

certain disabled individuals who have exhausted other entitlement for the 12 months beginning January 1, 1996 is \$289.

The monthly premium for those individuals entitled to a 35 percent reduction in the monthly premium for the 12-month period beginning January 1, 1996 is \$188.

III. Statement of Actuarial Assumptions and Bases Employed in Determining the Monthly Premium Rate

As discussed in section I of this notice, the monthly Medicare Part A premium for 1996 is equal to the estimated monthly actuarial rate for 1996 rounded to the nearest multiple of \$1. The monthly actuarial rate is defined to be one-twelfth of the average per capita amount that the Secretary estimates will be paid from the Federal Hospital Insurance Trust Fund for services performed and related administrative costs incurred in 1996 for individuals age 65 and over who will be entitled to benefits under the hospital insurance program. Thus, the number of individuals age 65 and over who will be entitled to hospital insurance benefits and the costs incurred on behalf of these beneficiaries must be projected to determine the premium rate.

The principal steps involved in projecting the future costs of the hospital insurance program are (a) establishing the present cost of services furnished to beneficiaries, by type of service, to serve as a projection base; (b) projecting increases in payment amounts for each of the various service types; and (c) projecting increases in administrative costs. Establishing historical Medicare Part A enrollment and projecting future enrollment, by type of beneficiary, is part of this process.

We have completed all of the above steps, basing our projections for 1996 on (a) current historical data and (b) projection assumptions under current law from the Midsession Review of the President's Fiscal Year 1996 Budget. It is estimated that in calendar year 1996, 32.496 million people age 65 and over will be entitled to Medicare Part A benefits (without premium payment), and that these individuals will, in 1996, incur \$112.688 billion of benefits for services performed and related administrative costs. Thus, the estimated monthly average per capita amount is \$288.98 and the monthly premium is \$289. The monthly premium for those individuals eligible to pay this premium reduced by 35 percent is \$188.

IV. Costs to Beneficiaries

The 1996 Medicare Part A premium is about 11 percent higher than the \$261 monthly premium amount for the 12-month period beginning January 1, 1995.

We estimate that there will be, in calendar year 1996, approximately 304,000 enrollees who will voluntarily enroll in Medicare Part A by paying the full premium and who do not otherwise meet the requirements for entitlement. An additional 5,000 enrollees will be paying the reduced premium. The estimated overall effect of the changes in the premium will be a cost to these voluntary enrollees of about \$100 million.

V. Impact Statement

This notice merely announces amounts required by statute. This notice is not a proposed rule or a final rule issued after a proposal, and it does not alter any regulation or policy. Therefore, we have determined, and certify, that no analyses are required under the Regulatory Flexibility Act (5 U.S.C 601 through 612) or section 1102(b) of the Act.

In accordance with the provisions of Executive Order 12866, this notice was reviewed by the Office of Management and Budget.

Authority: Sections 1818(d)(2) and 1818A(d)(2) of the Social Security Act (42 U.S.C. 1395i-2(d)(2) and 1395i-2a(d)(2)). (Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance)

Dated: September 26, 1995.

Bruce C. Vladeck,
Administrator, Health Care Financing Administration.

Dated: September 29, 1995.

Donna E. Shalala,
Secretary.

[FR Doc. 95-25520 Filed 10-13-95; 8:45 am]

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Health Resources and Services Administration

Advisory Council; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Public Law 92-463), announcement is made of the following National Advisory bodies scheduled to meet during the month of November 1995:

Name: National Advisory Council on Migrant Health

Date and Time: November 3-4, 1995, 8 a.m.

Place: Westchester Marriott Hotel, 670 White Plains Road, Tarrytown, New York, 914/631-2200.

The meeting is open to the public.

Agenda: The agenda includes an overview of Council general business activities and priorities; the discussion of current and development of future National Advisory Council on Migrant Health Recommendations. A Public Hearing for Section 329 grantees and other organizations is scheduled for Friday, November 3, 3 p.m. to 6 p.m., and a Farmworker Public Hearing is scheduled for Saturday, November 4, 8 a.m. to 12 p.m. at the above hotel.

The Council is soliciting oral and written comments for testimony; specific to migrant/seasonal farmworker health and migrant health program issues.

Anyone requiring information regarding the subject Council should contact Susan Hagler, Migrant Health Program, Staff Support to the National Advisory Council on Migrant Health, Bureau of Primary Care, Health Resources and Services Administration, 4350 East West Highway, Room 7-A51, Rockville, Maryland 20857, Telephone (301) 594-4302.

* * * * *
Name: Maternal and Child Health Research Grants Review Committee

Date and Time: November 6-8, 1995, 9 a.m.

Place: Ramada Inn at Congressional Park, 1775 Rockville Pike, Rockville, Maryland 20852.

Open on November 6, 1995, 9 a.m.-10 a.m. Closed for remainder of meeting.

Agenda: The open portion of the meeting will cover opening remarks by the Director, Division of Science, Education and Analysis, Maternal and Child Health Bureau, who will report on program issues, congressional activities and other topics of interest to the field of maternal and child health. The meeting will be closed to the public on November 6 at 10 a.m. for the remainder of the meeting for the review of grant applications. The closing is in accordance with the provisions set forth in section 552b(c)(6), Title 5 U.S.C., and the Determination by the Associate Administrator for Policy Coordination, Health Resources and Services Administration, pursuant to Public Law 92-463.

Anyone requiring information regarding the subject Council should contact Gontran Lamberty, Dr.P.H., Executive Secretary, Maternal and Child Health Research Grants Review Committee, Room 18A-55, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 443-2190.

Agenda Items are subject to change as priorities dictate.

Dated: October 9, 1995.

Jackie E. Baum,

Advisory Committee Management Officer, HRSA.

[FR Doc. 95-25500 Filed 10-13-95; 8:45 am]

BILLING CODE 4160-15-P

Public Health Service**Food and Drug Administration****Statement of Organization, Functions, and Delegations of Authority**

Part H, Chapter HF (Food and Drug Administration) of the Statement of Organization, Functions, and Delegations of Authority for the Department of Health and Human Services (35 FR 3685, February 25, 1970, and 56 FR 29484, June 27, 1991, as amended most recently in pertinent part at 59 FR 17106, April 11, 1994), is amended to reflect the following reorganization within the Center for Devices and Radiological Health (CDRH), Office of Operations, Food and Drug Administration (FDA).

The Center for Devices and Radiological Health is establishing a new office to place all of the Center's central management support functions within a single organization, contributing to improved support to CDRH's line functions. A new Office of Systems and Management is being established. The current Office of Information Systems and the Office of Management Services will be merged and their functions incorporated into the new office. The goals of the new organizations are to accomplish a number of reinvention initiatives including, streamlining, empowering, delayering and creating a more effective, customer service oriented organization. The new Office will also provide greater flexibility to respond to changing priorities, a structure that is more responsive, and maintenance of an acceptable level of service while accommodating personnel losses.

Under section HF-B, Organization:

1. Delete subparagraphs Office of Management Services (HFW11), and Office of Information Systems (HFW15) under paragraph Center for Devices and Radiological Health (HFW), in their entirety.

2. Insert the following new subparagraph under paragraph *Office of Operations (HFA9), Center for Devices and Radiological Health (HFW)* reading as follows:

Office of Systems and Management (HFW11). Advises the Center Director regarding all administrative management matters.

Plans, develops, and implements Center management policies and programs concerning financial and human resource management, contracts and grants management, conference management, occupational safety, organizational, and general office services support.

Develops and implements the Center's long-range, strategic, and operational plans.

Develops and applies evaluation techniques to measure the effectiveness of Center programs.

Provides general information and technical publication services to the Center.

Plans, conducts, and coordinates Center committee management activities.

Determines and implements Center strategy and utilization of information management resources.

Designs administrative, scientific, and technical information systems in support of Center programs.

Provides assistance to Center staff in accessing information necessary to carry out the Center's mission.

3. 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: September 1, 1995.

David A. Kessler,

Commissioner of Food and Drugs.

[FR Doc. 95-25501 Filed 10-13-95; 8:45 am]

BILLING CODE 4160-01-F

Substance Abuse and Mental Health Services Administration**Center for Substance Abuse Prevention Conference Review Committee Meeting in October**

AGENCY: Substance Abuse and Mental Health Services Administration (SAMHSA), HHS.

ACTION: Cancellation of meeting.

SUMMARY: Public notice was given in the Federal Register on October 5, 1995 (Vol. 60, No. 193, page 52201) that the Center for Substance Abuse Prevention Conference Review Committee would be meeting on October 23-27 at the Residence Inn, Bethesda, Maryland. The meeting has subsequently been cancelled.

Dated: October 10, 1995.

Jeri Lipov,

Committee Management Officer, Substance Abuse and Mental Health Services Administration.

[FR Doc. 95-25540 Filed 10-13-95; 8:45 am]

BILLING CODE 4162-20-P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT**Office of the Assistant Secretary for Administration**

[Docket No. 3918-N-05]

Privacy Act of 1974—Notice of Amended System of Records

AGENCY: Office of the Assistant Secretary for Administration, HUD.

ACTION: Notice; Proposed amendment to an existing system of records.

SUMMARY: Pursuant to the provisions of the Privacy Act of 1974, as amended (5 U.S.C. 552a), the Assistant Secretary for Public and Indian Housing is amending the system of records titled, "Tenant Eligibility Verification Files"—HUD/PIH-1, previously published at 60 FR 21545; May 2, 1995. The amended notice: (1) Describes the categories of records in the system more specifically and (2) adds a "Purpose" section to the system of records notice. Further, the revised system of records notice contains some technical amendments: A more specific system location and more specific references to the Internal Revenue Service and Social Security Administration system of records. The system of records notice below supersedes the May 2, 1995, system of records notice.

This system of records contains computer matching and tenant eligibility verification records necessary to support the identification of tenants who have been or may be obtaining excessive rental housing assistance. The system of records also supports referrals of information concerning those tenants to entities that administer HUD rental assistance programs (i.e., housing agencies [which includes public housing agencies and Indian housing authorities], owners of subsidized multifamily projects, and management agents) and to law enforcement agencies for possible administrative or legal actions, as appropriate. However, HUD may not redisclose to entities that administer HUD programs information that HUD obtains from the Social Security Administration (SSA) and the Internal Revenue Service (IRS), pursuant to 26 U.S.C. 6103 (1)(7)(d)(ix)—a section of the Internal Revenue Code added by section 13403 of the Omnibus Budget Reconciliation Act of 1993, Pub. L. 103-66.

The exemptions of HUD/PIH-1 from certain provisions of the Privacy Act of 1974, described at 59 FR 9406; February 28, 1994, continue to apply to HUD/PIH-1, as amended.