

searching the OMB control number. Select the link "Submit a Comment" that corresponds with "Information Collection 9000-0077, Quality Assurance Requirements". Follow the instructions provided at the "Submit a Comment" screen. Please include your name, company name (if any), and "Information Collection 9000-0077, Quality Assurance Requirements" on your attached document.

- Fax: 202-501-4067.
- Mail: General Services

Administration, Regulatory Secretariat (MVCB), 1275 First Street NE., Washington, DC 20417. ATTN: Hada Flowers/IC 9000-0077, Quality Assurance Requirements.

**Instructions:** Please submit comments only and cite Information Collection 9000-0077, Quality Assurance Requirements, in all correspondence related to this collection. All comments received will be posted without change to <http://www.regulations.gov>, including any personal and/or business confidential information provided.

**FOR FURTHER INFORMATION CONTACT:** Mr. Curtis E. Glover, Sr., Procurement Analyst, Contract Policy Division, GSA (202) 501-1448 or email [Curtis.glover@gsa.gov](mailto:Curtis.glover@gsa.gov).

#### SUPPLEMENTARY INFORMATION:

##### A. Purpose

Supplies and services acquired under Government contracts must conform to the contract's quality and quantity requirements. FAR Part 46 prescribes inspection, acceptance, warranty, and other measures associated with quality requirements. Standard clauses related to inspection require the contractor to provide and maintain an inspection system that is acceptable to the Government; give the Government the right to make inspections and test while work is in process; and require the contractor to keep complete, and make available to the Government, records of its inspection work. The

##### B. Annual Reporting Burden

An upward adjustment is being made to the previously approved estimated annual burden. The change is based on calculating the burden for each clause in FAR Part 46 associated with this information collection requirement. In addition, the Government considered the information collected under this requirement to be records kept as a part of a contractor's normal business operations, and the Government will only request to see the records a limited number of times per year for each contractor.

*Respondents:* 176,286.

#### *Responses per Respondent:*

1.0186344.

*Total Responses:* 179,571.

*Hours per Response:* 82246.

*Total Burden Hours:* 147,690.

#### *Obtaining Copies of Proposals:*

Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat (MVCB), 1275 First Street NE., Washington, DC 20417, telephone (202) 501-4755. Please cite OMB Control No. 9000-0077, Quality Assurance Requirements, in all correspondence.

Dated: November 1, 2012.

**William Clark,**

*Acting Director, Federal Acquisition Policy, Office of Governmentwide Acquisition Policy, Office of Acquisition Policy, Office of Governmentwide Policy.*

[FR Doc. 2012-27399 Filed 11-8-12; 8:45 am]

**BILLING CODE 6820-EP-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Announcement of Physical Activity Guidelines Mid-Course Report Availability and Public Comment Period

**AGENCY:** Office of Disease Prevention and Health Promotion, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

**ACTION:** Notice.

**Authority:** 15 U.S.C. 3719.

**SUMMARY:** The U.S. Department of Health and Human Services (HHS) announces the availability of the Physical Activity Guidelines for Americans (PAG) Mid-course Report and solicits written comments on the draft report. A subcommittee of the President's Council on Fitness, Sports and Nutrition (PCFSN) was convened to complete the PAG Mid-course Report. The subcommittee was tasked with reviewing the evidence on intervention strategies that have been shown to be effective in increasing physical activity among youth ages 3-17. The report is a review-of-reviews which highlights research from a variety of settings in which physical activity can successfully be implemented for youth, including school, community, preschool/childcare, home/family, and primary care settings. In addition, the report identifies areas for future research.

The intent of this report is to serve as a complement to the *Physical Activity Guidelines for Americans, 2008* which recommends that youth ages 6-17

engage in at least 60 minutes of physical activity each day and provides strategies for increasing physical activity in youth toward meeting the PAG. Although the PAG did not include specific recommendations for youth younger than age 6, the PAG Mid-course Report includes intervention strategies in the preschool/childcare setting. This is a response to new science on physical activity among young children and supports HHS' efforts through Healthy People 2020 to promote physical activity in childcare settings. The subcommittee has completed its draft report and is soliciting public comment before the report is presented to PCFSN for deliberation, and subsequent submission to the Secretary, HHS.

**DATES:** Written comments on the PAG Mid-course Report can be submitted by email or mail and must be received on or before December 10, 2012 at 9:00 a.m. EST.

**ADDRESSES:** The PAG Mid-course Report is available for review electronically at [www.health.gov/PAGuidelines](http://www.health.gov/PAGuidelines).

Comments may be either emailed to [PhysicalActivityGuidelines@hhs.gov](mailto:PhysicalActivityGuidelines@hhs.gov) or mailed to Katrina Butner, Office of Disease Prevention and Health Promotion, Department of Health and Human Services, 1101 Wootton Parkway, Suite LL100, Rockville, MD 20852. For those submitting written comments of more than 5 pages in length, please provide a 1-page summary of key points related to the comments submitted.

**FOR FURTHER INFORMATION CONTACT:** Katrina L. Butner, Ph.D., RD, ACSM CES, Coordinator, Physical Activity Guidelines for Americans Mid-course Report, Physical Activity and Nutrition Advisor, Office of Disease Prevention and Health Promotion, Department of Health and Human Services, 1101 Wootton Parkway, LL100, Rockville, MD 20852. Email: [Katrina.Butner@hhs.gov](mailto:Katrina.Butner@hhs.gov). Phone: (240) 453-8271.

**SUPPLEMENTARY INFORMATION:** A subcommittee of the President's Council on Fitness, Sports and Nutrition (PCFSN) was created with approval of the Secretary, HHS. The subcommittee is comprised of ten experts in physical activity from both federal and non-federal sectors and is chaired by Council member, Dr. Risa Lavizzo-Mourey. The PAG Mid-course Report will serve as a complement to the *Physical Activity Guidelines for Americans, 2008* and is expected to be released in 2013.

The PAG Mid-course Report is available electronically at [www.health.gov/PAGuidelines](http://www.health.gov/PAGuidelines). Hard copies may be obtained by contacting

the individual named within the **FOR FURTHER INFORMATION CONTACT** section of this notice.

Dated: September 24, 2012.

**Don Wright,**

*Director, Office of Disease Prevention and Health Promotion.*

[FR Doc. 2012-27425 Filed 11-8-12; 8:45 am]

**BILLING CODE 4150-32-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Medicare & Medicaid Services**

[CMS-9075-N]

**Medicare and Medicaid Programs; Quarterly Listing of Program Issuances—July through September 2012**

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

**ACTION:** Notice.

**SUMMARY:** This quarterly notice lists CMS manual instructions, substantive

and interpretive regulations, and other **Federal Register** notices that were published from July through September 2012, relating to the Medicare and Medicaid programs and other programs administered by CMS.

**FOR FURTHER INFORMATION CONTACT:** It is possible that an interested party may need specific information and not be able to determine from the listed information whether the issuance or regulation would fulfill that need. Consequently, we are providing contact persons to answer general questions concerning each of the addenda published in this notice.

Addenda	Contact	Phone No.
I CMS Manual Instructions .....	Ismael Torres .....	(410) 786-1864
II Regulation Documents Published in the <b>Federal Register</b> .....	Terri Plumb .....	(410) 786-4481
III CMS Rulings .....	Tiffany Lafferty .....	(410) 786-7548
IV Medicare National Coverage Determinations .....	Wanda Belle .....	(410) 786-7491
V FDA-Approved Category B IDEs .....	John Manlove .....	(410) 786-6877
VI Collections of Information .....	Mitch Bryman .....	(410) 786-5258
VII Medicare-Approved Carotid Stent Facilities .....	Sarah J. McClain .....	(410) 786-2294
VIII American College of Cardiology-National Cardiovascular Data Registry Sites .....	JoAnna Baldwin, MS .....	(410) 786-7205
IX Medicare's Active Coverage-Related Guidance Documents .....	Lori Ashby .....	(410) 786-6322
X One-Time Notices Regarding National Coverage Provisions .....	Lori Ashby .....	(410) 786-6322
XI National Oncologic Positron Emission Tomography Registry Sites .....	Stuart Caplan, RN, MAS .....	(410) 786-8564
XII Medicare-Approved Ventricular Assist Device (Destination Therapy) Facilities .....	JoAnna Baldwin, MS .....	(410) 786-7205
XIII Medicare-Approved Lung Volume Reduction Surgery Facilities .....	JoAnna Baldwin, MS .....	(410) 786-7205
XIV Medicare-Approved Bariatric Surgery Facilities .....	Kate Tillman, RN, MAS .....	(410) 786-9252
XV Fluorodeoxyglucose Positron Emission Tomography for Dementia Trials .....	Stuart Caplan, RN, MAS .....	(410) 786-8564
All Other Information .....	Annette Brewer .....	(410) 786-6580

**I. Background**

Among other things, the Centers for Medicare & Medicaid Services (CMS) is responsible for administering the Medicare and Medicaid programs and coordination and oversight of private health insurance. Administration and oversight of these programs involves the following: (1) Furnishing information to Medicare and Medicaid beneficiaries, health care providers, and the public; and (2) maintaining effective communications with CMS regional offices, State governments, State Medicaid agencies, State survey agencies, various providers of health care, all Medicare contractors that process claims and pay bills, National Association of Insurance Commissioners (NAIC), health insurers, and other stakeholders. To implement the various statutes on which the programs are based, we issue regulations under the authority granted to the Secretary of the Department of Health and Human Services under sections 1102, 1871, 1902, and related provisions of the Social Security Act (the Act) and Public Health Service Act. We also issue various manuals, memoranda, and

statements necessary to administer and oversee the programs efficiently.

Section 1871(c) of the Act requires that we publish a list of all Medicare manual instructions, interpretive rules, statements of policy, and guidelines of general applicability not issued as regulations at least every 3 months in the **Federal Register**.

**II. Revised Format for the Quarterly Issuance Notices**

While we are publishing the quarterly notice required by section 1871(c) of the Act, we will no longer republish duplicative information that is available to the public elsewhere. We believe this approach is in alignment with CMS' commitment to the general principles of the President's Executive Order 13563 released January 2011 entitled "Improving Regulation and Regulatory Review," which promotes modifying and streamlining an agency's regulatory program to be more effective in achieving regulatory objectives. Section 6 of Executive Order 13563 requires agencies to identify regulations that may be "outmoded, ineffective, insufficient, or excessively burdensome, and to modify, streamline, expand or repeal

them in accordance with what has been learned." This approach is also in alignment with the President's Open Government and Transparency Initiative that establishes a system of transparency, public participation, and collaboration.

Therefore, this quarterly notice provides only the specific updates that have occurred in the 3-month period along with a hyperlink to the full listing that is available on the CMS Web site or the appropriate data registries that are used as our resources. This information is the most current up-to-date information and will be available earlier than we publish our quarterly notice. We believe the Web site list provides more timely access for beneficiaries, providers, and suppliers. We also believe the Web site offers a more convenient tool for the public to find the full list of qualified providers for these specific services and offers more flexibility and "real time" accessibility. In addition, many of the Web sites have listservs; that is, the public can subscribe and receive immediate notification of any updates to the Web site. These listservs avoid the need to check the Web site, as notification of