

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:** Revision of currently approved collection; **Title of Information Collection:** Survey Tool for <http://www.medicare.gov> and <http://www.cms.hhs.gov>; **Use:** The purpose of this submission is to request a revision of 0938-0756 (CMS-R-268) to continue to collect information from Internet users as they exit from the Websites [Medicare.gov](http://www.medicare.gov) and [CMS.hhs.gov](http://www.cms.hhs.gov). As part of the revised collection we are combining the content from the collection 0938-0900 that was discontinued on 5/31/2007. The packages are being combined to eliminate a duplication of effort. We are requesting a three-year clearance, so that the feedback received through the survey can be used continually to update and improve the sites. To ensure that we gather information about user reactions to the Websites, we have developed a survey tool that users can complete when they exit either site or by accessing a link on the bottom bar on the page. The responses on this survey tool will help CMS to make appropriate changes to the Web sites in the future. The survey tool contains questions about the information that visitors are seeking from the sites, the degree to which either site was useful to them, the improvements that they would like to see in the sites, and their general comments. **Form Number:** CMS-R-268 (OMB# 0938-0756); **Frequency:** On occasion; **Affected Public:** Individuals and households, Private sector—Business or other for-profit; **Number of Respondents:** 7,000; **Total Annual Responses:** 7,000; **Total Annual Hours:** 1,167.

**2. Type of Information Collection Request:** Extension of currently

approved collection; **Title of Information Collection:** Independent Rural Health Center/Freestanding Federally Qualified Health Center Cost Report and Supporting Regulations 42 CFR 413.20 and 42 CFR 413.24; **Use:** Providers of service in the Medicare program are required to submit annual information to achieve reimbursement for healthcare services rendered to Medicare beneficiaries.

The Form CMS-222 cost report is needed to determine the amount of reasonable cost due to the providers for furnishing medical services to Medicare beneficiaries; **Form Number:** CMS-222 (OMB# 0938-0107); **Frequency:** Yearly; **Affected Public:** Business or other for-profit and Not-for-profit institutions; **Number of Respondents:** 3,159; **Total Annual Responses:** 3,159; **Total Annual Hours:** 157,950.

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/PaperworkReductionActof1995>, 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 by the OMB desk officer at the address below, no later than 5 p.m. on April 14, 2008: OMB Human Resources and Housing Branch, Attention: Carolyn Raffaelli, New Executive Office Building, Room 10235, Washington, DC 20503, Fax Number: (202) 395-6974.

Dated: March 7, 2008.

**Michelle Shortt,**

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

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

**[Document Identifier: CMS-R-211, CMS-10258, CMS-209, CMS-10259, and CMS-R-266]**

#### **Agency Information Collection Activities: Proposed Collection; Comment Request**

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

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:** Model Application Template for State Child Health Plan Under Title XXI of the Social Security Act, State Children's Health Insurance Program, Instructions for Model Application Template; **Use:** States are required to submit Title XXI plans and amendments for approval by the Secretary pursuant to section 2102 of the Social Security Act in order to receive funds for initiating and expanding health insurance coverage for uninsured children. The model application template is used to assist States in submitting a State Child Health Plan and amendments to that plan. **Form Number:** CMS-R-211 (OMB# 0938-0707); **Frequency:** Yearly and occasionally; **Affected Public:** State, Local or Tribal Governments; **Number of Respondents:** 56; **Total Annual Responses:** 40; **Total Annual Hours:** 3,200.

**2. Type of Information Collection Request:** New collection; **Title of Information Collection:** Survey of State Medicaid Agencies: Innovative Approaches to Collecting Citizenship Documentation; **Use:** The purpose of the survey is to collect information from State Medicaid agencies on innovative approaches used to collect citizenship documentation from Medicaid applicants and recipients. Prior to the Deficit Reduction Act of 2005 (DRA), Medicaid applicants could self-attest to citizenship. As of July 1, 2006, applicants and recipients are required to provide original documentation of citizenship. For some states, this new requirement is challenging because there has been a general movement towards virtual applications by phone,

mail, or online submission. CMS is using this survey to identify innovative ways that states have taken advantage of existing information within the state system such as matching data, forming unique partnerships, or holding training sessions to facilitate effective and efficient collection of citizenship documentation. CMS will use the information collected with the survey to compile a snapshot of the innovative and unique approaches states are employing to meet the citizenship documentation requirements of the DRA. The results will be incorporated into a final comprehensive report that will be used as an outreach tool that will then be distributed to states. *Form Number:* CMS-10258 (OMB# 0938-NEW); *Frequency:* Once; *Affected Public:* State, Local or Tribal Governments; *Number of Respondents:* 100; *Total Annual Responses:* 100; *Total Annual Hours:* 25.

**3. Type of Information Collection Request:** Extension of a currently approved collection; *Title of Information Collection:* Laboratory Personnel Report (CLIA) and Supporting Regulations in 42 CFR 493.1-493.2001; *Use:* This form is used by the State agency to determine a laboratory's compliance with personnel qualifications under CLIA. This information is needed for a laboratory's CLIA certification and recertification. *Form Number:* CMS-209 (OMB# 0938-0151); *Frequency:* Biennially; *Affected Public:* Private Sector: Business or other for-profits, Not-for-profit institutions; State, Local or Tribal Governments; and Federal Government *Number of Respondents:* 21,000; *Total Annual Responses:* 10,500; *Total Annual Hours:* 5,248.

**4. Type of Information Collection Request:** New collection; *Title of Information Collection:* State Plan Amendment template for 1915(i) State Plan Home and Community-Based Services (HCBS) Benefit; *Use:* Section 6086 of the Deficit Reduction Act (DRA), expanded access to HCBS for the elderly and disabled and added a new section 1915(i) to the Social Security Act. Under 1915(i), States can amend their State plans to add these services. The template includes the information needed by CMS to determine whether the State's services will meet the requirements under 1915(i). *Form Number:* CMS-10259 (OMB# 0938-NEW); *Frequency:* Once; *Affected Public:* State, Local or Tribal Governments; *Number of Respondents:* 56; *Total Annual Responses:* 3; *Total Annual Hours:* 240.

**5. Type of Information Collection Request:** Extension of a currently

approved collection; *Title of Information Collection:* Medicaid Disproportionate Share Hospital Annual Reporting; *Use:* Section 1923(j)(i) of the Social Security Act requires States to submit an annual report that identifies each disproportionate share hospital (DSH) that received a DSH payment under the State's Medicaid program in the preceding fiscal year and the amount of DSH payments paid to that hospital in the same year and such other information as the Secretary determines necessary to ensure the appropriateness of DSH payments. The information supplied will satisfy the requirements under section 1923(a)(2)(D) of the Act as well. *Form Number:* CMS-R-266 (OMB# 0938-0746); *Frequency:* Yearly; *Affected Public:* State, Local or Tribal Governments; *Number of Respondents:* 52; *Total Annual Responses:* 52; *Total Annual Hours:* 1976.

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/PaperworkReductionActof1995>, 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.

In commenting on the proposed information collections please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in one of the following ways by *May 13, 2008*:

1. *Electronically.* You may submit your comments electronically to <http://www.regulations.gov>. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) accepting comments.

2. *By regular mail.* You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number 0938-0707, Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: March 7, 2008.

**Michelle Shortt,**

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

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Indian Health Service

#### **Request for Public Comment: 30-Day Proposed Information Collection: Indian Health Service Customer Satisfaction Survey**

**AGENCY:** Indian Health Service, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 which requires 30 days for public comment on proposed information collection projects, the Indian Health Service (IHS) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection project was previously published in the **Federal Register** (72 FR 69696) on December 10, 2007 and allowed 60 days for public comment. No public comment was received in response to the notice. The purpose of this notice is to allow 30 days for public comment to be submitted directly to OMB.

*Proposed Collection: Title:* 0917-NEW, "Indian Health Service Customer Satisfaction Survey." *Type of Information Collection Request:* Three year approval of this new information collection, 0917-NEW, "Indian Health Service Customer Satisfaction Survey."

*Form(s):* Tribal Homeowner Survey, Tribal Partner Survey, Annual Operator Operation and Maintenance (O&M) Survey, and Post Construction O&M Survey. *Need and Use of Information Collection:* The IHS goal is to raise the health status of the American Indian and Alaska Native people to the highest possible level by providing comprehensive health care and preventive health services. To support the IHS mission, the Sanitation Facilities Construction Program (SFCP) provides technical and financial assistance to American Indian Tribes and Alaska Native villages for cooperative development and continues operation of safe water, wastewater, and solid waste systems and related support facilities.

The Indian Health Service Office of Environmental Health and Engineering (OEHE), SFCP, "Customer Satisfaction Surveys," will provide the information needed to complete these goals. With the information collected from Tribal homeowners, Tribal leaders, and Tribal operation and maintenance operators the Sanitation facilities programs will make improvements that will result in improved quality of services.