DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier: OS-0937-0200/OS-0990-0220]

Agency Information Collection Activities: Proposed Collection; 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 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 Currently Approved Collection;

Title of Information Collection: HHS Payment Management forms; Form/OMB No.: OS-0937-0200;

Use: The PSC–270 is used to request advance or reimbursement payments to grantees. It serves in place of the SF–270. The PSC–272 is used to monitor cash advances made to grantees and the collect disbursement data. It serves in place of the SF–272.

Frequency: On occasion and quarterly;

Affected Public: State, local, or tribal governments, business or other for profit, non for profit institutions;

Annual Number of Respondents: 18.490:

Total Annual Responses: 73,560; Average Burden Per Response: 15 minutes to 3 hours;

Total Annual Hours: 220,980. #2 Type of Information Collection Request: Extension of a currently approved collection;

Title of Information Collection: Voluntary Industry Partner Surveys to Implement E.O. 12862;

Form/OMB No.: OS-0990-0220; Use: DHHS will survey its partners and stakeholders to learn how they feel about departmental services. The information will be used to identify ways to improve the efficiency, quality, timeliness, and cost effective ways to provide services to the public.

Frequency: On occasion;

Affected Public: Business or other for profit, not for profit institutions, State, local, or tribal government;

Annual Number of Respondents: 4,680;

Total Annual Responses: 4680; Average Burden Per Response: 15 hours;

Total Annual Hours: 902.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access the HHS Web site address at http://www.hhs.gov/ oirm/infocollect/pending/ or e-mail your request, including your address, phone number, OMB number, and OS document identifier, to John.Burke@hhs.gov, or call the Reports Clearance Office on (202) 690-8356. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the OS Paperwork Clearance Officer designated at the following address: Department of Health and Human Services, Office of the Secretary, Assistant Secretary for Budget, Technology, and Finance, Office of Information and Resource Management, Attention: John Burke (0937-0200/ 0990-0220), Room 531-H, 200 Independence Avenue, SW., Washington DC 20201.

Dated: October 6, 2003

John P. Burke, III,

Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, HHS.

ACTION: Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) allow the proposed information collection project: "Medical Expenditure Panel Survey—Medical

Provider Component (MEPS–MPC) for 2003" In accordance with the Paperwork Reduction Act of 1995, Public Law 104–13 (44 U.S.C. 3506(e)(2)(A)), AHRQ invites the public to comment on this proposed information collection.

DATES: Comments on this notice must be received by December 15, 2003.

ADDRESSES: Written comments should be submitted to: Cynthia D. McMichael, Reports Clearance Officer, AHRQ, 540 Gaither Road, Room #5022, Rockville, MD 20850.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

FOR FURTHER INFORMATION CONTACT: Cynthia D. McMichael, AHRQ, Reports Clearance Officer, (301) 427–1651.

SUPPLEMENTARY INFORMATION:

Proposed Project

"Medical Expenditure Panel Survey—Medical Provider Components (MEPS—MPC) for 2003".

The MEPS–MPC is a survey of hospitals, physicians and other medical providers. The purpose of this survey is to supplement and verify the information provided by respondent households participating in the household component of the MEPS (MEPS–HC) about their use of medical services in the United States.

With the permission of members of the households surveyed in the MEPSC–HC, AHRQ contractor will contact the medical providers of the HC survey respondents to determine the actual dates of service, the diagnoses, the services provided, the amount that was charged, the amount that was paid and the source of payment. Thus, the MPC is derived from or is based upon the core survey, (MEPS–HC) and will improve the quality of the core survey data.

The Medical Expenditure Panel Survey Household Component (MEPS-HC) conducted in 2003, will provide annual estimates, based upon a national representative sample, of health care use, expenditures, sources of payment and insurance coverage, for the U.S. civilian non-institutionalized population for 2003. Data from medical providers linked to household respondents in the MEPS Household component for calendar year 2003, will be collected beginning 2004 and continuing into the year 2005. MEPS is co-sponsored by the Agency for Healthcare Research and Quality (AHRQ) and the National Center for Health Statistics (NCHS).