

2. *Type of Information Collection Request*: Revision of a currently approved collection; *Title of Information Collection*: Advance Beneficiary Notice of Noncoverage (ABN); *Use*: The use of written notices to inform beneficiaries of their liability under specific conditions has been available since Title XVIII of the Social Security Act (the Act), section 1879, Limitation on Liability, was enacted in 1972 (Pub. L. 92–603). Similar required notification and liability protections are available under other sections of the Act: Section 1834(a)(18) refund requirements for certain items when unsolicited telephone contacts are made, section 1834(j)(4) for the same types of items when there is neither a required advance coverage determination nor required supplier number; 1834(a)(15) also for advance determinations for these items and section 1842(l) applicable to physicians not accepting assignment. Implementing regulations are found at 42 CFR 411.404(b) and (c), and 411.408(d)(2) and (f), on written notice requirements. These statutory requirements apply only to Original Medicare, not Medicare Advantage plans.

Under section 1879 of the Act, Medicare beneficiaries may be held financially responsible for items or services usually covered under Medicare, but denied in an individual case under specific statutory exclusions, if the beneficiary is informed prior to furnishing the issues or services that Medicare is likely to deny payment.

When required, the ABN is delivered by Part B paid physicians, providers (including institutional providers like outpatient hospitals) practitioners (such as chiropractors), and suppliers, as well as hospice providers and Religious Non-medical Health Care Institutions paid under Part A. Other Medicare institutional providers paid under Part A use other approved notice for this purpose.

The revised ABN in this information collection request incorporates expanded use by Home Health Agencies (HHAs). There have been no substantive changes to the form. There are no changes that will affect existing ABN users. *Form Number*: CMS–R–131 (OMB#: 0938–0566); *Frequency*: Reporting—Occasionally; *Affected Public*: Private Sector—Business or other for-profits and Not-for-profit institutions; *Number of Respondents*: 1,288,837; *Total Annual Responses*: 52,967,771; *Total Annual Hours*: 6,177,101. (For policy questions regarding this collection contact Evelyn Blaemire at 410–786–1803. 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](mailto: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 *February 11, 2013*:

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: December 7, 2012.

**Martique Jones**,

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

[FR Doc. 2012–29951 Filed 12–11–12; 8:45 am]

**BILLING CODE 4120–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier CMS–10451]

#### Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB); Correction

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

**ACTION**: Correction of notice.

**SUMMARY**: This document corrects a technical error in the notice [Document Identifier: CMS–10451] entitled “Evaluation and Development of Outcome Measures for Quality Assessment in Medicare Advantage and Special Needs Plans” that was published in the October 26, 2012 (77 FR 65391) **Federal Register**.

**FOR FURTHER INFORMATION CONTACT**: William Parham, (410) 786–4669.

#### SUPPLEMENTARY INFORMATION:

##### I. Background

In the FR Doc. 2012–16514 of October 26, 2012 (77 FR 65391), we published a Paperwork Reduction Act notice requesting a 60-day public comment period for the document entitled “Evaluation and Development of Outcome Measures for Quality Assessment in Medicare Advantage and Special Needs Plans.”

There were technical delays with making the information collection request publicly available; therefore, in this notice we are extending the comment period from the date originally listed in the October 26, 2012 notice.

##### II. Correction of Error

In FR Doc. 2012–26380 of October 26, 2012 (77 FR 65391), make the following correction:

On page 65391, second column, third full paragraph, fourth line, the sentence, “To be assured consideration, comments and recommendations must be submitted in one of the following ways by December 26, 2012:” is corrected to read “To be assured consideration, comments and recommendations must be submitted in one of the following ways by January 2, 2012:”.

Dated: December 7, 2012.

**Martique Jones**,

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

[FR Doc. 2012–29956 Filed 12–11–12; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Office of Child Support Enforcement; Privacy Act of 1974; Computer Matching Agreement

**AGENCY**: Office of Child Support Enforcement (OCSE), ACF, HHS.

**ACTION**: Notice of a Computer Matching Program.

**SUMMARY**: In accordance with the Privacy Act of 1974 (5 U.S.C. 522a), as amended, OCSE is publishing notice of a computer matching program between OCSE and state agencies administering the Temporary Assistance for Needy Families (TANF) program.

**DATES**: HHS invites interested parties to review, submit written data, comments,