

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Medicare and Medicaid Services**

[Document Identifier: CMS-R-79]

Agency Information Collection Activities: Submission for OMB Review; Comment Request**AGENCY:** Centers for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: Extension of a currently approved collection.

Title of Information Collection: Payment Adjustment for Sole Community Hospitals and Supporting Regulations in 42 CFR, section 412.92.

Form No.: CMS-R-79 (OMB# 0938-0477).

Use: Hospitals designated "sole community hospitals" that experience a 5 percent decrease in discharges in one cost reporting period, as compared to the previous period, due to unusual circumstances beyond its control, may request an adjustment to its Medicare payment amount.

Frequency: On Occasion.

Affected Public: Not-for-profit institutions, Business or other for-profit, and State, Local or Tribal Gov.

Number of Respondents: 40.

Total Annual Responses: 40.

Total Annual Hours: 160.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or e-mail your request,

including your address, phone number, OMB number, and CMS document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB desk officer: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: April 24, 2002.

John P. Burke, III,

CMS Reports Clearance Officer, CMS Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards.

[FR Doc. 02-11818 Filed 5-10-02; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Medicare and Medicaid Services**

[Document Identifier: CMS-10061]

Agency Information Collection Activities: Submission for OMB Review; Comment Request**AGENCY:** Centers for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: New Collection.

Title of Information Collection: Evaluation of Programs of Coordinated Care and Disease Management.

Form No.: CMS-10061 (OMB# 0938-NEW).

Use: CMS is currently conducting two demonstration programs to determine the impact of programs of coordinated care and disease management on health outcomes and costs of care for Medicare beneficiaries. The purpose of this evaluation is to provide an independent assessment of the effectiveness of these programs, and to provide the basis for the Reports to Congress required for the care coordination demonstration. To provide this information, the evaluation must generate both rigorous quantitative estimates of the programs' impacts and qualitative analyses of the programs' processes. Surveys of demonstration participants and their health care providers are an integral part of this evaluation.

Frequency: Other: One-time.

Affected Public: Individuals or Households, Business or other for-profit, and Not-for-profit institutions.

Number of Respondents: 11,356.

Total Annual Responses: 11,356.

Total Annual Hours: 5,465.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or e-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB desk officer: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: April 24, 2002.

John P. Burke, III,

CMS Reports Clearance Officer, CMS Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards.

[FR Doc. 02-11819 Filed 5-10-02; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Medicare and Medicaid Services**

[Document Identifier: CMS-10057]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)**AGENCY:** Center for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid services (CMS), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

We are, however, requesting an emergency review of the information collection referenced below. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, we have submitted to the Office of Management and Budget (OMB) the following requirements for emergency review. We are requesting an emergency review because the collection of this information is needed before the expiration of the normal time limits under OMB's regulations at 5 CFR part 1320. This is necessary to ensure compliance with an initiative of the Administration. We cannot reasonably comply with the normal clearance procedures because of an unanticipated event and possible public harm.

This document involves CMS initiatives pertaining to family or individual directed community services. To obtain CMS approval, two application methods are offered to enable States to implement the self-directed model. (1) Under section 1915(c) of the Social Security Act, states are allowed to submit a request to the Secretary of Health and Human Services to waive Medicaid requirements to allow provision of home and community-based services as an alternative to Medicaid funded institutional care. (2) Under section 1115 of the Social Security Act, states are allowed to submit a request to the Secretary of Health and Human Services to waive Medicaid requirements for the purpose of an experimental, pilot, or demonstration project which promotes the objective of the Medicaid program. States may select whichever method will be appropriate to the unique design of their specific program.

Independence Plus: A Demonstration Program for Family or Individual Directed Community Services Template Applications facilitate States' provision of self-directed supports and services and promotes DHHS' goals of increasing access to medically necessary services. By using a template, a State will potentially save a great deal of time in applying and be able to provide the services earlier.

CMS is requesting OMB review and approval of this collection by May 22, 2002, with a 180-day approval period. Written comments and recommendation will be accepted from the public if received by the individuals designated below by May 20, 2002.

Type of Information Collection Request: New collection.

Title of Information Collection: *Independence Plus*: A Demonstration Program for Family or Individual Directed Community Services Template Applications.

Form No.: CMS-10057 (OMB# XXXX).

Use: The Family or Individual Directed Community Services Template Applications will enable states to apply, via a standard format, to provide assistance for families with a member who requires long term supports and services, or individuals who require long term supports and services, so that the individual may remain in the family residence or in their own home.

Frequency: *Other*: 3 years after initial submission for the 1915 (c) waiver; 5 years after initial submission for the 1115 demonstration.

Affected Public: State Government.

Number of Respondents: 20.

Total Annual Responses: 20.

Total Annual Hours: 100.

We have submitted a copy of this notice to OMB for its review of these information collections. A notice will be published in the **Federal Register** when approval is obtained.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or e-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326.

Interested persons are invited to send comments regarding the burden or any other aspect of these collections of information requirements. However, as noted above, comments on these information collection and recordkeeping requirements must be

mailed and/or faxed to the designees referenced below by May 20, 2002:

Centers for Medicare and Medicaid Services, Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards, Room N2-14-26, 7500 Security Boulevard, Baltimore, MD 21244-1850, Fax Number: (410) 786-0262, Attn: Julie Brown, CMS-10057, and,

Office of Information and Regulatory Affairs, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503, Attn.: Brenda Aguilar, CMS Desk Officer.

Dated: May 7, 2002.

John P. Burke, III,

Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, CMS Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards. [FR Doc. 02-11963 Filed 5-9-02; 11:04 am]

BILLING CODE 4120-03-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Office of Planning, Research and Evaluation; Grant to the National Center for Appropriate Technology

AGENCY: Office of Planning, Research and Evaluation, ACF, DHHS.

ACTION: Award Announcement.

SUMMARY: Notice is hereby given that a noncompetitive grant award is being made to the National Center for Appropriate Technology (NCAT) to develop a national energy deregulation clearinghouse.

As a Congressional set-aside, this one-year project is being funded noncompetitively. The National Center for Appropriate Technology is uniquely qualified to conduct this project because of their prior experience in analyzing energy-related issues affecting residential consumers with low and moderate incomes. The cost of this one-year project is \$150,000.

FOR FURTHER INFORMATION CONTACT: Charlotte Abney, Administration for Children and Families, Office of Community Services, 370 L'Enfant Promenade, SW, Washington, DC. 20447, telephone: 202-401-5334.

Dated: April 26, 2002.

Howard Rolston,

Director, Office of Planning, Research and Evaluation.

[FR Doc. 02-11798 Filed 5-10-02; 8:45 am]

BILLING CODE 4184-01-M