EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

Form name	Number of respondents	Total burden hours	Average hourly wage rate ¹	Total cost burden
Risk manager questionnaire	1,020	425	\$27.10	\$11,518
	1,020	425	(²)	\$11,518

¹Based upon the mean of the average wages, National Compensation Survey: Occupational wages in the United States 2006, "U.S. Department of Labor, Bureau of Labor Statistics."

² Not applicable.

Estimated Annual Costs to the Federal Government

The Agency is supporting the conduct of this survey and analysis of survey data as part of a contract with the RAND Corporation under which RAND serves as the Patient Safety Evaluation Center for AHRQ's patient safety initiative. The estimated cost for this work is \$240,000, including \$190,000 for data collection activities and \$50,000 to design the study, analyze the data and report the findings.

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, quality improvement and 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: September 19, 2008.

Carolyn M. Clancy,

Director.

[FR Doc. E8-23370 Filed 10-1-08; 8:45 am]

BILLING CODE 4160-90-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Ethics Subcommittee, Advisory Committee to the Director (ACD), Centers for Disease Control and Prevention (CDC)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), CDC announces the following meeting for the aforementioned subcommittee:

Name: Ethics Subcommittee, Advisory Committee to the Director (ACD), CDC. Time and Date: 12–2 p.m., October 9, 2008. Place: This meeting will be held by conference call. The call in number is (866) 919–3560 and enter passcode: 4168828.

Status: Open to the public. The public is welcome to participate during the public comment period which is tentatively scheduled from 1:30 p.m.—1:45 p.m.

Purpose: The Ethics Subcommittee will provide counsel to the ACD, CDC, regarding a broad range of public health ethics questions and issues arising from programs, scientists and practitioners.

Matters to be Discussed: Agenda items will include review of ethics guidance for public health emergency preparedness and response.

Contact Person for More Information: Drue Barrett, PhD, Designated Federal Official, Ethics Subcommittee, CDC, 1600 Clifton Road, NE., M/S D–50, Atlanta, Georgia 30333. Telephone 404–639–4690, e-mail: dbarrett@cdc.gov.

The Ethics Subcommittee determines that subcommittee business requires its consideration of this matter on less than 15 days notice to the public and that no earlier notice of this meeting was possible. At the Ethics Subcommittee's September 25, 2008 meeting, the subcommittee discussed this matter and determined that additional consideration is necessary prior to submitting the report to the ACD, CDC. The ACD, CDC is scheduled to meet late October.

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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: September 26, 2008.

Elaine L. Baker,

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

[FR Doc. E8–23268 Filed 10–1–08; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-1419-N]

Medicare Program; Request for Nominations for the Program Advisory and Oversight Committee for the Competitive Acquisition of Durable Medical Equipment and Other Items

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice.

SUMMARY: This notice solicits nominations for individuals to serve on the Program Advisory and Oversight Committee (PAOC) that will advise the Secretary of Health and Human Services on the competitive acquisition of durable medical equipment and certain other items and services under the Medicare program. Section 1847(c) of the Social Security Act requires the Secretary of the Department of Health and Human Services (Secretary) to establish the PAOC. In addition, section 1847(c)(4) exempts the PAOC from the Federal Advisory Committee Act, 5 U.S.C., appendix 2.

DATES: Nominations will be considered if we receive all of the required information no later than 5 p.m., November 3, 2008.

ADDRESSES: Mail or deliver nominations to the following address: Division of DMEPOS Policy, Mail stop C5–08–17, Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore MD, 21244–1850. Attention: Ralph Goldberg or Gina Longus. Nominations may also be e-mailed to ralph.goldberg@cms.hhs.gov or gina.longus@cms.hhs.gov.

FOR FURTHER INFORMATION CONTACT:

Ralph Goldberg, (410) 786–4870 or Gina Longus, (410) 786–1287. Press inquiries are handled through the CMS Press Office at (202) 690–6145.

SUPPLEMENTARY INFORMATION:

I. Background

Payment for durable medical equipment (DME) is currently based on fee schedule amounts established using reasonable charge data from earlier years. Section 1847 of the Social Security Act (the Act) requires the Secretary to replace the current DME payment methodology for certain items with a competitive bidding process to improve the effectiveness of Medicare's methodology for setting DME payment amounts. This bidding process will establish payment for certain durable medical equipment, enteral nutrition, prosthetics, and off-the-shelf orthotics. In addition, section 1847(c) of the Act requires the Secretary to establish a Program Advisory and Oversight Committee (PAOC) to provide advice on the development and implementation of the program.

We established a PAOC pursuant to this statutory mandate, and the PAOC has provided advice in the development and implementation of the program to date. On July 15, 2008, Congress passed the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA). Section 154 of MIPPA delays competition for Rounds 1 and 2 of the competitive bidding program and requires certain modifications to the program. Section 154(c)(2)(A) of MIPPA delays the termination date for the PAOC from December 31, 2009 to December 31, 2011.

The PAOC committee continues to have an important role in the implementation of the competitive bidding program. The PAOC members will need to review the previous bidding process and consider all of the MIPPA changes. Due to the length of the MIPPA delay and these additional duties, we have decided to end the term of service for the initial PAOC members and solicit nominees to serve for the next phase of the program.

II. Goals, General Responsibilities, and Composition of the Program Advisory and Oversight Committee (PAOC)

A. Goals and General Responsibilities

Section 1847(c)(3) of the Act requires the PAOC to provide advice to the Secretary on the following:

- The implementation of the program.
 The establishment of financial
- The establishment of financial standards, taking into account the needs of small providers.

- The establishment of requirements for collection of data for the efficient management of the program.
- The development of proposals for efficient interaction among manufacturers, providers of services, suppliers, and individuals.
- The establishment of quality standards.

Section 1847(c)(3)(B) of the Act requires the PAOC to perform additional functions to assist the Secretary in implementing the program as the Secretary may specify. In accordance with section 1847(c)(5) of the Act, as amended by section 154 of MIPPA, the Committee will terminate on December 31, 2011. Committee meetings are expected to occur on an ad hoc basis. Committee meetings will be held in the Baltimore/Washington DC area. (We will reimburse travel expenses, which will be based on government per diem rates and travel policy.)

B. Composition of the Program Advisory and Oversight Committee

We have particular interest in individuals with expertise in DME, prosthetics, orthotics, or supplies (DMEPOS) and competitive bidding, as well as experience in furnishing services and items in the rural and the urban marketplace. The PAOC will be composed of 10 to 12 members from the following broad representation:

- Beneficiary/consumer representatives.
 - Physicians and other practitioners.
 - Suppliers.
- Professional standards organizations.
- Financial standards specialists (that is, economist/CPA).
- Association representatives.
- Other. (If you believe that representatives of other specialties or with other skills should be included on the committee, you may indicate the category or respective categories and you may nominate an individual for that category.)

III. Submission of Nominations

This notice is requesting nominations for membership on the PAOC. The Secretary will consider qualified individuals who are determined to have the expertise required to meet specific agency needs and who will ensure an appropriate balance of membership. Nominations may be made for one or more qualified individuals, and selfnominations will also be accepted. Each nomination must include the following:

- 1. A letter of nomination that includes both of the following:
- a. Contact information for both the nominator and nominee (if not the same).

- b. The category, as specified in section II.B. of this notice for which the nomination is being made (for example, suppliers or association representatives).
- 2. A curriculum vitae or resume of the nominee that includes a statement of the nominee's current professional responsibilities (not to exceed five pages).
- 3. A statement that the nominee is willing to serve on the committee for its duration (that is, until December 31, 2011). This statement should also include a discussion of the nominee's relevant experience (not to exceed three pages). (For self-nominations, this information may be included in the nomination letter.)

Authority: Section 1847(c) of the Social Security Act.

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance Program; and Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: September 25, 2008.

Kerry Weems,

 $Acting \ Administrator, \ Centers \ for \ Medicare \\ \ \mathcal{C} \ Medicaid \ Services.$

[FR Doc. E8–23159 Filed 10–1–08; 8:45 am]
BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget (OMB), in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, e-mail paperwork@hrsa.gov or call the HRSA Reports Clearance Office on 301–443–1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: The National Health Service Corps Uniform Data System (OMB No. 0915–0232) Extension

HRSA's Bureau of Clinician Recruitment and Service places National Health Service Corps (NHSC) health care professionals at sites that