

Conducts special assignments relative to the functions of this Office as requested.

2. Delete subparagraph (h-7), *Division of Ethics and Program Integrity (HFA72)* in its entirety and insert a new subparagraph under the Office of Management and Systems (HFA6), Office of Management (HFA7) reading as follows:

(h-7) *Division of Ethics and Program Integrity (HFA72)*. Directs and coordinates a multidiscipline team of administrative and/or program specialists who conduct scheduled reviews of FDA Headquarters and field components to determine adherence to existing managerial policy and practices; assures that recommendations resulting from the review findings are implemented.

Directs FDA's personnel security program and provides professional leadership and authoritative guidance in these areas. Formulates policy and procedures necessary to maintain the integrity of privileged information submitted by industry.

Implements Internal Control Reviews in accordance with OMB guidelines.

Directs the formulation of FDA policies and procedures concerning conflicts of interest and employee associations with regulated industries, reviews financial interests including outside activities of FDA employees, decides conflict of interest issues, and counsels and trains employees on the avoidance of conflicts of interest.

Acts on FDA liaison with the Office of the Inspector General (OIG) regarding audits. Coordinates preparation of FDA responses to OIG audit findings, monitors implementation of FDA responses.

Prior Delegations of Authority.

Pending further delegations, directives, or orders by the Commissioner of Food and Drugs, all delegations of authority to positions of the affected organizations in effect prior to this date shall continue in effect in them or their successors.

Dated: January 5, 1995.

Donna E. Shalala,

Secretary.

[FR Doc. 95-1551 Filed 1-20-95; 8:45 am]

BILLING CODE 4160-01-M

Health Care Financing Administration [ORD-070-N]

New and Pending Demonstration Project Proposals Submitted Pursuant to Section 1115(a) of the Social Security Act: November and December 1994

AGENCY: Health Care Financing Administration (HCFA).

ACTION: Notice.

SUMMARY: This notice lists new proposals for demonstration projects submitted to the Department of Health and Human Services during the months of November and December 1994 under the authority of section 1115 of the Social Security Act. This notice also lists proposals that have been submitted, approved, or disapproved since January 1993.

Comments: We will accept written comments on these proposals. We will, if feasible, acknowledge receipt of all comments, but we will not provide written responses to comments. We will, however, neither approve nor disapprove a proposal received after the publication of the Department of Health and Human Services' public notice guidelines in the **Federal Register** on September 27, 1994, for at least 30 days after publication of the notice of that proposal in the **Federal Register**, in order to allow time to receive and consider comments. Direct comments as indicated below.

ADDRESSES: Mail correspondence to: Susan Anderson, Office of Research and Demonstrations, Health Care Financing Administration, 2230 Oak Meadows, 6325 Security Boulevard, Baltimore, MD 21207.

FOR FURTHER INFORMATION CONTACT: Susan Anderson, (410) 966-5181.

SUPPLEMENTARY INFORMATION:

I. Background

Under Section 1115 of the Social Security Act (the Act), the Department of Health and Human Services (HHS) may consider and approve research and demonstration proposals with a broad range of policy objectives. These demonstrations can lead to improvements in achieving the purposes of the Act.

In exercising her discretionary authority, the Secretary has developed a number of policies and procedures for reviewing proposals. On September 27, 1994, we published a notice in the **Federal Register** (59 FR 49249) that specified (1) the principles that we ordinarily will consider when approving or disapproving

demonstration projects under the authority in section 1115(a) of the Act; (2) the procedures we expect States to use in involving the public in the development of proposed demonstration projects under section 1115; and (3) the procedures we ordinarily will follow in reviewing demonstration proposals. We are committed to a thorough and expeditious review of State requests to conduct such demonstrations.

II. Listing of New and Pending Proposals for the Months of November and December 1994

As part of our procedures, we are publishing a monthly notice in the **Federal Register** of all new and pending proposals. This notice contains proposals for the months of November and December 1994. This initial publication of information on section 1115 demonstration proposals lists all proposals submitted, approved or disapproved since January 1, 1993. Future notices will only list actions occurring in a single month, including new submissions, pending proposals, approvals, and disapprovals. Proposals submitted in response to a grant solicitation or other competitive process will be reported as received during the month that such grant or bid is awarded, so as to prevent interference with the awards process.

A. Comprehensive Health Reform Programs

1. New Proposals

No new proposals were submitted during the months of November and December 1994.

2. Pending Proposals

Demonstration Title/State: The Diamond State Health Plan—Delaware.

Description: Delaware proposes to expand eligibility for Medicaid to persons with incomes up to 100 percent of the Federal poverty level and require that the Medicaid population enroll in managed care delivery systems. The State's current section 1115 demonstration project, the Delaware Health Care Partnership for Children, would be incorporated into the statewide program as an optional provider for eligible children.

Date Received: July 29, 1994.

State Contact: Kay Holmes, DSHP Coordinator, DHSS Medicaid Unit, Biggs Building, P.O. Box 906, New Castle, Delaware 19720, (302) 577-4900.

Federal Project Officer: Rosana Hernandez, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: MediPlan Plus—Illinois.

Description: Illinois seeks to develop a managed care delivery system using a series of networks, either local or statewide, to tailor its Medicaid delivery system to the needs of local urban neighborhoods or large rural areas.

Date Received: September 15, 1994.

State Contact: Tom Toberman, Manager, Federal/State Monitoring, 201 South Grand Avenue East, Springfield, Illinois 62763, (217) 782-2570.

Federal Project Officer: Gina Clemons, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: MassHealth—Massachusetts.

Description: Massachusetts proposes to implement a range of strategies to extend Medicaid coverage of its uninsured citizens, including the employed, the short-term unemployed, and the long-term unemployed. The proposed program would employ direct provision of health services as well as indirect strategies to promote market forces to address the needs of the uninsured, including providing subsidies to employees with incomes up to 200 percent of the Federal poverty level.

Date Received: April 15, 1994.

State Contact: Laurie Burgess, Director, Managed Care Program Development, Division of Medical Assistance, 600 Washington Street, Boston, Massachusetts 02111, (617) 348-5695.

Federal Project Officer: Ed Hutton, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: MinnesotaCare—Minnesota.

Description: Minnesota proposes to expand its use of managed care service delivery and to extend Medicaid eligibility to families and children with incomes up to 275 percent of the Federal poverty level. The State would also integrate Medicaid with other public entities that deliver health services.

Date Received: July 28, 1994.

State Contact: Maria Gomez, Commissioner, Health Care Services Delivery, Minnesota Department of Human Services, 444 Lafayette Road N, St. Paul, Minnesota 55155, (612) 297-4113.

Federal Project Officer: Penny Pine, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Missouri.

Description: Missouri proposes to require that beneficiaries enroll in managed care delivery systems, and extend Medicaid eligibility to persons with incomes below 200 percent of the Federal poverty level. As part of the program, Missouri would create a fully capitated managed care pilot program to serve non-institutionalized persons with permanent disabilities on a voluntary basis.

Date Received: June 30, 1994.

State Contact: Donna Checkett, Director, Division of Medical Services, Missouri Department of Social Services, P.O. Box 6500, Jefferson City, Missouri 65102-6500, (314) 751-6922.

Federal Project Officer: Suzanne Rotwein, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: The Granite State Partnership for Access and Affordability in Health Care—New Hampshire.

Description: New Hampshire proposes to extend Medicaid eligibility to adults with incomes below the AFDC cash standard and to create a public insurance product for low income workers. The State also seeks to implement a number of pilot initiatives to help redesign its health care delivery system.

Date Received: June 14, 1994.

State Contact: Barry Bodell, New Hampshire Department of Health and Human Services, Office of the Commissioner, 6 Hazen Drive, Concord, New Hampshire 03301-6505, (603) 271-4332.

Federal Project Officer: Maria Boulmetis, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: OhioCare—Ohio.

Description: Ohio proposes to expand Medicaid eligibility to include uninsured persons with incomes up to 100 percent of the Federal poverty level. New and current eligibles in this statewide program would receive services through managed care. Certain special health related services, such as mental health and drug and alcohol addiction services, would also be provided through managed care.

Date Received: March 2, 1994.

State Contact: Kathi Glynn, Director, Ohio Medicaid, 30 East Broad Street, Columbus, Ohio 43266, (614) 644-0140.

Federal Project Officer: David Walsh, Health Care Financing Administration,

Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

3. Approved Conceptual Proposals (Award of Waivers Pending)

Demonstration Title/State: Palmetto Health Initiative—South Carolina.

Description: South Carolina proposes to expand Medicaid eligibility to include uninsured persons with incomes of up to 100 percent of the Federal poverty level. New and current eligibles in this statewide program would receive services through either a fully capitated managed health plan or a partially capitated primary care provider. South Carolina also proposes to implement a managed care program, with a focus on home and community-based services, for persons requiring, or at risk of requiring, placement in a nursing facility.

The Health Care Financing Administration (HCFA) will be working with South Carolina over the next year to develop the infrastructure necessary for the proposed demonstration. HCFA will consider the State's request for waivers once the State has successfully completed a set of agreed upon milestones.

Date Received: March 1, 1994.

Date Concept Approved: November 18, 1994.

State Contact: Eugene A. Laurent, Ph.D., Executive Director, State Health and Human Services Finance Commission, P.O. Box 8206, Columbia, South Carolina 29202, (803) 253-6100.

Federal Project Officer: Sherrie Fried, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

4. Approved Proposals

Demonstration Title/State: Florida Health Security Program—Florida.

Description: The Florida Health Security Program is a voluntary, employer-based, discounted premium program designed to provide access to private health insurance for employed but uninsured Floridians. The program will use a managed competition model and will provide health insurance for 1.1 million uninsured Floridians with incomes at or below 250 percent of the Federal poverty level. Health plans (indemnity and HMO) will be offered by Accountable Health Partnerships and administered by Community Health Purchasing Alliances.

Date Received: February 10, 1994.

Date Awarded: September 15, 1994.

Implementation Date: The implementation date has not yet been set, pending approval by the State legislature.

State Contact: Tom Wallace, Agency for Health Care Administration, 325 John Knox Road, Tallahassee, Florida 32303-4131, (904) 922-5760.

Federal Project Officer: Alisa Adamo, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: QUEST—Hawaii.

Description: The Hawaii QUEST program provides seamless coverage to those persons previously covered through Federal and State programs and those who are uninsured. This is accomplished through expansion of the Medicaid income eligibility level to 300 percent of the Federal poverty level and an elimination of categorical requirements and the assets test. The State is providing Medicaid services through a managed care delivery system.

Date Received: April 20, 1993.

Date Awarded: July 16, 1993.

Implementation Date: August 1, 1994.

State Contact: Winifred N. Odo,

Administrator, Med-QUEST Division, Department of Human Services, P.O. Box 339, Honolulu, Hawaii 96809-0339, (808) 586-5391.

Federal Project Officer: Ron Lambert, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Kentucky Medicaid Access and Cost Containment Demonstration Project—Kentucky.

Description: The Kentucky program will expand Medicaid eligibility to 100 percent of the Federal poverty level.

Date Received: March 30, 1993.

Date Awarded: December 9, 1993.

Implementation Date: An implementation date has not yet been set, pending approval by the State legislature.

State Contact: Masten Childers, II, Commissioner, Department for Medicaid Services, Cabinet for Human Resources, Commonwealth of Kentucky, Frankfort, Kentucky 40621-0001, (502) 564-4321.

Federal Project Officer: Penny Pine, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Description: Oregon's demonstration program expands Medicaid eligibility and shifts delivery of Medicaid services into fully and partially capitated plans and primary care case management programs. The State utilized a public prioritization process to establish the service package provided under Medicaid.

Date Received: August 19, 1991.

Date Awarded: March 19, 1993.

Implementation Date: February 1, 1994.

State Contact: Lynn Read, Office of Medical Assistance Programs, 500 Summer Street NE., Salem, Oregon 97310-1014, (513) 945-6587.

Federal Project Officer: Ron Deacon, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: RlTe Care—Rhode Island.

Description: The RlTe Care program provides coverage to pregnant women and children up to 6 years of age with family incomes at or below 250 percent of the Federal poverty level. Individuals eligible for the program are required to enroll in prepaid health plans which contract with the State to provide comprehensive health services for a fixed cost per enrollee per month. Eligible individuals are offered a choice of health plans in which they will enroll.

Date Received: July 2, 1993.

Date Awarded: November 1, 1993.

Implementation Date: August 1, 1994.

State Contact: Robert J. Fallon, Director, Department of Human Services, 600 New London Avenue, Cranston, Rhode Island 02920. (401) 464-2121.

Federal Project Officer: Debbie Van Hoven, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: TennCare—State of Tennessee.

Description: TennCare is a statewide program to provide health care benefits to Medicaid beneficiaries, uninsured State residents, and those whose medical conditions make them uninsurable. All TennCare enrollees receive services through capitated managed care plans that are either health maintenance organizations (HMOs) or preferred provider organizations (PPOs).

Date Received: June 17, 1993.

Date Awarded: November 18, 1993.

Implementation Date: January 1, 1994.

State Contact: Manny Martins, Tennessee Department of Health, Bureau of Medicaid, 729 Church Street, Nashville, Tennessee 37247-6501, (615) 741-0213.

Federal Project Officer: Rose Hatten, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

5. Disapproved Proposals

No comprehensive health reform proposals have been disapproved since January 1, 1993.

B. Other Section 1115 Demonstration Proposals

1. New Proposals

Demonstration Title/State: Family Planning Proposal—New Mexico.

Description: New Mexico proposes to extend Medicaid eligibility for family planning services to all women of childbearing age with income at or below 185 percent of the federal poverty level.

Date Received: November 1, 1994.

State Contact: Bruce Weydemeyer, Director, Division of Medical Assistance, P.O. Box 2348, Santa Fe, New Mexico 87504-2348, (505) 827-3106.

Federal Project Officers: Alisa Adamo, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Georgia's Children's Benefit Plan.

Description: The State of Georgia submitted a Section 1115 proposal entitled "Georgia Children's Benefit Plan" that provides preventive and primary care services for children 1 through 5 years of age who are between 133 and 185 percent of Federal poverty level. The duration of the waiver is 5 years with proposed project dates of July 1, 1995 to June 30, 2000.

Date Received: December 12, 1994.

State Contact: Jacquelyn Foster-Rice, Georgia Department of Medical Assistance, Maternal and Child Health, 2 Peachtree Street NW., 27th Floor, Atlanta, Georgia 30303, phone: (404) 651-5785, FAX: (404) 656-4913.

Federal Project Officer: Maria Boulmetis, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows Building, 6325 Security Boulevard, Baltimore, Maryland 21207.

2. Pending Proposals

Demonstration Title/State: Demonstration Project for Family Planning and Reproductive Services—Maryland.

Description: Maryland proposes to extend Medicaid eligibility for family planning and preventive reproductive services for a 5-year period to women who are Medicaid eligible due to their pregnancy and remain Medicaid eligible 60 days postpartum.

Date Received: June 11, 1994.

State Contact: Jane Forman, Department of Health and Mental

Hygiene, room 137, 201 West Preston Street, Baltimore, Maryland 21201, (410) 225-6538.

Federal Project Officer: Alisa Adamo, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207. Demonstration Title/State: High Cost User Initiative—Maryland.

Description: Maryland proposes to implement an integrated case management system for high-cost, high-risk Medicaid beneficiaries.

Date Received: July 8, 1994.

State Contact: John Folkemer, Maryland Department of Health and Mental Hygiene, Office of Medical Assistance Policy, 201 West Preston Street, Baltimore, Maryland 21201, (410) 225-5206.

Federal Project Officer: Rosana Hernandez, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Minnesota Long Term Care Options Project/Minnesota.

Description: The State proposes to integrate long-term care and acute care services under combined Medicare and Medicaid capitation payments for elderly dual eligibles.

Date Received: April 18, 1994.

State Contact: Pamela Parker, Minnesota Department of Human Services, Human Services Building, 444 Lafayette Road North, St. Paul, Minnesota 55155, (612) 296-2140.

Federal Project Officer: Melissa McNiff, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Pay-in Spenddown Pilot—Ohio.

Description: Ohio proposes to implement a one-county pilot program to allow the medically needy to pay in spenddown amounts in order to qualify for Medicaid to simplify eligibility administration.

Date Received: April 28, 1994.

State Contact: Jeanne Carroll, Ohio Department of Human Services, 30 East Broad Street, Columbus, Ohio 43266, (614) 466-6024.

Federal Project Officer: David Walsh, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: CHOICES—Citizenship, Health, Opportunities, Interdependence, Choices and Supports—Rhode Island.

Description: Rhode Island proposes to consolidate all current State and Federal funding streams for adults with developmental disabilities under one program using managed care/managed competition.

Date Received: April 5, 1994.

State Contact: Susan Babin, Department of Mental Health, Retardation, and Hospitals, Division of Developmental Disabilities, 600 New London Avenue, Cranston, Rhode Island 02920, (401) 464-3234.

Federal Project Officer: Melissa McNiff, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Virginia. Description: Virginia proposes to expand Medicaid eligibility to children in the State funded KIDS CARE program, and provide them with a limited Medicaid benefit restricted to ambulatory services.

Date Received: May 18, 1994.

State Contact: Janet Kennedy, Suite 1300, 600 East Broad Street, Richmond, Virginia 23219, (804) 371-8855.

Federal Project Officer: Maria Boulmetis, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Family Planning Demonstration—Washington.

Description: The State proposes to provide family planning services to low-income women for an additional 10 months postpartum, extending total coverage for such services to one year.

Date Received: April 21, 1994.

State Contact: Claudia Lewis, Medical Assistance Administration, Division of Client Services, P.O. Box 45530, Olympia, Washington 98504-5530, (206) 586-2751.

Federal Project Officer: Maria Boulmetis, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Wisconsin.

Description: The State proposes to limit the amount of exempt funds that may be set aside as burial and related expenses for SSI-related Medicaid recipients.

Date Received: March 9, 1994.

State Contact: Jean Sheil, Division of Economic Support, Wisconsin Department of Health and Social Services, 1 West Wilson Street, room 650, P.O. Box 7850, Madison, Wisconsin 53707, (608) 266-0613.

Federal Project Officer: J. Donald Sherwood, Health Care Financing

Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

3. Approved Conceptual Proposals (Award of Waivers Pending)

Demonstration Title/State: Health Services for Children with Special Needs—District of Columbia.

Description: The District of Columbia proposes to implement a specialized managed care program, targeted to the needs of Medicaid-eligible disabled children. Enrollment would be mandatory. The District has been given a 1-year grant to help further develop the model proposed in its application.

Date Received: March 25, 1994.

Date Awarded: August 5, 1994.

State Contact: Deborah Jones, Project Officer, Commission on Health Care Finance, 2100 Martin Luther King Jr. Avenue, SE., suite 302, Washington, DC 20020, (202) 727-2240.

Federal Project Officer: Phyllis Nagy, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

4. Approved Proposals

Demonstration Title/State: The Program for All-Inclusive Care for the Elderly (PACE)—California (Sutter SeniorCare, Sacramento).

Description: The PACE program is a managed care service delivery system for the frail elderly who live in the community but are certified for institutionalization in a nursing home. Most of the 300 participants are dually eligible for Medicare and Medicaid, and all are being assessed for eligibility for nursing home placement according to State standards.

Date Received: July 14, 1993.

Date Awarded: May 1, 1994.

Implementation Date: May 1, 1994.

State Contact: John Rodriguez, Deputy Director, Medical Care Services, California Department of Health Services, 7140 P Street, room 600, Sacramento, California 95814, (916) 654-2254.

Federal Project Officer: Stefan Miller, Health Care Financing Administration, Office of Research and Demonstrations, room 2-F-4 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Nemours Children's Program—Delaware.

Description: The State has developed a public/private managed care system which enrolls, on a capitated basis, Medicaid-eligible children in pediatric clinics. The Nemours Foundation developed the clinics and is subsidizing a portion of the service cost.

Date Received: October 13, 1992.
Date Awarded: July 27, 1993.
Implementation Date: December 1993.
State Contact: Phillip P. Soule,
Deputy Director, Delaware Department
of Social Services, 1901 North Dupont
Highway, New Castle, Delaware 19720,
(301) 577-4900.

Federal Project Officer: David Walsh,
Health Care Financing Administration,
Office of Research and Demonstrations,
2302 Oak Meadows, 6325 Security
Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State:
Preconception Project—Florida.

Description: This project is a
demonstration and evaluation of a
preconceptional intervention program.
Resource mothers will guide high-risk
clients, during home visits, through
various risk reduction activities over a
2-year period. The objective is to
significantly reduce the incidence of
low birth weight infants in the target
population.

Date Received: July 31, 1991.

Date Awarded: June 28, 1994.

Implementation Date: June 1, 1994.

State Contact: Marshall E. Kelley,
Director of Medicaid, P.O. Box 12800,
Tallahassee, Florida 32317-2800, (904)
488-3560.

Federal Project Officer: Rosana
Hernandez, Health Care Financing
Administration, Office of Research and
Demonstrations, 2302 Oak Meadows,
6325 Security Boulevard, Baltimore,
Maryland 21207.

Demonstration Title/State: Drug
Utilization Review Program—Iowa.

Description: Under this program, the
State conducts on-line prospective drug
utilization review. There are 250
pharmacies that participate in the
project either as randomized control or
experimental entities.

Date Received: June 1992.

Date Awarded: September 30, 1992.

Implementation Date: June 13, 1994.

State Contact: Don Herman, State
Medicaid Director, East 13th and
Walnut, Hoover Building, 5th Floor, Des
Moines, Iowa 50319, (515) 281-8794.

Federal Project Officer: Kathleen
Gondek, Health Care Financing
Administration, Office of Research and
Demonstrations, 2302 Oak Meadows,
6325 Security Boulevard, Baltimore,
Maryland 21207.

Demonstration Title/State: Primary
and Preventive Care for Kids—
Maryland.

Description: Maryland has developed
a primary and preventive care program
that expands Medicaid eligibility for
those services provided to children born
after September 30, 1983, with family
incomes below 185 percent of the
Federal poverty level.

Date Received: February 8, 1993.

Date Awarded: August 9, 1993.

Implementation Date: October 1993.

State Contact: Joseph M. Millstone,
Director, Medical Care Policy
Administration, Maryland Department
of Health and Mental Hygiene, 201 West
Preston Street, Baltimore, Maryland
21201, (410) 235-1432.

Federal Project Officer: Sherrie Fried,
Health Care Financing Administration,
Office of Research and Demonstrations,
2302 Oak Meadows, 6325 Security
Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Family
Planning Project—South Carolina.

Description: South Carolina's project
extends Medicaid eligibility for family
planning services to all women with
incomes below 185 percent of the
Federal poverty level who have had one
or more Medicaid reimbursed
pregnancies.

Date Received: June 23, 1993.

Date Awarded: December 7, 1993.

Implementation Date: October 1994.

State Contact: Rob Erlich, Health and
Human Services Finance Commission,
P.O. Box 8206, Columbia, South
Carolina 29202-8206, (803) 253-4129.

Federal Project Officer: Alisa Adamo,
Health Care Financing Administration,
Office of Research and Demonstrations,
2302 Oak Meadows, 6325 Security
Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Medicaid
Direct Purchase Vaccine Program
(MDPVP)—Virginia.

Description: The MDPVP streamlines
the reimbursement process for vaccine,
by allowing States to directly reimburse
manufacturers for vaccines. Vaccine
manufacturers send to each private
physician who treats children on
Medicaid a shipment of vaccines on
consignment at no cost to the physician.
Physicians then bill Medicaid for the
office visit when they inoculate
children, but not for the cost of the
vaccine. The Medicaid program
reimburses the manufacturer at a
discounted rate, according to the
number of vaccines administered. The
manufacturer then sends quantities of
the vaccines to the private physicians to
replace the amounts used.

Date Received: August 25, 1992.

Date Awarded: November 4, 1992.

Implementation Date: March 1, 1993.

State Contact: Dee Holmes,
Department of Medical Assistance
Services, 600 East Broad Street,
Richmond, Virginia 23219, (804) 371-
8850.

Federal Project Officer: Alisa Adamo,
Health Care Financing Administration,
Office of Research and Demonstrations,
2302 Oak Meadows, 6325 Security
Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Drug
Utilization Program—Washington.

Description: Under this program, the
State allows for pharmacy
reimbursement to cognitive services,
including pharmacist intervention with
patient's drug-related problems. The
project encompasses 200 pharmacies,
half of which are experimental and the
rest are the control group.

Date Received: June 1992.

Date Awarded: September 30, 1992.

Implementation Date: February 1,
1994.

State Contact: Garth Holmes, Medical
Assistance Administrator, 623 8th
Avenue SE., P.O. Box 45510, Olympia,
Washington 98504, (206) 586-7034.

Federal Project Officer: Kathleen
Gondek, Health Care Financing
Administration, Office of Research and
Demonstrations, 2302 Oak Meadows,
6325 Security Boulevard, Baltimore,
Maryland 21207.

5. Disapproved Proposals

Demonstration Title/State: Iowa.

Description: Iowa sought to waive the
transfer of assets requirements, to
extend the look-back and penalty
periods from 30 to 60 months, and make
other changes related to the penalty
periods.

Date Received: April 5, 1993.

Date of Disapproval: December 23,
1993.

Federal Project Officer: J. Donald
Sherwood, Health Care Financing
Administration, Office of Research and
Demonstrations, 2302 Oak Meadows,
6325 Security Boulevard, Baltimore,
Maryland 21207.

Demonstration Title/State: Long Term
Care—Maine.

Description: Maine sought to continue
Medicaid eligibility of persons residing
in nursing homes to coincide with the
State's efforts to eliminate State plan
coverage of certain optional eligibility
groups. A waiver would have protected
current beneficiaries from the proposed
change in the State plan.

Date Received: May 11, 1993.

Date of Disapproval: July 13, 1993.

Federal Project Officer: J. Donald
Sherwood, Health Care Financing
Administration, Office of Research and
Demonstrations, 2302 Oak Meadows,
6325 Security Boulevard, Baltimore,
Maryland 21207.

Demonstration Title/State: Minnesota.

Description: The State sought to: (1)
increase the look-back period for asset
transfers in determining Medicaid
nursing facility eligibility from 36 to 60
months; (2) to treat the uncompensated
transfers of excluded assets in the same
manner as non-excluded assets; and (3)
to apply any resulting penalty period to

the loss of coverage of all Medicaid services, not just long term care services.

Date Received: October 14, 1993.

Date of Disapproval: April 7, 1994.

Federal Project Officer: J. Donald Sherwood, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

Demonstration Title/State: Project TOOTH—The Project Toward Occupational Opportunity Through Health—New Hampshire.

Description: The State proposed to provide comprehensive dental treatment for approximately 200 AFDC/JOBS program participants whose disfiguring dental status presented the major impediment to their employment following job training.

Date Received: December 6, 1993.

Date of Disapproval: April 19, 1994.

Federal Project Officer: Debbie Van Hoven, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.

III. Requests for Copies of a Proposal

Requests for copies of a specific Medicaid proposal should be made to the State contact listed for the specific proposal. If further help or information is needed, inquiries should be directed to the HCFA at the address above.

(Catalog of Federal Domestic Assistance Program, No. 93.779; Health Financing Research, Demonstrations, and Experiments.)

Dated: January 13, 1995.

Bruce C. Vladeck,

Administrator, Health Care Financing Administration.

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Health Resources and Services Administration

Program Announcement and Proposed Minimum Percentages for "High Rate" and "Significant Increase in the Rate" for Implementation of the General Statutory Funding Preference for Grants for Residency Training in Preventive Medicine for Fiscal Year 1995

The Health Resources and Services Administration (HRSA) announces that applications will be accepted for fiscal year (FY) 1995 Grants for Residency Training in Preventive Medicine under the authority of section 763, title VII of the Public Health Service Act, as amended by the Health Professions

Education Extension Amendments of 1992, Pub. L. 102-408, dated October 13, 1992. Comments are invited on the proposed minimum percentages for "high rate" and "significant increase in the rate" for implementation of the general statutory funding preference.

Approximately \$1,700,000 will be available in FY 1995 for this program. It is anticipated that the \$1,700,000 will be available to support approximately 12 competing awards averaging \$135,000.

Purpose

Section 763 of the Public Health Service Act authorizes the Secretary to make grants to meet the costs of projects—

(1) to plan and develop new residency training programs and to maintain or improve existing residency training programs in preventive medicine and dental public health; and

(2) to provide financial assistance to residency trainees enrolled in such programs.

This program announcement is limited to residency training programs in preventive medicine.

The period of Federal support will not exceed 3 years.

Eligibility

To be eligible for a Grant for Residency Training in Preventive Medicine, the applicant must be an accredited public or private nonprofit school of allopathic or osteopathic medicine or a school of public health located in a State. Also, an applicant must demonstrate that it has, or will have by the end of 1 year of grant support, full-time faculty with training and experience in the fields of preventive medicine and support from other faculty members trained in public health and other relevant specialties and disciplines. To receive support, programs must meet the requirements of regulations as set forth in 42 CFR part 57, subpart EE.

Project Requirements

A project supported by this grant program must be conducted in accordance with the following requirements:

(a) Each project must have a project director who works at the grantee institution on an appointment consistent with other major departments, heads or will head the unit, and has relevant training and experience in preventive medicine.

(b) Each project must have an appropriate administrative and organizational plan and appropriate

staff and facility resources for the achievement of stated objectives.

(c) Each project must systematically evaluate the educational program, including the performance and competence of trainees and faculty, the administration of the program, and the degree to which program and educational objectives are met.

(d) All field experiences must be supervised by a qualified faculty member.

(e) All applicants must either demonstrate an increase in minority and disadvantaged residents or show evidence of efforts to recruit minority and disadvantaged residents.

National Health Objectives for the Year 2000

The Public Health Service (PHS) is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS led national activity for setting priority areas. This program is related to the priority area of Health Promotion and Preventive Services. Potential applicants may obtain a copy of *Healthy People 2000* (Full Report; Stock No. 017-001-00474-0) or *Healthy People 2000* (Summary Report; Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325 (Telephone 202-783-3238).

Education and Service Linkage

As part of its long-range planning, HRSA will be targeting its efforts to strengthening linkages between U.S. Public Health Service education programs and programs which provide comprehensive primary care services to the underserved.

Smoke-Free Workplace

The Public Health Service strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

Review Criteria

The review of applications will take into consideration the following criteria:

1. The potential effectiveness of the proposed project in carrying out the training purposes of section 763 of the PHS Act.
2. The extent of responsiveness to the project requirements.
3. The administrative and management capability of the applicant