DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Health Information Technology Implementation

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS). **ACTION:** Notice of Noncompetitive Replacement of the Award to Southwest Virginia Community Health Systems, Virginia.

SUMMARY: HRSA will be transferring the American Recovery and Reinvestment Act (ARRA) (section 330 of the Public Health Service Act) Health Information Technology Implementation for Health Center Controlled Networks (HCCN) funds originally awarded to Southwest Virginia Community Health Systems (SVCHS), to support the implementation of a HCCN in the state of Virginia to enhance the quality and efficiency of primary and preventive care as a safety net through the effective use of Health Information Technology (HIT).

SUPPLEMENTARY INFORMATION: Former Grantee of Record: Southwest Virginia Community Health Systems (SVCHS). Original Period of Grant Support:

June 1, 2010, to May 31, 2012.

Replacement Awardee: Harrisonburg Community Health Center (HCHC). Amount of Replacement Award:

\$951,240.

Period of Replacement Award: The period of support for the replacement award is July 1, 2012, to March 31, 2013.

Authority: Section 330 of the Public Health Service Act, 42 U.S.C. 245b.

CFDA Number: 93.703.

Justification for the Exception to Competition

The former grantee, SVCHS, relinquished the grant due to financial and organizational challenges. In the effort to preserve the opportunity to advance information technology resources of Virginia's medically underserved communities, HCHC has demonstrated capacity to fulfill the expectations of the original grant award and plans to work closely with the Community Care Network of Virginia (CCNV), to complete the grant project and to plan for a smooth transition of the grant. HCHC has been a HRSA funded health center since 2008 and is a well-established organization with sound fiscal and grants management operations. The transfer of these funds will ensure full implementation of the grant, which will enhance the state of Virginia's ability to improve the quality and efficiency of primary and preventive care as a safety net through the effective use of health information technology.

In order to ensure a timely implementation of an HCCN in the state of Virginia as originally awarded, this replacement award will not be competed.

FOR FURTHER INFORMATION CONTACT: Ms. Suma Nair via phone at (301) 443–7587, or via email at *SNair1@hrsa.gov.*

Dated: August 30, 2012. **Mary K. Wakefield,** *Administrator.* [FR Doc. 2012–22009 Filed 9–6–12; 8:45 am] **BILLING CODE 4165–15–P**

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request: Cognitive Testing of Instrumentation and Materials for the Population Assessment of Tobacco and Health (PATH) Study

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institute on Drug Abuse (NIDA), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the Federal Register on May 23, 2012, page 30540 and allowed 60-days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not

required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Proposed Collection: Title: Cognitive Testing of Instrumentation and Materials for Population Assessment of Tobacco and Health (PATH) Study. Type of Information Collection Request: New. Need and Use of Information Collection: The PATH study will establish a population-based framework for monitoring and evaluating the behavioral and health impacts of regulatory provisions implemented as part of the Family Smoking Prevention and Tobacco Control Act (FSPTCA) by the Food and Drug Administration (FDA). NIDA is requesting generic approval from OMB for cognitive testing of the PATH study's instrumentation, supporting materials, consent forms, and methods of administration (e.g., computer assisted personal interviews [CAPI], audio computer assisted selfinterviews [ACASI], web-based interviews). Cognitive testing of these materials and methods will help to ensure that their design and content are valid and meet the PATH study's objectives. Additionally, results from cognitive testing will inform the feasibility (scientific robustness), acceptability (burden to participants and study logistics) and cost of the information collection to help minimize its estimated cost and public burden.

Frequency of Response: Annual [As needed on an on-going and concurrent basis].

Affected Public: Individuals and Households. Type of Respondents: Youth (ages 12–17) and Adults (ages 18+). The annual reporting burden for the screening of respondents for the PATH study cognitive testing is presented in Table 1, and the annual reporting burden for the PATH study cognitive testing is presented in Table 2. The annualized cost to respondents for participating in screening for PATH study cognitive testing is estimated at: \$6,632; and the annualized cost to respondents for participating in PATH study cognitive testing is estimated at: \$20,346. There are no capital, operating or maintenance costs.

TABLE 1—ESTIMATED ANNUAL REPORTING BURDEN FOR SCREENING OF PATH STUDY COGNITIVE TESTING RESPONDENTS

Screening for respondents	Type of respondent	Number of respondents	Responses per respondent	Hours per response	Annual hour burden
Screener	Youth	1000	1	¹⁰ ⁄60	167

TABLE 1—ESTIMATED ANNUAL REPORTING BURDEN FOR SCREENING OF PATH STUDY COGNITIVE TESTING RESPONDENTS—Continued

Screening for respondents	Type of respondent	Number of respondents	Responses per respondent	Hours per response	Annual hour burden
	Adult	2000	1	10⁄ ₆₀	333
Total		3000			500

TABLE 2—ESTIMATED ANNUAL REPORTING BURDEN SUMMARY—COGNITIVE TESTING OF INSTRUMENTATION AND FORMS FOR THE PATH STUDY

Instrument/form to be tested	Type of respondent	Number of respondents	Responses per respondent	Hours per response	Annual hour burden
Forms to support data collection* Assent forms for participation in PATH study.	Adult Youth	200 200	1	1 ³⁰ ⁄60 1 ³⁰ ⁄60	300 300
Consent forms for participation in PATH study.	Adult	200	1	1 ³⁰ ⁄60	300
PATH study questionnaires	Youth	100 300	1	1 ³⁰ ⁄60 1 ³⁰ ⁄60	150 450
Total		1000			1500

* For example, letters, mailing envelopes, PATH study brochures, instructions for collection of biospecimens.

Request for Comments: Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency'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 those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs,

OIRA_submission@omb.eop.gov or by fax to 202–395–6974, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Kevin P. Conway, Ph.D., Deputy Director, Division of Epidemiology, Services, and Prevention Research, National Institute on Drug Abuse, 6001 Executive Blvd., Room 5185; 301–443–8755; email *PATHprojectofficer@mail.nih.gov.*

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received within 30-days of the date of this publication.

Dated: August 30, 2012.

Glenda P. Conroy,

Executive Officer (OM Director), NIDA. [FR Doc. 2012–22107 Filed 9–6–12; 8:45 am] BILLING CODE 4140–01–P

DEPARTMENT OF HOMELAND SECURITY

[Docket No. DHS-2012-0055]

Homeland Security Advisory Council

AGENCY: The Office of Policy, DHS. **ACTION:** Notice of partially closed Federal Advisory Committee meeting.

SUMMARY: The Homeland Security Advisory Council (HSAC) will meet in person and members of the public may participate by conference call on September 25, 2012. The two-day meeting will be partially closed to the public.

DATES: The HSAC will meet on Monday, September 24, 2012, from 1 p.m. to 4:45 p.m. EDT. This portion of the meeting will be closed. On Tuesday, September 25, 2012, the HSAC will meet from 8 a.m. to 9:45 a.m. in closed session. The meeting will be open to the public from 10 a.m. to 11:15 a.m. and then meet in closed session from 11:15 a.m. to 12:45 p.m.

ADDRESSES: Written comments must be submitted and received by September 21, 2012. Comments must be identified by Docket No. DHS–2012–0055 and may be submitted by one of the following methods:

• Federal eRulemaking Portal: http:// www.regulations.gov. Follow the instructions for submitting comments.

• *Email: HSAC@dhs.gov.* Include docket number in the subject line of the message.

• Fax: (202) 282–9207.

• *Mail:* Homeland Security Advisory Council, Department of Homeland Security, Mailstop 0450, 245 Murray Lane SW., Washington, DC 20528.

Instructions: All submissions received must include the words "Department of Homeland Security" and DHS–2012– 0055, the docket number for this action. Comments received will be posted without alteration at *http://www. regulations.gov,* including any personal information provided.

Docket: For access to the docket to read background documents or comments received by the DHS Homeland Security Advisory Council, go to http://www.regulations.gov.

FOR FURTHER INFORMATION CONTACT: Becca Sharp, Executive Director, at *hsac@dhs.gov* or 202–447–3135.

SUPPLEMENTARY INFORMATION: Notice of this meeting is given under the Federal Advisory Committee Act, 5 U.S.C. App.