

Trans #	Acquiring	Acquired	Entities
TRANSACTIONS GRANTED EARLY TERMINATION—02/01/2001			
20011222	CIENA Corporation	Cyras Systems, Inc	Cyras Systems, Inc.
TRANSACTIONS GRANTED EARLY TERMINATION—02/22/2001			
20011327	Hit Entertainment PLC	Lyrick Corporation	Big Feats L.P. Lyons Partnership L.P.

FOR FURTHER INFORMATION CONTACT:
Sandra M. Peay or Parcellena P. Fielding, Contact Representatives, Federal Trade Commission, Premerger Notification Office, Bureau of Competition, Room 303, Washington, D.C. 20580, (202) 326-3100.

By direction of the Commission.

Donald S. Clark,
Secretary.

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BILLING CODE 6750-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

The Committee on Immunization Registry Standards and Electronic Transactions and the American Immunization Registry Association Sponsored Meeting of Software Vendors for Healthcare Providers: Meeting

Name: Meeting with software vendors for healthcare providers sponsored by the Committee on Immunization Registry Standards and Electronic Transactions and the American Immunization Registry Association.

Time and Date: 10 a.m.–1 p.m., July 12, 2001.

Place: Arkansas’ Excelsior Hotel, Three Statehouse Plaza, Little Rock, Arkansas 72201, telephone 501-375-5000.

Status: Open to the public, including all software vendors for healthcare providers, limited only by the space available. The meeting room accommodates approximately 200 people.

Purpose: Immunization Registries Issue Invitation to Vendors of Software for Healthcare Providers

The Committee on Immunization Registry Standards and Electronic Transactions (CIRSET), in cooperation with the American Immunization Registry Association (AIRA), invites vendors of healthcare software systems to participate in a meeting on July 12,

2001, from 10:00 a.m. to 1:00 p.m., in conjunction with the Annual Immunization Registry Conference being held at the Arkansas’ Excelsior Hotel in Little Rock, AK. The meeting will explore the potential for two-way data exchange between provider software and state and community immunization registries, as envisioned by CIRSET, AIRA, the Centers for Disease Control and Prevention’s National Immunization Program (NIP), and state and local immunization registry programs.

Challenge

Immunization registries face technical challenges similar to those faced by most of the healthcare industry today—how to enable communication among numerous disparate systems. Registries have been developed by a number of different entities—managed care organizations, independent software vendors, states, cities, counties, and local communities.

The developers of these registries chose the hardware and software support platforms that worked best within their own systems, but the resulting applications cannot communicate with each other except through expensive, custom interfaces.

Traditionally, these practices have caused vendors of practice management systems to have difficulty implementing immunization record exchange because each immunization registry had a different vision, format, and protocol for data exchange. This problem has been addressed using a national standard for electronic data exchange, Health Level Seven. The standard was used to develop an implementation guide for immunization data exchange entitled, “Implementation Guide for Immunization Data Transactions Using Version 2.3.1 of the Health Level Seven (HL7) Standard Protocol,” June 1999 (Guide). This Guide is the result of collaboration by a number of immunization registry developers who acknowledge the value of standardized data exchange and are ready to implement data exchange among registries. The Guide defines registry specific messages in detail, showing a

range of fully valued messages that carry a complete complement of immunization data. The Guide also defines a “minimum standard message” that could be implemented by a non-clinical system to communicate with a registry. A minimum amount of data could be saved to a file in a standard HL7 format, creating a batch of updates for the provider to send to the registry on a periodic basis. The minimum message consists of core demographic and vaccine event data elements plus values for additional HL7-required fields. These are defined and examples provided in the Guide.

Differences in interpretations, acceptable codes, and definitions have been resolved by consensus. Registries agree that all will benefit if they adhere to one national standard implementation guide that can be available to both registries and software vendors of provider systems. One vendor explained that, with one national implementation, vendors would be more ready to incorporate it into the clinical or computer-based patient record systems they were building or upgrading. Another vendor advised that, even though his product was strictly a billing system, he believed it would be possible to extract the needed data and save it to a file as services were performed in the clinic. That file could be forwarded to the registry, eliminating the need for redundant data entry. A standard implementation allows vendors to assure their customers of compatibility among all participating systems. Just as importantly, implementing a national standard that is already in use in a large number of healthcare systems can save time and money for all involved parties.

The Future

Continuing collaboration to ensure that implementation plans meet messaging requirements will enable registry developers, vaccination providers, and vendors of physician systems to achieve interoperability not previously possible. The core data set, current vaccine and vaccine manufacturers’ code sets, and the HL7 immunization messaging

implementation guide are available on the NIP website at www.cdc.gov/nip/registry.

Matters To Be Discussed:

Agenda items include:

- Introduction to Registries
- Introduction to CIRSET and immunization data exchange
 - Why registries need standards
 - Which registries are participating
 - What was done historically
 - Status of standards and HL7
- Needs of Immunization Registries
- CDC's Role—Guidelines and Coordination
- Vendor Opportunities
- Open Discussion of Solutions and Problems
- Next Steps

Agenda items are subject to change as priorities dictate.

Contact Person for More Information:

Susan Abernathy or Julie Gamez, Program Analysts, Systems Development Branch, Data Management Division, National Immunization Program, CDC, 1600 Clifton Road, NE, M/S E-62, Atlanta, Georgia 30333, telephone 404/639-8245, fax 404/639-8171.

The Director, Management Analysis and Services office has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: February 21, 2001.

John Burckhardt,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Statement of Organization, Functions, and Delegations of Authority

This notice amends Part K of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (DHHS), Administration for Children and Families (ACF) as follows: Chapter KP, the Office of the Deputy Assistant Secretary for Administration (ODASA), previously amended on October 6, 1999, (64 FR 54330) and January 2, 1998, (63 FR 81). This notice

reflects the restructuring of the Office of the Deputy Assistant Secretary for Administration.

This Chapter is amended as follows:

1. Chapter KP, Office of the Deputy Assistant Secretary for Administration
 - a. Delete KP.10 Organization in its entirety and replace with the following: KP.10 Organization. The Office of the Deputy Assistant Secretary for Administration is headed by the Deputy Assistant Secretary who reports to the Assistant Secretary for Children and Families. The Office is organized as follows:
 - Office of the Deputy Assistant Secretary for Administration (KPA)
 - Office of Information Services (KPB)
 - Office of Financial Services (KPC)
 - Office of Organizational Development Services (KPD)
 - Office of Customer Service and Administration (KPE)
 - Executive Secretariat Office (KPG)
 - Equal Employment Opportunity and Civil Rights Staff (KPH)
 - Office of Administrative Services and Facilities Management (KPL)
 - b. Delete KP.20 Functions, Paragraph A, in its entirety and replace with the following:

KP.20 Functions. A. Office of the Deputy Assistant Secretary for Administration (ODASA) directs and coordinates all administrative activities for the Administration for Children and Families (ACF). The Deputy Assistant Secretary for Administration serves as ACF's: Chief Financial Officer; Chief Grants Management Officer; Federal Manager's Financial Integrity Act Management Control Officer; Principal Information Resource Management Official serving as Chief Information Officer; Deputy Ethics Counselor; Personnel Security Representative; and Reports Clearance Officer. The Deputy Assistant Secretary for Administration serves as the ACF liaison to the Office of the General Counsel and, as appropriate, initiates action in securing resolution of legal matters relating to management of the agency, and represents the Assistant Secretary on all administrative litigation matters.

The Deputy Assistant Secretary for Administration provides day-to-day executive leadership and direction to the Equal Employment Opportunity and Civil Rights Staff; Executive Secretariat Office; Office of Administrative Services and Facilities Management; Office of Customer Service and Administration; Office of Financial Services; Office of Information Services; Office of Organizational Development Services; and Office of State Systems Policy. The

Deputy Assistant Secretary for Administration represents the Assistant Secretary in HHS and with other Federal agencies and task forces in defining objectives and priorities, and in coordinating activities associated with reinvention and continuous improvement initiatives.

c. Delete KP.20 Functions, Paragraph B, in its entirety and replace with the following:

B. The Office of Information Services (OIS) provides centralized information technology policy, procedures, standards and guidelines. The OIS Director serves as the Deputy Chief Information Officer, supporting the Chief Information Officer in the full range of activities required to carry out ACF's information technology (IT) and information resource management (IRM) programs. The Office provides liaison with OMB, GSA, and GAO on all IT and IRM matters and manages major interdepartmental IRM initiatives. It directs and coordinates ACF's Privacy Act responsibilities. The Office coordinates mandated OMB information collection approvals and plans. It directs and maintains ACF records and forms management programs. OIS develops long-range IRM plans; develops IRM policy, procurement plans and budgets for ACF information systems. The Office develops and implements procurement strategies for ADP support services. OIS reviews and analyzes all ADP acquisition documentation for compliance with applicable laws and regulations as well as for procurement strategy. It coordinates technical assistance provided to program offices on ADP support services procurements. The Office develops, recommends and implements ACF-wide policies, procedures, standards and guidelines concerning electronic government (e-government). It oversees the implementation of e-government policies through leadership and coordination with ACF program and staff offices. OIS serves as the ACF liaison with the Department and other federal and non-federal agencies to coordinate strategies and policies relative to staff development and training and e-government activities. The Office develops training policy and plans for ACF.

It provides leadership in directing and managing agency-wide staff development and training activities for ACF. OIS is responsible for the functional management of all information technology and software training, common needs training, and management training in the agency, including policy development,