

carriers, to process Medicare claims. HCFA charges its Medicare intermediaries and carriers with various tasks to detect MSP cases; develops and disseminates tools to enable them to better perform their tasks; and monitors their performance in achievement of their assigned MSP functions. Because intermediaries and carriers are also marketing health insurance products that may have liability when Medicare is secondary, the MSP provisions create the potential for conflict of interest. Recognizing this inherent conflict, HCFA has taken steps to ensure that its intermediaries and carriers process claims in accordance with the MSP provisions, regardless of what other insurer is primary. These information collection requirements describe the MSP requirements.; *Frequency*: Other—Monthly for New Beneficiaries Only; *Affected Public*: Individual or Households; *Number of Respondents*: 14,204,000; *Total Annual Responses*: 14,204,000; *Total Annual Hours*: 773,240.

(2) *Type of Information Collection Request*: Extension of a currently approved collection; *Title of Information Collection*: Drug Utilization Review and Supporting Regulations in 42 CFR 456.700; *Form No.*: HCFA-R-153, HCFA-R-153a (OMB# 0938-0659); *Use*: These information collection requirements are necessary to establish patient profiles in pharmacies, identify problems in prescribing and/or dispensing, determine each program's ability to meet minimum standards required for Federal financial participation, and ensure quality pharmaceutical care for Medicaid patients. State Medicaid agencies that have prescription drug programs are required to perform prospective and retrospective drug use review in order to identify aberrations in prescribing, dispensing and/or patient behavior.; *Frequency*: Annually; *Affected Public*: State, Local or Tribal Government, Business or other for-profit, and Not for profit institutions; *Number of Respondents*: 50; *Total Annual Responses*: 50; *Total Annual Hours*: 588,667.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access HCFA's Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or E-mail your request, including your address, phone number, OMB number, and HCFA document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed

information collections must be mailed within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards, Attention: Louis Blank, Room C2-26-17, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: June 9, 1998.

John P. Burke III,

HCFA Reports Clearance Officer, HCFA Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 98-15970 Filed 6-15-98; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration [HCFA-2028-N]

New and Pending Demonstration Project Proposals Submitted Pursuant to Section 1115(a) of the Social Security Act: February 1998 and March 1998

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

ACTION: Notice.

SUMMARY: One new proposal for a Medicaid demonstration project was submitted to the Department of Health and Human Services during the month of February, and none was submitted in March 1998 under the authority of section 1115 of the Social Security Act. One proposal was approved in February, and no proposals were disapproved or withdrawn during February or March. (This notice can be accessed on the Internet at <http://www.hcfa.gov/cmso/sect115.htm>.)

Comments: We will accept written comments on this proposal. We will, if feasible, acknowledge receipt of all comments, but we will not provide written responses to comments. We will, however, neither approve nor disapprove any new proposal for at least 30 days after the date of this notice to allow time to receive and consider comments. Direct comments as indicated below.

ADDRESSES: Mail correspondence to: Gloria Smiddy, Center for Medicaid and State Operations, Health Care Financing Administration, Mail Stop C3-18-26, 7500 Security Boulevard, Baltimore, MD 21244-1850.

FOR FURTHER INFORMATION CONTACT: Gloria Smiddy, (410) 786-7723.

SUPPLEMENTARY INFORMATION:

I. Background

Under section 1115 of the Social Security Act (the Act), the Department of Health and Human Services (HHS) may consider and approve research and demonstration proposals with a broad range of policy objectives. These demonstrations can lead to improvements in achieving the purposes of the Act.

In exercising her discretionary authority, the Secretary has developed a number of policies and procedures for reviewing proposals. On September 27, 1994, we published a notice in the **Federal Register** (59 FR 49249) that specified (1) the principles that we ordinarily will consider when approving or disapproving demonstration projects under the authority in section 1115(a) of the Act; (2) the procedures we expect States to use in involving the public in the development of proposed demonstration projects under section 1115; and (3) the procedures we ordinarily will follow in reviewing demonstration proposals. We are committed to a thorough and expeditious review of State requests to conduct such demonstrations.

As part of our procedures, we publish a notice in the **Federal Register** with a monthly listing of all new submissions, pending proposals, approvals, disapprovals, and withdrawn proposals. Proposals submitted in response to grant solicitation or other competitive process is reported as received during the month that such grants or bid is awarded, so as to prevent interference with the awards process.

II. Listing of New, Pending, Approved, Disapproved, and Withdrawn Proposals for the Months of February and March 1998

A. Comprehensive Health Reform Programs

1. New Proposal

No new proposals were received during the months of February or March 1998.

2. Pending Proposals

The following comprehensive health reform proposal is pending.

Demonstration Title/State: BadgerCare/Wisconsin.

Description: The State submitted a proposal that would use a combination of title XIX and title XXI funding to ensure access to health care for all children and parents in uninsured families with incomes below 185 percent of the Federal poverty level. Once enrolled, families would maintain

their eligibility until their income reaches 200 percent of the Federal poverty level. The benefits would be identical to the Medicaid benefits package and current provisions for quality assurance under Wisconsin's present Medicaid managed care system.

Date Received: January 23, 1998.

State Contact: Angie Dombrowicki, Department of Health and Family Services, Division of Health, One West Wilson Street, Room 237, P.O. Box 309, Madison, WI 53701-0309, Phone: (608) 266-1935.

Federal Project Officer: Maria Boulmetis, Health Care Financing Administration, Center for Medicaid and State Operations, Family/Children's Health Program Group, 7500 Security Boulevard, Baltimore, MD 21244-1850.

The pending proposals for July 1997 through November 1997 referenced in the **Federal Register** of February 4, 1998 (63 FR 5810) remain unchanged except for the New Jersey proposal, which is discussed in item 4, below.

3. Approved Conceptual Proposals (Award for Waivers Pending)

No conceptual proposals were approved during the months of February or March 1998.

4. Approved Proposals

The following comprehensive health reform proposal was approved during the month of February. No comprehensive health reform proposals were approved during the month of March.

Demonstration Title/State: New Jersey Managed Charity Care Demonstration.

Description: The State will incorporate aspects of managed care into the current charity care program to achieve program efficiencies, better value, and improved care and health outcomes for charity care beneficiaries. The demonstration would use the DSH funds allocated to the charity care component and re-direct these funds to a new managed charity care program.

Date Received: March 24, 1997.

Date Approved: February 13, 1998.

State Contact: Laurie Facciarossa, Division of Medical Assistance and Health Services, CN 712, Trenton, NJ 08065, Phone: (609) 588-4518.

Federal Project Officer: Dan McCarthy, Health Care Financing Administration, Center for Medicaid and State Operations, Family and Children's Health Program Group, Division of Integrated Health Systems, 7500 Security Boulevard, Baltimore, MD 21244-1850.

5. Disapproved Proposals

No proposals were disapproved during the months of February or March 1998.

6. Withdrawn Proposals

No proposals were withdrawn during the months of February or March 1998.

B. Other Section 1115 Family Planning Programs

1. New Proposals

The following Family Planning proposal was received during the month of February 1998. No new proposals were received during the month of March 1998.

Demonstration Title/State: Family Planning Expansion Project/Oregon.

Description: Oregon submitted a proposal to expand family planning coverage to women and men with incomes less than 185 percent of poverty.

Date Received: February 18, 1998.

State Contact: Julie Abrams, Health Division, State of Oregon, Salem, Oregon 97310, Phone: (503) 731-4235.

Federal Project Officer: Alisa Adamo, Health Care Financing Administration, Center for Medicaid and State Operations, Family and Children's Health Programs Group, Division of Integrated Health Systems, 7500 Security Boulevard, Baltimore, MD 21244-1850.

2. Pending Proposals

The pending proposals for July 1997 through November 1997 that are referenced in the **Federal Register** of March 10, 1998 (63 FR 11686) remain unchanged.

3. Approved Conceptual Proposals (Award of Waivers Pending)

No conceptual proposals were approved during the months of February or March 1998.

4. Approved, Disapproved, Withdrawn Proposals

No proposals were approved, disapproved or withdrawn during the months of February or March 1998.

III. Requests for Copies of a Proposal

Requests for copies of a specific Medicaid proposal should be made to the State contact listed for the specific proposal. If further help or information is needed, inquires should be directed to HCFA at the address above.

(Catalog of Federal Domestic Assistance Program, No. 93.779; Health Financing Research, Demonstrations, and Experiments.)

Dated: May 19, 1998.

Sally K. Richardson,

Director, Center for Medicaid and State Operations.

[FR Doc. 98-15947 Filed 6-15-98; 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.

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. as amended. The grant 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.

Name of Committee: National Cancer Institute Initial Review Group Subcommittee G—Education.

Date: June 23-24, 1998.

Time: 8 a.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

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

Contact Person: Dr. Harvey Stein, Scientific Review Administrator, National Cancer Institute, NIH, 6130 Executive Boulevard, North, Rockville, MD 20892-7403, Telephone: 301/496-7481.

This notice is being published less than 15 days prior to the meeting due to the urgent need to meet timing limitations imposed by the review and funding cycle.

(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: June 9, 1998.

LaVerne Y. Stringfield,

Committee Management Officer, National Institutes of Health.

[FR Doc. 98-15918 Filed 6-15-98; 8:45 am]

BILLING CODE 4140-01-M