

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Healthcare Research and Quality

#### Meeting of the Citizens' Health Care Working Group

**AGENCY:** Agency for Healthcare Research and Quality (AHRQ), HHS)

**ACTION:** Notice of public meeting

**SUMMARY:** In accordance with section 10(a) of the Federal Advisory Committee Act, this notice announces a meeting and hearing of the Citizens' Health Care Working Group mandated by section 1014 of the Medicare Modernization Act.

**DATES:** The meeting will be held on Tuesday, June 7, 2005 from 1 p.m. to 5 p.m. The hearing will be held Wednesday, June 8, 2005 from 8 a.m. to 12 noon.

**ADDRESSES:** The meeting and hearing will both be held at the Jackson Medical Mall, 350 West Woodrow Wilson Drive, Jackson, Mississippi 39213. The meeting and hearing are open to the public.

**FOR FURTHER INFORMATION CONTACT:** Caroline Taplin, Citizens' Health Care Working Group, at (301) 443-1514 or [ctaplin@ahrq.gov](mailto:ctaplin@ahrq.gov). If sign language interpretation or other reasonable accommodation for a disability is needed, please contact Mr. Donald L. Inniss, Director, Office of Equal Employment Opportunity Program, Program Support Center, on (301) 443-1144.

The agenda and roster is available on the Citizens' Group Web site. <http://www.citizenshealth.ahrq.gov>. When a transcription of the Group's June 7 and 8 meeting and hearing are completed, they are available on the Web site.

**SUPPLEMENTARY INFORMATION:** Section 1014 of Pub. L. 108-173, (known as the Medicare Modernization Act) directs the Secretary of the Department of Health and Human Services (DHHS), acting through the Agency for Healthcare Research and Quality, to establish a Citizens' Health Care Working Group (Citizen Group). This statutory provision, codified in 42 U.S.C. 299 n., directs the Working Group to: (1) Identify options for changing our health care system so that every American has the ability to obtain quality, affordable health care coverage; (2) provide for a nationwide public debate about improving the health care system; and (3) submit their recommendations to the President and the Congress.

The Citizens' Health Care Working Group is composed of 15 members: The

Secretary of DHHS is designated as a member by the statute and the Comptroller General of the U.S. Government Accountability Office (GAO) is directed to appoint the remaining 14 members. The Comptroller General announced the 14 appointments on February 28, 2005. A list of the Working group members is available on the GAO Web site (<http://www.gao.gov>).

#### Agenda

The meeting on June 7 will be devoted to ongoing Working Group business. The hearing on the morning of June 8 will be devoted to three broad topics: Access; the reality of being uninsured; and State, local, and private initiatives.

The business meeting on June 7 will address topics such as: Discussions of future additional hearings, the required Report to the American People, and continuing discussion regarding approaches for conducting the community meetings required by the statute.

#### Submission of Written Information

Individuals or organizations wishing to provide written information for consideration by the Citizen Group should submit information electronically to [citizenshealth@ahrq.hhs.gov](mailto:citizenshealth@ahrq.hhs.gov). Targeted but separate submissions that address the following topics are encouraged: (1) The above-listed issues that will be addressed at the June meeting; (2) the issues that the statute requires the Report to the American People to address which can be found at the Citizen Group Web site; and (3) examples of innovative public or private sector initiatives to address the issues that the statute requires the hearings or Report to address. If an individual or organization wishes to address more than one of these topics, separate submissions are requested. Because all electronic submissions will be posted on the Working Group Web site, separate submissions will facilitate review of ideas submitted on each topic by the Working Group and the public.

Dated: May 24, 2005

**Carolyn M. Clancy,**

*Director.*

[FR Doc. 05-10651 Filed 5-24-05; 1:13 pm]

**BILLING CODE 4160-90-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Healthcare Research and Quality

#### Correction to a Notice of Meetings

With this Notice, AHRQ is publishing a correction to the following "Study Section" meetings published in the **Federal Register** on May 9, 2005, Volume 70, Number 88, Pages 24426-24427, see also <http://a257.g.akamaitech.net/7/257/2422/01jan20051800/edock.access.gop.gov/2005/05-9182.htm>, reflect correct dates:

- Name of Subcommittee: Health Systems Research  
Date: June 17, 2005.
- Name of Subcommittee: Health Care Quality and Effectiveness Research  
Date: June 23, 2005.

Dated: May 12, 2005.

**Carolyn M. Clancy,**

*Director.*

[FR Doc. 05-10474 Filed 5-25-05; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[Request for Application (RFA) AA032]

#### Duchene and Becker Muscular Dystrophy Education and Outreach Initiative; Notice of Intent To Fund Single Eligibility Award

##### A. Purpose

The Purpose of the program is to begin a coordinated education and outreach initiative on Duchenne and Becker Muscular Dystrophy (DMBD). This program addresses the "Healthy People 2010" focus area 6: Promote the health of people with disabilities, prevent secondary conditions, and eliminate disparities between people with and without disabilities in the U.S. population.

The Catalog of Federal Domestic Assistance number for this program is 93.067.

##### B. Eligible Applicant

Assistance will be provided only to Parent Project Muscular Dystrophy, Middletown, Ohio. No other applications are solicited. H.R. Conf. Rep. No. 108-792, Division F, Title II, Department of Health and Human Services, Center for Disease Control and Prevention (2005) specified funds to this organization.

## C. Funding

Approximately \$500,000 is available in FY 2005 to fund this award. It is expected that the award will begin on or before August 31, 2005, and will be made for a 12-month budget period within a project period of up to 12 months. Funding estimates may change.

## D. Where To Obtain Additional Information

For general comments or questions about this announcement, contact: Technical Information Management Section, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, Telephone: 770-488-2700.

For technical questions about this program, contact: Michael A. Brown Project Officer, Centers for Disease Control and Prevention (CDC), National Center on Birth Defects and Developmental Disabilities, Division of Human Development and Disability, 1600 Clifton Road, NE., Mailstop E-88, Atlanta, GA 30333, Telephone: 404-498-3006, E-mail: [MABrown@cdc.gov](mailto:MABrown@cdc.gov).

**William P. Nichols,**

*Director, Procurement and Grants Office,  
Centers for Disease Control and Prevention.*  
[FR Doc. 05-10540 Filed 5-25-05; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

### Coordination of Activities Between the CDC's National Immunization Program and the State and Territorial Health Officials

*Announcement Type:* New.

*Funding Opportunity Number:* RFA AA005.

*Catalog of Federal Domestic*

*Assistance Number:* 93.185.

*Letter of Intent Deadline:* June 27, 2005.

*Application Deadline:* July 25, 2005.

### I. Funding Opportunity Description

**Authority:** This program is authorized under section 311 [42 U.S.C. 243] and 317(k)(1) [42 U.S.C. 247b(k)(1)] of the Public Health Service Act as amended.

**Purpose:** The purpose of the program is to coordinate the activities between the National Immunization Program (NIP) and the state and territorial health officials on issues related to immunizations for children, adolescent and adults. Specifically: (1) To allow exchange of information between the state and territorial health officials and

NIP, (2) to inform state and territorial health officials of current, proposed and new legislation regarding immunization, (3) to create mechanisms to communicate and inform state and territorial health officials and partners about timely and new immunization initiatives and the progress of current immunization programs, (4) to encourage states to participate in federal and state immunization initiatives, and (5) to create partnerships between State health departments and other immunization related stakeholders, and to educate health officials, providers and the public on the importance of timely vaccination. This program addresses the "Healthy People 2010" focus areas of Immunization and Infectious Disease.

Measurable outcomes of the program will be in alignment with the following performance goals for NIP:

- Reduce the number of indigenous cases of vaccine preventable diseases,
- Ensure that two year-olds are appropriately vaccinated, and
- Increase the proportion of adults who are vaccinated annually against influenza and ever vaccinated against pneumococcal disease.

This announcement is only for non-research activities supported by CDC/ATSDR. If research is proposed, the application will not be reviewed. For the definition of research, please see the CDC Web site at the following Internet address: <http://www.cdc.gov/od/ads/opspoll1.htm>.

**Activities:** Awardee activities for this program are as follows:

1. Coordinate immunization efforts with existing state and territorial health officials' health projects, Special Supplemental Nutrition Program for Women, Infants and Children (WIC) program, the Council of State and Territorial Epidemiologists (CSTE), the Association of Immunization Managers (AIM), the National Association of County and City Health Officials (NACCHO) and other organized health related associations where immunization programs can have an impact on increasing vaccination coverage.

2. Attend meetings and inform state and territorial health officials and other partners of issues addressed by the Advisory Committee on Immunization Practices (ACIP), the National Vaccine Advisory Committee (NVAC) and the immunization-related committees of the Association of State and Territorial Health Officials, NACCHO and AIM.

3. Provide information on key immunization-related developments and legislative issues to state and territorial health officials, state

immunization coordinators, appropriate adult or adolescent groups, and other partners via newsletters, conference calls, and other multimedia sources.

4. Organize and convene meetings and workshops on an as needed basis for the purpose of exchanging immunization related information and program updates. Provide representation of state and territorial health officials at national meetings.

5. Collaborate with CDC on immunization-related issues including vaccine supply, vaccine financing, implementation of new vaccines, pandemic preparedness, adolescent and adult immunization and the development and coordination of immunization national policy and evaluation.

In a cooperative agreement, CDC staff are substantially involved in the program activities, above and beyond routine grant monitoring.

CDC activities for this program are as follows:

1. Provide technical assistance in implementing activities, identifying major immunization-related issues, identifying effective programs, and setting priorities related to the cooperative agreement.

2. Provide scientific collaboration for appropriate aspects of the awardees' activities, including information on disease impact, vaccination coverage levels, vaccine supply and prevention strategies.

3. Assist in development and review of relevant immunization information made available to federal, State and local health agencies, health care providers and volunteer organizations.

4. In conjunction with the grantee, establish and implement mechanisms for evaluating the reach of the program and effectiveness of the materials produced.

### II. Award Information

**Type of Award:** Cooperative Agreement. CDC involvement in this program is listed in the Activities Section above.

**Fiscal Year Funds:** 2005.

**Approximate Total Funding:** \$250,000. (This amount is an estimate, and is subject to availability of funds.)

**Approximate Number of Awards:** 1.

**Approximate Average Award:** \$250,000. (This amount is for the first 12-month budget period, and includes both direct and indirect costs)

**Floor of Award Range:** None.

**Ceiling of Award Range:** \$ 250,000. (This ceiling is for the first 12-month budget period.)

**Anticipated Award Date:** August 31, 2005.