

will bill the State on an semi-annual basis. We anticipate that most of these surveys will be referred to the State and that there will be little Federal activity in this area.

- The State's proportionate share of general overhead costs for the items and services it benefits from and only for those paid for out of registration or certificate fees we collected.

In order to estimate the State's proportionate share of the general overhead costs, we determined the ratio of laboratories in the State to the total number of laboratories nationally. In that the general overhead costs apply equally to all laboratories, we determined the cumulative overhead costs that should be borne by the State of New York.

The State of New York has agreed to pay us its pro rata share of the overhead costs and anticipated costs of actual validation and complaint investigation surveys. A final reconciliation for all laboratories and all expenses will be made. We will reimburse the State for any overpayment or bill it for any balance.

In accordance with the provisions of Executive Order 12866, this notice was not reviewed by the Office of Management and Budget.

Authority: Section 353 of the Public Health Service Act (42 U.S.C. 263a).

Dated: August 2, 1995.

Bruce C. Vladeck,

Administrator, Health Care Financing Administration.

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Public Health Service

Centers for Disease Control and Prevention; Statement of Organization, Functions, and Delegations of Authority

Part H, Chapter HC (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (45 FR 67772-67776, dated October 14, 1980, and corrected at 45 FR 69296, October 20, 1980, as amended most recently at 60 FR 34550-51, dated July 3, 1995) is amended to reflect (1) the establishment of the Office of Health Communication within the Office of the Director, National Center for Injury Prevention and Control (NCIPC); and (2) the revision of the functional statement for the Office of Statistics, Programming, and Graphics; and (3) the retitling of the Office of Statistics, Programming, and

Graphics to the Office of Statistics and Programming.

Section HC-B, *Organization and Functions*, is hereby amended as follows:

After the functional statement for the *Office of Program Management and Operations (HCE13)*, insert the following:

Office of Health Communication (HCE14). (1) Plans, develops, coordinates, and evaluates NCIPC's marketing, public affairs, publications, graphics, and technical information activities for intentional injury, unintentional injury, and acute care and rehabilitation; (2) in conjunction with the CDC Office of Health Communication, collaborates with organizations in the public and private sectors to market injury prevention and control messages; (3) develops educational material on injury prevention and control, including print and video products, to be used in the center's marketing activities; (4) disseminates injury control information to public and professional audiences; (5) in conjunction with the CDC Office of Public Affairs, interacts with the news media to ensure that injury topics are covered accurately and remain high on the public agenda; (6) provides expert consultation on the effective use and design of graphic materials for presentations, publications, and exhibits; (7) designs and produces professional quality graphic materials for use in NCIPC presentations and publications and designs and electronically typesets publications; (8) develops, maintains, and manages a graphics information retrieval system that allows ready access to slides and graphic presentations on injury topics; (9) provides expert consultation on the development and production of publications; (10) manages the clearance, editing, and production of NCIPC publications; (11) manages NCIPC's technical information resources, including developing and maintaining injury-related databases and a library of information on injury-related topics; (12) coordinates the center's information sharing activities, including involvement on INTERNET; (13) serves as NCIPC liaison with the CDC Office of Public Affairs, the CDC Office of Health Communication, and other Centers, Institute, and Offices on matters of marketing, public affairs, graphics, publications, and technical information resources; (14) in carrying out these functions, collaborates with other PHS agencies, Federal and State departments and agencies, and private organizations, as appropriate.

Office of Statistics and Programming (HCE2). (1) Develops, evaluates, and implements innovative statistical, computer programming, and data management methods for application to injury surveillance, epidemiologic studies, and programmatic activities; (2) provides expert consultation in statistics, programming, and data management to all NCIPC staff; (3) collaborates with NCIPC scientists on epidemiologic studies and provides associated technical advice in the areas of study design, sampling, and the collection, management, analysis, and interpretation of injury data; (4) coordinates, manages, maintains and provides tabulations from national surveillance systems and other data sources that contain national, State and local data on injury morbidity and mortality; (5) prepares and produces high quality statistical reports and publications material for information presentation and dissemination by NCIPC staff; (6) advises the Office of the Director, NCIPC, in the area of data and systems management and on surveillance and statistical analysis issues relevant to injury program planning and evaluation; (7) in carrying out the above functions, collaborates with other Divisions/Offices in NCIPC, CDC Centers/Institute/Offices, PHS agencies, and other Federal departments and agencies, and private organizations as appropriate.

Office of the Director (HCE21). (1) Plans, directs, and manages the activities of the Office of Statistics and Programming and provides administrative and management support; (2) reviews reports, publications, and other materials for statistical integrity and validity; (3) makes recommendations and provides technical advice to the Office of the Director, NCIPC, on statistical and surveillance issues relevant to injury prevention and control; (4) coordinates Office activities with other Offices and Divisions within NCIPC, other CDC components, PHS agencies, other Federal agencies, State and local health departments, and other public and private organizations, as appropriate.

Effective Date: August 15, 1995.

David Satcher,

Director, Centers for Disease Control and Prevention.

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