

must be clearly labeled "Confidential," and must comply with FTC Rule 4.9(c). In particular, the written request for confidential treatment that accompanies the comment must include the factual and legal basis for the request, and must identify the specific portions of the comment to be withheld from the public record. See FTC Rule 4.9(c). Your comment will be kept confidential only if the General Counsel grants your request in accordance with the law and the public interest. Once your comment has been posted on the public FTC Web site—as legally required by FTC Rule 4.9(b)—we cannot redact or remove your comment from the FTC Web site, unless you submit a confidentiality request that meets the requirements for such treatment under FTC Rule 4.9(c), and the General Counsel grants that request.

Visit the FTC Web site to read this Notice. The FTC Act and other laws that the Commission administers permit the collection of public comments to consider and use in this proceeding as appropriate. The Commission will consider all timely and responsive public comments that it receives on or before August 7, 2017. For information on the Commission's privacy policy, including routine uses permitted by the Privacy Act, see <https://www.ftc.gov/site-information/privacy-policy>.

**David C. Shonka,**

*Acting General Counsel.*

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**BILLING CODE 6750-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Healthcare Research and Quality

#### Notice of Meeting

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ), HHS.

**ACTION:** Notice of one AHRQ Subcommittee Meeting by Telephone Conference.

**SUMMARY:** The subcommittee listed below is part of AHRQ's Health Services Research Initial Review Group Committee. Grant applications are to be reviewed and discussed at this meeting.

*Name of Subcommittee:* Health Care Research Training 2.

**DATES:** July 13, 2017 (Open from 1:00 p.m. to 1:30 a.m. and closed for remainder of the meeting).

*Place:* Agency for Healthcare Research and Quality, 5600 Fishers Lane, Conference Room TBD, Rockville, MD 20857.

**FOR FURTHER INFORMATION CONTACT:** (to obtain a roster of members, agenda or minutes of the non-confidential portions of this meeting.)

Mrs. Bonnie Campbell, Committee Management Officer, Office of Extramural Research Education and Priority Populations, AHRQ, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 427-1554.

**SUPPLEMENTARY INFORMATION:** This meeting will be closed to the public in accordance with 5 U.S.C. App. 2 section 10(d), 5 U.S.C. 552b(c)(4), and 5 U.S.C. 552b(c)(6). In accordance with section 10 (a)(2) of the Federal Advisory Committee Act (5 U.S.C. App. 2), AHRQ announces the meeting of the scientific peer review group listed above, which is a subcommittee of AHRQ's Health Services Research Initial Review Group Committee. This subcommittee meeting will be closed to the public in accordance with the provisions set forth in 5 U.S.C. App. 2 section 10(d), 5 U.S.C. 552b(c)(4), and 5 U.S.C. 552b(c)(6) 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.

Agenda items for these meetings are subject to change as priorities dictate.

**Sharon B. Arnold,**

*Deputy Director.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Office for State, Tribal, Local and Territorial Support (OSTLTS)

In accordance with Presidential Executive Order No. 13175, November 6, 2000, and the Presidential Memorandum of November 5, 2009, and September 23, 2004, Consultation and Coordination with Indian Tribal Governments, CDC/Agency for Toxic Substances and Disease Registry (ATSDR), announces the following meeting and Tribal Consultation Session:

*Name:* CDC/ATSDR Tribal Advisory Committee (TAC) Meeting and 17th Biannual Tribal Consultation Session.

*Dates And Times:*  
August 8, 2017

- 8:00–9:00 a.m., CDT—Tribal Caucus (Open only to elected tribal leaders and by invitation)
- 9:00 a.m.–5:00 p.m., CDT—TAC Meeting (Open to the public) August 9, 2017
- 8:00–9:00 a.m., EDT—Tribal Caucus (Open only to elected tribal leaders and by invitation)
- 9:00 a.m.–3:00 p.m., CDT—TAC Meeting (Open to the public)
- 3:00–5:00 p.m., CDT—Tribal Consultation Session (Open to the public).

Please note that the TAC reserves the right to call a tribal caucus at any time during the public portions of the TAC meeting, and those who are not elected tribal leaders will be asked to step out of the meeting room during any ad hoc caucus periods.

*Place:* The CDC/ATSDR TAC Meeting and Biannual Tribal Consultation Session will be held at the Artesian Hotel, 1001 W. 1st Street, Sulphur, OK 73086.

*Status:* The meeting and consultation session are in-person only and open to the public except during tribal caucus as described in the time and date section. Attendees must pre-register for the TAC meeting and/or Tribal Consultation Session by 5:00 p.m. (EDT) on Friday, July 7, 2017, at the following link: [www.cdc.gov/tribal/meetings.html](http://www.cdc.gov/tribal/meetings.html).

*Purpose:* The purpose of the TAC and consultation meetings is to advance CDC/ATSDR support for and collaboration with American Indian and Alaska Native (AI/AN) tribes and to improve the health of AI/AN tribes by pursuing goals that include assisting in eliminating the health disparities faced by AI/AN tribes; ensuring that access to critical health and human services and public health services is maximized to advance or enhance the social, physical, and economic status of AI/ANs; and promoting health equity for all Indian people and communities. To advance these goals, CDC/ATSDR conducts government-to-government consultations with elected tribal officials or their authorized representatives. Consultation is an enhanced form of communication that emphasizes trust, respect, and shared responsibility. It is an open and free exchange of information and opinion among parties that leads to mutual understanding.

*Matters for Discussion:* This TAC Meeting and Biannual Tribal Consultation Session will provide opportunities for tribal leaders to speak openly about the public health issues affecting their tribes. These meetings will include discussions about tribal

priorities for the CDC/ATSDR, public health capacity in Indian Country, AI/AN public health concerns, budget and funding opportunities, and programmatic highlights, among other topics. The discussion topics are subject to revision as priorities change.

Tribes also will have an opportunity to present testimony about tribal health issues during the Tribal Consultation Session. All tribal leaders are encouraged to submit written testimony by 5:00 p.m. (EDT) Friday, July 7, 2017, to Captain Carmen Clelland, Associate Director for the Tribal Support Unit, OSTLTS, via mail to 4770 Buford Highway NE., MS E-70, Atlanta, GA 30341-3717, or email to [TribalSupport@cdc.gov](mailto:TribalSupport@cdc.gov). Tribal leaders can find guidance to assist in developing tribal testimony for CDC/ATSDR at [www.cdc.gov/tribal/consultation/index.html](http://www.cdc.gov/tribal/consultation/index.html).

Based on the number of tribal leaders giving testimony and the time available, it may be necessary to limit the time for each presenter. However, all submitted and written testimony will be entered in to the record.

Information about the TAC, CDC/ATSDR's Tribal Consultation Policy, and previous meetings can be found at [www.cdc.gov/tribal](http://www.cdc.gov/tribal).

Contact person for more information: Captain Carmen Clelland, Associate Director, Tribal Support Unit, at [ccllland@cdc.gov](mailto:ccllland@cdc.gov) or 404.498.2205.

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.

**Elaine L. Baker,**  
Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Comment Request**

**Proposed Projects**

*Title:* Information Comparison with Insurance Data.

*OMB No.:* 0970-0342.

*Description:* The Deficit Reduction Act of 2005 amended Section 452 of the Social Security Act (the Act) to authorize the Secretary, through the Federal Parent Locator Service (FPLS), to conduct comparisons of information concerning individuals owing past-due child support with information maintained by insurers (or their agents) concerning insurance claims, settlements, awards, and payments. 42 U.S.C. 652(m)(1).

An insurer may choose to participate in the data comparison using one of the following methods:

- An insurer submits information concerning claims, settlements, awards, and payments to the federal Office of Child Support and Enforcement (OCSE).

OCSE compares the information with parents who owe past-due support.

- OCSE sends a file containing information about parents who owe past-due support to the insurer, or their agent to compare with their claims, settlements, awards, and payments. The insurer or their agent sends the matches to OCSE.

On a daily basis, OCSE sends the results of the comparison in the Insurance Match Response Record to child support agencies responsible for collecting past-due support. Child support agencies use the matches to collect past-due support from the insurance proceeds.

The information collection activities pertaining to the information comparison with insurance data are authorized by:

(1) 42 U.S.C. 652(a)(9) which requires the federal Office of Child Support Enforcement (OCSE) to operate the FPLS established by 42 U.S.C. 653(a)(1); and

(2) 42 U.S.C. 652(m) which authorizes OCSE, through the FPLS, to compare information concerning individuals owing past-due support with information maintained by insurers (or their agents) concerning insurance claims, settlements, awards, and payments, and to furnish information resulting from the data matches to the state child support agencies responsible for collecting child support from the individuals.

*Respondents:* Insurers or their agents, including the U.S. Department of Labor and state agencies administering workers' compensation programs, and the Insurance Services Office (ISO).

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Insurance Match File: Monthly Reporting Electronically .....	22	12	0.083	22
Insurance Match File: Weekly Reporting Electronically .....	7	52	0.083	30
Insurance Match File: Daily Reporting Electronically .....	2	251	0.083	42
Match File: Daily Reporting Manually .....	80	251	0.1	2,008
<b>Total</b> .....	.....	.....	.....	<b>2,102</b>

*Estimated Total Annual Burden Hours:* 2,102 hours.

In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above.

Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration, Office of Planning, Research and Evaluation, 330 C Street SW., Washington, DC 20201, Attn: ACF Reports Clearance Officer. Email address [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). All

requests should be identified by the title of the information collection.

The department specifically requests comments on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the