• Office of Diversity Management and Equal Employment Opportunity (AJI).
• Office of Business Management and Transformation (AJJ).
• Program Support Center (P).

B. Under Section AJ.20 Functions, insert the following:

Office of Human Resources (AJA). The Office of Human Resources (OHR) provides leadership in the planning and development of personnel policies and human resource programs that support and enhance the Department's mission. OHR also provides technical assistance to the Operating Divisions (OPDIVs) to most effectively and efficiently accomplish the OPDIV's mission through improved planning and recruitment of human resources and serves as the Departmental liaison to central management agencies on related matters.

Office for Facilities Management and Policy (AJE). The Office for Facilities Management and Policy (OFMP) provides Department-wide leadership and direction in master planning, facilities planning, design and construction, leasing, capital program budget management, space utilization, sustainable buildings, operations and maintenance, environmental and energy management, historic preservation, and occupational health and safety. OFMP is responsible for the HHS Real Property Asset Management program; and in this role provides management oversight across the HHS portfolio of real property assets to ensure appropriate stewardship and accountability is maintained. In addition, OFMP is responsible for the operation of and physical security for the HHS headquarters facility, the Hubert H. Humphrey Building, and oversight of HHS-occupied space in the Southwest Complex of Washington, DC. OFMP also provides technical assistance to HHS' OPDIVs in evaluating the effectiveness of their facilities programs and policies and fosters creativity and innovation in the administration of these functions.

Office of the Chief Information Officer (AJG). The Office of the Chief Information Officer (OCIO) advises the Secretary and the ASA on matters pertaining to the use of information and related technologies to accomplish Departmental goals and program objectives. The mission of the Office is to establish and provide: assistance and guidance on the use of technology-supported business process reengineering; investment analysis; performance measurement; strategic development and application of information systems and infrastructure; policies to provide improved management of information resources and technology; and better, more efficient service to OCIO's clients and employees.

Office of Diversity Management and Equal Employment Opportunity (AJI). The Office of Diversity Management and Equal Employment Opportunity (ODME) provides leadership in creating and sustaining a diverse workforce and an environment free of discrimination at HHS. ODME works pro actively to enhance the employment of women, minorities, veterans, and people with disabilities through efforts that include policy development, oversight, complaint prevention, investigations and processing, outreach, commemorative events, and standardized education and training programs. ODME also provides resource management and equal opportunity services functions for the Department. To accomplish its mission, ODME provides functional oversight and works in collaboration with the Equal Employment Opportunity offices that service each of the Department's OPDIVs. ODME also conducts Department-wide program analysis to determine barriers to diversity and inclusion.

Office of Business Management and Transformation (AJJ). The Office of Business Management and Transformation (OBMT) provides results-oriented strategic and analytical support for key management initiatives and coordinates the business mechanisms necessary to account for the performance of these initiatives and other objectives as deemed appropriate. OBMT manages the budget and financial resources for the direct support of the ASA. OBMT oversees Department-wide multi-sector workforce management activities. OBMT also provides business process reengineering services, including the coordination of the review and approval process for reorganization and delegation of authority proposals that require the Secretary's or designees' signature.

2. Part P, Program Support Center (PSC), Statement of Organization, Functions, and Delegations of Authority, for the Department of Health and Human Services (HHS), which was last amended at 74 FR 297–301, dated January 5, 2009, at 62 FR 63952–03, dated December 3, 1997, and at 62 FR 5010–01, dated February 3, 1997, is amended as follows:

A. Delete Part P, ''Program Support Center (P),'' in its entirety and replace with the following:

Part P: Program Support Center

Program Support Center (P). The Program Support Center (PSC) provides a full range of support services to HHS and other Federal Agencies, allowing them to focus on their core missions that serve the American public. To accomplish its mission, PSC consolidates functions and concentrates skills and expertise on its customers' business needs. The PSC drives cost savings and continuous quality improvement through economies of scale, cost negotiations, standardized business processes, and consistent quality controls.

3. Part A, Office of the Secretary, Statement of Organization, Functions and Delegations of Authority for the Department of Health and Human Services (HHS) is being amended as Chapter AM, The Office of the Assistant Secretary for Financial Resources, as last amended 74 FR 39325–27, dated August 6, 2009, and at 71 FR 38884–88, dated July 10, 2006, is amended as follows:

A. Under Chapter AML, ''Office of Budget,'' ''Division of the Office of the Secretary Budget (AML5),'' insert the following:

r. Manages the budget and financial resources for the Office of the Secretary.

B. Under Chapter AMS, ''Office of Finance,'' ''Section AMS.20 Functions,'' ''Office of Financial Policy and Reporting (AMS1),'' ''Division of Financial Management Policy (AMS11),'' delete part ''(1)'' in its entirety and replace with the following:

(1) Ensures that proper internal controls for HHS, including the Office of the Secretary (OS), are implemented and maintained under OMB Circular A–123, Management's Responsibility for Internal Control;

4. Delegation of Authority. Pending further redelegation, directives or orders made by the Secretary or ASA, all delegations and redelegations of authority made to officials and employees of affected organizational components will continue in them or their successors pending further redelegations, provided they are consistent with this reorganization.

E.J. Holland, Jr.,

Assistant Secretary for Administration.

[FR Doc. E9–31193 Filed 1–4–10; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS–10310]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

AGENCY: Center for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services, is publishing the following summary of proposed collections 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.

We are, however, requesting an emergency review of the information collection referenced below. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, we have submitted to the Office of Management and Budget (OMB) the following requirements for emergency review. We are requesting an emergency review because the collection of this information is needed before the expiration of the normal time limits under OMB's regulations at 5 CFR 1320(a)(2)(ii). This is necessary to ensure compliance with an initiative of the Administration. We cannot reasonably comply with the normal clearance procedures due to an unexpected event as stated in 5 CFR 1320.13(a). The Centers for Medicare and Medicaid Services (CMS) is requesting that an information collection request (ICR) for Consumer Research on Public Reporting of Hospital Outpatient Measures be processed under the emergency clearance process. Approval of this package is essential in order to comply with Section 1833(t) of the Social Security Act (42 U.S.C. 1395l(t)(17)).

1. *Type of Information Collection Request:* New collection; *Title of Information Collection:* Consumer Research on Public Reporting of Hospital Outpatient Measures *Use:* The Medicare Improvements and Extension Act under Division B of Title I of the Tax Relief and Health Care Act (MIEA–TRHCA) of 2006, enacted in December of 2006, made changes in the Outpatient Prospective Payment System (OPPS). Consequently, CMS is now statutorily required to establish a program under which hospitals will report data on the quality of hospital outpatient care using standardized measures to receive the full annual update to the OPPS payment rate. This will be effective for payments beginning in calendar year (CY) 2009. The program established under these amendments is the Hospital Outpatient Quality Data Reporting Program (HOP QDRP). The measures will expand as additional priority areas for quality improvement in hospital outpatient settings are identified and will be designed to evaluate the diversity of services and clinical topics provided to adult patients in hospital outpatient settings.

The Centers for Medicare & Medicaid Services contracted with L&M Policy Research, LLC (L&M) and its subcontractors, Mathematica Policy Research, Inc. (MPR) and McGee & Evers Consulting (M&E), to conduct exploratory or formative research around the new Hospital Outpatient Measures. Concepts and topics were presented to groups of consumers and caregivers, and to individual physicians. Subsequent to this exploratory or formative research, the research team designed mock-ups of the planned measures, utilizing feedback from the measure developers, the website programmers, plain language experts, and other CMS staff and contractors. The goals of the mock-ups were to integrate the measures into an existing website using the display devices similar to those used for extant measures, but presenting the measures clearly and in such a way that consumers and professionals could draw accurate and useful inferences from the data. The research team and CMS remain concerned about a number of issues in the displays and would like to conduct additional Web site research with consumers, caregivers and professionals to fine tune the recommendations to the website owners and programmers. The team proposes to conduct cognitive interviews with mock-ups and protocols in January 2010 in order to meet Agency deadlines for presentation of the data by June 2010. *Form Number:* CMS–10310 (OMB#: 0938–New); *Frequency:* Once; *Affected Public:* Individuals or Households; *Number of Respondents:* 104; *Total Annual Responses:* 104; *Total Annual Hours:* 41. (For policy questions regarding this collection contact David Miranda 410–786–7819. For all other issues call 410–786–1326.)

CMS is requesting OMB review and approval of this collection by *January 15, 2010,* with a 180-day approval period. Written comments and recommendations will be considered from the public if received by the individuals designated below by January 13, 2010.

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/regulations/pra* 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.

Interested persons are invited to send comments regarding the burden or any other aspect of these collections of information requirements. However, as noted above, comments on these information collection and recordkeeping requirements must be mailed and/or faxed to the designees referenced below by January 13, 2010.

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.

3. *By Facsimile or E-mail to OMB.* OMB, Office of Information and Regulatory Affairs, Attention: CMS Desk Officer, Fax Number: (202) 395–6974, E-mail: *OIRA_submission@omb.eop.gov.*

Dated: December 22, 2009.

Michelle Shortt,

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

[FR Doc. E9–31298 Filed 1–4–10; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–09–09AY]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–5960 or send an e-mail to *omb@cdc.gov.* Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project

Laboratory Response Network (LRN)—Existing Data Collection in use without an OMB Control Number—National Center for Preparedness, Detection, and Control of Infectious Diseases (NCPDCID), Centers for Disease Control and Prevention (CDC).