

## V. Collection of Information Requirements

This document does not impose information collection and recordkeeping requirements. Consequently, it need not be reviewed by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. 35).

## VI. Regulatory Impact Statement

In accordance with the provisions of Executive Order 12866, the Office of Management and Budget did not review this proposed notice.

In accordance with Executive Order 13132, we have determined that this proposed notice would not have a significant effect on the rights of States, local or tribal governments.

**Authority:** Section 1865 of the Social Security Act (42 U.S.C. 1395bb). (Catalog of Federal Domestic Assistance Program No. 93.778, Medical Assistance Program; No. 93.773 Medicare—Hospital Insurance Program; and No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: May 4, 2011.

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

[FR Doc. 2011-11705 Filed 5-12-11; 8:45 am]

**BILLING CODE 4120-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[CMS-7031-NC2]

### Announcement of Notice; Proposed Establishment of a Federally Funded Research and Development Center—Second Notice

**AGENCY:** Centers for Medicare & Medicaid Services (CMS), Department of Health & Human Services (DHHS).

**ACTION:** Notice.

**SUMMARY:** This notice announces our intention to sponsor a Federally Funded Research and Development Center (FFRDC) to facilitate the modernization of business processes and supporting systems and their operations. This is the second of three notices which must be published over a 90-day period in order to advise the public of the agency's intention to sponsor an FFRDC.

**DATES:** We must receive comments on or before July 5, 2011.

**ADDRESSES:** Comments on this notice must be mailed to the Centers for

Medicare & Medicaid Services, Candice Savoy, Contracting Officer, 7500 Security Boulevard, Mailstop C2-01-10, Baltimore, MD 21244 or e-mail at [Candice.Savoy@cms.hhs.gov](mailto:Candice.Savoy@cms.hhs.gov).

**FOR FURTHER INFORMATION CONTACT:** Candice Savoy, (410) 786-7494 or [Candice.Savoy@cms.hhs.gov](mailto:Candice.Savoy@cms.hhs.gov).

**SUPPLEMENTARY INFORMATION:** The Centers for Medicare & Medicaid Services (CMS), an operating division within the Department of Health and Human Services (DHHS), intends to sponsor a study and analysis, delivery system, simulations, and cost modeling Federally Funded Research and Development Center (FFRDC) to facilitate the modernization of business processes and supporting systems and their operations. Some of the broad task areas that will be utilized include strategic/tactical planning, conceptual planning, design and engineering, procurement assistance, organizational planning, research and development, continuous process improvement, IV&V/compliance, and security planning. Further analysis will consist of expert advice and guidance in the areas of program and project management focused on increasing the effectiveness and efficiency of strategic information management, prototyping, demonstrations, and technical activities. The FFRDC may also be utilized by non-sponsors, within DHHS.

The FFRDC will be established under the authority of 48 CFR 35.017.

The contractor will be available to provide a wide range of support including, but not limited to:

- Strategic/tactical planning including assisting with planning for future CMS program policy, innovation, development, and support for Medicare and Medicaid.
- Conceptual planning including operations, analysis, requirements, procedures, and analytic support.
- Design and engineering including technical architecture direction.
- Procurement assistance, review/recommendations for current contract processes to include, contract reform, technical guidance, price and cost estimating, support and source selection evaluation support.
- Organizational planning including functional and gap analysis.
- Research and development, assessment of new technologies and advice on medical and technical innovation and health information.
- Continuous process improvement, ILC/current practices review and recommendations, implementation of best practices and code reviews.

- IV&V/Compliance, DUA surveillance and Web site content review.

- Security including Security Assessments and Security Test and Evaluations (ST&E). Identify, define, and resolve problems as an integral part of the sponsor's management team.

- Providing independent analysis about DHHS vulnerabilities and the effectiveness of systems deployed to make DHHS more effective in providing healthcare services and implementation of new healthcare initiatives.

- Providing intra-departmental and inter-agency cross-cutting, risk-informed analysis of alternative resource approaches.

- Developing and deploying analytical tools and techniques to evaluate system alternatives (for example, policy-operations-technology tradeoffs), and life-cycle costs that have broad application across CMS.

- Developing measurable performance metrics, models, and simulations for determining progress in securing DHHS data or other authorized data sources, (non-DHHS data sources, such as the census data or Department of Labor data, Veterans Administration, Department of Defense, data in developing performance metrics, and models).

- Providing independent and objective operational test and evaluation analysis support.

- Developing recommendations for guidance on the best practices for standards, particularly to improve the inter-operability of DHHS components.

- Assessing technologies and evaluating technology test-beds for accurate simulation of operational conditions and delivery system innovation models.

- Supporting critical thinking about the DHHS enterprise, business intelligence and analytic tools that can be applied consistently across DHHS and CMS programs.

- Supporting systems integration, data management, and data exchange that contribute to a larger DHHS intra- and inter-agency enterprise as well as collaboration with State, local tribal governments, the business sector (for-profit and not-for-profit), academia and the public.

- Providing recommendations for standards for top-level DHHS systems requirements and performance metrics best practices for an integrated DHHS approach to systems solutions and structured and unstructured data architecture.

- Understanding key DHHS organizations and their specific role and major acquisition requirements and

support them in the requirements development phase of the acquisition lifecycle.

- The FFRDC must function so effectively as to act as an agent for the sponsor in the design and pursuit of mission goals.

- The FFRDC must provide rapid responsiveness to changing requirements for personnel in all aspects of strategic, technical and program management.

- The FFRDC must recognize government objectives as its own objectives, partnering with the sponsor in pursuit of excellence in public service.

- The FFRDC must allow for non-sponsor, other than CMS, work for operating Divisions within DHHS.

We are publishing this notice in accordance with 48 CFR 5.205(b) of the Federal Acquisition Regulations (FAR), to enable interested members of the public to provide comments on this proposed action. We note that this is the

second of three notices issued under the FAR.

The Request for Proposal will be posted on FedBizOpps in the Summer of 2011. Alternatively, a copy can be received by contacting the person listed in the **FOR FURTHER INFORMATION CONTACT** section above.

Dated: May 4, 2011.

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

[FR Doc. 2011-11708 Filed 5-12-11; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Comment Request**

*Title:* OCSE-157 Child Support Enforcement Program Annual Data Report.

OMB No.: 0970-0177.

*Description:* The information obtained from this form will be used to: (1) Report Child Support Enforcement activities to the Congress as required by law; (2) calculate incentive measures performance and performance indicators utilized in the program; and (3) assist the Office of Child Support Enforcement (OCSE) in monitoring and evaluating State Child Support programs. OCSE is proposing minor changes to the OCSE-157 report instructions for medical support line items that will provide states with the option to define medical support to include private health insurance as well as other health care coverage such as Medicaid, Children's Health Insurance Program (CHIP) and other state coverage plans, and cash medical support. Further legislative or regulatory changes may be necessary to update medical child support policy.

*Respondents:* State, Local or Tribal Government.

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
OCSE-157 .....	54	1	7	378
Estimated Total Annual Burden Hours: .....	.....	.....	.....	378

In compliance with the requirements of Section 3506(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](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. 2011-11796 Filed 5-12-11; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. FDA-2011-N-0015]

**Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Orphan Drugs; Common European Medicines Agency/ Food and Drug Administration Application Form for Orphan Medicinal Product Designation (Form FDA 3671)**

**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 June 13, 2011.