

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 effect 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]

**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 e-mail at [Nora.Andrews@hhs.gov](mailto: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.