

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Children's Hospitals Graduate Medical Education (CHGME) Payment Program

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Notice of Children's Hospitals Graduate Medical Education (CHGME) Payment Program conference calls.

**SUMMARY:** This document announces scheduled CHGME Payment Program conference calls for calendar year 2002. The purpose for these conference calls is to provide technical assistance related to the CHGME Payment Program.

**DATES:** The conference calls will be held on Friday, January 25, 2002, from 1:30 p.m. to 3:30 p.m. EST; Friday, April 26, 2002, from 1:30 p.m. to 3:30 p.m. EST; and Friday, October 25, 2002, from 1:30 p.m. to 3:30 p.m. EST.

**FOR FURTHER INFORMATION CONTACT:**

Ayah E. Johnson, Ph.D., telephone: (301) 443-1058; Division of Medicine and Dentistry, Bureau of Health Professions, Room 9A-27, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857; or by e-mail at: [ajohnson@hrsa.gov](mailto:ajohnson@hrsa.gov).

**SUPPLEMENTARY INFORMATION:** The CHGME Payment Program, as authorized by section 340E of the Public Health Service (PHS) Act (the Act) (42 U.S.C. 256e), provides funds to children's hospitals to address disparity in the level of Federal funding for children's hospitals (as opposed to other teaching hospitals) that result from Medicare funding for graduate medical education (GME). Pub. L. 106-310 amended the CHGME statute to continue the program until Federal fiscal year (FY) 2005.

The statute authorized \$280 million for both direct and indirect medical education payments in FY 2000, \$285 million in FFY 2001, and for each of the FFY 2002 through FFY 2005 such sums as necessary. In FFY 2000, Congress appropriated \$40 million for the program and \$235 million in FY 2001. These funds have supported over 4,000 residents receiving training in children's teaching hospitals in 31 States.

The agenda for the conference calls will include but not be limited to: (1) Welcome and opening comments; (2) news releases/updates; (3) reminders; and (4) "on the horizon" topics of interest. Time will also be available for a question and answer period. Agenda items will be determined as priorities dictate. Participating children's

hospitals will be queried for relevant agenda issues/topics. Individuals are expected to register for participation in the conference call(s). Information about the Children's Hospitals Graduate Medical Education Payment Program can be found on the CHGME Web site ([bhpr.hrsa.gov/childrenshospitalgme](http://bhpr.hrsa.gov/childrenshospitalgme)).

Prior to a scheduled conference call, a notification letter with detailed information for participation in the call and a registration form will be sent to representatives of participating hospitals. Other interested parties may obtain details for participating in the conference call by accessing the CHGME Web site.

Dated: December 21, 2001.

**James J. Corrigan,**

*Associate Administrator for Management and Program Support.*

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**BILLING CODE 4165-15-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Indian Health Service

#### Submission for OMB Review; Comment Request

**AGENCY:** Indian Health Service, DHHS.

**ACTION:** Information collection request for public comment: 30-day notice proposed collection: Stakeholder satisfaction with IHS tribal consultation.

**SUMMARY:** In compliance with Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed information collection projects, the Indian Health Service (IHS) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection project was previously published in the **Federal Register** (66 FR 52774) and allowed 60 days for public comment. No public comment was received in response to the notice. The purpose of this notice is to allow 30 days for public comment to be submitted to OMB.

#### Proposed Collection

A voluntary survey will be conducted of elected leaders representing federally recognized tribes, and any board member or executive director authorized to represent a tribal organization or an urban Indian health program to assess the level of customer (stakeholder) satisfaction with the agency's tribal consultation process.

*Title:* Stakeholder Satisfaction with IHS Tribal Consultation.

*Type of Information Collection*

*Request:* New collection.

*Form Number(s):* None.

*Need and Use of Information*

*Collection:* The information gathered will be used by management and staff to establish baseline data, to identify strengths and weaknesses in the current consultation process, to assess how well the processes are working, to make improvements that are practical and feasible, and to provide feedback to local tribal officials, health boards, tribal organizations, urban Indian health programs, and community members regarding stakeholder satisfaction with the agency's tribal consultation process.

*Frequency:* Annually.

*Affected Public:* Individuals, not-for-profit institutions and State, local or Tribal Government.

*Number of Respondents:* 605.

*Annual Number of Responses per Respondents:* 1.

*Total Annual Responses:* 605.

*Average Burden per response:* 20 minutes.

*Total Annual Hours Requested:* 202.

There are no Capital Costs, Operating Costs and/or Maintenance Costs to report for this collection of information.

#### Request for Comment

Your written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the IHS processes the information collection in a useful and timely fashion; (c) the accuracy of the public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether methodology and assumptions used to determine the estimate are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

*Direct Comments to OMB:* Send your written comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time, to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS. To request more information on the