

questionnaire will be mailed to the respondent.

#### ESTIMATED ANNUAL RESPONDENT BURDEN

Form Name	Number of respondents	Number of responses per respondent	Hours per response	Total burden hours
AHRQ Grantee Survey .....	149	1	2	298
Total .....	149	na	na	298

#### ESTIMATED ANNUALIZED RESPONDENT COST BURDEN

Form Name	Number of respondents	Total burden hours	Average hourly wage rate*	Total cost burden
AHRQ Grantee Survey .....	149	298	\$42.98	\$12,808
Total .....	149	298	na	\$12,808

\*Based upon the mean of the average wages for teachers (college and university), National Compensation Survey: Occupational Wages in the United States 2005, U.S. Department of Labor, Bureau of Labor Statistics.

#### Estimated Annual Costs to the Federal Government

The proposed information collection is part of a larger evaluation of the effectiveness of AHRQ's grant-supported research on healthcare costs, productivity, and market forces, which includes a systematic review of the research that AHRQ has funded, in-depth interviews with grantees and grant document review, case studies to assess the effects and dissemination pathways of market forces research, and preparation of reports and briefings. The cost to conduct the survey of identified grantees is \$38,962.

#### Request for Comments

In accordance with the above-cited Paperwork Reduction Act legislation, comments on the AHRQ information collection proposal are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of functions of the Agency, including whether the information will have practical utility; (b) the accuracy of the Agency's estimate of the burden (including hours and costs) 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 the use of automated collection techniques or other forms of information technology. Comments submitted in response to this notice will be summarized and included in the request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: December 17, 2007.

**Carolyn M. Clancy,**

*Director.*

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**BILLING CODE 4160-90-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, HHS.

**ACTION:** Notice.

**SUMMARY:** This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection project: "Focus Groups on Consumer Engagement in Developing Electronic Health Information Systems." 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 information collection.

**DATES:** Comments on this notice must be received by February 26, 2008.

**ADDRESSES:** Written comments should be submitted to: Doris Lefkowitz, Reports Clearance Officer, AHRQ, by e-mail at [doris.lefkowitz@ahrq.hhs.gov](mailto:doris.lefkowitz@ahrq.hhs.gov).

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

#### FOR FURTHER INFORMATION CONTACT:

Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427-1477, or by e-mail at [doris.lefkowitz@ahrq.hhs.gov](mailto:doris.lefkowitz@ahrq.hhs.gov).

#### SUPPLEMENTARY INFORMATION:

#### Proposed Project

"Focus Groups on Consumer Engagement in Developing Electronic Health Information Systems"

This project will consist of focus groups to gain insights into healthcare consumers' awareness and perceptions of Health Information Technology (IT), and how best to engage consumers in the development of these technologies. AHRQ has so far invested significant resources in initiatives to promote the planning and development of new Health IT that should improve healthcare, lower healthcare costs, and improve patient safety. For such benefits to be maximized, it is important to understand how consumers view Health IT and how to engage them in the design and implementation of future innovations.

AHRQ will conduct 20 focus groups (in addition to two pretest groups) with healthcare consumers, that is persons who have visited a healthcare provider (either for their own health or the health of a family member) in the previous two years. For the most part, the groups will be homogenous with respect to the presence or absence of either of the following characteristics: (a) Managing a chronic health condition (or the condition of a close family member), or (b) Having visited at least three healthcare providers in the past two years.

Participants will be covered by a range of health insurance plans, and persons not covered by health insurance will also be recruited. Some groups will include only persons enrolled in a

Health Maintenance Organization (HMO).

The data to be collected for this project will be in two forms: (a) answers to a screener questionnaire designed to identify and recruit eligible participants, and (b) verbal reports—i.e., focus group participants' answers to questions posed by the moderator and reactions to

comments of other group members. The focus group discussions will be audio-taped with participants' consent and transcribed for analysis purposes.

#### Method of Collection

Participants will be screened for eligibility and recruited for the focus groups by telephone. The focus group

sessions will be conducted in-person with approximately 10 persons per group. The focus group discussion will take approximately 2 hours, and we have assumed a 20-minute travel time (each way) per participant. Thus, focus group participation will require 2.67 hours per response.

#### Estimated Annual Respondent Burden

TABLE 1.—ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Hours per response	Total burden hours
Recruiting Screener .....	2,200	1	5/60	183
Focus Group Discussion Guide .....	220	1	2.67	587
Total .....	2,420	na	na	770

TABLE 2.—ESTIMATED ANNUALIZED COST BURDEN

Form name	Number of respondents	Total burden hours	Average hourly wage rate*	Total cost burden
Recruiting Screener .....	2,200	183	\$17	\$3,111
Focus Group Discussion Guide .....	220	587	17	9,979
Total .....	2,420	770	na	13,090

\*Based upon the mean hourly wage of full-time workers, third-quarter of 2007. Current Population Survey, U.S. Department of Labor, Bureau of Labor Statistics.

#### Estimated Annual Costs to the Federal Government

Based on the current budget for the project, the total cost to the Federal Government is \$257,474 (\$251,114 of contractor costs + \$6,360 of travel and time cost for AHRQ employees) for the 18-month period from Oct. 1st, 2007 to March 31st, 2009. The annualized cost is approximately \$171,649. This amount includes all direct and indirect costs of the design, data collection, analysis, and reporting phases of the study. The costs of Federal employees for monitoring the contract are \$5,660.

#### Request for Comments

In accordance with the above-cited Paperwork Reduction Act legislation, comments on AHRQ's information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of AHRQ health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) 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 upon the

respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: December 17, 2007.

**Carolyn M. Clancy,**  
Director.

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#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Agency For Healthcare Research and Quality

#### Notice of Meeting

In accordance with section 10(d) of the Federal Advisory Committee Act (5 U.S.C., Appendix 2), announcement is made of a Health Care Policy and Research Special Emphasis Panel (SEP) meeting.

A Special Emphasis Panel is a group of experts in fields related to health care research who are invited by the Agency for Healthcare Research and Quality (AHRQ), and agree to be available, to conduct on an as needed basis,

scientific reviews of applications for AHRQ support. Individual members of the Panel do not attend regularly-scheduled meetings and do not serve for fixed terms or a long period of time. Rather, they are asked to participate in particular review meetings which require their type of expertise.

Substantial segments of the upcoming SEP meeting listed below 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 for the Announcement of Availability of Funds for Grants regarding National Research Service Award Institutional Research Training Grant (T32) applications are to be reviewed and discussed at this meeting. These discussions are likely to reveal personal information concerning individuals associated with the applications. This information is exempt from mandatory disclosure under the above-cited statutes.

**SEP Meeting on:** National Research Service Award Institutional Research Training Grant (T32) applications.

**Date:** January 31–February 1, 2008 (Open on January 31 from 8:30 a.m. to 8:45 a.m. and closed for the remainder of the meeting).

**Place:** Gaithersburg Marriott Washingtonian Center, Marriott