

Policy, Office of Travel, Transportation, and Asset Management, at (202) 501-2824, or by email at www.gsa.gov/perdiemquestions. Please cite Notice of Per Diem Bulletin 07-1.

SUPPLEMENTARY INFORMATION:

A. Background

After an analysis of current data, GSA has determined that current lodging rates for certain localities do not adequately reflect the lodging economics in those areas. Except for two minor changes, GSA generally applied the FY 2006 methodology in developing the FY 2007 rates. The two changes were:

- Excluded properties identified as below industry standard.
- Redefined property selections within NSA's based on updated charge card data, in addition to Federal Executive Board/Federal Executive Agency input, to indicate actual Federal traveler destinations.

A meals study was also conducted for 26 new or redefined NSA's.

B. Change in standard procedure

GSA issues/publishes the CONUS per diem rates, formerly published in Appendix A to 41 CFR Chapter 301, solely on the internet at <http://www.gsa.gov/perdiem>. This process, implemented in 2003, ensures more timely changes in per diem rates established by GSA for Federal employees on official travel within CONUS. Notices published periodically in the **Federal Register**, such as this one, now constitute the only notification of revisions in CONUS per diem rates to agencies.

Dated: July 19, 2006.

Becky Rhodes,

Deputy Associate Administrator.

[FR Doc. E6-12467 Filed 8-1-06; 8:45 am]

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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 project: "Assessment of Unreimbursed Care among Community Primary Care Physicians." In accordance with the Paperwork Reduction Act of 1995, Public Law 104-13 (44 U.S.C. 3506(c)(2)(A)), AHRQ invites the public to comment on this proposed information collection.

DATES: Comments on this notice must be received by October 2, 2006.

ADDRESSES: Written comments should be submitted to: Doris Lefkowitz, Reports Clearance Officer, AHRQ, 540 Gaither Road, Room #5036, Rockville, MD 20850.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from AHRQ's Reports Clearance Officer.

FOR FURTHER INFORMATION CONTACT: Doris Lefkowitz, AHRQ, Reports Clearance Officer, (301) 427-1477.

SUPPLEMENTARY INFORMATION:

Proposed Project

"Assessment of Un-reimbursed Care among Community Primary Care Physicians"

This project is being conducted as part of AHRQ's Primary Care Practice-Based Research Networks (PBRN). One of AHRQ's PBRN contractors, the American Academy of Family Physicians' National Research Network (AAFP-NRN), will survey primary care practices participating in its PBRN in order to assess the current state of unreimbursed medical care provided in community based primary care practices.

There has been substantial research conducted to quantify the amount of unreimbursed care provided in private physicians' offices. This survey will collect information from a sample of community-based primary care practices that are widely representative of private physicians across the United States in order to understand the current state of private primary care office unreimbursed care and help assess factors that encourage and discourage practices from engaging in this activity.

The AAFP-NRN will collaborate with AHRQ on the design of a self-administered, web-based questionnaire. The survey will collect information pertaining to the level of unreimbursed care in the practice as well as characteristics of the practice, the physician(s) and the patient population.

Methods of Collection

The survey will be distributed to 800 primary care physicians with an

expected response rate of 75% (600 responses). A stratified sampling approach will be used to ensure appropriate representation from the four Census regions, urban and rural areas, and small and large practices. Selected physicians will receive a letter informing them of the purpose of the study and inviting them to participate. Within a week of receiving the invitation letter, respondents will receive an e-mail inviting them to complete a web-based questionnaire. A paper-based version of the questionnaire will be mailed to nonresponders after two weeks. Reminder phone calls will be placed in weeks four and six to all non-responders. If necessary to achieve target response rates, a re-mailing of the paper-based questionnaire will occur in week eight. The questionnaire is estimated to take no more than fifteen minutes to complete.

ESTIMATED ANNUAL RESPONDENT BURDEN

Data collection effort	Number of respondents	Estimated time per respondent in hours	Estimated total burden hours
Primary care clinicians	600	.25	150

Estimated Costs to the Federal Government

The total cost to the government for this activity is estimated to be \$129,956.

Request for Comments

In accordance with the above-cited legislation, comments on AHRQ's 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 health care research and information dissemination functions of AHRQ, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) of information; (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 or 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: July 24, 2006.

Carolyn M. Clancy,
Director.

[FR Doc. 06-6621 Filed 8-1-06; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

[ATSDR-222]

Public Health Assessments Completed April—June 2006

AGENCY: Agency for Toxic Substances and Disease Registry (ATSDR), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: This notice announces those sites for which ATSDR has completed public health assessments during the period from April 2006 through June 2006. This list includes sites that are on or proposed for inclusion on the National Priorities List (NPL) and includes sites for which assessments were prepared in response to requests from the public.

FOR FURTHER INFORMATION CONTACT: William Cibulas, Jr., Ph.D., Director, Division of Health Assessment and Consultation, Agency for Toxic Substances and Disease Registry, 1600 Clifton Road, NE., Mailstop E-32, Atlanta, Georgia 30333, telephone (404) 498-0007.

SUPPLEMENTARY INFORMATION: The most recent list of completed public health assessments was published in the **Federal Register** on May 17, 2006 [71 FR 28702]. This announcement is the responsibility of ATSDR under the regulation "Public Health Assessments and Health Effects Studies of Hazardous Substances Releases and Facilities" [42 CFR Part 90]. This rule sets forth ATSDR's procedures for the conduct of public health assessments under section 104(i) of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), as amended by the Superfund Amendments and Reauthorization Act (SARA) [42 U.S.C. 9604(i)].

Availability

The completed public health assessments are available for public inspection at the ATSDR Records Center, 1825 Century Boulevard,

Atlanta, Georgia (not a mailing address), between 8 a.m. and 4:30 p.m., Monday through Friday except legal holidays. Public health assessments are often available for public review at local repositories such as libraries in corresponding areas. Many public health assessments are available through ATSDR's Web site at <http://www.atsdr.cdc.gov/HAC/PHA/>. In addition, the completed public health assessments are available by mail through the U.S. Department of Commerce, National Technical Information Service (NTIS), 5285 Port Royal Road, Springfield, Virginia 22161, or by telephone at (800) 553-6847. NTIS charges for copies of public health assessments. The NTIS order numbers are listed in parentheses following the site names.

Public Health Assessments Completed or Issued

Between April 2006, and June 2006, public health assessments were issued for the sites listed below:

NPL and Proposed NPL Sites

Alaska

Eielson Air Force Base (EAFB)—(PB2006-112790).

Colorado

Captain Jack Mill—(PB2006-109060).

Oklahoma

Hudson Refinery NPL Site—(PB2006-112858).

Pennsylvania

Valmont TCE Site: Formerly Valmont Industrial Park Site (a/k/a Valmont Industrial Park)—(PB2006-109770).

Tennessee

Smalley-Piper Collierville—(PB2006-110718).

Virginia

Naval Weapons Station York Town (NWSY)—(PB2006-111467).

Non-NPL Petitioned Sites

Georgia

Colonial Pipeline Danielsville Booster Station—(PB2006-112820).

Tennessee, Loudon County Hazardous Air Pollutants—(PB2006-110717).

Dated: July 26, 2006.

Kenneth Rose,

Acting Director Office of Policy, Planning, and Evaluation, National Center for Environmental Health/, Agency for Toxic Substances and Disease, Registry.

[FR Doc. E6-12415 Filed 8-1-06; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

[ATSDR-221]

Development of Set 20 Toxicological Profiles

AGENCY: Agency for Toxic Substances and Disease Registry (ATSDR), Department of Health and Human Services (HHS).

ACTION: Notice of Development of Toxicological Profiles.

SUMMARY: This notice announces the development of Set 20 Toxicological Profiles. Set 20 Toxicological Profiles consists of one new draft and six updated drafts. These profiles will be available to the public on or about October 17, 2006.

FOR FURTHER INFORMATION CONTACT:

Commander Jessilynn B. Taylor, Division of Toxicology and Environmental Medicine, Agency for Toxic Substances and Disease Registry, Mailstop F-32, 1600 Clifton Road, NE., Atlanta, Georgia 30333, telephone (770) 488-3313. Electronic access to these documents is also available at the ATSDR Web site: <http://www.atsdr.cdc.gov/toxpro2.html>.

SUPPLEMENTARY INFORMATION: The Superfund Amendments and Reauthorization Act of 1986 (SARA) (42 U.S.C. 9601 *et seq.*) amended the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA or Superfund) (42 U.S.C. 9601 *et seq.*) by establishing certain requirements for ATSDR and the U.S. Environmental Protection Agency (EPA) with regard to hazardous substances that are most commonly found at facilities on the CERCLA National Priorities List (NPL). Among these statutory requirements is a mandate for the Administrator of ATSDR to prepare toxicological profiles for each substance included on the priority lists of hazardous substances. These lists identified 275 hazardous substances that ATSDR and EPA determined pose the most significant potential threat to human health. The availability of the revised list of the 275 priority substances was announced in the **Federal Register** on December 7, 2005 (70 FR 702840). For prior versions of the list of substances, see **Federal Register** notices dated April 17, 1987 (52 FR 12866); October 20, 1988 (53 FR 41280); October 26, 1989 (54 FR 43619); October 17, 1990 (55 FR 42067); October 17, 1991 (56 FR 52166); October 28,