

ANNUAL BURDEN ESTIMATES—Continued

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Estimated total annual burden hours:	3,648

Additional Information: ACF is requesting that OMB grant a 180 day approval for this information collection under procedures for emergency processing by March 21, 1997. A copy of this information collection, with applicable supporting documentation, may be obtained by calling the Administration for Children and Families, Reports Clearance Officer, Larry Guerrero at (202) 401-6465.

Comments and questions about the information collection described above should be directed to the Office of Information and Regulatory Affairs, ATTN: OMB Desk Officer for ACF, Office of Management and Budget, Paperwork Reduction Project, 725 17th Street N.W., Washington, D.C. 20503, (202) 395-7316.

Dated: February 28, 1997.

Bob Sargis,

Acting Reports Clearance Officer.

[FR Doc. 97-5451 Filed 3-5-97; 8:45 am]

BILLING CODE 4184-01-M

Food and Drug Administration

[Docket No. 97G-0063]

Cerestar Holding Co. B.V., Mitsubishi Chemical Corp., and Nikken Chemicals Co., Ltd.; Filing of Petition for Affirmation of GRAS Status

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that Cerestar Holding Co. B.V., Mitsubishi Chemical Corp., and Nikken Chemicals Co., Ltd., have filed a petition (GRASP 7G0422) proposing to affirm that the use of erythritol is generally recognized as safe (GRAS) as an ingredient in human food.

DATES: Written comments by May 20, 1997.

ADDRESSES: Submit written comments to the Dockets Management Branch (HFA-305), Food and Drug Administration, 12420 Parklawn Dr., rm. 1-23, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: Rosalie M. Angeles, Center for Food Safety and Applied Nutrition (HFS-

205), Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202-418-3107.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (secs. 201(s) and 409(b)(5) (21 U.S.C. 321(s) and 348(b)(5)) and the regulations for affirmation of GRAS status in § 170.35 (21 CFR 170.35), notice is given that Cerestar Holding Co. B.V., Mitsubishi Chemical Corp., and Nikken Chemicals Co., Ltd., c/o Hyman, Phelps & McNamara, 700 13th St. NW., suite 1200, Washington, DC 20005, have filed a petition (GRASP 7G0422) proposing that erythritol be affirmed as GRAS for use as an ingredient in human food.

The petition has been placed on display at the Dockets Management Branch (address above).

Any petition that meets the requirements outlined in §§ 170.30 (21 CFR 170.30) and 170.35 is filed by the agency. There is no prefiling review of the adequacy of data to support a GRAS conclusion. Thus, the filing of a petition for GRAS affirmation should not be interpreted as a preliminary indication of suitability for GRAS affirmation.

The potential environmental impact of this action is being reviewed. If the agency finds that an environmental impact statement is not required and this petition results in a regulation, the notice of availability of the agency's finding of no significant impact and the evidence supporting that finding will be published with the regulation in the Federal Register in accordance with 21 CFR 25.40(c).

Interested persons may, on or before May 20, 1997, review the petition and file comments with the Dockets Management Branch (address above). Two copies of any comments should be filed and should be identified with the docket number found in brackets in the heading of this document. Comments should include any available information that would be helpful in determining whether the substance is, or is not, GRAS for the proposed use. In addition, consistent with the regulations promulgated under the National Environmental Policy Act (40 CFR 1501.4(b)), the agency encourages public participation by review of and comment on the environmental assessment submitted with the petition that is the

subject of this notice. A copy of the petition (including the environmental assessment) and received comments may be seen in the Dockets Management Branch between 9 a.m. and 4 p.m., Monday through Friday.

Dated: February 12, 1997.

George H. Pauli,

Acting Director, Office of Premarket Approval, Center for Food Safety and Applied Nutrition.

[FR Doc. 97-5454 Filed 3-5-97; 8:45 am]

BILLING CODE 4160-01-F

Health Care Financing Administration

[Document Identifier: HCFA-3427]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

AGENCY: Health Care Financing Administration.

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.

Type of Information Collection Request: Reinstatement, with change, of previously approved collection for which approval has expired; **Title of Information Collection:** End Stage Renal Disease (ESRD) Application and Survey and Certification Report Form; **Form No.:** HCFA-3427; **Use:** This form is a facility identification and screening measurement tool used to initiate the certification and recertification of ESRD

facilities. The form is also completed by the Medicare/Medicaid State survey agency to determine facility compliance with ESRD conditions for coverage; *Frequency: Annually; Affected Public: State, Local or Tribal Governments; Number of Respondents: 2,640; Total Annual Responses: 1,056; Total Annual Hours: 2,376.*

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, 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 following address: OMB Human Resources and Housing Branch, *Atten: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.*

Dated: February 27, 1997.

Edwin J. Glatzel,

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

[FR Doc. 97-5532 Filed 3-5-97; 8:45 am]

BILLING CODE 4120-03-M

[OPL-014-N]

Medicare Program; March 24, 1997 Meeting of the Practicing Physicians Advisory Council

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Notice of meeting.

SUMMARY: In accordance with section 10(a)(2) of the Federal Advisory Committee Act, this notice announces a meeting of the Practicing Physicians Advisory Council. This meeting is open to the public.

DATES: The meeting is scheduled for March 24, 1997, from 9 a.m. until 5 p.m. e.s.t.

ADDRESSES: The meeting will be held in the Stonehenge Room, 615F, Hubert H. Humphrey Building, 200 Independence Avenue, S.W., Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT: Pamela J. Gentry, Associate Administrator for External Affairs, Room 435-H, Hubert H. Humphrey Building, 200 Independence Avenue, S.W., Washington, DC 20201, (202) 690-7418.

SUPPLEMENTARY INFORMATION: The Secretary of the Department of Health and Human Services (the Secretary) is mandated by section 1868 of the Social

Security Act to appoint a Practicing Physicians Advisory Council (the Council) based on nominations submitted by medical organizations representing physicians. The Council meets quarterly to discuss certain proposed changes in regulations and carrier manual instructions related to physicians' services, as identified by the Secretary. To the extent feasible and consistent with statutory deadlines, the consultation must occur before publication of the proposed changes. The Council submits an annual report on its recommendations to the Secretary and the Administrator of the Health Care Financing Administration not later than December 31 of each year.

The Council consists of 15 physicians, each of whom has submitted at least 250 claims for physicians' services under Medicare or Medicaid in the previous year. Members of the Council include both participating and nonparticipating physicians, and physicians practicing in rural and underserved urban areas. At least 11 members must be doctors of medicine or osteopathy authorized to practice medicine and surgery by the States in which they practice. Members have been invited to serve for overlapping 4-year terms. In accordance with section 14 of the Federal Advisory Committee Act, terms of more than 2 years are contingent upon the renewal of the Council by appropriate action before the end of the 2-year term.

The Council held its first meeting on May 11, 1992.

The current members are: Richard Bronfman, D.P.M.; Wayne R. Carlsen, D.O.; Gary C. Dennis, M.D.; Catalina E. Garcia, M.D.; Mary T. Herald, M.D.; Ardis Hoven, M.D.; Sandral Hullett, M.D.; Jerilynn S. Kaibel, D.C. (renominated—pending selection); Marie G. Kuffner, M.D.; Marc Lowe, M.D.; Katherine L. Markette, M.D.; Susan Schooley, M.D.; Maisie Tam, M.D. (renominated—pending selection); and Kenneth M. Viste, Jr., M.D. The chairperson is Kenneth M. Viste, Jr., M.D.

The Council agenda will provide for discussion and comment on the following three items:

- Practice expense project.
- Administrative simplifications under the Health Insurance Portability and Accountability Act of 1966 (Public Law 104-191), enacted on August 21, 1996.
- Fraud and abuse provisions under the Health Insurance Portability and Accountability Act.

Council members will also receive an update on legislation, managed care, and Medicaid. In addition, new members will be sworn in to serve on

the Council. Individuals or organizations who wish to make 5-minute oral presentations on the above issues should contact the Executive Director by 12:00 noon, March 13, 1997, to be scheduled. The number of oral presentations may be limited by the time available. A written copy of the oral remarks should be submitted to the Executive Director no later than 12:00 noon, March 19, 1997.

Anyone who is not scheduled to speak may submit written comments to the Executive Director by 12:00 noon, March 19, 1997. The meeting is open to the public, but attendance is limited to the space available.

(Section 1868 of the Social Security Act (42 U.S.C. 1395ee) and section 10(a) of Public Law 92-463 (5 U.S.C. App. 2, section 10(a)) (Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; and Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: February 27, 1997.

Bruce C. Vladeck,

Administrator, Health Care Financing Administration.

[FR Doc. 97-5511 Filed 3-5-97; 8:45 am]

BILLING CODE 4120-01-P

Health Resources and Services Administration

Notice Regarding Healthy Start Initiative Cooperative Agreements

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Correction of eligibility criteria for healthy start initiative cooperative agreements.

SUMMARY: In Notice document 97-1928 in the issue of Monday January 27, 1997 (62 FR 3903), make the following correction: The eligibility criteria on page 3904 in the second column, the paragraph preceding "Funding Category; which states: "A percentage of children under 18 with family incomes below the Federal Poverty Level which exceeded the national average of 22 percent for 1993 only" has been changed to: "A percentage of children under 18 years of age with family incomes below the Federal Poverty Level which exceeded the national average of 19.9% for 1990."

This correction has been made to allow the use of 1990 Census data which is available and accessible to most communities. Applicants who have access to and wish to use more recent verifiable poverty data may do so.