

Analysis to Aid Public Comment describes both the allegations in the draft complaint that accompanies the consent agreement and the terms of the consent order—embodied in the consent agreement—that would settle these allegations.

DATES: Comments must be received on or before June 26, 2000.

ADDRESSES: Comments should be directed to: FTC/Office of the Secretary, Room 159, 600 Pennsylvania Ave., NW, Washington, D.C. 20580.

FOR FURTHER INFORMATION CONTACT: Carol Jennings or Elaine Kolish, FTC/S-4631, 600 Pennsylvania Ave., NW, Washington, D.C. 20580. (202) 326-3010 or 326-3042.

SUPPLEMENTARY INFORMATION: Pursuant to Section 6(f) of the Federal Trade Commission Act, 38 Stat. 721, 15 U.S.C. 46 and Section 2.34 of the Commission's Rules of Practice (16 CFR 2.34), notice is hereby given that the above-captioned consent agreement containing a consent order to cease and desist, having been filed with the accepted, subject to final approval, by the Commission, has been placed on the public record for a period of thirty (30) days. The following Analysis to Aid Public Comment describes the terms of the consent agreement, and the allegations in the complaint. An electronic copy of the full text of the consent agreement package can be obtained from the FTC Home Page (for May 26, 2000), on the World Wide Web, at "http://www.ftc.gov/ftc/formal.htm." A paper copy can be obtained from the FTC Public Reference Room, Room H-130, 600 Pennsylvania Avenue, NW, Washington, D.C. 20580, either in person or by calling (202) 326-3627.

Public comment is invited. Comments should be directed: FTC/Office of the Secretary, Room 159, 600 Pennsylvania Ave., Washington, D.C. 20580. Two paper copies of each comment should be filed, and should be accompanied, if possible, by a 3½ inch diskette containing an electronic copy of the comment. Such comments or views will be considered by the Commission and will be available for inspection and copying at its principal office in accordance with Section 4.9(b)(6)(ii) of the Commission's Rules of Practice (16 CFR 4.9(b)(6)(ii)).

Analysis of Proposed Consent Order To Aid Public Comment

The Federal Trade Commission has accepted, subject to final approval, an agreement to a proposed consent order from respondent Zim Textile Corporation.

The proposed consent orders has been placed on the public record for thirty (30) days for reception of comments by interested persons. Comments received during this period will become part of the public record. After thirty (30) days, the Commission will again review the agreement and the comments received and will decide whether it should withdraw from the agreement and take other appropriate action or make final the agreement's proposed order.

This matter concerns practices related to the manufacture, sale, and distribution of household textile products. The Commission's complaint charges that respondent violated the Federal Trade Commission Act, 15 U.S.C. 41 *et seq.*, and the Textile Fiber Products Identification Act, 15 U.S.C. 70 *et seq.*, by offering for sale and selling household textile products without disclosing on a tag or label affixed to each such product the fiber content, the manufacturer or dealer identity, and the country of origin.

Part I of the proposed consent order prohibits future violations of the Textile Fiber Products Identification Act and Commission rules and regulations, found at 16 CFR part 303, implementing the requirements of the statute.

Part II of the proposed order requires the respondent, for three years after the date of issuance of the order, to maintain records demonstrating compliance with the order.

Part III of the proposed order requires the respondent to distribute copies of the order to certain company officials and employees. Part IV of the proposed order requires the respondent to notify the Commission of any change in the corporation that may affect compliance obligations under the order. Part V of the proposed order requires the respondent to file one or more compliance reports. Part VI of the proposed order is a provision whereby the order, absent certain circumstances, terminates twenty years from the date of issuance.

The purpose of this analysis is to facilitate public comment on the proposed consent order. It is not intended to constitute an official interpretation of the agreement and proposed order or to modify in any way their terms.

By direction of the Commission.

Donald S. Clark,

Secretary.

[FR Doc. 00-14146 Filed 6-5-00; 8:45 am]

BILLING CODE 6750-01-M

GENERAL ACCOUNTING OFFICE

Appointments to the Medicare Payment Advisory Commission

AGENCY: General Accounting Office (GAO).

ACTION: Notice of appointments.

SUMMARY: The Balanced Budget Act of 1997 established the Medicare Payment Advisory Commission (MedPAC) and gave the Comptroller General responsibility for appointing its members. This notice announces six appointments to fill the vacancies occurring this year.

DATES: Appointments are effective May 1, 2000 through April 30, 2003.

ADDRESSES:

GAO: 441 G Street, NW, Washington, DC 20548

MedPAC: 1730 K Street, NW, Suite 800, Washington, DC 20006

FOR FURTHER INFORMATION CONTACT:

GAO: Molly Ryan, 202/512-3592

MedPAC: Murray N. Ross, Ph.D., 202/653-7220

SUPPLEMENTARY INFORMATION: To fill this year's vacancies I am announcing the following MedPAC appointments:

Autry O.V. "Pete" DeBusk; Glenn M. Hackbarth; Alan R. Nelson; Robert D. Reischauer; David A. Smith; and Ray E. Stowers

(Sec. 4022, Pub. L. 105-33, 111 Stat. 251, 350)

David M. Walker,

Comptroller General of the United States.

[FR Doc. 00-14068 Filed 6-5-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Committee on Vital and Health Statistics: Meeting

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services announces the following advisory committee meeting.

Name: National Committee on Vital and Health Statistics (NCVHS).

Time and Date: Tuesday, June 20, 2000, 9 a.m.–Noon EDT; Wednesday, June 21, 2000, 9:15 a.m.–5:00 p.m. EDT.

Place: Hubert H. Humphrey Building, Conference Room 705A, 200 Independence Avenue S.W., Washington, DC.

Status: Open.

Purpose: On the first day of this two day meeting, the full Committee will discuss the draft Report on Uniform Data Standards for Patient Medical Record Information as prepared by the Subcommittee on Standards

and Security. They will then hear a presentation on a National Research Council report entitled: Networking Health: Prescriptions for the Internet. On the second day the Committee will hear updates on a variety of topics from staff of the Department of Health and Human Services and a presentation on digital signatures. The afternoon's agenda will consist of Subcommittee working sessions and followed by status reports from the Subcommittees to the full Committee.

Notice: In the interest of security, the Department has instituted stringent procedures for entrance to the Hubert H. Humphrey building by non-government employees. Persons without a government identification card may need to have the guard call for an escort to the meeting.

Contact Person for more Information: Substantive program information as well as summaries of meetings and a roster of committee members may be obtained from Marjorie S. Greenberg, Executive Secretary NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, Room 1100, Presidential Building, 6525 Belcrest Road, Hyattsville, Maryland 20782, telephone (301) 458-4245. Information also is available on the NCVHS home page of the HHS website: <http://www.ncvhs.hhs.gov/>, where further information will be posted when available.

Dated: May 26, 2000.

James Scanlon,

Director, Division of Data Policy, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 00-14083 Filed 6-5-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 00145]

Comprehensive Cancer Control; 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 sole source cooperative agreement program for the enhancement and implementation of a comprehensive cancer control initiative. Comprehensive cancer control is an integrated and coordinated approach to reduce the incidence, morbidity, and mortality of cancer through prevention, early detection, treatment, rehabilitation, and palliation. This initiative addresses priority minority populations at the community level including medically underserved men and women.

CDC is committed to achieving the health promotion and disease

prevention objectives of "Healthy People 2010," a national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to the focus area on cancer and the oral cancer objectives in Chapter 21, the oral health focus area. For the conference copy of "Healthy People 2010," visit the Internet site <<http://www.health.gov/healthypeople>>.

The purpose of the initiative is to assist with the following:

- Enhanced coordination among those involved in all aspects of comprehensive cancer control, from prevention to palliation.
- Implementation of priorities that support the State's comprehensive cancer control plan.
- Increased cooperation and collaboration among risk-factor and cancer-specific programs and activities (including surveillance systems) without compromising the integrity of individual categorical programs.
- Enhanced and strengthened coalitions and partnerships that support the overall goals and objectives of the comprehensive cancer control plan.
- A coordinated approach to the dissemination of cancer-related information; and education programs that are consumer-oriented and embody a comprehensive approach to cancer control.
- Capacity-building and institutionalization of organizational changes promoting comprehensive and integrated cancer control.
- The development or revision of a comprehensive cancer control plan that is being used to support the implementation of cancer prevention and control priorities.
- Evaluation methods to track progress related to the planning and implementation of cancer control plan goals and objectives.

B. Eligible Applicants

Assistance will be provided only to the University of Miami for its comprehensive South Florida Minority Cancer Initiative. No other applications are solicited. The sole source justification is based on congressional language in the Conference Report (H.R. Rep. 106-479, at 601 (1999) to the Consolidated Appropriations Act, 2000 (Public Law 106-113), which earmarked funding for the University of Miami, Miami, Florida.

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

Approximately \$800,000 is available in FY 2000 to fund the program described below. It is expected that the awards will begin September 30, 2000, and will be made for a 12-month budget period within a project period of up to 3 years. 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.

Use of Funds

Cooperative agreement funds may *not* be expended to provide inpatient hospital or treatment services. Treatment is defined as any service recommended by a clinician, including medical and surgical intervention provided in the management of a diagnosed condition.

These funds are intended for comprehensive cancer control and should not be used to directly support other existing programs such as breast and cervical cancer programs, cancer registry programs, laboratory or clinical services, or tobacco control programs. Indirectly, these funds may be used to assist with the integration and coordination of activities related to these existing programs. Thus, these funds should be used to assist with the coordination of these and other categorical programs into comprehensive cancer control activities. Funds awarded under this program announcement may not be used to supplant existing program efforts.

D. Program Requirements

Comprehensive cancer control activities should adhere to current accepted public health recommendations by the U.S. Preventive Services Task Force, or current Division of Cancer Prevention and Control (DCPC) guidance.

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

1. Recipient Activities

a. Identify and hire necessary key staff to implement the comprehensive cancer control plan.

b. Maintain or enhance a broad-based comprehensive cancer control coalition that includes representation from throughout the state. This coalition should include key private, professional, voluntary, and nonprofit organizations, policymakers, consumers