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Dated: June 13, 2012.

Casey Coleman,

Chief Information Officer.

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GENERAL SERVICES ADMINISTRATION

[Notice—MK—2012—01; Docket No. 2012—0002; Sequence 14]

The President's Management Advisory Board (PMAB); Notification of Upcoming Public Advisory Meeting

AGENCY: Office of Executive Councils, U.S. General Services Administration (GSA).

ACTION: Meeting notice.

SUMMARY: The President's Management Advisory Board (PMAB), a Federal Advisory Committee established in accordance with the Federal Advisory Committee Act (FACA), 5 U.S.C., App., and Executive Order 13538, will hold a public meeting on Wednesday, July 11, 2012.

DATES: *Effective date:* June 26, 2012.

Meeting date: The meeting will be held on Wednesday, July 11, 2012, beginning at 9 a.m. eastern time, ending no later than 3 p.m.

FOR FURTHER INFORMATION CONTACT: Mr. Scott Winslow, Designated Federal Officer, President's Management Advisory Board, Office of Executive Councils, General Services Administration, 1776 G Street NW., Washington, DC 20006, at scott.winslow@gsa.gov.

SUPPLEMENTARY INFORMATION:

Background: The PMAB was established to provide independent advice and recommendations to the President and the President's Management Council on a wide range of issues related to the development of effective strategies for the implementation of best business practices to improve Federal Government management and operation, with a particular focus on productivity and the application of technology.

Agenda: The main purpose for this meeting is for the PMAB to discuss their work on the following: Improving

Strategic Sourcing and Curbing Improper Payments. Additionally, PMAB will hear reports from federal agency executives regarding their progress implementing last year's recommendations to the President's Management Council. Those recommendations were aimed at improving Information Technology (IT) portfolio and project management, IT vendor performance management, Senior Executive Service (SES) leadership development and SES performance appraisal systems. More detailed information on the PMAB recommendations can be found on the PMAB Web site (see below).

Meeting Access: The PMAB will convene its meeting in the Eisenhower Executive Office Building, 1650 Pennsylvania Avenue NW., Washington, DC. Due to security, there will be no public admittance to the Eisenhower Building to attend the meeting. However, the meeting is open to the public; interested members of the public may view the PMAB's discussion at <http://www.whitehouse.gov/live>. Members of the public wishing to comment on the discussion or topics outlined in the Agenda should follow the steps detailed in Procedures for Providing Public Comments below.

Availability of Materials for the Meeting: Please see the PMAB Web site (<http://www.whitehouse.gov/administration/advisory-boards/pmab>) for any available materials and detailed meeting minutes after the meeting.

Procedures for Providing Public Comments: In general, public statements will be posted on the PMAB Web site (see above). Non-electronic documents will be made available for public inspection and copying in PMAB offices at GSA, 1776 G Street NW., Washington, DC 20006, on official business days between the hours of 10 a.m. and 5 p.m. eastern time. You can make an appointment to inspect statements by telephoning (202) 501-1398. All statements, including attachments and other supporting materials, received are part of the public record and subject to public disclosure. Any statements submitted in connection with the PMAB meeting will be made available to the public under the provisions of the Federal Advisory Committee Act.

The public is invited to submit written statements for this meeting to the PMAB prior to the meeting until 5 p.m. eastern time on Tuesday, July 10, 2012, by either of the following methods:

Electronic or Paper Statements: Submit written statements to Mr. Winslow, Designated Federal Officer at scott.winslow@gsa.gov; or send paper

statements in triplicate to Mr. Winslow at the PMAB GSA address above.

Dated: June 20, 2012.

John C. Thomas,

Deputy Director, Office of Committee and Regulatory Management, General Services Administration.

[FR Doc. 2012-15527 Filed 6-25-12; 8:45 am]

BILLING CODE P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30-Day-12-12ET]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call (404) 639-7570 or send an email to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

Proposed Project

Communications Research for the Development of Messages and Materials about Cytomegalovirus (CMV)—NEW—Prevention Research Branch, National Center on Birth Defects and Developmental Disabilities (NCBDDD), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Cytomegalovirus (CMV) is the most common congenital infection in the U.S., causing disabilities in more than 5,500 children born each year (CDC, 2010). Disabilities related to congenital CMV are more common than other well-known childhood conditions, such as Down syndrome, fetal alcohol syndrome, and neural tube defects, and can include hearing or vision loss, mental retardation, psychomotor delays, and speech and language impairment.

This is a multiphase communication research study that will help inform CDC's development of materials and prevention messaging about congenital CMV. The information collection activities will consist of two phases of research: Phase I will consist of focus groups and Phase II will consist of a web survey. First, we plan to conduct 8

focus groups with 9 respondents each to identify potential messaging frames for communicating information about congenital CMV to the target audiences and adopting CMV preventive guidelines. We will also conduct some preliminary testing of existing CDC CMV draft materials (factsheet and video). We estimate that we will screen 144 women in order to recruit 72 participants for the focus groups. These focus groups will be conducted in Atlanta, Georgia (4) and San Diego, California (4). Findings from the Phase I focus groups will inform refinements

to existing CDC messages and materials (factsheet and video), which will be further tested in the second information collection activity, the web survey. Phase II research will include an online survey to test the refined communication interventions (factsheet and video). This web survey will: (1) Examine baseline awareness and knowledge regarding CMV, (2) assess baseline CMV prevention behaviors prior to viewing CMV communication interventions (factsheet and video), (3) assess appeal and evaluate the impact of CMV communication interventions on

their attitudes, beliefs, and behavioral intentions regarding prevention behaviors and (4) assess knowledge, attitudes and behaviors pre- and post-interventions with a larger target audience sample (N=800). We estimate that we will screen 4,800 women in order to recruit 800 respondents for the online survey.

This request is submitted to obtain OMB clearance for two years. There are no costs to the respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Phase I: Focus Groups					
Women of childbearing age	Participant screener	144	1	5/60	12
	Demographic questionnaire.	72	1	15/60	18
	Informed consent form	72	1	15/60	18
	Focus group	72	1	90/60	108
Phase II: Web Survey					
Women of childbearing age	Participant per screener	4,800	1	3/60	240
	Web Survey	800	1	11/60	147

Dated: June 18, 2012.

Ron A. Otten,

Director, Office of Scientific Integrity (OSI), Office of the Associate Director for Science (OADS), Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2012-15574 Filed 6-25-12; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-5505-N3]

Medicare Program; Announcement of a New Opportunity for Participation in the Advance Payment Model for Accountable Care Organizations (ACOs)

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice.

SUMMARY: This notice announces a new opportunity for participation in the Advance Payment Model for certain accountable care organizations participating in the Medicare Shared Savings Program scheduled to begin in January 2013.

DATES: *Application Submission Deadline for the Advance Payment Model:*

Applications for the performance period beginning on January 1, 2013 will be accepted from August 1, 2012 through September 19, 2012.

FOR FURTHER INFORMATION CONTACT:

Maria Alexander, (410) 786-4792.

SUPPLEMENTARY INFORMATION:

I. Background

The Centers for Medicare & Medicaid Services (CMS) is committed to achieving better health for populations, better health care for individuals, and lower growth in expenditures through continuous improvement for Medicare, Medicaid, and Children's Health Insurance Program beneficiaries. One potential mechanism for achieving these goals is for CMS to partner with groups of health care providers of services and suppliers that have a mechanism for shared governance and have formed an Accountable Care Organization (ACO) through which they work together to coordinate care for a specified group of patients. We will pursue such partnerships through complementary efforts, including the Medicare Shared Savings Program and initiatives undertaken by the Center for Medicare

and Medicaid Innovation (Innovation Center).

The Advance Payment Model is an Innovation Center initiative designed for participants in the Medicare Shared Savings Program in need of prepayment of expected shared savings to build their capacity to provide high quality, coordinated care and generate cost savings. The Advance Payment Model will test whether and how prepaying a portion of future shared savings could increase participation in the Medicare Shared Savings Program, and whether advance payments will enhance the ability of ACOs to effectively coordinate care and generate Medicare savings, as well as the speed at which they attain that goal.

In the November 2, 2011 **Federal Register** (76 FR 68012), we published a notice entitled "Medicare Program; Advance Payment Model" that announced the testing of the Advance Payment Model for certain ACOs participating in the Medicare Shared Savings Program scheduled to begin in 2012 and provided information about the Advance Payment Model and the application process. In November 30, 2011 **Federal Register** (76 FR 74067), we published a second notice that extended the application deadline for the first