	Percent
Non-Profit Organizations With- out Credit Available Else- where	3.000
For Economic Injury: Non-Profit Organizations With- out Credit Available Else-	
where	3.000

The number assigned to this disaster for physical damage is 12495B and for economic injury is 12496B.

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

#### James E. Rivera,

Associate Administrator for Disaster Assistance. [FR Doc. 2011–7064 Filed 3–24–11; 8:45 am] BILLING CODE 8025–01–P

# SOCIAL SECURITY ADMINISTRATION

### Agency Information Collection Activities: Proposed Request and Comment Request

The Social Security Administration (SSA) publishes a list of information collection packages requiring clearance by the Office of Management and Budget (OMB) in compliance with Public Law 104–13, the Paperwork Reduction Act of 1995, effective October 1, 1995. This notice includes revisions to OMB-approved information collections and a collection in use without an OMB number.

SSA is soliciting comments on the accuracy of the agency's burden estimate; the need for the information; its practical utility; ways to enhance its quality, utility, and clarity; and ways to minimize burden on respondents, including the use of automated collection techniques or other forms of information technology. Mail, e-mail, or fax your comments and recommendations on the information collection(s) to the OMB Desk Officer and SSA Reports Clearance Officer at the following addresses or fax numbers.

## (OMB)

Office of Management and Budget, Attn: Desk Officer for SSA, Fax: 202– 395–6974, E-mail address: OIRA\_Submission@omb.eop.gov.

# (SSA)

Social Security Administration, DCBFM, Attn: Reports Clearance Officer, 1333 Annex Building, 6401 Security Blvd., Baltimore, MD 21235, Fax: 410–965–6400, E-mail address: OPLM.RCO@ssa.gov.

I. The information collections below are pending at SSA. SSA will submit them to OMB within 60 days from the date of this notice. To be sure we consider your comments, we must receive them no later than May 24, 2011. Individuals can obtain copies of the collection instruments by calling the SSA Reports Clearance Officer at 410– 965–8783 or by writing to the above email address.

1. Supplemental Security Income (SSI)—Quality Review Case Analysis— 0960-0133. To assess the SSI program and ensure the accuracy of its payments, SSA conducts legally mandated periodic SSI case analysis quality reviews. SSA uses Form SSA-8508 to conduct these reviews, collecting information on operating efficiency, the quality of underlying policies, and the effect of incorrect payments. SSA also uses the data to determine SSI program payment accuracy rates, which is a performance measure for the agency's service delivery goals. The respondents are recipients of SSI payments selected for the quality reviews.

*Type of Request:* Revision of an OMB-approved information collection.

Form	Number of respondents	Frequency of response	Response time (minutes)	Estimated annual burden (hours)
SSA–8508–BK (paper interview) SSA–8508–BK (electronic)	225 4,275	1	60 60	225 4,275
Totals	4,500			4,500

2. Information Collections Conducted by State Disability Determination Services (DDS) on Behalf of SSA—20 CFR, subpart P, 404.1503a, 404.1512, 404.1513, 404.1514 404.1517, 404.1519; 20 CFR subpart Q, 404.1613, 404.1614, 404.1624; 20 CFR subpart I, 416.903a, 416.912, 416.913, 416.914, 416.917, 416.919 and 20 CFR subpart J, 416.1013, 416.1024, 416.1014—0960–0555. State DDSs collect the information necessary to administer the Social Security Disability Insurance (SSDI) and SSI programs. They collect medical evidence from consultative exam (CE) sources, credential information from CE source applicants, and Medical Evidence of Record (MER) from claimants' medical sources. The DDSs collect information from claimants regarding medical treatment and pain/ symptoms. The respondents are medical providers, other sources of MER, and disability claimants.

*Type of Request:* Revision of an OMB-approved information collection.

#### **CE Collections**

There are two collections from CE providers: (a) Medical evidence about claimants' medical condition(s) that DDSs use to make disability determinations when the claimant's own medical sources cannot or will not provide the required information; and (b) proof of credentials from CE providers.

Collection instrument	Number of respondents	Frequency of response	Average burden per re- sponse (minutes)	Estimated annual burden (hours)
(a) Medical Evidence from CE Providers:				
Paper Submissions	100,000	1	30	50,000
Electronic Records Express (ERE) Submissions	3,500,000	1	10	583,333
Totals(b) CE Credentials:	4,600,000			633,333
Paper Submission	3,000	1	15	750

There are two CE claimant collections: (a) Claimant completion of a response form indicating whether they intend to keep their CE appointment:, and (b) claimant completion of a form

indicating whether they want a copy of the CE report sent to their doctor.

Type of CE claimant collection	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated an- nual burden (hours)
Appointment Letter	2,500,000	1	5	208,333
Claimants re: Report to Medical Provider	1,500,000	1	5	125,000
Totals	4,000,000			333,333

# **MER Collections**

The DDSs collect MER from the claimant's medical sources to determine

the claimant's physical or mental status prior to making a disability determination.

Collection instrument	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated an- nual burden (hours)
Paper Submissions	500,000	1	15	125,000
Electronic and ERE Submissions	5,500,000	1	7	641,666
Total	6,000,000			766,666

## Pain/Other Symptoms Information from Claimants

symptoms affect the claimant's ability to do work–related activities prior to making a disability determination.

The DDSs use information about pain/ symptoms to determine how pain/

	Number of respondents	Frequency of response	Average bur- den per response (minutes)	Estimated an- nual burden (hours)
Paper Submission	2,500,000	1	15	625,000

The total combined burden is 2,359,082 hours.

II. SSA submitted the information collections listed below to OMB for clearance. Your comments on the information collections would be most useful if OMB and SSA receive them within 30 days from the date of this publication. To be sure we consider your comments, we must receive them no later than April 25, 2011. You can obtain a copy of the OMB clearance packages by calling the SSA Reports Clearance Officer at 410–965–8783 or by writing to the above e-mail address. 1. Request for Waiver of Overpayment Recovery or Change in Repayment Notice—20 CFR 404.502–404.513, 404.515 and 20 CFR 416.550–416.570, 416.572—0960–0037. When Social Security beneficiaries and SSI recipients receive an overpayment, they must return the amount of the overpayment. These beneficiaries and recipients can use Form SSA–632–BK to take one of three actions: (1) Request an exemption from repaying, as recovery of the overpayment would cause financial hardship; (2) inform SSA they want to repay the overpayment at a monthly rate over a period longer than 36 months; or (3) request a different rate of recovery. In the latter two cases, the respondents must also provide financial information to help the agency determine how much the overpaid person can afford to repay each month. Respondents are overpaid Social Security beneficiaries or SSI recipients who are requesting a waiver of recovery of an overpayment or a lesser rate of withholding.

*Type of Request:* Revision of an OMB-approved information collection.

Type of request	Number of respondents	Frequency of response	Response time (minutes)	Total burden (hours)
Waiver of Overpayment (Completes Whole Paper Form) Change in Repayment (Completes Partial Paper Form) Regional Application (NY Debt Management-NYDM) Internet Instructions	400,000 100,000 44,000 500,000	1 1 1 1	120 45 120 5	800,000 75,000 88,000 41,667
Totals	1,044,000			1,004,667

2. Sheltered Workshop Wage Reporting-0960-0771. Sheltered workshops are nonprofit organizations or institutions that implement a recognized program of rehabilitation for workers who have handicaps, or provide such workers with remunerative employment or other occupational rehabilitating activity of an educational or therapeutic nature. Sheltered workshops perform a service for their clients by reporting monthly wages directly to SSA. SSA uses the information these workshops provide to verify and post monthly wages to the SSI recipient's record. Most workshops report monthly wage totals to their local SSA office so we can adjust the client's

SSI payment amount in a timely manner and prevent overpayments. Sheltered workshops are motivated to report wages voluntarily as a service to their clients. Respondents are sheltered workshops that report monthly wages for services performed in the workshop.

*Type of Request:* Revision of an OMBapproved information collection.

Number of Respondents: 900. Frequency of Response: 12. Average Burden Per Response: 15

minutes.

*Estimated Annual Burden:* 3,000 hours.

3. Request for Medical Treatment in an SSA Employee Health Facility: Patient Self-Administered or Staff-Administered Care—0960–0772. SSA's Employee Health Clinic (EHC) provides emergency care, treatment of on-the-job illnesses and injuries, and health care for employees with chronic medical conditions and allergies who require allergy antigens. SSA also permits employees to use the EHC for selfadministration of medical treatments for a chronic health condition. SSA collects information on Form SSA–5072 to approve or deny requests for medical treatment in an SSA EHC. The respondents are the private physicians of the SSA employees seeking medical treatment in an SSA EHC.

*Type of Request:* Information Collection in Use without an OMB Number.

Medication dosage changes	Number of respondents	Frequency of response	Average burden per response (minutes)	Total annual burden (hours)
Annually	25	1	5	2
Bi-Annually	75	2	5	13
Totals	100			15

Dated: March 22, 2011.

#### Faye Lipsky,

Reports Clearance Officer, Center for Reports Clearance, Social Security Administration. [FR Doc. 2011–7123 Filed 3–24–11; 8:45 am] BILLING CODE 4191–02–P

#### SOCIAL SECURITY ADMINISTRATION

#### Agency Information Collection Activities: Proposed Request and Comment Request

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SSA is soliciting comments on the accuracy of the agency's burden estimate; the need for the information; its practical utility; ways to enhance its quality, utility, and clarity; and ways to minimize burden on respondents, including the use of automated collection techniques or other forms of information technology. Mail, e-mail, or fax your comments and recommendations on the information collection(s) to the OMB Desk Officer and SSA Reports Clearance Officer at the following addresses or fax numbers.

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Office of Management and Budget, Attn: Desk Officer for SSA, Fax: 202– 395–6974, E-mail address: OIRA\_Submission@omb.eop.gov.

#### (SSA)

Social Security Administration, DCBFM, *Attn:* Reports Clearance Officer, 1333 Annex Building, 6401 Security Blvd., Baltimore, MD 21235, *Fax:* 410–965–6400, *E-mail address: OPLM.RCO@ssa.gov.* 

I. The information collections below are pending at SSA. SSA will submit them to OMB within 60 days from the date of this notice. To be sure we consider your comments, we must receive them no later than May 24, 2011. Individuals can obtain copies of the collection instruments by calling the SSA Reports Clearance Officer at 410– 965–8783 or by writing to the above email address.

1. Questionnaire about Employment or Self-Employment outside the United States—20 CFR 404.401(b)(1), 404.415 & 404.417—0960-0050. SSA collects information on the SSA-7163 to determine: (1) Whether work beneficiaries performed outside the United States is cause for deductions from their monthly benefits; (2) which of two work tests (foreign or regular test) is applicable; and (3) the number of months, if any, SSA should impose deductions. Respondents are beneficiaries living and working outside the United States. *Type of Request:* Revision of an OMB-approved information collection.

Number of Respondents: 20,000.

Frequency of Response: 1.

Average Burden per Response: 12 minutes.

*Estimated Annual Burden:* 4,000 hours.

2. Statement of Income and Resources-20 CFR 416.207, 146.301-416.310, 416.704, and 416.708-0960-0124. SSA collects information about income and resources on the SSA-8010-BK for Supplemental Security Income (SSI) claims and redeterminations. SSA uses the information to make initial or continuing eligibility determinations for SSI claimants or recipients who are subject to deeming. The respondents are persons whose income and resources SSA may deem (consider to be available) to SSI applicants or recipients.

*Type of Request:* Revision of an OMB-approved information collection.

Number of Respondents: 341,000. Frequency of Response: 1. Average Burden per Response: 26

minutes. Estimated Annual Burden: 147,767 hours.

3. Review of the Disability Hearing Officer's Reconsidered Determinations before It Is Issued—20 CFR 404.913– 404.918, 404.1512–404.1515, 404.1589, 416.912–416.915, 416.989, 416.1413– 416.1418, 404.918(d) and 416.1418(d)— 0960–0709. After SSA approves