

2. Conducting longer-term (e.g., 6–12 months turn-around), more comprehensive applied policy research studies;

3. Developing informational and educational materials, including monographs and summary reports, to help link policymakers and the BPHC audiences identified above with sources of information about primary care.

Subjects of such papers, studies, and reports are expected to include, for example:

- Monitoring the impact of changes in financing and delivery of health care on vulnerable populations;
- Access to care for underserved populations—status of “safety net” services;
- The changing role of Federal programs in health care generally, and adaptation to managed care;
- Prevention strategies for underserved and vulnerable populations (e.g., homeless and persons with HIV disease);
- Assessing quality of care and quality of service;
- Approaches to studying performance and health outcomes;
- Design of program evaluations in primary care; and
- Recruitment and retention of primary care providers.

Criteria for Evaluating Applications

Applications for cooperative agreement support will be reviewed based upon the following evaluation criteria:

- a. Extent to which the applicant shows understanding of policy issues that have a significant effect on primary care for underserved populations, particularly in light of the changing health care and government environment;
- b. Extent to which the applicant demonstrates flexibility to provide quick response to requests and inquiries, for example, as indicated in a management plan and personnel table, and in evidence of ongoing relationships with appropriate personnel so as to minimize start-up time;
- c. Appropriateness and adequacy of qualifications and experience of the proposed project staff and consultants;
- d. Extent to which the applicant demonstrates prior evidence of organizational ability to conduct high-quality policy-relevant studies and disseminate materials in an appropriate format in a timely manner, and to appropriate audiences; and
- e. Reasonableness of costs in relation to the value of proposed activities, including how the proportion of the

proposed budget for direct production of deliverables has been maximized.

Eligible Applicants

Any public or private university or university-based organization may apply. Less than maximum competition is necessary in order to ensure academic rigor and depth of skills, and to gain optimal access to current information, professional research, and informed opinion regarding the delivery of primary health care for minority and vulnerable populations and those with special health care needs. The experience and attributes of a university or university-based organization are essential to the timely and successful completion of the products required.

Number of Awards

It is anticipated that one award will be made. The cooperative agreement for a Primary Care Resource Center will be awarded for a three-year period, and the initial budget period will be eight months. Funding during FY 1996 will be approximately \$200,000; BPHC will consider continuation funding during FY 1997 based on the availability of funds and performance in the first budget period.

Federal Responsibilities Under Cooperative Agreements

Federal responsibilities under the cooperative agreement, in addition to the usual monitoring and technical assistance, will include: (1) Participation in the development and approval of an initial workplan, in accord with changing events in government policies and in the health care environment, and modification thereof, as appropriate; (2) participation in meetings conducted under the cooperative agreement; (3) consultation to and cooperation with the grantee regarding the grantee's preparation and dissemination of materials; and (4) approval of specific studies and projects.

Other Award Information

This program is not subject to review under Executive Order 12372 or the Public Health System Reporting Requirements.

Dated: July 10, 1996.

Ciro V. Sumaya,
Administrator.

[FR Doc. 96-17999 Filed 7-15-96; 8:45 am]

BILLING CODE 4160-15-P

National Institutes of Health

National Institute on Drug Abuse; Notice of Cancellation of Meeting

Notice is given of the cancellation of the meeting of the AIDS Biomedical and Clinical Research Subcommittee, National Institute on Drug Abuse Initial Review Group on July 16–17, 1996 at the Bethesda Marriott, 5151 Pooks Hill Road, Bethesda, MD 20814 which was published in the Federal Register on June 20, 1996, Volume 61 FR 31540.

The meeting was canceled due to a scheduling conflict.

Dated: July 10, 1996.

Susan K. Feldman,

Committee Management Officer, NIH.

[FR Doc. 96-18100 Filed 7-12-96; 11:28 am]

BILLING CODE 4140-01-M

Substance Abuse and Mental Health Services Administration

Cancellation of Receipt Date for SAMHSA Conference Grant Applications

AGENCY: Center for Substance Abuse Prevention and Center for Substance Abuse Treatment, SAMHSA.

ACTION: Cancellation of September 10, 1996 application receipt date.

SUMMARY: As a result of a substantial reduction in appropriations in fiscal year 1996 and uncertainty concerning future funding availability, SAMHSA's Center for Substance Abuse Prevention (CSAP) and Center for Substance Abuse Treatment (CSAT) are canceling the September 10, 1996, receipt date for applications for the following grant programs:

CSAP's Knowledge Dissemination Conference Grants (CFDA No. 93.174)
CSAT's Substance Abuse Treatment Conference Grants (CFDA No. 93.218)

To be placed on a mailing list for an application kit and current programmatic guidelines, potential applicants should contact: National Clearinghouse for Alcohol and Drug Information (NCADI), P.O. Box 2345, Rockville, Maryland 20847-2345, Tele: 1-800-729-6686; TDD: 1-800-487-4889, Web Address: www.health.org.

For information regarding future receipt dates or for programmatic assistance, potential applicants should contact the following individuals:

CSAP: Ms. Luisa del Carmen Pollard,
Division of Community Education,
CSAP, Rockwall II Building, Suite
800, 5600 Fishers Lane, Rockville,
Maryland 20857, Tele: (301) 443-
8824.