SIC	Description
2679 ..	Converted Paper Products.
3519 ..	Internal Combustion Engines.
3631 ..	Household Cooking Equipment.
3633 ..	Household Laundry Equipment.
3951 ..	Pens and Mechanical Pencils.
4813 ..	Telephone Communications (Except Radio).

DATES: Public comments on GSA's program for expansion of small business participation in the above targeted categories should be submitted in writing to the address shown below on or before January 5, 2000.

ADDRESSES: Mail comments to General Services Administration, Office of Acquisition Policy, GSA Acquisition Policy Division (MVP), 1800 F Street, NW, Room 4027, Washington, DC 20405.

FOR FURTHER INFORMATION CONTACT: Cecelia L. Davis, GSA Acquisition Policy Division, (202) 219–0202.

Dated: December 16, 1999.

J. Les Davison,

Acting Deputy Associate Administrator for Acquisition Policy.

[FR Doc. 99–33077 Filed 12–20–99; 8:45 am]

BILLING CODE 6820–61–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality; Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality (AHRQ), formerly known as the Agency for Health Care Policy and Research (AHCPR).

ACTION: Notice.

SUMMARY: This notice announces that the Agency for Healthcare Research and Quality (AHRQ) is planning to request the Office of Management and Budget (OMB) to allow a proposed information collection of the ''1999–2001 Medical Expenditure Panel Survey—Insurance Component (MEPS–IC)'' In accordance with the Paperwork Reduction Act of 1995, Public Law 104–13 (44 U.S.C. 3506(c)(2)(A)), AHRQ invites the public to comment on this proposed information collection.

This proposed information collection was previously published in the **Federal Register** on October 13, 1999 and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment.

DATES: Comments on this notice must be received by January 20, 1999.

ADDRESSES: Written comments should be submitted to the OMB Desk Office at the following address: Alison Eydt, Human Resources and Housing Branch, Office of Information and Regulatory Affairs, OMB; New Executive Office Building, Room 10235; Washington, 20503.

Comments submitted in response to this notice will be summarized and included in the request for OMB approval of the proposed information collection. All comments will become a matter of public record.

FOR FURTHER INFORMATION CONTACT: Cynthia D. McMichael, AHRQ Reports Clearance Officer, (301) 594–3132.

SUPPLEMENTARY INFORMATION:

Proposed Project

''1999–2001 Medical Expenditure Panel Survey—Insurance Component (MEPS–IC).''

The MEPS–IC, an annual survey of the characteristics of employer-sponsored health insurance, was first conducted by AHRQ in 1997, seeking data pertaining to the calendar year 1996. The survey has since been conducted annually for calendar years 1997 and 1998.

This survey will be conducted for AHRQ by the Bureau of the Census using a sample comprised of:

1. Employers selected from Census Bureau lists of private sector employers and government employers (known as the List Sample); and

2. Employers identified by respondents to the MEPS-Household Component (MEPS–HC) for the same calendar year (known as the Household Sample).

Data to be collected from each employer will include a description of the business (e.g., size, industry) and description of health insurance plans available, plan enrollments, total plan costs and costs to employees.

Data Confidentiality Provisions

The MEPS–IC List Sample data confidentiality is protected under section 9 of Title 13, United States Code (the U.S. Census Bureau statute). MEPS–IC Household Sample data confidentiality is protected under sections 308(d) and 903(c) of the Public Health Service Act (42 U.S.C. 242m and 42 U.S.C. 299a–1). Section 308(d), the confidentiality statute of the National Center for Health Statistics, is applicable because the MEPS–HC sample is derived from respondents of an earlier NCHS survey. Section 903(c) is the confidentiality statute that applies to all identifiable data collected pursuant to AHRQ's statutory authorities. All data products listed below must fully comply with the data confidentiality statute under which the raw data was collected.

Data Products

Data will be produced in three forms: (1) Files derived from the Household Sample, which can be linked back to other information from household respondents in the MEPS–HC; (2) files containing employer information from the List Sample (available for use by researchers at the Census Bureau's Research Data Centers); and (3) a large compendium of tables of estimates based on the List Sample (available on the AHRQ website). These tables will contain descriptive statistics, such as, numbers of establishments offering health insurance, average premiums, average contributions, total enrollments, numbers of self insured establishments and other related statistics for a large number of population subsets defined by firm size, state, industry and establishment characteristics, such as, age, profit/nonprofit status and union/nonunion.

The data are intended to be used for purposes such as:

- Generating national and State estimates of employer health care offerings;
- Producing estimates to support the Bureau of Economic Analysis within the Department of Commerce and the Health Care Financing Administration in their respective calculations of health care expenditures for the Gross Domestic Product and National Health Accounts (annual totals for various categories of health care expenditures for the United States);
- Producing national and State estimates of spending on employer-sponsored health insurance to study the results of national and State health care policies;
- Supplying data for modeling the demand for health insurance; and
- Providing data on health plan choices, costs, and benefits that can be linked back to households' use of health care resources as were reported in the MEPS–HC survey for studies of the consumer health care selection process.

These data will provide the basis for researchers to address important questions for the benefit of employers and policymakers alike.

Method of Collection

The data will be collected using a combination of modes. The Census Bureau's first contact with employers will be made by telephone.

This contact will solicit and gather information on the availability of health

insurance from that employer and essential persons to contact. Based upon this information, Census will mail a questionaire to the employer. In order to assure high response rates, Census will follow-up with a second mailing at an acceptable interval, followed by a telephone call to collect data from those who have not responded by mail. For large organizational respondents with high burdens, such as State employers and very large firms, Census will, if needed, perform personal visits and do customized collection, such as, acceptance of data in computerized formats and use of special forms.

Estimated Annual Respondent Burden

Annual number of respondents	Estimated hours per respondent	Estimated total annual burden hours	Estimated annual cost to the government
33,839	.5	19,369	$7,000,000

Estimates of annual respondent burden are based upon experience from collection of the previous three MEPS—IC surveys.

Copies of these proposed collection plans and instruments can be obtained from the AHRQ Reports Clearance Officer (see above).

Dated: December 15, 1999.

John M. Eisenberg,

Director.

[FR Doc. 99–32942 Filed 12–20–99; 8:45 am]

BILLING CODE 4160–90–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 99F–5322]

United States Department of Agriculture, Food Safety and Inspection Service; Filing of Food Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that the United States Department of Agriculture, Food Safety and Inspection Service has filed a petition proposing that the food additive regulations be amended to increase the maximum dose of ionizing radiation permitted in the treatment of poultry products, include specific language intended to clarify the poultry products covered by the regulations, and remove the limitation that any packaging used during irradiation of poultry shall not exclude oxygen.

FOR FURTHER INFORMATION CONTACT: Rudaina H. Alrefai, Center for Food Safety and Applied Nutrition (HFS–206), Food and Drug Administration, 100 C St. SW., Washington, DC 20204, 202–418–3034.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (sec. 409(b)(5) (21 U.S.C. 348(b)(5))), notice is given that a food additive petition (FAP 9M4696) has been filed by the United States Department of Agriculture, Food Safety and Inspection Service, 300 12th St. SW., rm. 112, Washington, DC 20250. The petition proposes to amend the food additive regulations in § 179.26 *Ionizing radiation for the treatment of food* (21 CFR 179.26) in item 6. of the table in paragraph (b) to: (1) Increase the maximum dose of ionizing radiation permitted in the treatment of poultry products (2) include specific language intended to clarify the poultry products covered by the regulations and (3) remove the limitation that any packaging used during irradiation of poultry shall not exclude oxygen.

The agency has determined under 21 CFR 25.32(j) that this action is of a type that does not individually or cumulatively have a significant effect on the human environment. Therefore, neither an environmental assessment nor an environmental impact statement is required.

Dated: December 3, 1999.

Alan M. Rulis,

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

[FR Doc. 99–33004 Filed 12–20–99; 8:45 am]

BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 99D–5125]

Draft Guidance on the Labeling for Over-the-Counter Sample Collection Systems for Drugs of Abuse Testing; Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing the availability of the draft guidance entitled ''Guidance on Labeling for Over-the-Counter Sample Collection Systems for Drugs of Abuse Testing.'' This guidance is neither final nor is it in effect at this time. This guidance provides labeling recommendations for over-the-counter sample collection systems for drugs of abuse testing and is being issued as a result of FDA's proposed reclassification of over-the-counter sample collection systems for drugs of abuse testing as class I restricted devices.

DATES: Submit written comments concerning this draft guidance by March 22, 2000.

ADDRESSES: See the **SUPPLEMENTARY INFORMATION** section for information on electronic access to the draft guidance. Submit written requests for single copies on a 3.5″ diskette of the draft guidance document entitled ''Guidance on Labeling for Over-the-Counter Sample Collection Systems for Drugs of Abuse Testing'' to the Division of Small Manufacturers Assistance (HFZ–220), Center for Devices and Radiological Health, Food and Drug Administration, 1350 Piccard Dr., Rockville, MD 20850. Send two self-addressed adhesive labels to assist that office in processing your request, or fax your request to 301–443–8818.

Submit written comments on this draft guidance to the Dockets Management Branch, (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. Comments should be identified with the docket number found in brackets in the heading of this document.

FOR FURTHER INFORMATION CONTACT: Joseph Hackett, Center for Devices and Radiological Health (HFZ–440), Food and Drug Administration, 9200 Corporate Blvd., Rockville, MD 20850, 301–594–3084.

SUPPLEMENTARY INFORMATION:

I. Background

In the **Federal Register** of March 5, 1998 (63 FR 10792), FDA published a proposed rule that would reclassify over-the-counter (OTC) sample collection systems for drugs of abuse testing from class III (premarket approval) to class I (general controls),