ESTIMATES OF ANNUALIZED BURDEN HOURS—Continued

Respondent	Form	Number of respondents	Number of responses per respondent	Average burden per response (hours)	Total burden (in hours)
Total					233

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, 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–23–1309]

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 ''Enterprise Laboratory Information Management System'' 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 June 09, 2023, 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 the 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

Enterprise Laboratory Information Management System (OMB Control No. 0920–1309, Exp. 11/30/2023)—Revision—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The collection of specimen information designated for testing by the CDC occurs on a regular and recurring basis (multiple times per day) using an electronic PDF file called the *CDC Specimen Submission 50.34 Form* or an electronic XSLX file called the *Global File Accessioning Template.* Hospitals, doctor's offices, medical clinics, commercial testing labs, universities, state public health laboratories, U.S. Federal institutions and foreign institutions use the *CDC Specimen Submission 50.34 Form* when submitting a single specimen to CDC Infectious Diseases laboratories for testing. The *CDC Specimen Submission 50.34 Form* consists of over 200 data entry fields (of which five are mandatory fields that must be completed by the submitter) that captures information about the specimen being sent to the CDC for testing. The type of data captured on the *50.34 Form* identifies the origin of the specimen (human, animal, food, environmental, medical device or biologic), CDC test order name/code, specimen information, patient information (as applicable), animal information (as applicable) information about the submitting organization requesting the testing, patient history (as applicable), owner information and animal history (as applicable) and epidemiological information. The collection of this type of data is pertinent in ensuring a specimen's testing results are linked to the correct patient and the final test reports are delivered to the appropriate submitting organization to aid in making proper health-related decisions related to the patient. Furthermore, the data provided on this form may be used by the CDC to identify sources of potential outbreaks and other public-health related events. When the form is filled out, a user in the submitting organization prints a hard copy of it that will be included in the specimen's shipping package sent to the CDC. The printed form has barcodes on it that allow the CDC testing laboratory to scan its data directly into ELIMS where the specimen's testing lifecycle is tracked and managed.

Likewise, the *Global File Accessioning Template* records the same data as the *50.34 Form* but provides the capability to submit information for a batch of specimens (typically 50–1,000 specimens per batch) to a specific CDC laboratory for testing. The CDC testing laboratory electronically uploads the *Global File Accessioning Template* into ELIMS where the batch of specimens are then logged and are ready to be tracked through their respective testing and reporting workflow.

CDC requests OMB approval for an estimated 2,153 annualized burden hours. There is no cost to respondents other than their time 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)
Medical Scientists, Except Epidemiologists, State Public Health Lab, Medical Assistant, Doctor's Office/Hospital.	*CDC Specimen Submission 50.34 Form.*	2,098	12	5/60
Medical Assistant, Doctor's Office/Hospital	*Global File Accessioning Template.*	15	11	20/60

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, 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

Notice of Award of a Single-Source Cooperative Agreement To Fund icddr,b (International Centre for Diarrhoeal Disease Research, Bangladesh)

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

ACTION: Notice.

SUMMARY: The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces the award of approximately $6,000,000, for Year 1 funding to icddr,b. The award will support high quality public health research and surveillance activities to further strengthen the ability of the Government of Bangladesh and other global partners to detect, prevent, and respond to disease threats. Funding amounts for years 2–5 will be set at continuation.

DATES: The period for this award will be September 30, 2024 through September 29, 2029.

FOR FURTHER INFORMATION CONTACT: Lata Kumar, Global Health Center, Centers for Disease Control and Prevention, Atlanta, GA, 30033, Telephone: 404–639–7618, email: *lek7@cdc.gov.*

SUPPLEMENTARY INFORMATION: The single-source award will support high quality public health and implementation science research that will guide stakeholders to prioritize resources, develop policies, and implement practices and interventions that will help mitigate the impact of health threats on the Bangladeshi population and globally. icddr,b is in a unique position to conduct this work, as it is the only non-diplomatic partner that CDC is aware of that has the legal authority and operational expertise to process the import of laboratory supplies and reagents, including time sensitive reagents. Surveillance activities contemplated under this award detect and isolate high-consequence pathogens whose handling and storage require advanced biocontainment skills and capacity. icddr,b's clinical microbiology laboratory meets the international standards of quality and is ISO 15189–2012 accredited and the institute has a strong and active institutional biosafety committee and Senior Biosafety Officer. icddr,b is the most biosafety capable institution in the country to execute critical ongoing studies on pathogens having pandemic potential such as Nipah virus, the testing of human, avian and bovine surveillance samples with unknown etiology, and studies of *C. auris* and influenza. To CDC's knowledge, icddr,b is the only institution in Bangladesh with the capability to handle such pathogens according to international biosecurity standards. Furthermore, icddr,b has agreements with major biomedical transportation organizations and maintains a material transfer agreement (MTA) with CDC for the shipping of swabs, blood, serum and DNA.

Summary of the Award

Recipient: icddr,b (International Centre for Diarrhoeal Disease Research, Bangladesh).

Purpose of the Award: The purpose of this award is to further strengthen the ability of the Government of Bangladesh and other global partners to detect, prevent, and respond to disease threats through high quality public health research and surveillance activities. Specifically, the individual activities under this cooperative agreement will: (a) determine burden, trends, etiology, and risk factors of priority diseases in Bangladesh, (b) develop and evaluate interventions and diagnostics, (c) evaluate the effectiveness of vaccinations to inform global policy, and (d) strengthen the Government of Bangladesh's surveillance, laboratory, and outbreak response capacity.

Amount of Award: The approximate year 1 funding amount will be $6,000,000 in Federal Fiscal Year (FY) 2024 funds, subject to the availability of funds. Funding amounts for years 2–5 will be set at continuation.

Authority: This program is authorized under section 301(a) of the Public Health Service Act [42 U.S.C. 241(a)], as amended and section 307 of the Public Health Service Act [42 U.S.C. 242*l*].

Period of Performance: September 30, 2024 through September 29, 2029.

Dated: August 22, 2023.

Terrance Perry,

Chief Grants Management Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10143]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. 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 (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our