

between the models vary with the circumstances of each individual claim and are more difficult to generalize. In summary, however, the same inputs entered into NIH-IREP and the previous version of NIOSH-IREP for a cancer of the lung, trachea, or bronchus could produce different probabilities of causation for some exposure profiles.

The NIOSH review also included consideration of recommendations submitted by four internationally-recognized outside experts. The experts recruited by NIOSH were: David J. Brenner, PhD, Professor of Radiation Oncology and Public Health, Columbia University School of Public Health; Faith G. Davis, PhD, Professor of Epidemiology and Biostatistics, University of Illinois at Chicago, School of Public Health; David B. Richardson, PhD, Assistant Professor of Epidemiology, University of North Carolina School of Public Health; and Jonathan M. Samet, MD, MS, Professor and Chairman, Department of Epidemiology, Johns Hopkins University School of Public Health. Each expert reviewed the issue independently, considering the appropriateness of the NIOSH and NIH models and any alternatives to the use of these models. The only general consensus among all four reviewers was that none recommended the exclusive retention of the NIOSH lung model. Beyond this, there was a diversity of opinion as to how to properly characterize and model the interaction between cigarette smoking and ionizing radiation.

In accordance with the experts' opinions, NIOSH concluded that the current state of scientific knowledge does not support the exclusive use of either of the two IREP lung cancer risk models, and that the most reasonable option within the context of compensation was to reprogram NIOSH-IREP to run both the NIOSH and the NIH lung cancer risk models separately for each relevant EEOICPA case, and then to select the model that produces the higher probability of causation result for application to the case. The programming was accomplished and implemented on February 28, 2006, with the installation of NIOSH-IREP Version 5.5, which replaced NIOSH-IREP Version 5.4.

NIOSH-IREP Version 5.5 also incorporates a bias correction factor in the NIOSH lung model for random errors in dosimetry for "never smokers" who were exposed to radon. Due to a programming oversight, this correction had been inadvertently omitted for never smokers and was applied only to smokers in earlier versions of NIOSH-

IREP. NIOSH-IREP Version 5.5 corrects this error.

The changes introduced in NIOSH-IREP Version 5.5 on February 28, 2006, pertain only to the NIOSH-IREP cancer risk model termed "Lung (162)" and apply only to cancers of the lung, trachea, or bronchus. NIOSH will review all relevant previously completed claims that have not been compensated to identify those for which the new guidelines are applicable, and will re-evaluate the claims using the new guidelines. NIOSH will also apply the new guidelines to all currently active claims and any future cases. Application of these new guidelines may result in DOL calculating higher probability of causation determinations for select lung, trachea, or bronchus cases among previously decided and current EEOICPA cancer claims. As noted above, the changes cannot result in any lower probability of causation determinations.

III. Summary of Recommendations of the Advisory Board on Radiation and Worker Health

Under 42 CFR 81.12, NIOSH is required to obtain the review of the Board before making changes to NIOSH-IREP that would have a substantial effect on probability of causation calculations. NIOSH notified the Advisory Board on Radiation and Worker Health (ABRWH) of its intent to re-evaluate the NIOSH-IREP lung cancer risk model and to review the NIH-IREP lung cancer risk model as a possible alternative model during a meeting of the Board on December 15, 2004. After the NIOSH review and evaluation was completed, NIOSH presented information describing and proposing the current NIOSH-IREP change to the Board, including a summary of the NIOSH evaluation and the expert reviews discussed above. The Board considered the change and voted unanimously to support it during the October 19, 2005, meeting of the Board in Knoxville, Tennessee. The motion to support the change included a provision that NIOSH should revisit the issue in approximately one year to determine if new evidence might warrant consideration of a single lung cancer risk model.

The Director, National Institute for Occupational Safety and Health (NIOSH), has been delegated the authority to sign **Federal Register** notices for CDC that pertain to NIOSH programmatic matters.

Dated: March 17, 2006.

John Howard,

Director, National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

[FR Doc. E6-4314 Filed 3-23-06; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control; Special Emphasis Panel: Centers for Agricultural Disease and Injury Research, Education and Prevention, Program Announcement Number 06-057

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following meeting:

Name: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Centers for Agricultural Disease and Injury Research, Education and Prevention, Program Announcement Number 06-057.

Times and Dates: 8 a.m.-5 p.m., May 1, 2006 (Closed).

8 a.m.-5 p.m., May 2, 2006 (Closed).

8 a.m.-5 p.m., May 3, 2006 (Closed).

8 a.m.-5 p.m., May 4, 2006 (Closed).

8 a.m.-5 p.m., May 5, 2006 (Closed).

Place: Residence Inn, 1456 Duke Street, Alexandria, VA 22314 telephone 703-548-5474.

Status: The meeting will be closed to the public in accordance with provisions set forth in section 552b(c) (4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92-463.

Matters To Be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to Centers for Agricultural Disease and Injury Research, Education and Prevention, Program Announcement Number 06-057.

For Further Information Contact: Steve Olenchock, Ph.D., Scientific Review Administrator, National Institute for Occupational Safety and Health, CDC, 1095 Willowdale Road, MS 1119, Morgantown, WV 26505, Telephone 304-285-6271.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: March 17, 2006.

Alvin Hall,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E6-4266 Filed 3-23-06; 8:45 am]

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DEPARTMENT OF LABOR

Mine Safety and Health Administration

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Workshop on Mine Escape Planning and Emergency Shelters

AGENCY: Mine Safety and Health Administration and the National Institute for Occupational Safety and Health.

ACTION: Notice of workshop.

SUMMARY: The Mine Safety and Health Administration (MSHA) and the National Institute for Occupational Safety and Health (NIOSH) are hosting a workshop to identify the major issues and concerns related to mine escape planning and emergency shelters in the mining industry, and share information with the mining community. The workshop will provide for an exchange of information among all segments of the mining community involved with mine emergency preparedness and will generate an agenda for research to improve technology for mine safety in these areas.

DATES: The workshop will be held on Tuesday, April 18, beginning at 8 a.m. and conclude by 5:30 p.m.

ADDRESSES: The workshop will be held at the National Academy of Sciences Auditorium, 2101 Constitution Avenue, NW., Washington, DC.

FOR FURTHER INFORMATION CONTACT: Dr. Jeffery H. Kravitz, MSHA, at 412-386-6923 or Dr. Gerald L. Finfinger, NIOSH, at 412-386-6550.

SUPPLEMENTARY INFORMATION:

MSHA and NIOSH will moderate a day-long workshop on mine escape planning and emergency shelters.

Location and Transportation

Participants should plan to arrive by Metro or taxi and enter the building at 2100 "C" Street, NW. A shuttle leaves the Foggy Bottom Metro station at 7:15 a.m. and runs directly to the National Academy building. The National Academy has a cafeteria in the building.

Attendance and Registration

The workshop is open to all interested parties. In addition to state and federal government representatives, we expect that mine operators, labor representatives, and manufacturers will be interested in this workshop. We encourage manufacturers and distributors of emergency shelters, self-rescue devices, mine rescue apparatus, and other equipment that can aid in mine escape, evacuation, rescue, and recovery operations to attend this workshop.

You can register at the workshop or you can pre-register by contacting one of the following persons:

- Donna Opfer (NIOSH) at 412-386-6564, Dopfer@cdc.com;
- John Sporrer (NIOSH) at 412-386-6435, JSporrer@cdc.com; or
- Yvonne Quinn (MSHA) at 202-693-9440, quinn.yvonne@dol.gov.

We will include all participants on the registration list and make it available at the workshop.

Scheduled Presentations

Representatives from MSHA and NIOSH will be discussing issues involving mine escape planning, with an emphasis on evacuation as a first priority, and emergency shelters. Invited international speakers include representatives from Canada, Germany, South Africa, and Australia. MSHA and NIOSH will provide participants an opportunity to ask questions and submit written comments and information.

Tentative Agenda

You can find workshop information, including a tentative agenda, on the NIOSH and MSHA Internet sites, <http://www.cdc.gov/niosh> and <http://www.msha.gov>. Topics addressing mine escape planning will include the philosophy of escape planning, a recent history of mine escapes, warning systems, and the use of self-rescue devices and lifelines. Tentative topics addressing emergency shelters include the history of the use of emergency shelters, how mine design has changed since the 1980s, shelter placement in the mine, configuration and construction, life support and instrumentation, communication issues, equipment and supplies, and psychological and training issues.

Workshop Proceedings

MSHA and NIOSH will compile the workshop presentations, which are in PowerPoint® format, audiotape the workshop, and make a transcript of the proceedings. The PowerPoint® presentations and workshop transcript

will be made available on the NIOSH and MSHA Internet sites, <http://www.cdc.gov/niosh> and <http://www.msha.gov>. At a later date, MSHA and NIOSH will summarize the information presented by participants and prepare a joint report.

Dated: March 20, 2006.

David G. Dye,

Acting Assistant Secretary for Mine Safety and Health.

Dated: March 21, 2006.

Dr. John Howard,

Director, National Institute for Occupational Safety and Health.

[FR Doc. 06-2905 Filed 3-23-06; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10137, CMS-10080, CMS-R-296, CMS-1763, and CMS-10116]

Agency Information Collection Activities: Proposed Collection; Comment Request

Agency: Centers for Medicare & Medicaid Services.

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) 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.

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Application for Prescription Drug Plans (PDP); Application for Medicare Advantage Prescription Drug (MA-PD) Plans; Application for Cost Plans to Offer Qualified Prescription Drug Coverage; Application for PACE Organization to Offer Qualified Prescription Drug