implementation of the Children's Health Insurance Program. The information provided by these forms is used by CMS to prepare the grant awards to States for the Medicaid and CHIP programs, to ensure that the appropriate level of Federal payments for State expenditures under the Medicaid program and CHIP are made in accordance with the CHIP related Balanced Budget Act legislation provisions, and to track, monitor, and evaluate the numbers of related children being served by the Medicaid and CHIP programs; Form Number: CMS-21 and CMS-21B (OMB# 0938-0731); Frequency: Quarterly; Affected Public: State, Local or Tribal Gov.; Number of Respondents: 56; Total Annual Responses: 448; Total Annual Hours: 7.840.

6. Type of Information Request: Revision of a currently approved collection; Title of Information Collection: Quarterly Medicaid Statement of Expenditures for the Medical Assistance Program; Use: The State Medicaid agencies use the form CMS-64 for the Medical Assistance Program to report their actual program benefit costs and administrative expenses to CMS. CMS uses this information to compute the Federal financial participation for the State's Medicaid Program costs. The structure of the current from CMS-64 has evolved from the previous forms used for reporting and has been revised. Classification, identification, and referencing used in the CMS-64 forms has been in place for several years, is readily understood and accepted by the report users, and is supported by strong sentiments in both CMS and the States to maintain the existing format. Therefore, our modifications have been made to maintain the current reporting format by incorporating all changes into the existing report structure; Form Number: CMS-64 (OMB# 0938-0067); Frequency: Quarterly; Affected Public: State, Local or Tribal Gov.; Number of Respondents: 56; Total Annual Responses: 224; Total Annual Hours:

7. Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Medicare and Medicaid Programs; Use and Reporting OASIS Data as Part of the CoPs for HHAs and Supporting Regulations in 42 CFR 484.11 and 484.20; Form No.: CMS-R-209 (OMB# 0938-0761); Use: HHAs are required to report data from the OASIS as a condition of participation. Specifically, the above named regulation sections provide guidelines for HHAs for the electronic transmission of the OASIS data as well

as responsibilities of the State agency or OASIS contractor in collecting and transmitting this information to CMS. These requirements are necessary to achieve broad-based, measurable improvement, in the quality of care furnished through Federal programs, and to establish a prospective payment system for HHAs; Frequency: Monthly; Affected Public: Business or other-for-profit, Federal Government, State, Local or Tribal Government, Not-for-profit institutions; Number of Respondents: 7,582; Total Annual Responses: 93,621; Total Annual Hours: 921,271.

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.

Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the CMS Paperwork Reduction Act Reports Clearance Officer designated at the address below: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Melissa Musotto, Room C5–14–03, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: January 13, 2005.

Dawn Willinghan,

Acting, CMS Paperwork Reduction Act Reports Clearance Officer, Office of Strategic Operations and Regulatory Affairs, Regulations Development Group.

[FR Doc. 05–1320 Filed 1–24–05; 8:45 am] BILLING CODE 4120–03–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Employment Retention and Advancement (ERA) Evaluation 42-Month Survey.

OMB No.: New Collection.

Description: The Employment
Retention and Advancement (ERA)
Evaluation is sponsored by the
Administration for Children and
Families (ACF) of the U.S. Department

of Health and Human Services (HHS),1 and involves the conduct of a multi-year evaluation that studies the net impact and cost-benefits of programs designed to help Temporary Assistance for Needy Families (TANF) recipients, former TANF recipients or families at risk of needing TANF benefits retain and advance in employment.² The ERA Evaluation involves 15 random assignment experiments in eight states, testing a diverse set of strategies designed to promote stable employment and/or career advancement for lowincome people. The ERA Evaluation will generate rigorous data on the implementation, effects and costs of these alternative approaches. The data collected as part of the 42-month survey will be used for the following purposes:

- To study ERA's long-term impacts on employment, earnings, participation, educational attainment and income;
- To gather data on a wider range of outcome measures than is available through welfare or Unemployment Insurance records in order to understand how individuals were affected by ERA; participation in employment and education activities; educational attainment; employment history; marriage, household composition and child care; housing; household income; household food insecurity; health coverage and status; and child outcomes;
- To build upon data collected as part of the earlier 12-month survey wave;
- To conduct non-experimental analyses, in addition to experimental analyses, and provide a descriptive picture of the circumstances of lowwage workers; and
- To obtain participation information important to the evaluation's costbenefits component.

Respondents: The respondents of the 42-month survey are Temporary Assistance for Needy Families (TANF) applicants, current and former TANF recipients or individuals in families at risk of needing TANF benefits (working poor and hard-to-employ) who are in the research sample in a subset of the 15 programs participating in the ERA Evaluation. Survey participants will be administered a telephone survey approximately 42 months after the date they were enrolled in the research sample and randomly assigned to the treatment or control group. For those individuals who cannot be reached by phone, survey firm staff will attempt to contact them in person. A total of

 $^{^{\}rm 1}{\rm The}$ U.S. Department of Labor has also provided funding to support the ERA project.

² From the Department of Health and Human Services RFP No.: 105–99–8100.

approximately 3,500 participants will

complete the survey over a two-year period (1,750 respondents annually).

ANNUAL BURDEN ESTIMATES

Instrument	Number of espondents	Number of esponses per respondent	Average burden hours per response	Total burden hours
42-Month Survey	1,750	1	45 minutes (or .75 hours)	1,312.5

Estimated Total Annual Burden Hours: 1,312.5.

In compliance with the requirements of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. E-mail address: grjohnson@acf.hhs.gov. All requests should be identified by the title of the information collection.

The Department specifically requests comments on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c)

the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: January 18, 2005.

Robert Sargis,

Reports Clearance Officer. [FR Doc. 05–1297 Filed 1–24–05; 8:45 am] BILLING CODE 4184–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Child Care and Development Fund Tribal Plan (Form ACF-118-A).

ANNUAL BURDEN ESTIMATES

OMB No.: 0970–0198.

Description: The Child Care and Development Fund (CCDF) Tribal Plan serves as the agreement between the applicant (Indian Tribes, Tribal consortia and Tribal organizations) and the Federal Government, and describes how Tribal applicants will operate CCDF Block Grant programs. The Tribal Plan provides assurances that the CCDF funds will be administered in conformance with legislative requirements, Federal regulations at 45 CFR parts 98 and 99 and other applicable instructions or guidelines issued by the Administration for Children and Families (ACF). Tribes must submit a new CCDF Tribal Plan every two years in accordance with 45 CFR 98.17.

Respondents: Tribal CCDF Programs (264 in total).

Instrument	Number of re- spondents	Number of responses per espondent	Average bur- den hours er response	Total urden ours
CCDF Tribal Plan	264 264	1 1	17.5 1.5	4,620 396
Estimated Total Annual Burden Hours				5,016

In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance

Officer. E-mail address: grjohnson@acf.hhs.gov. All requests should be identified by the title of the information collection.

The Department specifically requests comments on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d)

ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: January 18, 2005.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 05–1298 Filed 1–24–05; 8:45 am]

BILLING CODE 4184-01-M