

of national consumer organizations offering support to people experiencing infertility.

In addition, HHS/CDC publishes an annual Assisted Reproductive Technology National Summary Report using pooled data presented as graphs and charts to provide an in-depth picture of the type, number, and outcomes of ART cycles performed in the United States. HHS/CDC also uses the pooled data to publish an annual ART Surveillance Summary in HHS/CDC's Morbidity and Mortality Weekly Report (MMWR) with state-specific information on ART procedures and their outcomes. These reports are primarily used by states for state-based surveillance and to inform maternal and child health programs.

B. Data Usage and Data Access

HHS/CDC retains a copy of each reporting ART program's annual data files. In addition to the annual ART reports, the NASS database is used to evaluate emerging ART research questions and to monitor safety and efficacy issues related to ART treatment for improving maternal and child health outcomes. ART data files are protected under an Assurance of Confidentiality pursuant to Section 308(d) of the Public Health Service Act (42 U.S.C. 242[m]). This assurance allows HHS/CDC programs to assure that certain identifiable data collected on individuals and institutions involved in research or non-research projects remain confidential. Starting in 2013, researchers may analyze ART surveillance data using the National Center for Health Statistics' (NCHS) Research Data Center (RDC) under authorization of Sections 304 and 306 of the Public Health Service Act, 42 U.S.C.242(k) (See <http://www.cdc.gov/art/AccessData.html>). Researchers requesting access to the NASS data files are subject to all RDC procedures and protocols.

Dated: August 19, 2015.

Pamela J. Cox,

*Director, Division of the Executive Secretariat,
Office of the Chief of Staff, Centers for Disease
Control and Prevention.*

[FR Doc. 2015-21108 Filed 8-25-15; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Fees for Sanitation Inspections of Cruise Ships

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

ACTION: General Notice.

SUMMARY: The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS) announces fees for vessel sanitation inspections for Fiscal Year (FY) 2016. These inspections are conducted by HHS/CDC's Vessel Sanitation Program (VSP). VSP helps the cruise line industry fulfill its responsibility for developing and implementing comprehensive sanitation programs to minimize the risk for acute gastroenteritis. Every vessel that has a foreign itinerary and carries 13 or more passengers is subject to twice-yearly unannounced inspections and, when necessary, reinspection.

DATES: These fees are effective October 1, 2015, through September 30, 2016.

FOR FURTHER INFORMATION CONTACT: CAPT Jaret T. Ames, Chief, Vessel Sanitation Program, National Center for Environmental Health, Centers for

Disease Control and Prevention, 4770 Buford Highway NE., MS F-59, Atlanta, Georgia 30341-3717; phone: 800-323-2132, 770-488-3141, or 954-356-6650; email: vsp@cdc.gov.

SUPPLEMENTARY INFORMATION:

Purpose and Background

HHS/CDC established the Vessel Sanitation Program (VSP) in the 1970s as a cooperative activity with the cruise ship industry. VSP helps the cruise ship industry prevent and control the introduction, transmission, and spread of gastrointestinal illnesses on cruise ships. VSP operates under the authority of the Public Health Service Act (Section 361 of the Public Health Service Act; 42 U.S.C. 264, "Control of Communicable Diseases"). Regulations found at 42 CFR 71.41 (Foreign Quarantine—Requirements Upon Arrival at U.S. Ports: Sanitary Inspection; General Provisions) state that carriers arriving at U.S. ports from foreign areas are subject to sanitary inspections to determine whether rodent, insect, or other vermin infestations exist, contaminated food or water, or other sanitary conditions requiring measures for the prevention of the introduction, transmission, or spread of communicable diseases are present.

The fee schedule for sanitation inspections of passenger cruise ships by VSP was first published in the **Federal Register** on November 24, 1987 (52 FR 45019). HHS/CDC began collecting fees on March 1, 1988. This notice announces fees that are effective for FY 2016, beginning on October 1, 2015, through September 30, 2016.

The following formula will be used to determine the fees:

$$\text{Average cost per inspection} = \frac{\text{Total cost of VSP}}{\text{Weighted number of annual inspections}}$$

The average cost per inspection is multiplied by size and cost factors to determine the fee for vessels in each size category. The size and cost factors were established in the fee schedule published in the **Federal Register** on July 17, 1987 (52 FR 27060). The fee schedule was most recently published in the **Federal Register** on July 31, 2014 (79 FR 44454). The size and cost factors for FY 2016 are presented in Appendix A.

Fee

The fee schedule (Appendix A) will be effective October 1, 2015, through September 30, 2016.

Applicability

The fees will apply to all passenger cruise vessels for which inspections are conducted as part of HHS/CDC's VSP. Inspections and reinspections involve the same procedures, require the same amount of time, and are therefore charged at the same rates.

Appendix A

SIZE/COST FACTORS USED TO DETERMINE INSPECTION FEES

Vessel size (GRT ¹)	Approximate cost per GRT ¹
Extra Small (<3,001 GRT)	US\$0.25
Small (3,001–15,000 GRT) ..	0.50
Medium (15,001–30,000 GRT)	1.00
Large (30,001–60,000 GRT)	1.50
Extra Large (60,001–120,000 GRT)	2.00
Mega (>120,001 GRT)	3.00

FEE SCHEDULE FOR EACH VESSEL
SIZE

Vessel size (GRT ¹)	Inspection fee
Extra Small (<3,000 GRT)	US\$1,495
Small (3,001–15,000 GRT) ..	2,990
Medium (15,001–30,000 GRT)	5,980
Large (30,001–60,000 GRT) ..	8,970
Extra Large (60,001–120,000 GRT)	11,960
Mega (>120,001 GRT)	17,940

¹ Gross register tonnage in cubic feet, as shown in Lloyd's Register of Shipping.

Dated: August 19, 2015.

Pamela J. Cox,

*Director, Division of the Executive Secretariat,
Office of the Chief of Staff, Centers for Disease
Control and Prevention.*

[FR Doc. 2015–21107 Filed 8–25–15; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND
HUMAN SERVICESAdministration for Children and
FamiliesProposed Information Collection
Activity; Comment Request

Proposed Projects:

Title: State Self-Assessment Review
and Report.

OMB No.: 0970–0223.

Description: Section 454(15)(A) of the
Social Security Act, as amended by the

Personal Responsibility and Work
Opportunity Reconciliation Act of 1996,
requires each State to annually assess
the performance of its child support
enforcement program in accordance
with standards specified by the
Secretary of the Department of Health
and Human Services, and to provide a
report of the findings to the Secretary.
This information is required to
determine if States are complying with
Federal child support mandates and
providing the best services possible. The
report is also intended to be used as a
management tool to help States evaluate
their programs and assess performance.

Respondents: State Child Support
Enforcement Agencies or the
Department/Agency/Bureau responsible
for Child Support Enforcement in each
State.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Self-assessment report	54	1	4	216

Estimated Total Annual Burden
Hours: 216.

In compliance with the requirements
of Section 506(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 Planning, Research
and Evaluation, 370 L'Enfant
Promenade SW., Washington, DC 20447,
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
proposed collection of information; (c)
the quality, utility, and clarity of the
information to be collected; and (d)
ways to minimize the burden of the
collection of information on
respondents, including through the use
of automated collection techniques or

other forms of information technology.
Consideration will be given to
comments and suggestions submitted
within 60 days of this publication.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2015–21053 Filed 8–25–15; 8:45 am]

BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND
HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2012–N–0110]

Agency Information Collection
Activities; Submission for Office of
Management and Budget Review;
Comment Request; Medical Device
Reporting; Manufacturer, Importer,
User Facility, and Distributor Reporting

AGENCY: Food and Drug Administration,
HHS.

ACTION: Notice.

SUMMARY: The Food and Drug
Administration (FDA) is announcing
that a proposed collection of
information has been submitted to the
Office of Management and Budget
(OMB) for review and clearance under
the Paperwork Reduction Act of 1995.

DATES: Fax written comments on the
collection of information by September
25, 2015.

ADDRESSES: To ensure that comments on
the information collection are received,
OMB recommends that written
comments be faxed to the Office of
Information and Regulatory Affairs,
OMB, Attn: FDA Desk Officer, FAX:
202–395–7285, or emailed to
oir_submission@omb.eop.gov. All
comments should be identified with the
OMB control number 0910–0437. Also
include the FDA docket number found
in brackets in the heading of this
document.

FOR FURTHER INFORMATION CONTACT: FDA
PRA Staff, Office of Operations, Food
and Drug Administration, 8455
Colesville Rd., COLE–14526, Silver
Spring, MD 20993–0002,
PRASaff@fda.hhs.gov.

SUPPLEMENTARY INFORMATION: In
compliance with 44 U.S.C. 3507, FDA
has submitted the following proposed
collection of information to OMB for
review and clearance.

Medical Device Reporting;
Manufacturer, Importer, User Facility,
and Distributor Reporting (21 CFR Part
803)—(OMB Control Number 0910–
0437)—Revision

Section 519(a)(1) of the Federal Food,
Drug, and Cosmetic Act (the FD&C Act)