury, paralysis and mobility-related disabilities, including information and referral by phone and email are available in English and Spanish. The PRC currently operates through a cooperative agreement between the Christopher & Dana Reeve Foundation and the U.S. Department of Health and Human Services (HHS) Centers for Disease Control and Prevention (CDC). ACL will be working with the CDC on transitioning the program to ACL.

Program Name: Paralysis Resource Center.

Award Amount: Up to $6,683,000.

Project Period: 6/1/2014 to 5/31/2015.

Award Type: Cooperative Agreement.

Statutory Authority: This program is authorized under Section 301 of the Public Health Service Act (42 U.S.C. 241, 247b(k)(2)).

Catalog of Federal Domestic Assistance (CFDA) Number: 93.325 Discretionary Projects.

Dates:

- *Application Submission deadline:* May 12, 2014.
- The anticipated budget period start date is June 1, 2014.

I. Program Description

The purpose of the program is to provide funding to support a national Paralysis Resource Center to improve the health and quality of life of individuals living with paralysis and their families by raising awareness of and facilitating access to a broad range of services relevant to individuals with paralysis. The Paralysis Resource Center will work to remove environmental barriers to health for individuals living with paralysis and expand the knowledge base of proven, successful health promotion strategies leading to improved physical and emotional health for this population, improving the understanding of the true burden of paralysis by disease category, injury, and quality of life indicators and to measure secondary complications, and conducting evaluation projects to translate clinical rehabilitation treadmill therapy to community-based settings and training health care professionals to deliver this intervention. This program addresses the ''Healthy People 2020'' focus area(s): Access to Health Services; Adolescent Health; Disability and Health; Early and Middle Childhood; Educational and Community-Based Programs; Health Communication and Health IT; Healthcare-Associated Infections; Nutrition and Weight Status; Older Adults; Physical Activity and Fitness; Quality of Life and Well-Being; Social Determinants of Health; and Tobacco Use.

Justification for the Exception to Competition

The PRC currently operates through a cooperative agreement between the Christopher & Dana Reeve Foundation and the U.S. Department of Health and Human Services (HHS) Centers for Disease Control and Prevention (CDC). To ensure uninterrupted continuation of the grant goals and objectives and given the administrative burden of holding an open competition and awarding a new grant given the short time since the funds were appropriated, ACL will award a one year continuation to the incumbent Paralysis Resource Center at the Christopher & Dana Reeve Foundation. Failure to move forward with this deviation would disrupt ACL's ability to improve and advance the PRC program as one cohesive and consistent program nationally.

- *Eligible Applicants:* Incumbent Paralysis Resource Center with award expiration date of 5/31/14.

II. Evaluation Criteria

Information previously provided in semi-annual reports, as well as information in the non-competing extension application will be considered to determine satisfactory progress of the grantee project and ensure that proposed activities are within the approved scope and budget of the grant. Areas that will be evaluated include:

A. *Project Relevance & Current Need.*
B. *Approach.*
C. *Budget.*
D. *Project Impact.*
E. *Organizational Capacity.*

III. Application and Submission Requirements

A. SF 424—Application for Federal Assistance.
B. SF 424A—Budget Information.
C. Separate Budget Narrative/Justification.
D. SF 424B—Assurances. **Note:** Be sure to complete this form according to instructions.
E. Lobbying Certification.
F. Program narrative—no more than 10 pages.

- The project narrative must be submitted to GrantSolutions. The narrative must be submitted in the following format:
- Maximum number of pages: 10—If the narrative exceeds the page limit, only the first pages which are within the page limit will be reviewed.
- Font size: 12 point unreduced; Times New Roman is preferred.