

their beneficiaries? Was the response appropriate and credible?

2. Did the defendant cooperate with investigators and prosecutors, and timely respond to lawful requests for documents and the provision of evidence regarding the involvement of other individuals in a particular scheme, thereby demonstrating trustworthiness?

3. Has the defendant made or agreed to make full restitution to the Federal and/or state health care programs, thereby demonstrating present responsibility and willingness to conform to applicable laws, regulations and program requirements?

4. Has the defendant paid or agreed to pay all criminal, civil, and administrative fines, penalties, and assessments resulting from the improper activity?

5. Has the defendant taken steps to undo the questionable conduct or mitigate the ill effects of the misconduct, e.g., appropriate disciplinary action against the individuals responsible for the activity that constitutes cause for exclusion, or other corrective action?

6. Has the defendant acknowledged its wrongdoing and change its behavior, thereby demonstrating future trustworthiness?

C. Likelihood that Offense or Some Similar Abuse Will Occur Again

1. Was the misconduct the result of a unique circumstance not likely to recur? Is there minimal risk of repeat conduct?

2. Have prior and subsequent conduct been exemplary or improper?

3. What prior measures had been taken to ensure compliance with the law? Can the defendant demonstrate that it had an effective compliance plan in place when the activities that constitute cause for exclusion occurred?

A. Did the defendant make any efforts to contact the OIG, HCFA, or its contractors to determine whether its conduct complied with the law and applicable program requirements? Were any contacts documented?

B. Did the defendant bring the activity in question to the attention of the appropriate Government officials prior to any Government action, e.g., was there any voluntary disclosure regarding the alleged wrongful conduct?

C. Did the defendant have effective standards of conduct and internal control systems in place at the time of the wrongful activity, e.g., was there a corporate compliance program in place? If there was an existing corporate compliance plan:

(i) How long had the compliance plan been in effect?

(ii) What problems had been identified as a result of the compliance plan?

(iii) Were any overpayments or systemic changes made if problems were identified?

(iv) Were appropriate staff sufficiently trained in applicable policies and procedures pertaining to Medicare and other Federal and State health care programs?

(v) Was there a corporate compliance officer and an effective corporate compliance committee in place (if appropriate to the size of the company)?

(vi) Were regular audits undertaken at the time of the unlawful activity?

4. What measures have been taken, or will be taken, to ensure compliance with the law? Has the defendant agreed to implement adequate compliance measures, including institution of a corporate integrity plan?

D. Financial Responsibility

If permitted to continue program participation, is the defendant able to operate without a real threat of bankruptcy and without a real threat to its ability to provide quality health care items or services?

Dated: October 14, 1997.

June Gibbs Brown,

Inspector General.

[FR Doc. 97-28202 Filed 10-23-97; 8:45 am]

BILLING CODE 4150-04-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following National Cancer Institute Special Emphasis Panel (SEP) meeting.

Name of SEP: Community Clinical Oncology Program.

Date: November 17-18, 1997.

Time: 8:30 a.m. to Adjournment.

Place: Key Bridge Marriott, 1401 Lee Highway, Arlington, VA 22209.

Contact Person: Ray Bramhall, Ph.D., Scientific Review Administrator, National Cancer Institute, NIH, Executive Plaza North, Room 636B, 6130 Executive Boulevard, MSC 74, Bethesda, MD 20892-7407; Telephone: 301/496-3428.

Purpose/Agenda: To review, discuss and evaluate grant applications.

The meeting will be closed in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and the discussions could

reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

(Catalog of Federal Domestic Assistance Program Numbers: 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control)

Dated: October 17, 1997.

LaVerne Y. Stringfield,

Committee Management Officer, National Institutes of Health.

[FR Doc. 97-28183 Filed 10-23-97; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting of the National Cancer Institute Initial Review Group:

Agenda/Purpose: To review, discuss and evaluate grant applications.

Committee Name: Subcommittee G—Education.

Date: November 18-19, 1997.

Time: 8 a.m. to Adjournment.

Place: Holiday Inn—Georgetown, 2101 Wisconsin Avenue, NW., Washington, DC 20007.

Contact Person: Susan B. Spring, Ph.D., Scientific Review Administrator, National Cancer Institute, NIH, 6130 Executive Blvd., EPN, Room 643C, Bethesda, Md 20892-7403; Telephone: 301-402-0996.

The meeting will be closed in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

(Catalog of Federal Domestic Assistance Program Numbers: 93.393, Cancer Cause and Prevention Research, 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control)