

agency is not responsible for providing access to electrical outlets.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with physical disabilities or special needs. If you require special accommodations due to a disability, please contact Leonard M. Schechtman at least 14 days in advance of the meeting.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: May 3, 2003.

Peter J. Pitts

Associate Commissioner for External Relations.

[FR Doc. 03-11605 Filed 5-8-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 03N-0077]

FDA Modernization Act of 1997; Modifications to the List of Recognized Standards, Recognition List Number: 008; Correction

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice; correction.

SUMMARY: The Food and Drug Administration (FDA) is correcting a notice that appeared in the **Federal Register** of April 28, 2003 (68 FR 22391). The document announced a publication entitled "FDA Modernization Act of 1997; Modifications to the List of Recognized Standards, Recognition List Number: 008." The publication contains modifications the agency is making to the list of standards FDA recognizes for use in the premarket reviews. The document published with an inadvertent error. This document corrects that error.

DATES: May 9, 2003.

FOR FURTHER INFORMATION CONTACT:

Joyce Strong, Office of Policy and Planning (HF-27), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-827-7010.

SUPPLEMENTARY INFORMATION: In FR Doc. 03-10417, appearing on page 22397 in the **Federal Register** of Monday, April 28, 2003, the following correction is made:

On page 22397, the section heading "IV. Listing of New Entries" is corrected to read "III. Listing of New Entries."

Dated: May 2, 2003.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. 03-11498 Filed 5-8-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Fiscal Year 2003 Competitive Application Cycle for the Black Lung Clinics Program (BLCP) CFDA Number 93.965; HRSA-03-086

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice of availability of funds.

SUMMARY: The Health Resources and Services Administration (HRSA) announces the availability of up to \$250,000 to support one grant project to an eligible entity for the purpose of carrying out a program to seek out and provide services to active and inactive miners, in southwest Indiana, who were exposed to coal dust as a result of employment. The former grantee in southwest Indiana relinquished the grant on September 23, 2002. As a result, an interim grantee was identified. The project period for the interim grantee ends on June 30, 2003. Eligible entities are expected to provide services described below in "Program Expectations." The Bureau of Primary Health Care (BPHC) intends to fund no more than one award.

Authorizing Legislation: The Black Lung Clinics Program (BLCP) was authorized by the Federal Mine Safety and Health Act of 1977 as amended by the Black Lung Benefits Reform Act of 1977 (Pub. L. 95-239), in order to provide treatment and rehabilitation for individuals who currently or formerly worked within a coal or other mining industry and, as a result, were exposed to coal dust. It provides the authority for competitive grants to States, private, or public entities to provide the services listed below in "Program Expectations" to the population described above. Services may be provided either directly or through formal arrangements with appropriate health care providers. The implementing regulations for the BLCP may be found at 42 CFR part 55a.

DATES: The intended timeline for application submission, review and award are as follows: June 13, 2003, application deadline; July 31, 2003, grant awards announced.

Applications will be considered on time if they are: (1) Received on or

before the established deadline date; or (2) postmarked on or before the deadline date given in the **Federal Register** notice. Late applications will be returned to the applicant. Applicants should obtain a legibly dated receipt from a commercial carrier or the U.S. Postal Service or request a legibly dated U.S. Postal Service postmark. Private metered postmarks shall not be accepted as proof of timely mailing. Applications sent to any address other than that specified below are subject to being returned. Applicants will receive notification of their application receipt. Electronic submission is not available for this program announcement.

Application Requests: To receive a complete application kit (*i.e.*, application instructions, necessary forms, and application review criteria), contact the HRSA Grants Application Center at:

HRSA Grants Application Center, 901 Russell Avenue, Suite 450, Gaithersburg, MD 20879. Phone: 1-877-HRSA-123 (1-877-477-2123). Fax: 1-877-HRSA-345 (1-877-477-2345). E-mail: hrsagac@hrsa.gov.

When contacting the HRSA Grants Application Center (GAC) please use the following program announcement when requesting application materials: HRSA-03-086. Applications must be submitted to the HRSA GAC. Applicants should note that beginning April 1, 2003, HRSA will begin accepting grant applications online. Please refer to the HRSA grants schedule at <http://www.hrsa.gov/grants.htm> for more information. Applications *must be postmarked* by the due date as specified above for each program area.

Eligible Applicants: The following entities are eligible to apply for the funds described in this notice:

- Any State, private, or public entities, including faith-based and community-based organizations, proposing to serve miners or coal miners, in southwest Indiana, exposed to coal dust as a result of employment.

Program Expectations: The purpose of the BLCP is to improve the health status of miners or coal miners exposed to coal dust as a result of employment and to increase coordination with other services and benefits programs to meet the health-related needs of this population.

The following is a list of core services that must be provided by all grantees:

- Primary care, including screening, diagnosis, treatment, and rehabilitation
- Patient and family education and counseling
- Outreach