DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-R-250]

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

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, has submitted to the Office of Management and Budget (OMB) the following proposal for the collection of information. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: Extension of a currently approved collection.

Title of Information Collection: Skilled Nursing Facility (SNF) Resident Assessment MDS Data and Supporting Regulations in 42 CFR 413.343 and 424.32.

Form No.: HCFA-R-250 (OMB# 0938-0739).

Use: Skilled Nursing Facilities (SNFs) are required to submit Resident Assessment Data as described at 42 CFR 483.20 in the manner necessary to administer the payment rate methodology described in 42 CFR 413.337. Pursuant to sections 4204(b) and 4214(d) of OBRA 1987, the current requirements related to the submission and retention of resident assessment data for the 5th, 30th, 60th and 90th days following admission, necessary to administer the payment rate methodology described in § 413.337, are subject to the Paperwork Reduction Act. Frequency: Monthly.

Affected Public: Business or other forprofit, and Not-for-profit institutions.

Number of Respondents: 17,000.
Total Annual Responses: 204,000.
Total Annual Hours: 5,696,218.25.
To obtain copies of the supporting

To obtain copies of the supporting statement for the proposed paperwork collections referenced above, access HCFA's WEB SITE ADDRESS at http:// www.hcfa.gov/regs/prdact95.htm, or Email your request, including your address and phone number, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB Desk Officer designated at the following address: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: February 14, 2000

John P. Burke III,

HCFA Reports Clearance Officer, HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 00–6740 Filed 3–17–00; 8:45 am]
BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General; Program Exclusions: February 2000

AGENCY: Office of Inspector General, HHS.

ACTION: Notice of program exclusions.

During the month of February 2000, the HHS Office of Inspector General imposed exclusions in the cases set forth below. When an exclusion is imposed, no program payment is made to anyone for any items or services (other than an emergency item or service not provided in a hospital emergency room) furnished, ordered or prescribed by an excluded party under the Medicare, Medicaid, and all Federal Health Care programs. In addition, no program payment is made to any business or facility, e.g., a hospital, that submits bills for payment for items or services provided by an excluded party. Program beneficiaries remain free to decide for themselves whether they will continue to use the services of an excluded party even though no program payments will be made for items and services provided by that excluded party. The exclusions have national effect and also apply to all Executive Branch procurement and nonprocurement programs and activities.

Subject, city, state	Effective date	
Program-Related Convictions		
ALVAREZ, IVAN	03/20/2000	
BARRON, CONCEPCION	03/20/2000	

Subject, city, state	Effective date
MIAMI, FL	
BERRY, NABIL DEARBORN, MI	03/20/2000
CAPALDO, GEORGE ROCKY	03/20/2000
DENVER, CO CLARK, BARBARA J	03/20/2000
PEMBROKE, NH CRITCHFIELD, CARRIE ANN	03/20/2000
BELLOWS FALLS, VT DIAZ, MANUEL	03/20/2000
MIAMI, FL	
EASON, ALMEDIA SHENELL HOBBSVILLE, NC	03/20/2000
ENOS, ARTHUR W BURLINGTON, MA	03/20/2000
ENOS AMBULANCE SERVICE	
INC BURLINGTON, MA	03/20/2000
ESPINO, OTTO NELSON MIAMI, FL	03/20/2000
FARMACIA NUEVO MODELO	03/20/2000
BAYAMON, PR FERNANDEZ, OMAR	03/20/2000
MIAMI, FL GHEN, ROBERT	03/20/2000
DELRAY BEACH, FL	
GONZALEZ, BARBARA MIAMI, FL	03/20/2000
HERNANDEZ, ELSA MIAMI, FL	03/20/2000
HYLAND, JOHN F DETROIT, MI	03/20/2000
JEFFERSON, GARY	03/20/2000
BALTIMORE, MD KERWIN, PATRICK MICHAEL	03/20/2000
PORTLAND, OR LEPORE, ROBERT	03/20/2000
BUFFALO, NY LOPEZ, GLORIA ESTRADA	03/20/2000
COLEMAN, FL LUNA, MICHAEL	03/20/2000
LONG ISLAND, NY MARTINEZ-ROIG, CESAR	03/20/2000
MIAMI, FL	
MENDEZ, ESTHER MIAMI, FL	03/20/2000
MORALÉS, DANIEL HIALEAH GARDENS, FL	03/20/2000
MURTAGH, OWEN J	03/20/2000
DIX HILLS, NY NABIL BERRY, D D S, P C	03/20/2000
DEARBORN, MI PARIENTE, ALBERTO	03/20/2000
MIAMI, FL	
PEREZ, ZENAIDA MIAMI, FL	03/20/2000
RAMOS, CARLOS ARMANDO HIALEAH, FL	03/20/2000
RODRIGUEZ, BETTY MIAMI, FL	03/20/2000
RODRIGUEZ-MACHADO,	
ALFREDOSAN JUAN, PR	03/20/2000
ROSEN, BARBARA MCEDARHURST, NY	03/20/2000
SAMARITAN TELE-MED, INC	03/20/2000
DELRAY BEACH, FL SOCARRAS, JOSE	03/20/2000
MIAMI, FL VILLAMIZAR, OTTO	03/20/2000
MIAMI, FL	
WALSH, MARCELLE JKEY COLONY BEACH, FL	03/20/2000
WOZONK, GEORGE	03/20/2000