

lessening of competition in the market for national syndicated cross-platform audience measurement services. Some may conclude that there can be no harm in the Commission entering into a consent agreement and issuing a Complaint and Order imposing a remedy with sophisticated and willing parties. That of course need not be true. Nor does that view logically follow from the Commission's mission to prevent anticompetitive conduct and to promote consumer welfare.

Whether parties to a transaction are willing to enter into a consent agreement will often have little to do with whether the agreed upon remedy actually promotes consumer welfare. The Commission's ability to obtain concessions instead reflects the weighing by the parties of the private costs and private benefits of delaying the transaction and potentially litigating the merger against the private costs and private benefits of acquiescing to the proposed terms.²⁰ Indeed, one can imagine that where, as here, the alleged relevant product market is small relative to the overall deal size, the parties would be happy to agree to concessions that cost very little and finally permit the deal to close. Put simply, where there is no reason to believe a transaction violates the antitrust laws, a sincerely held view that a consent decree will improve upon the post-merger competitive outcome or have other beneficial effects does not justify imposing those conditions. Instead, entering into such agreements subtly, and in my view harmfully, shifts the Commission's mission from that of antitrust enforcer to a much broader mandate of "fixing" a variety of perceived economic welfare-reducing arrangements.

Consents can and do play an important and productive role in the Commission's competition enforcement mission. Consents can efficiently address competitive concerns arising from a merger by allowing the Commission to reach a resolution more quickly and at less expense than would be possible through litigation. However, consents potentially also can have a detrimental impact upon consumers. The Commission's consents serve as important guidance and inform practitioners and the business community about how the agency is likely to view and remedy certain mergers.²¹ Where the Commission has

endorsed by way of consent a willingness to challenge transactions where it might not be able to meet its burden of proving harm to competition, and which therefore at best are competitively innocuous, the Commission's actions may alter private parties' behavior in a manner that does not enhance consumer welfare.²² Because there is no judicial approval of Commission settlements, it is especially important that the Commission take care to ensure its consents are in the public interest.²³

[FR Doc. 2013-23547 Filed 9-26-13; 8:45 am]

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GENERAL SERVICES ADMINISTRATION

[Notice-MG-2013-02; Docket No: 2013-0002; Sequence 26]

Leased Asset Energy and GHG Reporting Interpretive Guidance

AGENCY: Office of Government-Wide Policy, U.S. General Services Administration (GSA).

ACTION: Notice.

SUMMARY: This notice announces guidance on estimating and voluntarily reporting leased asset energy use and greenhouse gas (GHG) emissions data. The guidance contains a practical set of guidelines and best practices for agencies developing their own policies and processes for leasing, energy data collection and estimation, and GHG reporting and may be found at www.gsa.gov/hpbg. It is not federal policy for energy reporting or GHG accounting.

DATES: September 27, 2013.

FOR FURTHER INFORMATION CONTACT: Ms. Kinga Porst, Office of Federal High Performance Green Buildings (MG), Office of Government-Wide Policy, GSA, at 202-501-0762 or via email at

Significance of Consent Orders in the Federal Trade Commission's Competition Enforcement Efforts, Remarks at GCR Live, 4-5 (Sept. 17, 2013), available at <http://www.ftc.gov/speeches/dfeinstein/130917gcrspeech.pdf>.

²² See Ginsburg & Wright, *supra* note 14, at 179.

²³ 15 U.S.C. 45(b) (2006); see also J. Thomas Rosch, Comm'r, Fed. Trade Comm'n, Consent Decrees: Is the Public Getting Its Money's Worth (Apr. 7, 2011), Remarks at the XVIIIth St. Gallen International Competition Law Forum, available at <http://www.ftc.gov/speeches/rosch/110407roschconsentdecrees.pdf> (stating that "we at the Commission are responsible for conducting our own public interest inquiry before accepting proposed consent decrees, and this inquiry operates as a check on the 'wide discretion' that we otherwise wield to combat methods, acts and practices that violate the antitrust and consumer protection laws").

kinga.porst@gsa.gov. Please cite Notice-MK-2013-02.

SUPPLEMENTARY INFORMATION: This notice announces guidance on estimating and voluntarily reporting leased asset energy use and greenhouse gas (GHG) emissions data. The guidance contains a practical set of guidelines and best practices for agencies developing their own policies and processes for leasing, energy data collection and estimation, and GHG reporting and may be found at www.gsa.gov/hpbg. It is not federal policy for energy reporting or GHG accounting.

Dated: September 23, 2013.

Kevin Kampschroer,

Federal Director, Office of Federal High Performance Green Buildings, Office of Government-wide Policy.

[FR Doc. 2013-23581 Filed 9-26-13; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier HHS-OS-20584-60D]

Agency Information Collection Activities; Proposed Collection; Public Comment Request

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, announces plans to submit a new Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting that ICR to OMB, Office of the Secretary, OS seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on the ICR must be received on or before November 26, 2013.

ADDRESSES: Submit your comments to Information.CollectionClearance@hhs.gov or by calling (202) 690-6162.

FOR FURTHER INFORMATION CONTACT: Information Collection Clearance staff, Information.CollectionClearance@hhs.gov or (202) 690-6162.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the document identifier HHS-OS-20584-60D for reference. *Information Collection Request Title:* Survey on

²⁰ See Douglas H. Ginsburg & Joshua D. Wright, *Antitrust Settlements: The Culture of Consent*, in 1 William E. Kovacic, *An Antitrust Tribute—Liber Amicorum 177*, 179-80 (2012).

²¹ See, e.g., Deborah L. Feinstein, Bureau of Competition Dir., Fed. Trade Comm'n, The

Long-Term Care Awareness and Planning.

Abstract: The Office of the Assistant Secretary for Planning and Evaluation (ASPE) is requesting approval from the Office of Management and Budget (OMB) to conduct a survey of adults between the ages of 40 and 70 on long-term care awareness, how people plan for retirement and their preferences for long-term care financing options. Long-term care includes helping people with daily activities, such as bathing, dressing, taking medications, and preparing meals over a long period of time. Long-term care can be provided in nursing homes, assisted living facilities, adult day care programs, and individual homes. Most people with disabilities are elderly, but people of all ages may need long-term care (Kaye, Harrington, & LaPlante, 2010).

The goal of this project is to contribute to the knowledge base regarding how people plan for the possibility of needing long-term care and for retirement in general and assess their preferences about long-term care insurance. Information about long-term

care and retirement planning will be obtained from a large sample of individuals 40–70 years of age who are part of an ongoing Internet panel maintained by GfK Custom Research, LLC. Prior to the development of the survey instrument, a thorough review of the literature was conducted and conceptual framework prepared. A survey instrument was developed with contributions of a Technical Expert Panel (TEP), which provided guidance on the content and methodology of the survey instrument and comprised experts on survey methodology and long-term care and long-term care insurance. Part of the survey is a discrete choice experiment (DCE) designed to elicit respondent preferences on features of long-term care insurance. The survey was cognitively assessed and revised based on revised based on the results of the testing. GfK will administer the survey; RTI International will analyze the survey. Both GfK and RTI have experience doing similar work for HHS/ASPE and other government clients.

Need and Proposed Use of the Information: To determine how adults between the ages of 40 and 70 plan for retirement and their preferences for long-term care financing options.

Likely Respondents: Adults between the ages of 40 and 70

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions, to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information, to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information, and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Self-administered, Web-based questionnaire	15,000	1	0.75	11,250
Total	11,250

Office of the Secretary, OS specifically requests comments on (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.

Darius Taylor,

Deputy Information Collection Clearance Officer.

[FR Doc. 2013–23588 Filed 9–26–13; 8:45 am]

BILLING CODE 4150–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Solicitation for Applications From Individuals Interested in Being Appointed to the Chronic Fatigue Syndrome Advisory Committee

AGENCY: Department of Health and Human Services, Office of the Secretary, Office of the Assistant Secretary for Health.

ACTION: Notice.

Authority: 42 U.S.C. 217a, section 222 of the Public Health Service (PHS) Act, as amended.

The Committee is governed by the provisions of Public Law 92–463, as amended (5 U.S.C. App 2), which sets forth standards for the formation and use of advisory committees.

SUMMARY: The Office of the Assistant Secretary for Health (OASH), within the Department of Health and Human Services (HHS), is seeking nominations of qualified candidates to be considered for appointment as a member of the

Chronic Fatigue Syndrome Advisory Committee (CFSAC). CFSAC provides advice and recommendations to the Secretary of HHS, through the Assistant Secretary for Health (ASH), on a broad range of issues and topics related to myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS). The appointments of several Committee members are scheduled to end during the 2014 calendar year. Nominations of qualified candidates are being sought to fill the positions that are scheduled to be vacated.

DATES: Applications for individuals to be considered for appointment to the Committee must be received no later than 5 p.m. EDT on October 28, 2013 at the address listed below.

ADDRESSES: All nominations should be mailed or delivered to Martha Duncan Bond, Alternate Designated Federal Officer, Chronic Fatigue Syndrome Advisory Committee, Office on Women’s Health, Office of the Assistant Secretary for Health, Department of Health and Human Services, 200