TRANS #	ACQUIRING	ACQUIRED	ENTITIES
20071897	Brockway Moran & Partners Fund III, L.P.	Joseph Gregorio	Pacific Crane Maintenance Company, Inc.
20071898	Red Sky Holdings L.P.	CCS Income Trust	CCS Inc.
20071901	Weston Presidio V, L.P.	Summit Energy Services, Inc.	Summit Energy Services, Inc.
20071908	ev3 Inc	FoxHollow Technologies, Inc.	FoxHollow Technologies, Inc.
20071909	Carlyle Partners V MC, L.P.	Manor Care, Inc.	Manor Care, Inc.
20071911	Fidelity National Financial, Inc.	Fidelity National Information Services, Inc.	Property Insight, LLC.
20071920	CHS Private Equity V LP	American Capital Strategies Ltd.	SAV Holdings Inc. Swank Audio Visuals.
20071927	UST Inc.	Warren and Barbara Winiarski	Rainbowday LLC Stag's Leap Vineyards, L.P. Stag's Leap Wine Cellars.
20071928	Vista Equity Partners Fund III, L.P.	Misys plc	Misys Hospital Systems, Inc.
TRANSACTIONS GRANTED EARLY TERMINATION—08/14/2007			
20071847	Mr. Yiitshak Sharon	Ergon, Inc.	Lion Oil Company.
TRANSACTIONS GRANTED EARLY TERMINATION—08/15/2007			
20071910	TA X L.P	Arnhold and S. Bleichroeder Holdings, Inc.	Arnhold and S. Bleichroeder Holdings, Inc.
TRANSACTIONS GRANTED EARLY TERMINATION—08/16/2007			
20071824	S.A.C. Capital International, Ltd.	WCI Communities, Inc.	WCI Communities, Inc.
TRANSACTIONS GRANTED EARLY TERMINATION—08/17/2007			
20071337	Nuance Communications, Inc.	VoiceSignal Technologies, Inc.	VoiceSignal Technologies, Inc.
20071791	Apax Europe V—A.L.P.	David Martin and Nancy Knowlton.	1329169 Alberta Ltd.
20071926	Market Dining Holding, LLC.	McDonald's Corporation	Boston Market Corporation.
20071975	Steven P. Jobs	Apple Inc.	Apple Inc.

FOR FURTHER INFORMATION CONTACT: Sandra M. Peay, Contact Representative, or Renee Hallman, Contact Representative, Federal Trade Commission, Premerger Notification Office, Bureau of Competition, Room H–303, Washington, DC 20580, (202) 326–3100.

By Direction of the Commission.

Donald S. Clark,

Secretary.

[FR Doc. 07–4150 Filed 8–23–07; 8:45 am]

BILLING CODE 6750–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the National Coordinator for Health Information Technology; Notice of Public Meeting

ACTION: Notice of intent to hold a public meeting to share information on establishing an American Health Information Community Successor.

SUMMARY: On September 5, 2007, the Office of the National Coordinator for Health Information Technology will lead a technical assistance public meeting to share information and answer detailed questions about plans to design and establish a successor to the American Health Information community, including information on the Notice of Funding Availability.

The AHIC is a federally chartered advisory committee that provides input and recommendations to the Department of Health and Human Services (HHS) on how to make health records digital and interoperable, and how to assure that the privacy and security of those records are protected. (Please visit *http://www.hhs.gov/healthit/community/background/* for more information on the AHIC.) The AHIC charter specifies that the AHIC will develop and advance recommendations to the Secretary on a private-sector health information community initiative that will succeed the AHIC. The AHIC successor will bring together public and private, not-for-profit and for-profit entities that represent all sectors of the health community. This new public-private partnership will develop a unified approach to realize an effective, secure, interoperable nationwide health information system that improves the quality, safety, and efficiency of health care in the U.S. For the purposes of facilitating the establishment of the AHIC successor and convening a planning board, HHS will award a Cooperative Agreement that allows for substantial involvement by the Federal government. Once a new legal entity is established and after certain conditions are met, HHS will support that entity through additional funding that will enable initial operations and transition of specific AHIC responsibilities by late Fall 2008.

DATES: September 5, 2007, from 9:30 a.m. to 12 p.m. (EDT); registration opens at 9 a.m.

ADDRESSES: Hubert H. Humphrey building (200 Independence Avenue, SW., Washington, DC 20201), Conference Room 705A.

A link to the Web cast of the public meeting will be available on the AHIC transition Web site at: *http://www.hhs.gov/healthit/community/background/AHICsuccessor.html.*

Instructions will be available on the day of the meeting about how to submit questions or comments via phone or e-mail.

FOR FURTHER INFORMATION CONTACT: Visit *http://www.hhs.gov/healthit/*

community/background/AHICsuccessor.html.

Dated: August 20, 2007.

Judith Sparrow,

Director, American Health Information Community, Office of Programs and Coordination, Office of the National Coordinator for Health Information Technology.

[FR Doc. 07–4151 Filed 8–23–07; 8:45 am]

BILLING CODE 4150–24–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10241, CMS–382, CMS–10247, and CMS–10246]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare & Medicaid Services (CMS) 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:* New Collection.

Title of Information Collection: Annual State Report and Annual State Performance Rankings.

Use: The Deficit Reduction Act of 2005 (DRA) requires CMS to contract with a vendor to conduct a monthly national survey of retail prescription drug prices and to report the prices to the States. These national average prices will be used as a benchmark by the States for the management of their prescription drug programs. The law also requires that States report their drug utilization rates for noninnovator multiple source drugs, their payment rates under their State plan, and their dispensing fees. A template will be used to facilitate data collection. The States' rankings are to be presented to the Congress and the States.

Form Number: CMS–10241 (OMB#: 0938–NEW).

Frequency: Reporting—Yearly.

Affected Public: States, Local or Tribal Governments.

Number of Respondents: 51.

Total Annual Responses: 51.

Total Annual Hours: 765.

2. *Type of Information Collection Request:* Extension without change of a currently approved collection.

Title of Information Collection: ESRD Beneficiary Selection and Supporting Regulations Contained in 42 CFR 414.330.

Use: Section 2145 amended section 1881 of the Social Security Act and changes the way the Medicare program pays for home dialysis services. Medicare patients who currently receive dialysis in a facility but later become home dialysis patients must complete the CMS–382 form at the time they go to the home setting. Facilities are required to have all Medicare home dialysis patients choose one of two payment methods. Under Method I, the dialysis facility assumes responsibility for patient care and the facility provides all dialysis equipment and supplies needed to dialyze at home. The facility is required to order, store, deliver, and pay the manufacturers and suppliers for these items. Under Method II, the beneficiary makes his/her own arrangement for securing the necessary supplies and dialysis equipment. Then, the supplier bills the Medicare program (Carrier) for payment.

Form Number: CMS–382 (OMB#: 0938–0372).

Frequency: Reporting—Yearly.

Affected Public: Individuals or households.

Number of Respondents: 7400.

Total Annual Responses: 7400.

Total Annual Hours: 617.

3. *Type of Information Collection Request:* New collection.

Title of Information Collection: Sponsor application for CMS coverage under the Medicare Clinical Trial Research Policy.

Use: The Centers for Medicare & Medicaid Services (CMS) has supported the participation of beneficiaries in clinical research through its Clinical Trial Policy implemented through the National coverage determination (NCD) process since 2000. Support for participation in clinical research studies is provided through the coverage of items and services that are considered usual patient care. Usual patient care encompasses all items and services covered by the program for any beneficiary, i.e., reasonable and necessary for the diagnosis or treatment of illness or injury to improve the functioning of a malformed body member.

In accordance with the Clinical Trial Policy/Clinical Research Policy (CTP/CRP), CMS requires study sponsors/principal investigators to meet a set of standards to (1) Ensure that all sponsors and investigators conduct clinical research so that Medicare covered items and services are reasonable and necessary to obtain valid research outcomes and for treating research participants, and (2) maximize the health outcomes (and minimize risk) for Medicare beneficiaries.

One of the standards states, ''The clinical research study is registered on the ClinicalTrials.gov Web site by the study sponsor/principal investigator prior to the enrollment of the first study subject.'' In practice, we anticipate that study sponsors/principal investigators wishing to have their research study listed as certified on our Web site, and in the **Federal Register** will register the study on ClinicalTrials.gov and complete a form to CMS describing the scope and nature of the clinical research, discussing each of the standards in this policy, and certifying that all standards in this policy have been met. CMS will only review this form for completeness. We are seeking OMB approval for the form.

Form Number: CMS–10247 (OMB#: 0938–New).

Frequency: Reporting—one-time.

Affected Public: Private Sector—Business or other for-profits and not-for-profit institutions.

Number of Respondents: 4,524.

Total Annual Responses: 4,524.

Total Annual Hours: 4,524.

4. *Type of Information Collection Request:* New collection.

Title of Information Collection: Cost and Resource Utilization (CRU) Data Collection for the Medicare Post Acute Care Payment Reform Demonstration.

Use: The CRU data collection is part of the Post-Acute Care Payment Reform Demonstration mandated by Section 5008 of the Deficit Reduction Act of 2005. This demonstration is intended to address problems with the current Medicare payment systems for post-acute care services, including those for Long Term Care Hospitals, Inpatient Rehabilitation Facilities, Skilled Nursing Facilities, and Home Health Agencies. Each of these four types of providers currently has a separate prospective payment system (PPS) with its own case-mix groups, payment units, and rates. Each case-mix grouper uses a unique set of items to measure patients,