

more numbers available for subscribers who need and want them. If DSMI is uncertain whether a number should be placed in unavailable status, it should seek guidance from the Commission's Wireline Competition Bureau.

Current industry guidelines already require that RespOrgs requesting to place a toll free number in unavailable status submit written requests to DSMI with appropriate documentation. This collection requirement simply codifies the existing industry guidelines. DSMI (and, if necessary the FCC), will continue to use the information collected to determine if a particular toll free number appropriately can be placed in "unavailable" status. This will prevent the fraudulent use of toll free numbers.

Federal Communications Commission.

**Marlene H. Dortch,**

*Secretary.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS-0937-0166]

### Agency Information Collection Request; 60-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 information collection request 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 [Sherrette.funncoleman@hhs.gov](mailto:Sherrette.funncoleman@hhs.gov), or call the Reports Clearance Office on (202) 690-6162. Written comments and recommendations for the proposed information collections must be directed to the OS Paperwork Clearance Officer at the above e-mail address within 60 days.

**Proposed Project:** HHS 42CFR subpart B; Sterilization of Persons in Federally Assisted Family Planning Projects—OMB No. 0937-0166—Extension—

Office of Population Affairs (OPA)—Office of Family Planning

**Abstract:** This is a request for extension of a currently approved collection for the disclosure and record-keeping requirements codified at 42 CFR part 50, subpart B ("Sterilization of Persons in Federally Assisted Family Planning Projects"). The consent form solicits information to assure voluntary and informed consent to persons undergoing sterilization in programs of health services which are supported by Federal financial assistance administered by the OPA. It provides additional procedural protection to the individual and the regulation requires that the consent form be a copy of the form that is appended to the OPA regulation. In 2003, the sterilization consent form was revised to conform to OMB government-wide standards for the collection of race/ethnicity data and to incorporate the PRA burden statement as part of the consent form. The current form has been updated to conform to the changed name of a Federal entitlement program. The program, Aid to Families with Dependent Children (AFDC), utilized by low-income families with dependent children who need Federal assistance, has been replaced by a different program with similar aims, Temporary Assistance for Needy Families (TANF). Consequently, the reference to AFDC in the first paragraph has been replaced with a reference to TANF.

### ESTIMATED ANNUALIZED BURDEN TABLE

Type of respondent	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Citizens seeking sterilization .....	100,000	1	15/60	25,000

**Seleda Perryman,**

*Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.*

[FR Doc. E9-16966 Filed 7-16-09; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10284, CMS-2567 and CMS-10283]

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

**AGENCY:** Centers for Medicare & Medicaid Services, Department of Health and Human Services.

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:* New Collection; *Title of Information Collection:* Children's Health Insurance Program Reauthorization Act (CHIPRA) of 2009, State Option Pre-print to Include Pregnant Women in Title XXI; *Use:* Section 111 of CHIPRA adds a new section 2112 to the Social Security Act which gives States the option of providing necessary prenatal, delivery and postpartum care to low-income uninsured pregnant women through an amendment to its State Child Health Plan (CHIP plan). The purpose of this draft State plan amendment template is to provide States with the format needed to enable a State to amend their CHIP plan to reflect the coverage of pregnant women. *Form Number:* CMS-10284 (OMB#: 0938-NEW); *Frequency:* Reporting—One-time and Occasionally; *Affected Public:* State, Local or Tribal Government; *Number of Respondents:* 40; *Total Annual Responses:* 40; *Total Annual Hours:* 3,200. (For policy questions regarding this collection contact Meredith Robertson at 410-786-6543. For all other issues call 410-786-1326.)

2. *Type of Information Collection Request:* Reinstatement without change of a previously approved collection; *Title of Information Collection:* Statement of Deficiencies and Plan of Correction; *Use:* The information from the CMS-2567 is used by the States and CMS regional offices to document and certify compliance. *Form Number:* CMS-2567 (OMB#: 0938-0391); *Frequency:* Reporting—Annually; *Affected Public:* State, Local or Tribal Government, Federal Government, Business or other for-profits and Not-for-profit Institutions; *Number of Respondents:* 60,000; *Total Annual Responses:* 60,000; *Total Annual Hours:* 120,000. (For policy questions regarding this collection contact Joanne Perry at 410-786-3336. For all other issues call 410-786-1326.)

3. *Type of Information Collection Request:* New Collection; *Title of Information Collection:* State Plan Amendment Template for Transitional Medical Assistance for Low-Income Families; *Use:* Section 5004 of the American Recovery and Reinvestment Act of 2009, Public Law 111-5, amends section 1925 of the Social Security Act effective July 1, 2009 to offer States two new options for eligibility requirements under Transitional Medical Assistance. To select either or both of these options a State Medicaid Agency will complete the template page and submit it for approval as part of a State plan amendment. The law also imposes new reporting requirements for States which

are mentioned on the template. *Form Number:* CMS-10283 (OMB#: 0938-NEW); *Frequency:* Reporting—One-time and Occasionally; *Affected Public:* State, Local or Tribal Government; *Number of Respondents:* 51; *Total Annual Responses:* 51; *Total Annual Hours:* 51. (For policy questions regarding this collection contact Mary Corrdry at 410-786-6618. For all other issues call 410-786-1326.)

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 August 17, 2009: OMB, Office of Information and Regulatory Affairs Attention: CMS Desk Officer, *Fax Number:* (202) 395-6974.

*E-mail:*  
[OIRA\\_submission@omb.eop.gov](mailto:OIRA_submission@omb.eop.gov).

Dated: July 9, 2009.

**Michelle Shortt,**

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

[FR Doc. E9-17080 Filed 7-16-09; 8:45 am]

**BILLING CODE 4120-01-P**

## **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **Centers for Medicare & Medicaid Services**

**[Document Identifier: CMS-10260, CMS-R-72, CMS-10180 and CMS-R-199]**

### **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:* Revision of a currently approved collection; *Title of Information Collection:* Medicare Advantage and Prescription Drug Program: Final Marketing Provisions CFR 422.111(a)(3) and 423.128(a)(3) *Use:* Medicare Advantage (MA) plans must provide notice to plan members of impending changes to plan benefits, premiums and copays in the coming year so that members will be in the best position to make an informed choice on continued enrollment or disenrollment from that plan at least 15 days before the Annual Election Period (AEP). Beginning 2009, organizations will be required to notify plan members of the coming year changes using a combined standardized document at the time of enrollment and annually thereafter.

Section 422.111 requires, to the extent that a MA plan has a website, annual notification through the Web site of written, hard copy notification sent to the beneficiaries. Section 423.128 requires that a Part D plan have mechanisms for providing specific information on a timely basis to current and prospective enrollees upon request. These mechanisms include, Internet website that includes information on Part D plan description. MA organizations (formerly M+C organizations) and Prescription Drug Plan Sponsors use the information to comply with the eligibility requirements and the MA and Part D contract requirements. CMS will use this information to ensure that correct information is disclosed to Medicare beneficiaries, both potential enrollees and enrollees. *Form Number:* CMS-10260 (OMB#: 0938-1051); *Frequency:* Reporting—Yearly; *Affected Public:* Business or other for-profits ; *Number of Respondents:* 740; *Total Annual Responses:* 740; *Total Annual Hours:* 8,880. (For policy questions regarding this collection contact Camille Brown at 410-786-0274. For all other issues call 410-786-1326.)

2. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Information Collection Requirements in 42 CFR