

Sherette.funncoleman@hhs.gov, or call the Reports Clearance Office on (202) 690-6162. Written comments and recommendations for the proposed information collections must be received within 30 days of this notice directly to the OS OMB Desk Officer. All comments must be faxed to OMB at 202-395-6974.

**Proposed Project:** SF-424A (Budget Information—Non-Construction Programs) Form—Extension—OMB No. 4040-0006—Grants.Gov.  
**Abstract:** The SF-424A (Budget Information—Non-Construction Programs) form is utilized by up to 26 Federal grant making agencies. The SF-424A provides budget information when

applying for non-construction Federal grants. The Federal awarding agencies use information reported on the form for the evaluation of award and general management of Federal assistance program awards. A 2-year clearance is requested. Frequency of the data collection varies by Federal agency.

#### ESTIMATED ANNUALIZED BURDEN TABLE

Agency	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
CNCS .....	10	1	4	40
DOI .....	258	1.28	30/60	165
DOS .....	150	1	5/60	13
EPA .....	3,816	1	4	15,264
SSA .....	700	2	30/60	700
Treas .....	191	1.445	1	276
VA .....	184	1	15/60	46
USDA .....	6,951	1	3	20,853
DOC .....	4,880	1	20/60	1,627
DOT .....	50	1	1.6	80
<b>Total .....</b>	<b>17,190</b>	<b>.....</b>	<b>.....</b>	<b>39,063</b>

**Terry Nicolosi,**

*Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.*

[FR Doc. E8-10798 Filed 5-13-08; 8:45 am]

**BILLING CODE 4151-AE-P**

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

##### Office of the National Coordinator for Health Information Technology; American Health Information Community Meeting

**ACTION:** Meeting announcement.

**SUMMARY:** This notice announces the meeting date for the 22nd meeting of the American Health Information Community in accordance with the Federal Advisory Committee Act (Pub. L. No. 92-463, 5 U.S.C., App.) The American Health Information Community will advise the Secretary and recommend specific actions to achieve a common interoperability framework for health information technology (IT).

**Meeting Date:** June 3, 2008, from 8:30 a.m. to 2 p.m. (Eastern).

**ADDRESSES:** Hubert H. Humphrey building (200 Independence Avenue, SW., Washington, DC 20201), Conference Room 800.

**SUPPLEMENTARY INFORMATION:** The meeting will include Workgroup presentations on Recommendations to the Community; a discussion on Priorities and Use Case Options;

updates on the Healthcare Information Technology Standards Panel and the Certification Commission for Healthcare Information Technology; and a discussion with the State Alliance for eHealth.

**FOR FURTHER INFORMATION CONTACT:** Visit <http://www.hhs.gov/healthit/ahic.html>. A Web cast of the Community meeting will be available on the NIH Web site at: <http://www.videocast.nih.gov/>.

If you have special needs for the meeting, please contact (202) 690-7151.

Dated: May 1, 2008.

**Judith Sparrow,**

*Director, American Health Information Community, Office of Programs and Coordination, Office of the National Coordinator for Health Information Technology.*

[FR Doc. E8-10660 Filed 5-13-08; 8:45 am]

**BILLING CODE 4150-45-M**

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

##### Agency for Healthcare Research and Quality

##### Notice of Meetings

In accordance with section 10(d) of the Federal Advisory Committee Act as amended (5 U.S.C., Appendix 2), the Agency for Healthcare Research and Quality (AHRQ) announces meetings of scientific peer review groups. The subcommittees listed below are part of

the Agency's Health Services Research Initial Review Group Committee.

The subcommittee meetings will be closed to the public in accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., Appendix 2 and 5 U.S.C. 552b(c)(6). Grant applications are to be reviewed and discussed at these meetings. These discussions are likely to involve information concerning individuals associated with the applications, including assessments of their personal qualifications to conduct their proposed projects. This information is exempt from mandatory disclosure under the above-cited statutes.

1. **Name of Subcommittee:** Health Care Quality and Effectiveness Research.

**Date:** June 17-18, 2008 (Open from 8:30 a.m. to 8:45 a.m. on June 17 and closed for remainder of the meeting).

**Place:** Crowne Plaza, Conference Room TBD 3, Research Blvd., Rockville, Maryland 20850.

2. **Name of Subcommittee:** Health Care Technology and Decision Sciences.

**Date:** June 18, 2008 (Open from 8:00 a.m. to 8:15 a.m. on June 18 and closed for remainder of the meeting).

**Place:** Crowne Plaza, Conference Room TBD, 3 Research Blvd., Rockville, Maryland 20850.

3. **Name of Subcommittee:** Health Systems Research.

**Date:** June 26, 2008 (Open from 8 a.m. to 8:15 a.m. on June 26 and closed for remainder of the meeting).

**Place:** Marriott RIO, Conference Room TBD, 9751 Washingtonian Blvd., Gaithersburg, MD 20878.

4. *Name of Subcommittee:* Health Care Research Training.

*Date:* June 26–27, 2008 (Open from 9:00 a.m. to 9:15 a.m. on June 26 and closed for remainder of the meeting).

*Place:* Marriott RIO, Conference Room TBD, 9751 Washingtonian Blvd., Gaithersburg, MD 20878.

*Contact Person:* Anyone wishing to obtain a roster of members, agenda or minutes of the nonconfidential portions of the meetings should contact Mrs. Bonnie Campbell, Committee Management Officer, Office of Extramural Research, Education and Priority Populations, AHRQ, 540 Gaither Road, Suite 2000, Rockville, Maryland 20850, Telephone (301) 427–1554.

Agenda items for these meetings are subject to change as priorities dictate.

Dated: May 5, 2008.

**Carolyn M. Clancy,**  
*Director.*

[FR Doc. E8–10564 Filed 5–13–08; 8:45 am]

**BILLING CODE 4160–90–M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[60Day–8AZ]

#### 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 e-mail to [omb@cdc.gov](mailto: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

Health Marketing—New—National Center for Health Marketing (NCHM), Coordinating Center for Health Information and Service (CCHIS), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

CDC is globally recognized for conducting research and investigations and for its action oriented approach. CDC applies research and findings to improve people's daily lives and responds to health emergencies—something that distinguishes CDC from its peer agencies.

CDC is committed to achieving true improvements in people's health. To do this, the agency is defining specific health protection goals to prioritize and focus its work and investments and measure progress.

It is imperative that CDC provide high-quality timely information and programs in the most effective ways to help people, families, and communities protect their health and safety. Through continuous consumer feedback,

prevention research, and public health information technology, we identify and evaluate health needs and interests, translate science into actions to meet those needs, and engage the public in the excitement of discovery and the progress being made to improve the health of the Nation. In our outreach to partners, we build relationships that model shared learning, mutual trust, and diversity in points of view and sectors of society.

The National Center for Health Marketing (NCHM) of the Coordinating Center for Health Information and Service (CCHIS) was established to help ensure that health information, interventions, and programs at CDC are based on sound science, objectivity, and continuous customer input.

NCHM is requesting a 3-year approval for the generic concept of health marketing to provide feedback on the development, implementation and satisfaction regarding public health services, products, communication campaigns and information. The information will be collected using standard qualitative and quantitative methods such as interviews, focus groups, and panels, as well as questionnaires administered in person, by telephone, by mail, by e-mail, and online. More specific types of studies may include: user experience and user-testing; concept/product/package development testing; brand positioning/identity research; customer satisfaction surveying; ethnography/observational studies; and mystery shopping. The data will be used to provide input to the development, delivery and communication of public health services and information at CDC and to address emerging programmatic needs.

Every National Center and Office at CDC will have the opportunity to utilize this generic clearance. There is no cost to the respondents other than their time.

#### ESTIMATED ANNUALIZED BURDEN TABLE

Type of respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
CDC Partners .....	1,000	4	45/60	3,000
Public Health Professionals .....	5,000	2	30/60	5,000
Health Care Professionals .....	5,000	2	30/60	5,000
General Public .....	75,000	1	20/60	25,000
<b>Total .....</b>	<b>86,000</b>	<b>.....</b>	<b>.....</b>	<b>38,000</b>