

FOR FURTHER INFORMATION CONTACT: U.S. General Services Administration, Public Buildings Service (P), Attn: David E. Foley, 1800 F Street, NW., Washington, DC 20405, e-mail at david.foley@gsa.gov. (202) 501-1100.

Dated: January 27, 2011.

Martha Johnson,
Administrator of General Services.

U.S. General Services Administration

Redesignations of Federal Buildings

To: Heads of Federal Agencies.
Subject: Redesignations of Federal Buildings.

1. *What is the purpose of this bulletin?* This bulletin announces the

redesignations of three Federal buildings.

2. *When does this bulletin expire?*

This bulletin announcement expires June 30, 2011. The building redesignations remain in effect until canceled or superseded by another bulletin.

3. *Redesignations.* The former and new names of the redesignated buildings are as follows:

Former name	New name
Federal Building, 100 North Palafox Street, Pensacola, FL 32502	Winston E. Arnow Federal Building, 100 North Palafox Street, Pensacola, FL 32502.
Federal Building and United States Courthouse, 515 9th Street, Rapid City, SD 57701.	Andrew W. Bogue Federal Building and United States Courthouse, 515 9th Street, Rapid City, SD 57701.
Federal Building, 6401 Security Boulevard, Baltimore, MD 21207	Robert M. Ball Federal Building, 6401 Security Boulevard, Baltimore, MD 21207.

4. *Who should we contact for further information regarding redesignation of these Federal buildings?* U.S. General Services Administration, Public Buildings Service (P), Attn: David E. Foley, 1800 F Street, NW., Washington, DC 20405, telephone number: (202) 501-1100, e-mail at david.foley@gsa.gov.

Dated: January 27, 2011.
MARTHA JOHNSON,
Administrator of General Services.

[FR Doc. 2011-2755 Filed 2-7-11; 8:45 am]

BILLING CODE 6820-23-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier OS-0990-New; 60-day Notice]

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 Sherette.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: Research Evaluation and Impact Assessment of ARRA Comparative Effectiveness Research Portfolio (New)—OMB No. 0990-NEW—Assistant Secretary Planning and Evaluation (ASPE).

Abstract: Researchers and policymakers have emphasized the need for research on effectiveness of health care interventions under real-world conditions in diverse populations and clinical practice settings, that is, comparative effectiveness research

(CER). The American Reinvestment and Recovery Act of 2009 (ARRA) expanded Federal resources devoted to CER by directing \$1.1 billion to the U.S. Department of Health and Human Services (HHS) for such research.

ARRA also called for a report to Congress and the Secretary of HHS on priority CER topics by the Institute of Medicine (IOM). The report presented priority CER topics and recommendations to support a robust and sustainable CER enterprise. In addition, ARRA established the Federal Coordinating Council on Comparative Effectiveness Research (FCCER) to help coordinate and minimize duplicative efforts of Federally sponsored CER across multiple agencies and to advise the President and Congress on how to allocate Federal CER expenditures.

This project seeks to evaluate and assess the products and outcomes of ARRA-funded CER investments and the impacts of those investments on the priority topics recommended by IOM and on the categories and themes of the FCCER framework. The primary goals of this evaluation are to (1) conduct an initial assessment of the ARRA CER portfolio, cataloguing how CER funding was invested to achieve the vision of the FCCER and assessing initial impact from the perspective of various stakeholders; and (2) lay the groundwork for future CER investments by identifying investment opportunities, evidence gaps and lessons learned.

ESTIMATED ANNUALIZED BURDEN TABLE

Instrument	Type of respondent	Number of respondents	Number of responses per respondent	Average burden (in hours) per response	Total burden hours
PSLA Web-based PI/PD survey.	Principal investigators and project directors	730	1	20/60	243
PSLA in-depth interviews	Principal investigators and project directors	50	1	1	50
SSLA Web-based key stakeholder survey.	Key stakeholders: Health care providers, health care organization administrators, and patients/consumers.	3,600	1	15/60	900
SSLA focus groups	Members of the general public	120	1	2	240
SSLA in-depth interviews	Stakeholders: Health care providers, health care organization administrators, patients/consumers, employers and payers, researchers, and developers of health innovations.	60	1	1	60
Total	4,560	1,493

Seleda Perryman,

Office of the Secretary, Paperwork Reduction Act Clearance Officer.

[FR Doc. 2011-2668 Filed 2-7-11; 8:45 am]

BILLING CODE 4150-05-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

30-Day Submission Period for Requests for ONC-Approved Accreditor (ONC-AA) Status

AGENCY: Office of the National Coordinator for Health Information Technology, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: This notice announces the 30-day period for submission of requests for ONC-Approved Accreditor (ONC-AA) status.

Authority: 42 U.S.C. 300jj-11.

DATES: The 30-day submission period begins upon publication of this notice in the **Federal Register** and will end on March 10, 2011.

FOR FURTHER INFORMATION CONTACT:

Carol Bean, Director, Certification Division, Office of the National Coordinator for Health Information Technology, 202-690-7151.

SUPPLEMENTARY INFORMATION: The Department of Health and Human Services issued a final rule establishing a permanent certification program for the purpose of certifying health information technology (HIT). Establishment of the Permanent Certification Program for Health Information Technology, 76 FR 1262 (Jan. 7, 2011) (the "Permanent Certification Program final rule"). The Permanent Certification Program final rule became effective on February 7,

2011 and added a new "Subpart E—Permanent Certification Program for HIT" to part 170 of title 45 of the Code of Federal Regulations (CFR). This notice is issued pursuant to § 170.503(b), which provides that the National Coordinator for Health Information Technology (the National Coordinator) will publish a notice in the **Federal Register** to announce the 30-day period during which requests for ONC-AA status may be submitted. The 30-day period for submission of requests for ONC-AA status begins upon publication of this notice in the **Federal Register** and will end 30 days thereafter, as specified in the **DATES** section of this notice. In order to be considered for ONC-AA status, an accreditation organization must submit a written request to the National Coordinator that includes the information required by § 170.503(b), within the 30-day period specified by this notice. Section 170.503(b) requires an accreditation organization to submit the following information to demonstrate its ability to serve as an ONC-AA:

(1) A detailed description of the accreditation organization's conformance to ISO/IEC17011:2004 (incorporated by reference in § 170.599) and experience evaluating the conformance of certification bodies to ISO/IEC Guide 65:1996 (incorporated by reference in § 170.599);

(2) A detailed description of the accreditation organization's accreditation requirements[,] as well as how those requirements would complement the Principles of Proper Conduct for ONC-ACBs and ensure the surveillance approaches used by ONC-ACBs include the use of consistent, objective, valid, and reliable methods;

(3) Detailed information on the accreditation organization's procedures

that would be used to monitor ONC-ACBs;

(4) Detailed information, including education and experience, about the key personnel who review organizations for accreditation; and

(5) Procedures for responding to, and investigating, complaints against ONC-ACBs.

Requests for ONC-AA status may be submitted by e-mail to ONC-AA@hhs.gov and should include "Request for ONC-AA Status" in the subject line. Alternatively, requests for ONC-AA status may be submitted by regular or express mail to: Office of the National Coordinator for Health Information Technology, Attention: Permanent Certification Program—Request for ONC-AA Status, 200 Independence Avenue, SW., Suite 729D, Washington, DC 20201. In accordance with § 170.505, the official date of receipt of an e-mail submission will be the date on which it was sent, and the official date of a submission by regular or express mail will be the date of the delivery confirmation. To clarify, e-mail submissions may be sent up to and through 11:59 p.m. on the last day of 30-day submission period. Additional information about requesting ONC-AA status and the permanent certification program can be found on the ONC Web site at: <http://healthit.hhs.gov/certification>.

Dated: February 2, 2011.

David Blumenthal,

National Coordinator for Health Information Technology.

[FR Doc. 2011-2763 Filed 2-7-11; 8:45 am]

BILLING CODE 4150-45-P