

Assistance Formula Grants is to obtain necessary information so that ORR can assess the allowability of applicants' proposed programs. The application will include contact information for the grantee agency and for the local agencies that are proposed as subgrantees; the applicant's allocation plan for the grant funds among qualified

counties; a description of the applicant's plan for evaluating and monitoring the subgrantees; a line item budget and budget justification; and performance goals. The application will also require assurances from the applicant that the program will be conducted in accordance with the grant announcement. The application is a

necessary data collection to allow ORR to ensure that all targeted assistance applicants propose programs that are in accordance with the Refugee Act and with ORR regulations.

Respondents: State Governments, Wilson/Fish Project Grantees and State Replacement Agencies.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Application for Office of Refugee Resettlement Targeted Assistance Formula Grants	30	1	1	30

Estimated Total Annual Burden Hours: 30.

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 Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. E-mail address: 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.

Dated: April 7, 2009.

Janean Chambers,

Reports Clearance Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-R-205 and CMS-R-206]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare & Medicaid Services (CMS) is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Information Collection Requirements Referenced in HIPAA title I for the Individual Market, Supporting Regulations at 45 CFR Part 148 (148.120, 148.122, 148.124, 148.126, and 148.128), Forms and Instructions; *Use:* The provisions of title I of the Health Insurance Portability and Accountability Act of 1996 (HIPAA)

amend the Public Health Service Act (PHS Act) and are designed to make it easier for people to get access to health care coverage; to reduce the limitations that can be put on the coverage; and to make it more difficult for issuers to terminate the coverage. The information collection requirements will ensure that issuers in the individual market comply with HIPAA title I, provide individuals with certificates of creditable coverage necessary to demonstrate prior creditable coverage and file documentation with CMS for review in a Federal direct enforcement state. Requirements must also ensure states' flexibility to implement state alternative mechanisms. *Form Number:* CMS-R-205 (OMB#: 0938-0703); *Frequency:* Reporting—Yearly and Occasionally; *Affected Public:* Business or other for-profits and not-for-profit institutions; *Number of Respondents:* 2,042; *Total Annual Responses:* 2,979,801; *Total Annual Hours:* 856,384. (For policy questions regarding this collection contact Louis Blank at 410-786-5511. For all other issues call 410-786-1326.)

2. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Information Collection Requirements in HIPAA title I for the Group Market, Supporting Regulations 45 CFR 146 (146.111, 146.115, 146.117, 146.150, 146.152, 146.160 and 146.180) Forms and Instructions; *Use:* The provisions of title I of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) are designed to make it easier for people to get access to health care coverage and to reduce the limitations that can be put on the coverage. This collection pertains to notices issued by group health insurance issuers and self-funded non-Federal governmental plans as required by 45 CFR 146. These notices are triggered by the issuance of certificates

of creditable coverage; notification of preexisting condition exclusions; notification of special enrollment rights; and State review of issuers' filings of group market products or similar Federal review in cases in which a State is not enforcing a HIPAA group market provision. *Form Number:* CMS-R-206 (OMB#: 0938-0702); *Frequency:* Reporting—Yearly; *Affected Public:* Private sector; business or other for-profits and not-for-profit institutions, and State, local, or tribal governments; *Number of Respondents:* 8,050; *Total Annual Responses:* 37,002,217; *Total Annual Hours:* 2,920,012. (For policy questions regarding this collection contact Louis Blank at 410-786-5511. For all other issues call 410-786-1326.)

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web site at <http://www.cms.hhs.gov/PaperworkReductionActof1995>, or e-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@cms.hhs.gov, or call the Reports Clearance Office on (410) 786-1326.

In commenting on the proposed information collections please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in one of the following ways by June 9, 2009:

1. *Electronically.* You may submit your comments electronically to <http://www.regulations.gov>. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) accepting comments.

2. *By regular mail.* You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number _____, Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: April 3, 2009.

Michelle Shortt,

*Director, Regulations Development Group,
Office of Strategic Operations and Regulatory Affairs.*

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10275]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

AGENCY: Centers for Medicare & Medicaid Services.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the Agency's function; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

1. *Type of Information Collection Request:* New collection; *Title of Information Collection:* CAHPS Home Health Care Survey; *Use:* As part of the Department of Health and Human Services (DHHS) Transparency Initiative on Quality Reporting, CMS plans to implement a process to measure and publicly report home health care patient experiences through the CAHPS (Consumer Assessment of Healthcare Providers and Systems) Home Health Care Survey. The Home Health Care CAHPS survey, as initially discussed in the May 4, 2007 **Federal Register** (72 FR 25356, 25452), is part of a family of CAHPS® surveys that ask patients about their health care experiences. The Home Health Care CAHPS survey, developed by the Agency for Healthcare Research and Quality (AHRQ), creates a standardized survey for home health patients to assess their home health care providers and the quality of their home health care. Prior to this survey, there was no national standard for collecting such information that would allow comparisons across all home health agencies.

AHRQ conducted a field test to determine the length and content of the Home Health Care CAHPS Survey. CMS

has submitted the survey to the National Quality Forum (NQF) for consideration and approval in their consensus process. NQF endorsement represents the consensus opinion of many healthcare providers, consumer groups, professional organizations, purchasers, Federal agencies, and research and quality organizations. The final survey will also be submitted to the Office of Management and Budget (OMB) for their approval under the Paperwork Reduction Act (PRA) process.

The survey captures topics such as patients' interactions with the agency, access to care, interactions with home health staff, provider care and communication, and patient characteristics. The survey allows the patient to give an overall rating of the agency, and asks if the patient would recommend the agency to family and friends.

CMS is beginning plans for implementation of Home Health Care CAHPS Survey. Administration of the survey will be conducted by multiple, independent survey vendors working under contract with home health agencies to facilitate data collection and reporting. Recruitment and training of vendors who wish to be approved to collect Home Health Care CAHPS data will begin in 2009. Home health agencies interested in learning about the survey and/or voluntarily participating in the survey are encouraged to view the Home Health Care CAHPS Web site: <http://www.homehealthCAHPS.org>. Information about the project can also be obtained by sending an e-mail to HHCAHPS@rti.org.

Home health agency participation in the Home Health Care CAHPS Survey is currently voluntary. *Form Number:* CMS-10275 (OMB# 0938-New); *Frequency:* Semi-annually, once and occasionally; *Affected Public:* Individuals or households; *Number of Respondents:* 2,706,000; *Total Annual Responses:* 2,706,000; *Total Annual Hours:* 541,200. (For policy questions regarding this collection contact Elizabeth Goldstein at 410-786-6665. For all other issues call 410-786-1326.)

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS Web Site address at <http://www.cms.hhs.gov/PaperworkReductionActof1995>, or e-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@cms.hhs.gov, or call the Reports Clearance Office on (410) 786-1326.

To be assured consideration, comments and recommendations for the