furnished by an ambulatory surgical center:

Manufacturer: Allergan
Lens and Model Number: AMO Array Multifocal Model SA40N
Characteristic: Multifocal
Procedure Code: Q1001—NTIOL
Category 1
Manufacturer: STAAR Surgical Company
Lens and Model Numbers: Elastic Ultraviolet-Absorbing Silicone Posterior Chamber
Intraocular Lens with Toric Optic Models AA4203T, AA4203TF, and AA4203TL
Characteristic: Reduction in Preexisting Astigmatism
Procedure Code: Q1002—NTIOL
Category 2
Payment Adjustments made to ASCs
Payment adjustments made to ASCs that provide these lenses will be effective on May 18, 2000 and continue until May 18, 2005.

Authority: Sections 1832 (a)(2)(F)(i) and 1833(i)(2)(A) of the Social Security Act (42 U.S.C. 1395k(a)(2)(F)(i) and 1395l(i)(2)(A))
(Catalog of Federal Domestic Assistance Program No. 93.778, Medical Assistance Program; No. 93.773 Medicare—Hospital Insurance Program; and No. 93.774, Medicare—Supplementary Medical Insurance Program)

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Health Resources and Services Administration
Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget, in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301) 443–1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

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Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Wendy A. Taylor, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, D.C. 20503.


Jane Harrison,
Director, Division of Policy Review and Coordination.
[FR Doc. 00–10930 Filed 5–2–00; 8:45 am]
BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Health Resources and Services Administration
Federal Set-Aside Program: Special Projects of Regional and National Significance; Data Utilization and Enhancement: Cooperative Agreements for State Information Systems

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice of availability of funds.

SUMMARY: The Health Resources and Services Administration (HRSA) announces that approximately $428,000 in fiscal year (FY) 2000 funds is available for 6 to 10 cooperative agreements to improve maternal and child health State information systems. All awards will be made under the program authority of section 502(a) of the Social Security Act, the Maternal and Child Health (MCH) Federal Set-Aside Program (42 U.S.C. 702(a)). This Data Utilization and Enhancement (DUE) Cooperative Agreement Program (CFDA #93.110 U) will be administered by the Maternal and Child Health Bureau (MCHB), HRSA. Projects will be approved for a 3-year period, with awards at average yearly amounts ranging from $30,000 to $80,000. Funds for DUE cooperative agreements are appropriated by Public Law 106–113.

The DUE competition announced in this notice is a successor to a similar...
competition that was published in the 
Fall 1999 HRSA Preview and 
withdrawn in the Federal Register 
otice of March 30, 2000 (65 FR 16924). 
The competition has been modified to 
adjust project expectations to available 
funding. This announcement will only 
appear in the Federal Register and on 
the HRSA Home Page at: http:// 
www.hrsa.dhhs.gov/.

DATES: The deadline for receipt of 
applications is July 3, 2000. 
Applications will be considered “on 
time” if they are either received on or 
before the deadline date or postmarked 
on or before the deadline date. The 
projected award date is August 31, 2000. 

ADDRESSES: To receive a complete 
application kit, applicants may 
telephone the HRSA Grants Application 
Center at 1–877–477–2123 (1–877– 
HRSA–123) beginning April 21, 2000, or 
register on-line at: http:// 
www.hrsa.dhhs.gov/, or by accessing 
http://www.hrsa.gov/g-order3.htm 
directly. Applicants must use the 
appropriate Catalog of Federal Domestic 
Assistance (CFDA) number when 
requesting application materials. The 
CFDA is a Governmentwide 
compendium of enumerated Federal 
programs, projects, services, and 
activities which provide assistance. The 
CFDA Number for the DUE program is: 
#93.110 U.

This notice and application guidance 
for the DUE program may be 
downloaded in either WordPerfect 6.1 
or Adobe Acrobat format (.pdf) from the 
MCHB HomePage at http:// 
www.mchb.hrsa.gov/. Please contact 
Alisa Azarsa at 301/443–8989 or 
aazarsa@psc.gov, if you need 
assistance.

FOR FURTHER INFORMATION CONTACT: 
Michael Kogan, Ph.D., 301/443–3145, 
email: mkogan@hrsa.gov/ (for questions 
specific to project activities of the 
program, program objectives, or the 
required Letter of Intent which is further 
described in the application kit); Curtis 
Colston, 301/443–3438, email 
colston@hrsa.gov/ (for grants policy, 
budgetary, and business questions).

SUPPLEMENTARY INFORMATION: 
DUE Program Background and 
Objectives

The MCHB is directing significant 
attention to advancing and 
strengthening essential public health 
functions, and assisting State programs 
for MCH and Children with Special 
Health Care Needs (CSHCN) to enhance 
the State’s analytic capability and 
information infrastructure. The 
importance of this issue is evidenced by 
the recent inclusion of Core Health 
Status Indicator 08 on “State MCH Data 
Capacity” in the MCHB’s Title V Block 
Grant reporting system, which focuses 
on the ability of States to access key 
public health data sets related to 
women, children, and families.

MCHB recognizes the need to improve 
information collection and analysis by 
local, State, and Federal agencies. Data 
collected through separate data 
collection systems, such as birth 
certificates or Medicaid, would be more 
useful for identifying and addressing 
emerging trends if they were linked. 
Federal funds have been used to support 
development of individual State 
information systems through several 
initiatives, and there continues to be the 
need for a Federal role in linking 
datasets and enhancing information 
systems.

Authority: Section 502(a) of the Social 

Purpose:

This initiative requires the creative 
application of information technologies 
to improve the delivery of health care 
services to mothers and children. It will 
fund Cooperative Agreements to State 
MCH, CSHCN, health data agencies, or 
to an entity designated by one of the 
above agencies for the use and 
enhancement of extant technologies and 
resources to better collect, manage, link, 
and disseminate information to improve 
the health status of mothers and 
children. Support will be provided for 
developing linkages between annual 
data, registries and surveys. Examples of 
such systems include: infant birth and 
death certificates, Medicaid claims or 
eligibility files, Special Supplemental 
Nutrition Program for Women, Infants, 
and Children (WIC) files, newborn 
screening data, hospital discharge 
information, birth defects surveillance 
data, and survey data from the Centers 
for Disease Control-sponsored 
Pregnancy Risk Assessment Monitoring 
System (PRAMS) and Youth Risk 
Behavior Surveillance System (YRBS). 
The information obtained should 
increase the ability of States to monitor 
health status, investigate health 
problems and evaluate initiatives 
related to women, children and families. 
Awards are intended to supplement 
and/or complement existing activities 
initiated by States, local communities, 
and Federal agencies, thus fostering and 
strengthening collaboration between 
Federal, State and local public health 
agencies.

Eligibility

Under project grant regulations at 42 
CFR Part 51a.3, any public or private 
entity, including an Indian tribe or tribal 
organization (as defined at 25 U.S.C. 
450(b)), is eligible to apply for 
cooperative agreements covered by this 
announcement. This initiative, however, 
is particularly directed at State MCH, 
CSHCN, health data agencies, or to an 
entity designated by one of the above 
agencies that are committed to 
developing or improving the 
coordination of their maternal and child 
health-related datasets and are willing to 
demonstrate this commitment 
through specified actions.

Funding Level/Project Period

The total funding level for these 
cooperative agreements is $428,000 
annually over a three-year project 
period, from September 1, 2000 through 
May 31, 2003. The project period 
consists of one or more budget periods, 
each generally of one year duration. 
Continuation of any project from one 
budget period to the next is subject to 
satisfactory performance, availability of 
funds, and program priorities. The 
initial budget period is expected to be 
9 months, with subsequent budget 
periods being 12 months.

An estimated six to ten awards will be 
made annually, with average first-year 
awards ranging from $30,000 to $80,000.

Funding Priorities and/or Preferences

In view of the demonstrable State 
commitment required, preference in 
making awards will be given to State 
MCH, CSHCN, health data agencies, or 
to an entity designated by one of the 
above agencies.

Federal Involvement in Cooperative 
Agreements

It is anticipated that substantial 
Federal programmatic involvement will 
be required in these Cooperative 
Agreements during their performance. 
This means that after award, Federal 
staff will provide technical assistance 
and guidance to, or coordinate and 
participate in, certain programmatic 
activities of award recipients beyond 
their normal stewardship 
responsibilities in the administration of 
grants. In addition to the usual 
monitoring and technical assistance 
provided under grants, MCHB 
responsibilities for the DUE cooperative 
agreements will include the following: 
(1) Provision of the services of 
experienced MCHB personnel through 
participation in the planning and 
development of all phases of this 
project; 
(2) Participation, as appropriate, in 
any conferences and meetings 
conducted during the period of the 
Cooperative Agreement;
DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
[Docket No. FR–4560–C–05]

FY 2000 Super Notice of Funding Availability (SuperNOFA) for HUD’s Housing, Community Development and Empowerment Programs and Section 8 Housing Voucher Assistance; Notice of Clarifications and Modifications of the Fair Housing Initiatives Program (FHIP) and Extension of Application Deadline for FHIP Initiatives

AGENCY: Office of the Assistant Secretary for Fair Housing and Equal Opportunity, HUD.

ACTION: Super Notice of Funding Availability (SuperNOFA) for HUD grant programs: notice of clarifications and modifications for the FHIP funding availability announcement.

SUMMARY: On February 24, 2000, HUD published its Fiscal Year (FY) 2000 Super Notice of Funding Availability (SuperNOFA) for HUD’s Housing, Community Development, and Empowerment Programs and Section 8 Housing Voucher Assistance. This document makes certain modifications and clarifications to the FY 2000 funding availability announcement for the FHIP Initiatives Program.

DATES: Except for the applications submitted under the Fair Housing Partnership Components for the Private Enforcement Initiative (EOI) and the Private Enforcement Initiative (PEI), the application due date for funding under FHIP is extended to June 2, 2000. The application due date for applications submitted under the Fair Housing Partnership Components of EOI and PEI is extended to June 30, 2000.

FOR FURTHER INFORMATION CONTACT: You may contact Lauretta Dixon, Director, FHIP–FHAP Support Division, Office of Programs, Office of Fair Housing and Equal Opportunity, Department of Housing and Urban Development, 451 Seventh Street, SW, Washington, DC, at (202) 708–0800 (this is not a toll free number). Persons with speech or hearing impairments may call the FHIP–FHAP Division by advising applicants that points will no longer be awarded under these two components for applicants that devote a portion of their activities and budget to the needs of these underserved populations; and

(3) Review, approval and implementation of procedures established for accomplishing the scope of work for the project funded under this cooperative agreement;

(4) Assistance, including referral, in establishing Federal interagency contacts necessary to the successful completion of tasks and activities identified in the approved Scope of Work. MCHB will assist in identifying and establishing Federal interagency contacts required to achieve MCHB dissemination of program communication goals;

(5) Participation in the dissemination of project products.

Review Criteria

The following are generic review criteria applicable to MCHB programs:

(1) The extent to which the project will contribute to the advancement of maternal and child health and/or improvement of the health of children with special health care needs;

(2) The extent to which the project is responsive to policy concerns applicable to MCH grants and to program objectives, requirements, priorities and/or review criteria for specific project categories, as published in program announcements or guidance materials;

(3) The extent to which the estimated cost to the Government of the project is reasonable, considering the anticipated results;

(4) The extent to which the project personnel are well qualified by training and/or experience for their roles in the project and the applicant organization has adequate facilities and personnel; and

(5) The extent to which, insofar as practicable, the proposed activities, if well executed, are capable of attaining project objectives.

The final review criteria used to review and rank applications for the DUE program are included in the application kit. Applicants should pay strict attention to addressing these criteria as they are the basis upon which their applications will be judged.


Claude Earl Fox,
Administrator.

[FR Doc. 00–11016 Filed 5–2–00; 8:45 am]