

Dated: February 13, 2009.

Maryam I. Daneshvar,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E9-3999 Filed 2-24-09; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-09-09AW]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-5960 and send comments to Maryam I. Daneshvar, CDC Acting Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an email to omb@cdc.gov.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection 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 on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

Measuring Preferences for Quality of Life for Child Maltreatment—New—National Center for Injury Prevention and Control (NCIPC), Division of Violence Prevention (DVP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The CDC requests approval of a study and subsequent survey fielding to measure the quality-of-life (QoL) impacts resulting from child maltreatment (CM) using a quantitative, preference-based approach. The U.S. Department of Health and Human Services, among many others, has identified child maltreatment as a serious U.S. public health problem with substantial long-term physical and psychological consequences. Despite considerable research on the consequences of CM in adult survivors, few studies have utilized standard QoL techniques and none have quantified childhood QoL impacts. This gap in the literature means the full QoL burden of CM has not been measured inhibiting the evaluation and comparison of CM intervention programs. This study will improve public health knowledge and economic evaluation of the QoL impacts of physical and sexual CM, including

effects specific to juvenile and adolescent survivors, through the development and fielding of a preference-based survey instrument.

CDC has contracted with RTI International to develop and field a survey instrument to measure the QoL impacts of child maltreatment. RTI will develop the instrument based on standardized QoL methods, existing instruments, a literature review of CM outcomes, and qualitative research techniques. The final instrument will be fielded to a national sample and data analyzed to measure the impacts of CM. Survey development will include interviews with both clinician proxies for adolescent survivors and CM survivors, as well as focus groups with same-sex adult CM survivors.

The instrument will be pretested to an online national sample of all U.S. adults. After pretesting, the final survey will be fielded to a nationally-representative sample of 2000 U.S. adults. The survey will focus on QoL measures of preferences and contain limited questions on past CM exposure to identify possible CM survivors. The national sample will be representative of the U.S. population and include a significant number of CM survivors so that preferences can be estimated separately based on past CM exposure.

Final results will provide an estimate of the quality-of-life burden of child maltreatment in the United States. Analysis and results of the survey data will be used to inform the public health community of the impact of CM, and to evaluate and compare CM intervention programs.

There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form	No. of respondents	No. of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Same-sex adult CM survivors	Focus groups	50	1	1.5	75
	Pretest interviews	15	1	1.5	23
	Pilot Instrument	100	1	20/60	34
	National Sample	2000	1	20/60	667
Clinicians	In-depth interviews	15	1	1	15
Total					814

Dated: February 13, 2009.

Maryam I. Daneshvar,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E9-4000 Filed 2-24-09; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Board of Scientific Counselors, National Center for Public Health Informatics (BSC, NCPHI)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the CDC announces the following meeting of the aforementioned committee:

Time and Date: 12 p.m.–2 p.m., March 20, 2009.

Place: The teleconference call will originate at the CDC; to participate in the teleconference, please dial 1 (866) 713-5586 and enter conference code 4624038.

Status: Open to the public; teleconference access limited only by availability of telephone ports.

Purpose: The board will meet to conduct BSC, NCPHI business.

Matters To Be Discussed: To discuss BSC, NCPHI-related matters including: NCPHI portion of the stimulus package; update on BioSense; re-formation of three working groups; and planning for the May 26, 2009 meeting in Orlando, Florida.

Agenda items are subject to change as priorities dictate.

For Further Information Contact: Dr. Scott McNabb, National Center for Public Health Informatics, CDC, 1600 Clifton Road, NE., (E-78), Atlanta, Georgia 30333, Telephone (404) 498-6427, Fax (404) 498-6235.

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 CDC and the Agency for Toxic Substances and Disease Registry.

Dated: February 13, 2009.

Elaine L. Baker,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. E9-4001 Filed 2-24-09; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-838, CMS-10267 and CMS-339]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

AGENCY: Centers for Medicare & Medicaid Services.

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:* Medicare Credit Balance Reporting Requirements and Supporting Regulations in 42 CFR 405.371, 405.378 and 413.20; *Use:* Section 1815(a) of the Act authorizes the Secretary to request information from providers which is necessary to properly administer the Medicare program. Quarterly credit balance reporting is needed to monitor and control the identification and timely collection of improper payments. The information obtained from Medicare credit balance reports will be used by the contractors to identify and recover outstanding Medicare credit balances and by Federal enforcement agencies to protect Federal funds. The information will also be used to identify the causes of credit balances and to take corrective action. *Form Number:* CMS-838 (OMB# 0938-0600); *Frequency:* Yearly; *Affected Public:* Private sector—business or other for-profits; *Number of Respondents:* 52,380; *Total Annual Responses:* 209,520; *Total Annual Hours:* 628,560. (For policy questions regarding this collection contact: Milton Jacobsen at

410-786-7553. For all other issues call 410-786-1326.)

2. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* CROWNWeb Authentication Service (CAS) Account Form; *Form Number:* CMS-10267 (OMB#: 0938-1050); *Use:* The Consolidated Renal Operations in a Web Enabled Network (CROWNWeb) Authentication Service (CAS) application must be completed by any person needing access to the CROWNWeb system which includes CMS employees, ESRD Network Organization staff and dialysis facilities staff. The CROWNWeb system is the system used as the collection point of data necessary for entitlement of ESRD patients to Medicare benefits and Federal Government monitoring and assessing of quality and type of care provided to renal patients. The data collected in CAS will provide the necessary security measures for creating and maintaining active CROWNWeb user accounts and collection of audit trail information required by the CMS Information Security Officers (ISSO). *Frequency:* Reporting—One-time; *Affected Public:* Business or other for-profit, not-for-profit; *Number of Respondents:* 15,600; *Total Annual Responses:* 15,600; *Total Annual Hours:* 7,800. (For policy questions regarding this collection contact: Michelle Tucker at 410-786-0376. For all other issues call 410-786-1326.)

3. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Medicare Provider Cost Report Reimbursement Questionnaire; *Use:* Form CMS-339 must be completed by all providers that submit full cost reports to the Medicare intermediary under Title XVIII of the Social Security Act. It is designed to answer pertinent questions about key reimbursement concepts found in the cost report and to gather information necessary to support certain financial and statistical entries on the cost report. The questionnaire is used by the Medicare intermediaries as a tool to help them arrive at a prompt and equitable settlement of all of the various types of provider cost reports (hospitals, skilled nursing facilities (SNFs), home health agencies (HHAs), etc.) and sometimes preclude the need for a comprehensive on-site audit. *Form Number:* CMS-339 (OMB# 0938-0301); *Frequency:* Annually; *Affected Public:* Business or other for-profit and not-for-profit institutions; *Number of Respondents:* 38,429; *Total Annual Responses:* 38,429; *Total Annual Hours:*