

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Determination Concerning a Petition To Add a Class of Employees to the Special Exposure Cohort

**AGENCY:** National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention, Department of Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** HHS gives notice of a determination concerning a petition to add a class of employees from the Pantex Plant in Amarillo, Texas, to the Special Exposure Cohort (SEC) under the Energy Employees Occupational Illness Compensation Program Act of 2000 (EEOICPA). On September 30, 2013, the Secretary of HHS determined that the following class of employees does not meet the statutory criteria for addition to the SEC as authorized under EEOICPA:

All employees of the Department of Energy, its predecessor agencies, and their contractors and subcontractors who worked at the Pantex Plant in Amarillo, Texas, from January 1, 1951, through December 31, 1957.

**FOR FURTHER INFORMATION CONTACT:** Stuart L. Hinnefeld, Director, Division of Compensation Analysis and Support, National Institute for Occupational Safety and Health (NIOSH), 4676 Columbia Parkway, MS C-46, Cincinnati, OH 45226, Telephone 1-877-222-7570. Information requests can also be submitted by email to [DCAS@CDC.GOV](mailto:DCAS@CDC.GOV).

#### SUPPLEMENTARY INFORMATION:

**Authority:** 42 U.S.C. 7384q.

#### John Howard,

*Director, National Institute for Occupational Safety and Health.*

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**BILLING CODE** 4163-19-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[30Day-13-0612]

### Agency Forms Undergoing Paperwork Reduction Act

The Centers for Disease Control and Prevention (CDC) publishes a list of

information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call (404) 639-7570 or send an email to [omb@cdc.gov](mailto:omb@cdc.gov). Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

#### Proposed Project

Well-Integrated Screening and Evaluation for Women Across the Nation (WISEWOMAN) Reporting System (OMB #0920-0612, exp. 1/31/2014)—Revision—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

The WISEWOMAN program (Well-Integrated Screening and Evaluation for Women Across the Nation), administered by the Centers for Disease Control and Prevention (CDC), was established to examine ways to improve the delivery of services for women who have limited access to health care and elevated risk factors for cardio vascular disease (CVD). The program focuses on reducing CVD risk factors and provides screening services for selected risk factors such as elevated blood cholesterol, hypertension, and abnormal blood glucose levels. The program also provides women with referrals to lifestyle programs and medical care. The WISEWOMAN program currently provides services to approximately 45,000 women who are jointly enrolled in the National Breast and Cervical Cancer Early Detection Program (NBCCEDP), also administered by CDC. CDC collects information from WISEWOMAN awardees through the “WISEWOMAN Reporting System” (OMB No. 0920-0612, exp. 1/31/2014).

New WISEWOMAN cooperative agreements were awarded in 2013 and CDC seeks to continue information collection for three years, with revisions. The new funding period will reflect an increased emphasis on efficient oversight of program awardees and documenting program outcomes. As a result, the WISEWOMAN information collection will be revised to support updated program goals. Revisions to be implemented include a reduction in the frequency of progress report

submission—from twice per year to once per year—and changes to the content of the Minimum Data Element (MDE) submissions. This will result in an overall net decrease in respondent burden. The first reports based on the revised reporting requirements will be submitted to CDC in April 2014.

The hardcopy progress report provides a narrative summary of each awardee’s objectives and the activities undertaken to meet program goals, including public education and outreach. The estimated burden per response is 16 hours.

The MDE include information that describes risk factors for the women served in each program and the number and type of lifestyle program sessions they attend. MDE information has previously been submitted to CDC in two electronic transmissions. The burden for Screening and Assessment MDE was estimated at 16 hours per response and the burden for Lifestyle Program MDE was estimated at 8 hours per response.

Upon OMB approval of the proposed Revision, the MDE will be submitted as a single electronic file with a combined estimated burden per response of 24 hours. The total number of MDE variables will increase from 66 to 85. The number of variables relating to Lifestyle Programs will decrease and the number of variables relating to Screening and Assessment will increase.

CDC will continue to use the information collected from WISEWOMAN awardees to support continuous program monitoring and improvement activities, evaluation, and assessment of program outcomes. The overall program evaluation is designed to demonstrate how WISEWOMAN can obtain more complete health data on vulnerable populations, promote public education about disease incidence, cardiovascular disease risk-factors, health promotion, to improve the availability of screening and diagnostic services for under-served women, ensure the quality of services provided to under-served women, and develop strategies for improved interventions. Participation in this information collection is required as a condition of cooperative agreement funding. There are no costs to respondents other than their time.

The total annualized burden hours are 1,344.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response
WISEWOMAN Awardees .....	Screening and Assessment and Lifestyle Program MDE.	21	2	24
	Annual Progress Report .....	21	1	16

**Leroy A. Richardson,**  
*Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Advisory Committee to the Director (ACD), Centers for Disease Control and Prevention (CDC)**

*Cancellation:* This notice was published in the **Federal Register** on October 2, 2013, Volume 78, Number 191, page 60876. The meeting previously scheduled to convene on October 24, 2013, has been cancelled.

*Contact Person for More Information:* Gayle Hickman, Committee Management Specialist, Office Chief of Staff, CDC, 1600 Clifton Road NE., Mail Stop D-14, Atlanta, Georgia 30303, Telephone: (404) 639-7158, Fax: (404) 639-7212, Email: [ghickman@cdc.gov](mailto:ghickman@cdc.gov).

This notice is published less than the required 15 days prior to the start of the announced meeting, in accordance with Section 102-3.150(b) of the GSA Final Rule (2001) that allows for exceptions to the meeting notification time requirement. Section 102-3.150(b) states the following: "In exceptional circumstances, the agency or an independent Presidential advisory committee may give less than 15 calendar days' notice, provided that the reasons for doing so are included in the advisory committee meeting notice published in the **Federal Register**."

In this case, the agency is giving less than 15 days' notice due to the recent furlough status of United States Federal Government, including the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, from October 1-16, 2013.

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**

**Centers for Disease Control and Prevention**

**Subcommittee for Dose Reconstruction Reviews (SDRR), Advisory Board on Radiation and Worker Health (ABRWH or the Advisory Board), National Institute for Occupational Safety and Health (NIOSH)**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC), announces the following meeting for the aforementioned subcommittee:

*Time and Date:* 10:00 a.m.–5:00 p.m. Eastern Time, November 20, 2013.

*Place:* Teleconference.

*Status:* Open to the public, without a verbal public comment period. The public is welcome to submit written comments in advance of the meeting, to the contact person below. Written comments received in advance of the meeting will be included in the official record of the meeting. The public is also welcome to listen to the meeting by joining the teleconference at the USA toll-free, dial-in number, 1-866-659-0537 and the passcode is 9933701.

*Background:* The Advisory Board was established under the Energy Employees Occupational Illness Compensation Program Act of 2000 to advise the President on a variety of policy and technical functions required to implement and effectively manage the new compensation program. Key functions of the Advisory Board include providing advice on the development of

probability of causation guidelines that have been promulgated by the Department of Health and Human Services (HHS) as a final rule; advice on methods of dose reconstruction, which have also been promulgated by HHS as a final rule; advice on the scientific validity and quality of dose estimation and reconstruction efforts being performed for purposes of the compensation program; and advice on petitions to add classes of workers to the Special Exposure Cohort (SEC).

In December 2000, the President delegated responsibility for funding, staffing, and operating the Advisory Board to HHS, which subsequently delegated this authority to CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, and will expire on August 3, 2015.

*Purpose:* The Advisory Board is charged with (a) providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; (b) providing advice to the Secretary, HHS, on the scientific validity and quality of dose reconstruction efforts performed for this program; and (c) upon request by the Secretary, HHS, advise the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class. The Subcommittee for Dose Reconstruction Reviews was established to aid the Advisory Board in carrying out its duty to advise the Secretary, HHS, on dose reconstruction.

*Matters To Be Discussed:* The agenda for the Subcommittee meeting includes: Dose reconstruction program quality management and assurance activities, including: Current findings from NIOSH internal dose reconstruction blind reviews; and discussion of dose reconstruction cases under review (set 9, and Portsmouth, Hanford, and Oak Ridge National Laboratory cases from sets 10-13).

The agenda is subject to change as priorities dictate.