

Paperwork Reduction Act of 1995, Public Law 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, call the HRSA Reports Clearance Officer on (301) 443-1891.

Comments are invited on: (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: Guidance and Forms for the Title V Application/Annual Report, OMB No. 0915-0172: Extension

The Health Resources and Services Administration (HRSA) proposes to

revise the Guidance and Forms for the Application and Annual Report for the Maternal and Child Health Services Title V Block Grant Program. The guidance is used annually by the 50 States and 9 jurisdictions in making application for Block Grants under Title V of the Social Security Act, and in preparing the required annual report. The proposed revisions follow and build on extensive modifications made to the guidance and forms in 1997. The proposed revisions are of two types: (1) editorial and technical revisions based on the experiences of the States and jurisdictions in using the guidance and forms in 1998 and 1999; and, (2) the addition of a standard set of measures to be used in conducting the formal needs assessment required by Title V every five years. This needs assessment will be required of each State and jurisdiction in FY 2000.

The addition of the core set of measures for use in conducting the formal needs assessment follows discussions with State Maternal and Child Health Directors over the last two years. The changes incorporated in the 1997 revisions have been reflected in major changes in the Title V program, with much more emphasis on accountability and performance

measurement as part of the performance partnership concept on which those changes were built. The inclusion now of standard measures for all States and jurisdictions to use in conducting the five-year needs assessment is a natural progression in the development of the Federal-State partnership process.

Following approval of the 1997 revisions, HRSA developed and instituted an automated electronic data collection and reporting system, the Title V Electronic Reporting Package (Title V ERP). The ERP has greatly reduced the burden on the States and jurisdictions, because it provides for automatic calculations of ratios, rates, and percentages, carries data over from year-to-year, and assures that data used in multiple tables are entered only once. The ERP also provides for text entry, and facilitates the orderly printing of tables, text, and required appendices. As a result, even with the additional data that were incorporated, the expectation is that there will be a 33% reduction in the annual burden from previous levels. The estimated response burden is as follows:

| Type of form | Number of respondents | Responses per respondent | Burden hours per response | Total burden hours |
|---|-----------------------|--------------------------|---------------------------|--------------------|
| Application and Annual Report, with needs assessment*: | | | | |
| States | 50 | 1 | 450 | 22500 |
| Jurisdictions | 9 | 1 | 240 | 2160 |
| Application and Annual Report, without needs assessment*: | | | | |
| States | 50 | 1 | 330 | 16500 |
| Jurisdictions | 9 | 1 | 133 | 1197 |

* The Application and Annual Report, with needs assessment, will be submitted in FY 2000. The Application and Annual Report, without needs assessment, will be submitted in FY 2001 and FY 2002. The average burden for the next three years is 20,018 hours.

The HRSA revision plan calls for draft versions of the new guidance to be sent to all Maternal and Child Health Directors in September, 1999. Copies will also be available to all other interested parties who request one from: Peter C. Van Dyck, M.D., M.P.H., Associate Administrator for Maternal and Child Health, Maternal and Child Health Bureau, Room 18-05, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. His phone number is (301) 443-2170.

Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 14-33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: August 26, 1999.
Jane Harrison,
 Director, Division of Policy Review and Coordination.
 [FR Doc. 99-22802 Filed 8-31-99; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United

States Code, as amended by the Paperwork Reduction Act of 1995, Public law 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, call the HRSA Reports Clearance officer on (301) 443-1891.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance on the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information;

(c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: HRSA Competing Training Grant Application, Instructions and Related Regulations (OMB No. 0915-0060)—Revision

The Health Resources and Services Administration uses the information in the application to determine the

eligibility of applicants for awards, to calculate the amount of each award, and to judge the relative merit of applications. The form is distributed electronically via the Internet. The budget is negotiated for all years of the project period based on this application and program-specific instructions that include greater standardization of content for the project summary and the detailed description of the project.

The Bureau of Health Professions is planning to remove from the Code of Federal Regulations the existing training grant regulations under 42 CFR parts 57 and 58. It is the intent of the Department

to operate under the new statute for compliance, implementation, and administration of the training grant programs under titles VII and VIII of the PHS Act. The existing regulations are fundamentally and extensively inconsistent with the new law which takes an interdisciplinary approach (and thus inhibits the achievement of the statute's objectives). Program specific guidance and information for preparing applications are now provided in the grant application materials (which makes them now self-contained).

The estimated annual burden for the application is as follows:

| Requirement | Number of respondents | Responses per respondent | Hours per response | Total burden hours |
|-------------------|-----------------------|--------------------------|--------------------|--------------------|
| Application | 1,190 | 1 | 56.25 | 66,938 |

Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 14-33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: August 26, 1999.

James J. Corrigan,

Associate Administrator for Management and Program Support.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Final Eligibility Criteria, Preferences, and Priorities for Scholarships for Disadvantaged Students

SUMMARY: The Health Resources and Services Administration (HRSA) announces final eligibility criteria, preferences, and priorities for the Scholarships for Disadvantaged Students (SDS) program, under the authority of section 737 of the Public Health Service Act (the Act), Title VII, Part B, as amended by the Health Professions Education Partnerships Act of 1998,

Pub. L. 105-392, dated November 13, 1998. A notice which proposed eligibility criteria, preferences, and priorities for the SDS program was published in the **Federal Register** at 64 FR 29660, dated June 2, 1999. A period of 30 days was established to allow public comment concerning the proposed eligibility criteria, preferences, and priorities. Five comments were

received. This notice discusses these comments and sets forth the final eligibility criteria, preferences, and priorities.

EFFECTIVE DATE: The program elements described in this notice are for use in fiscal year (FY) 1999 and beyond and will become effective, except where indicated otherwise, for SDS funds awarded to schools in FY 1999 and beyond.

Purpose

The SDS program provides funds to health professions and nursing schools for the purpose of assisting such schools in providing scholarships to individuals from disadvantaged backgrounds who are enrolled (or accepted for enrollment) as full-time students in the schools.

For purposes of the SDS program in FY 1999, an "individual from a disadvantaged background" is defined in 42 CFR 57.1804, subpart S, as one who:

(1) Comes from an environment that has inhibited the individual from obtaining the knowledge, skills, and abilities required to enroll in and graduate from a health profession or nursing school, or from a program providing education or training in allied health professions; or

(2) Comes from a family with an annual income below a level based on low-income thresholds according to family size published by the U.S. Bureau of the Census, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary for use in all health professions and nursing programs. The Secretary will periodically publish these low income levels in the **Federal Register**.

The following income figures determine what constitutes a low-income family for purposes of the SDS program for FY 1999.

| Size of parents' family ¹ | Income level ² |
|--------------------------------------|---------------------------|
| 1 | \$10,900 |
| 2 | 14,100 |
| 3 | 16,800 |
| 4 | 21,500 |
| 5 | 25,400 |
| 6 or more | 28,500 |

¹ Includes only dependents listed on Federal income tax forms.

² Adjusted gross income for calendar year 1998, rounded to nearest \$100.

Under the FY 1999 appropriations bill, \$38.1 million has been appropriated for this program. Of the funds available for FY 1999, 16 percent shall be made available to schools agreeing to expend the funds only for nursing scholarships. The balance will support scholarships for eligible health professions students. The period of fund availability will be one academic year.

Use of Funds

Funds awarded to a school under this program may be used as follows:

(1) To award scholarships to former recipients of scholarships under the Exceptional Financial Need (EFN) Scholarship program and the Financial Assistance for Disadvantaged Health Professions Students (FADHPS) program (sections 736 and 740(d)(2)(B) of the Public Health Service Act, as such sections existed prior to the enactment of Pub. L. 105-392), at levels comparable to what these students would have received prior to phase out of the EFN and FADHPS programs, and with service agreements that are