de Puerto Rico ("COSSEC"), has no process in place for reviewing cooperatives' negotiations with payers or for approving or disapproving prices and other terms that result from such negotiations.

### The Proposed Consent Order

The proposed consent order is designed to prevent the continuance and recurrence of the illegal conduct alleged in the proposed complaint, while allowing Coopharma to engage in

legitimate joint conduct.

Paragraph II prevents Coopharma from continuing the challenged conduct. Paragraph II.A prohibits Respondent from entering into or facilitating agreements between or among any pharmacies: (1) To negotiate on behalf of any pharmacy with any payer; (2) to refuse to deal or threaten to refuse to deal with any payer; (3) to include any term, condition, or requirement upon which any pharmacy deals, or is willing to deal, with any payer, but not limited to, price terms; or (4) not to deal individually with any payer, or not to deal with any payer other than through Respondent.

The other parts of Paragraph II reinforce these general prohibitions. Paragraph II.B prohibits Respondent from facilitating exchanges of information between pharmacies concerning whether, and on what terms, to contract with a payer. Paragraph II.C bars attempts to engage in any action prohibited by Paragraph II.A or II.B, and Paragraph II.D proscribes encouraging, suggesting, advising, pressuring, inducing, or attempting to induce any person to engage in any action that would be prohibited by Paragraphs II.A through II.C.

Paragraph III is designed to prevent the challenged conduct from reoccurring. Paragraph III.A requires Coopharma to send a copy of the complaint and consent order to its members, its management and staff, and any payers with whom Coopharma has contracted at any time since January 1, 2008. Paragraph III.B allows for contract termination if a payer voluntarily submits a request to Coopharma to terminate its contract. Pursuant to such a request, Paragraph III.B requires Coopharma to terminate, without penalty, any pre-existing payer contracts. Upon receiving such request, Paragraph III.C requires that Coopharma notify in writing each pharmacy that provides services through that contract to be terminated. Paragraph III.D requires Coopharma, for three years, to distribute a copy of the complaint and consent order to new members, officers, directors, and employees, and to payers

who begin contracting with Coopharma and to post them on its Web site.

Paragraphs IV, V, and VI impose various obligations on Coopharma to report or to provide access to information to the Commission to facilitate its compliance with the consent order. Finally, Paragraph VII provides that the proposed consent order will expire 20 years from the date it is issued.

By direction of the Commission.

## Donald S. Clark,

Secretary.

[FR Doc. 2012-20955 Filed 8-24-12; 8:45 am] BILLING CODE 6750-01-P

#### **DEPARTMENT OF DEFENSE**

## **GENERAL SERVICES ADMINISTRATION**

## NATIONAL AERONAUTICS AND **SPACE ADMINISTRATION**

[OMB Control No. 9000-0026; Docket 2012-0076; Sequence 18]

## Federal Acquisition Regulation; Information Collection; Change Order Accounting

**AGENCY:** Department of Defense (DOD), General Services Administration (GSA), and National Aeronautics and Space Administration (NASA).

**ACTION:** Notice of request for public comments regarding an extension to an existing OMB clearance.

**SUMMARY:** Under the provisions of the Paperwork Reduction Act, the Regulatory Secretariat will be submitting to the Office of Management and Budget (OMB) a request to review and approve an extension of a previously approved information collection requirement concerning change order accounting.

Public comments are particularly invited on: Whether this collection of information is necessary for the proper performance of functions of the Federal Acquisition Regulations (FAR), and whether it will have practical utility; whether our estimate of the public burden of this collection of information is accurate, and based on valid assumptions and methodology; ways to enhance the quality, utility, and clarity of the information to be collected; and ways in which we can minimize the burden of the collection of information on those who are to respond, through the use of appropriate technological collection techniques or other forms of information technology.

**DATES:** Submit comments on or before October 26, 2012.

**ADDRESSES:** Submit comments identified by Information Collection 9000-0026, Change Order Accounting by any of the following methods:

 Regulations.gov: http:// www.regulations.gov.

Submit comments via the Federal eRulemaking portal by inputting "Information Collection 9000-0026, Change Order Accounting" under the heading "Enter Keyword or ID" and selecting "Search". Select the link "Submit a Comment" that corresponds with "Information 9000-0026, Change Order Accounting". Follow the instructions provided at the "Submit a Comment" screen. Please include your name, company name (if any), and "Information Collection 9000-0026, Change Order Accounting" on your attached document.

- Fax: 202-501-4067.
- Mail: General Services Administration, Regulatory Secretariat (MVCB), 1275 First Street NE., Washington, DC 20417. ATTN: Hada Flowers/IC 9000-0026, Change Order Accounting.

*Instructions:* Please submit comments only and cite Information Collection 9000-0026, Change Order Accounting, in all correspondence related to this collection. All comments received will be posted without change to http:// www.regulations.gov, including any personal and/or business confidential information provided.

FOR FURTHER INFORMATION CONTACT: Mr. Michael O. Jackson, Procurement Analyst, Office of Governmentwide Acquisition Policy, GSA, (202) 208– 4949, or email at michaelo.jackson@gsa.gov.

#### SUPPLEMENTARY INFORMATION:

#### A. Purpose

FAR 43.205 allows a contracting officer, whenever the estimated cost of a change or series of related changes under a contract exceeds \$100,000, to assert the right in the clause at FAR 52.243–6, Change Order Accounting, to require the contractor to maintain separate accounts for each change or series of related changes. Each account shall record all incurred segregable, direct costs (less allocable credits) of work, changed and unchanged, allocable to the change. These accounts are to be maintained until the parties agree to an equitable adjustment for the changes or until the matter is conclusively disposed of under the Disputes clause. This requirement is necessary in order to be able to account properly for costs associated with

changes in supply and research and development contracts that are technically complex and incur numerous changes.

#### **B.** Annual Reporting Burden

The estimated annual reporting burden has decreased from what was published in the Federal Register at 74 FR 18718, on April 24, 2009. The estimated number of respondents has decreased from 8,750 to 200, based on information received from Government organizations most likely to use change order accounting. In addition, the reduction in the number of respondents is made possible because of the improvement in Generally Accepted Accounting Principles (GAAP), the use of FAR cost principles (FAR subpart 31.2), and expanded use of Cost Accounting Standards (CAS). These procedures, in most cases, enable the Government to account for the cost of changes without having to resort to change order accounting. The responses per respondent decreased from 18 to 12, based on an estimated monthly submission to the Government, or 12 times a year. The estimated hours per response time of .084 increased to .5, or 30 minutes. This change is based on a reassessment of the estimated time required to gather and report the accounting information in the format specific to this information collection.

Respondents: 200.

Responses per Respondent: 12.

Annual Responses: 2,400. Hours per Response: 0.5.

Total Burden Hours: 1,200.

Obtaining Copies of Proposals: Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat (MVCB), 1275 First Street NE., Washington, DC 20417, telephone (202) 501–4755. Please cite OMB Control No. 9000–0026, Change Order Accounting, in all correspondence.

Dated: August 14, 2012.

#### William Clark,

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

[FR Doc. 2012–20742 Filed 8–24–12; 8:45 am]

BILLING CODE 6820-EP-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the National Coordinator for Health Information Technology; Announcement of Requirements and Registration for Reducing Cancer Among Women of Color Challenge

**AGENCY:** Office of the National Coordinator for Health Information Technology, HHS.

Award Approving Official: Farzad Mostashari, National Coordinator for Health Information Technology.

**ACTION:** Notice.

**SUMMARY:** Disparities in prevention, early treatment, and final outcomes exist across the spectrum of cancer types and are often amplified in women's health when we look at breast cancer and gynecologic cancers primarily cervical, uterine, and ovarian cancer. With over 300,000 new cases combined and 68,000 deaths annually, the impact that these cancers have on the United States cannot be overstated. While the incidence and prevalence of these malignancies is as socially and geographically diverse as our nation, they strike minority and underserved women with a disproportionate lethality caused by many factors.

In particular, the prevention strategies for these cancers cross the gambit of social and technical modalities from radiology (e.g., mammography) to advanced immunotherapy and vaccination (e.g., HPV vaccine). The clinical communities that treat and care for these patients is, likewise, among the broadest group of clinical disciplines that can be aggregated—from primary care and the surgical specialties to some of the most cutting-edge radiation oncology and medical oncology groups. But more importantly, any failure of our healthcare system to adequately prevent one of these cancers is most often a failure to address a myriad of social challenges, from education and access to health literacy and community support.

The "Reducing Cancer Among Women of Color Challenge" is a call to developers to create a mobile device-optimized tool that engages and empowers women to improve the prevention and treatment of breast, cervical, uterine, and ovarian cancer in underserved and minority communities and interfaces with provider electronic health records (EHRs).

The statutory authority for this challenge competition is Section 105 of the America COMPETES Reauthorization Act of 2010 (Pub. L. 111–358).

**DATES:** Effective on August 23, 2012. Challenge submission period ends February 5, 2013, 11:59 p.m. ET.

FOR FURTHER INFORMATION CONTACT: Adam Wong, 202–720–2866. SUPPLEMENTARY INFORMATION:

## **Subject of Challenge Competition**

This challenge is a multidisciplinary call to innovators and developers to create a mobile device-optimized tool that engages and empowers women to improve the prevention and treatment of breast, cervical, uterine, and ovarian cancer in underserved and minority communities and interfaces with provider electronic health records (EHRs). The tool will achieve the following:

- Provide general information regarding preventive and screening services for breast and gynecologic cancers—including, but not limited to, benefits, timing, scheduling, and location.
- Allow for the interface with patient health records or provider-sponsored patient portals to provide specific reminders and trigger electronic health record-based clinical decision support regarding the timing of preventive services.
- Support the storage, viewing, and exchange of complex patient care plans. In particular, the tool will help strengthen communication among provider care teams, possibly spread out across large geographic locations, to afford optimal remote follow-up (e.g., be able to send patient information to electronic health records via *Direct*).
- Support patient engagement and care giver support to help patients and/ or their caregivers keep track of complex care plans, such as connections to community health workers, promotores de salud, or patient navigators.
- Be optimized for use on mobile devices.

# **Eligibility Rules for Participating in the Competition**

To be eligible to win a prize under this challenge, an individual or entity—

- (1) Shall have registered to participate in the competition under the rules promulgated by the Office of the National Coordinator for Health Information Technology.
- (2) Shall have complied with all the requirements under this section.
- (3) In the case of a private entity, shall be incorporated in and maintain a primary place of business in the United States, and in the case of an individual, whether participating singly or in a group, shall be a citizen or permanent resident of the United States.