standards) in order to be certified by HHS; *Frequency*: Other: As needed; *Affected Public*: Business or other forprofit, not-for-profit institutions, Federal government, State, local or tribal gov't; *Number of Respondents*: 82,220; *Total Annual Responses*: 111,354,920; *Total Annual Hours Requested*: 9,887,917.

3. Type of Information Collection *Request:* Revision of a currently approved collection; Title of Information Collection: Home Health Agency Cost Report and Supporting Regulations in 42 CFR 413.20, 413.24 and 413.106; Form No.: CMS-1728 (OMB# 0938-0022); Use: Participating providers are required to submit annual information to CMS in order to achieve settlement of costs for health care services rendered to Medicare beneficiaries. The CMS-1728 is the form used by Home Health Agencies to report their health care costs to determine the amount reimbursable for services furnished to Medicare beneficiaries Frequency: Annually; Affected Public: Business or other for profit, not for profit institutions, and State, Local or Tribal Gov.; Number of Respondents: 7,310; Total Annual Responses: 7,310; Total Annual Hours Requested: 1,311,060.

4. Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Skilled Nursing Facility Cost Report and Supporting Regulations in 42 CFR 413.20, 413.24 and 413.106; Form No.: CMS-2540-96 (OMB 0938-0463); Use: Form CMS-2540–96 is the form used by skilled nursing facilities participating in the Medicare program. This form reports the health care costs used to determine the amount of reimbursable costs for services rendered to Medicare beneficiaries; Frequency: Annually; Affected Public: Businesses or other forprofit; not-for-profit institutions and State, Local or Tribal Government; Number of Respondents: 13,000; Total Annual Responses: 13,000; Total Annual Hours: 2,480,000.

5. Type of Information Collection Request: New Collection; Title of Information Collection: 1–800–Medicare Beneficiary Satisfaction Survey; Form No.: CMS-10098 (OMB# 0938-NEW); Use: The Beneficiary Satisfaction survey is performed to insure that the CMS 1– 800–Medicare helpline contractor is delivering satisfactory service to the Medicare beneficiaries. It gathers data on several helpline operations such as print fulfillment and website tools hosted on http://www.medicare.gov. Respondents to the survey are Medicare beneficiaries that have contacted the 1-800–Medicare number within the past

week for benefits and services information.; *Frequency:* On occasion; *Affected Public:* Individuals or households; *Number of Respondents:* 14,400; *Total Annual Responses:* 14,400; *Total Annual Hours:* 1,800.

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://cms.hhs.gov/ *regulations/pra/default.asp*, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB desk officer: OMB Human Resources and Housing Branch, Attention: Brenda Aguilar, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: February 5, 2004.

John P. Burke, III,

Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, Office of Strategic Operations and Strategic Affairs, Division of Regulations Development and Issuances. [FR Doc. 04–3160 Filed 2–12–04; 8:45 am] BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS–R–235, CMS– 179, CMS–265]

Agency Information Collection Activities: Proposed Collection; Comment Request

Agency: Centers for Medicare and 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 and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration (HCFA)), Department of Health and Human Services, 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: Data Use Agreement Information Collection Requirements, model language, and supporting regulations in 45 CFR Section 5b.; Form No.: CMS-R-235 (OMB# 0938-0734); Use: Binding agreement stating conditions under which CMS will disclose and user will maintain CMS data that are protected by the Privacy Act.; Frequency: On occasion; Affected Public: Not-for-profit institutions; Number of Respondents: 1,500; Total Annual Responses: 1,500; Total Annual Hours: 750.

2. Type of Information Request: Extension of a currently approved collection; Title of Information Collection: Transmittal and Notice of Approval of State Plan Material and Supporting Regulations in 42 CFR 430.10-430.20 and 440.167; Form Number: CMS-179 (OMB approval #: 0938–0193); Use: Form CMS–179 is used by State agencies to transmit State plan material to CMS for approval prior to amending their State plans; Frequency: On occasion; Affected Public: State, local or tribal gov't; Number of Respondents: 56; Total Annual Responses: 56; Total Annual Hours Requested: 560.

3. Type of Information Collection *Request:* Extension of a currently approved collection; Title of Information Collection: Independent Renal Dialysis Facility Cost Report Form and Supporting Regulations in 42 CFR 413.20, 413.24; Form No.: CMS-265 (OMB# 0938-0236); Use: The Medicare Independent Renal Dialysis Facility Cost Report provides for determinations and allocation of costs to the components of the Renal Dialysis facility in order to establish a proper basis for Medicare payment; *Frequency*: Annually; *Affected Public:* Business or other for-profit, not-for-profit institutions, and State, Local, or Tribal Government; Number of Respondents: 3,592; Total Annual Responses: 3,592; Total Annual Hours: 704,032.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web site address at *http://cms.hhs.gov/ regulations/pra/default.asp*, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to *Paperwork@hcfa.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 Clearance Officer designated at the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of **Regulations** Development and Issuances, Attention: Melissa Musotto, Room C5-14-03, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: February 5, 2004.

John P. Burke, III,

Paperwork Reduction Act Team Leader, Office of Strategic Operations and Strategic Affairs, Division of Regulations Development and Issuances.

[FR Doc. 04-3161 Filed 2-12-04; 8:45 am] BILLING CODE 4120-03-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Mentoring Children of Prisoners Program: quarterly caseload data collection.

OMB No.: New collection.

Description: The Promoting Safe and Stable Families Amendments of 2001 (Pub. L. 107-133) amend Title IV-B of the Social Security Act (42 U.S.C. 629-629e) to provide funding for nonprofit agencies that recruit, screen, train, and support mentors for children with an incarcerated parent or parents. The mentoring program is administered by the Family and Youth Services Bureau (FYSB) of the Administration for

Children and Families in the Department of Health and Human Services. Pursuant to annual performance planning and reporting requirements placed upon Federal agencies by the Government Performance and Results Act, and in order to maintain oversight and exercise proper stewardship of taxpayer-funded programs, FYSB must regularly collect information on operations, outputs, and outcomes of the mentoring program. Moreover, Subpart 2, Section 439(g) of the Act directs the Secretary of Health and Human Services to conduct an evaluation of this mentoring program and submit a report to Congress on the findings.

Respondents: Private, communitybased nonprofit and faith-based organizations receiving HHS funds for programs providing mentoring services to children with incarcerated parents.

Instrument	Number of respondents	Number of responses per respondent	Average bur- den hours per response	Total burden hours
Quarterly Caseload Form	250	4	16	16000

Estimated Total Annual Burden Hours: 16000.

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: rsargis@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: February 9, 2004.

Robert Sargis,

Reports Clearance, Officer.

[FR Doc. 04-3208 Filed 2-12-04; 8:45 am] BILLING CODE 4184-01-M

DEPARTMENT OF HEALTH AND **HUMAN SERVICES**

Administration for Children and Families

Submission for OMB Review; **Comment Request**

Title: Head Start Impact Study. OMB No.: 0970-0229.

Description: The Administration on Children, Youth and Families (ACYF), Administration for Children and Families (ACF) of the Department of Health and Human Services (HHS) is requesting comments on plans to conduct the Head Start Impact Study. This study is being conducted under contract with Westat, Inc. (with the Urban Institute, American Institutes for Research, and Decision Information Resources as their subcontractors) (#282-00-0022) to collect information for determining, on a national basis,

how Head Start affects the school readiness of children participating in the program as compared to children not enrolled in Head Start and to determine under which conditions Head Start works best and for which children.

The Head Start Impact Study is a longitudinal study that will involve approximately 5,000 first-time enrolled three- and four-year old preschool children across an estimated 90 nationally representative grantee/ delegate agencies (in communities where there are more eligible children and families than can be served by the program). Data collection for the fullscale study began in fall 2002 and extends through spring 2006 with child assessments conducted in the fall and spring of the Head Start years and in the spring of the kindergarten and first grade years, and parent interviews conducted in the fall and spring of each year. Interviews/surveys with program staff/care providers, and quality of care assessments will be conducted in the spring of each year. This schedule of data collection is necessitated by the mandate in Head Start's 1998 reauthorization (Coats Human Services Amendments of 1998, PL 105-285) that HHS conduct research to determine, on a national level, the impact of Head Start on the children it serves.

A field test of instruments and procedures was conducted during fall