

Dated: March 26, 2012.

Laura Auletta,

Acting Director, Office of Governmentwide Acquisition Policy, Office of Acquisition Policy, Office of Governmentwide Policy.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Request for Information on Prescription Medication Adherence

AGENCY: Department of Health and Human Services, Office of the Secretary, Office of the Assistant Secretary for Health, Office of the Surgeon General of the United States Public Health Service.

ACTION: Request for information.

SUMMARY: The Office of the Assistant Secretary for Health is seeking information about causes, impact and potential solutions associated with the public health problem of prescription medication non-adherence in adults with chronic conditions. The purpose of this notice is to provide individuals and organizations with the opportunity to identify issues relevant to all levels of government, as well as individuals, health care providers, and industry and private organizations in efforts to improve medication adherence in adults with chronic conditions. Comments that provide input on and evidence from interventions that improve adherence are particularly encouraged.

Comments must be in writing and should not exceed 500 words. All comments will receive careful consideration. However, persons and organizations submitting comments will not receive individual responses.

DATES: Individuals and organizations interested in providing information must submit their comments on or before May 7, 2012. Comments received after this date will not be considered.

ADDRESSES: Department of Health and Human Services, Office of the Surgeon General, Room 710-H, 200 Independence Ave., SW., Washington, DC 20201. Comments may also be sent via email to medadhere@hhs.gov.

FOR FURTHER INFORMATION CONTACT:

Dawn Alley, Ph.D., Office of the Surgeon General, by telephone (202-205-9491) or email (Dawn.Alley@hhs.gov).

SUPPLEMENTARY INFORMATION: Many different factors can contribute to poor medication adherence, including copayments, difficulty remembering and managing complex regimens, and poor health literacy. Solutions to this

problem will need to involve both the health-care community and patients. This request for information is intended to solicit comments on both barriers to medication adherence and strategies for overcoming those barriers to improve public health.

Dated: March 29, 2012.

Boris Lushniak,

Deputy Surgeon General.

[FR Doc. 2012-8179 Filed 4-4-12; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration on Aging

Agency Information Collection Activities; Proposed Collection; Comment Request; OAA Title III-C Evaluation

AGENCY: Administration on Aging, HHS.

ACTION: Notice

SUMMARY: The Administration on Aging (AoA) is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on the information collection requirements relating to

OAA Title III-C Evaluation

DATES: Submit written or electronic comments on the collection of information by June 4, 2012.

ADDRESSES: Submit electronic comments on the collection of information to: *Jennifer.klocinski@aoa.hhs.gov*.

Submit written comments on the collection of information to Administration on Aging, Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT: Jennifer Klocinski at 202-357-0146.

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. "Collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency request or requirements that members of the public submit reports, keep records, or

provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, AoA is publishing notice of the proposed collection of information set forth in this document. With respect to the following collection of information, AoA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of AoA's functions, including whether the information will have practical utility; (2) the accuracy of AoA's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (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 when appropriate, and other forms of information technology.

Describe Collection of Information

The mission of the Administration on Aging (AoA), operating through the Older Americans Act (OAA) programs, is to develop a comprehensive, coordinated and cost-effective system of home and community based services that helps elderly individuals to maintain their health and independence in their homes and communities and support family caregivers of older adults and grandparents caring for grandchildren, who are essential to making community living possible.

The OAA Title III-C Elderly Nutrition Services Program (statutory authority is contained in Title II section 205(a)(2)(A), and Title III sections 311, 331, 336 and 339 of the Older Americans Act (OAA) (42 U.S.C. 3032), as amended by the Older Americans Act Amendments of 2006, P.L. 109-365) is part of these comprehensive home- and community-based services. It is intended to reduce hunger and food insecurity, reduce social isolation and improve the health and well-being of the older adult who participate.

The Older Americans Act requires AoA to conduct evaluations of OAA programs. The requirements stipulated under 206(a) of the OAA direct that "The Secretary shall measure and evaluate the impact of all programs authorized by this Act, their effectiveness in achieving stated goals in