

should be supplied to the DFO in the following formats: one hard copy with original signature, and one electronic copy via e-mail to stallworth.holly@epa.gov (acceptable file format: Adobe Acrobat PDF, WordPerfect, MS Word, MS PowerPoint, or Rich Text files in IBM-PC/Windows 98/2000/XP format).

Meeting Access: For information on access or services for individuals with disabilities, please contact Dr. Stallworth at (202) 343-9867 or stallworth.holly@epa.gov. To request accommodation of a disability, please contact Dr. Stallworth, preferably at least 10 days prior to the meeting to give EPA as much time as possible to process your request.

Dated: August 11, 2006.

Anthony F. Maciorowski,

Associate Director for Science, EPA Science Advisory Board Staff Office.

[FR Doc. E6-13744 Filed 8-18-06; 8:45 am]

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GENERAL SERVICES ADMINISTRATION

[OMB Control No. 3090-0278]

National Contact Center; Information Collection; National Contact Center Customer Evaluation Survey

AGENCY: Citizen Services and Communications, Federal Consumer Information Center, GSA.

ACTION: Notice of request for comments regarding a renewal to an existing OMB clearance.

SUMMARY: Under the provisions of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35), the General Services Administration has submitted to the Office of Management and Budget (OMB) a request to review and approve an extension of a currently approved information collection requirement regarding the National Contact Center Customer Evaluation Survey. This OMB clearance expires on September 30, 2006.

Public comments are particularly invited on: Whether this collection of information is necessary and whether it will have practical utility; whether our estimate of the public burden of this collection of information is accurate, and based on valid assumptions and methodology; ways to enhance the quality, utility, and clarity of the information to be collected.

DATES: Submit comments on or before: September 20, 2006.

FOR FURTHER INFORMATION CONTACT: Tonya Beres, Federal Information

Specialist, Office of Citizen Services and Communications, at telephone (202) 501-1803 or via e-mail to tonya.beres@gsa.gov.

ADDRESSES: Submit comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Ms. Hillary Jaffe, GSA Desk Officer, OMB, Room 10236, NEOB, Washington, DC 20503, and a copy to the Regulatory Secretariat (VIR), General Services Administration, Room 4035, 1800 F Street, NW., Washington, DC 20405. Please cite OMB Control No. 3090-0278, National Contact Center Customer Evaluation Survey, in all correspondence.

SUPPLEMENTARY INFORMATION:

A. Purpose

This information collection will be used to assess the public's satisfaction with the National Contact Center service, to assist in increasing the efficiency in responding to the public's need for Federal information, and to assess the effectiveness of marketing efforts.

B. Annual Reporting Burden

Respondents: 2,200.

Responses Per Respondent: 1.

Hours Per Response: .05 (3 minutes) for phone survey

.06 (4 minutes) for e-mail survey.

Total Burden Hours: 119

OBTAINING COPIES OF PROPOSALS: Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat (VIR), 1800 F Street, NW., Room 4035, Washington, DC 20405, telephone (202) 208-7312. Please cite OMB Control No. 3090-0278, National Contact Center Customer Evaluation Survey, in all correspondence.

Dated: July 7, 2006.

Daryle M. Seckar,

Director, Office of Enterprise Infrastructure Operations.

[FR Doc. E6-13750 Filed 8-18-06; 8:45 am]

BILLING CODE 6820-CX-S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Public Health Emergency Preparedness (OPHEP); Office of Public Health Emergency Medical Countermeasures (OPHEMC)

AGENCY: Office of Public Health Emergency Preparedness (OPHEP)/ Office of Public Health Emergency

Medical Countermeasures (OPHEMC), HHS.

ACTION: Notice of meeting.

SUMMARY: The Department of Health and Human Services is pleased to announce the BioShield Stakeholders Workshop. The BioShield Stakeholders Workshop is being convened to provide individual stakeholders with an opportunity to gain insight into the current BioShield interagency governance process and to provide input into the draft HHS *Public Health Emergency Medical Countermeasures (PHEMC) Strategy for Chemical, Biological, Radiological, and Nuclear (CBRN) Threats*.

DATES: The Workshop will be held on September 25-26, 2006. Pre-registration is available via the Web site shown below. On-site registration will also be possible, space permitting. On-site registration, if offered, will begin at 8 a.m. on September 25. The meeting will begin at 8:30 a.m. and will end at approximately 6 p.m. on both days.

ADDRESSES: The meeting will be held at the Crystal Gateway Marriott, 1700 Jefferson Davis Highway, Arlington, VA 22202. The Crystal Gateway Marriott is located directly above the Crystal City Metro Station on the yellow and blue Metro lines.

Register: Please visit <http://www.hhs.gov/ophep/ophehc/> to register online. The deadline for online registration is Monday, September 18, 2006. On-site registration will also be available at the meeting, space permitting. Seating is limited, so register today!

SUPPLEMENTARY INFORMATION: The Department of Health and Human Services is pleased to announce the upcoming HHS BioShield Stakeholders Workshop. The goals of the HHS BioShield Stakeholders Workshop are:

1. To provide its attendees with insight into the current BioShield interagency governance process; and
2. To provide individual stakeholders with an opportunity to help guide the future implementation of Project BioShield by providing input into the draft HHS *Public Health Emergency Medical Countermeasures (PHEMC) Strategy for Chemical, Biological, Radiological, and Nuclear (CBRN) Threats*.

The draft *PHEMC Strategy for CBRN Threats* is being developed under the leadership of the Office of Public Health Emergency Medical Countermeasures (OPHEMC) within the Office of Public Health Emergency Preparedness (OPHEP), U.S. Department of Health and Human Services, and will be published in the **Federal Register** prior

to this workshop. This Strategy will define the principles guiding HHS medical countermeasure research, development and acquisition.

The BioShield Stakeholders Workshop will be an open meeting for representatives from the pharmaceutical and biotechnology industries, professional societies, State and local public health organizations, the academic research and development community, public interest groups, stakeholder Federal agencies, and Congress.

The BioShield Stakeholders Workshop is being convened, and the PHEMC Strategy for CBRN Threats is being developed and published, to fulfill the promise that Health and Human Services Secretary Michael O. Leavitt made on March 16, 2006, in his testimony before the Senate Committee on Health, Education, Labor, and Pensions. During his testimony, Secretary Leavitt pledged to:

work closely with other departments and agencies to streamline and make more effective the current BioShield interagency governance process. We will make this process more transparent and work to educate the public and industry about our priorities and opportunities. As part of this, HHS will convene an outreach meeting with these external stakeholders later this year.

OPHEP leads Federal efforts to prepare the nation to prevent and mitigate the health effects of disasters, natural or manmade. As part of this important mission, OPHEMC, within OPHEP, plays a leadership role in the advanced development and acquisition of medical countermeasures, including implementation of the Project BioShield Act of 2004.

The purpose of Project BioShield is to accelerate the research, development, acquisition, and availability of effective medical countermeasures for chemical, biological, radiological, and nuclear (CBRN) threats. The Special Reserve Fund (SRF), a discretionary reserve of \$5.6 billion for the advanced development and purchase of priority medical countermeasures over 10 years, was authorized under Project BioShield to support this mission.

For more information regarding the BioShield Stakeholders Workshop, and to register for the Workshop, please visit <http://www.hhs.gov/ophep/ophemc/>.

Dated: August 15, 2006.

Carol Linden,

Deputy Director, OPHEMC.

[FR Doc. 06-7033 Filed 8-18-06; 8:45 am]

BILLING CODE 4150-31-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities; Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, Department of Health and Human Services.

ACTION: Notice of proposed information collection.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request the Office of Management and Budget (OMB) to allow the proposed information collection project "Continuance of the Medical Expenditure Panel Survey—Household and Medical Provider Component through 2009." In accordance with the Paperwork Reduction Act of 1995, Public Law 104-13 (44 U.S.C.

3506(c)(2)(A)), AHRQ invites the public to comment on this proposed collection.

This proposed information collection was previously published in the **Federal Register** on June 2, 2006 and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment.

DATES: Comments on this notice must be received by September 20, 2006.

ADDRESSES: Written comments should be submitted to: Doris Lefkowitz, AHRQ, Reports Clearance Officer, 540 Gaither Road, Suite 5036, Rockville, MD 20850. Copies of the proposed collection plans, data collection instruments and specific details of the estimated burden can be obtained from the AHRQ Reports Clearance Officer, (301) 427-1477.

FOR FURTHER INFORMATION CONTACT: Doris Lefkowitz, AHRQ, Reports Clearance Officer, (301) 427-1477.

SUPPLEMENTARY INFORMATION:

Proposed Project

"Continuance of the Medical Expenditure Panel Survey—Household and Medical Provider Component through 2009."

AHRQ has conducted an annual panel survey of U.S. households and their associated medical providers since 1996 through the Medical Expenditures Panel Survey (MEPS)—Household (MEPS-HC) and Medical Provider Component (MEPS-MPC). This clearance requests continuance of this annual survey through 2009. The MEPS is jointly sponsored by the AHRQ and the

National Center for Health Statistics (NCHS). The MEPS is conducted using a sample of households that responded to a prior year's National Health Interview Survey (NHIS) which is sponsored by the NCHS. The NHIS surveys approximately 40,000 households (110,000 persons) each year.

The NHIS is used as a sampling frame for the MEPS and other surveys to increase efficiency of data collection efforts within the Department of Health and Human Services.

Data to be collected from each household is completed through the MEPS-HC and includes detailed information on demographics, health conditions, health status, use of health care services, charges and payments for medical care, medications, and employment and health insurance. Data to be collected from medical providers including hospitals, physicians, and pharmacies is completed through the MEPS-MPC which supplements and verifies information provided by the households. With the written permission of household members of the MEPS-HC, the MEPS-MPC collects actual dates of services, diagnosis and service codes, as well as charges and payments for services. Subject to AHRQ NCHS confidentiality statutes, data will be made available through Agency publications, journals, public use files and Web-based statistical tools. The data are intended for multiple purposes including:

- Generating national estimates of individual and family health care use and expenditures, private and public health insurance coverage, and the availability, cost and scope of private health benefits among Americans.
- Examining the quality of care for Americans, especially those with chronic conditions.
- Examining access to and costs of health care for common diseases and conditions, health care quality, prescribed medications and other health issues.

Statisticians and researchers will use these data to make important generalizations about the civilian non-institutionalized population of the United States and to conduct research in which the family is the unit of analysis.

Data Confidentiality

The confidentiality of MEPS data is protected under the NCHS and AHRQ confidentiality statutes, found in sections 934(c) and 308(d) of the Public Health Service Act (42 U.S.C. 299c-3(c) and 42 U.S.C. 242m).