1. Lamplighter Financial, MHC, Wauwatosa, Wisconsin; to continue to engage de novo through its subsidiary Wauwatosa Holdings, Inc., Wauwatosa, Wisconsin, in extending credit and servicing loans, pursuant to section 225.28(b)(1) of Regulation Y.

Board of Governors of the Federal Reserve System, June 1, 2006.

Robert deV. Frierson,

Deputy Secretary of the Board. [FR Doc. E6–8788 Filed 6–6–06; 8:45 am] BILLING CODE 6210–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the National Coordinator for Health Information Technology; Nationwide Health Information Network Forum

ACTION: Announcement of Nationwide Health Information Network Forum.

SUMMARY: This notice announces the first forum of the Office of the National Coordinator for Health Information Technology to address the Nationwide Health Information Network functional requirements. The Forum is open to the public and will discuss the requirements needed for a Nationwide Health Information Network that facilitates the accurate, appropriate, timely, and secure exchange of health information.

DATES: June 28, 2006 from 8:30 a.m. to 5 p.m. and June 29, 2006 from 8:30 a.m. to 12:30 p.m.

ADDRESSES: National Institute of Health, Natcher Center, 45 Center Drive, Bethesda, MD 20892.

FOR FURTHER INFORMATION CONTACT: The Office of the National Coordinator for Health Information Technology at 202–690–7151 or the Nationwide Health Information Network Forum home page at http://www.hhs.gov/healthit/NHIN Forum1.html.

John Loonsk,

Director, Office of Interoperability and Standards, Office of the National Coordinator for Health Information Technology, Department of Health and Human Services. [FR Doc. E6–8832 Filed 6–6–06; 8:45 am]

BILLING CODE 4150-24-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) allow the proposed information collection as part of an AHRQ contract for "Privacy and Security Solutions for Interoperable Electronic Health Information Exchange" (the Assessment). In accordance with the Paperwork Reduction Act of 1995, Public Law 104–13 (44 U.S.C. 3506(c)(2)(A)), AHRQ is submitting a request to OMB for emergency review.

AHRQ is requesting an emergency review of this collection because the information is needed for subsequent health information technology projects later this year. Because subcontracts were solicited and awarded to the States, it was not possible to accurately quantify the public burden earlier this year. Data collection subcontract proposals were solicited from States and until they were reviewed, selected, awarded and accepted, it was not possible to accurately quantify the public burden earlier.

DATES: Comments on this notice must be received by July 7, 2006.

ADDRESSES: Written comments should be submitted to John Kraemer, Human Resources and Housing Branch, Office of Information and Regulatory Affairs, Office of Management and Budget, 725 17th Street, Washington, DC 20503, (202) 395–6880.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ clearance officer, Doris Lefkowitz, 540 Gaither Road, Suite 5036, Rockville, MD 20850, (301) 427–1477.

FOR FURTHER INFORMATION CONTACT: Doris Lefkowitz, AHRQ, Reports Clearance Officer, 540 Gaither Road, Suite 5036, Rockville, MD 20850, (301)

427-1477.

SUPPLEMENTARY INFORMATION:

Proposed Project

The Assessment Plan

Regulations promulgated pursuant to the Health Insurance Portability and Accountability Act (HIPAA) established baseline privacy requirements for protected health information and security requirements for protected health information. Many States, institutions, and health care providers have adopted policies that go beyond HIPAA. The manner in which hospitals, physicians, and other health care organizations implement security and privacy policies varies and is tailored to meet their individual organizations' needs. These variations in policies present challenges for widespread electronic health information exchange.

The proposed data collection is the foundational part of a project under AHRQ's Assessment contract. The project seeks to: Identify variations in privacy and security practices and laws affecting electronic health information exchange; learn about and develop best practices and proposed solutions to address identified challenges; and increase expertise in communities about health information privacy and security protections. The project, being managed by RTI International and the National Governors Association, is a publicprivate collaboration. The contractor will work with up to 33 States and Puerto Rico to assess variations in organization-level business policies and practices, and the underlying laws that affect the electronic exchange of health information, identify and propose practical solutions while preserving privacy and meeting security concerns addressed in applicable Federal and State laws, and develop detailed plans to implement solutions. RTI International, a private, nonprofit corporation, was selected as the contract recipient to conduct this study.

The use of health information technology (IT) and the adoption of electronic health records (EHRs) are intended to enable health information to follow patients throughout their care in a seamless and secure manner. Widespread use of EHRs offers a unique means of improving quality, lowering health care costs, and preventing medical errors which contribute to the deaths of between 50,000 and 100,000 Americans per year.

This privacy and security assessment project is a key part of the Department of Health and Human Services' health IT plan to accomplish the President's initiative to foster and accelerate widespread use of electronic health records. Information collected by this effort is critical for the advancement of

health IT and will be used to achieve the goal of developing seamless and secure electronic health records nationwide.

Methods of Collection

Participation in the Assessment will be fully voluntary and non-participation will have no affect on eligibility for, or receipt of, future AHRQ health services research support or on future opportunities to participate in research or to obtain informative research results. In each of the 33 States and Puerto Rico, 15 meetings will be held with stakeholder groups. Each group will have approximately 25 participants who will represent providers of health services, entities supporting health delivery systems, public health agencies, patients, individual consumers, and consumer groups. During these stakeholder meetings, participants will discuss different

"scenarios" describing practical examples of health information exchanges (e.g., patient care, emergency/disaster response, payments, research, compliance with mandatory statutory reporting, law enforcement requests for information, etc.). The objective of these meetings is to identify and assess the affect of organization-level business policies and practices that promote or pose challenges to health information exchange.

ESTIMATED ANNUAL RESPONDENT BURDEN

Type of research activity	Number of respondents	Estimated time per respondent (hours)	Total burden hours
Stakeholder Meetings	12,750	3	38,250
Total	12,750	3	38,250

Estimated Costs to the Federal Government

Expenses (equipment, overhead, printing and support staff) will be incurred by AHRQ components as part of their normal operating budgets. No additional cost to the Federal Government is anticipated.

Request for Comments

In accordance with the above-cited Paperwork Reduction Act, comments on the AHRQ information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of functions of AHRQ, including whether the information will have practical utility; (b) the accuracy of the AHRQ's estimate of burden (including hours and cost) of the proposed collection of information; and (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques of other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: June 2, 2006.

Carolyn M. Clancy,

Director.

[FR Doc. 06–5226 Filed 6–5–06; 1:50 pm] $\tt BILLING\ CODE\ 4160–90–M$

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration on Aging

2005 White House Conference on Aging

AGENCY: Administration on Aging, HHS. **ACTION:** Notice of conference call.

SUMMARY: Pursuant to Section 10(a) of the Federal Advisory Committee Act as amended (5 U.S.C. Appendix 2), notice is hereby given that the Policy Committee of the 2005 White House Conference on Aging will discuss items related to the final report of the Conference during a conference call. The conference call will be open to the public to listen, with call-ins limited to the number of telephone lines available. Individuals who plan to call in and need special assistance, such as TTY, should inform the contact person listed below in advance of the conference call. This notice is being published less than 15 days prior to the conference call due to scheduling problems.

DATES: The conference call will be held on Monday, June 12, 2006, at 11 a.m., Eastern Standard Time.

ADDRESSES: The conference call may be accessed by dialing, U.S. toll-free, 1–800–369–3181, passcode: 2108199, call leader: Nora Andrews, on the date and time indicated above.

FOR FURTHER INFORMATION CONTACT:

Nora Andrews, (202) 357–3463, or email at *Nora.Andrews@hhs.gov*. Registration is not required. Call in is on a first come, first-served basis. Dated: June 1, 2006. **Edwin L. Walker.**

Deputy Assistant Secretary for Policy and Programs.

[FR Doc. E6–8750 Filed 6–6–06; 8:45 am] BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Pub. L. 92–463) of October 6, 1972, that the National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect, Centers for Disease Control and Prevention, Department of Health and Human Services, has been renewed for a 2-year period through May 17, 2008.

For information, contact Dr. Jose Cordero, Executive Secretary, National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect, Centers for Disease Control and Prevention, Department of Health and Human Services, 1600 Clifton Road, NE., Mailstop E87, Atlanta, Georgia 30333, telephone 404/498–3800 or fax 404/498–3070.

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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.