

Secretary of the Corporation, at (202) 898-7122.

Dated: November 1, 2005.

Federal Deposit Insurance Corporation.

**Robert E. Feldman,**

*Executive Secretary.*

[FR Doc. 05-22174 Filed 11-2-05; 5:10 pm]

**BILLING CODE 6714-01-M**

## FEDERAL ELECTION COMMISSION

### Sunshine Act Meeting

**DATE AND TIME:** Thursday, November 10, 2005, at 10 a.m.

**PLACE:** 999 E Street, NW., Washington, DC (Ninth Floor).

**STATUS:** This meeting will be open to the public.

#### ITEMS TO BE DISCUSSED:

Correction and Approval of Minutes. Final Rules and Explanation and

Justification for the \$5,000 Levin Fund.

Exemption for State, District, and Local Party Committees.

Routine Administrative Matters.

**FOR INFORMATION CONTACT:** Mr. Robert Biersack, Press Officer, Telephone: (202) 694-1220.

**Mary W. Dove,**

*Secretary of the Commission.*

[FR Doc. 05-22275 Filed 11-3-05; 2:51 am]

**BILLING CODE 6715-01-M**

## FEDERAL HOUSING FINANCE BOARD

### Sunshine Act Meeting Notice; Announcing a Partially Open Meeting of the Board of Directors

**TIME AND DATE:** The open meeting of the Board of Directors is scheduled to begin at 10 a.m. on Wednesday, November 9, 2005. The closed portion of the meeting will follow immediately the open portion of the meeting.

**PLACE:** Board Room, First Floor, Federal Housing Finance Board, 1625 Eye Street, NW., Washington, DC 20006.

**STATUS:** The first portion of the meeting will be open to the public. The final portion of the meeting will be closed to the public.

**MATTER TO BE CONSIDERED AT THE OPEN PORTION:** *Approval of 2006 Financing Corporation (FICO) Administrative and Non-Administrative Budgets and Delegation of Authority to Approve Future FICO Budgets.*

**MATTER TO BE CONSIDERED AT THE CLOSED PORTION:** *Periodic Update of Examination Program Development and Supervisory Findings.*

**CONTACT PERSON FOR MORE INFORMATION:** Shelia Willis, Paralegal Specialist, Office of General Counsel, at 202-408-2876 or [williss@fhfb.gov](mailto:williss@fhfb.gov).

Dated: November 2, 2005.

By the Federal Housing Finance Board.

**John P. Kennedy,**

*General Counsel.*

[FR Doc. 05-22212 Filed 11-3-05; 11:52 am]

**BILLING CODE 6725-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of the Secretary

#### Notice of Interest Rate on Overdue Debts

Section 30.13 of the Department of Health and Human Services' claims collection regulations (45 CFR part 30) provides that the Secretary shall charge an annual rate of interest as fixed by the Secretary of the Treasury after taking into consideration private consumer rates of interest prevailing on the date that HHS becomes entitled to recovery. The rate generally cannot be lower than the Department of Treasury's current value of funds rate or the applicable rate determined from the "Schedule of Certified Interest Rates with Range of Maturities." This rate may be revised quarterly by the Secretary of the Treasury and shall be published quarterly by the Department of Health and Human Services in the **Federal Register**.

The Secretary of the Treasury has certified a rate of 12 $\frac{3}{4}$ % for the quarter ended September 30, 2005. This interest rate will remain in effect until such time as the Secretary of the Treasury notifies HHS of any change.

Dated: October 31, 2005.

**Terry Hurst,**

*Acting Deputy Assistant Secretary, Finance.*

[FR Doc. 05-22117 Filed 11-4-05; 8:45am]

**BILLING CODE 4150-04-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Committee on Vital and Health Statistics: Meeting

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting.

*Name:* National Committee on Vital and Health Statistics (NCVHS) Subcommittee on Privacy and Confidentiality.

*Time and Date:* November 15, 2005 1 p.m.-5 p.m.

*Place:* Hubert H. Humphrey Building, Room 705A, 200 Independence Avenue SW., Washington, DC 20201.

*Status:* Open.

*Purpose:* The purpose of this working session will be to continue the discussion on a letter and report to the HHS Secretary on Privacy and the National Health Information Network.

*Contact Person For More Information:* Substantive program information as well as summaries of meetings and a roster of committee members may be obtained from Maya A. Bernstein, Lead Staff for Subcommittee on Privacy and Confidentiality, Office of the Assistant Secretary for Planning and Evaluation, 434E Hubert H. Humphrey Building, 200 Independence Avenue, SW., 20201; telephone (202) 690-7100; or Marjorie S. Greenberg, Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Room 2402, Hyattsville, Maryland 20782, telephone (301) 458-4245. Information also is available on the NCVHS home page of the HHS Web site: <http://www.ncvhs.hhs.gov/>, where further information including an agenda will be posted when available.

Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on (301) 458-4EEO (4336) as soon as possible.

Dated: October 26, 2005.

**James Scanlon,**

*Deputy Assistant Secretary for Planning and Evaluation (OSDP) Office of the Assistant Secretary for Planning and Evaluation.*

[FR Doc. 05-22116 Filed 11-4-05; 8:45am]

**BILLING CODE 4151-05-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10102]

#### Agency Information Collection Activities: Submission for OMB Review; Comment Request

**AGENCY:** Centers for Medicare & 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 & 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 function;

(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.

*Type of Information Collection Request:* New Collection; *Title of Information Collection:* National Implementation of the Hospital Consumer Assessment of Health Providers and Systems Survey (HCAHPS); *Form No.:* CMS-10102 (OMB# 0938-NEW); *Use:* The intent of the HCAHPS initiative is to provide a standardized survey instrument and data collection methodology for measuring patients' perspectives on hospital care. While many hospitals collect information on patient satisfaction, there is no national standard for collecting or publicly reporting this information that would enable valid comparisons to be made across all hospitals. In order to make "apples to apples" comparisons to support consumer choice, it is necessary to introduce a standard measurement approach. HCAHPS can be viewed as a core set of questions that hospitals can combine with their customized items. Participation in HCAHPS is voluntary. Hospitals will begin using HCAHPS, also known as Hospital CAHPS or the CAHPS Hospital Survey, under the auspices of the Hospital Quality Alliance, a private/public partnership

that includes hospital associations, consumer groups, payors and government agencies that share a common interest in reporting on hospital quality; *Frequency:* Monthly; *Affected Public:* Individuals or households; *Number of Respondents:* 2,852,000; *Total Annual Responses:* 2,852,000; *Total Annual Hours:* 285,200.

To obtain copies of the supporting statement and any related forms for these paperwork collections referenced above, access CMS Web site address at <http://www.cms.hhs.gov/regulations/prd/>, or E-mail 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. (Note: This package has been modified since the November 19, 2004 publication.)

To be assured consideration, comments and recommendations for the proposed information collections must be received by the OMB Desk Officer at the address below, no later than 5 p.m. on December 7, 2005.

*OMB Human Resources and Housing Branch, Attention:* CMS Desk Officer, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: October 28, 2005.

**Michelle Shortt,**

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

[FR Doc. 05-22131 Filed 11-4-05; 8:45 am]

**BILLING CODE 4120-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Submission for OMB Review; Comment Request

*Title:* State Council on Developmental Disabilities Program Performance Report.

*OMB No.:* 0980-0172.

*Description:* A Developmental Disabilities Council Program Performance Report is required by Federal statute. Each State Developmental Disabilities Council must submit an annual report for the preceding fiscal year of activities and accomplishments. Information provided in the Program Performance Report will be used (1) in the preparation of the biennial Report to the President, the Congress, and the National Council on Disabilities and (2) to provide a national perspective on program accomplishments and continuing challenges. This information will also be used to comply with requirements in the Government Performance and Results Act of 1993.

*Respondents:* State and Tribal Governments.

### ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
State Council on Developmental Disabilities Program Performance Report ..	55	1	44	2,420

*Estimated Total Annual Burden Hours:* 2,420.

*Additional Information:* Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: [rsargis@acf.hhs.gov](mailto:rsargis@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](mailto:Katherine_T._Astrich@omb.eop.gov).

Dated: October 31, 2005.

**Robert Sargis,**

*Reports Clearance Officer.*

[FR Doc. 05-22096 Filed 11-4-05; 8:45 am]

**BILLING CODE 4184-01-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Submission for OMB Review; Comment Request

*Title:* Developmental Disabilities Protection and Advocacy Program Performance Report.

*OMB No.:* 0980-0160.

*Description:* This information collection is required by Federal statute. Each State Protection and Advocacy System must prepare and submit a Program Performance Report for the preceding fiscal year of activities and accomplishments and of conditions in