

**Keith A. Tucker,**  
*Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

[Document Identifier 0990-New]

**Agency Information Collection Request; 30-Day Public Comment Request**

**AGENCY:** Office of the Secretary, HHS.  
 In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection 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.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, email your request, including your address, phone number, OMB number, and OS document identifier, to [Sherrette.funncoleman@hhs.gov](mailto:Sherrette.funncoleman@hhs.gov), or call the Reports Clearance Office on (202) 690-5683. Send written comments and recommendations for the proposed information collections within 30 days of this notice directly to the OS OMB Desk Officer; faxed to OMB at 202-395-5806.

*Proposed Project:* Ryan White HIV/AIDS Program Modeling Project—OMB No. 0990-New—Office of the Assistant Secretary for Planning and Evaluation.

*Abstract:* The Office of the Assistant Secretary for Planning and Evaluation (ASPE) is requesting the Office of Management and Budget (OMB) approval of a new collection that will examine the service needs under the Ryan White HIV/AIDS Program as the provisions of the Affordable Care Act

are implemented, and identify strategies for ensuring that available federal resources are directed to areas of greatest need. To supplement the analysis of existing quantitative data sources, including Ryan White HIV/AIDS Program data, Medicaid enrollment and claims data, and HIV surveillance data, this two-year information collection request is for primary data collection in the form of telephone interviews with administrators of Ryan White grants and providers of HIV care services. In light of Congressional interest expressed in Senate Report 111-243 concerning how the Ryan White Program will transition into a larger system of care with the implementation of the Affordable Care Act, these interviews will help ASPE to understand the potential impact of the Affordable Care Act from the perspectives of Ryan White grantees and service providers. The interview protocols will cover topics including HIV service needs and use; coordination of client insurance enrollment, benefits, and services; factors that influence variation in HIV care costs and selection of AIDS Drug Assistance Program cost containment procedures; and methods of ensuring quality care.

**ESTIMATED ANNUALIZED BURDEN TABLE**

Type of respondent	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Ryan White Part A Grantees (metropolitan area officials) .....	26	1	1.08	28
Ryan White Part B Grantees (state officials) .....	51	1	1.08	55
Ryan White Part A, B, C, D, or Minority AIDS Initiative Providers (service providers) .....	133	1	55/60	122
Total .....	.....	.....	.....	205

**Keith A. Tucker,**  
*Paperwork Reduction Act Reports Clearance Officer, Office of the Secretary.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**HIT Standards Committee and HIT Policy Committee; Call for Nominations**

**AGENCY:** Office of the National Coordinator for Health Information Technology, HHS.

**ACTION:** Call for nominations.

**SUMMARY:** The Office of the National Coordinator for Health Information Technology (ONC) is seeking

nominations to the Health Information Technology Standards Committee (HITSC) and Health Information Technology Policy Committee (HITPC).  
*Name of Committees:* HIT Standards Committee and HIT Policy Committee.

*General Function of the Committees:* The HITSC is charged to provide recommendations to the National Coordinator on standards, implementation specifications, and certification criteria for the electronic exchange and use of health information for purposes of adoption, consistent with the implementation of the Federal Health IT Strategic Plan, and in accordance with policies developed by the HIT Policy Committee.

The HITPC is charged to provide recommendations to the National Coordinator on a policy framework for the development and adoption of a

nationwide health information technology infrastructure that permits the electronic exchange and use of health information as is consistent with the Federal Health IT Strategic Plan and that includes recommendations on the areas in which standards, implementation specifications, and certification criteria are needed.

**DATES:** *Date and Time:* Nominations must be received by Monday, June 11, 2012.

*Contact Person:* MacKenzie Robertson, Office of the National Coordinator, HHS, 355 E Street SW., Washington, DC 20024, phone: 202-205-8089, email: [mackenzie.robertson@hhs.gov](mailto:mackenzie.robertson@hhs.gov).

Background: The HIT Standards Committee was established under the American Recovery and Reinvestment

Act 2009 (ARRA)(Pub. L. 111–5), section 13101, new Section 3003. Members of the HIT Standards Committee are appointed by the Secretary, HHS and shall at least reflect providers, ancillary healthcare workers, consumers, purchasers, health plans, technology vendors, researchers, relevant Federal agencies, and individuals with technical expertise on health care quality, privacy and security, and on the electronic exchange and use of health information. Nominees of the HITSC should have experience promoting the meaningful use of health information technology and be knowledgeable in areas such as: small innovative health care providers, providers participating in payment reform initiatives, accountable care organizations, pharmacists, behavioral health professionals, home health care, purchaser or employer representatives, patient safety, health information technology security, big data, consumer e-health, personal health records, and mobile health applications.

The HIT Policy Committee was established under the American Recovery and Reinvestment Act 2009 (ARRA) (Pub. L. 111–5), section 13101, new Section 3002. Members of the HIT Policy Committee are appointed in the following manner: 3 members appointed by the Secretary, HHS; 4 members appointed by Congress; 13 members appointed by the Comptroller General of the United States; and other federal members appointed by the President. Nominations are being accepted for one of the three members appointed by the Secretary of HHS. Nominees of the HITPC should have experience promoting the meaningful use of health information technology and be knowledgeable in privacy and security issues related to health information.

Members will be selected in order to achieve a balanced representation of viewpoints, areas of experience, subject matter expertise, and representation of the health care system. Terms will be three (3) years from the appointment date to either the HITSC or HITPC. Members on both Committees serve without pay. However, members will be provided per diem and travel costs for performance of Committee services.

Current HITSC and HITPC members whose terms are expiring are allowed to reapply for a second consecutive term.

For more information on the HIT Policy and Standards Committees please visit the Web site, <http://healthit.hhs.gov/FACA>.

**Submitting Nominations:** Nominations should be typed and all required documents must be compiled and submitted in one complete

nomination package. A nomination package must include: a letter clearly stating which committee the nominee is applying to and the nominee's area of expertise, a short bio, a current CV including contact information and memberships with professional organizations/advisory committees, and relevant letters of support.

Nominations should be emailed to [ONC\\_HITCommittees@hhs.gov](mailto:ONC_HITCommittees@hhs.gov). Paper nomination packages must be postmarked no later than June 11, 2012 and addressed to MacKenzie Robertson, FACA Program Lead, Office of the National Coordinator, 335 E Street SW., Suite 310, Washington, DC 20024.

Dated: May 24, 2012.

**MacKenzie Robertson,**

*FACA Program Lead, Office of Policy and Planning, Office of the National Coordinator for Health Information Technology.*

[FR Doc. 2012–13366 Filed 5–31–12; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Designation of a Class of Employees for Addition to the Special Exposure Cohort**

**AGENCY:** National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention, Department of Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** HHS gives notice of a decision to designate a class of employees from Sandia National Laboratories in Albuquerque, New Mexico, as an addition to the Special Exposure Cohort (SEC) under the Energy Employees Occupational Illness Compensation Program Act of 2000. On May 11, 2012, the Secretary of HHS designated the following class of employees as an addition to the SEC:

All employees of the Department of Energy, its predecessor agencies, and their contractors and subcontractors who worked in any area at Sandia National Laboratories in Albuquerque, New Mexico, from January 1, 1963 through December 31, 1994, for a number of work days aggregating at least 250 work days, occurring either solely under this employment, or in combination with work days within the parameters established for one or more other classes of employees included in the Special Exposure Cohort.

This designation will become effective on June 10, 2012, unless Congress provides otherwise prior to the effective date. After this effective date, HHS will publish a notice in the **Federal Register** reporting the addition

of this class to the SEC or the result of any provision by Congress regarding the decision by HHS to add the class to the SEC.

**FOR FURTHER INFORMATION CONTACT:** Stuart L. Hinnefeld, Director, Division of Compensation Analysis and Support, NIOSH, 4676 Columbia Parkway, MS C–46, Cincinnati, OH 45226, Telephone 1–877–222–7570. Information requests can also be submitted by email to [DCAS@CDC.GOV](mailto:DCAS@CDC.GOV).

**John Howard,**

*Director, National Institute for Occupational Safety and Health.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Designation of a Class of Employees for Addition to the Special Exposure Cohort**

**AGENCY:** National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention, Department of Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** HHS gives notice of a decision to designate a class of employees from the Clinton Engineer Works in Oak Ridge, Tennessee, as an addition to the Special Exposure Cohort (SEC) under the Energy Employees Occupational Illness Compensation Program Act of 2000. On May 11, 2012, the Secretary of HHS designated the following class of employees as an addition to the SEC:

All employees of the Tennessee Eastman Corporation (1943–1947) and the Carbide and Carbon Chemicals Corporation (1947–1949) who were employed at the Clinton Engineer Works in Oak Ridge, Tennessee, from January 1, 1943 through December 31, 1949 for a number of work days aggregating at least 250 work days, occurring either solely under this employment or in combination with work days within the parameters established for one or more classes of employees included in the Special Exposure Cohort.

This designation will become effective on June 10, 2012, unless Congress provides otherwise prior to the effective date. After this effective date, HHS will publish a notice in the **Federal Register** reporting the addition of this class to the SEC or the result of any provision by Congress regarding the decision by HHS to add the class to the SEC.

**FOR FURTHER INFORMATION CONTACT:** Stuart L. Hinnefeld, Director, Division of Compensation Analysis and Support,