

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Information Collection Requirements Referenced in HIPAA, Title 1 for the Individual Market, supporting regulations at 45 CFR 148.120, 148.122, 148.124, 148.126, and 148.128, and Forms/instructions; *Use:* The provisions of Title I of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) amend the Public Health Service Act (PHS Act) and are designed to make it easier for people to get access to health care coverage, reduce the limitations that can be put on the coverage, and limit the issuers' ability to terminate coverage. This information collection requirement will ensure that issuers in the individual market comply with Title 1 of HIPAA, provide individuals with certificates of creditable coverage necessary to demonstrate prior creditable coverage, file the necessary documentation with CMS for review in States that have Federal direct enforcement, and ensure States' flexibility to implement State alternative mechanisms. Individuals and their dependents need certificates of creditable coverage to take advantage of the rights they have under HIPAA. States and CMS need the information supplied by issuers to properly perform their regulatory functions under HIPAA and or existing State law.; *Form Number:* CMS-R-205 (OMB#: 0938-0703); *Frequency:* Recordkeeping, Third party disclosure, and Reporting—On Occasion; *Affected Public:* Individuals or Households, Business or other for-profit, Not-for-profit institutions and Federal, State, Local or Tribal Government; *Number of Respondents:* 1,042; *Total Annual Responses:* 2,987,501; *Total Annual Hours:* 868,147.

2. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Business Proposal Forms for Quality Improvement Organizations (QIOs); *Use:* The submission of proposal information by current QIOs and other bidders, on the appropriate forms, will satisfy CMS's need for meaningful, consistent, and verifiable data with which to evaluate contract proposals. The Government will be able to compare the costs reported by the QIOs on the cost reports to the proposed costs noted on the business proposal forms. Subsequent contract and modification negotiations will be based on historic cost data. The business proposal forms will be one element of the historical cost data from which we can analyze future

proposed costs. In addition, the business proposal format will standardize the cost proposing and pricing process among all QIOs. With well-defined cost centers and line items, proposals can be compared among QIOs for reasonableness and appropriateness; *Form Number:* CMS-718BP, 719BP, 720BP, 721BP, SUM, STAFFING, SC1 and SC2 (OMB#: 0938-0579); *Frequency:* Reporting—Triennially; *Affected Public:* Not-for-profit institutions, Business or other for-profit; *Number of Respondents:* 20; *Total Annual Responses:* 20; *Total Annual Hours:* 455.

3. *Type of Information Collection Request:* New collection; *Title of Information Collection:* Evaluation of the Demonstration of Coverage of Chiropractic Services Under Medicare; *Use:* Section 651 of the Medicare Prescription Drug, Improvement and Modernization Act of 2003, authorizes a two-year demonstration "to evaluate the feasibility and advisability of covering chiropractic services under Medicare". The Demonstration aims to evaluate both the costs and the benefits of expanded coverage for chiropractic services. The evaluation will examine the achievements as well as the difficulties inherent in demonstration implementation. The study includes a descriptive evaluation of the program, a survey of a total of 2,000 beneficiaries using expanded services, analyses of medical claims to determine service utilization and expenditures, as well as the cost impact on the Medicare program. These data will allow the researchers to examine use, effectiveness, and satisfaction of Medicare beneficiaries with the chiropractic services they receive in relation to their demographic and clinical characteristics. The results will help CMS to understand the user's experience with chiropractic services and with this Medicare demonstration; *Form Number:* CMS-10187 (OMB#: 0938-New); *Frequency:* Reporting—Monthly; *Affected Public:* Individuals or Households; *Number of Respondents:* 2000; *Total Annual Responses:* 2000; *Total Annual Hours:* 667.

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 E-mail 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.

To be assured consideration, comments and recommendations for the proposed information collections must be received at the address below, no later than 5 p.m. on May 9, 2006. CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development—C, Attention: Bonnie L Harkless, Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: February 8, 2006.

Michelle Shortt,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Head Start Family and Child Experiences Survey (FACES).

OMB No.: 0970-0151.

Description: The Administration for Children and Families (ACF) of the Department of Health and Human Services (HHS) is requesting comments on plans to collect data on a new cohort for the Head Start Family and Child Experiences Survey (FACES). ACF is conducting this study to collect information on Head Start performance measures and has contracted with Mathematica Policy Research, Inc. (with Juarez and Associates and Educational Testing Service as their subcontractors) (contract #HHSP23320052905YC) for this purpose.

FACES will involve five waves of data collection. The first wave will occur in fall 2006. Data will be collected on a sample of approximately 3,650 3- and 4-year-old children and their families from about 350 classrooms across 60 Head Start programs. Data collection will include assessments of Head Start children, interviews with their parents, and ratings by their Head Start teachers. Furthermore, site visitors will interview Head Start teachers and management staff.

The second wave in spring 2007 will be very similar to the fall 2006 data collection, except that we will not repeat interviews with the Head Start staff interviewed in the fall. The children in the second wave will be at the end of their first year of Head Start. Trained staff will also do observations of children's Head Start classrooms.

The third wave will occur in fall 2007 and will involve follow-ups with children who at this time are starting their second year in Head Start. Data collection will follow the same procedures as in fall 2006.

The fourth wave will occur in spring 2008 and will involve follow-ups with children who at this time are either completing a second year in Head Start or completing kindergarten. For those children who are still attending Head Start, data collection will follow the same procedures as in spring 2007. For those children attending kindergarten, data collection will include assessments of children, an "update" survey of the information collected from the parent

interview, and ratings of the children's academic progress and school adjustment by kindergarten teachers.

The fifth wave of data collection will occur in spring 2009. Children who attended kindergarten the previous year will not be included in this wave. The procedures for this effort will be the same as for kindergartners in spring 2008.

This schedule of data collection is necessitated by the mandates of the Government Performance and Results Act (GPRA) of 1993 (Pub. L. 103-62), which requires that the Head Start Bureau move expeditiously toward development and testing of Head Start Performance Measures and, by the 1994

reauthorization of Head Start (Head Start Act, as amended, May 18, 1994, Section 649(d)), which requires periodic assessments of Head Start's quality and effectiveness.

Respondents: Federal Government, Individuals or Households, and Not-for-Profit Institutions.

Annual Burden Estimates

Estimated Response Burden for Respondents to the Head Start Family and Child Experiences Survey (FACES 2006)—Fall 2006, Spring 2007, Fall 2007, Spring 2008, Spring 2009.

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Year 1—Fall 2006:				
Head Start Parent Interview	3,464	1	1.00	3,464
Head Start Child Assessment	3,464	1	0.66	2,286
Teacher Child Rating	350	9.4	0.25	823
Program Director Interview	60	1	0.25	15
Center Director Interview	120	1	0.80	96
Education Coordinator Interview	120	1	0.75	90
Teacher Interview	350	1	1.00	350
Spring 2007:				
Head Start Parent Interview	2,789	1	0.75	2,092
Head Start Child Assessment	2,882	1	0.66	1,902
Teacher Child Rating	370	8.2	0.25	759
Head Start Teacher-new	70	1	1.00	70
Head Start Teacher-continuing	300	1	0.50	150
Year 2—Fall 2007:				
Head Start Parent Interview	1,333	1	0.40	533
Head Start Child Assessment	1,425	1	0.66	941
Teacher Child Rating	200	7.5	0.025	375
Spring 2008:				
Head Start Parent Interview	1,172	1	0.75	879
Head Start Child Assessment	1,282	1	0.66	846
Teacher Child Rating	200	6.7	0.25	335
Head Start Teacher Interview	200	1	200	200
Kindergarten Parent Interview	1,171	1	0.75	878
Kindergarten Child Assessment	1,102	1	0.75	827
Kindergarten Teacher Questionnaire and Child Rating	964	1	0.50	482
Year 3—Spring 2009:				
Kindergarten Parent Interview	1,172	1	0.75	879
Kindergarten Child Assessment	1,103	1	0.75	827
Kindergarten Teacher Questionnaire and Child Rating	965	1	0.50	483

Estimated Total Burden Hours: 20,582.

Estimated Total Annual Burden Hours (average of 3 years): 6,861.

Additional Information

Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. E-mail address: infocollection@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, Attn: Desk Officer for ACF. E-mail address: Katherine_T.Astrich@omb.eop.gov.

Dated: March 6, 2006.

Robert Sargis,

Reports Clearance Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Pediatric Advisory Committee; Amendment of Notice

AGENCY: Food and Drug Administration.

ACTION: Notice.