

spaces, and provide for growth associated with the increase in demand for staff and infrastructure.

**DATES:** A scoping meeting will be held on May 20, 2004, from 4:30 p.m. to 7:30 p.m. Interested parties should submit written comments on or before May 25, 2004.

**ADDRESSES:** The meeting will be held in the Cafeteria Building on the federal office complex located at 11000 Wilshire Boulevard, Los Angeles, California.

**FOR FURTHER INFORMATION CONTACT:** Mr. Javad Soltani, General Services Administration, Public Buildings Service, Portfolio Management Division (9PT), at (415) 522-3493; fax at (415) 522-3215; or e-mail at [javad.soltani@gsa.gov](mailto:javad.soltani@gsa.gov).

**SUPPLEMENTARY INFORMATION:** The Notice of Intent is as follows:

#### Notice of Intent To Prepare an Environmental Impact Statement

The United States General Services Administration intends to prepare an Environmental Impact Statement (EIS) on the following project: New Federal Building at 11000 Wilshire Boulevard, Los Angeles, California.

#### Proposed Action

The Federal Bureau of Investigation (FBI) requires new facilities in the Los Angeles area to consolidate current facilities from various locations, provide facilities with a higher level of security than currently provided in existing spaces, and provide for growth associated with the increase in demand for staff and infrastructure on a twenty-year planning horizon. To meet these needs, the United States General Services Administration is planning the construction of a new federal building on the existing 28-acre site of the current Federal office complex at 11000 Wilshire Blvd., Los Angeles, California. The building and adjoining facilities will house the Federal Bureau of Investigation offices and related facilities and that are currently located in the 17-floor Federal office building and garage located on the site. The existing 17-floor federal building will remain on site for the foreseeable future and receive federal agencies that require additional space or will be relocated from other locations in the region that are currently leased. The proposed new Federal facilities will provide approximately 937,000 gross square feet of space plus 1,200 secured parking stalls. It is anticipated that the proposed development will occur in two phases over a 10-year period and ultimately include office space, an automobile/

radio maintenance facility, and a parking garage.

Alternatives to the proposed action include:

**A. Renovate and Expand Existing Facility Alternative:** This alternative would leave the Federal Bureau of Investigation in the current 17-floor building on the 11000 Wilshire Boulevard site and modify the building to the extent possible to meet security requirements and short-term space needs of the Federal Bureau of Investigation. Other current tenants in the building would be required to relocate to other facilities.

**B. Lease Build-to-Suit Alternative:** This would provide a building for lease to the General Services Administration that is constructed to meet the needs and requirements of the Federal Bureau of Investigation. The building would be located in the northwest area of Los Angeles.

**C. No Action Alternative:** This would require the operation of the Federal Bureau of Investigation facilities at separate locations in the area and the associated inherent operational inefficiencies. The existing Government facilities will not be sufficient to accommodate future growth and security requirements.

The public is cordially invited to participate in the scoping process. A scoping meeting will be held in the Cafeteria Building on the federal office complex located at 11000 Wilshire Boulevard, Los Angeles, California, on May 20, 2004, from 4:30 p.m. to 7:30 p.m. At the scoping meeting, the public will be requested to identify issues that they believe should be analyzed in the Environmental Impact Statement. The public is invited to submit any written comments to the address below by May 25, 2004.

Dated: April 19, 2004.

**Javad Soltani,**

*Regional Environmental Quality Advisor.*

[FR Doc. 04-9314 Filed 4-22-04; 8:45 am]

**BILLING CODE 6820-23-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Healthcare Research and Quality

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

**AGENCY:** Agency for Healthcare Research and Quality, HHS.

**ACTION:** Notice.

**SUMMARY:** This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) allow the proposed information collection project: "CAHPS II Reports Laboratory Experiment". This experiment will assess the impact of improved data displays on consumers' understanding and use of reports of health care quality. In accordance with the Paperwork Reduction Act of 1995, 44 U.S.C. 3506(c)(2)(A), AHRQ invites the public to comment on this proposed information collection.

This proposed information collection was previously published in the **Federal Register** on February 19, 2004 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.

**DATES:** Comments on this notice must be received by June 22, 2004.

**ADDRESSES:** Written comments should be submitted to: Cynthia D. McMichael, Reports Clearance Officer, AHRQ, 5640 Gaither Road, Suite 5022, Rockville, MD 20850.

**FOR FURTHER INFORMATION CONTACT:** Cynthia D. McMichael, AHRQ, Reports Clearance Officer, (301) 427-1651.

#### SUPPLEMENTARY INFORMATION:

#### Proposed Project "CAHPS II Reports Laboratory Experiment"

CAHPS II Reports Laboratory Experiment is designed to assess the impact of improved data displays on consumers' understanding and use of reports of health care quality and tests the impact of alternative design features.

Getting consumers to pay attention to and use comparative quality information continues to be a major challenge to CAHPS and other quality reporting efforts, including efforts by the Centers for Medicare & Medicaid Services (CMS) and the National Committee for Quality Assurance (NCQA), and others. We need to learn more about ways to maximize the likelihood that consumers of health services will look at and pay attention to quality information, understand and interpret it accurately, use the information appropriate, and make "effective" choices based on the information.

This study will test the impact of alternative design features on user comprehension of available health care quality information and on its saliency to user decision-making. The study will assess ease of navigation of alternative approaches and consumers' stated preferences among the choices offered.

Study participants will be persons between 25–70 years old who have health insurance and have had a visit to a doctor in the last 12 months. The quality information presented to study participants in this laboratory experiment evaluating design alternatives will consist of mock data on consumers' assessments of the care provided by their physicians. The quality information will contain measures of physician performance, with candidate measures including how well the doctor scored on (1) listening carefully to patients; (2) giving explanations that are easy to understand; (3) spending enough time with patients; and (4) treating patients with courtesy and respect. The quality information also will include ratings of doctor's staff, for example, office staff that are as helpful as they should be and office staff who treat patients with courtesy and respect.

Finally, the quality information will include measures of access to care, such as being able to make appointments as soon as needed, a reasonable amount of time waiting in the doctor's office, and access to extended hours of service. The exact quality measures on which we

will present information will be determined during preliminary testing.

**Data Confidentiality Provisions**

To protect subject confidentiality, the following procedures will be employed:

- Upon arriving at the testing location and prior to participation, each subject will receive and sign the consent form, approved by the grantee's Institutional Review Boards, that contains information about their rights as a subject and the measures being taken to safeguard confidentiality. A test administrator will verbally repeat and explain the information in the form at the beginning of the testing session. Subjects will be informed that their participation is voluntary and that they have the right to refuse to answer any questions or to stop participating at any point during the testing session.
- All subject materials will be marked with a unique ID number, rather than the subject's names. Subjects' names will never be linked with their individual answers. Any information linking subject names and ID numbers will be kept in a secure location and will be accessible only to members of the project team. Subject names will not be shares with anyone outside of the project team.

- All information will be aggregated and reported at the group, rather than the individual, level.

- During portions of the testing session that will be video-taped (*i.e.*, the taping of the "choose a doctor" and comprehension questions to gather timing data), we will refer to the subjects by first name only. The videotapes will be marked with subject ID numbers and will be stored in a secure location. The tapes will be used only for analysis purposes by project team members.

- Subjects will be informed that participation is voluntary.
- All completed subject materials (*e.g.*, recruitment screeners, questionnaires, tapes, consent forms, incentive receipt forms) will be kept in a secure location accessible only to members of the project team.
- All completed questionnaires, video tapes and other subject materials will be destroyed no later than 12 months following the end of the CAHPS II project.

**Methods of Collection**

The data will be collected using a pencil and paper.

**Estimated Annual Respondent Burden**

Survey	Number of respondents	Estimated time per respondent hours	Estimated total burden hours	Estimated annual cost to the government
A. Potential participants who did not enroll in study .....	100	.10	10	\$1000
B. Potential participants who did enroll in study .....	350	.25	62.5	6250
C. Actual number of participants in laboratory experiment (subset of B) .....	210	2.0	420	39500
Total (A+B) .....	350	1.4	492.5	46,750

**Request for Comments**

In accordance with the above cited Paperwork Reduction Act legislation, comments on AHRQ's information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of functions of AHRQ, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including ours and cost) of the proposed collection of information; (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and

included in the request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: April 2, 2004.  
**Carolyn M. Clancy**,  
*Director*  
 [FR Doc. 04-9191 Filed 4-22-04; 8:45 am]  
**BILLING CODE 4160-90-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Agency for Healthcare Research and Quality**

**Medicare Prescription Drug, Improvement, and Modernization Act of 2003, Section 1013: Suggest Priority Topics for Research**

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ), HHS.

**ACTION:** Notice to suggest priority topics for research.

**SUMMARY:** AHRQ, on behalf of the Department of Health and Human Services, invites suggestions from interested organizations and knowledgeable individuals regarding the highest priorities for research, demonstration, and evaluation projects to support and improve the Medicare, Medicaid, and State Children Health Insurance (SCHIP) programs.

**DATES:** The statutory deadline for development of the initial priority list and the need to consider the FY 2006 priority list during this summer's budget development process requires expedited timelines for formulation of the initial and FY 2006 priority lists. Research recommendations must be received by May 7, 2004, to be considered for the initial priority list and by July 1, 2004,