take place in the context of HRSA's quality initiative. As such, HRSA's goal is not simply to collect data; it is also important that the data be used to track individual and population health outcomes and improve patient care. The long-term vision of HRSA and OHIT is to transform systems of care for safetynet populations through the effective use of HIT. HIT is an important tool in measuring and improving patient care. For example, the data available in EHRs can be used to better manage the treatment of chronic diseases, inform clinical and operational processes, and target community-oriented primary care resources. As the lessons of the HRSA Health Disparities Collaborative have shown, collecting and using data to drive system change is a fundamental part of improving patient care and related health outcomes.

#### **Goals for OHIT Network Activities**

Given that the HCCN grants are administered by OHIT and that they have a proven track record in promoting HIT adoption, OHIT is considering possible ways to modify the HCCN grant program to further promote effective adoption and implementation of HIT initiatives, including EHRs, which result in improved quality of care and patient outcomes. HRSA plans to utilize the authorities cited above to fund HCCNs. Although only entities receiving section 330 funding are eligible to be the applicant/lead grantee, an HCCN may include organizations in addition to section 330 grantees that are community based and have similar goals and missions such as Federally Qualified Health Center Look-A likes, locally funded clinics, etc.

The purpose of developing and implementing new strategies and changing the direction of HRSA's network activities is to take the lessons learned from the previous HRSA grant programs, continue to build on these successes, and create more network solutions for promoting HIT adoption by 330 grantees and other safety-net providers. HRSA is considering restructuring the HCCN grant program to focus solely on projects that promote HIT adoption. These HIT-focused projects could be funded in two phases: (1) Planning and implementation and (2) innovation and sustainability. This possible move to an HIT-focused grant program would advance the President's goals related to HIT and the adoption of EHRs. The intent would be to fund HITfocused projects that will result in improvements in patient outcomes and quality. To be considered successful, these HIT initiatives must result in measurable increases in EHR adoption

by health centers, and in clinical and operational improvements in quality and patient health outcomes.

#### **Request for Comments**

The Office of Health Information
Technology is requesting comments on
the future direction of investments and
strategy in HIT using the HCCN model.
Respondents should take into account
the likelihood that HRSA programs may
not grow substantially in the near future
and that we may face budget limitations.
The following areas provide guidance
for the type of feedback we are
requesting:

- 1. Challenges and opportunities in restructuring the HCCN grant program. Other approaches to consider in promoting quality of care and improvements in patient outcomes through HIT adoption for minority and underserved populations.
- 2. Key considerations that should be taken into account when designing the new funding opportunities to reach the ultimate goal of using HIT via the HCCN approach to increase EHR adoption and to improve quality of care and health outcomes.
- 3. Types of HIT investments, other than EHRs, that HRSA should consider investing in, to improve quality of care and health outcomes.
- 4. Benefits of funding networks to provide HIT support to health centers and other safety net providers. Types of incentives, if any, to encourage health centers, and other HRSA grantees to join networks.
- 5. Capacity needed for a network to promote HIT among a group of health centers and other HRSA grantees, such as number of health centers and/or number of patients included.
- 6. If and/or how HRSA should consider retaining the HCCN administrative, financial and clinical core services in the proposed funding opportunities as they relate to promoting HIT adoption?
- 7. Model practices in other parts of the safety net or private industry to build key HIT capacities in underresourced environments.
- 8. Quality and safety issues that could be addressed with the appropriate use of HIT in the safety net organizations.
- 9. The role of Telehealth in the overall HIT strategy.
- 10. Linking quality of care and improvement of patient outcomes to these strategies to ensure that the ultimate goal of improving care is met.
- 11. Performance measures (process and/or outcome) to indicate progress/success of HRSA-funded HIT initiatives.

12. Expectations for networks around sustainability, including long-term sources of funding.

13. Collaboration between Primary Care Associations (PCAs) and HCCNs in the adoption of effective HIT by safetynet providers and the use of HIT to improve quality and patient outcomes.

14. Approaches to include State Medicaid agencies, public health departments, other HRSA grantees, and other providers and stakeholders in HIT adoption. Approaches to a coordinated approach in a State or community for health information technology/exchange use and support.

15. Any other comments related to OHIT's policy direction related to networks and the use of HIT to expand EHR adoption and improve quality and patient outcomes.

Collection. All comments will become a matter of public record.

Dated: September 7, 2006.

#### Elizabeth M. Duke,

Administrator.

[FR Doc. E6–15489 Filed 9–18–06; 8:45 am]

### BILLING CODE 4165-15-P

## DEPARTMENT OF HOMELAND SECURITY

#### **Coast Guard**

[USCG-2006-25800]

Collection of Information Under Review by Office of Management and Budget: OMB Control Number 1625– 0012

**AGENCY:** Coast Guard, DHS. **ACTION:** Request for comments.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, the U.S. Coast Guard intends to submit an Information Collection Request (ICR) to the Office of Management and Budget (OMB) to request a revision for the following collection of information: 1625–0012, Certificate of Discharge to Merchant Mariners. Before submitting the ICR to OMB, the Coast Guard is inviting comments on it as described below.

**DATES:** Comments must reach the Coast Guard on or before November 20, 2006.

**ADDRESSES:** To make sure that your comments and related material do not enter the docket [USCG-2006-25800] more than once, please submit them by only one of the following means:

(1) By mail to the Docket Management Facility, U.S. Department of Transportation (DOT), room PL-401, 400 Seventh Street, SW., Washington, DC 20590-0001.

- (2) By delivery to room PL-401 on the Plaza level of the Nassif Building, 400 Seventh Street, SW., Washington, DC, between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays. The telephone number is 202–366–9329
- (3) By fax to the Docket Management Facility at 202–493–2251.
- (4) Electronically through the Web Site for the Docket Management System at http://dms.dot.gov.

The Docket Management Facility maintains the public docket for this notice. Comments and material received from the public, as well as documents mentioned in this notice as being available in the docket, will become part of this docket and will be available for inspection or copying at room PL–401 on the Plaza level of the Nassif Building, 400 Seventh Street, SW., Washington, DC, between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays. You may also find this docket on the Internet at http://dms.dot.gov.

Copies of the complete ICR are available through this docket on the Internet at http://dms.dot.gov, and also from Commandant (CG–611), U.S. Coast Guard Headquarters, room 6106 (Attn: Ms. Barbara Davis), 2100 2nd Street, SW., Washington, DC 20593–0001. The telephone number is 202–475–3523.

FOR FURTHER INFORMATION CONTACT: Ms. Barbara Davis, Office of Information Management, telephone 202–475–3523, or fax 202–475–3929, for questions on these documents; or telephone Ms. Renee V. Wright, Program Manager, Docket Operations, 202–493–0402, for questions on the docket.

#### SUPPLEMENTARY INFORMATION:

#### Public Participation and Request for Comments

We encourage you to respond to this request for comments by submitting comments and related materials. We will post all comments received, without change, to <a href="http://dms.dot.gov">http://dms.dot.gov</a>; they will include any personal information you have provided. We have an agreement with DOT to use the Docket Management Facility. Please see the paragraph on DOT's "Privacy Act Policy" below.

Submitting comments: If you submit a comment, please include your name and address, identify the docket number [USCG-2006-25800], indicate the specific section of the document to which each comment applies, and give the reason for each comment. You may submit your comments and material by electronic means, mail, fax, or delivery to the Docket Management Facility at the address under ADDRESSES; but

please submit them by only one means. If you submit them by mail or delivery, submit them in an unbound format, no larger than 8½ by 11 inches, suitable for copying and electronic filing. If you submit them by mail and would like to know that they reached the Facility, please enclose a stamped, self-addressed postcard or envelope. We will consider all comments and material received during the comment period. We may change the documents supporting this collection of information or even the underlying requirements in view of them.

Viewing comments and documents: To view comments, as well as documents mentioned in this notice as being available in the docket, go to http://dms.dot.gov at any time and conduct a simple search using the docket number. You may also visit the Docket Management Facility in room PL-401 on the Plaza level of the Nassif Building, 400 Seventh Street, SW., Washington, DC, between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays.

Privacy Act: Anyone can search the electronic form of all comments received in dockets by the name of the individual submitting the comment (or signing the comment, if submitted on behalf of an association, business, labor union, etc.). You may review the Privacy Act Statement of DOT in the Federal Register published on April 11, 2000 (65 FR 19477), or you may visit http://dms.dot.gov.

#### **Information Collection Request**

*Title:* Certificate of Discharge to Merchant Mariners.

OMB Control Number: 1625-0012. Summary: Under 46, U. S. C. 10311, the Coast Guard prescribes the form of the Certificate of Discharge for Merchant Mariners. The Certificate provides merchant mariners with evidence of sea service to determine eligibility for various benefits, such as medical and retirement. The information collected is also used to show eligibility for an original, renewed, upgraded license or merchant mariner document, to develop maritime sea service statistics, and to provide information to the U.S. Maritime Administration (MARAD) on the availability of mariners in a time of national emergency. The Coast Guard's Sea Service database captures the information from the Certificates of Discharge and is used by the Coast **Guard's Regional Examination Centers** to evaluate the qualifications of mariners who apply for originals, renewals, upgrades to their license or merchant mariners documents. The information from the database is

compiled annually by MARAD to prepare Congressionally mandated reports on mariner availability. Currently, the CG Form 718A is only available in booklet format utilizing carbon copies. The Coast Guard is revising this form so that it may be provided to the maritime community for downloading via the internet. The new version still requires vessel master and discharged mariner signatures. This effort is intended to alleviate issues regarding form availability.

Need: The information is used primarily, on an as-needed basis, by mariners and the Coast Guard to establish sea service time and qualifications for issuing original, renewals or upgraded merchant mariner credentials; in claims against employers; in medical claims; and in qualifying for retirement benefits or insurance benefits.

Respondents: Masters or mates of shipping companies and merchant mariners.

Frequency: On occasion.

Burden Estimate: The estimated
burden has decreased from 4,500 hours
to 1,800 hours a year.

Dated: September 13, 2006.

#### R. T. Hewitt,

Rear Admiral, U.S. Coast Guard, Assistant Commandant for Command, Control, Communications, Computers and Information Technology.

[FR Doc. E6–15494 Filed 9–18–06; 8:45 am] BILLING CODE 4910–15–P

# DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4922-N-21]

Privacy Act of 1974; Amendment to Existing Privacy Act Systems, Employee Identification Files, HUD/ Dept-71

**AGENCY:** Office of the Chief Information Officer, HUD.

**ACTION:** Notification of an amendment to an existing System of Records, Employee Identification Files, HUD/Dept-71.

SUMMARY: HUD is completely revising HUD/Dept-71 to implement Homeland Security Presidential Direction 12 (HSPD-12) policy for a common identification standard for Federal employees and contractors. All of the sections including the system name are revised to reflect the current information requirements for individuals and contractors who require ongoing access to HUD's facilities and information technology systems.