

**Health Care Financing Administration****Agency Information Collection Activities: Submission for OMB Review; Comment Request**

**AGENCY:** Health Care Financing Administration, HHS.

In compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.), the Health Care Financing Administration (HCFA), Department of Health and Human Services, has submitted to the Office of Management and Budget (OMB) the following proposals for the collection of information. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

1. *Type of Information Collection Request:* Reinstatement, without change, of previously approved collection for which approval has expired; *Title of Information Collection:* Withholding Medicare Payments to Recover Medicaid Overpayments; *Form No.:* HCFA-R-21; *Use:* Medicaid providers who have received overpayments may terminate or substantially reduce their participation in Medicaid to avoid the State's effort to recover the amounts due. This provision establishes a mechanism for State agencies to recoup the overpayments by withholding Medicare payments to these providers; *Frequency:* On occasion; *Affected Public:* State, local or tribal governments; *Number of Respondents:* 54; *Total Annual Hours:* 81.

2. *Type of Information Collection Request:* Reinstatement, without change, of previously approved collection for which approval has expired; *Title of Information Collection:* Information Collection Requirements in HSQ-110, Acquisition, Protection and Disclosure of Peer Review Organization (PRO) Information-42 CFR Sections 476.104, 476.105, 476.116, and 476.134; *Form No.:* HCFA-R-70; *Use:* "Medicare Disclosure Information, Regulatory" The Peer Review Improvement Act of 1982 authorizes PRO's to acquire information necessary to fulfill their duties and functions and places limits on disclosure of the information. These

requirements are on the PRO to provide notices to the affected parties when disclosing information about them. These requirements serve to protect the rights of the affected parties; *Frequency:* On occasion; *Affected Public:* Business or other for profit; *Number of Respondents:* 53; *Total Annual Hours:* 30,577.

3. *Type of Information Collection Request:* Reinstatement, without change, of previously approved collection for which approval has expired; *Title of Information Collection:* Prepaid Health Plan Cost Report; *Form No.:* HCFA-276; *Use:* These forms are needed to establish the reasonable cost providing covered services to the enrolled Medicare population of an HMO in accordance with Section 1876 of the Social Security Act; *Frequency:* Quarterly, Annually; *Affected Public:* Business or other for profit; *Number of Respondents:* 82; *Total Annual Hours:* 9,934.

4. *Type of Information Collection Request:* Reinstatement, without change, of previously approved collection for which approval has expired; *Title of Information Collection:* Medicare Credit Balance Reporting Requirements; *Form No.:* HCFA-838; *Use:* The collection of credit balance information is needed to ensure that millions of dollars in improper program payments are collected. Approximately 37,600 health care providers will be required to submit a quarterly credit balance report that indicates the amount of improper payments they received that are due to Medicare. The intermediaries will monitor the reports to ensure these funds are collected; *Frequency:* Quarterly; *Affected Public:* Not for profit institutions; *Number of Respondents:* 37,600; *Total Annual Hours:* 902,400.

To obtain copies of the supporting statement and any related forms, E-mail your request, including your address and phone number, to [Paperwork@hcfa.gov](mailto:Paperwork@hcfa.gov), or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections should be sent within 30 days of this notice directly to the OMB Desk Officer designated at the following address: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: August 12, 1996.

Edwin J. Glatzel,  
*Director, Management Planning and Analysis Staff, Office of Financial and Human Resources, Health Care Financing Administration.*

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**Health Resources and Services Administration****Agency Information Collection Activities: Proposed Collection: Comment Request**

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Health Resources and Services Administration (HRSA) will publish periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, call the HRSA Reports Clearance Officer on (301) 443-1129.

Comments are invited on: (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

**Proposed Project****Customer Survey of Entities Eligible To Participate in the Drug Pricing Program—New**

Section 602 of the Veterans Health Care Act of 1992 enacted Section 340B of the Public Health Service (PHS) Act, "Limitation of Prices of Drugs Purchased by Covered Entities." This section provides that a manufacturer that sells outpatient drugs to covered entities must agree to charge a price that will not exceed the amount determined under a statutory formula. The covered entities—certain PHS grantees, disproportionate share hospitals (DSHs), and other selected entities, total approximately 11,000 sites. Most of these entities serve the economically