both CDC and the Agency for Toxic Substances and Disease Registry.

#### Elaine L. Baker,

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

[FR Doc. E7–7506 Filed 4–19–07; 8:45 am] BILLING CODE 4163–18–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel: Minority HIV/AIDS Research Initiative To Build Capacity in Black and Hispanic Communities and Among Black and Hispanic Researchers To Conduct HIV/AIDS Epidemiologic and Prevention Research, Funding Opportunity Announcement (FOA) Number PS07– 003

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 a meeting of the aforementioned Special Emphasis Panel.

*Time and Date:* 8:30 a.m.–9 a.m., May 17, 2007 (Open). 9 a.m.–4 p.m., May 17, 2007 (Closed).

*Place:* Sheraton Midtown Atlanta Hotel at Colony Square, 188 14th Street, Atlanta, GA 30361.

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 research applications received in response to FOA PS07–003, "Minority HIV/AIDS Research Initiative to Build Capacity in Black and Hispanic Communities and Among Black and Hispanic Researchers to Conduct HIV/AIDS Epidemiologic and Prevention Research."

For Further Information Contact: J. Felix Rogers, PhD, M.P.H., Scientific Review Administrator, Extramural Research Program Office, Centers for Disease Control and Prevention, 1600 Clifton Road, NE, MS E05, Atlanta, GA 30333, telephone 404.639.6101.

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: April 16, 2007. **Elaine L. Baker,**  *Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.* [FR Doc. E7–7520 Filed 4–19–07; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10217, CMS–R– 297 and CMS–10223]

### Agency Information Collection Activities: Proposed Collection; 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) 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: New collection; Title of Information Collection: Physician Survey for the 2006 Medicare Oncology Demonstration Program; Form Numbers: CMS-10217 (OMB#: 0938-New); Use: The 2006 Oncology Demonstration Program aimed to: (1) Have oncology payments increasingly focused on patient-centered care, rather than chemotherapy administration; (2) learn to what extent Medicare beneficiaries are being treated in a manner that yields the best outcomes; (3) understand clinical cancer scenarios where there is not clinical consensus among physicians on the relevance of specific evidence-based practice guidelines; and, (4) ensure that due emphasis is placed on multi-disciplinary, comprehensive approach to palliation and end of life care. In addition, CMS hoped to reduce the potential that unnecessary services

and tests are being performed, thereby lowering program costs while yielding better quality of life for Medicare beneficiaries with cancer. This survey will provide information on how physicians, particularly oncologists and hematologists, adapted their practice in response to the CMS payment incentive, to guide future CMS demonstration projects involving oncologists and all specialists. *Frequency:* Reporting— Once; *Affected Public:* Individuals or households; *Number of Respondents:* 600; *Total Annual Responses:* 600; *Total Annual Hours:* 100.

2. Type of Information Collection *Request:* Extension without change of a currently approved collection; Title of Information Collection: Request for Employment Information; Form Numbers: CMS-R-297 (OMB#: 0938-0787); Use: Section 1837(i) of the Social Security Act provides for a special enrollment period for individuals who delay enrolling in Medicare Part B because they are covered by a group health plan based on their own or a spouse's current employment status. When these individuals apply for Medicare Part B, they must provide proof that the group health plan coverage is (or was) based on current employment status. This form is used by the Social Security Administration to obtain information from employers regarding whether a Medicare beneficiary's coverage under a group health plan is based on current employment status. Frequency: Reporting—Once; Affected Public: Business or Other for profit and Not-forprofit institutions; Number of Respondents: 5000; Total Annual Responses: 5000; Total Annual Hours: 1250.

3. Type of Information Collection Request: New collection; Title of Information Collection: Medicare Competitive Acquisition Program (CAP) for Part B Drugs Evaluation: CAP Physician Survey; Form Numbers: CMS-10223 (OMB#: 0938-New); Use: This physician survey is part of an overall evaluation of the Centers for Medicare and Medicaid Services congressionally mandated Competitive Acquisition for Part B Drugs and Biologicals Program (CAP). Medicare Prescription Drug Improvement and Modernization Act (MMA) section 303(d) requires the implementation of the CAP for those drugs and biologicals covered by Medicare part B that are not paid on a cost or prospective payment system. Since July 1, 2006, physicians have been given a choice between (1) Buying and billing for these covered drugs under the average sales price (ASP) system mandated in section

303(c) of the MMA; or (2) obtaining these drugs from vendors selected for the CAP in a competitive bidding process. If the physician elects to obtain drugs from a CAP vendor, the vendor, rather than the physician, will bill Medicare for the drug. The CAP is therefore a major change in the way Part B-covered drugs and biologicals are acquired and reimbursed for, requiring CMS to consider many design options. The CAP mandate includes a Report to Congress due July, 1 2008, which will include results from this physician survey; Frequency: Reporting-Once; Affected Public: Business or Other forprofits; Number of Respondents: 1560; Total Annual Responses: 1560; Total Annual Hours: 297.50.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web Site address at http://www.cms.hhs.gov/ PaperworkReductionActof1995, or Email your request, including your address, phone number, OMB number, and CMS document identifier, to *Paperwork@cms.hhs.gov,* or call the Reports Clearance Office on (410) 786–1326.

To be assured consideration, comments and recommendations for the proposed information collections must be received at the address below, no later than 5 p.m. on June 19, 2007.

CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development—C, Attention: Bonnie L Harkless, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: April 13, 2007.

## Michelle Shortt,

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

[FR Doc. E7–7423 Filed 4–19–07; 8:45 am] BILLING CODE 4120–01–P

## **ANNUAL BURDEN ESTIMATES**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Administration for Children and Families

#### Submission for OMB Review; Comment Request

*Title:* Grant Application Data Summary (GADS) Form.

*OMB No.:* New Collection. *Description:* The Grant Application Data Summary (GADS) collects information from applicants seeking grants from the Administration for Native Americans (ANA). ANA awards annual grants in three competitive areas. Previously, ANA collected information using a separate form for each competitive area (OMB No. 0970–0261, OMB No. 0970–0263, and OMB No. 0970–0265). ANA has consolidated the three previous information collections into the single GADS instrument.

*Respondents:* Tribal Governments, Native Non-profits, Tribal Colleges and Universities.

Instrument	Number of re- spondents	Number of re- sponses per respondent	Average bur- den hours per response	Total burden hours
Grant Application Summary	500	1	.5	250

Estimated Total Annual Burden Hours: 250.

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: *infocollection@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, Fax: 202–395–6974, Attn: Desk Officer for the Administration for Children and Families.

Dated: April 16, 2007.

#### **Robert Sargis**,

*Reports Clearance Officer.* [FR Doc. 07–1965 Filed 4–19–07; 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:* Protection and Advocacy (P&A) Voting Access Annual Report. *OMB No.:* New Collection.

#### ANNUAL BURDEN ESTIMATES

Description: An annual report is required by Federal statute (the Help America Vote Act (HAVA) of 2002, Public Law 107-252, Section 291, Payments for Protection and Advocacy Systems, 42 U.S.C. 15461). Each State Protection & Advocacy (P&A) System must prepare and submit an annual report at the end of every fiscal year. The report addresses the activities conducted with the funds provided during the year. The information from the annual report will be aggregated into an annual profile of how HAVA funds have been spent. The report will also provide an overview of the P&A goals and accomplishments and permit the Administration on Developmental Disabilities to track progress to monitor grant activities.

*Respondents:* Protection & Advocacy Systems—All States, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, American Samoa, and Guam.

Instrument	Number of respondents	Number of re- sponses per respondent	Average burden hours per response	Total burden hours
Protection and Advocacy (P&A) Voting Access Annual Report	55	1	16	880