FEDERAL TRADE COMMISSION

Charges for Certain Disclosures

AGENCY: Federal Trade Commission.

ACTION: Notice Regarding Charges for Certain Disclosures.

SUMMARY: The Federal Trade Commission announces that the current ceiling on allowable charges under section 612(a) of the Fair Credit Reporting Act (''FCRA'') will increase from $8.00 to $8.50 on January 1, 2000. Under 1996 amendments to the FCRA, the Federal Trade Commission is required to increase the $8.00 amount referred to in paragraph (1)(a)(i) of section 612(a) on January 1 of each year, based proportionally on changes in the Consumer Price Index (''CPI''), with fractional changes rounded to the nearest fifty cents. The CPI increased 4.16 percent between September 1997, the date the FCRA amendments took effect, and September 1999. This increase in the CPI and the requirement that any increase be rounded to the nearest fifty cents results in an increase in the maximum allowable charge to $8.50.

EFFECTIVE DATE: January 1, 2000.

ADDRESSES: Federal Trade Commission, Washington, DC 20580.

FOR FURTHER INFORMATION CONTACT: Keith B. Anderson, Bureau of Economics, Federal Trade Commission, Washington, DC 20580, 202–326–3428.

SUPPLEMENTARY INFORMATION: Section 612(a)(1)(A) of the Fair Credit Reporting Act, as amended in 1996, states that, where a consumer reporting agency is permitted to impose a reasonable charge on a consumer for making a disclosure to the consumer pursuant to section 609, the charge shall not exceed $8 and shall be indicated to the consumer before making the disclosure. Section 612(a)(2) goes on to state that the Federal Trade Commission (''the Commision'') shall increase the $8.00 maximum amount on January 1 of each year, based proportionally on changes in the Consumer Price Index, with fractional changes rounded to the nearest fifty cents.

The Commission considers the $8 amount referred to in paragraph (1)(A)(i) of section 612(a) to be the baseline for the effective ceiling on reasonable charges dating from the effective date of the amended FCRA, i.e., September 30, 1997. In November of each year, the Commission calculates the proportional increase in the Consumer Price Index (using the most general CPI, which is for all urban consumers, all items) from September 1997 to September of the current year. The Commission then determines what modification, if any, from the original base of $8 should be made effective on January 1 of each subsequent year, given the requirement that fractional changes be rounded to the nearest fifty cents.

Between September 1997 and September 1999, the Consumer Price Index for all urban consumers and all items increased by 4.16 percent—from an index value of 161.2 in September 1997 to a value of 167.9 in September 1999. An increase of 4.16 percent in the $8.00 base figure would lead to a new figure of $8.33. However, because the statute directs that the resulting figure be rounded to the nearest $0.50, the allowable charge should be increased to $8.50.

The Commission therefore determines that the allowable charge for the year 2000 will be $8.50.

By direction of the Commission.

Donald S. Clark,

Secretary.

[FR Doc. 99–32391 Filed 12–13–99; 8:45 am]

BILLING CODE 6750–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 00028]

Cooperative Agreement Program to Increase Knowledge and Skills of Under-Represented Minority Students in the Areas of Biostatistics, Epidemiology, and Occupational Safety and Health; Notice of Availability of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 2000 funds for a cooperative agreement program to increase knowledge, skills and research training of under-represented minority students in the areas of biostatistics, epidemiology and occupational health and safety. For the purposes of this agreement, under-represented minority students are African American/Black American, Hispanic/Latino, or American Indian/Alaska Native students. This program addresses the ''Healthy People 2000'' priority area of Educational and Community-based Programs, Clinical Preventive Services, and Surveillance and Data (Objective 21.8), which proposes to increase the proportion of all persons with degrees in health professions, including allied and associated health fields, and the number of degrees awarded to members of under-represented racial and ethnic minority groups. In addition, the program addresses the performance of executive agency actions under Executive Order 12876, to advance the development of human potential, to strengthen the capacity of Historically Black Colleges and Universities (HBCUs), to provide quality education, and to increase opportunities to participate in and benefit from Federal programs.

The purpose of the program is to provide under-represented minority undergraduate students with training in two categories of specialization: Category I—biostatistics and epidemiology in Atlanta, GA, and Category II—occupational safety and health in Cincinnati, OH, Morgantown, WV, Pittsburgh, PA and Spokane, WA. Specifically, the program is intended to assist an HBCU to:

(1) Develop an undergraduate research training and internship program for African American and other under-represented minority students.

(2) Increase the knowledge and skills of African American and other under-represented undergraduate minority students in both categories of specialization, (i.e., epidemiology, biostatistics and occupational safety and health);

(3) Expand the educational and applied public health research training and skills development opportunities and experiences in the two fields of specialization (epidemiology, biostatistics, and occupational safety and health) for under-represented minority students who are interested in pursuing public health careers;

(4) Develop and implement a public health science curriculum at an HBCU,

(5) Foster linkages and collaboration among students and faculty in developing epidemiological and analytical knowledge bases for the health status of minority and under-served populations in America;

(6) Increase the number of African Americans and other under-represented minority populations with advanced degrees in epidemiology, biostatistics, and occupational safety and health.

B. Eligible Applicants

Eligible applicants are institutions of higher education that are designated as HBCUs. Only HBCUs which meet the following criteria are eligible to apply under this announcement: (1) have a predominantly black and other minority student enrollment of at least 51 percent, and (2) offer undergraduate courses in community/allied health,

computer sciences, mathematics, and/or biostatistics and epidemiology in their curriculum. Competition is limited to HBCUs under this program announcement because there is a critical shortage of both minority students and minority professionals to plan, monitor, and evaluate the public health policies and programs that target the heterogeneous minority population groups in the U.S.

Note: Public Law 104–65 states that an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, cooperative agreement, contract, loan, or any other form.

C. Availability of Funds

It is anticipated that a minimum of $200,000 will be available in FY 2000, to fund one award. It is expected that the award will begin on or about January 28, 2000, and will be made for a 12-month budget period within a project period of up to five years for Category I specialization, epidemiology and biostatistics, and for Category II specialization, occupational safety and health. Funding estimates may change.

Continuation awards within an approved project period will be made on the basis of satisfactory progress as evidenced by required reports and the availability of funds.

D. Program Requirements

In conducting activities to develop and achieve the purpose of this program, the recipient will be responsible for the activities under 1. (Recipient Activities), and CDC will be responsible for the activities listed under 2. (CDC Activities).

1. Recipient Activities

a. Educational Support and Curriculum Development: The recipient should develop and implement an educational support curriculum that includes, at a minimum, a Public Health Sciences Curriculum that emphasizes epidemiology, biostatistics, occupational safety and health, and related academic courses, including practicum. The public health sciences curriculum should be consistent with the institutional policies and procedures of the grantee, and include at least one semester (or equivalent) of biostatistics and epidemiology. In implementing the public health sciences curriculum developed under this agreement, the grantee should:

(1) Collaborate among, and across the recipient institution's educational departments to demonstrate the cross-disciplinary advantages of public health practice, and the importance of integrative and multi-disciplinary approaches to improving the health status and quality of life of African Americans and other minorities.

(2) Demonstrate how the public health sciences curriculum and educational support will enhance opportunities for minority students to obtain advanced degrees in epidemiology, biostatistics, and occupational safety and health from graduate programs housed within schools of public health or medicine.

(3) Develop, plan and provide other educational support for encouraging the pro-active recruitment of undergraduate students majoring in disciplines other than biology, chemistry, community health, or pre-medicine to increase their knowledge of public health practice.

(4) Establish a mechanism to award three (3) semester (or equivalent) credit hours to students who enroll and complete each of the public health sciences curriculum courses.

b. Internship Programs: The recipient should plan and manage an undergraduate summer internship program for African Americans and other under-represented minorities that emphasizes the two categories of specialization: Category I—training in biostatistics and epidemiology where plans will be developed to train students at CDC laboratories in Atlanta, GA; and Category II—occupational safety and health where plans will be developed to train students in National Institute of Occupational Safety and Health (NIOSH) laboratories in Cincinnati, OH, Morgantown, WV, Pittsburgh, PA or Spokane, WA. Examples of activities that may be undertaken, include, but are not limited to the following:

1. Establish a criteria for competitive selection of prospective students for both categories of specialization for the summer internship program that is consistent with the goals and objectives of the cooperative agreement. For example, a criteria for competitive selection might include the requirement for completion of one or more courses in biostatistics, epidemiology, or occupational safety and health; grade of B or above in overall course work; likelihood of the student to pursue a career in public health, research experience, other academic performance; and performance on personal interviews.

2. Identify and recruit undergraduate students who have successfully completed at least the sophomore year in college and who have expressed an interest in pursuing a career in the health sciences, occupational safety and health, industrial hygiene, environmental sciences, engineering, physics, social and behavioral sciences, or mathematics.

3. Provide mechanisms for supporting the participation of students in the summer internship program with the requirement that students should be available to participate fully in the program activities.

4. Provide adequate technical assistance and consultants, (e.g., computer, biostatistics, epidemiology, occupational safety and health), to assist the students in successfully completing the requirements of the internship program.

5. Establish and maintain a data base with demographic information on previous years' interns for the purposes of evaluation.

6. Establish a mechanism to award three (3) semester (or equivalent) credit hours to research interns upon successful completion of research projects that is consistent with grantee academic policies and procedures.

7. Maintain a liaison with the category II specialization, occupational safety and health.

c. Public Health Sciences Advisory Group: The recipient should establish a Public Health Sciences Advisory Group to advise on the implementation of the cooperative agreement program. Examples of activities which the Public Health Advisory Group might perform include the following:

1. Serve as liaison between the grantee institution and the public health education, training and research program.

2. Review applications and/or interview prospective interns.

3. Review proposals or research project descriptions submitted by the CDC to be analyzed by the students during the summer internship, and

4. Evaluate the public health sciences program on operating aspects, such as education, training and research components, and make suggestions for overall program improvement.

d. Research Training and Skills Development: The grantee should develop plans and approaches to make applied public health research projects (e.g., community assessments, programs and materials evaluation, etc.) an integral part of the public health sciences curriculum. The grantee should describe its existing and/or anticipated resources, (e.g., computer resources, and faculty members with applicable research experiences) which will ensure hands-on analytic research training and participation for the undergraduate students.

e. Staffing and Management: The grantee should provide adequate staffing

and management resources for the successful implementation of the cooperative agreement. For example, the following positions might be identified as key staff: Principal Investigator (PI), Executive Director (ED), Educational Program Coordinator, Occupational Safety and Health Coordinator, and Research Coordinator. The grantee should ensure that qualifications of key personnel are consistent with personnel policies and practices of the institution.

f. Evaluation Plan: The grantee is required to evaluate the management and performance of the students, including specific measures of a successful program and the frequency/time-frame for the evaluations (i.e., process and outcome evaluations). The recipient shall develop a computerized tracking system used as an evaluation tool for following-up the future professional activities of the students who have participated in this cooperative education program.

2. CDC Activities

The CDC is responsible for the following activities:

a. As requested, collaborate with the recipient, and provide consultation, assistance and support in planning, implementing and evaluating all aspects of the cooperative agreement.

b. As requested, collaborate with the grantee to establish criteria for evaluating both short-and long-term success of the public health sciences education, training, and research programs.

c. As requested, provide consultation and advice to the key program staff regarding administrative planning and program evaluation for program development in future years.

d. As needed, provide computer equipment (hardware and requisite software) to the computer, statistical, biostatistic, and the occupational safety and health consultants, interns and Public Health Science Institute faculty.

e. As needed, provide access to data sets, CDC mainframe computer, personal computers, word processors, research activities and other facilities that would be beneficial to program participants.

f. As needed, provide on-site office space and mentors to instruct the summer interns in the analysis of data sets.

g. As needed, provide meeting and office space at CDC for the summer participants, the coordinators, and the consultants for activities to be carried out during the summer internship program.

h. As needed, provide staff to give seminars to students who are selected for the internship program.

i. As needed or requested, provide technical support to assist the recipient in curriculum development and implementation of public health-related courses.

j. Collaborate in program planning and consultation with participants in the summer research program.

k. As needed or requested, provide applied public health research opportunities to allow students hands-on research experience and skills development training.

l. As needed, provide clerical support, necessary equipment, supplies, and other resources required for student recruitment and administration of the summer internship program by the Occupational Safety and Health Coordinator located at one of the NIOSH facilities.

E. Application Content

Use the information in the Program Requirements, Other Requirements, and Evaluation Criteria sections to develop the application content. Your application will be evaluated on the criteria listed, so it is important to follow them in laying out your program plan. The narrative should be no more than 40 double-spaced pages, printed on one side, with one inch margins, and unreduced font. Attachments should be limited to essential documentation.

The requirements under this cooperative agreement are consistent with the purpose/activities as enumerated above. It is anticipated, therefore, that each applicant will submit a proposal that addresses each of the following areas:

1. Executive Summary

The applicant should provide a concise, 1–3 page executive summary that clearly describes:

a. Eligibility, including: (a) Status as a Historically Black College and University, (b) Percent of students enrollment of African American and other minority students, (c) Description of undergraduate courses in community/allied health, computer sciences, mathematics, and/or biostatistics and epidemiology, and (d) Experience and capacity as an HBCU to provide knowledge, skills, and research training in the two categories of specialization, (i.e., category I—epidemiology and biostatistics, and category II—occupational safety and health.)

b. The needs for implementing a program to increase the knowledge, skills and research training in category I—epidemiology and biostatistics, and category II—occupational safety and health among African American and other minority students.

c. The major proposed goals, objectives and activities for implementing the program as well as total requested amount of Federal funding for each category of specialization.

d. Applicant's capability to implement the program.

2. Capacity (not more than 12 pages)

a. Describe ability to address the identified need.

b. Describe efforts and relevant experience that support the activities proposed to accomplish the objective for which the applicant is applying, including:

(1) current and previous experience related to the proposed program activities,

(2) activities related to operating internship programs;

(3) activities related to curriculum development,

(4) current and previous experience related to fostering linkages and collaboration among students and faculty, fostering integrative and multi-disciplinary approaches to improving health status, and

(5) current and previous experience with increasing the participation of minority students in public health careers.

c. Submit a copy of the project's management hierarchy, and describe how that structure supports the proposed program activities.

3. Operational Plan (Not more than 20 pages)

a. Goals. List goals that specifically relate to program requirements that indicate where the program will be at the end of the projected five-year period.

b. Objectives. List objectives that are specific, measurable, and feasible to be accomplished during the projected 12-month period. The objectives should directly relate to the project goals and recipient activities.

c. Describe in narrative form and display on a timetable, specific activities that are related to each objective. Indicate when each activity will occur as well as when preparations for activities will occur. Also, indicate who will be responsible for each activity and identify staff who will work on each activity. The applicant's proposal should include multiple subparts detailing its approach to fulfill the following program requirements:

(1) Educational Support and Curriculum Development

The applicant's application must describe a plan to develop and implement a public health sciences curriculum that emphasizes the category I specialization—epidemiology and biostatistics, and category II specialization—occupational safety and health, as well as related academic courses. However, consistent with the educational and administrative policies of the grantee, the application should also describe how the grantee will accomplish the following: (a) encourage undergraduate students majoring in disciplines other than biology, chemistry, community health, and pre-medicine to increase their knowledge of public health practice; (b) demonstrate how the curriculum and educational support will enhance opportunities for minority students to obtain advanced degrees in epidemiology, biostatistics, and occupational safety and health; (c) encourage interdepartmental activities that provides integrative and multi-disciplinary approaches, knowledge and skills to improve health status; (d) describe how the grantee will incorporate a practicum to give students hands-on research experience in each category of specialization, i.e., category I—biostatistics and epidemiology, and category II—occupational safety and health; (d) describe parameters for establishing a mechanism to award three (3) semester credit hours to students who enroll and complete each of the public health science curriculum courses and internship programs.

(2) Internship Program

The applicant must describe a methodology for planning and managing summer internship activities (for example: recruitment strategies, program operations, and program and course scheduling in each category of specialization, i.e., category I—biostatistics and epidemiology, and category II—occupational safety and health, and establishing a data base of previous years' interns);

(3) Research Training and Skills Development

The applicant must describe their plans and approaches to make applied public health research projects an integral part of the public health sciences curriculum. Each applicant must describe its existing and/or anticipated resources (e.g., computer resources and faculty members with applicable research experiences) which will ensure hands-on-analytic research training for the undergraduate students.

(4) Public Health Advisory Group

The applicant must include a description of plans to establish a Public Health Advisory Group to advise on the implementation of the cooperative agreement program.

(5) Staffing and Management

The applicant must describe the proposed staffing for the project and provide job descriptions for existing and proposed positions. See proposed definition of key personnel in the section on program requirements.

(a) Submit curriculum vitae (limited to 2 pages per person) for each professional staff member named in the application.

(b) Submit job descriptions illustrating the level of organizational responsibility for professional staff who will be assigned to the project.

(c) Submit an outline of the hierarchy of a management plan which shall assure fiscal and programmatic accountability in accordance with the terms of this cooperative agreement. The management plan should clearly identify the officials who will manage this program and their specific responsibilities.

(6) Evaluation Plan (Not more than 5 pages)

The applicant must describe a plan that evaluates the program's effectiveness in meeting its objectives. For each of the types of evaluation listed below, specify the evaluation question to be answered, data to be obtained, the type of analysis, to whom it will be reported, and how data will be used to improve the program. Indicate in the plan the projected staff and time lines to be used.

a. Process evaluation. Evaluate the program's progress in meeting objectives and conducting activities during the budget period.

b. Outcome evaluation. Assess the effectiveness of proposed activities, including training sessions and documents developed in attaining goal(s) at the completion of the one year budget period and the five year project period.

c. Computerized Tracking System. Applicants are required to develop a computerized tracking system to evaluate the effectiveness of the program in achieving its goals and objectives.

(7) Budget and Accompanying Justification

The applicant must provide a detailed budget and line-item justification of all operating expenses for each category of academic specialization, (i.e., category I—epidemiology and biostatistics, and category II—occupational safety and health.) The budget should be consistent with the stated objectives and planned activities of the project.

F. Submission and Deadline

Submit the original and two copies of the application (PHS Form 5161–1). Forms are available at the following Internet address: www.cdc.gov/. . . Forms, or in the application kit. Pages must be numbered clearly, and a complete table of contents of the application and its appendices must be included. Applicant should begin each separate section on a new page. The original and each copy of the application set must be submitted unstapled and unbound. All materials must be typewritten, single spaced, using an unreduced type not less than 12 point (10 characters per inch) on 8½'' x 11'' paper, with at least a 1'' margin, including headers and footers, and printed on one side only.

On or before January 14, 2000, the application should be submitted to: Brenda D. Hayes, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, (Program Announcement: 00028), Centers for Disease Control and Prevention, (CDC), 2920 Brandywine Road, Room 3000, Atlanta, GA 30341–4146. Telephone: 770–488–2741. Email: bkh4cdc.gov.

Deadline: Applications shall be considered as meeting the deadline if they are either: (a) received on or before the deadline date; or (b) sent on or before the deadline date and received in time for submission to the objective review group. (Applicants must request a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks will not be acceptable as proof of timely mailing.)

Late Applications: Applications which do not meet the criteria in (a) or (b) above are considered late applications, will not be considered in the current competition and will be returned to the applicant.

G. Evaluation Criteria

Each application will be evaluated individually against the following criteria by an independent review group appointed by CDC:

a. Educational Support and Curriculum Development (20 points)

The extent to which the applicant submits a plan which explains how it will develop and implement an educational support curriculum at an HBCU that does the following:

(1) Includes at a minimum a public health sciences curriculum emphasizing two categories of specialization, i.e., category I—epidemiology and biostatistics, and category II—occupational safety and health, as well as related public academic courses, including practicum.

(2) Explains how the recipient will collaborate among and across educational departments to demonstrate the cross-disciplinary advantages of public health practice, and the importance of integrative and multi-disciplinary approaches to improving the health status and quality of life of African Americans and other minorities.

(3) Explains how the recipient will develop, plan and provide other educational support for encouraging the proactive recruitment of undergraduate students majoring in disciplines other than biology, chemistry, community health, or pre-medicine to increase their knowledge of public health practice.

(4) Explains how the recipient will award students three semester and/or credit hours for completing public health course work.

b. Internship Programs (25 Points)

The extent to which the recipient explains how it will develop and implement a competitive undergraduate summer internship program that emphasizes two categories of specialization:

(1) Category I—training in biostatistics, epidemiology, and category II—training in occupational safety and health.

(2) Identifies recruitment strategies for undergraduate students who have successfully completed at least the sophomore year in college and expressed an interest in pursuing a career in the health sciences, occupational safety and health, industrial hygiene, environmental sciences, engineering, physics or mathematics.

(3) Provides mechanisms for supporting students during the summer internship program.

(4) Provides adequate technical assistance (e.g., computer, biostatistics, epidemiology, occupational safety and health) to ensure student's success in the internship program.

(5) Establishes a data base of the interns.

(6) Establishes a mechanism to award the students three credit hours for successful completion of research projects.

C. Public Health Sciences Advisory Group (10 Points)

The extent to which the applicant explains a process for establishing a Public Health Sciences Advisory Group to help guide the implementation of the public health curriculum, the internship program, and activities related to research training and skills development.

d. Research Training and Skills Development (15 Points)

The extent to which the applicant describes a plan and approaches to make applied health research projects (*e.g.*, community assessments, programs, and materials evaluation, etc.) an integral part of the public health sciences curriculum, including existing and/or anticipated resource needs, (e.g., computer resources and faculty with applicable research experiences.)

e. Staffing and Management (20 points)

The extent to which the applicant submits an adequate staffing and management plan for the successful implementation of the cooperative agreement.

f. Evaluation Plan (10 Points)

The extent to which the applicant submits a plan (*i.e.*, process and outcome evaluations) for evaluating the management and performance of the students who participate in the summer internship programs, presents a reasonable plan for obtaining data, reporting results, and includes a description of how a computerized tracking system will be developed and used as an evaluation tool for tracking and using programmatic results to enhance professional development of African American and other under-represented minorities in public health.

g. Budget (not scored)

The extent to which the applicant provides a detailed and clear budget narrative consistent with the stated objectives, planned activities and goals of the project. The proposed budget must address the two categories of specialization. The proposed budget should include provisions for inflation adjustments for each subsequent year following year one of the award.

H. Other Requirements

Technical Reporting Requirements Provide CDC with original plus two copies of annual progress reports not more than 60 days at the end of the project year, and a financial status report, no more than 90 days after the end of the budget period. Send all reports to: Brenda D. Hayes, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341–4146. Telephone: 770–488–2741. Email: bkh4@cdc.gov.

The following additional requirements are applicable to this program. For a complete description of each, see Attachment I in the application kit.

(AR–12) Lobbying Restrictions
(AR–1) Human Subjects Requirements
(AR98–2) Requirements for Inclusion of Women and Racial and Ethnic Minorities in Research
(AR–7) Executive Order 12372 Review
(AR–9) Paperwork Reduction Act Requirements
(AR–10) Smoke-Free Workplace Requirements
(AR–11) Healthy People 2000
(AR–15) Proof of Non-Profit Status
(AR–16) Security Clearance Requirement

I. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under Sections 301(a) and 317 (k) (2) [42 U.S.C. 241 (a) and 247b (k) (2) of the Public Health Service Act, as amended. In addition, the program is authorized under Presidential Executive Orders related to under-represented minority students: Historically Black Colleges and Universities Executive Order 12876 of November 1993. The Catalog of Federal Domestic Assistance number is 93.283.

J. Where to Obtain Additional Information

Please refer to Program Announcement 00028 when you request information. For a complete program description, information on application procedures, an application package, and business management technical assistance, contact: Brenda D. Hayes, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office Program Announcement 00028, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341–4146. Telephone: 770–488–2741. Email address bkh4@cdc.gov.

See also the CDC home page on the Internet: http://www.cdc.gov.

For program technical assistance, contact: Yvonne H. Lewis, Minority Health Program Specialist, Office of the Associate Director for Minority Health, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, M/S D–39, Atlanta, GA 30333. Telephone: 404–639–7220. Email address: yal0@cdc.gov.

See also the CDC home page on the Internet: http://www.cdc.gov.

Dated: December 8, 1999.

John L. Williams,

Director, Procurement and Grants Office Centers for Disease Control and Prevention (CDC).

[FR Doc. 99–32289 Filed 12–13–99; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 98F–1200]

Avecia, Inc.; Withdrawal of Food Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing the withdrawal, without prejudice to a future filing, of a food additive petition (FAP 7B4526) proposing that the food additive regulations be amended to provide for the safe use of 2-methyl-4,5-trimethylene-4-isothiazolin-3-one as a preservative for paper coatings intended for use in contact with fatty food.

FOR FURTHER INFORMATION CONTACT: Mark A. Hepp, Center for Food Safety and Applied Nutrition (HFS–215), Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202–418–3098.

SUPPLEMENTARY INFORMATION: In a notice published in the **Federal Register** of December 28, 1998 (63 FR 71493), FDA announced that a food additive petition (FAP 7B4526) had been filed by Zeneca Biocides, Foulkstone 1405, 2d, 1800 Concord Pike, P.O. Box 15457, Wilmington, DE 19850–5457. The petition proposed to amend the food additive regulations in § 176.170 *Components of paper and paperboard in contact with aqueous and fatty foods* (21 CFR 176.170) to provide for the safe use of 2-methyl-4,5-trimethylene-4-isothiazolin-3-one as a preservative for paper coatings intended for use in contact with fatty foods. Since publication of the filing notice, Zeneca Biocide's specialty chemicals group has been spun-off as Avecia, Inc., 1405 Foulk Rd., P.O. Box 15457, Wilmington, DE 19850–5457. Avecia, Inc., has now withdrawn the petition without prejudice to a future filing (21 CFR 171.7).

Dated: November 29, 1999.

Alan M. Rulis,

Director, Office of Premarket Approval, Center for Food Safety and Applied Nutrition.

[FR Doc. 99–32243 Filed 12–13–99; 8:45 am]

BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Ophthalmic Devices Panel of the Medical Devices Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). At least one portion of the meeting will be closed to the public.

Name of Committee: Ophthalmic Devices Panel of the Medical Devices Advisory Committee.

General Function of the Committee: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held on January 13, 2000, 9:30 a.m. to 5 p.m., and January 14, 2000, 9:30 a.m. to 2 p.m.

Location: Corporate Bldg., conference room 020B, 9200 Corporate Blvd., Rockville, MD.

Contact: Sara M. Thornton, Center for Devices and Radiological Health (HFZ–460), Food and Drug Administration, 9200 Corporate Blvd., Rockville, MD 20850, 301–594–2053, SMT@CDRH.FDA.GOV, or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area), code 12396. Please call the Information Line for up-to-date information on this meeting.

Agenda: On January 13, 2000, the committee will discuss, make recommendations, and vote on a premarket approval application (PMA) for a holmium laser for the correction of hyperopia using laser thermal keratomileusis. On January 14, 2000, the committee will discuss and make recommendations on: (1) The reclassification of an artificial eye lubricating solution, and (2) the classification status for currently unclassified eyelid weight devices.

Procedure: On January 13, 2000, from 9:30 a.m. to 3 p.m., and on January 14, 2000, from 9:30 to 2 p.m., the meeting is open to the public. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by January 6, 2000. On January 13, 2000, formal oral presentations from the public will be scheduled between approximately 9:45 a.m. and 10:15 a.m. Near the end of the committee deliberations on the PMA, a 30-minute open public session will be conducted for interested persons to address issues specific to the submission before the committee. On January 14, 2000, oral presentations from the public regarding the reclassification of the artificial eye lubricating solution and the classification of the eyelid weight devices will be scheduled between approximately 9:45 a.m. to 10:45 a.m. Those desiring to make formal oral presentations should notify the contact person by January 6, 2000, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

Closed Committee Deliberations: On January 13, 2000, from 3 p.m. to 5 p.m., the meeting will be closed to permit FDA to present to the committee trade secret and/or confidential commercial information (5 U.S.C. 552b(c)(4)) regarding pending issues and applications.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: December 7, 1999.

Linda A. Suydam,

Senior Associate Commissioner.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Technology Assessment Conference on Improving Medical Implant Performance Through Retrieval Information: Challenges and Opportunities

Notice is hereby given of the NIH Technology Assessment Conference on ''Improving Medical Implant Performance Through Retrieval Information: Challenges and Opportunities,'' which will be held January 10–12, 2000, in the Natcher Conference Center of the National Institutes of Health, 9000 Rockville Pike, Bethesda, Maryland 20892. The conference begins at 8:00 a.m. on January 10, at 8:00 a.m. on January 11, and at 9:00 a.m. on January 12.

Various medical implant devices have been widely used since the 1960s, and it is estimated that eight to ten percent of the American population currently has a permanent medical implant. Yet, there has not been any systematic effort developed in the United States for