information will have practical utility; (2) the accuracy of VHA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Titles:

a. Request for and Authorization To Release Medical Records or Health Information, VA Form 10-5345.

b. Individual's Request for a Copy of Their Own Health Information, VA Form 10-5345a.

c. My HealtheVet (MHV)-Individuals' Request for a Copy of Their Own Health Information, VA Form 10-5345a-MHV.

OMB Control Number: 2900-0260. Type of Review: Revision of a currently approved collection. Abstract:

a. VA Form 10-5345 is used to obtain a written consent from patients before information concerning his or her treatment for alcoholism or alcohol abuse, drug abuse, sickle cell anemia, or infection with the human immunodeficiency virus (HIV) can be disclosed to private insurance companies, physicians and other third parties.

b. Patients complete VA Form 10-5345a to request a copy of their health information maintained at Department of Veterans Affairs.

c. VA Form 10-5345a-MHV is completed by individuals requesting their health information electronically through My HealtheVet.

Affected Public: Individuals or households.

Estimated Total Annual Burden:

a. VA Form 10–5345—15,000 hours.

b. VA Form 10-5345a-15,000 hours. c. VA Form 10–5345a–MVH—35,000

Estimated Average Burden per Respondent:

a. VA Form 10–5345—3 minutes.

b. VA Form 10-5345a—3 minutes.

c. VA Form 10-5345a-MVH-3 minutes.

Frequency of Response: On occasion. Estimated Number of Respondents:

a. VA Form 10-5345-300,000.

b. VA Form 10-5345a—300,000.

c. 10-5345a-MVH-700,000.

Dated: September 2, 2009.

By direction of the Secretary.

#### Denise McLamb,

Program Analyst, Enterprise Records Service. [FR Doc. E9-21574 Filed 9-8-09; 8:45 am] BILLING CODE P

#### **DEPARTMENT OF VETERANS AFFAIRS**

[OMB Control No. 2900-New (10-0468)]

### **Proposed Information Collection** (Internet Student CPR Web Registration Application); Comment Request

**AGENCY:** Veterans Health Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** The Veterans Health Administration (VHA), Department of Veterans Affairs, is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each proposed new collection, and allow 60 days for public comment in response to the notice. This notice solicits comments on information needed to establish an online Web registration application.

**DATES:** Written comments and recommendations on the proposed collection of information should be received on or before November 9, 2009.

**ADDRESSES:** Submit written comments on the collection of information through the Federal Docket Management System (FDMS) at http://www.Regulations.gov; or to Mary Stout, Veterans Health Administration (193E1), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420 or e-mail: mary.stout@va.gov. Please refer to "OMB Control No. 2900-New (10-0468)" in any correspondence. During the comment period, comments may be viewed online through FDMS.

## FOR FURTHER INFORMATION CONTACT:

Mary Stout at (202) 461-5867 or FAX (202) 273-9381.

SUPPLEMENTARY INFORMATION: Under the PRA of 1995 (Pub. L. 104-13; 44 U.S.C. 3501-3521), Federal agencies must obtain approval from OMB for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VHA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VHA's functions, including whether the information will have practical utility; (2) the accuracy of VHA's estimate of the burden of the proposed collection of information; (3) ways to enhance the

quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Title: Internet Student CPR Web Registration Application, VA Form 10-

OMB Control Number: 2900–New (10-0468).

Type of Review: New collection. Abstract: The data collected on VA Form 10-0468 will be used to establish a roster on students attending courses provided by the Minneapolis VA Medical Center Education Service. Students will be able to identify and register for a training course online without waiting for the Registrar to return calls or e-mails to confirm enrollment.

Affected Public: Individuals or households.

Estimated Annual Burden: 125 hours. Estimated Average Burden per Respondent: 5 minutes.

Frequency of Response: Bi-Annually. Estimated Number of Responses:

Dated: September 2, 2009. By direction of the Secretary.

### Denise McLamb,

Program Analyst, Enterprise Records Service. [FR Doc. E9-21576 Filed 9-8-09; 8:45 am] BILLING CODE 8320-01-P

#### **DEPARTMENT OF VETERANS AFFAIRS**

[OMB Control No. 2900-New (10-0473)]

**Proposed Information Collection** (Millennium Bill Emergency Care **Provider Satisfaction Survey): Comment Request** 

**AGENCY:** Veterans Health Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** The Veterans Health Administration (VHA), Department of Veterans Affairs (VA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each proposed new collection, and allow 60 days for public comment in response to the notice. This notice solicits comments on information needed to improve customer satisfactions with VHA's claim reimbursement process.

**DATES:** Written comments and recommendations on the proposed collection of information should be received on or before November 9, 2009.

ADDRESSES: Submit written comments on the collection of information through the Federal Docket Management System (FDMS) at <a href="http://www.Regulations.gov">http://www.Regulations.gov</a>; or to Mary Stout, Veterans Health Administration (193E1), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420 or e-mail: <a href="mary.stout@va.gov">mary.stout@va.gov</a>. Please refer to "OMB Control No. 2900–New (10–0473)" in any correspondence. During the comment period, comments may be viewed online through FDMS.

#### FOR FURTHER INFORMATION CONTACT:

Mary Stout at (202) 461–5867 or FAX (202) 273–9381.

**SUPPLEMENTARY INFORMATION:** Under the PRA of 1995 (Pub. L. 104–13; 44 U.S.C. 3501–3521), Federal agencies must obtain approval from OMB for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VHA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VHA's functions, including whether the information will have practical utility; (2) the accuracy of VHA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Title: Millennium Bill Emergency Care Provider Satisfaction Survey, VA Form 10–0473.

*OMB Control Number:* 2900–New (10–0473).

Type of Review: New collection.
Abstract: VA Form 10–0473 will be used to survey non-VA healthcare providers who participate in the Millennium Bill Fee Reimbursement/Purchased Care program on their satisfaction with VHA's claims processing services. VA will use the data collected to improve the claims processing program.

Affected Public: Individuals or households.

Estimated Annual Burden: 9 hours.

Estimated Average Burden per Respondent: 5 minutes.

Frequency of Response: Annually.
Estimated Number of Respondents:

Dated: September 2, 2009. By direction of the Secretary.

#### Denise McLamb,

Program Analyst, Enterprise Records Service. [FR Doc. E9–21575 Filed 9–8–09; 8:45 am] BILLING CODE 8320–01–P

# DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0554]

Agency Information Collection (Homeless Providers Grant and per diem Program) Activities Under OMB Review

**AGENCY:** Veterans Health Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–3521), this notice announces that the Veterans Health Administration (VHA), Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before October 9, 2009.

ADDRESSES: Submit written comments on the collection of information through http://www.Regulations.gov; or to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503, (202) 395–7316. Please refer to "OMB Control No. 2900–0554" in any correspondence.

## FOR FURTHER INFORMATION CONTACT:

Denise McLamb, Enterprise Records Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 461– 7485, fax (202) 273–0443 or e-mail denise.mclamb@mail.va.gov. Please refer to "OMB Control No. 2900–0554."

### SUPPLEMENTARY INFORMATION:

*Titles:* a. Homeless Providers Grant and *Per Diem* Program, Capital Grant Application, VA Form 10–0361–CG.

b. Homeless Providers Grant and *Per Diem* Program, Life Safety Code Application, VA Form 10–0361–LSC. c. Homeless Providers Grant and *Per Diem* Program, *Per Diem* Only Application, VA Form 10–0361–PDO.

d. Homeless Providers Grant and *Per Diem* Program, Special Needs Application, VA Form 10–0361–SN.

e. Compliance Reports for *Per Diem* and Special Needs Grants. No form needed. May be reported to VA in standard business narrative.

f. Homeless Providers Grant and *Per Diem* Program, Technical Assistance Application, VA Form 10–0361–TA.

g. Compliance Reports for Technical Assistance Grants. No form needed. May be reported to VA in standard business narrative.

OMB Control Number: 2900–0554. Type of Review: Extension of a currently approved collection.

Abstract: VA Form 10–0361 series, Homeless Providers Grant and Per Diem Program, will be used to evaluate applicant's eligibility to receive a grant and/or Per Diem payments which provide supportive housing and services to assist homeless veterans transition to independent living. VA will use the data to apply specific criteria to rate and evaluate each application; and to obtain information necessary to ensure that Federal funds are awarded to applicants who are financially stable and who will conduct the program for which a grant and/or Per Diem award was made.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on June 22, 2009, at pages 29537–29538.

Affected Public: Not-for-profit institutions.

Estimated Total Annual Burden: a. Homeless Providers Grant and Per Diem Program, Capital Grant Application, VA Form 10–0361–CG— 3,500 hours.

- b. Homeless Providers Grant and *Per Diem* Program, Life Safety Code Application, VA Form 10–0361–LSC—2,000 hours.
- c. Homeless Providers Grant and *Per Diem* Program, *Per Diem* Only Application, VA Form 10–0361–PDO—3.000 hours.
- d. Homeless Providers Grant and *Per Diem* Program, Special Needs Application, VA Form 10–0361–SN—4,000 hours.
- e. Compliance Reports for *Per Diem* and Special Needs Grants—1,500 hours.
- f. Homeless Providers Grant and *Per Diem* Program, Technical Assistance Application, VA Form 10–0361–TA—250 hours.