

by section 1014 of the Medicare Modernization Act.

**DATES:** The business meeting of the Working Group will be held on Wednesday, January 18, 2006, from 9 a.m. to 4:30 p.m. and Thursday, January 19, 2006 from 9 a.m. to 2 p.m.

**ADDRESSES:** The meeting will take place in the conference room of the United Food and Commercial Workers International Union, in Washington, DC. The office is located at 1775 K Street NW. The main receptionist area is located on the 7th floor; the conference room is located on the 11th floor.

The meeting is open to the public.

**FOR FURTHER INFORMATION CONTACT:** Caroline Taplin, Citizens' Health Care Working Group, at (301) 443-1514 or [ctaplin@ahrq.gov](mailto:ctaplin@ahrq.gov). If sign language interpretation or other reasonable accommodation for a disability is needed, please contact Mr. Donald L. Inniss, Director, Office of Equal Employment Opportunity Program, Program Support Center, on (301) 443-1144.

The agenda for this Working Group meeting will be available on the Citizens' Working Group Web site, [www.citizenshealthcare.gov](http://www.citizenshealthcare.gov). Also available at that site is a roster of Working Group members. When summaries of the meeting are completed, they will also be available on the Web site.

**SUPPLEMENTARY INFORMATION:** Section 1014 of Pub. L. 108-173, (known as the Medicare Modernization Act) directs the Secretary of the Department of Health and Human Services (DHHS), acting through the Agency for Healthcare Research and Quality, to establish a Citizens' Health Care Working Group (Citien Group). This statutory provision, codified at 42 U.S.C. 299 n., directs the Working Group to: (1) Identify options for changing our health care system so that every American has the ability to obtain quality, affordable health care coverage; (2) provide for a nationwide public debate about improving the health care system; and (3) submit its recommendations to the President and the Congress.

The Citizens' Health Care Working Group is composed of 15 members: the Secretary of DHHS is designated as a member by statute and the Comptroller General of the U.S. Government Accountability Office (GAO) was directed to name the remaining 14 members whose appointments were announced on February 28, 2005.

#### Working Group Meeting Agenda

The Working Group business meeting on January 18th and 19th will be

devoted to ongoing Working Group business. Topics to be addressed are expected to include: an update on community meetings; background information on public perceptions on health care quality and efficiency; discussion of data from various sources including community meetings, Web site questions, Web casts, the citizen survey and other sources of public input; and broad concepts relating to the Working Group's recommendation report.

#### Submission of Written Information

The Working Group invites written submissions on those topics to be addressed at the Working Group business meetings listed above. In general, individuals or organizations wishing to provide written information for consideration by the Citizens' Health Care Working Group should submit information electronically to [citizenshealth@ahrq.gov](mailto:citizenshealth@ahrq.gov). Since all electronic submissions will be posted on the Working Group Web site, separate submissions by topic will facilitate review of ideas submitted on each topic by the Working Group and the public.

This notice is published less than 15 days in advance of the meeting due to logistical difficulties.

Dated: December 30, 2005.

**Carolyn M. Clancy,**  
Director.

[FR Doc. 06-91 Filed 1-5-06; 8:45 am]

**BILLING CODE 4160-90-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Disease, Disability, and Injury Prevention and Control Special Emphasis Panels (SEP): In-Country Development of H5N1 Influenza Vaccines in Vietnam, Program Announcement Number CI06-008

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following meeting:

**Name:** Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): In-Country Development of H5N1 Influenza Vaccines in Vietnam, Program Announcement Number CI06-008.

**Times and Dates:** 11 a.m.-1 p.m., January 23, 2006 (Closed).

**Place:** Teleconference.

**Status:** The meeting will be closed to the public in accordance with provisions set forth in section 5523b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92-463.

**Matters to be Discussed:** The meeting will include the review, discussion, and evaluation of applications received in response to: In-Country Development of H5N1 Influenza Vaccines in Vietnam, Program Announcement Number CI06-008.

#### FOR FURTHER INFORMATION CONTACT:

Mary Lerchen, Dr.P.H., Associate Director, Office of Public Health Research, Centers for Disease Control and Prevention, 1600 Clifton Road, NE., Mailstop D-72, Atlanta, GA 30030, Telephone (404) 639-4897.

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 CDC and the Agency for Toxic Substances and Disease Registry.

Dated: December 30, 2005.

**Alvin Hall,**

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

[FR Doc. 06-98 Filed 1-5-06; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS-R-250]

#### Agency Information Collection Activities: Proposed Collection; 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) 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:* Skilled Nursing Facility Resident Assessment MDS Data and Supporting Regulations in 42 CFR 413.337, 413.343, 424.32, and 483.20; *Form Number:* CMS-R-250 (OMB#: 0938-0739); *Use:* Skilled Nursing Facilities (SNFs) are required to submit the resident assessment data as described at 42 CFR 483.20 in the manner necessary to administer the payment rate methodology described in 42 CFR 413.337. Pursuant to sections 4204(b) and 4214(d) of Omnibus Budget Reconciliation Act (OBRA) 1987, the current requirements related to the submission and retention of resident assessment data for the 5th, 30th, 60th and 90th days following admission, necessary to administer the payment rate methodology described in 42 CFR 413.337, are subject to the Paperwork Reduction Act. The burden associated with information collection is the sum of the SNF staff time required to complete the Minimum Data Set (MDS), SNF staff time to encode the data, and SNF staff time spent in transmitting the data.; *Frequency:* Reporting—Other, 5th, 14th, 30th, 60th, and 90th days of stay; *Affected Public:* Business or other for-profit, Not-for-profit institutions; *Number of Respondents:* 15,352; *Total Annual Responses:* 4,719,118; *Total Annual Hours:* 3,284,247.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web site address at <http://www.cms.hhs.gov/regulations/prar/>, 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.

To be assured consideration, comments and recommendations for the proposed information collections must be received at the address below, no later than 5 p.m. on March 7, 2006.

CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development—B, Attention: William N. Parham, III, Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: December 28, 2005.

**Michelle Shortt,**

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

[FR Doc. E6-14 Filed 1-5-06; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

**[Document Identifier: CMS-10165 and CMS-10149]**

#### 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:* Application for Participation in the Medicare Care Management Performance Demonstration; *Form Number:* CMS-10165 (OMB#: 0938-0965); *Use:* The Medicare Care Management Performance (MCMP) Demonstration and its corresponding Report to Congress are mandated by the section 649 of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA). Section 649 of the MMA provides for the implementation of a "pay for performance" demonstration under which Medicare would pay incentive payments to physicians who (1) adopt and use health information technology; and (2) meet established standards on clinical performance

measures. This demonstration will be held in four States, Arkansas, California, Massachusetts, and Utah. Providers that are enrolled in the Doctors' Office Quality—Information Technology (DOQ-IT) project are eligible to participate in the demonstration. To enroll in the MCMP Demonstration, a physician/provider must submit an application form. The information collected will be used to assess eligibility for the demonstration; *Frequency:* Reporting—One-time only; *Affected Public:* Business or other for-profit; *Number of Respondents:* 800; *Total Annual Responses:* 800; *Total Annual Hours:* 133.

2. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Health Insurance Reform: Security Standards Final Rule; *Form Number:* CMS-10149 (OMB#: 0938-0949); *Use:* The Department of Health and Human Services (HHS) Medicare Program, other Federal agencies operating health plans or providing health care, State Medicaid agencies, private health plans, health care providers, and health care clearinghouses must assure their customers (for example, patients, insured individuals, providers, and health plans) that the integrity, confidentiality, and availability of electronic protected health information they collect, maintain, use, or transmit is protected. The confidentiality of health information is threatened not only by the risk of improper access to stored information, but also by the risk of interception during electronic transmission of the information. The use of the security standards will improve the Medicare and Medicaid programs, other Federal health programs, and private health programs; in addition, it will improve the effectiveness and efficiency of the health care industry in general by establishing a level of protection for certain electronic health information.; *Frequency:* Recordkeeping and Reporting—On occasion; *Affected Public:* Business or other for-profit, Not-for-profit institutions, Federal Government, and State, Local or Tribal Government; *Number of Respondents:* 4,000,000; *Total Annual Responses:* 4,000,000; *Total Annual Hours:* 64,539,263.

To obtain copies of the supporting statement and any related forms for these paperwork collections referenced above, access CMS Web site address at <http://www.cms.hhs.gov/PaperworkReductionActof1995>, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to