

Proposed Project: Uncompensated Services Assurance Report (OMB No. 0915-0077)—Extension

Under the Hill-Burton Act, the Government provides grants and loans for construction or renovation of health

care facilities. As a condition of receiving this construction assistance, facilities are required to provide services to persons unable to pay. A condition of receiving this assistance requires facilities to provide assurances

periodically that the required level of uncompensated care is being provided, and that certain notification and record keeping procedures are being followed. These requirements are referred to as the uncompensated services assurance.

ESTIMATE OF INFORMATION COLLECTION BURDEN

Type of requirement and regulatory citation	No. of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Disclosure Burden (42 CFR)					
Published Notices (124.504(c))	206	1	206	0.17	35
Individual Notices (124.504(c))	206	1	206	35.5	7,313
Determinations of Eligibility (124.507)	206	396	81,576	0.37	30,183
Subtotal Disclosure Burden					37,531
Reporting					
Uncompensated Services Report B HRSA-710 Form (124.509(a))	10	1	10	11.0	110
Application for Compliance Alternatives:					
Public Facilities (124.513)	4	1	4	6.0	24
Small Obligation Facilities (124.514(c))	0				
Charitable Facilities (124.516(c))	2	1	2	6.0	12
Annual Certification for Compliance Alternatives:					
Public Facilities (124.509(b))	144	1	144	0.5	72
Charitable Facilities (124.509(b))	28	1	28	0.5	14
Small Obligation Facilities (124.509(c))	1	1	1	0.5	1
Complaint Information (124.511(a)):					
Individuals	10	1	10	0.25	3
Facilities	10	1	10	0.5	5
Subtotal Reporting Burden					241
Recordkeeping			Number of record keepers	Hours per year	Total hour burden
Non-alternative Facilities (124.510(a))			206	50	10,300
Subtotal Recordkeeping Burden					10,300

The total burden for this project is estimated to be 48,072 hours.

Written comments and recommendations concerning the proposed information collection should be sent within 60 days of this notice to: Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Parklawn Building Room 10-33, Health Resources and Services Administration, 5600 Fishers Lane, Rockville, MD 20857.

Dated: October 25, 2005.

Tina M. Cheatham,

Director, Division of Policy Review and Coordination.

[FR Doc. 05-21643 Filed 10-31-05; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; Tobacco Use Supplement to the Current Population Survey Series: 2006-2007 Tobacco Use Supplement to the Current Population Survey

SUMMARY: In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Cancer Institute (NCI), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Proposed Collection

Title: Tobacco Use Supplement to the Current Population Survey Series: 2006-2007 Tobacco Use Supplement to the Current Population Survey.

Type of information request: Reinstatement with Change of OMB #0925-0368, Expiration 01/31/2004.

Need and Use of Information Collection: The 2006-2007 Tobacco Use Supplement to the Current Population Survey conducted by the Census Bureau will collect data from the civilian non-institutionalized population on tobacco use, smoking prevalence and attempts at cessation; workplace smoking policies; health professional advice to stop smoking; and changes in smoking norms and attitudes. This survey will provide invaluable information to government agencies and departments, other scientists and the general public necessary for tobacco control research, as well as measure progress toward

tobacco control as part of the National Cancer Institute's (NCI's) Cancer Progress Report, and the Department of Health and Human Services' Healthy People 2010 Goals. It is also relevant to past reports of NCI plans for the National Investment in Cancer Research and NCI's long-term strategic plan for eliminating the suffering and death due to cancer. This survey is part of a continuing series of surveys that were sponsored by NCI and fielded periodically over the 1990's by the Census Bureau as part of the American Stop Smoking Intervention Study for

Cancer Prevention (ASSIST) project and made available for general public use. The Tobacco Use Supplements since 2001–02 have been fielded and will be continuing over the next decade alternating between a standard or core tobacco use survey (such as this 2006–2007 survey) and a special topic survey focusing on emerging adult tobacco control issues (such as the 2003 Tobacco Use Special Cessation Supplement). The survey will allow state specific estimates to be made. Data will be collected in May 2006, August 2006 and January 2007 from approximately

285,000 respondents. The National Cancer Institute is co-sponsoring this survey with the Centers for Disease Control and Prevention.

Frequency of Response: One-time study.

Affected Public: Individuals or households.

Type of Respondents: Persons 15 years of age or older. The annual reporting burden is presented in exhibit 1 below. There are no Capital Costs, Operating Costs and/or Maintenance Costs to report.

EXHIBIT 1.—ESTIMATES OF RESPONDENT HOUR BURDEN

Number of respondents (number of annual respondents)	Frequency of response	Average burden hours per response	Total hour burden (total annual hour burden)
285,000 (95,000)	1	0.1169	33,317 (11,106)

Request for Comments: Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) enhance the quality, utility and clarity of the information to be collected; and (4) minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Anne Hartman, M.S., M.A., Health Statistician, National Cancer Institute, Executive Plaza North—Suite 4005, 6130 Executive Blvd., MSC 7344, Bethesda, Maryland 20892–7344, or call non-toll free (301) 496–4970, or fax your request to (301) 435–3710, or e-mail your request, including your address, to ah42t@nih.gov or Anne_Hartman@nih.gov.

Comments Due Dates

Comments regarding this information collection are best assured of having

their full effect if received within 60 days of the date of this publication.

Dated: October 25, 2005.

Rachelle Ragland-Greene,
National Institutes of Health, NCI Project Clearance Liaison.

[FR Doc. 05–21645 Filed 10–31–05; 8:45 am]

BILLING CODE 4101–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request; Assessment of the Use of Special Funding for Research on Type 1 Diabetes Provided by the Balanced Budget Act of 1997, the FY 2001 Consolidated Appropriations Act, and the Public Health Service Act Amendment for Diabetes

Summary: Under the provisions of section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the **Federal Register** on March 10, 2005, page 11994 and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, the respondent is not required to respond to, an information collection

that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Proposed Collection

Title: Assessment of the Use of Special Funding for Research on Type 1 Diabetes Provided by the Balanced Budget Act of 1997, and the FY 2001 Consolidated Appropriations Act, and the Public Health Service Act Amendment for Diabetes. *Type of Information Collection Requested:* Revision, OMB control number: 0925–0503; expiration date: 06/30/2005. *Need and Use of Information Collection:* This survey will be one source of input into a statutorily mandated assessment and report to the Congress on special funding for research on type 1 diabetes provided by the Balanced Budget Act of 1997, (Pub. L. 105–33), the FY 2001 Consolidated Appropriations Act, (Pub. L. 106–554), and the Public Health Service Act Amendment for Diabetes, (Pub. L. 107–360). Collectively, these Acts provided \$1.14 billion in special funds to the Department of Health and Human Services (HHS) for research aimed at understanding, treating, and preventing type 1 diabetes and its complications. The Secretary of HHS subsequently designated to the NIDDK the lead responsibility in the Department for developing a process for allocation of these funds. The primary objective of this study is to gain information, via a brief questionnaire, from NIH research grantees who were the primary recipients of these special funds, concerning their views on the impact of the type 1 diabetes research