

**Seleda Perryman,**  
*Office of the Secretary, Paperwork Reduction  
 Act Reports Clearance Officer.*  
 [FR Doc. 2010-8715 Filed 4-15-10; 8:45 am]  
**BILLING CODE 4150-24-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS-0990-0308; 30-  
day notice]

### Agency Information Collection Request; 30-Day Public Comment Request

**AGENCY:** Office of the Secretary, HHS.  
 In compliance with the requirement  
 of section 3506(c)(2)(A) of the  
 Paperwork Reduction Act of 1995, the  
 Office of the Secretary (OS), Department  
 of Health and Human Services, is  
 publishing the following summary of a  
 proposed collection 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.

To obtain copies of the supporting  
 statement and any related forms for the  
 proposed paperwork collections  
 referenced above, e-mail your request,  
 including your address, phone number,  
 OMB number, and OS document  
 identifier, to  
[Sherette.funncoleman@hhs.gov](mailto:Sherette.funncoleman@hhs.gov), or call  
 the Reports Clearance Office on (202)  
 690-5683. Send written comments and  
 recommendations for the proposed  
 information collections within 30 days  
 of this notice directly to the OS OMB  
 Desk Officer; faxed to OMB at 202-395-  
 5806.

**Proposed Project:** The Effect of  
 Reducing Falls on Acute and Long-Term  
 Care Expenses OMB No. 0990-0308—  
 Extension—Assistant Secretary  
 Planning Evaluation (ASPE).

**Abstract:** ASPE is conducting a  
 demonstration and evaluation of a  
 multi-factorial fall prevention program  
 to measure its impact on health  
 outcomes for the elderly as well as acute  
 and long-term care use and cost. The  
 study is being conducted among a  
 sample of individuals with private long-  
 term care insurance who are age 75 and  
 over using a multi-tiered random  
 experimental research design to  
 evaluate the effectiveness of the  
 proposed fall prevention intervention  
 program. The project will provide  
 information to advance Departmental  
 goals of reducing injury and improving  
 the use of preventive services to  
 positively impact Medicare use and  
 spending. The project began in spring  
 2008 and is expected to be completed in  
 spring 2013.

### ESTIMATED ANNUALIZED BURDEN TABLE

Form name	Type of respondent	Number of respondents	Number re- sponses per respondent	Average bur- den per re- sponse (in hours)	Total burden hours
Initial Telephone Screen .....	Experimental Group .....	240	1	20/60	80
In-person interview .....	.....	240	1	80/60	320
Jump start phone call .....	.....	240	1	30/60	120
Quarterly phone calls .....	.....	240	4	10/60	160
Final Telephone Screen .....	.....	177	1	20/60	59
Final In-person interview .....	.....	177	1	80/60	236
Initial Telephone Screen .....	Active Control Group .....	240	1	20/60	80
Quarterly phone calls .....	.....	240	4	10/60	160
Final Telephone Screen .....	.....	177	1	20/60	59
Total Burden Hours .....	.....	.....	.....	.....	1,274

**Seleda Perryman,**  
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 [FR Doc. 2010-8716 Filed 4-15-10; 8:45 am]  
**BILLING CODE 4150-39-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of the Secretary

### Centers for Medicare & Medicaid Services; Delegation of Authority

Notice is hereby given that I have  
 delegated to the Administrator, Centers  
 for Medicare & Medicaid Services  
 (CMS), or his or her successor, the  
 authorities currently vested in the  
 Secretary under section 1142(c)(6) [42  
 U.S.C. 1320b-12(c)(6)] of Title XI of the  
 Social Security Act (the Act), as

amended, to conduct and support  
 supplementation and redesign of  
 existing CMS data sets and databases,  
 including the collection of new  
 information, to enhance databases for  
 research purposes, and the design and  
 development of new databases that  
 would be used in outcomes and  
 effectiveness research as set out in  
 section 1142(a) [42 U.S.C. 1320b-12(a)]  
 of Title XI of the Act.

### Limitations

The delegation of authority granted  
 herein under section 1142(c)(6) [42  
 U.S.C. 1320b-12] of the Act does not  
 supersede previous delegations of this  
 authority to the Director, Agency for  
 Healthcare Research and Quality.

The delegation of authority granted  
 herein under section 1142(c)(6) [42  
 U.S.C. 1320b-12(c)(6)] of the Act, as

amended, is limited to the collection  
 and maintenance of data related to CMS'  
 programs.

The authority under section  
 1142(c)(6) [42 U.S.C. 1320b-12] of the  
 Act shall be exercised under the  
 Department's policy on regulations and  
 the existing delegation of authority to  
 approve and issue regulations.

This delegation of authority may be  
 re-delegated.

This delegation of authority is  
 effective immediately.

I hereby affirm and ratify any actions  
 taken by the Administrator, CMS, or his  
 or her subordinates, which involved the  
 exercise of the authority under section  
 1142(c)(6) [42 U.S.C. 1320b-12(c)(6)] of  
 Title XI of the Act, as amended,  
 delegated herein prior to the effective  
 date of this delegation of authority.

**Authority:** 44 U.S.C. 3101.