# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Medicare & Medicaid Services

[Document Identifier: CMS-2786]

#### 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: Extension of a currently approved collection; Title of Information Collection: Fire Safety Survey Report Forms and Supporting Regulations in 42 CFR 416.44, 418.100, 482.41, 483.70, and 483.470; Use: These forms are used by the State Agencies to record data collected to determine compliance with individual conditions during fire safety surveys and report it to the Federal Government. Form Number: CMS-2786 M, R, S, T, U, V, W, X, Y (OMB#: 0938–0242; Frequency: Reporting—Annually; Affected Public: State, Local or Tribal Government; Number of Respondents: 27,900; Total Annual Responses: 27,900; Total Annual Hours: 2,325.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web site address at <a href="http://www.cms.hhs.gov/PaperworkReductionActof1995">http://www.cms.hhs.gov/PaperworkReductionActof1995</a>, or email your request, including your address, phone number, OMB number, and CMS document identifier, to <a href="mailto:Paperwork@cms.hhs.gov">Paperwork@cms.hhs.gov</a>, or call the Reports Clearance Office on (410) 786–1326.

To be assured consideration, comments and recommendations for the

proposed information collections must be received at the address below, no later than 5 p.m. on November 14, 2006.

CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development—A, Attention: Melissa Musotto, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: September 8, 2006.

#### Michelle Shortt,

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

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### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Centers for Medicare & Medicaid Services

### Privacy Act of 1974; Report of a Modified or Altered System of Records

**AGENCY:** Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS).

**ACTION:** Notice of a Modified or Altered System of Records (SOR).

SUMMARY: In accordance with the Privacy Act of 1974, we are proposing to modify or alter an existing SOR, "Medicare Appeals System (MAS)," System No. 09-70-5001, last published at 69 Federal Register (FR) 75323 (December 16, 2004). CMS is reorganizing its databases because of the impact of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) (Public Law (Pub.L.) 108-173) provisions and the large volume of information the Agency collects to administer the Medicare program. We propose to assign a new CMS identification number to this system to simplify the obsolete and confusing numbering system originally designed to identify the Bureau, Office, or Center that maintained the system of records. The new assigned identifying number for this system should read: System No. 09-70-0566.

We propose to broaden the scope of this system with the inclusion of support for two additional appeals processes: documenting policies and procedures relating to National Coverage Determinations and Prescription Drug Coverage appeals. These new processes are added to the current appeals process that include appeals of Medicare claims decisions, Administrative Law Judge hearings, and Medicare Advantage service decisions.

We propose to modify existing routine use number 1 that permits disclosure to agency contractors and consultants to include disclosure to CMS grantees who perform a task for the agency. CMS grantees, charged with completing projects or activities that requires CMS data to carry out that activity, are classified separate from CMS contractors and/or consultants. The modified routine use will remain as routine use number 1.

We propose to broaden the scope of routine uses number 5 and 6, authorizing disclosures to combat fraud and abuse in the Medicare and Medicaid programs to include combating "waste" which refers to specific beneficiary/recipient practices that result in unnecessary cost to all federally funded health benefit programs.

We will delete routine use number 4, authorizing disclosure to support constituent requests made to a Congressional representative. If an authorization for the disclosure has been obtained from the data subject, then no routine use is needed. The Privacy Act allows for disclosures with the "prior written consent" of the data subject.

We are modifying the language in the remaining routine uses to provide a proper explanation as to the need for the routine use and to provide clarity to CMS's intention to disclose individual-specific information contained in this system. We will also take the opportunity to update any sections of the system that were affected by the recent reorganization or MMA provisions and to update language in the administrative sections to correspond with language used in other CMS SORs.

The primary purpose of this modified system is to collect and maintain information necessary to: (1) Process level two and level three appeal requests made by an appellant or appealing party; (2) track appeal data, including: status, type, history, timeliness, and decisions; and (3) respond to future correspondence related to the case. The information retrieved from this system of records will also be disclosed to: (1) Support regulatory and policy functions performed within the agency or by a contractor, consultant, or grantee; (2) another Federal agency; (3) assist Quality Improvement Organizations; (4) support litigation involving the agency; and (5) combat fraud, waste, and abuse. We have provided background information about the modified system in the SUPPLEMENTARY INFORMATION section below. Although the Privacy Act