responsible for ''one-third of any applicable income-related monthly adjustment amount,'' and we used a value of 33⅓ percent to calculate the income-related monthly adjustment amounts. In this notice, we are correcting the income-related adjustment amounts to reflect a value of ''33 percent'' as the basis for the calculation of these rates.

II. Correction of Errors

In FR Doc. 06–7709 of September 18, 2006 (71 FR 54665), make the following corrections:

1. On page 54665, in the third column, in the second paragraph, line sixteen, the term ''one third'' is corrected to read ''33 percent.''

2. On page 54665, in the third column, in the third paragraph, line eight, following the parenthetical and comma ''(standard premium),'' the premium rates are corrected to read $105.80, $124.40, $142.90, and $161.40.

3. On pages 54667 and 54668, in the third column, following the fifth paragraph, in the first table following the section titled ''II.A., Notice of Medicare Part B Monthly Actuarial Rates, Monthly Premium Rates, and Annual Deductible,'' the amounts listed in the second row of the table are corrected to read $12.30, $105.80; third row are corrected to read $30.90, $124.40; fourth row are corrected to read $49.40, $142.90, and fifth row are corrected to read $67.90, $161.40.

4. On page 54668, in the third column, following the first paragraph, in the second table following the section titled ''II.A., Notice of Medicare Part B Monthly Actuarial Rates, Monthly Premium Rates, and Annual Deductible,'' the amounts listed in the second row are corrected to read $49.40, $142.90, and third row are corrected to read $67.90, $161.40.

5. On page 54669, in the third column, following the third paragraph, in the first table following the section titled ''5. Premium Rates and Deductible,'' the amounts listed in the second row are corrected to read $12.30, $105.80; the third row are corrected to read $30.90, $124.40; the fourth row are corrected to read $49.40, $142.90; and the fifth row are corrected to read $67.90, $161.40.

6. On pages 54669 and 54670, in the third column, in the fourth paragraph, in the second table following the section titled ''5. Premium Rates and Deductible,'' the amounts listed in the second row are corrected to read $49.40, $142.90; and the third row are corrected to read $67.90, $161.40.

7. On page 54672, in the third column, following the first full paragraph, in the first table following the section titled ''III. Regulatory Impact Analysis,'' the amounts listed in the second row are corrected to read $12.30, $105.80; the third row are corrected to read $30.90, $124.40; the fourth row are corrected to read $49.90, $142.90; and the fifth row are corrected to read $67.90, $161.40.

8. On page 54672, in the third column, following the second paragraph, in the second table, the amounts listed in the second row are corrected to read $49.40, $142.90; and the third row are corrected to read $67.90, $161.40.

9. On page 54672, in the first column, in the fourth paragraph, after the clause ''The monthly impact on the beneficiaries who are required to pay a higher premium for 2007 because their income exceeds specified thresholds is * * * the amounts and text are corrected to read as follows ''$12.30, $30.90, $49.40, or $67.90 which is in addition to the standard monthly premium.''

III. Waiver of Proposed Rulemaking

We ordinarily publish a notice of proposed rulemaking in the **Federal Register** to provide a period for public comment before the provisions of a rule take effect in accordance with section 553(b) of the Administrative Procedure Act (APA) (5 U.S.C. 553(b)). However, we can waive this notice and comment procedure if the Secretary finds, for good cause, that the notice and comment process is impracticable, unnecessary, or contrary to the public interest, and incorporates a statement of the finding and the reasons therefore in the notice.

The Medicare statute requires the publication of the monthly actuarial rates and the Part B premium amounts in September. We ordinarily use general notices, rather than notice and comment rulemaking procedures, to make such announcements. In doing so, we note that, under the Administrative Procedure Act, interpretive rules, general statements of policy, and rules of agency organization, procedure, or practice are excepted from the requirements of notice and comment rulemaking.

This notice corrects an inadvertent error in the notice that appeared in the **Federal Register** on September 18, 2006, entitled ''Medicare Part B Monthly Actuarial Rates, Premium Rates, and Annual Deductible for Calendar Year 2007.'' In that notice, we also determined that notice and comment was unnecessary because the formulas used to calculate the Part B premium and the income-related monthly adjustment amounts are statutorily directed and we can exercise no discretion in applying those formulas. Moreover, the statute establishes the time period for which the premium rates will apply, and delaying publication of the Part B premium rate such that it would not be published before that time would be contrary to the public interest.

For the same reasons, we find good cause to waive notice and comment procedures with respect to this correction notice. In addition, this correction notice includes the changes necessary to correct a technical error in the computation of the income-related monthly adjustment amount under the statutory formula. Because these changes affect the amount of the Part B income-related monthly adjustment that will be paid by certain beneficiaries, it is in the public interest to ensure that these changes are made as soon after the publication of the original notice as possible.

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; and Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: September 18, 2006.

Ann C. Agnew,

Executive Secretary to the Department.

[FR Doc. 06–8008 Filed 9–19–06; 8:51 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–7001–N]

Medicare Program; Meeting of the Advisory Panel on Medicare Education, October 17, 2006

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice of meeting.

SUMMARY: In accordance with the Federal Advisory Committee Act, 5 U.S.C. Appendix 2, section 10(a) (Pub. L. 92–463), this notice announces a meeting of the Advisory Panel on Medicare Education (the Panel) on October 17, 2006. The Panel advises and makes recommendations to the Secretary of Health and Human Services (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services on opportunities to enhance the effectiveness of consumer education strategies concerning the Medicare program. This meeting is open to the public.

DATES: *Meeting Date:* October 17, 2006 from 9 a.m. to 3:30 p.m., e.d.t.

Deadline for Meeting Registration, Presentations, and Written Comments: October 10, 2006, 12 noon, e.d.t.

ADDRESSES: *Meeting Location:* Marriott Metro Center Hotel, 775 12th Street, NW., Washington, DC 20005, (202) 737–2200.

Meeting Registration, Presentations, and Written Comments: Lynne Johnson, Health Insurance Specialist, Division of Partnership Development, Office of External Affairs, Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Mail stop S1–05–06, Baltimore, MD 21244–1850 or contact Ms. Johnson via e-mail at *Lynne.Johnson@cms.hhs.gov*.

Meeting Registration: The meeting is open to the public, but attendance is limited to the space available. Persons wishing to attend this meeting must register by contacting Lynne Johnson at the address listed in the **ADDRESSES** section of this notice or by telephone at (410) 786–0090, by 12 noon, e.d.t., on October 10, 2006.

FOR FURTHER INFORMATION CONTACT: Lynne Johnson, (410) 786–0090. Please refer to the CMS Advisory Committees' Information Line (1–877–449–5659 toll free)/(410–786–9379 local) or the Internet (*http://www.cms.hhs.gov/FACA/04_APME.asp*) for additional information and updates on committee activities. Press inquiries are handled through the CMS Press Office at (202) 690–6145.

SUPPLEMENTARY INFORMATION: Section 222 of the Public Health Service Act (42 U.S.C. 217a), as amended, grants to the Secretary the authority to establish an advisory panel if the Secretary finds the panel necessary and in the public interest. The Secretary signed the charter establishing this Panel on January 21, 1999 and approved the renewal of the charter on January 14, 2005. The establishment of the charter and renewal of the charter were announced in the February 17, 1999 **Federal Register** (64 FR 7899), and the January 28, 2005 **Federal Register** (70 FR 4129), respectively. The Panel advises and makes recommendations to the Secretary and the Administrator of the Centers for Medicare & Medicaid Services (CMS) on opportunities to enhance the effectiveness of consumer education strategies concerning the Medicare program.

The goals of the Panel are as follows:

- To develop and implement a national Medicare education program that describes the options for selecting a health plan under Medicare.
- To enhance the Federal government's effectiveness in informing the Medicare consumer, including the appropriate use of public-private partnerships.
- To expand outreach to vulnerable and underserved communities, including racial and ethnic minorities, in the context of a national Medicare education program.
- To assemble an information base of best practices for helping consumers evaluate health plan options and build a community infrastructure for information, counseling, and assistance.

The current members of the Panel are: Anita B. Boles, Executive Director, Partnership for Clear Health Communications; Gwendolyn T. Bronson, SHINE/SHIP Counselor, Massachusetts SHINE Program; Dr. Yanira Cruz, President and Chief Executive Officer, National Hispanic Council on Aging; Clayton Fong, President and Chief Executive Officer, National Asian Pacific Center on Aging; Nan Kirsten-Forte, Executive Vice President, Consumer Services, WebMD; Dr. Jessie C. Gruman, President and Chief Executive Officer, Center for the Advancement of Health; Betty L. Kennard, Vice President, Government Programs and Compliance, Health First Health Plans; Dr. David Lansky, Director, Health Program, Markle Foundation; Dr. Daniel Lyons, Senior Vice President, Government Programs, Independence Blue Cross; Dr. Frank B. McArdle, Manager, Hewitt Research Office, Hewitt Associates; Traci McClellan, J.D., Executive Director, National Indian Council on Aging; Dr. Keith Mueller, Professor and Section Head, Health Services Research and Rural Health Policy, University of Nebraska; Lee Partridge, Senior Health Policy Advisor, National Partnership for Women and Families; Myisha M. Patterson, National Health Coordinator, National Association for the Advancement of Colored People; Susan O. Raetzman, Associate Director, Public Policy Institute, American Association of Retired Persons; Rebecca Snead, Administrative Manager, National Alliance of State Pharmacy Association; William A. Steel, President, The National Grange; Marvin Tuttle, Jr., CAE, Executive Director and Chief Executive Officer, Financial Planning Association; Catherine Valenti, Chairperson and Chief Executive Officer, Caring Voice Coalition; and Grant Wedner, Manager, Business Development Team, Cosmix Corporation.

The agenda for the October 17, 2006 meeting will include the following:

- Recap of the previous (May 25, 2006) meeting.
- Centers for Medicare & Medicaid Services Update.
- Medicare Preventive Benefits.
- Medicare Prescription Drug Benefit Update.
- Public Comment.
- Listening Session with CMS Leadership.
- Next Steps.

Individuals or organizations that wish to make a 5-minute oral presentation on an agenda topic should submit a written copy of the oral presentation to Lynne Johnson at the address listed in the **ADDRESSES** section of this notice no later than 12 noon, e.d.t., on October 10, 2006. The number of oral presentations may be limited by the time available. Individuals not wishing to make a presentation may submit written comments to Ms. Johnson at the address listed in the **ADDRESSES** section of this notice by 12 noon, e.d.t., on October 10, 2006.

Special Accommodation: Individuals requiring sign language interpretation or other special accommodations should contact Ms. Johnson at the address listed in the **ADDRESSES** section of this notice at least 15 days before the meeting.

Authority: Sec. 222 of the Public Health Service Act (42 U.S.C. 217a) and sec. 10(a) of Public Law 92–463 (5 U.S.C. App. 2, sec. 10(a) and 41 CFR 102–3).

(Catalog of Federal Domestic Assistance Program No. 93.733, Medicare—Hospital Insurance Program; and Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: September 7, 2006.

Mark B. McClellan,

Administrator, Centers for Medicare & Medicaid Services.

[FR Doc. 06–7884 Filed 9–21–06; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 2006N–0180]

Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Records and Reports Concerning Experience With Approved New Animal Drugs

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing