

Hours: 5,530. (For policy questions regarding this collection contact Ron Lambert at 410-786-6624. For all other issues call 410-786-1326.)

5. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Medicare Current Beneficiary Survey; *Use:* The Medicare Current Beneficiary Survey (MCBS) serves to measure what impact the changes have on the program and its beneficiaries. The MCBS is a comprehensive data collection effort that fills an information gap in the Centers for Medicare and Medicaid Services, and is depended on to help manage the program. Being able to examine various characteristics and to chart evolving trends offers policy makers a reliable tool for making informed decisions. The MCBS is used to identify potential new policy direction or modifications to the Medicare program and once those program enhancements are implemented, monitor the impact of those changes. The central goals of the MCBS are to determine medical care expenditures and sources of payment for all services, including copayments, deductibles, and non-covered services; to ascertain all types of health insurance coverage and relate coverage to actual payments; and to trace processes over time, such as changes in health status, spending down to Medicaid eligibility, and the impacts of program changes. *Form Number:* CMS-P-0015A (OMB#: 0938-0568); *Frequency:* Yearly; *Affected Public:* Business or other for-profits and Not-for-profit institutions; *Number of Respondents:* 16,217; *Total Annual Responses:* 48,650; *Total Annual Hours:* 57,062. (For policy questions regarding

this collection contact William Long at 410-786-7927. 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 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, or call the Reports Clearance Office on (410) 786-1326.

In commenting on the proposed information collections please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in one of the following ways by July 27, 2010:

1. *Electronically.* You may submit your comments electronically to <http://www.regulations.gov>. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) accepting comments.

2. *By regular mail.* You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number, Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: May 21, 2010.

Martique Jones,
Director, Regulations Development Division-
B, Office of Strategic Operations and
Regulatory Affairs.

[FR Doc. 2010-12624 Filed 5-27-10; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Child Care and Development Block Grant Reporting Requirements—ACF-700.

OMB No.: 0980-0241.

Description: The Child Care and Development Fund (CCDF) report requests annual Tribal aggregate information on services provided through the CCDF, which is required by the CCDF Final Rule (45 FR parts 98 and 99). Tribal Lead Agencies (TLAs) are required to submit annual aggregate data appropriate to Tribal programs on children and families receiving CCDF-funded child care services. The CCDF statute and regulations also require TLAs to submit a supplemental narrative as part of the ACF-700 report. This narrative describes child care activities and actions in the TLA's service area. Information from the ACF-700 and supplemental narrative report will be included in the Secretary's Report to Congress, as appropriate, and will be shared with all TLAs to inform them of CCDF-funded activities in other Tribal programs.

Respondents: Tribal Governments.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ACF-700 Report	260	1	38	9,880

Estimated Total Annual Burden Hours: 9,880.

In compliance with the requirements of Section 506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and

Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. E-mail address: infocollection@acf.hhs.gov. All requests should be identified by the title of the information collection.

The Department specifically requests comments on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including

whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) 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 through the use of automated collection techniques or other forms of information technology. Consideration will be given to

comments and suggestions submitted within 60 days of this publication.

Dated: May 25, 2010.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2010-12877 Filed 5-27-10; 8:45 am]

BILLING CODE 4184-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Pub. L. 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, e-mail paperwork@hrsa.gov or call the HRSA

Reports Clearance Officer at (301) 443-1129.

Comments are invited on: (a) The proposed collection of information for the proper performance of the functions of the agency; (b) the accuracy of the agency's estimate of the burden 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 through the use of automated collection techniques or other forms of information technology.

Proposed Project: Organ Procurement and Transplantation Network and Scientific Registry of Transplant Recipients Data System (OMB No. 0915-0157)—Extension

Section 372 of the Public Health Service (PHS) Act requires that the Secretary, by contract, provide for the establishment and operation of an Organ Procurement and Transplantation Network (OPTN). The OPTN, among other responsibilities, operates and maintains a national waiting list of individuals requiring organ transplants, maintains a computerized system for matching donor organs with transplant candidates on the waiting list, and operates a 24-hour system to facilitate matching organs with individuals included in the list.

Data for the OPTN data system are collected from transplant hospitals, organ procurement organizations, and tissue-typing laboratories. The information is used to indicate the disease severity of transplant candidates, to monitor compliance of member organizations with OPTN rules and requirements, and to report periodically on the clinical and scientific status of organ donation and transplantation in this country. Data are used to develop transplant, donation and allocation policies, to determine if institutional members are complying with policy, to determine member specific performance, to ensure patient safety and to fulfill the requirements of the OPTN Final Rule. The practical utility of the data collection is further enhanced by requirements that the OPTN data must be made available, consistent with applicable laws, for use by OPTN members, the Scientific Registry of Transplant Recipients, the Department of Health and Human Services, and others for evaluation, research, patient information, and other important purposes.

No revisions of the 26 data collection forms are proposed at this time; however, the OPTN is currently undergoing a review of the forms and expects to submit proposed revisions within the next year.

The annual estimate of burden is as follows:

Form	Number of respondents	Responses per respondents	Total responses	Hours per response	Total burden hours
Deceased Donor Registration	58	216	12,528	0.7500	9,396.00
Death referral data	58	12	696	10.0000	6,960.00
Death Notification Referral—Eligible	58	161	9338	0.2000	1,867.60
Death Notification Referral—Imminent	58	168	9744	0.5000	4,872.00
Living Donor Registration	308	39	12,012	0.6500	7,807.80
Living Donor Follow-up	308	50	15,400	0.5000	7,700.00
Donor Histocompatibility	156	131	20,436	0.1000	2,043.60
Recipient Histocompatibility	156	196	30,576	0.2000	6,115.20
Heart Candidate Registration	127	35	4,445	0.5000	2,222.50
Lung Candidate Registration	68	42	2,856	0.5000	1,428.00
Heart/Lung Candidate Registration	51	2	102	0.5000	51.00
Thoracic Registration	127	36	4,572	0.7500	3,429.00
Thoracic Follow-up	127	320	40,640	0.6500	26,416.00
Kidney Candidate Registration	241	183	44,103	0.5000	22,051.50
Kidney Registration	241	83	20,003	0.7500	15,002.25
Kidney Follow-up*	241	742	178,822	0.5500	98,352.10
Liver Candidate Registration	129	109	14,061	0.5000	7,030.50
Liver Registration	129	58	7,482	0.6500	4,863.30
Liver Follow-up	129	519	66,951	0.5000	33,475.50
Kidney/Pancreas Candidate Registration	143	14	2,002	0.5000	1,001.00
Kidney/Pancreas Registration	143	7	1,001	0.9000	900.90
Kidney/Pancreas Follow-up	143	85	12,155	0.8500	10,331.75
Pancreas Candidate Registration	143	7	1,001	0.5000	500.50
Pancreas Registration	143	3	429	0.7500	321.75
Pancreas Follow-up	143	20	2,860	0.6500	1,859.00
Intestine Candidate Registration	44	7	308	0.5000	154.00
Intestine Registration	44	5	220	0.9000	198.00
Intestine Follow-up	44	28	1,232	0.8500	1,047.20
Post Transplant Malignancy	684	10	6,840	0.2000	1,368.00