

2011, contracts with values over \$500,000 were awarded to 25,065 unique vendors. We estimate an average of five responses annually (i.e., the number of proposals received per solicitation issued).

The clause at FAR 52.209-9 applies to solicitations where the resultant contract value is expected to exceed \$500,000 and to contracts in which the offeror has indicated in paragraph (b) of the provision at 52.209-7 that it has current active Federal contracts and grants with total values greater than \$10,000,000. Paragraph (a) of the clause at 52.209-9 requires the contractor to update responsibility information on a semiannual basis, throughout the life of the contract, by posting the information in the CCR.

It is estimated that 5,013 respondents (or 20 percent) of the 25,065 contract awardees will indicate an affirmative answer in paragraph (b) of the provision at 52.209-7 and, pursuant to FAR 52.209-9, those contractors will then have to enter FAPIIS-related data into the CCR function in the SAM. Two responses per respondent per year are calculated for those respondents with contracts and grants greater than \$10 million, because of the requirement in FAR 52.209-9 for semi-annual updates. Because the FAPIIS information in CCR is maintained on individual vendors, contractors awarded more than one contract will still only have to update the data two times per year regardless of the number of contracts awarded them.

We have used an average burden estimate of 100 hours to enter the company's data into the Web site. This time estimate also includes the average annual recordkeeping time necessary per respondent to maintain the company's information internally. Most large businesses and some small businesses have established systems to track compliance. At this time, all or most Government contractors have entered relevant company data in the CCR in accordance with another information collection requirement.

#### Annual Reporting Burden

*Initial response (52.209-7):*

*Respondents: 25,065.*

*Responses per respondent x 5.*

*Total annual responses 125,325.*

*Hours per Response 0.1.*

*Total response burden hours 12,533.*

*Additional Response (52.209-9):*

*Respondents: 5,013.*

*Responses per respondent x 2.*

*Total annual responses 10,026.*

*Hours per Response .5.*

*Total response burden hours 5,013.*

*Total response burden hours: 17,546.*

#### Annual Recordkeeping Burden

*Respondents: 5,013.*

*Responses per respondent x 1.*

*Total annual responses 5,013.*

*Hours per Response 100.*

*Total Recordkeeping burden hours: 501,300.*

#### *Obtaining Copies of Proposals:*

Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat (MVCB), 1275 First Street NE., Washington, DC 20417, telephone (202) 501-4755. Please cite OMB Control No. 9000-0174, Information Regarding Responsibility Matters, in all correspondence.

Dated: March 21, 2013.

**William Clark,**

*Acting Director, Federal Acquisition Policy Division, Office of Governmentwide Acquisition Policy, Office of Acquisition Policy, Office of Governmentwide Policy.*

[FR Doc. 2013-06917 Filed 3-26-13; 8:45 am]

**BILLING CODE 6820-EP-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Delegation of Authorities

Notice is hereby given that I have delegated to the Administrator, Centers for Medicare & Medicaid Services (CMS), or his or her successor, the authorities vested in the Secretary for two provisions of the Affordable Care Act, and the Health Insurance Portability and Accountability Act of 1996 (HIPAA) insofar as such provisions pertain to CMS' mission, as described in Section F.00 of CMS' Statement of Organization, Functions, and Delegations of Authority, last published at 55 FR 9363 (March 13, 1990).

#### Affordable Care Act

*Title I—Quality, Affordable Health Care for All Americans*

Subtitle B—Immediate Actions to Preserve and Expand Coverage

*Section 1104(c)(1), (2), and (3)—*The authorities pursuant to Section 1104(c)(1), (2), and (3) of the Affordable Care Act, as amended, to administer rules related to standards and associated operating rules, unique health plan identifiers, standards for electronic funds transfer, and a standard and a single set of associated operating rules for health claims attachments. These provisions relate to administrative simplification under Section 262 of HIPAA.

*Title IX—Revenue Provisions*

Subtitle A—Revenue Offset Provisions

*Section 9008—*The authorities pursuant to Section 9008 of the Affordable Care Act, as amended, related to the reporting requirements associated with the imposition of annual fee on branded prescription pharmaceutical manufacturers and importers.

### Health Insurance Portability and Accountability Act of 1996

*Section 203—*The authorities pursuant to Section 203, as amended, pertaining to the Beneficiary Incentive Programs.

This delegation of authorities excludes the authority to issue regulations and to submit reports to Congress.

This delegation of authorities is effective immediately.

These authorities may be re-delegated.

These authorities shall be exercised under the Department's policy on regulations and the existing delegation of authority to approve and issue regulations.

I hereby affirm and ratify any actions taken by the Administrator, CMS, or his or her successor, which involved the exercise of the authorities for two provisions of the Affordable Care Act, and HIPAA delegated herein prior to the effective date of this delegation of authorities.

**Authority:** 44 U.S.C. 3101.

Dated: March 20, 2013.

**Kathleen Sebelius,**

*Secretary.*

[FR Doc. 2013-07139 Filed 3-26-13; 8:45 am]

**BILLING CODE 4150-03-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Notice of Cancellation for Call of the President's Advisory Council on Faith-Based and Neighborhood Partnerships

Notice of Cancellation: This notice was published in the **Federal Register** on March 20th, 2013, Volume 78, Number 54, page 17210. The call previously scheduled to convene on April 2, 2013 has been cancelled.

Please contact Ben O'Dell for any additional information about the President's Advisory Council meeting at [partnerships@hhs.gov](mailto:partnerships@hhs.gov).