

Discharges—Detailed Notice of Discharge; *Use:* The authority for the right to an expedited determination is set forth at Section 1869(c)(3)(C)(iii)(III) of the Social Security Act. This collection has been revised and now pertains to sections 42 CFR 405.1206 and 42 CFR 422.622. When a Quality Improvement Organization (QIO) notifies a hospital or Medicare Advantage (MA) organization that a beneficiary/enrollee has requested an expedited determination, the hospital or MA organization must deliver a detailed notice to the beneficiary/enrollee by noon of the day after the QIO's notification. In addition, the title has been revised, and the wording of the notice has been revised to more clearly convey the purpose of the notice. This revised notice fulfills the regulatory requirement; *Form Number:* CMS-10066 (OMB#: 0938–New); *Frequency:* Yearly; *Affected Public:* Business or other for-profit and not-for-profit institutions; *Number of Respondents:* 6057; *Total Annual Responses:* 130,000; *Total Annual Hours:* 130,000.

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/PaperworkReductionActof1995>, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to [Paperwork@cms.hhs.gov](mailto:Paperwork@cms.hhs.gov), or call the Reports Clearance Office on (410) 786-1326.

Written comments and recommendations for the proposed information collections must be mailed or faxed within 30 days of this notice directly to the OMB desk officer: OMB Human Resources and Housing Branch, Attention: Carolyn Lovett, New Executive Office Building, Room 10235, Washington, DC 20503, Fax Number: (202) 395-6974.

Dated: March 29, 2007.

**Michelle Shortt,**  
*Director, Regulations Development Group,  
Office of Strategic Operations and Regulatory Affairs.*

[FR Doc. E7-6310 Filed 4-5-07; 8:45 am]

**BILLING CODE 4120-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Substance Abuse and Mental Health Services Administration**

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

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276-1243.

**Proposed Project: National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program: Phase IV—(OMB No. 0930-0257)—Revision**

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center of Mental Health is responsible for the national evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program that will collect data on child mental health outcomes, family life, and service system development and performance.

The national evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program will collect data on child mental health outcomes, family life, and service system development and performance. Data will be collected on 27 service systems, and roughly 5922 children and families. Data collection for this evaluation is conducted over a five-year period. The core of service system data will be collected every 18 months throughout the 5-year evaluation period, with a sustainability survey conducted in selected years. Service delivery and system variables of interest include the following: Maturity of system of care development, adherence to the system of care program model, and client service experience. The length of time that individual families will participate in the study ranges from 18 to 36 months depending

on when they enter the evaluation. Child and family outcomes of interest will be collected at intake and during subsequent follow-up sessions at six-month intervals. The outcome measures include the following: child symptomatology and functioning, family functioning, material resources, and caregiver strain. Time-limited studies addressing the cultural competence of services and the role of primary care providers in systems of care will be conducted at selected points during the evaluation period. Internet-based technology will be used for collecting data via Web-based surveys and for data entry and management. The average annual respondent burden is estimated below for the final three years of data collection. The estimate reflects the average number of respondents in each respondent category, the average number of responses per respondent per year, the average length of time it will take for each response, and the total average annual burden for each category of respondent, and for all categories of respondents combined.

This revision to the currently approved information collection activities includes: (1) The addition of a Primary Care Study and (2) the addition of a Treatment Effectiveness Study. The Primary Care Study seeks to investigate the role of primary health care practitioners (PCPs) in systems of care and to further understand the impact of services provided within primary care on child and family outcomes. One goal of this study is to identify strategies that help primary care and mental health care providers to work together effectively. Another is to identify ways to integrate PCPs into systems of care. The treatment effectiveness study will examine the relative impact of community-based treatments focused within system of care sites. This study will focus on a community-based practice that has not accumulated research evidence, but rather through community-based implementation has accumulated practice-based evidence.

Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours
<b>System of Care Assessment</b>					
Interview Guides and Data Collection Forms .....	Key site informants	1 648	2	1.000	1296
Interagency Collaboration Scale (IACS) .....	Key site informants	648	2	0.133	173
Caregiver Information Questionnaire (CIQ-IC) .....	Caregiver .....	<sup>3</sup> 5,922	1	0.283	1676
Caregiver Information Questionnaire Followup (CIQ-FC) .....	Caregiver .....	5,922	3	0.200	3553

Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours
Caregiver Strain Questionnaire (CGSQ) .....	Caregiver .....	5,922	<sup>5</sup> 4	0.167	3956
Child Behavior Checklist (CBCL)/ Child Behavior Checklist 1½–5 (CBCL 1½–5).	Caregiver .....	5,922	4	0.333	7888
Education Questionnaire—Revised (EQ-R) .....	Caregiver .....	5,922	4	0.100	2369
Living Situations Questionnaire (LSQ) .....	Caregiver .....	5,922	4	0.083	1966
The Family Life Questionnaire (FLQ) .....	Caregiver .....	5,922	4	0.050	1184
Behavioral and Emotional Rating Scale—Second Edition, Parent Rating Scale (BERS-2C).	Caregiver .....	<sup>6</sup> 5,626	4	0.167	3758
Columbia Impairment Scale (CIS) .....	Caregiver .....	5,922	4	0.083	1966
The Vineland Screener (VS) .....	Caregiver .....	<sup>7</sup> 2,369	4	0.250	2369
Delinquency Survey—Revised (DS) .....	Youth .....	<sup>8</sup> 3,553	4	0.167	2374
Behavioral and Emotional Rating Scale—Second Edition, Youth Rating Scale (BERS-2).	Youth .....	3,553	4	0.167	2374
GAIN Quick—R: Substance Problem Scale (GAIN) .....	Youth .....	3,553	4	0.083	1180
Substance Use Survey—Revised (SUS) .....	Youth .....	3,553	4	0.100	1421
Revised Children's Manifest Anxiety Scales (RCMAS) .....	Youth .....	3,553	4	0.050	711
Reynolds Adolescent Depression Scale—Second Edition (RADS-2).	Youth .....	3,553	4	0.050	711
Youth information Questionnaire—Baseline (YIQ-I) .....	Youth .....	3,553	1	0.167	593
Youth information Questionnaire—Follow-up (YIQ-F) .....	Youth .....	3,553	3	0.167	1780
<b>Service Experience Study</b>					
Multi-Sector Service Contacts—Revised (MSSC-RC) .....	Caregiver .....	5,992	<sup>10</sup> 3	0.250	4442
Cultural Competence and Service Provision Questionnaire (CCSP).	Caregiver .....	5,992	3	0.167	2967
Youth Services Survey (YSS-F) .....	Caregiver .....	5,922	3	0.117	2079
Cultural Competence Practices Study (Focus Groups—F) .....	Caregiver .....	36	1	1.500	54
Youth Services Survey (YSS-Y) .....	Youth .....	3,553	4	0.083	1180
Cultural Competence Practices Study (Focus Groups—Y) .....	Youth .....	36	1	1.500	54
Cultural Competence Practices Study (Focus Groups—P) .....	Provider .....	60	1	1.500	90
<b>Treatment Effectiveness Study</b>					
Diagnostic Interview Schedule for Children (DISC—Predictive Scales).	Caregiver .....	262	1	1.000	262
Conflict Behavior Questionnaire (CBQ) .....	Caregiver .....	240	4	.167	160
Family Assessment Measure (FAM) .....	Caregiver .....	240	4	.250	240
Therapeutic Alliance Scale—caregiver (TAS) .....	Caregiver .....	240	3	.167	120
Ohio Scales (caregiver) .....	Caregiver .....	240	4	.250	240
Therapy Adherence Form—Revised .....	Caregiver .....	240	1	.167	40
Therapeutic Alliance Scales—youth (TAS-Y) .....	Youth .....	192	4	.167	128
Ohio Scales—youth .....	Youth .....	192	4	.250	192
Evidence-Based Practices Provider Attitudes Scale .....	Provider .....	50	1	.083	4
<b>Family Education and Support Study</b>					
Beck Depression Inventory (BDI) .....	Caregiver .....	300	3	.117	105
Parenting Sense of Competence Scale (PSOC) .....	Caregiver .....	300	3	.167	150
Alabama Parenting Questionnaire (APQ) .....	Caregiver .....	300	3	.117	105
Duke Social Support Scale .....	Caregiver .....	300	3	.067	60
Vanderbilt Mental Health Services Self-Efficacy Questionnaire.	Caregiver .....	300	3	.050	45
FES—Focus groups .....	Caregiver .....	54	1	1.500	81
FES—Focus groups .....	Provider .....	54	1	1.500	81
FES—Interview .....	Provider/Administrator.	12	1	1.000	12
<b>Primary Care Provider Study</b>					
Primary Care Provider Survey .....	Provider .....	540	1	.500	270
<b>Sustainability Study</b>					
Sustainability Survey—Caregiver .....	Caregiver <sup>12</sup> .....	27	2	0.500	27
Sustainability Survey—Provider .....	Provider/Administrator <sup>12</sup> .	81	2	0.500	81

	Number of distinct respondents	Number of responses per respondent	Average 3-year burden per response (hours)	Total burden (hours)
<b>Summary of Annualized Burden Estimates for 3 Years</b>				
Caregivers .....	5,922	1.13	2.08	13,954
Youth .....	3,553	1.19	1.00	4,220
Provider/Administrators .....	648	.542	1.90	669
<b>Total Summary .....</b>	<b>10,123</b>	<b>.....</b>	<b>.....</b>	<b>18,844</b>
<b>Total Annual Average Summary .....</b>	<b>3,374</b>	<b>.....</b>	<b>.....</b>	<b>6,281</b>

<sup>1</sup> An average of 24 stakeholders in up to 27 grantee sites will complete the System of Care Assessment interview. These stakeholders will include site administrative staff, providers, agency representatives, family representatives, youth and youth coordinators.  
<sup>2</sup> Assuming the average annual income across all types of staff/service providers/administrators is \$40,000, the wage rate was estimated using the following formula: \$40,000 (annual income)/2080 (hours worked per year) = \$19.25 (dollars per hour).  
<sup>3</sup> Number of respondents across 27 grantees. Average based on a 5 percent attrition rate at each data collection point. These data are collected as part of the grantees' routine intake processes. Hence, burden is calculated only for the subset of the Cross-Sectional Descriptive Study sample that also participates in the Child and Family Outcome Study.  
<sup>4</sup> Given that 65 percent of the families in the Phase III evaluation sample fall at or below the 2005 DHHS National Poverty Level of \$19,350 (based on family of four), the wage rate was estimated using the following formula: \$19,350 (annual family income)/2080 (hours worked per year) = 9.30 (dollars per hour).  
<sup>5</sup> Average number of responses per respondent based on 6 data collection points for children recruited in year 3, 4 for children recruited in year 4, 2 for children recruited in year 5 (of grantee funding).  
<sup>6</sup> Estimated number of caregivers with children over age 5, based on Phase IV preliminary needs-assessment that 95 percent of children served will be over age 5.  
<sup>7</sup> Estimated number of caregivers with children under age 12, based on Phase IV preliminary needs-assessment that 40 percent of children served will be under age 12.  
<sup>8</sup> Based on Phase III finding that approximately 60 percent of the children in the evaluation were 11 years old or older.  
<sup>9</sup> Based on the Federal minimum wage rate of \$5.15 per hour.  
<sup>10</sup> Respondents only complete Service Experience Study measures at follow-up points. Average number of follow-up responses per respondent based on 6 follow-up data collection points for children recruited in year 3, 4 for children recruited in year 4, and 2 for children recruited in year 5 (of grantee funding).  
<sup>11</sup> Assuming the average annual income across all types of staff/service providers is \$31,200, the wage rate was estimated using the following formula: \$31,200 (annual income)/2080 (hours worked per year) = \$15.00 (dollars per hour).  
<sup>12</sup> 25 respondents will be caregiver and 75 respondents will be administrators/providers.

Written comments and recommendations concerning the proposed information collection should be sent May 7, 2007 to: SAMHSA Desk Officer, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503; due to potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, respondents are encouraged to submit comments by fax to: 202-395-6974.

Dated: April 3, 2007

**Elaine Parry,**

*Acting Director, Office of Program Services.*

[FR Doc. E7-6481 Filed 4-5-07; 8:45 am]

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**DEPARTMENT OF HOMELAND SECURITY**

**Office of the Secretary**

[Docket Number DHS 2006-0082]

**Privacy Act; Biometric Storage System of Records**

**AGENCY:** Privacy Office, Department of Homeland Security.

**ACTION:** Notice of Privacy Act system of records.

**SUMMARY:** Pursuant to the Privacy Act of 1974, the Department of Homeland Security, U.S. Citizenship and Immigration Services, proposes to add a new system of records to the Department's inventory, entitled Biometric Storage System. This new system will replace the following existing legacy systems, the Image Storage and Retrieval System (ISRS), 64 FR 18052, and portions of the Biometric Benefit Support System (BBSS).

**DATES:** The established system of records will be effective May 7, 2007 unless comments are received that result in a contrary determination.

**ADDRESSES:** You may submit comments, identified by Docket Number DHS 2006-0082 by one of the following methods:

- *Federal e-Rulemaking Portal:* <http://www.regulations.gov>. Follow the instructions for submitting comments.
- Fax: 1-866-466-5370.
- Mail: Hugo Teufel III, Chief Privacy Officer, Department of Homeland Security, Washington, DC 20528.

**FOR FURTHER INFORMATION CONTACT:** For system related questions please contact:

Phyllis Howard, Branch Chief of Application Support for Office of Field Operations, U.S. Citizenship and Immigration Services, Department of Homeland Security, 20 Massachusetts Avenue, NW., Washington, DC 20529. For privacy issues please contact: Hugo Teufel III, Chief Privacy Officer, Privacy Office, U.S. Department of Homeland Security, Washington, DC 20528.

**SUPPLEMENTARY INFORMATION:** The Department of Homeland Security (DHS), U.S. Citizenship and Immigration Services (USCIS) has been tasked by Congress with processing all immigration benefit applications and petitions. Many applications, petitions, and other benefits (hereinafter referred to as "applications") require that fingerprints and other biometrics be captured in order to conduct background checks, to verify the applicant's, petitioner's, or beneficiary's (hereinafter referred to as "applicants") identity, and to produce benefit cards with biometrics and documents. In order to fulfill its statutory mandate, USCIS is establishing a new system of records that will consolidate all biometrics collected by USCIS into one centralized system. This new system of