Street, NW., Room 4035, Washington, DC 20405, telephone (202) 208–7312. Please cite OMB Control No. 3090–0262, Identification of Products with Environmental Attributes, in all correspondence.

Dated: May 20, 2005.

Julia Wise,

 $\label{eq:Director,Contract Policy Division.} \\ [FR Doc. 05-10610 Filed 5-26-05; 8:45 am]$

BILLING CODE 6820-61-S

GENERAL SERVICES ADMINISTRATION

[OMB Control No. 3090-0027]

General Services Administration Acquisition Regulation; Information Collection; Contract Administration, Quality Assurance (GSAR Parts 542 and 546; GSA Form 1678, DD Form 250, and GSA Form 308)

AGENCY: Office of the Chief Acquisition

Officer, GSA.

ACTION: Notice of request for comments regarding a renewal to an existing OMB clearance.

SUMMARY: Under the provisions of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35), the General Services Administration will be submitting to the Office of Management and Budget (OMB) a request to review and approve a renewal of a currently approved information collection requirement regarding contract administration, and quality assurance. A request for public comments was published at 70 FR 8589, February 22, 2005. No comments were received.

Public comments are particularly invited on: Whether this collection of information is necessary 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.

DATES: Submit comments on or before: June 27, 2005.

FOR FURTHER INFORMATION CONTACT: Ms. Jeritta Parnell, Procurement Analyst, Contract Policy Division, at telephone (202) 501–4082 or via e-mail to jeritta.parnell@gsa.gov.

ADDRESSES: Submit comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Ms. Jeanette Thornton, GSA Desk Officer, OMB, Room 10236, NEOB, Washington, DC 20503, and a copy to the Regulatory Secretariat (VIR), General Services Administration, Room 4035,

1800 F Street, NW., Washington, DC 20405. Please cite OMB Control No. 3090–0027, Contract Administration, Quality Assurance (GSAR Parts 542 and 546; GSA Form 1678, DD Form 250, and GSA Form 308), in all correspondence. SUPPLEMENTARY INFORMATION:

A. Purpose

Under certain contracts, because of reliance on contractor inspection in lieu of Government inspection, GSA's Federal Supply Service (FSS) requires documentation from its contractors to effectively monitor contractor performance and ensure that it will be able to take timely action should that performance be deficient.

B. Annual Reporting Burden

Respondents: 4,604
Total Responses: 116,869
Total Burden Hours: 7,830
Obtaining Copies of Proposals:
Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat (VIR), 1800 F
Street, NW., Room 4035, Washington, DC 20405, telephone (202) 208–7312.
Please cite OMB Control No. 3090–0027, Contract Administration, Quality
Assurance (GSAR Parts 542 and 546;
GSA Form 1678, DD Form 250, and GSA Form 308), in all correspondence.

Dated: May 20, 2005.

Julia Wise,

Director, Contract Policy Division
[FR Doc. 05–10611 Filed 5–26–05; 8:45 am]
BILLING CODE 6820–61–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury
Prevention and Control Special
Emphasis Panel (SEP): Capacity
Building Assistance To Improve the
Delivery and Effectiveness of Human
Immunodeficiency Virus (HIV)
Prevention Interventions for High-Risk
Racial/Ethnic Minority Subpopulations,
Program Announcement 05051

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:

Name: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Capacity Building Assistance to Improve the Delivery and Effectiveness of Human Immunodeficiency Virus (HIV) Prevention Interventions for High-Risk Racial/Ethnic Minority Subpopulations, Program Announcement 05051. Times and Dates: 12 p.m.-5:30 p.m., June 15, 2005 (Closed). 8:30 a.m.-5 p.m., June 16, 2005 (Closed). 8:30 a.m.-5 p.m., June 17, 2005 (Closed).

Place: Westin Hotel at Perimeter North, 7 Concourse Parkway, Atlanta, GA 30328, Telephone Number 770.395.3900.

Status: The meeting will be closed to the public in accordance with provisions set forth in Section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92–463.

Matters to be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to: Capacity Building Assistance to Improve the Delivery and Effectiveness of Human Immunodeficiency Virus (HIV) Prevention Interventions for High-Risk Racial/Ethnic Minority Subpopulations, Program Announcement 05051.

Contact Person for More Information: Beth Wolfe, Designated Federal Official, National Center for HIV, STD, and TB Prevention, CDC, Corporate Square Office Park, 8 Corporate Square Boulevard, Mailstop E07, Atlanta, GA 30329, Telephone (404) 639–8531.

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 CDC and the Agency for Toxic Substances and Disease Registry.

Dated: May 23, 2005.

Alvin Hall,

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

[FR Doc. 05–10644 Filed 5–26–05; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS-10158]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

AGENCY: Center 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), 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.

We are, however, requesting an emergency review of the information collection referenced below. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, we have submitted to the Office of Management and Budget (OMB) the following requirements for emergency review. We are requesting an emergency review because the collection of this information is needed before the expiration of the normal time limits under OMB's regulations at 5 CFR part 1320. This is necessary to ensure compliance with an initiative of the Administration. We cannot reasonably comply with the normal clearance procedures. The use of normal clearance procedures is reasonably likely to cause a statutory deadline to be missed.

This survey will support the required evaluation of the Medicare Home Health Independence Demonstration mandated under Section 702 of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA). Section 702 of the MMA requires the Secretary to collect data on effects of the demonstration on quality of care, patient outcomes, and any additional costs to Medicare. One year after the project's termination (currently projected to be October, 2006), the Secretary is to submit a report including recommendations to exempt permanently and severely disabled homebound beneficiaries from the traditional homebound restrictions. The purpose of this survey is to develop the information Congress seeks, and to provide CMS with a sound basis for making the mandated recommendations. This survey is designed to study the health and quality of life impacts of changing the eligibility requirement, and to provide descriptive information about the demonstration's target population.

CMS is requesting OMB review and approval of this collection by June 27, 2005, with a 180-day approval period. Written comments and recommendation will be accepted from the public if

received by the individuals designated below by June 27, 2005.

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

Interested persons are invited to send comments regarding the burden or any other aspect of these collections of information requirements. However, as noted above, comments on these information collection and recordkeeping requirements must be mailed and/or faxed to the designees referenced below by June 27, 2005:

Centers for Medicare and Medicaid Services, Office of Strategic Operations and Regulatory Affairs, Room C5–13–27, 7500 Security Boulevard, Baltimore, MD 21244– 1850. Fax Number: (410) 786–0262, Attn: William N. Parham, III, CMS– 10158; and,

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

Dated: May 23, 2005.

Michelle Shortt,

Acting Director, Regulations Development Group, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 05–10706 Filed 5–25–05; 9:15 am] BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-3144-N]

RIN 0938-ZA49

Medicare Program; Calendar Year 2005 Review of the Appropriateness of Payment Amounts for New Technology Intraocular Lenses (NTIOLs) Furnished by Ambulatory Surgical Centers (ASCs)

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

ACTION: Notice.

SUMMARY: This notice solicits interested parties to submit requests for review of the appropriateness of the payment amount for a particular intraocular lens

furnished by an ambulatory surgical center.

DATES: Requests for review must be received at the address provided no later than 5 pm E.S.T. on June 27, 2005.

ADDRESSES: Mail requests for review (one original and three copies) to the Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: Michael Lyman, Mailstop C1–09–06, 7500 Security Blvd., Baltimore, Maryland 21244–1850.

FOR FURTHER INFORMATION CONTACT: Michael Lyman, (410) 786–6938.

SUPPLEMENTARY INFORMATION: On October 31, 1994, the Social Security Act Amendments of 1994 (SSAA 1994) (Pub. L. 103–432) were enacted. Section 141(b)(1) of SSAA 1994 required us to develop and implement a process under which interested parties may request a review of the appropriateness of the payment amount for intraocular lenses (IOLs) furnished by ambulatory surgical centers (ASCs) under section 1833(i)(2)(A)(iii) of the Social Security Act (the Act) on the basis that those lenses constitute a class of new technology intraocular lenses (NTIOLs).

On June 16, 1999, we published a final rule in the Federal Register entitled "Adjustment in Payment Amounts for New Technology Intraocular Lenses Furnished by Ambulatory Surgical Centers" (64 FR 32198) which added subpart F to 42 CFR part 416. The June 16, 1999 final rule established a process for adjusting payment amounts for NTIOLs furnished by ambulatory surgical centers (ASCs); defined the terms relevant to the process; and established an initial flat rate payment adjustment of \$50 for IOLs that we determine are NTIOLs. The payment adjustment applies for a 5-year period that begins when we recognize a payment adjustment for the first IOL in a new class of technology, as explained below. Any subsequent IOLs with the same characteristics as the first IOL recognized for a payment adjustment will receive the adjustment for the remainder of the 5-year period established by the first recognized NTIOL. After July 16, 2002, we have the option of changing the \$50 adjustment amount through proposed and final rulemaking in connection with ambulatory surgical center services. We have opted not to change the adjustment amount for calendar year 2005 (CY 05).

Review Process for Establishing Classes of New Technology Intraocular Lenses (NTIOLs)

We will classify an IOL as a NTIOL if the lens meets the definition of a "new