SUPPLEMENTARY INFORMATION: The Advisory Council on Alzheimer's Research, Care, and Services meets quarterly to discuss programs that impact people with Alzheimer's disease and related dementias and their caregivers. The Advisory Council makes recommendations about ways to reduce the financial impact of Alzheimer's disease and related dementias and to improve the health outcomes of people with these conditions. The Advisory Council provides feedback on the National Plan to Address Alzheimer's Disease. On an annual basis, the Advisory Council shall evaluate the implementation of the recommendations through an updated national plan.

The Advisory Council consists of designees from Federal agencies including the Centers for Disease Control and Prevention, Administration on Aging, Centers for Medicare and Medicaid Services, Indian Health Service, Office of the Director of the National Institutes of Health, National Science Foundation, Department of Veterans Affairs, Food and Drug Administration, Agency for Healthcare Research and Quality, and the Surgeon General. The Advisory Council also consists of 12 non-federal members selected by the Secretary who are Alzheimer's patient advocates (2), Alzheimer's caregivers (2), health care providers (2), representatives of State health departments (2), researchers with Alzheimer's-related expertise in basic, translational, clinical, or drug development science (2), and voluntary health association representatives (2). Members serve for overlapping 4 year terms, except that any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of such term. A member may serve after the expiration of the member's term until a successor has taken office. Members serve as Special Government Employees. This announcement is seeking nominations for a "representative of a state public health department" who is not a Federal employee.

### Sherry Glied,

Assistant Secretary for Planning and Evaluation.

[FR Doc. 2012–6083 Filed 3–12–12; 8:45 am]

BILLING CODE P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention (CDC)

### Request for Nominations of Candidates to Serve on the Advisory Committee on Immunization Practices (ACIP)

The CDC is soliciting nominations for membership on the ACIP. The ACIP consists of 15 experts in fields associated with immunization, who are selected by the Secretary of the U.S. Department of Health and Human Services to provide advice and guidance to the Secretary, the Assistant Secretary for Health, and the CDC on the control of vaccine-preventable diseases. The role of the ACIP is to provide advice that will lead to a reduction in the incidence of vaccine preventable diseases in the United States, and an increase in the safe use of vaccines and related biological products. The committee also establishes, reviews, and as appropriate, revises the list of vaccines for administration to children eligible to receive vaccines through the Vaccines for Children (VFC) Program.

Nominations are being sought for individuals who have expertise and qualifications necessary to contribute to the accomplishments of the committee's objectives. Nominees will be selected based on expertise in the field of immunization practices; multidisciplinary expertise in public health; expertise in the use of vaccines and immunologic agents in both clinical and preventive medicine; knowledge of vaccine development, evaluation, and vaccine delivery; or knowledge about consumer perspectives and/or social and community aspects of immunization programs. Federal employees will not be considered for membership. Members may be invited to serve for four-year terms. The next cycle of selection of candidates will begin in the fall of 2012, for selection of potential nominees to replace members whose terms will end on June 30, 2013.

Selection of members is based on candidates' qualifications to contribute to the accomplishment of ACIP objectives (http://www.cdc.gov/vaccines/recs/acip). The U.S.

Department of Health and Human Services policy stipulates that committee membership be balanced in terms of points of view represented and the committee's function. Consideration is given to a broad representation of geographic areas within the U.S., as well as gender, race, ethnicity, and persons with disabilities. Nominees must be

U.S. citizens, and cannot be full-time employees of the U.S. Government.

Candidates should submit the following items:

- Current curriculum vitae, including complete contact information (telephone numbers, fax number, mailing address, email address)
- At least one letter of recommendation from person(s) not employed by the U.S. Department of Health and Human Services. Candidates may submit letter(s) from current HHS employees if they wish, but at least one letter must be submitted by a person not employed by HHS.

Nominations should be submitted (postmarked or received) by November 16, 2012 (for consideration for term beginning July 2013.) All files must be submitted electronically as email attachments to:

- Ms. Stephanie Thomas, c/o ACIP Secretariat, *SThomas5@cdc.gov*.
- Nominations may be submitted by the candidate or by the person/ organization recommending the candidate.

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 6, 2012.

#### Elaine L. Baker,

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

[FR Doc. 2012–6071 Filed 3–12–12; 8:45 am] BILLING CODE 4163–18–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

### Clinical Laboratory Improvement Advisory Committee, Centers for Disease Control and Prevention: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Pub. L. 92–463) of October 6, 1972, that the Clinical Laboratory Improvement Advisory Committee, Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS), has been renewed for a 2-year period through February 19, 2014.

For information, contact May Chu, Ph.D., Designated Federal Officer, Clinical Laboratory Improvement Advisory Committee, 1600 Clifton Road NE., Mailstop E–94, Atlanta, Georgia 30333, telephone 404/498–6400 or fax 404/498–6410.

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 6, 2012.

#### Elaine L. Baker,

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

[FR Doc. 2012–6080 Filed 3–12–12; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

### Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Initial Review

The meeting announced below concerns Epidemiology, Prevention and Treatment of Influenza and Other Respiratory Infections in Ghana, Studies at the Animal-Human Interface of Influenza and Other Zoonotic Diseases in Vietnam, The Incidence of Community Associated Influenza and Other Respiratory Infections in the United States, and Epidemiology, Prevention and Treatment of Influenza and Other Respiratory Infections in Panama and Central America Region, Funding Opportunity Announcements (FOAs) IP12-001, IP12-002, IP12-003, and IP12-006, initial review.

Correction: The notice was published in the **Federal Register** on January 26, 2012, Volume 77, Number 17, Page 4047. The place should read as follows:

Place: Crowne Plaza Hotel Atlanta-Airport, 1325 Virginia Avenue, Atlanta, GA 30344, Telephone: (404) 768–6660.

Contact Person for More Information: Gregory Anderson, MPH, MS, Scientific Review Officer, CDC, 1600 Clifton Road, NE., Mailstop E60, Atlanta, Georgia 30333, Telephone: (404) 718–8833.

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 6, 2012.

#### Elaine L. Baker,

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

[FR Doc. 2012–6075 Filed 3–12–12; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Centers for Medicare & Medicaid Services

[Document Identifier: CMS-1880 and -1882; CMS-10393; and CMS-R-245]

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

**AGENCY:** Centers for Medicare & 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 & Medicaid Services (CMS), 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 function; (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 without change of a currently approved collection. Title of Information Collection: Certification as a Supplier of Portable X-Ray and Portable X-Ray Survey Report Form and Supporting Regulations at 42 CFR Part 486.100-486.110. Use: CMS-1880 is initially completed by suppliers of portable X-ray services, expressing an interest in and requesting participation in the Medicare program. This form initiates the process of obtaining a decision as to whether the conditions of coverage are met as a portable X-ray supplier. It also promotes data reduction or introduction to, and retrieval from, the Certification and Survey Provider Enhanced Reporting (CASPER) by the CMS Regional Offices (ROs).

CMS-1882 is used by the State survey agency to provide data collected during

an on-site survey of a supplier of portable X-ray services to determine compliance with the applicable conditions of participation and to report this information to the Federal Government. The form is primarily a coding worksheet designed to facilitate data reduction and retrieval into the ASPEN system at the CMS ROs. The form includes basic information on compliance (i.e., met, not met, explanatory statements) and does not require any descriptive information regarding the survey activity itself. CMS has the responsibility and authority for certification decisions which are based on supplier compliance with the applicable conditions of participation. The information needed to make these decisions is available to CMS only through the use of information abstracted from the survey report form.

Subsequent to the publication of the 60-day Federal Register notice (December 23, 2011; 76 FR 80372), the Supporting Statement has been revised by making editorial changes and by adding clarifying language. The requirements and burden estimates have not changed. Form Numbers: CMS-1880 (Request for Certification as a Supplier of Portable X-Ray Services), CMS-1882 (Medicare/Medicaid Portable X-Ray Survey Report), and OCN 0938-0027. Frequency: Occasionally. Affected Public: State, Local, or Tribal Governments. Number of Respondents: 579. Total Annual Responses: 86. Total Annual Hours: 151. (For policy questions regarding this collection contact Georgia Johnson at 410-786-6859. For all other issues call 410–786–

2. Type of Information Collection Request: Existing collection in use without an OMB control number; Title of Information Collection: Medicare Beneficiary and Family-Centered Satisfaction Survey; Use: The data collection methodology used to determine Beneficiary Satisfaction flows from the proposed sampling approach. While it was feasible to conduct the 9th SOW via telephone data collection only, with a quarterly sample size for the 10th SOW estimated to be 2,664, it does not seem efficient to maintain a telephone only data collection approach. Based on recent literature on survey methodology and response rates by mode, we recommend using a data collection that is done primarily by mail. A mail-based methodology will achieve the goals of being efficient, effective, and minimally burdensome for beneficiary respondents.

As previously described, we anticipate that a mail-based methodology could yield a response rate