

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Administration for Children and Families****Submission for OMB Review; Comment Request**

Title: TANF High Performance Bonus Report, Assessment of Medicaid and SCHIP Enrollment.

OMB No.: 0992-0007.

Description: Pub. L. 104-93, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), established the Temporary

Assistance for Needy Families (TANF) Program. It also included provisions for rewarding States that attain the highest levels of success in achieving the legislative goals of that program. The purpose of this collection, which is a proposed extension without change of a collection currently in use, is to obtain data upon which to base the computation for measuring State performance in meeting those goals by providing Medicaid and State Children's Health Insurance (SCHIP), Program work supports. HHS will use the information to allocate the Medicaid/SCHIP program portion of the

bonus grant funds appropriated under the law and implemented by 45 CFR part 270 published on August 30, 2000. States will not be required to submit this information unless they elect to compete on a Medicaid/SCHIP measure for the TANF High Performance Bonus awards in any Federal year for which Congress authorizes and appropriates bonus funds.

Respondents: Respondents may include any of the 50 States, the District of Columbia, and the U.S. Territories of Guam, Puerto Rico, and the Virgin Islands.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
TANF High Performance Bonus Report, Assessment of Medicaid and SCHIP Enrollment Among Individuals After Leaving TANF Assistance	54	4	20	4,320

Estimated Total Annual Burden Hours: 4,320.

Additional Information: Copies of the proposed collection may be obtained by writing to The Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: grjohnson@acf.hhs.gov.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Attn: Desk Officer for ACF, *E-mail address:*

Katherine.T.Astrich@omb.eop.gov.

Dated: January 18, 2005.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 05-1301 Filed 1-24-05; 8:45 am]

BILLING CODE 4184-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES**National Institutes of Health****Government-Owned Inventions; Availability for Licensing**

AGENCY: National Institutes of Health, Public Health Service, DHHS.

ACTION: Notice.

SUMMARY: The inventions listed below are owned by an agency of the U.S. Government and are available for licensing in the U.S. in accordance with 35 U.S.C. 207 to achieve expeditious commercialization of results of federally-funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

ADDRESSES: Licensing information and copies of the U.S. patent applications listed below may be obtained by writing to the indicated licensing contact at the Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852-3804; telephone: (301) 496-7057; fax: (301) 402-0220. A signed Confidential Disclosure Agreement will be required to receive copies of the patent applications.

Closed-Circuit Flow Obturator for Laparoscopy Port

Jason Wynberg (NCI)

U.S. Provisional Patent Application filed 24 Nov 2004 (DHHS Ref. No. E-237-2004/0-US-01)

Licensing Contact: Michael Shmilovich; (301) 435-5019;

shmilovm@mail.nih.gov.

Available for licensing, manufacturing and commercial development is a laparoscopic surgical device. This device is an obturator with a cylindrical shape (diameter about 11mm, length about 4.5 inches) with hollow inflow and outflow channels running through the obturator to allow for the transfer of fluids or gas into the interior of the laparoscopic working space in a closed-circuit fashion. At the top and bottom ends of the obturator, flexible hollow tubings are coupled to the end holes of the obturator's hollow channels. In working position, the obturator traverses the inner space of the previously placed laparoscopic port, with the outside diameter of the obturator, creating an airtight seal with the port's diaphragm seal. The flexible tubings that continue from the bottom/intracorporeal end of the obturator would rest inside the operative working space, for connection to any number of end-pieces that would complete the intracorporeal closed-circuit flow path. Applications of this device include transmission of chemotherapeutics, thermoregulated fluids for organ cooling/warming, and possibly even gas media. This obturator can also be designed to include a working channel among its hollow channels, so that a 5 mm laparoscopic instrument can be used through the obturator, at the same time as it is