

Dated: April 20, 1998.

**Sadye E. Dunn,**

*Secretary.*

[FR Doc. 98-10982 Filed 4-21-98; 2:35 am]

BILLING CODE 6355-01-M

## CONSUMER PRODUCT SAFETY COMMISSION

### Sunshine Act Meeting

**AGENCY:** U.S. Consumer Product Safety Commission, Washington, DC 20207.

**TIME AND DATE:** Thursday, April 30, 1998, 10:00 a.m.

**LOCATION:** Room 420, East West Towers, 4330 East West Highway, Bethesda, Maryland.

**STATUS:** Open to the Public.

#### MATTER TO BE CONSIDERED:

*Mid-Year Review:* The staff will brief the Commission and the Commission will consider issues related to fiscal year 1998 mid-year review.

For a recorded message containing the latest agenda information, call (301) 504-0709.

#### CONTACT PERSON FOR ADDITIONAL

**INFORMATION:** Sadye E. Dunn, Office of the Secretary, 4330 East West Highway, Bethesda, MD 20207 (301) 504-0800.

Dated: April 20, 1998.

**Sadye E. Dunn,**

*Secretary.*

[FR Doc. 98-10983 Filed 4-21-98; 2:35 pm]

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## CONSUMER PRODUCT SAFETY COMMISSION

### Sunshine Act Meeting

**AGENCY:** U.S. Consumer Product Safety Commission, Washington, DC 20207.

**"FEDERAL REGISTER" CITATION OF PREVIOUS ANNOUNCEMENT:** 63 FR April 13, 1998.

**PREVIOUSLY ANNOUNCED TIME AND DATE OF MEETINGS:** 10:00 a.m., Wednesday, April 22, 1998.

**CHANGES IN MEETING:** The Commission Meeting on the Compliance Status Report has been rescheduled to Tuesday, April 21, 1998 at 2:00 p.m.

For a recorded message containing the latest agenda information, call (301) 504-0709.

#### CONTACT PERSON FOR ADDITIONAL

**INFORMATION:** Sayde E. Dunn, Office of the Secretary, 4330 East West Highway, Bethesda, MD 20207 (301) 504-0800.

Dated: April 20, 1998.

**Sayde E. Dunn,**

*Secretary.*

[FR Doc. 98-10984 Filed 4-21-98; 2:35 am]

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## CONSUMER PRODUCT SAFETY COMMISSION

### Sunshine Act Meeting

**AGENCY:** U.S. Consumer Product Safety Commission, Washington, DC 20207.

**TIME AND DATE:** Tuesday, April 21, 1998 2:00 p.m.

(Previously scheduled for Wednesday, April 22, 1998 at 10:00 a.m.)

**LOCATION:** Room 410, East West Towers, 4330 East West Highway, Bethesda, Maryland.

**STATUS:** Closed to the Public.

#### MATTER TO BE CONSIDERED:

##### *Compliance Status Report*

The staff will brief the Commission on the status of various compliance matters.

For a recorded message containing the latest agenda information, call (301) 504-0709.

#### CONTACT PERSON FOR ADDITIONAL

**INFORMATION:** Sadye E. Dunn, Office of the Secretary, 4330 East West Highway, Bethesda, MD 20207 (301) 504-0800.

Dated: April 20, 1998.

**Sadye E. Dunn,**

*Secretary.*

[FR Doc. 98-10985 Filed 4-23-98; 2:35 pm]

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## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### Submission for OMB Review; Comment Request

##### **ACTION:** Notice.

The Department of Defense has submitted to OMB for clearance, the following proposal for collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*Title, Applicable Form, and OMB Number:* TRICARE Senior Prime Enrollment Application Form: OMB No. 0720-[to be determined].

*Type of Request:* New collection; Emergency Processing requested with a shortened public comment period ending May 4, 1998. An approval date of May 15, 1998, is requested.

*Number of Respondents:* 77,381.

*Responses per Respondent:* 1.

*Annual Responses:* 77,381.

*Average Burden Per Response:* 20 minutes.

*Annual Burden Hours:* 25,536 hours.

*Needs and Uses:* This information collection is a requirement for TRICARE Senior Prime, a joint demonstration project of military managed health care conducted by the Department of Defense (DoD) and the Department of Health and Human Services (HHS). Under this demonstration, authorized by the Balanced Budget Act of 1997, DoD will offer Medicare-eligible military retirees and their dependents enrollment in a DoD-operated managed health care program. Medicare-eligible beneficiaries will be offered the opportunity to enroll at selected Medical treatment Facilities (MTFs) in a managed care program modeled after the existing TRICARE Prime benefit. Medicare will reimburse DoD on a capitated basis for health care services it provides to the enrolled beneficiaries. Eligible beneficiaries seeking enrollment in the program will be required to fill out an enrollment application which will provide information pertaining to eligibility for the program, personal information for identification purposes, and information on other health insurance.

*Affected Public:* Individuals or households.

*Frequency:* On occasion.

*Respondent's Obligation:* Required to obtain or retain a benefit.

*OMB Desk Officer:* Ms. Allison Eydt.

Written comments and recommendations on the proposed information collection should be sent to Ms. Eydt at the Office of Management and Budget, Desk Officer for DoD/Health Affairs, Room 10235, New Executive Office Building, Washington, DC 20503, or via facsimile at (202) 395-6974.

*DOD Clearance Officer:* Mr. Robert Cushing.

Requests for copies of the information collection proposal should be sent to Mr. Cushing at OSD/WH/SDIOR, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, or via facsimile at (703) 604-6270, or requested telephonically at (703) 604-4582.

Dated: April 17, 1998.

**Patricia L. Toppings,**

*Alternate OSD Federal Register, Liaison Officer, Department of Defense.*

[FR Doc. 98-10746 Filed 4-22-98; 8:45 am]

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