

response for the Annual Report). The total estimated annualized reduction in burden is 1,200 hours. There are no

costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)	Total burden (in hours)
Block Grant Awardees	Work Plan	61	1	20	1,220
	Annual Report	61	1	15	915
Total	122	2,135

Carol Walker,
Acting Reports Clearance Officer, Centers for Disease Control and Prevention.
 [FR Doc. 2011-5170 Filed 3-7-11; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket Number NIOSH-227]

Request for Information on Conditions Relating to Cancer to Consider for the World Trade Center Health Program

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

ACTION: Notice and request for public comments.

SUMMARY: The Director of the National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) serves as the World Trade Center (WTC) Program Administrator for certain functions related to the WTC Health Program established by the James Zadroga 9/11 Health and Compensation Act (Pub. L. 111-347). In accordance with Section 3312(a)(5)(A) of that Act, the WTC Program Administrator is conducting a review of all available scientific and medical evidence to determine if, based on the scientific evidence, cancer or a certain type of cancer should be added to the applicable list of health conditions covered by the World Trade Center Health Program.

The WTC Program Administrator is requesting information on the following: (1) Relevant reports, publications, and case information of scientific and medical findings where exposure to

airborne toxins, any other hazard, or any other adverse condition resulting from the September 11, 2001 terrorist attacks, is substantially likely to be a significant factor in aggravating, contributing to, or causing cancer or a type of cancer; (2) clinical findings from the Clinical Centers of Excellence providing monitoring and treatment services to WTC responders (*i.e.*, those persons who performed rescue, recovery, clean-up and remediation work on the WTC disaster sites) and community members directly exposed to the dust cloud on 9/11/01; and (3) input on the scientific criteria to be used by experts to evaluate the weight of the medical and scientific evidence regarding such potential health conditions.

DATES: Comments must be received by March 31, 2011.

ADDRESSES: You may submit comments, identified by docket number NIOSH-227, by any of the following methods:

- *Mail:* NIOSH Docket Office, Robert A. Taft Laboratories, MS-C34, 4676 Columbia Parkway, Cincinnati, OH 45226.
- *Facsimile:* (513) 533-8285.
- *E-mail:* nioshdocket@cdc.gov.

All information received in response to this notice will be available for public examination and copying at the NIOSH Docket Office, 4676 Columbia Parkway, Cincinnati, Ohio 45226. The comment period for NIOSH-227 will close on March 31, 2011. All comments received will be available on the NIOSH Docket Web page at <http://www.cdc.gov/niosh/docket> by April 30, and comments will be available in writing by request. NIOSH includes all comments received without change in the docket and the electronic docket, including any personal information provided.

FOR FURTHER INFORMATION CONTACT: Dori Reissman, M.D., NIOSH, Patriots Plaza Suite 9200, 395 E St., SW., Washington,

DC 20201, telephone (202) 245-0625 or e-mail nioshdocket@cdc.gov.

John Howard,
Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention.

[FR Doc. 2011-5157 Filed 3-7-11; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-9978-N3]

Public Meeting of the Consumer Operated and Oriented Plan (CO-OP) Advisory Board; Meeting Location Change

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice of meeting location change.

SUMMARY: This notice announces the change of location of the March 14, 2011, public meeting of the Consumer Operated and Oriented Plan (CO-OP) Advisory Board that was published in the March 2, 2011 **Federal Register** (76 FR 1184 through 1185). In accordance with the Federal Advisory Committee Act, the meeting is open to the public. **DATES:** March 14, 2011, from 8:30 a.m. to 5 p.m., Eastern Standard Time (EST). **ADDRESSES:** *Meeting Location:* Fairmont Hotel, 2401 M Street, Washington, DC 20037.

FOR FURTHER INFORMATION CONTACT: Anne Bollinger, (301) 492-4395. Press inquiries are handled through CCIIO's Press Office at (202) 690-6343.

SUPPLEMENTARY INFORMATION: On March 2, 2011, we published a notice in the **Federal Register** (76 FR 1184) that announced a March 14, 2011, public meeting for interested parties to assist and advise the Secretary and the Congress on the strategy of the

Department of Health and Human Services (the Department) to foster the creation of consumer-operated and oriented qualified nonprofit health insurance issuers. We note that the March 2, 2011 notice provides specific information on the purpose of the meeting and the agenda. Such information remains the same and has not changed with the exception of the meeting location. We refer readers to the previously published notice for such information.

For reasons explained in more detail below, the public meeting of the Consumer Operated and Oriented Plan (CO-OP) Advisory Board, which was to be held at the Madison Hotel, 1177 15th Street, NW, Washington, DC 20005, as announced in the March 2, 2011 **Federal Register** (76 FR 1184 through 1185), is being relocated. We refer readers to the **ADDRESSES** section of this notice for the new location of the March 14, 2011 public meeting.

Based upon the late discovery of the reasons why the previously announced location is inadequate, the Center for Consumer Information and Insurance Oversight (CCIIO) finds that exceptional circumstances exist to issue notice of a public meeting with less than 15 calendar days' notice of the change of location of the meeting (*see* 41 CFR 102-3.150(b)).

The CCIIO has recently learned that the original location of the meeting has proved unsuitable for the following reasons: (1) The space identified in the March 2, 2011 notice is unacceptably small to accommodate the expected public participation; and (2) the presence of protestors, for reasons unrelated to the meeting, anticipated at the entrances to the building will impede access to the meeting by the

public, particularly for those with disabilities (41 CFR Sec. 102-3.140). The Department only learned of these impediments to the meeting after the publication of the meeting notice. Because members of the Advisory Board have booked travel arrangements as have members of the public, it is considered less disruptive, more economical, and more consistent with the purposes of public notice to change the location of the meeting to a nearby site rather than change the date of the meeting.

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; and Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: March 3, 2011.

Donald M. Berwick,
Administrator, Centers for Medicare & Medicaid Services.

[FR Doc. 2011-5363 Filed 3-4-11; 4:15 pm]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: ACF Program Instruction: Children's Justice Act.

OMB No.: 0980-0196.

Description: The Program Instruction, prepared in response to the enactment of the Children's Justice Act (CJA), Title II of Public Law 111-320, Child Abuse Prevention and Treatment Act Reauthorization of 2010, provides direction to the States and Territories to accomplish the purposes of assisting

States in developing, establishing and operating programs designed to improve: (1) The assessment and investigation of suspected child abuse and neglect cases, including cases of suspected child sexual abuse and exploitation, in a manner that limits additional trauma to the child and the child's family; (2) the assessment and investigation of cases of suspected child abuse-related fatalities and suspected child neglect-related fatalities; (3) the investigation and prosecution of cases of child abuse and neglect, including child sexual abuse and exploitation; and (4) the assessment and investigation of cases involving children with disabilities or serious health-related problems who are suspected victims of child abuse or neglect. This Program Instruction contains information collection requirements that are found in Public Law 111-320 at Sections 107(b) and 107(d), and pursuant to receiving a grant award. The information being collected is required by statute to be submitted pursuant to receiving a grant award. The information submitted will be used by the agency to ensure compliance with the statute; to monitor, evaluate and measure grantee achievements in addressing the investigation and prosecution of child abuse and neglect; and to report to Congress.

Minor updates will be made to the Program Instruction (including date/deadline updates and a streamline of announcement).

No changes will be made to the reporting burden for the application or annual report.

CAPTA was reauthorized since the 60 day notice and citations have been updated accordingly.

Respondents: State governments.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Application & Annual Report	52	1	60	3,120

Estimated Total Annual Burden Hours: 3,120.

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: infocollection@acf.hhs.gov.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following:
Office of Management and Budget, Paperwork Reduction Project.

Fax: 202-395-7285.

E-mail:
OIRA_SUBMISSION@OMB.EOP.GOV.

Attn: Desk Officer for the Administration for Children and Families.

Robert Sargis,
Reports Clearance Officer.

[FR Doc. 2011-5185 Filed 3-7-11; 8:45 am]

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