

HHS to contact you if further information on the substance of the comment is needed or if your comment cannot be read due to technical difficulties. HHS's policy is that HHS will not edit your comment, and any identifying or contact information provided in the body of a comment will be included as part of the comment placed in the official public record. If HHS cannot read your comment because of technical difficulties and cannot contact you for clarification, HHS may not be able to consider your comment. Written comments to be available at the meeting will be accepted up to Friday, May 30, 2008.

Documents pertaining to Committee deliberations will be available upon written request beginning on June 9, 2008. Requests should be sent to [AdvisoryCommittee@pal-tech.com](mailto:AdvisoryCommittee@pal-tech.com) with "Materials Request" in the subject line and should include include your name, mailing address, and an e-mail address or other contact information.

Because of the Advisory Committee's full agenda and the timeframe in which to cover the agenda topics, there will be no opportunity for oral presentations from the public at this meeting. The public will be able to submit comments to [AdvisoryCommittee@pal-tech.com](mailto:AdvisoryCommittee@pal-tech.com) both before and after the meeting; these will be included in the public record.

Dated: May 15, 2008.

**Daniel Schneider,**

*Acting Assistant Secretary for Children and Families.*

[FR Doc. E8-11552 Filed 5-22-08; 8:45 am]

**BILLING CODE 4184-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Disease, Disability, and Injury Prevention and Control; Special Emphasis Panel (SEP): Associations of Vaccine Adverse Events and Human Genetic Variations, Request for Proposal Number (RFP) 2008-R-VAC01

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 aforementioned meeting:

*Time and Date:* 12 p.m.-2 p.m., June 12, 2008 (Closed).

*Place:* Teleconference.

*Status:* The meeting will be closed to the public in accordance with provisions set forth in Section 552(b)(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 proposals received in response to "Associations of Vaccine Adverse Events and Human Genetic Variations, Request for Proposal (RFP) Number 2008-R-VAC01."

*Contact Person for More Information:* Christine J. Morrison, PhD, Scientific Review Administrator, CDC, 1600 Clifton Road, NE., Mailstop D72, Atlanta, GA 30333, Telephone: (404) 639-3098.

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: May 16, 2008.

**Elaine L. Baker,**

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

[FR Doc. E8-11589 Filed 5-22-08; 8:45 am]

**BILLING CODE 4163-18-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS-R-138, CMS-10147, CMS-10146 and CMS-10064]

#### 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:* Extension of a currently approved collection; *Title of Information Collection:* Medicare Geographic Classification Review Board

(MGCRB) Procedures and Criteria and Supporting Regulations in 42 CFR 412.256 & 412.230; *Use:* Section 1886(d)(10) of the Social Security Act established the MGCRB, an entity that has the authority to accept short-term hospital inpatient prospective payment system (IPPS) hospital applications requesting geographic reclassification for wage index or standardized payment amounts and to issue decisions on these requests. Since it is important to ensure the accuracy of the MGCRB decisions and remain apprised of potential payment impacts, the regulations note that CMS should also receive a copy of any hospital's application to the MGCRB. The information submitted by the hospitals is used by CMS staff to determine the validity of the hospitals' requests and the discretion used by the MGCRB in reviewing and making decisions regarding hospitals' requests for geographic reclassification. Since CMS wrote the guidelines for the MGCRB, it is essential that CMS staff monitor this process. *Form Number:* CMS-R-138 (OMB# 0938-0573); *Frequency:* Yearly; *Affected Public:* Business or other for-profits and not-for-profit institutions; *Number of Respondents:* 300; *Total Annual Responses:* 300; *Total Annual Hours:* 300.

2. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Medicare Prescription Drug Coverage and Your Rights; *Use:* Section 42 CFR 423.562, requires each Part D plan sponsor to arrange with its network pharmacies to post or distribute the Medicare Prescription Drug Coverage and Your Rights notice to Part D plan enrollees at each pharmacy visit when the enrollee disagrees with the information provided by the pharmacist. The purpose of this notice is to provide enrollees with information about how to contact their Part D plans to request a coverage determination, including a request for an exception to the Part D plan's formulary. *Form Number:* CMS 10147 (OMB# 0938-0975); *Frequency:* Daily; *Affected Public:* Business or other for-profits; *Number of Respondents:* 40,000; *Total Annual Responses:* 30,000,000; *Total Annual Hours:* 500,000.

3. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Notice of Denial of Medicare Prescription Drug Coverage; *Use:* Section 1860D-4(g)(1) of the Social Security Act, requires Part D plan sponsors that deny prescription drug coverage to provide a written notice of the denial to the enrollee. The written

notice must include a statement, in clear language, of the reasons for the denial and a description of the appeals process. *Form Number:* CMS 10146 (OMB# 0938-0976); *Frequency:* Daily; *Affected Public:* Business or other for-profits; *Number of Respondents:* 758; *Total Annual Responses:* 290,344; *Total Annual Hours:* 145,172.

4. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Minimum Data Set (MDS) for Swing Bed Hospitals and Supporting Regulations in 42 CFR 413.114(a)(2) and 413.343(a); *Use:* Exercising CMS' authority under section 1888(e)(7) of the Social Security Act to determine the most appropriate manner in which to implement the Skilled Nursing Facility Prospective Payment System (SNF PPS) for swing bed hospitals, CMS designed a 2-page MDS instrument for use by swing bed hospitals that includes all resident assessment data needed to reimburse swing bed hospitals for SNF-level care furnished to Medicare beneficiaries and to provide CMS with the basic demographic and utilization data for future planning and analysis. *Form Number:* CMS-10064 (OMB# 0938-0872); *Frequency:* Occasionally; *Affected Public:* Business or other for-profits, not-for-profit institutions and State, Local, or Tribal Governments; *Number of Respondents:* 481; *Total Annual Responses:* 50,505; *Total Annual Hours:* 328,283.

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 E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to [Paperwork@cms.hhs.gov](mailto:Paperwork@cms.hhs.gov), or call the Reports Clearance Office on (410) 786-1326.

In commenting on the proposed information collections please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in one of the following ways by July 22, 2008:

1. *Electronically.* You may submit your comments electronically to <http://www.regulations.gov>. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) accepting comments.

2. *By regular mail.* You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs,

Division of Regulations Development, *Attention:* Document Identifier/OMB Control Number \_\_\_\_\_, Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: May 15, 2008.

**Michelle Shortt,**

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

[FR Doc. E8-11386 Filed 5-22-08; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS-R-211, CMS-10258, CMS-209, CMS-10259, CMS-R-266, and CMS-R-306]

#### Agency Information Collection Activities: Submission for OMB Review; 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), Department of Health and Human Services, 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 function; (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:* Model Application Template for State Child Health Plan Under Title XXI of the Social Security Act, State Children's Health Insurance Program, Instructions for Model Application Template; *Use:* States are required to submit Title XXI plans and amendments for approval by the Secretary pursuant to section 2102 of the Social Security Act in order to receive funds for initiating and expanding health insurance coverage for uninsured children. The model

application template is used to assist States in submitting a State Child Health Plan and amendments to that plan. *Form Number:* CMS-R-211 (OMB# 0938-0707); *Frequency:* Yearly and occasionally; *Affected Public:* State, Local or Tribal Governments; *Number of Respondents:* 56; *Total Annual Responses:* 40; *Total Annual Hours:* 3,200.

2. *Type of Information Collection Request:* New collection; *Title of Information Collection:* Survey of State Medicaid Agencies: Innovative Approaches to Collecting Citizenship Documentation; *Use:* The purpose of the survey is to collect information from State Medicaid agencies on innovative approaches used to collect citizenship documentation from Medicaid applicants and recipients. Prior to the Deficit Reduction Act of 2005 (DRA), Medicaid applicants could self-attest to citizenship. As of July 1, 2006, applicants and recipients are required to provide original documentation of citizenship. For some states, this new requirement is challenging because there has been a general movement towards virtual applications by phone, mail, or online submission. CMS is using this survey to identify innovative ways that states have taken advantage of existing information within the state system such as matching data, forming unique partnerships, or holding training sessions to facilitate effective and efficient collection of citizenship documentation. CMS will use the information collected with the survey to compile a snapshot of the innovative and unique approaches states are employing to meet the citizenship documentation requirements of the DRA. The results will be incorporated into a final comprehensive report that will be used as an outreach tool that will then be distributed to states. *Form Number:* CMS-10258 (OMB# 0938-NEW); *Frequency:* Once; *Affected Public:* State, Local or Tribal Governments; *Number of Respondents:* 100; *Total Annual Responses:* 100; *Total Annual Hours:* 25.

3. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Laboratory Personnel Report (CLIA) and Supporting Regulations in 42 CFR 493.1-493.2001; *Use:* This form is used by the State agency to determine a laboratory's compliance with personnel qualifications under CLIA. This information is needed for a laboratory's CLIA certification and recertification. *Form Number:* CMS-209 (OMB# 0938-0151); *Frequency:* Biennially; *Affected Public:* Private Sector: Business or other