The Agency received no comments in response to the 60-day notice published in the **Federal Register** on February 21, 2012, vol. 77, No. 34; page 9949.

The annual estimate of burden is as follows:

Instrument	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Rural Health Information Technology Network Development Program	41	1	41	3.77	154.57
Total	41	1	41	3.77	154.57

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to the desk officer for HRSA, either by email to *OIRA_submission@omb.eop.gov* or by fax to 202–395–6974. Please direct all correspondence to the ''attention of the desk officer for HRSA.''

Dated: May 24, 2012.

Reva Harris,

Acting Director, Division of Policy and Information Coordination.

[FR Doc. 2012–13125 Filed 5–30–12; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c) (2) (A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Pub. L. 104–13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email *paperwork@hrsa.gov* or call the HRSA Reports Clearance Officer at (301) 443–1984.

Comments are invited on: (a) The proposed collection of information for the proper performance of the functions of the Agency; (b) the accuracy of the Agency's estimate of the burden 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 on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: Sickle Cell Disease Treatment Demonstration Program—Quality Improvement Data Collection for the Hemoglobinopathy Learning Collaborative (OMB No. 0915–xxxx)—[New]

Background: In response to the growing need for resources devoted to sickle cell disease and other hemoglobinopathies, the United States Congress, under Section 712 of the American Jobs Creation Act of 2004 (Pub. L. 108–357), authorized a demonstration program for the prevention and treatment of sickle cell disease (SCD) to be administered through the Bureau of Primary Health Care and the Maternal and Child Health Bureau (MCHB) of the Health Resources and Services Administration (HRSA) in the U.S. Department of Health and Human Services. The program is known as the *Sickle Cell Disease Treatment Demonstration Program* (SCDTDP). The SCDTDP is designed to improve access to services for individuals with sickle cell disease, improve and expand patient and provider education, and improve and expand the continuity and coordination of service delivery for individuals with sickle cell disease and sickle cell trait.

To achieve the goals and objectives of the program, the Hemoglobinopathy Learning Collaborative (HLC) uses a process known as the Model for Improvement, a widely used approach to quality improvement (QI) in healthcare settings. The Model for Improvement utilizes a structured process that asks grantee teams to build on small tests of change in their healthcare setting, while providing monthly reporting on measurements. The proposed QI data collection and reporting system is an integral component of the HLC.

Purpose: The purpose of the proposed QI Data Collection strategy is to implement a system to monitor the progress of MCHB-funded activities in improving care and health outcomes for individuals living with sickle cell disease/trait and meeting the goals of the SCDTDP. Each grantee team will be asked to report on a core set of measures related to quality improvement for hemoglobinopathies. Through an evidence-based process, a bank of QI measures within each grantee network has been developed to assess health care utilization of the SCD population as well as several aspects of the system of care.

The QI Data Collection strategy will provide an effective and efficient mechanism to do the following: (1) Assess the services provided by grantees under the SCDTDP and monitor and drive improvement on quality measures; (2) collect, coordinate, and distribute data, best practices, and findings from network sites; (3) refine a common model protocol regarding the prevention and treatment of sickle cell disease; (4) examine/address barriers that individuals and families living with sickle cell disease face when accessing quality health care and health education; (5) evaluate the grantees' performance in meeting the objectives of the SCDTDP; and (6) provide HRSA/Congress information on the overall progress of the program.

Respondents: Grantees funded by HRSA under the SCDTDP will be the respondents for this data collection activity. Each month, SCDTDP teams will complete up to three data collection forms for 20 patients with SCD or sickle cell trait who were seen in their network that month. The Participant Profile form will collect demographic and basic health information. The Acute Care Visit and Ambulatory Care Visit forms will assess care in acute and ambulatory care settings, respectively.

All information will be collected via chart review. Data will be entered directly into a secure web-based data collection tool, called Research Electronic Data Capture (REDCap). The data entered into REDCap will be analyzed via a custom measurement generator that will calculate and export the QI measures for viewing by grantee teams and the National Coordinating Center.

The annual estimate of burden is as follows:

Questionnaires	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Participant Profile Form	9	240	2,160	.08	173
Acute Care Visit Form	9	240	2,160	.30	648
Ambulatory Care Visit Form	9	240	2,160	.30	648
Total	27	.....	6,480	.....	1,469

Email comments to *paperwork@hrsa.gov* or mail the HRSA Reports Clearance Officer, Room 10–29, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: May 24, 2012.

Reva Harris,

Acting Director, Division of Policy and Information Coordination.

[FR Doc. 2012–13124 Filed 5–30–12; 8:45 am]

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DEPARTMENT OF HOMELAND SECURITY

U.S. Customs and Border Protection

Cancellation of Bond Subject to Enhanced Bonding Requirements Upon CBP's Acceptance of Qualified Superseding Bond Application

AGENCY: U.S. Customs and Border Protection, Department of Homeland Security.

ACTION: General notice.

SUMMARY: This notice announces that U.S. Customs and Border Protection (CBP) will cancel a continuous bond where the liability amount was calculated pursuant to enhanced bonding requirements (EBR bond) upon the agency's acceptance of a qualified superseding bond application. CBP will accept a qualified superseding bond application pursuant to this notice only if posted by an importer who was not a litigant in any of the *National Fisheries Institute, Inc.* v. *United States Bureau of Customs & Border Protection* (*NFI* v. *CBP*) court cases and who establishes, to CBP's satisfaction, that no contingent liability remains secured by the predecessor EBR bond and that the EBR bond does not cover entries that are subject to a pending protest. The superseding bond must also feature a limit of liability that is calculated using CBP's current bond formula and must be for the same time period covered by the EBR bond. Nothing in this Notice should be construed as applying to importers represented by the plaintiffs in the NFI litigation noted above, as their relief was granted by the Court.

DATES: A superseding bond application, including supporting documentation, must be received by CBP within 90 calendar days from the date the related preceding EBR bond becomes eligible under the conditions set forth in this Notice.

ADDRESSES: Superseding bond applications, including supporting documentation, must be sent either via mail to U.S. Customs and Border Protection, Office of Administration, Revenue Division, ATTN: Bond Team Intech 1, 6650 Telecom Drive, Indianapolis, IN 46278 or via email to *Cbp.bondquestions@dhs.gov* with a subject line of ''Superseding Bond IR#.''

FOR FURTHER INFORMATION CONTACT: Kara Welty, Revenue Division, Office of Administration, Customs and Border Protection, *kara.welty@dhs.gov,* Tel. (317) 614–4614.

SUPPLEMENTARY INFORMATION:

Background

I. Enhanced Bonding Requirements

In 2004, U.S. Customs and Border Protection (CBP) instituted a policy of reviewing the sufficiency of continuous bonds where the importer's importing activities involved merchandise subject to antidumping or countervailing duties (AD/CVD). CBP's review resulted in the imposition of enhanced bonding requirements (EBR) on importers of shrimp subject to AD/CVD. *See* 71 FR 62276, dated October 24, 2006.

II. Judicial Review

The legality of the enhanced bonding formula was challenged in the *NFI* v. *CBP* cases. *See Nat'l Fisheries Inst., Inc.* v. *CBP,* 465 F. Supp.2d 1300 (Ct. Int'l Trade 2006); *Nat'l Fisheries Inst., Inc.* v. *CBP,* 637 F. Supp.2d 1270 (Ct. Int'l Trade 2009); *Nat'l Fisheries Inst., Inc.* v. *CBP,* 714 F. Supp.2d 1231 (Ct. Int'l Trade 2010); and *Nat'l Fisheries Inst., Inc.* v. *CBP,* 751 F. Supp.2d 1318 (Ct. Int'l Trade 2010). *See http://www.cit.uscourts.gov/slip_op/Slip_op10/10-120.pdf.*

In Slip Opinion 10–120, the Court granted equitable relief to importers who were represented by the plaintiffs in *NFI* v. *CBP* (NFI Importers) and who had posted bonds calculated using the enhanced bonding formula (EBR bond). As a consequence of the court's decision, CBP cancelled NFI-Importers' EBR bonds upon their submission of replacement superseding bonds.

III. CBP Policy To Permit Cancellation of EBR Bond Upon Acceptance of Qualified Superseding Bond

CBP has now decided to implement a policy whereby the agency will accept a qualified superseding bond application that meets the conditions described in Section V of this Notice (''superseding'' as used in the sense it is used in Slip Op. 10–120, page 6) from any importer who posted an EBR bond but who was not an NFI Importer (non-NFI importer). This policy will be in effect for a period of 90 calendar days from the date that the related preceding EBR bond no longer secures any remaining sum certain or contingent debt (including, but not limited to, unliquidated entries (*see* 19 U.S.C. 1500) and matters subject to 19 U.S.C. 1592 involving actual or potential loss of revenue. This policy is not applicable to NFI importers whose relief was granted by the Court.

A Non-NFI importer wishing to take advantage of this policy must ensure that CBP's Bond Team Intech 1, within the Office of Administration's Revenue Division, receives a qualified superseding bond application and supporting documentation within this 90 day period. The superseding bond application must be accompanied by supporting documentation that includes a statement as to the date the EBR no longer secured contingent liability, as well as a statement that the EBR does not cover entries that are subject to a pending protest pursuant to 19 U.S.C. 1514 or related regulations.

If CBP accepts a qualified superseding bond, CBP will notify the non-NFI importer by providing a copy of the