

Activity	Burden hours per year	Wage category hourly rate	Total annual labor cost
Recordkeeping .....	934	Clerical/\$10 .....	9,340
Labeling, marking, and fact sheet preparation .....	101,333	Clerical/\$10 .....	1,013,330
Catalog disclosures .....	2,550	Clerical/\$10 .....	25,500
			7,827,250

*Capital or Other Non-Labor Costs:* \$3,519,000 (rounded), determined as follows:

Staff has examined the five distinct burdens imposed by EPCA through the Rule—testing, reporting, recordkeeping, labeling, and retail catalog disclosures—as they affect the 11 groups of products that the rule covers. Staff has concluded that there are no current start-up costs associated with the rule. Manufacturers have in place the capital equipment necessary—especially equipment to measure energy and/or water usage—to comply with the rule.

Under this analysis, testing, recordkeeping, and retail catalog disclosures are activities that incur no capital or other non-labor costs. As mentioned above, testing has been performed in these industries in the normal course of business for many years as has the associated recordkeeping. The same is so for regarding compliance applicable to the requirements for paper catalogs. Manufacturers and retailers who make required disclosures in catalogs already are producing catalogs in the ordinary course of their businesses; accordingly, capital cost associated with such disclosure would be minimal or nil. Staff recognizes that there may be initial costs associated with posting online disclosure, and it invites further comment to reasonably quantify such costs.

Manufacturers that submit required reports to the Commission directly (rather than through trade associations) incur some nominal costs for paper and postage. Staff estimates that these costs do not exceed \$2,500. Manufacturers must also incur the cost of procuring labels and fact sheets used in compliance with the rule. Based on estimates of 50,113,098 units shipped and 128,650 fact sheets prepared,<sup>3</sup> at an

<sup>3</sup> The units shipped total is based on combined actual or estimated industry figures for calendar year 2000 across all of the product categories, except for fluorescent lamp ballasts, lamp products, and plumbing fixtures. Staff has determined that, for those product categories, there are little or no costs associated with the labeling requirements. The fact sheet estimation is based on the previously noted assumption that five percent of HVAC manufacturers produce fact sheets on their own. Based on total HVAC units shipped (10,291,965), five percent amounts to 514,598 HVAC units.

average cost of seven cents for each label or fact sheet, the total (rounded)—labeling cost is \$3,516,922.

**John D. Grubert,**

*Acting General Counsel.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Request for Nominations of Members to the Advisory Committee on Blood Safety and Availability

**AGENCY:** Office of the Secretary, HHS.

**ACTION:** Announcement of request for membership nominations.

**SUMMARY:** The Office of the Secretary requests nomination of individuals to serve on the Advisory Committee on Blood Safety and Availability in accordance with its charter. Appointments will be made for a term of four years. Individuals nominated after June 1, 2000 will remain under consideration for these appointments.

**DATES:** All nominations must be received at the address below no later than 4 p.m. EDT August 31, 2001.

**ADDRESSES:** All nominations shall be submitted to Stephen D. Nightingale, M.D., Executive Secretary, Advisory Committee on Blood Safety and Availability, Office of Public Health and Science, Department of Health and Human Services, 200 Independence Ave., SW., Washington, DC 20201. Phone (202) 690-5560.

**FOR FURTHER INFORMATION CONTACT:** Stephen D. Nightingale, M.D., Executive Secretary, Advisory Committee on Blood Safety and Availability, Office of Public Health and Science, Department of Health and Human Services, Room 736-E, 200 Independence Ave., SW., Washington, DC 20201. Phone (202) 690-5560.

**Nominations:** In accordance with the charter of the Committee, persons

Because manufacturers generally list more than one unit on a fact sheet, staff has estimated that manufacturers independently preparing them will use one sheet for every four of these 514,598 units. Thus, staff estimates that HVAC manufacturers produce approximately 128,650 fact sheets.

nominated for membership should be from among authorities knowledgeable in blood banking, transfusion medicine, bioethics and/or related disciplines. Members shall be selected from State and local organizations, blood and blood products industry including manufacturers and distributors, advocacy groups, consumer advocates, provider organizations, academic researchers, ethicists, private physicians, scientists, consumer advocates, legal organizations and from among communities of persons who are frequent recipients of blood and blood products.

**Information Required:** Each nomination shall consist of a package that, at a minimum, includes:

A. The name, return address, daytime telephone number and affiliation(s) of the individual being nominated, the basis for the individual's nomination, the category for which the individual is nominated, and a statement bearing an original signature of the nominated individual that he or she is willing to serve as a member of the committee;

B. The name, return address, daytime telephone number at which the nominator may be contacted. Organizational nominators must identify a principal contact person in addition to the contact person in addition to the contact information; and

C. A copy of the nominee's curriculum vitae.

The Department of Health and Human Services has a strong interest in ensuring that women, minority groups, and physically challenged individuals are adequately represented on the Committee and, therefore, encourages nomination of qualified candidates from these groups. The Department also encourages geographic diversity in the composition of the Committee.

Individuals should feel free to nominate themselves. All nomination information for a nominee must be provided in a complete single package. Incomplete nominations will not be processed. Nomination materials must bear original signatures, and facsimile transmission or copies are not acceptable.

Dated: May 21, 2001.

**Stephen D. Nightingale,**

*Executive Secretary, Advisory Committee on Blood Safety and Availability.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of Public Health and Science

#### Announcement of Availability of Funds for Research in Family Planning Service Delivery Improvement

**AGENCY:** Office of Population Affairs, OPHS, DHHS.

**ACTION:** Notice.

**SUMMARY:** The Office of Population Affairs (OPA) requests applications for family planning service delivery improvement research grants. Applications should address Title X Family Planning Program priorities in two general areas: (1) Providing family planning and reproductive health services to underserved populations; and (2) assessing the impact of increasing costs on the delivery of family planning and reproductive health services.

**DATES:** The closing date for this grant announcement is July 26, 2001. Applications will be considered as meeting the deadline date if they are: (1) Received on or before the deadline date or (2) postmarked on or before the deadline date and received in time to be considered during the competitive review process. A legible date receipt from a commercial carrier or U.S. Postal Service will be accepted in lieu of a postmark. Private metered postmarks will not be accepted as proof of timely mailing. Applications which do not conform to requirements of this announcement will be accepted for review. Applicants will be so notified and the applications will be returned.

**ADDRESSES:** Application kits may be obtained from the Office of Population Affairs, Office of Grants Management, 4350 East-West Highway, Suite 200, Bethesda, MD 20814. Application kits may also be downloaded from the OPA web site at <http://www.hhs.gov/opa> or requests may be faxed to (301) 594-5980. To facilitate the handling of written requests, please include: name, title, organization, mailing address, telephone number and e-mail address. All completed applications must be submitted to the Office of Grants Management at the above mailing address. Please label the application envelope: "Attention: Family Planning Research."

**FOR FURTHER INFORMATION CONTACT:** For information on specific research issues: Eugenia Eckard, Office of Population Affairs, (301) 594-6534. For questions about the technical preparation of the grant application: Andrea Brandon, Grants Management Officer, (301) 594-4012.

**SUPPLEMENTARY INFORMATION:** Title X of the Public Health Service Act (42 U.S.C. 300a-2) authorizes the Secretary of Health and Human Services to award grants and enter into contracts with public agencies or private nonprofit entities to provide research in behavioral and program implementation fields related to family planning. (Catalogue of Federal Domestic Assistance No. 93.974.) This research program is not subject to the intergovernmental review requirements of Executive Order 12372 and 45 CFR 100.

It is the policy of OPA that women and members of minority groups and their subpopulations be included in all OPA supported research projects involving human subjects, unless a clear and compelling rationale and justification are provided indicating that inclusion is inappropriate with respect to the health of the subject or the purpose of the research.

All investigators proposing research involving human subject should read the updated "NIH Guidelines for Inclusion of Women and Minorities as Subjects in Clinical Research", published in the NIH Guide for Grants and Contracts on August 2, 2000 and available at: [http://grants.nih.gov/grants/funding/women\\_min/guidelines\\_update.htm](http://grants.nih.gov/grants/funding/women_min/guidelines_update.htm).

In the interest of making data available to others, copies of data sets and accompanying documentation produced with funds granted through this announcement will be deposited with a public use data archive or with the OPA. The cost of making such data available should be budgeted in the proposal.

Applications should address how findings from the proposed study will have general applicability to the improvement of the delivery of family planning services, and a plan must be presented on how information from the research findings will be disseminated.

*Healthy People 2010:* The OPA is committed to achieving the health promotion and disease prevention objectives of "Healthy People 2010," a PHS-led national activity for setting priority areas. This Request for Applications (RFA) is related to one or more of the priority areas, in particular the focus area on family planning.

Potential applicants may obtain "Healthy People 2010" at <http://www.health.gov/healthypeople>.

*Research Goals and Scope:* The primary purpose of the Title X Family Planning Program is to provide family planning and reproductive health services to all persons desiring them. To that end, the program is guided by a set of priorities: maintain a high level of quality in the family planning and reproductive health services delivered; ensure comprehensiveness in the range of services offered, and; increase access to services through partnerships with other public health providers and community-based organizations, as well as outreach to underserved populations. This RFA invites proposals for applied research to address these priorities in two general areas: (1) Providing family planning and reproductive health services to underserved populations; and (2) assessing the impact of increasing costs on the delivery of family planning and reproductive health services.

#### Underserved Populations

It has been demonstrated that access to family planning and reproductive health services has a positive impact on reducing the incidence of sexually transmitted diseases (STD)/HIV infection, unintended pregnancy, abortion, maternal and infant morbidity and mortality, and diseases of the reproductive system. The Title X Family Planning Program was established in 1970 to facilitate such access by offering a broad range and family planning and reproductive health services-at low or no cost, on a voluntary and confidential basis, and without regard to race, national origin, age, gender, or disability.

The Title X program currently serves approximately 4.5 million persons annually and service data indicate the program is meeting its mandate of providing family planning and reproductive health services to many of those in need. For example, a major barrier to receiving health care is its cost. Title X regulations specify that priority in the provision of services be given to persons from low income families and, in 1999, 83 percent of Title X clients had family incomes at or below 150 percent of the poverty level. There are, however, factors other than low income that can have a negative impact on the ability of some populations to obtain family planning and reproductive health services. Of particular concern are the social, cultural, physical, and language barriers that may hinder access for certain populations subgroups. These factors