Continuous Process Improvement, IV&V/Compliance, and Security Planning. Further analysis will consist of expert advice and guidance in the areas of program and project management focused on increasing the effectiveness and efficiency of strategic information management, prototyping, demonstrations, and technical activities. This FFRDC may also be utilized by non-sponsors, other than CMS, within DHHS.

The FFRDC will be established under the authority of 48 CFR 35.017.

The Contractor will be available to provide a wide range of support including, but not limited to:

- Strategic/Tactical Planning, including assisting with planning for future CMS program policy, innovation, development, and support for Medicare and Medicaid.
- Conceptual Planning, including operations, analysis, requirements, procedures, and analytic support.
- Design and Engineering, including Technical Architecture Direction.
- Procurement Assistance, Review/Recommendations for Current Contract Processes to include, Contract Reform, Technical Guidance, Price and Cost Estimating, Support and Source Selection Evaluation Support.
- Organizational Planning, including Functional and Gap analysis.
- Research and Development, Assessment of New Technologies and advice on medical and technical innovation and health information.
- Continuous Process Improvement, ILC/current practices review and recommendations, implementation of best practices and code reviews.
- IV&V/Compliance, DUA Surveillance and Web Site Content Review.
- Security, including Security Assessments and Security Test and Evaluations (ST&E). Identify, define, and resolve problems as an integral part of the sponsor's management team.
- Providing independent analysis about DHHS vulnerabilities and the effectiveness of systems deployed to make DHHS more effective in providing healthcare services and implementation of new healthcare initiatives;
- Providing intra-departmental and inter-agency cross-cutting, risk-informed analysis of alternative resource approaches;
- Developing and deploying analytical tools and techniques to evaluate system alternatives (for example, policy-operations-technology tradeoffs, etc.), and life-cycle costs that have broad application across CMS;
- Developing measurable performance metrics, models, and simulations for determining progress in securing DHHS data or other authorized data sources, (non-DHHS data sources, such as the census data or DOL data, VA, DOD, data in developing performance metrics, and models);
- Providing independent and objective operational test and evaluation analysis support;
- Developing recommendations for guidance on the best practices for standards, particularly to improve the inter-operability of DHHS components;
- Assessing technologies and evaluating technology test-beds for accurate simulation of operational conditions and delivery system innovation models;
- Supporting critical thinking about the DHHS enterprise, business intelligence and analytic tools that can be applied consistently across DHHS and CMS programs;
- Supporting systems integration, data management, and data exchange that contribute to a larger DHHS intra and inter-agency enterprise as well as collaboration with State, local Tribal governments, the business sector (for-profit and not-for-profits), academia and the public;
- Providing recommendations for standards for top-level DHHS systems requirements and performance metrics best practices for an integrated DHHS approach to systems solutions and structured and unstructured data architecture; and
- Understanding key DHHS organizations and their specific role and major acquisition requirements and support them in the requirements development phase of the acquisition lifecycle.
- The FFRDC shall function so effectively as to act as an agent for the sponsor in the design and pursuit of mission goals.
- The FFRDC shall provide rapid responsiveness to changing requirements for personnel in all aspects of strategic, technical and program management.
- The FFRDC shall recognize Government objectives as its own objectives, partnering with the sponsor in pursuit of excellence in public service.
- The FFRDC shall allow for non-sponsor, other than CMS, work for operating Divisions within DHHS.

We are publishing this notice in accordance with 48 CFR 5.205(b) of the Federal Acquisition Regulations (FAR), to enable interested members of the public to provide comments on this proposed action. This is the first of three notices issued under the authority of 48 CFR 5.205(b).

The Request for Proposal (RFP) will be posted on FedBizOpps in the Summer of 2011. Alternatively, a copy can be received by contacting the person listed in the **FOR FURTHER INFORMATION CONTACT** section above.

Dated: April 7, 2011.

Donald M. Berwick,

Administrator, Centers for Medicare & Medicaid Services.

[FR Doc. 2011–8942 Filed 4–12–11; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Tribal Consultation Meetings

AGENCY: Administration for Children and Families' Office of Head Start (OHS), HHS.

ACTION: Notice.

SUMMARY: Pursuant to the Improving Head Start for School Readiness Act of 2007, Public Law 110–134, notice is hereby given of one-day Tribal Consultation Sessions to be held between the Department of Health and Human Services, Administration for Children and Families, Office of Head Start leadership and the leadership of Tribal Governments operating Head Start (including Early Head Start) programs. The purpose of these Consultation Sessions is to discuss ways to better meet the needs of American Indian and Alaska Native children and their families, taking into consideration funding allocations, distribution formulas, and other issues affecting the delivery of Head Start services in their geographic locations [42 U.S.C. 9835, Section 640(l)(4)].

DATES AND LOCATIONS: Office of Head Start Tribal Consultation Sessions will be held as follows:

Friday, April 29, 2011—Albuquerque, New Mexico—Indian Pueblo Cultural Center, 2401 12th Street, NW., Albuquerque NM 87104.

Thursday, May 19, 2011—Marksville, Louisiana—Paragon Casino Resort, 6773 East Tunica Drive, Marksville, LA 71351.

FOR FURTHER INFORMATION CONTACT: Camille Loya, Tribal Policy Lead, e-mail *Camille.Loya@acf.hhs.gov* or phone (202) 401–5964. Additional information and online meeting registration is available at *http://www.headstartresourcecenter.org.*

SUPPLEMENTARY INFORMATION: The Department of Health and Human

Services announces OHS Tribal Consultations for leaders of Tribal Governments operating Head Start and Early Head Start programs in Regions I, II, IV, and VI. The Consultation Session for Region VI will take place Friday, April 29, 2011, at the Indian Pueblo Cultural Center in Albuquerque, New Mexico, immediately following the Department of Health and Human Services Regional Consultations session. The Consultation Session for Regions I, II, and IV will take place Thursday, May 19, 2011, at the Paragon Casino Resort in Marksville, Louisiana, immediately following the United South and Eastern Tribes, Inc. 2011 Semi-annual Meeting. We are convening the OHS Tribal Consultations in conjunction with other Tribal Leader events in order to minimize the financial and travel burden for participants.

The agendas for both scheduled OHS Tribal Consultations will be organized around the statutory purposes of Head Start Tribal Consultations related to meeting the needs of American Indian and Alaska Native children and families, taking into consideration funding allocations, distribution formulas, and other issues affecting the delivery of Head Start services in their geographic locations. In addition, OHS will share actions taken and in progress to address the issues and concerns raised in 2010 OHS Tribal Consultations.

Tribal leaders and designated representatives interested in submitting written testimony or proposing specific agenda topics for the Albuquerque or Marksville Consultation Sessions should contact Camille Loya at *Camille.Loya@acf.hhs.gov* at least three days in advance of the Session. Proposals should include a brief description of the topic area along with the name and contact information of the suggested presenter.

The Consultation Sessions will be conducted with elected or appointed leaders of Tribal Governments and their designated representatives [42 U.S.C.9835, Section 640(l)(4)(A)]. Designees must have a letter from the Tribal Government authorizing them to represent the Tribe. The letter should be submitted at least three days in advance of the Consultation Session to Camille Loya at (202) 205–9721 (fax). Other representatives of Tribal organizations and Native nonprofit organizations are welcome to attend as observers.

A detailed report of each Consultation Session will be prepared and made available within 90 days of the Consultation Session to all Tribal Governments receiving funds for Head Start and Early Head Start programs. Tribes wishing to submit written testimony for the report should send testimony to Camille Loya at *Camille.Loya@acf.hhs.gov* either prior to the Consultation Session or within 30 days after the meeting.

Oral testimony and comments from the Consultation Session will be summarized in the report without attribution, along with topics of concern and recommendations. Hotel and logistical information for all Consultation Sessions has been sent to Tribal leaders via e-mail and posted on the Head Start Resource Center Web site at *http://www.headstartresourcecenter.org.*

Dated: April 6, 2011.

Ann Linehan,

Deputy Director, Office of Head Start.

[FR Doc. 2011–8999 Filed 4–12–11; 8:45 am]

BILLING CODE 4184–40–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2011–N–0221]

Agency Information Collection Activities; Proposed Collection; Comment Request; Experimental Study on Consumer Responses to Labeling Statements on Food Packages

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing an opportunity for public comment on the proposed collection of certain information by the Agency. Under the Paperwork Reduction Act of 1995 (the PRA), Federal Agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information and to allow 60 days for public comment in response to the notice. This notice solicits comments on a study entitled "Experimental Study on Consumer Responses to Labeling Statements on Food Packages."

DATES: Submit either electronic or written comments on the collection of information by June 13, 2011.

ADDRESSES: Submit electronic comments on the collection of information to *http://www.regulations.gov.* Submit written comments on the collection of information to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number found in brackets in the heading of this document.

FOR FURTHER INFORMATION CONTACT: Denver Presley, Office of Information Management, Food and Drug Administration, 1350 Piccard Dr., PI50–400B, Rockville, MD 20850, 301–796–3793.

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501–3520), Federal Agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. "Collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes Agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal Agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information before submitting the collection to OMB for approval. To comply with this requirement, FDA is publishing notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, FDA invites comments on these topics: (1) Whether the proposed collection of information is necessary for the proper performance of FDA's functions, including whether the information will have practical utility; (2) the accuracy of FDA's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques, when appropriate, and other forms of information technology.

Experimental Study on Consumer Responses to Labeling Statements on Food Packages; 21 U.S.C. 393(d)(2)(C)—(OMB 0910–NEW)

I. Background

The Nutrition Labeling and Education Act requires almost all packaged foods to bear nutrition labeling in the form of the Nutrition Facts label. The law also allows manufacturers to provide other nutrition information on labels in the form of various types of statements, including claims, as long as such statements comply with the regulatory limits that govern the use of each type of statement. There are three types of