

ESTIMATED ANNUAL REPORTING AND RECORD KEEPING BURDEN—Continued

Section and activity	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
121.6(c) (Reporting) Submitting criteria for organ acceptance	900	1	900	0.5	450
121.6(c) (Disclosure) Sending criteria to OPOs	900	1	900	0.5	450
121.7(b)(4) Reasons for Refusal	900	38	34,200	0.5	17,100
121.7(e) Transplant to prevent organ wastage	278	1.5	417	0.5	209
121.9(b) Designated Transplant Program Requirements	10	1	10	5.0	50
Total	944	36,457	19,459

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Desk Officer, Health Resources and Services Administration, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: June 1, 2004.

Tina M. Cheatham,

Director, Division of Policy Review and Coordination.

[FR Doc. 04-12890 Filed 6-7-04; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Advisory Committee on Infant Mortality; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), notice is hereby given of the following meeting:

Name: Advisory Committee on Infant Mortality (ACIM).

Dates and Times: July 13, 2004, 9 a.m.–5 p.m. July 14, 2004, 8:30 a.m.–3 p.m.

Place: The Hotel Washington, 15th & Pennsylvania Avenue, NW., Washington, DC 20004, (202) 638-5900.

Status: The meeting is open to the public.

Purpose: The Committee provides advice and recommendations to the Secretary of Health and Human Services on the following: Department programs that are directed at reducing infant mortality and improving the health status of pregnant women and infants; factors affecting the continuum of care with respect to maternal and child health care, including outcomes following childbirth; strategies to coordinate the variety of Federal, State, local and private programs and efforts that are designed to deal with the health and social problems impacting on infant mortality; and the implementation of the Healthy Start initiative and *Healthy People 2010* infant mortality objectives.

Agenda: Topics that will be discussed include the following: Low Birth Weight, Preterm Birth, U.S. and International Infant Mortality Data, the Healthy Start Program and Evaluation. Agenda items are subject to change as priorities are further determined.

For Further Information Contact: Anyone requiring information regarding the Committee should contact Peter C. van Dyck, M.D., M.P.H., Executive Secretary, ACIM, Health Resources and Services Administration (HRSA), Room 18-05, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857, telephone: (301) 443-2170.

Individuals who are interested in attending any portion of the meeting or who have questions regarding the meeting should contact Ann M. Koontz, C.N.M., Dr.P.H., HRSA, Maternal and Child Health Bureau, telephone: (301) 443-6327.

Dated: June 1, 2004.

Tina M. Cheatham,

Director, Division of Policy Review and Coordination.

[FR Doc. 04-12891 Filed 6-7-04; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General

OIG Draft Supplemental Compliance Program Guidance for Hospitals

AGENCY: Office of Inspector General (OIG), HHS.

ACTION: Notice and comment period.

SUMMARY: This *Federal Register* notice seeks the comments of interested parties on a draft supplemental compliance program guidance (CPG) for hospitals developed by the Office of Inspector General (OIG). When the final version of this document is published, it will supplement the OIG's prior compliance program guidance for hospitals issued in 1998. This draft contains new compliance recommendations and an expanded discussion of risk areas. The draft takes into account recent changes to hospital payment systems and regulations, evolving industry practices,

current enforcement priorities, and lessons learned in the area of corporate compliance. When published, the final supplemental CPG will provide voluntary guidelines to assist hospitals and hospital systems in identifying significant risk areas and in evaluating and, as necessary, refining ongoing compliance efforts.

DATES: To ensure consideration, comments must be delivered to the address provided below by no later than 5 p.m. on July 23, 2004.

ADDRESSES: Please mail or deliver written comments to the following address: Office of Inspector General, Department of Health and Human Services, Attention: OIG-9-CPG, Room 5246, Cohen Building, 330 Independence Avenue, SW., Washington, DC 20201.

We do not accept comments by facsimile (FAX) transmission. In commenting, please refer to file code OIG-9-CPG. Comments received timely will be available for public inspection as they are received, generally beginning approximately 2 weeks after publication of a document, in Room 5541 of the Office of Inspector General at 330 Independence Avenue, SW., Washington, DC 20201 on Monday through Friday of each week from 8 a.m. to 4:30 p.m.

FOR FURTHER INFORMATION CONTACT: Darlene M. Hampton or Paul Johnson, Office of Counsel to the Inspector General, (202) 619-0335.

SUPPLEMENTARY INFORMATION:

Background

Several years ago, the OIG embarked on a major initiative to engage the private health care community in preventing the submission of erroneous claims and in combating fraud and abuse in the Federal health care programs through voluntary compliance efforts. In the last several years, the OIG has developed a series of compliance program guidances (CPGs) directed at the following segments of the health care industry: Hospitals; clinical