

This information is needed to determine if an agency or therapist is in compliance with published health and safety requirements. Respondents are outpatient clinics, rehabilitation agencies, public health agencies, and therapists in independent practice.

Frequency: On occasion; *Affected Public:* Business or other for-profit; *Number of Respondents:* 9,634; *Total Annual Responses:* 9,634; *Total Annual Hours Requested:* 26,397.

3. *Type of Information Collection Request:* New collection; *Title of Information Collection:* Medicare Disproportionate Share Adjustment Procedure and Criteria; *Form No.:* HCFA R-194; *Use:* Regulation sets up an alternative process for hospitals that choose to have their disproportionate share adjustment statistics calculated based on their cost reporting periods rather than the Federal fiscal year. *Frequency:* On occasion; *Affected Public:* Business or other for-profit, and Not-for-profit institutions; *Number of Respondents:* 100; *Total Annual Responses:* 100; *Total Annual Hours Requested:* 100.

To request copies of the proposed paperwork collections referenced above, call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections should be sent within 60 days of this notice directly to the HCFA Paperwork Clearance Office designated at the following address: HCFA, Office of Financial and Human Resources, Management Planning and Analysis Staff, Attention: Louis Blank, Room C2-26-17, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: May 7, 1996.

Kathleen B. Larson,
Director, Management Planning and Analysis Staff, Office of Financial and Human Resources.

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Office of the Secretary

Statement of Organization, Functions and Delegations of Authority

Part A (Office of the Secretary), of the Statement of Organization, Functions, and Delegations of Authority for the Department of Health and Human Services, Chapter AA "Office of the Secretary" as last amended at 60 FR 52403, dated October 6, 1995; Chapter ABC "Office of the Deputy Under Secretary for Intergovernmental Affairs" as last amended at 46 FR 3284, dated January 14, 1981; and Chapter AD

"Office of the Regional Director" as last amended at 55 FR 5072, dated February 13, 1990 is being revised. Also, Chapter HD "Public Health Service Regional Offices" as last amended at 60 FR 48164, dated September 18, 1995 is being deleted in its entirety.

Part A is being amended to reflect the role and responsibility of the Office for Intergovernmental Affairs and to place the Regional Health Administrators within the Office of the Regional Directors. The specific amendments are:

I. Make the following changes to Chapter AA "Office of the Secretary," paragraph AA.10 Organization: Delete the Office of the Deputy Under Secretary for Intergovernmental Affairs and insert the Office for Intergovernmental Affairs.

II. Delete Chapter ABC in its entirety and replace with the following:

ABC.00 Mission. The Director of the Office for Intergovernmental Affairs (IGA) serves as the principal advisor and Assistant to the Secretary and Deputy Secretary on intergovernmental affairs, with the responsibility for facilitating the coordination and implementation of Administration and Secretarial initiatives as they pertain to intergovernmental affairs at the headquarters, regional, State, tribal, local and community levels. The Director for Intergovernmental Affairs is the central point of reference in the Department for issues, problems and questions involving these matters. The Director for Intergovernmental Affairs provides leadership, coordination, evaluation, and administrative direction to the Regional Director; also provides general guidance and direction to the Office of Veterans Affairs and Military Liaison; and to special initiatives, such as, Human Service Transportation Coordination and the National Rural Development Partnership. As directed the Director provides coordination services for functions and activities of the Deputy Secretary.

ABC.10 Organization. the Office for Intergovernmental Affairs is under the direction and control of the Director for Intergovernmental Affairs, who reports directly to the Secretary and Deputy Secretary.

ABC.20 Functions. The Director for Intergovernmental Affairs undertakes a variety of assignments for the Secretary and Deputy Secretary on critical intergovernmental problems which are beyond the authority of the Regional Director or which cross program/agency/departamental lines.

Advices on State, tribal and local impact of proposed Departmental action whether in legislation, regulation, or administrative decision. Serves as the

point of contact between the Regional Directors (RDs) and the Secretary and Deputy Secretary. Responds to Secretarial initiatives having regional, State and local implications by directing the RDs to take specific actions.

Ensures a full and timely opportunity for the RDs to contribute to the planning, development and implementation of Departmental policy. In consultation with OPDIV heads ensures the resolution of policy issues involving intergovernmental concerns of operating divisions and the regional offices. Resolves intergovernmental problems and situations that cut across the OPDIVs in headquarters and in the regions. Formulates and recommends Departmental policies on the delivery of services to States and communities. Serves as a focal point for coordinated HHS efforts to deal with community problems as a whole. Has primary responsibility to ensure consistency of approach, administration, and action of programs within HHS as they impact on state and local governments.

Represents the Secretary and Deputy Secretary with officials of other Federal agencies, officials of State, tribal and local governments, and non-governmental organizations including national associations which represent State and local general purpose governments and relevant subdivisions in functions which cut across program lines. Develops strategies to strengthen intergovernmental relationships and collaborates with Governors, their key officials, county and city officials, on national goals and programs in health and human services. Serves as liaison with the White House on intergovernmental matters and concerns through the Assistant to the President for Intergovernmental Affairs.

Under the Direction of the Director for Intergovernmental Affairs, the Office of Veterans Affairs and Military Liaison provides advice and counsel and appropriate information and liaison to the White House, the Secretary, and veteran's and military organizations and associations; develops initiatives within the Department to improve services to veterans and the military; and focuses health and human resources on the needs of all veterans and military families as part of a Health and Human Services/Department of Veterans Affairs/Department of Defense initiative to better serve their health and human service needs. Provides coordinative support relating to sick, disabled and disadvantaged veterans/military for research targeted toward specific areas.

As directed, the Director IGA coordinates program and management functions and activities that the Deputy

Secretary is responsible for. The Director IGA represents the Department in special initiatives, such as the Human Services Transportation Coordination and the National Rural Development Partnership initiatives.

III. Delete Chapter AD in its entirety and replace with the following:

AD.00 Mission. The Regional Director serves as the direct personal representative of the Secretary with the responsibility for carrying out the Secretary's policies in the Region. The Regional Director provides leadership for the Secretary's special initiatives and coordination of the complex activities of the Region.

AD.10 Organization. The Office of the Regional Director is under the direction and control of the Regional Director, who reports directly to the Secretary and Deputy Secretary through the Director for Intergovernmental Affairs, and consists of the following: Regional Director AD(1-X)
Regional Health Administrator ADA(1-X)

AD.20 Function. A. The Regional Director serves as the Secretary's representative in direct official dealings with State, tribal and local government organizations, non-government officials and their respective representative organizations. Establishes and maintains effective relationships with Governors, mayors, county officials, and other key State and local officials; furnishes advice and assistance and strives to develop a mutually beneficial Federal-State-local partnership; provides guidance and coordination to the efforts of all regional staff members on the priorities, emphasis, and merits of various programs based on the expression of needs and analyses by Governors, mayors, and other key officials. In consultation with the Office of the Assistant Secretary for Legislation, provides a central focus in the Region for department relations with Congressional delegations and individual members of Congress. Promotes general public understanding of programs, policies, and objectives of the Department; participates in developing and carrying out a region-wide public information program; and provides regional clearance on official public communiques.

Assesses the effectiveness of Department activities and makes reports and recommendations to the Secretary, Deputy Secretary, Director of Intergovernmental Affairs, and other Departmental officials concerning the application or improvement of policies and service delivery systems. Serves as coordinator, facilitator, and expediter in

solving cross-cutting issues to assure effective, efficient, and responsible actions in the interest of total service to the public. Advises the Secretary on the potential effect of proposed Department action, whether legislative, regulatory, or administrative decision. Provides input into policy decisions and strategy regarding the concerns and interests of State and local governments and non-government organizations as derived from their key officials. In conjunction with the Regional Health Administrators, develops plans for emergency preparedness and directs all Departmental activities necessary to ensure continuity of essential functions within the Region in case of an emergency due to enemy action or natural disaster.

B. The Regional Health Administrator ADA(1-X)—Reports to the Secretary's Regional Director, receives professional guidance from the Assistant Secretary for Health, Director, Office of Public Health and Science (OPHS) programs. The Regional Health Administrator and associated staff are a component of the U.S. Public Health Service, along with the OPHS and PHS Operating Divisions.

Participates in policy development and implementation; directs and coordinates regionally based programs of OPHS, including the offices of Emergency Preparedness, Minority Health, Women's Health, and Population Affairs. Develops regional goals and objectives consistent with the needs of the population and in conformity with national health priorities and objectives and Departmental plans and programs. Serves as the principal official in the assigned area of jurisdiction to provide oversight and coordination for Public Health Service programs. Solicits and provides input from regional, State, and local health, mental health and substance abuse professional organizations to assist the Regional Director, the Assistant Secretary for Health, Director, OPHS, Director IGA and PHS Operating Divisions (OPDIVs) in the formulation, development, analysis, and evaluation of PHS OPDIV field programs and cross cutting Departmental initiatives in public health.

IV. Under Part H, delete Chapter HD in its entirety.

Dated: April 11, 1996.

John J. Callahan,

Assistant Secretary for Management and Budget.

[FR Doc. 96-11946 Filed 5-13-96; 8:45 am]

BILLING CODE 4150-04-M

Agency for Health Care Policy and Research

Meeting of the National Advisory Council for Health Care Policy, Research, and Evaluation

AGENCY: Agency for Health Care Policy and Research.

ACTION: Notice of public meeting.

SUMMARY: In accordance with section 10(a) of the Federal Advisory Committee Act, this notice announces a meeting of the National Advisory Council for Health Care Policy, Research, and Evaluation.

DATES: The meeting will be open to the public on Thursday, May 30, 1996, from 9:00 a.m. to 3:45 p.m. A closed portion of the Council will meet from 4:00 p.m. to 5:00 p.m.

ADDRESSES: The meeting will be held at the Omni Shoreham Hotel, 2500 Calvert Street, N.W., Washington, D.C. 20008.

FOR FURTHER INFORMATION CONTACT: Deborah L. Queenan, Executive Secretary of the Advisory Council at the Agency for Health Care Policy and Research, 2101 East Jefferson Street, Suite 603, Rockville, Maryland 20852, (301) 594-1459.

In addition, if sign language interpretation or other reasonable accommodation for a disability is needed, please contact Linda Reeves, the Assistant Administrator for Equal Opportunity, AHCPH, on (301) 594-6665 no later than May 23, 1996.

SUPPLEMENTARY INFORMATION:

I. Purpose

Section 921 of the Public Health Service Act (42 U.S.C. 299c) establishes the National Advisory Council for Health Care Policy, Research, and Evaluation. The Council provides advice to the Secretary and the Administrator, Agency for Health Care Policy and Research (AHCPH), on matters related to AHCPH activities to enhance the quality, appropriateness, and effectiveness of health care services and access to such services through scientific research and the promotion of improvements in clinical practice and in the organization, financing, and delivery of health care services.

The Council is composed of public members appointed by the Secretary. These members are: Robert A. Berenson, M.D.; F. Marian Bishop, Ph.D.; Linda Burnes Bolton, Dr. P.H.; John W. Danaher, M.D.; Helen Darling, M.A.; Nancy J. Kaufman, M.S.; William S. Kiser, M.D.; Robert M. Krughoff; Risa J. Lavizzo-Mourey, M.D.; W. David Leak, M.D.; Harold S. Luft, Ph.D.; Barbara J.