

**ACTION:** Notice of availability.

**SUMMARY:** The Federal Emergency Management Agency (FEMA) is announcing the availability of draft REP Program Planning Guidance for comment. The Planning Guidance document is available at <http://www.fema.gov/rrr/rep/>.

**DATES:** FEMA must receive comments on or before April 29, 2003.

**ADDRESSES:** You may submit your comments to the Rules Docket Clerk, Office of the General Counsel, Federal Emergency Management Agency, 500 C Street, SW., room 840, Washington, DC 20472, or send them by e-mail to [rules@fema.gov](mailto:rules@fema.gov). Please reference "REP Planning Guidance" in the subject line of your e-mail or comment letter.

**FOR FURTHER INFORMATION CONTACT:** Vanessa E. Quinn, Chief, Radiological Emergency Preparedness Branch, Technological Services Division, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472; telephone: (202) 646-3664, or e-mail: [vanessa.quinn@fema.gov](mailto:vanessa.quinn@fema.gov), or Nancy H. Goldstein, Radiological Emergency Preparedness Branch, Technological Services Division, Federal Emergency Management Agency, 500 C Street, SW., Washington DC 20472, telephone: (202) 646-4285, or (e-mail) [nancy.goldstein@fema.gov](mailto:nancy.goldstein@fema.gov).

**SUPPLEMENTARY INFORMATION:** In December 2002, the Federal Emergency Management Agency (FEMA) posted a draft Planning Guidance document on its Web site for a 30-day comment period, ending on January 24, 2003. In response to commenters' requests for additional time and for notification through the **Federal Register**, FEMA has extended the conclusion of the comment period to 60 days from the date of this notice. The document may be accessed at <http://www.fema.gov/rrr/rep/>. Comments that were submitted to FEMA during the initial 30-day period do not need to be resubmitted.

Dated: February 11, 2003.

**W. Craig Conklin,**

*Director, Technological Services Division,  
Office of National Preparedness.*

[FR Doc. 03-4721 Filed 2-27-03; 8:45 am]

**BILLING CODE 6718-06-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[60Day-03-47]

#### Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 498-1210.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

*Proposed Project:* Assessing the Linkages between Dating Violence, Other Peer Violence, and Suicide—New—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Violence is an important public health problem, particularly among our youth. In the United States, homicide and suicide are the second and third leading causes of death, respectively, for youth aged 15-19 years. Accordingly, there has been a tremendous growth in research on the prevalence, incidence, causes and effects of dating violence, peer violence, and suicide among youth. Various disciplines have contributed to the development of research on the subject including psychology, epidemiology, criminology and public health.

Still, considerable gaps remain in our understanding of the extent to which

youth who engage in one type of violent behavior are more likely to engage in other types of violent behavior. Existing research on the linkages across different forms of violent behavior among youth are limited. Research with adults suggests that dating violence and other peer violence are strongly linked, however the strength of this association among adolescents and the degree to which it changes by developmental stage remain unclear. Similarly, regarding the linkages with suicidal behavior, gaps remain in our understanding of the extent to which suicidal behavior varies for those who engage in dating violence versus other peer violence or both types of violence, and how this association varies by age. Also, the extent to which risk for participation in single versus multiple types of violence varies for adolescent males and females is generally not well understood.

Gaps in our understanding of how different types of violent behavior are linked and whether they share common risk factors have limited the ability to design violence prevention and intervention efforts that could address multiple types of violence. Additional information on the linkages among dating violence, other peer violence, and suicidal behavior and how these linkages differ by gender and age is needed to guide the selection, timing, and focus of prevention strategies. This study will increase the knowledge and understanding of the linkages among different types of violence. As a result, CDC will work with a contractor to identify a school district in a high-risk community, identify a sample of students to participate in the study, and develop a questionnaire that will be administered to male and female students at different developmental stages (*i.e.*, 6th, 9th and 12th grade).

The goals of the study are to examine the extent (a) youth engage in multiple types of violence (*i.e.*, dating violence, other peer violence, and suicidal behavior); (b) risk and protective factors for different types of violence are unique or shared; (c) linkages across types of violence vary by gender and developmental stage; and (d) other socio-environmental factors which buffer or exacerbate risk for violence. The questionnaires include information about aggressive and violent behaviors (*e.g.*, verbal, coercive, physical, and sexual) that youth use against dating partners and other peers and suicidal thoughts, plans, and attempts. Additionally, the questionnaires will include information about psycho-social and behavioral factors that may buffer or exacerbate risk for violent behavior. The

scales used in the questionnaire are original or modified versions of established scales that were developed for use with adolescents.

A better understanding of the linkages among dating violence, other peer

violence, and suicidal behavior, and how these linkages differ by gender and age is needed to guide the selection, timing, and focus of prevention strategies. Ultimately, this information will guide CDC in designing programs

that reduce multiple forms of violence among adolescents and young adults. There is no cost to respondents.

Respondents	Number of respondents	Number of responses/respondent	Average burden/response (in hrs.)	Total burden (in hrs.)
6th Grade Students (Male/Female) .....	1,000	1	45/60	750
9th Grade Students (Male/Female) .....	1,000	1	45/60	750
12th Grade Students (Male/Female) .....	1,000	1	45/60	750
Total .....				2250

Dated: February 24, 2003.

**Thomas Bartenfeld,**

*Acting Associate Director for Policy, Planning and Evaluation Centers for Disease Control and Prevention.*

[FR Doc. 03-4737 Filed 2-27-03; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare and Medicaid Services

[Document Identifiers: CMS-R-143]

#### Agency Information Collection Activities: Proposed Collection; 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.

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

#### *Title of Information Collection:*

Analysis of Malpractice Premium Data;

*Form No.:* CMS-R-143 (OMB #0938-0080);

*Use:* Survey of medical liability insurers for use in computing the malpractice component of the geographic practice cost index and the malpractice relation value units;

*Frequency:* Every 3 years;

*Affected Public:* State, Local, or Tribal Gov't., Business or other for-profit, and not-for-profit insitutions;

*Number of Respondents:* 50;

*Total Annual Responses:* 50;

*Total Annual Hours:* 150.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web site address at <http://cms.hhs.gov/regulations/pr/default.asp>, or e-mail your request, including your address, phone number, OMB number, and CMS document identifier, to [Paperwork@hcfa.gov](mailto: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 60 days of this notice directly to the CMS Paperwork Clearance Officer designated at the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances, Attention: Dawn Willingham, Room: C5-14-03, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: February 20, 2003.

**John P. Burke III,**

*CMS Reports Clearance Officer, Office of Strategic Operations and Strategic Affairs, Division of Regulations Development and Issuances.*

[FR Doc. 03-4694 Filed 2-27-03; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[CMS-1245-N]

#### Medicare Program; Request for Nominations to the Advisory Panel on Ambulatory Payment Classifications Groups

**AGENCY:** Centers for Medicare & Medicaid Services, Department of Health & Human Services.

**ACTION:** Notice.

**SUMMARY:** This notice invites nominations of members to the Advisory Panel on Ambulatory Payment Classification (APC) Groups (the Panel). There will be six vacancies on the Panel as of March 31, 2003. The purpose of the Panel is to review the APC groups and their associated weights and to advise the Secretary of Health and Human Services and the Administrator of the Centers for Medicare & Medicaid Services concerning the clinical integrity of these groups and weights, which are major elements of the hospital outpatient prospective payment system. The Panel was recently rechartered for a 2-year period through November 21, 2004.

*Nominations:* Nominations will be considered if received at the appropriate address, which is provided below, no later than 5 p.m. e.s.t. March 31, 2003. Mail or deliver nominations to the following address: CMS, Center for Medicare Management, Hospital & Ambulatory Policy Group, Division of Outpatient Care, Attention: Paul Rudolf, M.D., J.D., Chairman, Advisory Panel on APC Groups, 7500 Security Boulevard, Mail Stop C4-05-17, Baltimore, MD 21244-1850.

*Web Site:* Please refer to the Internet at <http://www.cms.gov/faca> for additional information and updates on the Panel's activities.