ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Type of respondent	Form name	Number of respondents	Number of responses per respondent (in hours)	Average burden per response (in hours)
IRATB Proficiency in Arsenic Speciation (PAsS) Program				
Public Health Labs	PAsS Enrollment Form	28	1	10/60
	PAsS Data Submission Form	28	4	10/60
IRATB Ensuring the Quality of Urinary Iodine Procedures (EQUIP)				
Public Health Labs	EQUIP Enrollment Form	240	1	10/60
	EQUIP Data Submission Form	240	3	10/60
IRATB Lead and Multielement Proficiency (LAMP) Testing Program				
Public Health Labs	LAMP Enrollment Form	226	1	10/60
	LAMP Data Submission Form	226	4	10/60
NSMBB Newborn Screening and Quality Assurance Program (NSQAP)				
Domestic NBS Labs	NSQAP Enrollment Form	71	1	10/60
	NSQAP Data Submission Portal Quality Control (QC)	71	2	45/60
	NSQAP Data Submission Portal Biochemical (Proficiency Testing) PT.	71	3	45/60
	NSQAP Data Submission Portal Molecular PT	71	3	45/60
International NBS Labs	NSQAP Enrollment Form	568	1	10/60
	NSQAP Data Submission Portal QC	568	2	45/60
	NSQAP Data Submission Portal Biochemical PT	568	3	45/60
	NSQAP Data Submission Portal Molecular PT	568	3	45/60
NBS Test Manufacturers	NSQAP Enrollment Form	32	1	10/60
	NSQAP Data Submission Portal QC	32	2	45/60
	NSQAP Data Submission Portal Biochemical PT	32	3	45/60
	NSQAP Data Submission Portal Molecular PT	32	3	45/60

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–22–22FC]

Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled ''Assessing the Capacity of Vector Management Programs in the United States to Provide Comprehensive Community-level Tick Management Services'' to the Office of Management and budget (OMB) for review and approval. CDC previously published a ''Proposed Data Collection Submitted for Public Comment and Recommendations'' notice on May 13, 2022 to obtain comments from the public and affected agencies. CDC did not receive comments related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.,* permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570. Comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to *www.reginfo.gov/public/do/PRAMain.* Find this particular information collection by selecting ''Currently under 30-day Review—Open for Public Comments'' or by using the search function. Direct written comments and/or suggestions regarding the items contained in this notice to: Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW, Washington, DC 20503 or by fax to (202) 395–5806. Provide written comments within 30 days of notice publication.

Proposed Project

Assessing the Capacity of Vector Management Programs in the U.S. to Provide Comprehensive Community-level Tick Management Services—New—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Previous surveys have focused on private pest management firms or agencies in a single state. The overall capacity for publicly-funded comprehensive tick management in the regions of interest remains poorly understood, especially in high incidence areas. Data collected by engaging vector management program staff will inform the development of sustainable and effective community-level tick management programs by assessing the feasibility of program components, the resources necessary to add new functions to existing vector management programs, and the expected costs associated with delivering comprehensive tick management services. This survey will identify robust vector management programs with which CDC can partner to refine guidance for the development of comprehensive community-level tick management programs, which can be adapted to specific regional ecologies and communities. Ultimately, this survey is an important first step toward developing a community of practice for publicly-funded, comprehensive tick management programs in the U.S. The survey will lay the groundwork for efforts to establish local entities capable of first evaluating the efficacy of tick control methods, and then broadly deploying those measures proven effective, and publicly-acceptable in order to: (a) reduce the number of infected ticks in the environment; and (b) reduce human bites by infected ticks.

The primary goals of this project are two-fold: (1) assess the current tick management capacity and knowledge in vector management programs that receive public funding in the Upper Midwest, mid-Atlantic, Northeast, and Pacific coast states; and (2) determine the services that vector management program staff believe should be part of comprehensive tick management programs if they are developed in the future. We also hope to identify barriers to the development of comprehensive tick management programs and ways CDC can begin to address gaps.

CDC requests OMB approval for an estimated 63 annual burden hours. There are no costs to respondent other than the time needed to participate.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Public Vector Control Operators		200	1	15/60
Private Vector Control Operators		100	1	8/60

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC–2022–0111]

Advisory Committee on Immunization Practices (ACIP)

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of meeting and request for comment.

SUMMARY: In accordance with the Federal Advisory Committee Act, the Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces the following meeting of the Advisory Committee on Immunization Practices (ACIP). This meeting is open to the public. Time will be available for public comment.

DATES: The meeting will be held on October 19, 2022, from 8:30 a.m. to 5:30 p.m., EDT and October 20, 2022, from 8:30 a.m. to 3:20 p.m., EDT (dates and times subject to change, see the ACIP website for updates *http://www.cdc.gov/vaccines/acip/index.html*). The meeting will be webcast live via the World Wide Web. Written comments must be received on or before October 20, 2022.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2022–0111, by either of the following methods.

- *Federal eRulemaking Portal: https://www.regulations.gov*. Follow the instructions for submitting comments.
- *Mail:* Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H24–8, Atlanta, GA 30329–4027, Attn: October 19–20, 2022, ACIP Meeting.

Instructions: All submissions received must include the Agency name and Docket Number. All relevant comments received will be posted without change to *https://www.regulations.gov,* including any personal information provided. For access to the docket to read background documents or comments received, go to *https://www.regulations.gov*.

FOR FURTHER INFORMATION CONTACT: Stephanie Thomas, ACIP Committee Management Specialist, Centers for Disease Control and Prevention, National Center for Immunization and Respiratory Diseases, 1600 Clifton Road NE, MS H24–8, Atlanta, GA 30329–4027; Telephone: 404–639–8367; Email: *ACIP@cdc.gov*.

SUPPLEMENTARY INFORMATION:

Purpose: The committee is charged with advising the Director, CDC, on the use of immunizing agents. In addition, under 42 U.S.C. 1396s, the committee is mandated to establish and periodically review and, as appropriate, revise the list of vaccines for administration to vaccine-eligible children through the Vaccines for Children (VFC) program, along with schedules regarding dosing interval, dosage, and contraindications to administration of vaccines. Further, under provisions of the Affordable Care Act, section 2713 of the Public Health Service Act, immunization recommendations of the ACIP that have been approved by the CDC Director and appear on CDC immunization schedules must be covered by applicable health plans.

Matters To Be Considered: The agenda will include discussions on influenza vaccines, pneumococcal vaccine, meningococcal vaccines, respiratory syncytial virus vaccine, rotavirus vaccine, dengue vaccines, adult immunization schedule, child/adolescent immunization schedule, COVID–19 vaccines and Chikungunya vaccine. Recommendation votes on pneumococcal, adult immunization schedule, child/adolescent immunization schedule and COVID–19 vaccines are scheduled. A Vaccines for