

From: Jean Public <jeanpublic1@yahoo.com>
Sent: Saturday, October 10, 2015 3:47 PM
To: OMB-Comments (CDC); VICEPRESIDENT@WHITEHOUSE.GOV;
AMERICANVOICES@MAIL.HOUSE.GOV
Cc: INFO@TAXPAYER.NET; MEDIA@CAGW.ORG; INFONJ@AFPHQ.ORG;
infonj@afphq.org
Subject: Fw: PUBLIC COMMENT ON FEDERARL REGISTER not necessary at all new
spending gouging of taxpayers in usa for an extremely negligent agency cdc

Follow Up Flag: Follow up
Flag Status: Flagged

NOBODY BOTHERED AT CDC TO LIST THIS ON REGULATIONS.GOV SO WHEN YOU GO TO
REGULATIONS.GOV AND ENTER 2015-25648 YOU GET NO PLACE TO COMMENT SO YOU HAVE TO
SEND
IT TO OMB@CDC.GOV, ANOTHER EXAMPLE OF STUPIDITY, IGNORANCE, CARELESSNESS AND
NEGLIGENCE AT THIS AGENCY IS SEEMS TO BE OUT OF IT COMPLETELY AND TOTALLY ALL OF
THE TIME.

YOU CANNOT TRUST THIS AGENCY TO DO ITS WORK PROPERLY. IT IS FULL OF CORRUPTION,
THEY DEAL
IN GROUPTHINK.

THERE IS NO NEED FOR ANY EXTINCTION OF THIS IFNROATMION COLLECTION BECAUSE ALL
OF THIS
MEDICAL INFORMAITON IS ALREADY IN GOVT FILES UNDER MEDICARE AND OBAMACARE, WHICH

COLLECT ALL THE MEDICAL INFORAMTION ONE CUL DWANT ON MILLIONS OF AMERICANS,
DOCTORS,
COSTS, ETC. THIS AGENCY SIMPLY WANTS TO DO WHAT IT DID IN 1995 AND FAILS TO
RECOGNIZE THAT
CHANGES HAVE BEEN MADE. I SEE NO REASON THAT DOCTORS, HOSPITALS SHOULD HAVE TO E

SUBMITTING TO TEN DIFFERENT GOVT AGENCIES INFORMATION ON THE SAME MEDICAL CARE.
WE
HAVE IT IN OUR FILES ALREDY. GET IT FROM MEDICARE AND OBAMACARE. THIS IS WHY OUR
TAXES ARE
THROUGH THE ROOF BECAUES OF CDC STUPIDITY LIKE THIS. CUT THE BUDGET FOR THIS
COLLECTION TO
ZERO WHEN IT EXPIRES. THERE SHOULD BE NO NEW AUTHORIZATION OF THIS COLLECTION.
THIS
COMMETN IS FOR THE PUBILC RECORD. EVEN THOUGH THE CDC WAS NEGLIGENT IN NOT
PROVIDING
HE SITE THEY SENT THE US PUBLIC TOO, AN EXAMPLE OF WILD GOOSE CHASE AND WASTING
THE US
PUBILCS TIME. JEAN PUBLEE JEANPUBLIC1@YAH00.COM

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> [Federal Register Volume 80, Number 195 (Thursday, October 8, 2015)]
> [Notices] [Pages 60908-60909] From the Federal Register Online via the
> Government Publishing Office [www.gpo.gov] [FR Doc No: 2015-25648]
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> DEPARTMENT OF HEALTH AND HUMAN SERVICES
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> Centers for Disease Control and Prevention

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> [60Day-16-0234; Docket No. CDC-2015-0086]
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> Proposed Data Collection Submitted for Public Comment and
> Recommendations
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> AGENCY: Centers for Disease Control and Prevention (CDC), Department
> of Health and Human Services (HHS).
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> ACTION: Notice with comment period.
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> SUMMARY: The Centers for Disease Control and Prevention (CDC), as part
> of its continuing efforts to reduce public burden and maximize the
> utility of government information, invites the general public and
> other Federal agencies to take this opportunity to comment on proposed
> and/or continuing information collections, as required by the
> Paperwork Reduction Act of 1995. This notice invites comment on the
> proposed revision of the National Ambulatory Medical Care Survey
> (NAMCS). The purpose of NAMCS is to meet the needs and demands for
> statistical information about the provision of ambulatory medical care
> services in the United States.
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> DATES: Written comments must be received on or before December 7,
> 2015.
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> ADDRESSES: You may submit comments, identified by Docket No.
> CDC-2016-
> 0026 by any of the following methods:
> Federal eRulemaking Portal: Regulation.gov. Follow the
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> instructions for submitting comments.
> Mail: Leroy A. Richardson, Information Collection Review Office,
> Centers for Disease Control and Prevention, 1600 Clifton Road NE.,
> MS-D74, Atlanta, Georgia 30329.
> Instructions: All submissions received must include the agency
> name and Docket Number. All relevant comments received will be posted
> without change to Regulations.gov, including any personal information
> provided. For access to the docket to read background documents or
> comments received, go to Regulations.gov.
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> FOR FURTHER INFORMATION CONTACT: To request more information on the
> proposed project or to obtain a copy of the information collection
> plan and instruments, contact the Information Collection Review
> Office, Centers for Disease Control and Prevention, 1600 Clifton Road,
> NE., MS- D74, Atlanta, Georgia 30329; phone: 404-639-7570; Email:
> omb@cdc.gov.
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> SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995
> (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. In addition, the PRA also
> requires Federal agencies to provide a 60-day notice in the Federal
> Register concerning each proposed collection of information, including
> each new proposed collection, each proposed extension of existing
> collection of information, and each reinstatement of previously
> approved information collection before submitting the collection to
> OMB for approval. To comply with this requirement, we are publishing
> this notice of a proposed data collection as described below.
> Comments are invited 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) ways to enhance the
> quality, utility, and clarity of the information to be collected; (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; and (e) estimates
> of capital or start-up costs and costs of operation, maintenance, and
> purchase of services to provide information. Burden means the total
> time, effort, or financial resources expended by persons to generate,
> maintain, retain, disclose or provide information to or for a Federal
> agency.

> 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
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> information, to search data sources, to complete and review the
> collection of information; and to transmit or otherwise disclose the
> information.

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> Proposed Project

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> The National Ambulatory Medical Care Survey (NAMCS), (OMB No.
> 0920-0234, expires 12/31/2017)--Revision -- National Center for
> Health Statistics (NCHS), Centers for Disease Control and Prevention
> (CDC).

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> Background and Brief Description

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> Section 306 of the Public Health Service (PHS) Act (42 U.S.C.
> 242k), as amended, authorizes that the Secretary of Health and Human
> Services, acting through NCHS, shall collect statistics on the
> utilization of health care provided by non-federal office-based
> physicians in the United States. On December 19, 2014, the OMB
> approved data collection for three years from 2015 to 2017. This
> revision is to request approval to continue NAMCS data collection
> activities for three years from 2016-2018 and to add questions to the
> physician interview that pertain to policies, services, and
> experiences related to the prevention and treatment of sexually
> transmitted infections
> (STIs) and
> HIV prevention among adolescents and others. Small modifications will
> also be made to questions on the use of electronic health records.
> This notice also covers a decrease in the sample size resulting from
> smaller budget allocations. Due to this decrease, selected state
> estimates will not be available for 2016-2018 data.

> The National Ambulatory Medical Care Survey (NAMCS) has been
> conducted intermittently from 1973 through 1985, and annually since
> 1989. The purpose of NAMCS, a voluntary survey, is to meet the needs
> and demands for statistical information about the provision of
> ambulatory medical care services in the United States.

> Ambulatory

> services are rendered in a wide variety of settings, including
> physicians' offices and hospital outpatient and emergency departments.

> The NAMCS target universe consists of all office visits made by
> ambulatory patients to non-Federal office-based physicians (excluding
> those in the specialties of anesthesiology, radiology, and
> pathology)

> who are engaged in direct patient care. In 2006, physicians and mid-
> level providers (i.e., nurse practitioners, physician assistants, and
> nurse midwives) practicing in community health centers

> (CHCs) were
 > added to the NAMCS sample, and these data will continue to be
 > collected.
 > To complement NAMCS data, NCHS initiated the National Hospital
 > Ambulatory Medical Care Survey (NHAMCS, OMB No. 0920-0278, expires 02/
 > 28/18) in 1992 to provide

> [[Page 60909]]

> data concerning patient visits to hospital outpatient and emergency
 > departments. NAMCS and NHAMCS are the principal sources of data on
 > ambulatory care provided in the United States.
 > There is no cost to the respondents other than their time.

> Estimated Annualized Burden Hours

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Average burden per Form name per response (in hrs.)	Type of respondents Total burden (in hrs.)	Number of respondents	Number of responses respondent

----- Office-based physicians.....			
Physician			
Induction Interview (NAMCS-1)..		2,590	
1	45/60	1,943	
Patient			
Record form (NAMCS-30) (Physician			259
30	14/60	1,813	
abstracts).			
Prepare and			
transmit EHR (MU On-Boarding)		130	
1	1	130	
Pulling,			
refiling medical record forms		2,201	
30	1/60	1,101	
(FR abstracts).			
Community Health Centers..... Induction			
Interview--service delivery		104	
1	30/60	52	
site (NAMCS-201).			
Induction			
Interview--Providers (NAMCS-1).		234	
1	30/60	117	
Patient			
Record form (NAMCS-30) (Provider			23
30	14/60	161	
abstracts).			
Pulling,			
refiling medical record forms		211	
30	1/60	106	
(FR abstracts).			
Reabstraction study..... Pulling,			
refiling medical record forms		72	

> 10 1/60 12

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> abstracts).

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> Total.....
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> 5,435

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> Leroy A. Richardson,
> Chief, Information Collection Review Office, Office of Scientific
> Integrity, Office of the Associate Director for Science, Office of the
> Director, Centers for Disease Control and Prevention.
> [FR Doc. 2015-25648 Filed 10-7-15; 8:45 am] BILLING CODE 4163-18-P

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