

for grant funds online. A cross-agency work group developed the proposed SF-424 Project/Performance Site Location(s) form and data set that will serve as a common form for various grant programs.

This form will be mandatory for all of the 4040 collections except for 4040-0005 (Individual). The form includes the fields for the following FFATA required data elements: the primary location of performance and the unique

identifier (DUNS number) of the organization performing the project. The SF-424 Individual (4040-0005) does not require a DUNS number as individual applicants are not required to have DUNS numbers.

ESTIMATED ANNUALIZED BURDEN TABLE

Agency	Number of respondents	Number of responses per respondent	Total responses	Average burden per response in hours	Total burden hours
Total	120,722	1	120,722	30/60	60,361

Keith A. Tucker,
Office of the Secretary, Paperwork Reduction Act Clearance Officer.
 [FR Doc. 2011-31848 Filed 12-12-11; 8:45 am]
BILLING CODE 4151-AE-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Board of Scientific Counselors, National Center for Injury Prevention and Control: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Pub. L. 92-463) of October 6, 1972, that the Board of Scientific Counselors, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS), has been renewed for a 2-year period through November 5, 2013.

For information, contact Gwendolyn Cattledge, Ph.D., Designated Federal Officer, Board of Scientific Counselors, National Center for Injury Prevention and Control, CDC, HHS, 1600 Clifton Road NE., M/S F63, Atlanta, Georgia 30333, Telephone (770) 488-4655.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: December 6, 2011.

Elaine L. Baker,
Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.
 [FR Doc. 2011-31896 Filed 12-12-11; 8:45 am]
BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-9996-N2]

Early Retiree Reinsurance Program

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

ACTION: Notice.

SUMMARY: This notice announces that CMS, based on the projected availability of funding under the Early Retiree Reinsurance Program (ERRP), is exercising its authority under the ERRP regulations at 45 CFR 149.45(a) to deny ERRP reimbursement requests, in their entirety, that include claims that are incurred after December 31, 2011. Therefore, plan sponsors must not include such claims in their Claim Lists and Summary Cost Data submitted in support of a reimbursement request. Should circumstances related to the availability of ERRP funding change, CMS may issue a new notice announcing approval of ERRP reimbursement request that include claims incurred after December 31, 2011.

DATES: *Effective Date:* This notice is effective December 9, 2011.

FOR FURTHER INFORMATION CONTACT: David Mlawsky, (410) 786-6851.

SUPPLEMENTARY INFORMATION:

I. Background

The Patient Protection and Affordable Care Act (Pub. L. 111-148, enacted on March 23, 2010) (the Affordable Care Act), included a provision that establishes the temporary Early Retiree Reinsurance Program (ERRP), which provides reimbursement to eligible sponsors of employment-based plans for a portion of the costs of providing health coverage to early retirees (and eligible spouses, surviving spouses, and dependents of such retirees). Section 1102(a)(1) of the Affordable Care Act

required the Secretary to establish the program within 90 days of enactment of the law (by June 21, 2010). In the May 5, 2010 **Federal Register** (75 FR 24450), we published an interim final regulation with comment period, implementing the program as of June 1, 2010. Section 1102(e) of the Affordable Care Act appropriates funding of \$5 billion for the temporary program. The regulation at 45 CFR 149.45(a) states that based on the projected or actual availability of program funding, the Secretary may deny applications that otherwise meet the requirements of this part, and if an application is approved, may deny all or part of a sponsor's reimbursement request. Under that authority, in the April 5, 2011 **Federal Register** (76 FR 18766), the Secretary announced that CMS would stop accepting applications for ERRP as of May 6, 2011.

II. Provisions of This Notice

CMS is exercising our authority under 45 CFR 149.45(a) to deny certain reimbursement requests based on the available amount remaining of the \$5 billion in appropriated program funding, and the rate at which it is being disbursed. We are now announcing that any Claim List submitted to ERRP in support of a reimbursement request, that includes one or more claims with an incurred date identified as January 1, 2012 or after, will be rejected in its entirety. Therefore, to avoid such a consequence, a plan sponsor must not submit any Claim List or Summary Cost Data that includes any claim with an incurred date identified as January 1, 2012 or later.

As specified in 45 CFR 149.325, a claim may be submitted to ERRP only after it has been incurred, and paid. Therefore, under this notice, and consistent with current policy, if a claim is incurred on or before December 31, 2011, but paid after December 31, 2011, the sponsor may submit the claim, but not until it has been paid. Existing guidance defining the date upon which various types of claims are considered