Dated: October 8, 2004.

#### Alvin Hall,

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

[FR Doc. 04–23151 Filed 10–14–04; 8:45 am] BILLING CODE 4163–18–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Centers for Medicare and Medicaid Services

[Document Identifier: CMS-10109 and CMS-10114]

### Agency Information Collection Activities: Submission for OMB Review; Comment Request

**AGENCY:** Centers for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration (HCFA), Department of Health and Human Services, 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: Extension of a currently approved collection; Title of Information Collection:. Hospital Reporting Initiative—Hospital Quality Measures; *Use:* The purpose is to collect data to produce valid, reliable, comparable and salient quality measures to provide a potent stimulus for clinicians and providers to improve the quality of care they provide. This reporting initiative in which hospitals may participate is a significant step toward a more informed public and a means to sustain health care quality improvement. The data is currently being collected from hospitals by CMS. The hospitals submitting data have volunteered to participate in public reporting. This effort places no

additional data collection requirements or burdens on hospitals. Section 501(b) of the MMA offers monetary incentives for hospitals participating in reporting; Form Number: CMS-10109 (OMB#: 0938-0918); Frequency: Quarterly; Affected Public: Business or other forprofit and Not-for-profit institutions; Number of Respondents: 4,000; Total Annual Responses: 16,000; Total Annual Hours: 238,000.

2. Type of Information Collection Request: New collection; Title of Information Collection: National Provider Identifier (NPI) Application and Update Form and Supporting Regulation in 45 CFR 142.408, 162.406, and 162.408: Form No.: CMS-10114 (OMB# 0938-NEW); Use: The form will be used by health care providers to apply for NPIs and to update the information collected from them whenever it changes.; Frequency: On occasion and/or one-time; Affected Public: Business or other for-profit, Notfor-profit institutions and Federal Government; Number of Respondents: 1,193,945; Total Annual Responses: 1,193,945; Total Annual Hours: 448,128.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS Web Site address at <a href="http://www.cms.hhs.gov/regulations/pra/">http://www.cms.hhs.gov/regulations/pra/</a>, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to <a href="mailto:Paperwork@hcfa.gov">Paperwork@hcfa.gov</a>, or call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB desk officer:

OMB Human Resources and Housing Branch, Attention: Christopher Martin, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: October 7, 2004.

## John P. Burke, III,

Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances. [FR Doc. 04–23122 Filed 10–14–04; 8:45 am]

BILLING CODE 4120-03-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **Centers for Medicare and Medicaid Services**

[Document Identifier: CMS-10128, CMS-10112 and CMS-10068]

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

**AGENCY:** Centers for Medicare and Medicaid Services.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration (HCFA)), Department of Health and Human Services, 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: New collection; Title of *Information Collection:* Public Reporting on Quality Outcomes National Survey of Hospital Executives ("PRO QUO"); Use: CMS seeks to survey hospitals quality improvement executives in spring 2005 to assess awareness of CMS Hospital Quality Initiatives and related publicity, and to assess impact of these initiatives on hospitals and their quality improvement programs. Findings will be used to enhance CMS programs to assist hospitals in quality improvement. Form Number: CMS-10128 (OMB#: 0938-NEW); Frequency: Once; Affected Public: Not-for-profit institutions and business or other for-profit; Number of Respondents: 1,600; Total Annual Responses: 1,600; Total Annual Hours: 792.
- 2. Type of Information Collection Request: New collection; Title of Information Collection: Phone Surveys of Product/Service for Medicare Payment Validation and Supporting Regulations in 42 CFR 405.502; Form No.: CMS-10112 (OMB# 0938-NEW);

Use: The Phone Surveys of Product/ Service for Medicare Payment Validation will be used to identify specific products/services provided to Medicare beneficiaries and the costs associated with the provision of those products/services. The information collected will be used to validate the Medicare payment amounts for those products/services and institute revisions of payment amounts where necessary. The respondents will be the companies that have provided the product/service under review to Medicare beneficiaries.; Frequency: On occasion; Affected Public: Business or other for-profit; Number of Respondents: 2,000; Total Annual Responses: 2,000; Total Annual Hours: 16,000.

3. Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Assessing the Division of Beneficiary Inquiry Customer Service's Performance for Written Responses; Form No.: CMS-10068 (OMB# 0938-0894); Use: The Division of Beneficiary Inquiry Customer Service (DBICS) will collect information several times during FY '04-'05 to assess the customer service provided via written responses. DBICS will conduct the written survey through mailings that will accompany actual responses. The envelopes will be sent by Release Clerks so that the actual writer has no knowledge that a particular response is being rated.; Frequency: Quarterly; Affected Public: Individuals or households: Number of Respondents: 2,872; Total Annual Responses: 2,872; Total Annual Hours: 287.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web Site address at <a href="http://www.cms.hhs.gov/regulations/pra/">http://www.cms.hhs.gov/regulations/pra/</a>, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to <a href="mailto:Paperwork@cms.hhs.gov">Paperwork@cms.hhs.gov</a>, or call the Reports Clearance Office on (410) 786–1326.

Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the CMS Paperwork Clearance Officer designated at the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances, Attention: Melissa Musotto, Room C5–14–03, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: October 7, 2004.

#### John P. Burke, III,

Paperwork Reduction Act Team Leader, Office of Strategic Operations and Strategic Affairs, Division of Regulations Development and Issuances.

[FR Doc. 04–23123 Filed 10–14–04; 8:45 am] **BILLING CODE 4120–03–P** 

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Health Resources and Services Administration

Technical and Non-Financial
Assistance to Health Centers:
Perinatal/Patient Safety Pilot Health
Disparities Collaborative Cooperative
Agreement Announcement of Single
Source Award

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Announcement of Single Source Award.

SUMMARY: The Health Resources and Services Administration (HRSA) announces the award of a single source cooperative agreement for \$1,700,000 to the Institute for Health Care Improvement. This award is for an 18 month project period beginning September 1, 2004. The purpose of this cooperative agreement is to pilot a Perinatal/Patient Safety Health Disparities Collaborative for health centers funded under section 330 of the Public Health Service (PHS) Act.

Background: The Institute for Health Care Improvement (IHI) is uniquely qualified. IHI is a private, non-profit organization leading the improvement of health care throughout the world. IHI is a catalyst for change, cultivating innovative concepts for improving patient care and implementing programs for putting those ideas into action. It is recognized as a leading force in the challenge to improve health status, clinical outcomes, access to high quality acceptable care, patient satisfaction and cost effectiveness in the health care arena. They have achieved this high level of standing among health professionals by developing and teaching the Breakthrough Series to leaders interested in improving the quality of medical care. The Breakthrough Series methodology facilitates rapid implementation of successful care models in many area of health care delivery.

Given the mission of IHI, its recognized leadership position in implementing improvements in health care delivery systems, and its experience in working with thousands of health care providers, including health centers, HRSA believes that IHI is uniquely qualified and essential to assist the Agency in launching the pilot Perinatal/Patient Safety Health Disparities Collaborative in FY 2004.

#### FOR FURTHER INFORMATION CONTACT:

Additional information may be obtained from Ada Determan, HRSA/Bureau of Primary Health Care, 4350 East West Highway, 8th Floor, Bethesda, Maryland 20814; telephone: (301) 594–4358; fax: (301) 594–4081; e-mail: Adeterman@hrsa.gov.

Dated: October 8, 2004.

#### Elizabeth M. Duke,

Administrator.

[FR Doc. 04–23184 Filed 10–14–04; 8:45 am]

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Health Resources and Services Administration

### Notice of Senior Executive Service Performance Review Board Membership

The Health Resources and Services Administration (HRSA) announces the appointment of members to the HRSA Senior Executive Service (SES) Performance Review Board (PRB). This action is being taken in accordance with Title 5, U.S.C. 4314(c)(4), which requires notice of the appointment of members of performance review boards to be published in the **Federal Register**.

The function of the PRB is to ensure consistency, stability and objectivity in SES performance appraisals, and to make recommendations to the Administrator, HRSA, relating to the performance of senior executives in the Agency.

The following persons will serve on the HRSA SES Performance Review Board: Dennis P. Williams, Catherine A. Flickinger, Denise H. Geolot, Neil Sampson, Merle G. McPherson, Samuel Shekar, Stephen R. Smith, Marcia K. Brand, Kerry Nesseler, Katherine M. Marconi, Peter C. van Dyck, Deborah Parham, Mary J. Horner, J. Henry Montes, Steven A. Pelovitz, Douglas Morgan, James Macrae, A. Michelle Snyder, Patricia L. Mackey, Jon L. Nelson, and Kay Templeton Garvey.

For further information about the HRSA Performance Review Board, contact Ms. Wendy Ponton, HRSA Office of Administration and Financial Management, 5600 Fishers Lane, Room 14A20, Rockville, Maryland 20857.