

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Committee to the Director (ACD), Centers for Disease Control and Prevention—Health Disparities Subcommittee (HDS)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following meeting of the aforementioned subcommittee:

Time and Date: 9 a.m.–2 p.m. EDT, April 19, 2012.

Place: CDC, Building 21, Room 1204B, 1600 Clifton Road NE., Atlanta, Georgia 30333.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 20 people. The public is welcome to participate during the public comment, which is tentatively scheduled from 1:30 p.m. until 2 p.m. This meeting is also available by teleconference. Please dial (866) 561–5277 and enter code 2238494.

Purpose: The Subcommittee will provide advice to the CDC Director through the ACD on strategic and other health disparities and health equity issues and provide guidance on opportunities for CDC.

Matters To Be Discussed: The agenda will include a presentation by the Institute of Medicine Roundtable on the Promotion of Health Equity and the Elimination of Health Disparities.

The agenda is subject to change as priorities dictate.

For Further Information Contact: Leandris Liburd, Ph.D., M.P.H., M.A., Designated Federal Officer, Health Disparities Subcommittee, Advisory Committee to the Director, CDC, 1600 Clifton Road NE., M/S K–77, Atlanta, Georgia 30333, telephone (770) 488–8200, email: LEL1@cdc.gov.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: March 22, 2012.

Elaine L. Baker,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 2012–7530 Filed 3–28–12; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–7031–N]

Announcement Notice; Establishment of a Federally Funded Research and Development Center

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice.

SUMMARY: This notice announces our intention to establish a Federally Funded Research and Development Center (FFRDC) to facilitate the modernization of business processes and supporting systems and their operations.

DATES: *Effective Date:* This notice is effective on March 29, 2012.

FOR FURTHER INFORMATION CONTACT: Candice Savoy, (410) 786–7494 or Candice.Savoy@cms.hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Background

Section 219 of the fiscal year 2012 Omnibus Bill requires Centers for Medicare & Medicaid Services (CMS) to issue a **Federal Register** notice that outlines how a CMS Federally Funded Research and Development Center (FFRDC) would meet the specific requirements identified in Federal Acquisition Regulation (FAR 35.017–2), CMS' agency procedures that ensure small business competitiveness is maintained, and the outline of a transparent award and governance process to be employed by the CMS FFRDC. This notice is CMS' intent to sponsor an FFRDC, which complies with FAR 35.017–2 as discussed below.

CMS has a need for assistance in developing requirements, identifying strategies for meeting statutory and programmatic requirements, analyzing existing CMS systems and approaches to meeting needs and developing metrics and measures for assessing agency performance. Meeting these various needs will require the services of an organization that will have access to confidential and proprietary agency information. An FFRDC would be appropriate to provide these needed services. CMS has surveyed the existing FFRDCs and does not believe that there is an established FFRDC that could effectively meet all of its requirements. Currently, CMS has obtained specialized consulting services from the Internal Revenue Service (IRS) FFRDC. However, this work has been focused on

the modernization of CMS' Information Technology resources in accordance with the scope of the IRS contract. The IRS FFRDC, other FFRDC's, and other Government wide contracts analyzed will not meet the needs of CMS. CMS has examined other contract vehicles available, for example, the Government Wide Acquisition Contracts, the National Institutes of Health Chief Information Officer Solutions and Partners, Alliant and (8)a Streamlined Technology Acquisition Resources for Services and the General Services Administration schedules. Based on a market assessment of those vehicles, there is not a single source to fit CMS' unique needs. In addition, since the contractors on these contract vehicles have other Government contracts and compete for business, it may interfere with their ability to maintain objectivity and independence for the sponsoring agency, which cause conflicts of interest concerns. Therefore, it is appropriate to establish an FFRDC for CMS, since existing alternative sources cannot satisfy current and future agency requirements.

CMS proposes to establish an FFRDC to encompass all of CMS' needs, including those associated with the Patient Protection and Affordable Care Act (Pub. L. 111–148), which was enacted on March 30, 2010 (the Affordable Care Act), and other current and future statutorily driven requirements. There is a need for an independent organization to assist in strategic/tactical planning and analysis, conceptual planning and prototyping, long term acquisition planning and requirements development, organizational planning and relationship management, continuous process improvement, strategic technology evaluation, and feasibility analysis and design in the areas of policy, business operations and technology.

CMS has transmitted the required three notices over a 90-day period to the Government wide Point of Entry (Federal Business Opportunities) and published these notices in the **Federal Register** on April 13, 2011 (76 FR 20673), May 13, 2011 (76 FR 28042), and June 14, 2011 (76 FR 34713) respectively, indicating the agency's intention to sponsor an FFRDC. These notices indicated the scope and nature of the effort to be performed and requested comments. Additionally, CMS has considered the concerns and interest expressed by many Federal Government contractors and contractor organizations to ensure the establishment of the FFRDC is operated