

any new collection of information from end users. If a Federal agency chooses to create or modify a records system to maintain information expressed in the SAML assertion, it must establish or amend a system of records (SOR) notice through publication in the **Federal Register**. Federal agencies that serve as CSPs or AAs may choose to maintain audit logs for browser-based access; such logs may include transaction data associated with the SAML assertion. Such audit logs are used to monitor browser access and are not considered systems of records requiring coverage under the Privacy Act.

Once the identity information is known to the AA, the user interacts directly with the AA for business transactions. While the E-Authentication Service Component addresses the need for common infrastructure for authenticating end users to applications, authorization privileges at the application are beyond the scope of the E-Authentication initiative. Authorization and related functionality such as access control and privilege management are left to the application owners.

Ensuring trust between the participating entities of the E-Authentication Federation (AAs, CSPs and End users) is core to the mission of the E-Authentication initiative. The E-Authentication Service Component provides:

- Policies and guidelines for Federal authentication;
- Credential assessments and authorizations;
- Technical architecture and documents, including Interface Specifications, for communications within the E-Authentication Federation Network;
- Interoperability testing of candidate products, schemes or protocols;
- Business rules for operating within the Federation; and
- Management and control of accepted federation schemes operating within the environment.

The E-Authentication Service Component technical approach has two different architectural techniques, assertion-based authentication and certificate-based authentication. PIN and Password authentications typically use assertion-based authentication, where users authenticate to the selected CSP, which in turn asserts their identity to the AA. Certificate-based authentication relies on X.509v3 digital certificates in a Public Key Infrastructure (PKI) for authentication, and can be used at any assurance level. PKI credentials offer considerable advantages for authentication.

Certificates can be validated using only public information. Standards for PKI are also more mature than other authentication technologies and more widely used than the emerging standards for assertion-based authentication of PIN and password credentials. Nevertheless, the E-Authentication Service Component incorporates both assertion-based and certificate-based authentication to provide the broadest range of flexibility and choices to Federal agencies and end users.

System of Records Notice Requirements:

The purpose of the notice is to explain the E-Authentication Service Component, how it operates, and how participants, including end users, in the Federation relate. The E-Authentication Service Component portal merely routes the end user to the AA or CSP which the end user has chosen to access. The portal maintains no personally identifiable information about end users and therefore this notice proposes no new Privacy Act system of records.

However, Federal agency participants in the E-Authentication Service Component may maintain systems of records under the Privacy Act. Federal participants maintaining Privacy Act Systems of Records relating to identity authentication must develop appropriate systems of records notices with routine uses providing for the exchange of information through the Federation. As an initial matter, agencies must ensure they possess the appropriate authority to collect and maintain records in order to interface with the E-Authentication Federation. Additionally, agencies must publish Privacy Act Systems of Records notices in the **Federal Register** in accordance with guidance set out in OMB Circular A-130, Appendix 1. For further information contact, E-Authentication Service Component manager, Stephen Timchak, Director, E-Authentication Program Management Office, Suite 911, 2001 Crystal Drive, Arlington VA 22202. Mr. Timchak can be reached at 703-872-8604 or via email Stephen.timchak@gsa.gov.

Dated: August 1, 2005

June V. Huber,

Director, Office of Information Management.
[FR Doc. 05-15515 Filed 8-4-05; 8:45 am]

BILLING CODE 6820-34-S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Meeting of the Citizens' Health Care Working Group

AGENCY: Agency for Healthcare Research and Quality (AHRQ), HHS.

ACTION: Notice of public meeting and hearing.

SUMMARY: In accordance with section 10(a) of the Federal Advisory Committee Act, this notice announces a meeting and hearing of the Citizens' Health Care Working Group mandated by section 1014 of the Medicare Modernization Act.

In addition, the Working Group will sponsor a community forum in which members of the working group will participate.

DATES: The meeting will be held on Tuesday, August 16, 2005, from 1 p.m. to 3:30 p.m. The community forum will be held on Tuesday August 16, 2005, from 5:30 p.m. to 7 p.m. The hearing will be held Wednesday, August 17, 2005, from 8:30 a.m. to 2:30 p.m.

ADDRESSES: Both Tuesday's meeting and Wednesday's hearing will be held at The Conference Center at Harvard Medical, 77 Avenue Louis Pasteur, Boston, MA 02115, in the Harvard Institute of Medicine (HIM) Meeting Room, First Floor.

The community forum will be held at the same address in Harvard Medical's Amphitheater. The amphitheater is located on the ground floor.

The meeting, community forum, and hearing are all open to the public.

FOR FURTHER INFORMATION CONTACT: Caroline Taplin, Citizens' Health Care Working Group, at (301) 443-1515 or ctaplin@ahrq.gov. If sign language interpretation or other reasonable accommodation for a disability is needed, please contact Mr. Donald L. Inniss, Director, Office of Equal Employment Opportunity Program, Program Support Center, on (301) 443-1144.

The agenda for these three Working Group events is available on the Citizens' Working Group Web site, <http://www.citizenshealthcare.gov>. Also available at that site is a roster of Working Group members. When transcriptions of the Group's August 16 and 17 meeting and hearing are completed, they will be available on the website.

SUPPLEMENTARY INFORMATION: Section 1014 of Pub. L. 108-173, (known as the

Medicare Modernization Act) directs the Secretary of the Department of Health and Human Services (DHHS), acting through the Agency for Healthcare Research and Quality, to establish a Citizens' Health Care Working Group (Citizen Group). This statutory provision, codified at 42 U.S.C. 299 n., directs the Working Group to: (1) Identify options for changing our health care system so that every American has the ability to obtain quality, affordable health care coverage; (2) provide for a nationwide public debate about improving the health care system; and (3) submit its recommendations to the President and the Congress.

The Citizens' Health Care Working Group is composed of 15 members: the Secretary of DHHS is designated as a member by the statute and the Comptroller General of the U.S. Government Accountability Office (GAO) was directed to appoint the remaining 14 members. The Comptroller General announced the 14 appointments on February 28, 2005.

Working Group Meeting Agenda

The meeting on August 16 will be devoted to ongoing Working Group business. Topics to be addressed at this meeting include reports from Working Group Committees, plans for release of the required Report to the American People, a budget update and future scheduling plans.

At the hearing on August 17, there will be four panels addressing these initiatives: Mental health; state, county and community health initiatives; employer initiatives; and end of life care.

Submission of Written Information

In general, individuals or organizations wishing to provide written information for consideration by the Citizens' Health Care Working Group should submit information electronically to citizenshealth@ahrq.hhs.gov. The Working Group invites submissions that address the topics to be addressed at the August 16th meeting listed above. Since all electronic submissions will be posted on the Working Group Web site, separate submissions by topic will facilitate review of ideas submitted on each topic by the Working Group and the public.

This notice is published in less than 15 days of meeting & hearing dates due to the logistical difficulties.

Dated: August 2, 2005.

Carolyn M. Clancy,

Director.

[FR Doc. 05-15599 Filed 8-3-05; 12:28 pm]

BILLING CODE 4160-90-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10097]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

AGENCY: Centers for Medicare & Medicaid Services.

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), 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.

We are, however, requesting an emergency review of the information collection referenced below. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, we have submitted to the Office of Management and Budget (OMB) the following requirements for emergency review. We are requesting an emergency review because the collection of this information is needed before the expiration of the normal time limits under OMB's regulations at 5 CFR part 1320. This is necessary to ensure compliance with an initiative of the Administration. We cannot reasonably comply with the normal clearance procedures because of an unanticipated event.

The Centers for Medicare & Medicaid Services will obtain feedback from over 30,000 Medicare Providers via a survey about satisfaction, attitudes and

perceptions regarding the services provided by Medicare Fee-for-Service (FFS) Carriers, Fiscal Intermediaries, Durable Medical Equipment Suppliers, and Regional Home Health Intermediaries and Medicare Administrative Contractors. The survey focuses on basic business functions provided by the Medicare Contractors such as Inquiries, Provider Communications, Claims Processing, Appeals, Provider Enrollment, Medical Review and Provider Reimbursement. Providers will receive a notice requesting they use a specially constructed Web site to respond to a set of questions customized for their Contractor's responsibilities. The survey will be conducted yearly and annual reports of the survey results will be available via an online reporting system for use by CMS, Medicare Contractors, and the general public.

CMS is requesting OMB review and approval of this collection by November 21, 2005, with a 180-day approval period. Written comments and recommendation will be considered from the public if received by the individuals designated below by October 4, 2005.

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://www.cms.hhs.gov/regulations/prs> or e-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@cms.hhs.gov, or call the Reports Clearance Office on (410) 786-1326.

Interested persons are invited to send comments regarding the burden or any other aspect of these collections of information requirements. However, as noted above, comments on these information collection and recordkeeping requirements must be mailed and/or faxed to the designees referenced below by October 4, 2005:

Centers for Medicare & Medicaid Services, Office of Strategic Operations and Regulatory Affairs, Room C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850, Fax Number: (410) 786-5267, Attn: William N. Parham, III; and OMB Human Resources and Housing Branch, Attention: Christopher Martin, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: July 22, 2005.

Michelle Shortt,

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

[FR Doc. 05-15504 Filed 8-4-05; 8:45 am]

BILLING CODE 4120-01-P