

occupational health-related grant applications.

These portions of the meeting will be closed to the public in accordance with provisions set forth in Section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, Centers for Disease Control and Prevention, pursuant to Section 10(d) Public Law 92-463.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Price Connor, Ph.D., NIOSH Health Scientist, 2400 Executive Parkway, Mailstop E-20, Atlanta, Georgia 30345, telephone 404.498.2511, fax 404.498.2571.

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: May 4, 2012.

Cathy Ramadei,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 2012-11401 Filed 5-10-12; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-643 and CMS-10425]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, HHS.

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 without change of a currently approved collection. *Title of Information Collection:* Hospice Survey and Deficiencies Report Form and Supporting Regulations. *Use:* CMS uses the information collected as the basis for certification decisions for hospices that wish to obtain or retain participation in the Medicare and Medicaid programs. The information is used by CMS regional offices, which have the delegated authority to certify Medicare facilities for participation, and by State Medicaid agencies, which have comparable authority under Medicaid. The information on the Hospice Survey and Deficiencies Report Form is coded for entry into the OSCAR system. The data is analyzed by the CMS regional offices and by the CMS central office components for program evaluation and monitoring purposes. The information is also available to the public upon request. *Form Number:* CMS-643 (OCN 0938-0379). *Frequency:* Yearly. *Affected Public:* State, Local, or Tribal Governments. *Number of Respondents:* 3,644. *Total Annual Responses:* 1,217. *Total Annual Hours:* 1,217. (For policy questions regarding this collection contact Kim Roche at 410-786-3524. For all other issues call 410-786-1326.)

2. *Type of Information Collection Request:* New collection; *Title of Information Collection:* Evaluation of Patient Satisfaction and Experience of Care for Medicare Beneficiaries with End-Stage Renal Disease (ESRD): Impact of the ESRD Prospective Payment System (PPS) and ESRD Quality Incentive Program (QIP); *Use:* The Medicare Prescription Drug Improvement, and Modernization Act of 2003 (MMA) required the Secretary of HHS to submit to Congress a report detailing the elements and features for the design and implementation of a bundled ESRD PPS, specifying that such a system should include the bundling of separately billed drugs, clinical laboratory tests, and other items "to maximum extent feasible". The Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) directed the Secretary of HHS to implement a payment system under which a single payment is made to a provider of services or a renal dialysis facility for renal dialysis services in lieu of any other payment. The ESRD PPS combines composite rate dialysis services with separately billable services under a single payment adjusted to reflect patient differences in resource needs or case-mix. The MIPPA also stipulated the development of quality incentives for the ESRD program. CMS has established

the End-Stage Renal Disease Quality Incentive Program (ESRD QIP) to address this provision of the legislation.

In order to assess the impact of the Final Rule on ESRD beneficiary experiences, satisfaction, and health outcomes, CMS is requesting OMB approval to conduct data collection to obtain input on the effect of the Final Rule on our ESRD beneficiaries. The purposes of this data collection effort are to assess beneficiary satisfaction and experience of care in terms of access to services, quality of care, outcomes, and cost. This will be measured through telephone surveys with ESRD beneficiary and through interviews with key stakeholder in the renal health care community. The information obtained from both the beneficiary respondents and key stakeholders will be used both to provide an initial reporting of the ESRD PPS/QIP's effects on beneficiary satisfaction and experience of care and to inform the Centers for Medicare & Medicaid Services (CMS) of the impact of the ESRD PPS/QIP on patient satisfaction and experience of care, including unintended consequences, for consideration of future modification of the programs.

Form Number: CMS-10425 (OCN: 0938-New); *Frequency:* Yearly; *Affected Public:* Individuals. *Number of Respondents:* 2,540. *Number of Responses:* 2,540. *Total Annual Hours:* 1,287. (For policy questions regarding this collection contact Steve Blackwell at 410-786-6852. 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 Email 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 July 10, 2012:

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: May 8, 2012.

Martique Jones,

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

[FR Doc. 2012-11441 Filed 5-10-12; 8:45 am]

BILLING CODE 4120-01-P

1. On page 26553, in the third column, in the last paragraph on the page "III. Registration Instructions", the third sentence should appear as set forth below:

"You may register online at <http://www.hcdi.com/mei/> or by phone by contacting Toya Via, HCD International, at (301) 552-8803, by 5:00 p.m. EDT, Monday, May 14, 2012."

[FR Doc. C1-2012-10702 Filed 5-10-12; 8:45 am]

BILLING CODE 1501-01-D

34 directors of Urban Indian Centers around the county, and site visits will be made to four urban areas with a high percentage of American Indians or Alaska Natives within the population: Phoenix, AZ; New York City, NY; Minneapolis, MN; and Anchorage, Alaska. Members of the research study team will utilize a telephone interview guide and field discussion guide to collect information from staff members at relevant programs and organizations (e.g., American Indian Organizations, social service agencies serving urban Indians) in these areas.

The goal of this information collection is to assess the challenges and context for family self-sufficiency for urban Indians and their interaction with services and programs offered by ACF. The information gathered will help to generate recommendations and action items for ACF in seeking to better understand and meet the needs of the urban Indian population.

Respondents: Urban Indian Center directors, non-Native service providers, Native service providers, and AI/AN residents.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-8050-N]

Medicare Program; Meeting of the Medicare Economic Index Technical Advisory Panel—May 21, 2012

Correction

In notice document 2012-10702 appearing on pages 26553-26554 in the issue of Friday, May 4, 2012 make the following corrections:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Understanding Urban Indians' Interactions with ACF Programs and Services.

OMB No.: New Collection.

Description: As part of the "Understanding Urban Indians' Interactions with ACF Programs and Services" research study, telephone interviews will be conducted with up to

ANNUAL BURDEN ESTIMATES

Instrument	Annual number of respondents	Number of responses per respondent	Average burden hours per response	Total annual burden hours
Telephone interview guide for directors of Urban Indian Centers	34	1	1.25	42.5
Interview guide for Native service providers	24	1	1	24
Interview guide for non-Native service providers	24	1	1	24
Interview guide for AI/AN residents of CITY	64	1	1	64

Estimated Total Annual Burden Hours: 154.5.

Additional Information

Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 370 L'Enfant Promenade SW., Washington, DC 20447, Attn: OPRE Reports Clearance Officer. All requests should be identified by the title of the information collection. Email address: OPREinfocollection@acf.hhs.gov.

OMB Comment

OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and

recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Email: OIRA_SUBMISSION@OMB.EOP.GOV, Attn: Desk Officer for the Administration for Children and Families.

Steven M. Hanmer,

OPRE Reports Clearance Officer.

[FR Doc. 2012-11273 Filed 5-10-12; 8:45 am]

BILLING CODE 4184-09-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Notice of the Award of a Single-Source Program Expansion Supplement to Pima County Community College District in Tucson, AZ

AGENCY: Office of Family Assistance, ACF, HHS.

ACTION: Award of a Single-Source Program Expansion Supplement to Pima County Community College District, a public/state controlled institution of higher education in Tucson, Arizona.

CFDA Number: 93.093.

Statutory Authority: Section 2008(a) of Title XX of the Social Security Act, as amended by Section 5507 of the Affordable Care Act (Pub. L. 111-148).

SUMMARY: This Administration for Children and Families (ACF), Office of