

could be very useful to emergency responders, miners, and construction workers, to name a few.

The purpose of this meeting is to provide an opportunity for an exchange of information between NIOSH and respirator manufacturers, industry representatives, labor representatives, and others with an interest in respiratory protection. Attendees will be given an opportunity to ask questions and submit verbal and written comments they wish to have included in the regulatory record.

Besides providing respiratory protection, multifunction PAPRs must allow wearers to perform their assigned duties without posing additional burdens. Vision, communications, heat exchange, and ability to fit into tight places must meet meaningful testing criteria to have reasonable assurance that they will be acceptable. In addition, loose-fitting PAPR equipment must be able to supply enough filtered air that the wearer does not breathe contaminated air during heavy exertion.

The problem is how to objectively evaluate candidate equipment. Multifunction PAPRs must be evaluated against objective, scientifically valid tests in order to be certified by the Government as reasonably meeting minimum standards. Currently, appropriate standards are not available. Such standards, which address all the elements that go into making the equipment multifunctional, must be developed and validated. The purpose of this meeting is to discuss comprehensive test standards for all elements of multifunction PAPRs.

NIOSH has not determined the final content of its research but is considering that test standards will be needed for:

- (1) Respiration;
- (2) Vision;
- (3) Communications;
- (4) Wear Ability;
- (5) Hearing Protection.

FOR ADDITIONAL INFORMATION CONTACT:
Event Management, P.O. Box 880, 3610 Collins Ferry Road, Morgantown, WV 26507, Telephone 304-285-4750, Fax 304-285-4459, E-mail confserv@netl.doe.gov.

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: March 14, 2003.

Alvin Hall,

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

[FR Doc. 03-6687 Filed 3-19-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS-301, CMS-10077, and CMS-10072]

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:* Reinstatement, without change, of a previously approved collection for which approval has expired.

Title of Information Collection: Certification of Medicaid Eligibility Quality Control (MEQC) Payment Error Rates and Supporting Regulations in 42 CFR 431.800 through 431.865.

Form No.: CMS-301 (OMB# 0938-0246).

Use: MEQC is operated by the State title XIX agency to monitor and improve the administration of its Medicaid system. The MEQC system is based on State reviews of Medicaid beneficiaries from the eligibility files. The reviews are used to assess beneficiary liability, if any, and to determine the amounts paid

to provide Medicaid services for these cases.

Frequency: Semi-annually.
Affected Public: State, Local or Tribal Government.

Number of Respondents: 51.
Total Annual Responses: 102.
Total Annual Hours: 22,515.

2. *Type of Information Collection Request:* New Collection.

Title of Information Collection: "Medicare Decisions and Your Rights".
Form No.: CMS-10077 (OMB# 0938-NEW).

Use: Pursuant to 42 CFR 422.568 (c), M+C practitioners must deliver notices to enrollees informing them of their right to obtain a detailed notice regarding services from their M+C organizations. This notice fulfills the regulatory requirement.

Frequency: Other (distribution).
Affected Public: Individuals or Households, Business or other for-profit, Not-for-profit institutions, Federal Government.

Number of Respondents: 155.
Total Annual Responses: 5,000,000.
Total Annual Hours: 83,333.

3. *Type of Information Collection Request:* New Collection.

Title of Information Collection: MSInteractive Survey Tool for cms.hhs.gov.

Form No.: CMS-10072 (OMB# 0938-NEW).

Use: CMS has developed a survey tool using MSInteractive to obtain feedback from users accessing cms.hhs.gov website to guide future improvements.

Frequency: on occasion.
Affected Public: Individuals or Households, Business or other for-profit.
Number of Respondents: 7000.
Total Annual Responses: 7000.
Total Annual Hours: 583.

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, 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 N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: March 13, 2003.

Dawn Willingham,

Acting Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, Office of Strategic Operations and Strategic Affairs, Division of Regulations Development and Issuances.

[FR Doc. 03-6648 Filed 3-19-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS-R-72]

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: Information Collection Requirements in 42 CFR 478.18, 478.34, 478.36, and 478.42, QIO Reconsiderations and Appeals.

Form No.: CMS-R-72 (OMB# 0938-0443).

Use: These regulations contain procedures for QIOs (formerly known as PROs) to use in reconsideration of initial determinations. The information requirements contained in these regulations are on QIOs to provide information to parties requesting a reconsideration. These parties will use the information as guidelines for appeal

rights in instances where issues are still in dispute.

Frequency: On occasion.

Affected Public: Individuals or households, and Business or other for-profit.

Number of Respondents: 2,509.

Total Annual Responses: 5,228.

Total Annual Hours: 2,822.

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://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, 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: Brenda Aguilar, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: March 13, 2003.

Dawn Willingham,

Acting Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances.

[FR Doc. 03-6649 Filed 3-19-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS-10085]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB) and Solicitation of Applications

Agency: Centers for Medicare and Medicaid Services.

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.

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 the Trade Act of 2002. We cannot reasonably comply with the normal clearance procedures because of an unanticipated event and public harm.

A part of the President's New Freedom Initiative and Executive Order 13217, the Demonstration to Improve the Direct Service Workforce presents an opportunity for States and community organizations to improve the recruitment and retention of direct service workers. The Centers for Medicare and Medicaid Services is the agency within the Department of Health and Human Services charged with developing and administering this program.

For FY 2003, \$9 million dollars was budgeted to fund this demonstration program and an additional \$3 million is expected to be budgeted for FY 2004. Because funding for this demonstration appears as part of the FY 2003 budget, it is necessary to award grants to States and community-based organizations before October 1, 2003.

We need to seek emergency approval because we need three months between the time that applicants must submit their proposals and the time of award. Overall we are expecting a large volume of grant applications. We will need the three months to sort, review and score the awards and prepare award packages.

CMS is requesting OMB review and approval of this collection by April 21, 2003, with a 180-day approval period. Written comments and recommendations will be accepted from the public if received by the individuals designated below by April 7, 2003.