

**FOR FURTHER INFORMATION CONTACT:** Mr. Melvin Joppy, Committee Manager, Presidential Advisory Council on HIV/AIDS, Department of Health and Human Services, 200 Independence Avenue, SW., Room 443H, Washington, DC 20201; (202) 690-5560. More detailed information about PACHA can be obtained by accessing the Council's Web site at <http://www.pacha.gov>.

**SUPPLEMENTARY INFORMATION:** PACHA was established by Executive Order 12963, dated June 14, 1995 as amended by Executive Order 13009, dated June 14, 1996. The Council was established to provide advice, information, and recommendations to the Secretary regarding programs and policies intended to (a) Promote effective prevention of HIV disease, (b) advance research on HIV and AIDS, and (c) promote quality services to persons living with HIV disease and AIDS. PACHA was established to serve solely as an advisory body to the Secretary of Health and Human Services.

The meeting will be open to the public through a conference call phone number provided above. There will be a limited amount of open lines for the public; early registration is highly recommended. Individuals who participate using this service and who need special assistance or other reasonable accommodations, should submit a request at least five days prior to the meeting. Members of the public who participate using the conference call phone number will be able to listen to the meeting but will not be heard until the public comment period. Information about the Presidential Advisory Council on HIV/AIDS is available on the PACHA Web site <http://www.pacha.gov>.

Members of the public will have the opportunity to provide comments. Pre-registration is required for public comment. Individuals who wish to participate in the public comment session must send a copy of public comment to Melvin Joppy, Committee Manager, at [melvin.joppy@hhs.gov](mailto:melvin.joppy@hhs.gov) by close of business Friday, June 25, 2010. Registration for public comment will not be accepted by telephone. Public comment will be limited to the first eight individuals who pre-register. Public comment will be limited to two minutes per speaker. Individuals not providing public comment during conference call meeting may submit comments to Melvin Joppy, Committee Manager, at [melvin.joppy@hhs.gov](mailto:melvin.joppy@hhs.gov) by close of business Wednesday, June 30, 2010.

Dated: June 7, 2010.

**Christopher H. Bates,**  
*Executive Director, Presidential Advisory Council on HIV/AIDS.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

**[Document Identifier: CMS-10137 and CMS-10237]**

#### Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Centers for Medicare & Medicaid 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) 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:* Application for Prescription Drug Plans (PDP); Application for Medicare Advantage Prescription Drug (MA-PD)—CY 2012; Application for Cost Plans to Offer Qualified Prescription Drug Coverage; Application for Employer Group Waiver Plans to Offer Prescription Drug Coverage; Service Area Expansion Application for Prescription Drug Coverage; *Use:* Collection of this information is mandated under the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA). The application requirements are codified in Subpart K 42 CFR Part 423 of entitled "Application Procedures and Contracts with PDP Sponsors."

Coverage for the prescription drug benefit is provided through contracted

prescription drug plans (PDPs) or through Medicare Advantage (MA) plans that offer integrated prescription drug and health care coverage (MA-PD plans). Cost Plans that are regulated under Section 1876 of the Social Security Act, and Employer Group Waiver Plans (EGWP) may also provide a Part D benefit. Organizations wishing to provide services under the Prescription Drug Benefit Program must complete an application, negotiate rates, and receive final approval from CMS. Existing Part D Sponsors may also expand their contracted service area by completing the Service Area Expansion (SAE) application. The collected information will be used by CMS to: (1) Ensure that applicants meet CMS requirements, (2) support the determination of contract awards. *Form Number:* CMS-10137 (OMB#: 0938-0936); *Frequency:* Once; *Affected Public:* Business or other for-profits and not-for-profit institutions; *Number of Respondents:* 295; *Total Annual Responses:* 295; *Total Annual Hours:* 3,576 (For policy questions regarding this collection contact Marla Rothhouse at 410-786-8063. For all other issues call 410-786-1326.)

2. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Part C Medicare Advantage Application and 1876 Cost Plan Expansion Application—CY 2012; *Use:* The Balanced Budget Act of 1997 (BBA) established a new "Part C" in the Medicare statute (sections 1851 through 1859 of the Social Security Act (the Act)) which provided for a Medicare+Choice (M+C) program. Under section 1851(a)(1) of the Act, every individual entitled to Medicare Part A and enrolled under Part B, except for most individuals with end-stage renal disease (ESRD), could elect to receive benefits either through the Original Medicare Program or an M+C plan, if one was offered where he or she lived. The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) established the Medicare Prescription Drug Benefit Program (Part D) and made revisions to the provisions of Medicare Part C, governing what is now called the Medicare Advantage (MA) program (formerly Medicare+Choice). Organizations wishing to provide healthcare services under MA and/or MA-PD plans must complete an application, file a bid, and receive final approval from CMS. Existing MA plans may expand their contracted area by completing the Service Area Expansion (SAE) application. Any current Cost Plan

Contractor that wants to expand its Medicare cost-based contract with CMS under Section 1876 of the Social Security Act, as amended by the Tax Equity and Fiscal Responsibility Act of 1982 (TEFRA) and subsequent legislation can complete the application. *Form Number:* CMS-10237 (OMB#: 0938-0935); *Frequency:* Yearly; *Affected Public:* Business or other for-profits and not-for-profit institutions; *Number of Respondents:* 355; *Total Annual Responses:* 355; *Total Annual Hours:* 11,831 (For policy questions regarding this collection contact Letticia Ramsey at 410-786-5262. 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](mailto: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 August 10, 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: June 4, 2010.

**Michelle Shortt,**

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

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Proposed Information Collection Activity; Comment Request

##### Proposed Projects

*Title:* Developmental Disabilities Program Independent Evaluation Project.

*OMB No.:* 0970-0372.

*Description:* The National Independent Study of the State Developmental Disabilities Programs (National Study) is an independent (non-biased) study to examine through rigorous and comprehensive research procedures the three programs funded under the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (DD Act): (1) State Councils on Developmental Disabilities (SCDDs); (2) State Protection and Advocacy Systems for Individuals with developmental disabilities (P&As); and (3) University Centers for Excellence in Developmental

Disabilities (UCEDDs). The purpose of the study is to assess program effectiveness and achievements, including collaborative efforts among these state developmental disabilities (DD) network programs. A component of the study will be an examination of the Administration on Developmental Disabilities' efficiency and effectiveness to support these DD Network programs. The results of this evaluation will provide a report to the Administration on Developmental Disabilities (ADD) (the agency that administers these programs) with information on the effectiveness of its programs and policies and serve as a way for ADD to promote accountability to the public.

The independent study is a response to accountability requirements for ADD as identified in the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (DD Act), the Government Performance and Results Act (GPRA) of 1993, and the Program Assessment Rating Tool (PART), previously administered by the Office of Management and Budget (OMB).

ADD has OMB approval for all the evaluation tools (e.g., data collection instruments) for this study, except a new one being proposed. The new evaluation tool would be an on-line survey tool designed to collect data for an assessment of ADD.

*Respondents:* For the ADD assessment survey being added, the respondents would be Staff of State Councils on Developmental Disabilities, State Protection and Advocacy Systems for Individuals with developmental disabilities, and University Centers for Excellence in Developmental Disabilities, Education, Research, and Service.

## ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
DD Council: Executive Director Interview .....	20	1	4	80
DD Council: Interview with Council Chair/Council Members .....	60	1	0.75	45
DD Council: Group Interview with Policymakers, Collaborators, and Grantees .....	160	1	2	320
UCEDD: Telephone Interview with Current and Graduated Students .....	100	1	0.75	75
UCEDD: Interview with the Consumer Advisory Committee .....	60	1	0.75	45
UCEDD: Interview with Peer Researchers and Colleagues .....	100	1	0.75	75
UCEDD: Interview with Recipients of Community Services or Members of Organizations/Agencies that are Trained to Provide Community Services .....	100	1	0.75	75
UCEDD: Self-administered Form .....	20	1	8	160
P&A: Executive Director Interview .....	20	1	4	80
P&A: Staff Interview .....	60	1	0.75	45
P&A: Board of Directors (Commissioners)-Chair and Members .....	60	1	0.75	45
P&A: Group Interview with Policymakers and Collaborators .....	160	1	2	320
P&A: Interview with Recipient of Community Education .....	100	1	0.75	75
P&A: Interview with Clients .....	100	1	0.75	75
P&A: Self-administered Form .....	20	1	8	160
UCEDD: Interview with Director .....	20	1	4	80