

material capital or other non-labor costs on telemarketers.

Thus, cumulatively for the live telemarketing call provisions of the TSR and the prerecorded call amendment, total labor costs are \$22,014,913 (\$388,190 + \$39,354 + \$21,078,759 + \$508,610); total capital and other non-labor costs are \$5,837,195 (phone-related costs).

**David C. Shonka,**

*Acting General Counsel.*

[FR Doc. E9-6035 Filed 3-19-09; 8:45 am]

[BILLING CODE 6750-01-S]

## GENERAL SERVICES ADMINISTRATION

### Federal Travel Regulation (FTR); Maximum Per Diem Rates for the States of Idaho, Maryland, and South Carolina

**AGENCY:** Office of Governmentwide Policy, General Services Administration (GSA).

**ACTION:** Notice of Per Diem Bulletin 09-05, revised continental United States (CONUS) per diem rates.

**SUMMARY:** The General Services Administration (GSA) has reviewed the per diem rates for certain locations in the States of Idaho and Maryland and determined that they are inadequate. GSA has also reviewed and is amending the county boundaries of Columbia, South Carolina.

**FOR FURTHER INFORMATION CONTACT:** For clarification of content, contact Mr. Cy Greenidge, Office of Governmentwide Policy, Travel Management Policy, at (202) 219-2349. Please cite FTR Per Diem Bulletin 09-05.

#### SUPPLEMENTARY INFORMATION:

##### A. Background

After an analysis of the per diem rates established for FY 2009 (see the **Federal Register** notice at 73 FR 46271, August 8, 2008), the per diem rate is being changed in the following locations:

##### State of Idaho

- Boundary County.
- Bonner County.
- Teton County.
- Bonneville County.
- Fremont County.

##### State of Maryland

- Frederick County.

##### State of South Carolina

- Lexington County.

Per diem rates are published on the Internet at <http://www.gsa.gov/perdiem>

as FTR per diem bulletins. This process ensures timely increases or decreases 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: March 17, 2009.

**Becky Rhodes,**

*Deputy Associate Administrator, Office of Travel, Transportation and Asset Management.*

[FR Doc. E9-6261 Filed 3-19-09; 8:45 am]

BILLING CODE 6820-14-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Board of Scientific Counselors, Coordinating Office for Terrorism Preparedness and Emergency Response (BSC, COTPER)

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

##### Times and Dates:

9 a.m.–5:15 p.m., April 27, 2009.

9 a.m.–3:15 p.m., April 28, 2009.

**Place:** CDC, 1600 Clifton Road, NE., Global Communications Center, Building 19, Auditorium B3, Atlanta, Georgia 30333.

**Status:** Open to the public for observation and comment, limited only by the space available. The meeting room accommodates approximately 50 people. Visitors to the CDC campus must be processed in accordance with established federal policies and procedures and should pre-register for the meeting as described in Additional Information for visitors. Public comment periods are planned for both meeting days.

**Purpose:** This Board is charged with advising the Secretary of HHS and Director of CDC concerning strategies and goals for the programs and research within COTPER, monitoring the strategic direction and focus of the Divisions, and conducting peer review of scientific programs. For additional information about the COTPER BSC, please visit: <http://emergency.cdc.gov/cotper/science/counselors.asp>.

**Matters To Be Discussed:** A briefing on the findings of the workgroup for external peer review of COTPER's fiscal allocation process; status updates on other external peer reviews of COTPER programs and funded projects; updates from COTPER activities and programs; and a discussion of external peer review topics for fiscal year 2010.

Agenda items are subject to change as priorities dictate.

**Additional Information for Visitors:** All visitors are required to present a valid form

of picture identification issued by a state, federal or international government. To expedite the security clearance process for visitors to the CDC Roybal campus, all visitors must pre-register by submitting the following information by e-mail or phone (see Contact Person for More Information) no later than 12 noon (EST) on Wednesday, April 1, 2009:

- Full Name,
- Organizational Affiliation,
- Complete Mailing Address,
- Citizenship, and
- Phone Number or E-mail Address.

For foreign nationals or non-U.S. citizens, pre-approval is required. Please contact the BSC Coordinator (see Contact Person for More Information) in advance of the posted pre-registration deadline for additional security requirements that must be met.

##### Contact Person for More Information:

Matthew Jennings, BSC Coordinator, COTPER, CDC, 1600 Clifton Rd., NE., Mailstop D-44, Atlanta, GA 30333, Telephone: (404) 639-7357; Facsimile: (404) 639-7977; E-mail:

[COTPER.BSC.Questions@cdc.gov](mailto:COTPER.BSC.Questions@cdc.gov).

The Director, Management Analysis and Service 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 Agency for Toxic Substances and Disease Registry.

Dated: March 13, 2009.

**Elaine L. Baker,**

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

[FR Doc. E9-6099 Filed 3-19-09; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10133, CMS-250-254, CMS-R-5, CMS-10157 and CMS-10279]

#### 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:* Competitive Acquisition Program (CAP) for Medicare Part B Drugs; Vendor Application and Bid Form; *Use:* Section 303 (d) of the Medicare Modernization Act (MMA) requires the implementation of a competitive acquisition program for Medicare Part B drugs and biologicals not paid on a cost or prospective payment system basis. The CAP is an alternative to the Average Sales Price (ASP or "buy and bill") method of acquiring many Part B drugs and biologicals administered incident to a physician's services. The CAP Vendor Application and Bid Form, is used by bidders to provide a response to CMS' solicitation for approved CAP vendor bids and to submit their bid prices for CAP drugs. Though the program is currently on hold and a timeline for the resumption of the CAP has not been established, the CAP Vendor Application and Bid Form will be required to conduct the next round of vendor bidding. *Form Number:* CMS-10133 (OMB#: 0938-0955); *Frequency:* Reporting—Occasionally; *Affected Public:* Private Sector; Business or other for-profits; *Number of Respondents:* 10; *Total Annual Responses:* 10; *Total Annual Hours:* 1. (For policy questions regarding this collection contact Bonny Dahm at 410-786-4006. For all other issues call 410-786-1326.)

2. *Type of Information Collection*

*Request:* Extension of a currently approved collection; *Title of Information Collection:* Medicare Secondary Payer Information Collection and Supporting Regulations in 42 CFR 411.25, 489.2, and 489.20; *Form Number:* CMS 250-254 (OMB#: 0938-0214); *Use:* Medicare Secondary Payer Information (MSP) is essentially the same concept known in the private insurance industry as coordination of benefits, and refers to those situations where Medicare does not have primary responsibility for paying the medical expenses of a Medicare beneficiary. Medicare Fiscal Intermediaries, Carriers, and now Part D plans, need information about primary payers in order to perform various tasks to detect and process MSP cases and make recoveries. MSP information is collected at various

times and from numerous parties during a beneficiary's membership in the Medicare Program. Collecting MSP information in a timely manner means that claims are processed correctly the first time, decreasing the costs associated with adjusting claims and recovering mistaken payments.; *Frequency:* Reporting—On Occasion; *Affected Public:* Individuals or Households, Business or other for-profit, Not-for-profit institutions; *Number of Respondents:* 143,070,217; *Total Annual Responses:* 143,070,217; *Total Annual Hours:* 1,788,057. (For policy questions regarding this collection contact John Albert at 410-786-7457. For all other issues call 410-786-1326.)

3. *Type of Information Collection*

*Request:* Extension of a currently approved collection; *Title of Information Collection:* Physician Certification/Recertification in Skilled Nursing Facilities (SNFs) Manual Instructions and Supporting Regulation in 42 CFR 424.20; *Use:* The Medicare program requires, as a condition for Medicare Part A payment for posthospital skilled nursing facility (SNF) services that a physician must certify and periodically recertify that a beneficiary requires an SNF level of care. The physician certification and recertification is intended to ensure that the beneficiary's need for services has been established and then reviewed and updated at appropriate intervals. *Form Number:* CMS-R-5 (OMB#: 0938-0454); *Frequency:* Recordkeeping—Occasionally; *Affected Public:* Private Sector; Business or other for-profits and Not-for-profit institutions; *Number of Respondents:* 5,167,993; *Total Annual Responses:* 5,167,993; *Total Annual Hours:* 661,265. (For policy questions regarding this collection contact Kia Sidbury at 410-786-7816. For all other issues call 410-786-1326.)

4. *Type of Information Collection*

*Request:* Revision of a currently approved collection; *Title of Information Collection:* CMS Real-time Eligibility Agreement and Access Request; *Form Number:* CMS-10157 (OMB#: 0938-0960); *Use:* Federal law requires that CMS take precautions to minimize the security risk to Federal information systems. Accordingly, CMS is requiring that trading partners who wish to conduct the eligibility transaction on a real-time basis to access Medicare beneficiary information provide certain assurances as a condition of receiving access to the Medicare database for the purpose of conducting eligibility verification. Health care providers, clearinghouses, and health plans that wish access to the Medicare database are required to

complete this form. The information will be used to assure that those entities that access the Medicare database are aware of applicable provisions and penalties. *Frequency:* Recordkeeping and Reporting—One time; *Affected Public:* Business or other for-profit, Not-for-profit institutions; *Number of Respondents:* 2000; *Total Annual Responses:* 500; *Total Annual Hours:* 500. (For policy questions regarding this collection contact Vivian Rogers at 410-786-8142. For all other issues call 410-786-1326.)

5. *Type of Information Collection*

*Request:* New collection; *Title of Information Collection:* Ambulatory Surgical Center Conditions for Coverage; *Form Number:* CMS-10279 (OMB#: 0938-New); *Use:* The Ambulatory Surgical Center (ASC) Conditions for Coverage (CfCs) focus on a patient-centered, outcome-oriented, and transparent processes that promote quality patient care. The CfCs are designed to ensure that each facility has properly trained staff to provide the appropriate type and level of care for that facility and provide a safe physical environment for patients. The CfCs are used by Federal or State surveyors as a basis for determining whether an ASC qualifies for approval or re-approval under Medicare. CMS and the healthcare industry believe that the availability to the facility of the type of records and general content of records, which this regulation specifies, is standard medical practice and is necessary in order to ensure the well-being and safety of patients and professional treatment accountability. *Frequency:* Recordkeeping and Reporting—One time; *Affected Public:* Business or other for-profit, Not-for-profit institutions; *Number of Respondents:* 5,100; *Total Annual Responses:* 5,100; *Total Annual Hours:* 193,800. (For policy questions regarding this collection contact Jacqueline Morgan at 410-786-4282. For all other issues call 410-786-1326.)

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web site 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 *May 19, 2009*:

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: March, 13, 2009.

**Michelle Shortt,**

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

[FR Doc. E9-6038 Filed 3-19-09; 8:45 am]

**BILLING CODE 4120-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Office of Child Support Enforcement**

**Notice To Award Non-Competitive Successor Award to the State Information Technology Consortium (SITC)**

**AGENCY:** Office of Child Support Enforcement, ACF, DHHS.

**ACTION:** Notice to award Non-Competitive Successor Award to the State Information Technology Consortium (SITC).

CFDA#: 93.601.

*Legislative Authority:* Legislative Authority: Section 452(j) of the Social Security Act, 42 U.S.C. 652(j), provides Federal funds for information dissemination and technical assistance to States, training of Federal and State staff to improve CSE programs, and research, demonstration, and special projects of regional or national significance relating to the operation of State child support enforcement programs.

*Amount of Award:* \$124,474.

*Project Period:* 07/1/2008-06/30/2011.

**SUMMARY:** This notice announces that the Office of Child Support Enforcement (OCSE), will award a Non-Competitive Successor Award to the State Information Technology Consortium (SITC) in Raleigh, North Carolina. The award will enable the SITC to educate judges on effective problem-solving court strategies to deal with parents who do not make their child support payments.

**FOR FURTHER INFORMATION CONTACT:**

*Contact for Further Information:* Larry R. Holtz, Program Specialist, Division of State, Tribal and Local Assistance, Office of Child Support Enforcement, 370 L'Enfant Promenade SW., Washington, DC 20447. Telephone: 202-401-5376. E-mail: [Larry.Holtz@acf.hhs.gov](mailto:Larry.Holtz@acf.hhs.gov).

Dated: March 16, 2009.

**Donna J. Bonar,**

*Acting Commissioner, Office of Child Support Enforcement.*

[FR Doc. E9-6119 Filed 3-19-09; 8:45 am]

**BILLING CODE**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Comment Request**

**Proposed Projects**

*Title:* Child Care Biannual Aggregate Report ACF-800.

*OMB No.:* 0970-0150.

*Description:* Section 658K of the Child Care and Development Block Grant Act of 1990 (Pub. L. 101-508, 42 U.S.C. 9858) requires that States and Territories submit annual aggregate data on the children and families receiving direct services under the Child Care and Development Fund. The implementing regulations for the statutorily required reporting are at 45 CFR 98.70. Annual aggregate reports include data elements represented in the ACF-800 reflecting the scope, type, and methods of child care delivery. This provides ACF with the information necessary to make reports to Congress, address national child care needs, offer technical assistance to grantees, meet performance measures, and conduct research. Consistent with the statute and regulations, ACF requests extension of the ACF-800. With this extension, ACF is proposing several changes and clarifications to the reporting requirements and instructions.

*Respondents:* States, the District of Columbia, and Territories including Puerto Rico, Guam, the Virgin Islands, American Samoa, and the Northern Mariana Islands.

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ACF-800 .....	56	1	40	2,240
Estimated Total Annual Burden Hours .....	.....	.....	.....	2,240

In compliance with the requirements of Section 506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded 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. E-mail address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). All requests should be identified by the title of the information collection.

The Department specifically requests comments 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) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.