

affected public, including automated collection techniques.

We are soliciting public comment on each of these issues for section IV, HCFA's Process for Making National Coverage Decisions.

In accordance with that section, HCFA will accept an external formal request for a national coverage decision if the information collection requirements outlined above in section IV.B.2 are met. These requirements include:

- The request must be in writing.
 - The requestor must identify the request as a "formal request for a national coverage decision."
 - The requestor must submit supporting documentation that we will specify. At a minimum, the requestor must submit the following information:
 - A full and complete description of the service in question, including the benefit category or categories of the Medicare program to which it applies.
 - A compilation of the medical and scientific information currently available.
 - A description of any clinical trials or studies currently underway, which might be relevant to a decision regarding the coverage of the service. This description should be as complete as possible without disclosing confidential information.
 - In the case of a drug, device, or a service using a drug or device subject to regulation by the FDA, the status of current FDA administrative proceedings concerning the drug or device involved. In the case of any item regulated by the FDA, the FDA labeling for the item, together with an indication of whether the service for which a review is being requested is covered under the labeled indication(s). We recognize that FDA changes the labeling of drugs and 510(k) devices and devices with premarket approvals (PMAs). For the purposes of our review, we are interested in the labeled indications at the time of the submission of the formal request. If, during our review, the labeled indications change, we expect the requestor to notify us.
 - In the case of a request for reconsideration, new evidence supporting the request or an analysis of our earlier decision demonstrating that we materially misinterpreted the evidence submitted with the earlier request.
- The burden associated with this requirement is the time and effort necessary to disclose the materials referenced above to HCFA. We estimate that on average it will take each entity

40 hours to provide the materials and that there will be 200 requests on an annual basis. Therefore, the total annual burden associated with these requirements is 8,000 hours. While an estimate of 40 hours may appear low, given that entities will most likely have already compiled these data to meet the FDA approval process, we believe it to be accurate.

If you have any comments on any of these information collection and record keeping requirements, please mail the original and 3 copies directly to the following:

Health Care Financing Administration, Office of Information Services, Standards and Security Group, Division of HCFA Enterprise Standards, Room N2-14-26, 7500 Security Boulevard, Baltimore, MD 21244-1850. Attn: John Burke HCFA-3432-GN

and
Office of Information and Regulatory Affairs, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503, Attn: Allison Eydt, HCFA Desk Officer.

In accordance with the provision of Executive Order 12866, this notice was reviewed by the Office of Management and Budget.

Authority: Sections 1862, 1869(b)(3), and 1871 of the Social Security Act (42 U.S.C. 1395y, 1395ff(b)(3), and 1395hh).

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: April 21, 1999.

Nancy-Ann Min DeParle,
Administrator,
Health Care Financing Administration.

Dated: April 21, 1999.

Donna E. Shalala,
Secretary.
[FR Doc. 99-10460 Filed 4-22-99; 10:36 a.m.]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

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

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget, in

compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301)-443-1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: The National Sample Survey of Registered Nurses, 2000—New

The National Sample Survey of Registered Nurses (NSSRN) is carried out to assist in fulfilling three congressional mandates: (1) Section 951 of P.L. 94-63 requires gathering data on (a) the number and distribution of nurses by type of employment and location practice, (b) the number of nurses practicing full-time and part-time within the U.S. and within each State, (c) the average rate of compensation for nurses by type of practice and location of practice, (d) the activity status of the total number of nurses with advanced training or graduate degrees in nursing, by specialty, including nurse practitioners, nurse clinicians, nurse researchers, nurse educators, and nurse supervisors and administrators, and (f) the number of nurses entering the U.S. annually from other Nations; (2) Section 806(f) of P.L. 105-392 requires discipline workforce information and analytical activities for advanced nursing education, workforce diversity, and basic nursing education and practice; and (3) Section 792 of Title VII of the Public Health Service Act calls for the collection and analysis of data on health professions.

The information from this survey will serve policymakers, legislative bodies, health professionals, and Government agencies to inform workforce policies. Data collected in this survey will assist in determining the impact that changes in the health care system are having on employment status of registered nurses and their employment settings.

The proposed survey design for the 2000 NSSRN follows that of the previous six surveys and the projected sample size is approximately 49,200 registered nurses, with a response rate of 80%. Each respondent will be asked to complete a self-administered mail questionnaire containing items on educational background, duties, employment status and setting, geographic mobility, and income.

Respondent burden is estimated as follows:

Form	Number of Respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Survey	39,360	1	39,360	20	13,120

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Wendy A. Taylor, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: April 16, 1999.

Jane Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 99-10559 Filed 4-26-99; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

AIDS Advisory Council; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Public Law 92-463), announcement is made of the following National Advisory body scheduled to meet during the month of May 1999.

Name: HRSA AIDS Advisory Committee (HAAC).

Date and Time: May 13-14, 1999; 9:00 a.m.-5:00 p.m.

Place: The Rockville Doubletree Hotel—Rockville, 1750 Rockville Pike, Rockville, MD 20852, (301) 468-1100.

The meeting is open to the public.

Agenda: Reauthorization of the Ryan White Care Act.

For further information, call Ms. Joan Holloway at (301) 443-8143.

Agenda items are subject to change as priorities dictate.

Dated: April 16, 1999.

Jane M. Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 99-10558 Filed 4-26-99; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Heart, Lung, and Blood Institute; Notice of Closed Meetings

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

Name of Committee: National Heart, Lung, and Blood Institute Special Emphasis Panel—Development of Assay Methods for Creutzfeldt-Jacob Disease.

Date: April 30, 1999.

Time: 8:00 a.m.

Agenda: To review and evaluate grant applications.

Place: Sheraton Columbia, Wincopin Circle, Columbia, Maryland 21044.

Contact Person: Jeffrey H. Hurst, Ph.D., Scientific Review Administrator, NHLBI/Review Branch, Two Rockledge Center, Room 7208, Bethesda, Maryland 20892-7924, (301) 435-0303.

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

(Catalogue of Federal Domestic Assistance Programs Nos. 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; and 93.839, Blood Diseases and Resources Research, National Institutes of Health)

Dated: April 20, 1999.

Anna Snouffer,

Acting Director, Office of Federal Advisory Committee Policy.

[FR Doc. 99-10457 Filed 4-26-99; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Refugee Resettlement Program: Proposed Allocations to States of FY 1999 Funds for Refugee Social Services

AGENCY: Office of Refugee Resettlement (ORR), ACF, HHS.

ACTION: Notice of proposed allocations to States of FY 1999 funds for refugee¹ social services.

SUMMARY: This notice establishes the proposed allocations to States of FY 1999 funds for social services under the Refugee Resettlement Program (RRP). In the final notice, allocation amounts could be adjusted slightly based on final adjustments in the FY 1998 arrivals in some States. This notice includes a \$15.5 million set-aside to: (1) Provide outreach and referral to ensure that eligible refugees access the Children's Health Insurance Program (CHIP) and other programs for low income working populations; and (2) provide specialized interpreter training and the hiring of interpreters to enable refugees to have equal access to medical and legal services.

EFFECTIVE DATE: Comments on the proposed allocations contained in this notice must be received by May 27, 1999.

ADDRESSES: Address written comments, in duplicate, to: Barbara Chesnik, Division of Self-Sufficiency, Office of Refugee Resettlement, Administration for Children and Families, 370 L'Enfant Promenade, SW, Washington, DC 20447. FAX: (202) 401-5487 or (202) 401-0981.

FOR FURTHER INFORMATION CONTACT: Barbara R. Chesnik, Division of Refugee Self-Sufficiency, (202) 401-4558.

SUPPLEMENTARY INFORMATION:

I. Amounts for Allocation

The Office of Refugee Resettlement (ORR) has available \$139,990,000 in FY 1999 refugee social service funds as part of the FY 1999 appropriation for the Department of Health and Human Services (Pub. L. 105-277).

¹ In addition to persons who meet all requirements of 45 CFR 400.43, "Requirements for documentation of refugee status," eligibility for refugee social services also includes: (1) Cuban and Haitian entrants, under section 501 of the Refugee Education Assistance Act of 1980 (Pub. L. 96-422); (2) certain Amerasians from Vietnam who are admitted to the U.S. as immigrants under section 584 of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 1988, as included in the FY 1988 Continuing Resolution (Pub. L. 100-202); and (3) certain Amerasians from Vietnam, including U.S. citizens, under title II of the Foreign Operations, Export Financing, and Related Programs Appropriations Acts, 1989 (Pub. L. 100-461), 1990 (Pub. L. 101-167), and 1991 (Pub. L. 101-513). For convenience, the term "refugee" is used in this notice to encompass all such eligible persons unless the specific context indicates otherwise.