

include names, addresses, telephone numbers and e-mail addresses of key contacts in the health care system and/or the academic setting if identified and potential research topic. The letter of interest is not binding and does not enter into the consideration of any subsequent application. The letter should also clearly state willingness to be listed in the RFA or a preference not to be listed.

D. Address

Letters of interest should be addressed to: Carolyn M. Clancy, MD, Director, Center for Outcomes and Effectiveness Research, Agency for Health Care Policy and Research, 6010 Executive Boulevard, Suite 300, Rockville, MD 20852, E-mail: cclancy@ahcpr.gov.

Dated: June 17, 1999.

John M. Eisenberg,
Administrator.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Health Care Policy and Research

Contract Review Meeting

In accordance with section 10(a) of the Federal Advisory Committee Act as amended (5 U.S.C., Appendix 2), announcement is made of an Agency for Health Care Policy and Research (AHCPR) Technical Review Committee (TRC) meeting. This TRC's charge is to provide review of contract proposals and recommendations to the Administrator, AHCPR, regarding the technical merit of proposals submitted in response to a Request for Proposals (RFPs) regarding "Automated Data Processing Support Services for Agency for Health Care Policy and Research". The RFP was published in the Commerce Business Daily on March 8, 1999.

The upcoming TRC meeting will be closed to the public in accordance with the Federal Advisory Committee Act (FACA), section 10(d) of 5 U.S.C., Appendix 2, implementing regulations, and procurement regulations, 41 CFR 101-6.1023 and 48 CFR section 315.604(d). The discussions at this meeting of contract proposals submitted in response to the above-referenced RFP are likely to reveal proprietary and personal information concerning individuals associated with the proposals. Such information is exempt from disclosure under the above-cited FACA provision that protects the free

exchange of candid views, and under the procurement rules that prevent undue interference with Committee and Department operations.

Name of TRC: The Agency for Health Care Policy and Research—"Automated Data Processing Support Services for Agency for Health Care Policy and Research".

Date: July 8, 1999 (Closed to the public).

Place: Agency for Health Care Policy and Research, 2101 East Jefferson Street, 5th Floor Conference Room, Rockville, Maryland 20852.

Contact Person: Anyone wishing to obtain information regarding this meeting should contact William Yu, Center for Cost and Financing Studies, Agency for Health Care Policy and Research, 2101 Executive Boulevard, Suite 500, Rockville, Maryland, 20852, 301-594-1069.

Dated: June 15, 1999.

John M. Eisenberg,
Administrator.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 99091]

Community-Based HIV Prevention Services and Capacity-Building Assistance to Organizations Serving Gay Men of Color at Risk for HIV Infection; Notice of Availability of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of Fiscal Year (FY) 1999 funds for cooperative agreement programs with non-governmental minority organizations to support: (1) Community-based organizations (CBOs) to develop and implement effective community-based HIV prevention programs for gay men of color (Category A); and (2) non-governmental minority organizations to provide regionally structured and focused capacity-building assistance to CBOs that serve the HIV prevention needs of gay men of color at risk for HIV infection (Category B).

This program addresses the "Healthy People 2000" priority areas of Educational and Community-Based Programs, Human Immuno-deficiency Virus (HIV) Infection, and Sexually Transmitted Diseases (STDs).

The goals for program Category A—Community-Based HIV Prevention Services are to:

1. Provide financial and technical assistance to CBOs so they can provide HIV prevention services to populations of gay men of color for which gaps in services are demonstrated;

2. Support HIV prevention programs that are consistent with the HIV prevention priorities outlined in the jurisdiction's comprehensive HIV prevention plan or adequately justify addressing other priorities; and

3. Promote collaboration and coordination of HIV prevention efforts among CBOs; HIV prevention community planning groups; and other local, State, Federal and privately funded programs.

The goals for program Category B—Capacity-Building Assistance Program are to:

1. Improve the capacity of CBOs serving gay men of color to mobilize their communities to increase their awareness, leadership, participation and support for HIV prevention; and

2. Enhance the capacity of CBOs serving gay men of color to effectively participate in, and improve the responsiveness of the HIV prevention community planning process to the HIV prevention needs of gay men of color.

Refer to Section M, "Where to Obtain Additional Information", for dates and times of audio-conferences.

B. Eligible Applicants

Note: Applicants that meet the eligibility requirements for both Categories A and B may apply for both under separate applications. For Category B, applicants may only apply to provide capacity-building assistance to a single racial or ethnic group (that is, African American, Latino, Asian/Pacific Islander, or American Indian/Alaskan Native). For example, if an organization applies to provide capacity-building assistance for African American gay men, that organization may not also apply to provide assistance for Latino gay men.

1. Category A—Community-Based HIV Prevention Services

Eligible applicants for Category A are African American, Latino, Asian/Pacific Islander, and American Indian/Alaskan Native CBOs that provide services to gay men, and that meet the following criteria (also see Proof of Eligibility section):

a. Have been granted tax-exempt status under Section 501(c)(3), as evidenced by an Internal Revenue Service (IRS) determination letter.

b. Have a board or governing body composed of greater than 50 percent of the racial/ethnic minority population to be served.