

Control and Prevention (CDC) announces the following committee meeting.

*Name:* Breast and Cervical Cancer Early Detection and Control Advisory Committee (BCCEDCAC).

*Times and Dates:* 9 a.m.–5 p.m., May 17, 1999; 9 a.m.–4:30 p.m., May 18, 1999.

*Place:* The Holiday Inn Select—Decatur, 130 Clairmont Avenue, Decatur, Georgia 30030, telephone 404/371-0204, fax 404/377-2726.

*Status:* Open to the public, limited only by the space available.

*Purpose:* The Breast and Cervical Cancer Early Detection and Control Advisory Committee is charged with providing advice and guidance to the Secretary, the Assistant Secretary for Health, and the Director of CDC, regarding the early detection and control of breast and cervical cancer and to evaluate the Department's current breast and cervical cancer early detection and control activities.

*Matters To Be Discussed:* The discussion will focus on two new policies for the National Breast and Cervical Cancer Early Detection Program: case management and cervical cancer. Draft definitions will be provided and impact on the Program's operations will be discussed. Persons wishing to make oral presentations at the meeting should contact Ms. Rebecca Wolf 770/488-3012 or Ms. Madeline Cutler 770/488-4751 by 4 p.m., May 1, 1999. All requests will be limited to five minutes and should contain the name of the presenter and an outline of the meeting should be given to Ms. Cutler prior to the meeting.

*Contact Person for Additional Information:* Rebecca B. Wolf, Division of Cancer Prevention and Control, National Center for Chronic Disease Prevention and Health Promotion, CDC, 4770 Buford Highway, NE, M/S K-64, Atlanta, Georgia 30341-3717, telephone 770/488-4751.

The Director, Management Analysis and Services Office has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and ATSDR.

Dated: April 14, 1999.

**Carolyn J. Russell,**

*Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).*

[FR Doc. 99-9821 Filed 4-19-99; 8:45 am]

BILLING CODE 4163-18-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Clinical Laboratory Improvement Advisory Committee (CLIAC); Meeting**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following committee meetings.

*Name:* Clinical Laboratory Improvement Advisory Committee (CLIAC).

*Times and Dates:* 8:30 a.m.–5 p.m., May 12, 1999; 8:30 a.m.–3:30 p.m., May 13, 1999.

*Place:* CDC, Koger Center, Williams Building, Conference Rooms 1802 and 1805, 2877 Brandywine Road, Atlanta, Georgia 30341.

*Status:* Open to the public, limited only by the space available. The meeting rooms accommodate approximately 85 people.

*Purpose:* This committee is charged with providing scientific and technical advice and guidance to the Secretary of Health and Human Services, the Assistant Secretary for Health, and the Director, CDC, regarding the need for, and the nature of, revisions to the standards under which clinical laboratories are regulated; the impact of proposed revisions to the standards; and the modification of the standards to accommodate technological advances.

*Matters To Be Discussed:* The morning session of the first day will be devoted to orientation of new members. The orientation is background and process for new committee members. Although members of the public may attend, the orientation is not part of the public meeting. The agenda will include an update on CLIA implementation; update on transfer of test categorization and review of tests for waived status to the FDA; CLIA requirements and laboratory test results of public health importance; and remaining gaps in laboratory Y2K preparedness.

The Committee solicits oral and written testimony on the application of CLIA regulations and laboratory test results of public health importance. Requests to make an oral presentation should be submitted in writing to the contact person listed below by close of business, May 7, 1999. All requests to make oral comments should contain the name, address, telephone number, and organizational affiliation of the presenter.

Written comments should not exceed five single-spaced typed pages in length and should be received by the contact person listed below by close of business, May 7, 1999.

Agenda items are subject to change as priorities dictate.

*Contact Person for Additional Information:* John C. Ridderhof, Dr.P.H., Division of Laboratory Systems, Public Health Practice Program Office, CDC, 4770 Buford Highway, NE, M/S G-25, Atlanta, Georgia 30341-3724, telephone 770/488-8076, fax 770/488-8282.

The Director, Management Analysis and Services Office has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and ATSDR.

Dated: April 13, 1999.

**Carolyn J. Russell,**

*Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).*

[FR Doc. 99-9822 Filed 4-19-99; 8:45 am]

BILLING CODE 4163-18-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Agency Recordkeeping/Reporting Requirements Under Emergency Review by the Office of Management and Budget (OMB)**

*Title:* Temporary Assistance for Needy Families Financial Reporting Form, ACF-196.

*OMB No.:* 0970-0165.

*Description:* The form provides specific data regarding claims and provides a mechanism for states to request grant awards and certify the availability of state matching funds. Failure to collect this data would seriously compromise ACF's ability to monitor expenditures. This information is also used to estimate outlays and may be used to prepare ACF budget submissions to Congress. The following citations should be noted in regards to this collection: 405(1); 409(a)(7); and 409(a)(1).

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ACF-196 .....	54	4	8	1,728

Estimated Total Annual Burden Hours: 1,728.

**Additional Information**

ACF is requesting that OMB grant a 180 day approval for this information collection under procedures for

emergency processing by April 30, 1999. A copy of this information collection,

with applicable supporting documentation, maybe obtained by calling the Administration for Children and Families, Reports Clearance Officer, Bob Sargis at (202) 690-7275.

Comments and questions about the information collection described above should be directed to the following address by April 30, 1999: Office of Information and Regulatory Affairs, Attn: OMB Desk Officer for ACF, Office of Management and Budget, Paper Reduction Project, 725 17th Street, NW, Washington, DC 20503, (202) 395-7316.

Dated: April 14, 1999.

**Bob Sargis,**

*Reports Clearance Officer.*

[FR Doc. 99-9801 Filed 4-19-99 8:45 am]

BILLING CODE 4184-01-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

[Program Announcement No. 93631-99-02]

#### Developmental Disabilities: Request for Public Comments on Proposed Developmental Disabilities Funding Priorities for Projects of National Significance for Fiscal Year 1999

**AGENCY:** Administration on Developmental Disabilities (ADD), ACF, DHHS.

**ACTION:** Notice of request for public comments on developmental disabilities tentative funding priorities for Projects of National Significance for Fiscal Year 1999.

**SUMMARY:** The Administration on Developmental Disabilities (ADD) announced that public comments are being requested on tentative funding priorities for Fiscal Year 1999 Projects of National Significance prior to being announced in its final form.

We welcome comments and suggestions on this proposed announcement and funding priorities that will assist in bringing about the increased independence, productivity, integration, and inclusion into the community of individuals with developmental disabilities.

**DATES:** The closing date for submission of applications is June 21, 1999.

**ADDRESSES:** Comments should be sent to: Sue Swenson, Commissioner, Administration on Developmental Disabilities, Administration for Children and Families, Department of Health and Human Services, 370 L'Enfant Promenade, S.W., Room 300F, Washington, D.C., 20447.

**FOR FURTHER INFORMATION CONTACT:** Administration for Children and Families (ACF), Pat Laird, 370 L'Enfant Promenade, S.W., Room 300F, Washington, D.C., 20447, 202/690-7447.

**SUPPLEMENTARY INFORMATION:** This announcement consists of two parts:

#### Part I

##### Background

##### A. Goals of the Administration on Developmental Disabilities

The Administration on Developmental Disabilities is located within the Administration for Children and Families, Department of Health and Human Services (DHHS). Although different from the other ACF program administrations in the specific constituency it serves, ADD shares a common set of goals that promote the economic and social well being of families, children, individuals and communities. Through national leadership, we see:

- Families and individuals empowered to increase their own economic independence and productivity;
- Strong, healthy, supportive communities having a positive impact on the quality of life and the development of children;
- Partnerships with individuals, front-line service providers, communities, States and Congress that enable solutions which transcend traditional agency boundaries;
- Services planned and integrated to improve client access; and
- A strong commitment to working with Native Americans, individuals with developmental disabilities, refugees and migrants to address their needs, strengths and abilities.

Emphasis on these goals and progress toward them will help more individuals, including those with developmental disabilities, to live productive and independent lives integrated into their communities. The Projects of National Significance Program is one means through which ADD promotes the achievement of these goals.

Two issues are of particular concern with these projects. First, there is a pressing need for networking and cooperation among specialized and categorical programs, particularly at the service delivery level, to ensure continuation of coordinated services to people with developmental disabilities. Second, project findings and successful innovative models of projects need to be made available nationally to policy makers as well as to direct service providers.

##### B. Purpose of the Administration on Developmental Disabilities

The Administration on Developmental Disabilities is the lead agency within ACF and DHHS responsible for planning and administering programs that promote the self-sufficiency and protect the rights of individuals with developmental disabilities.

The 1996 Amendments (Public Law 104-183) to the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C.6000 *et seq.*) (the Act) supports and provides assistance to States and public and private nonprofit agencies and organizations to assure that individuals with developmental disabilities and their families participate in the design of and have access to culturally competent services, supports, and other assistance and opportunities that promote independence, productivity and integration and inclusion into the community.

The Act points out that:

- Disability is a natural part of the human experience that does not diminish the right of individuals with developmental disabilities to enjoy the opportunity for independence, productivity and inclusion into the community;
- Individuals whose disabilities occur during their developmental period frequently have severe disabilities that are likely to continue indefinitely;
- Individuals with developmental disabilities often require lifelong specialized services and assistance, provided in a coordinated and culturally competent manner by many agencies, professionals, advocates, community representatives, and others to eliminate barriers and to meet the needs of such individuals and their families;

The Act further finds that:

- Individuals with developmental disabilities, including those with the most severe developmental disabilities, are capable of achieving independence, productivity, and integration and inclusion into the community, and often require the provision of services, supports and other assistance to achieve such;
- Individuals with developmental disabilities have competencies, capabilities and personal goals that should be recognized, supported, and encouraged, and any assistance to such individuals should be provided in an individualized manner, consistent with the unique strengths, resources, priorities, concerns, abilities, and capabilities of the individual;
- Individuals with developmental disabilities and their families are the