

- Program Director, Telephone and Fax numbers
- Period of Time Program has Operated

B. Description of the Program

- Goals and objectives of the program
- Target audience
- Description of the program activities and how they are designed to achieve the goals and objectives
- Referral activities, if any
- Evaluation results, if any
- Funding Source(s)
- Current Operating Budget
- Problems or Constraints Identified
- Major Changes and/or modifications in the program
- Current dissemination or replication activities
- Future planned activities

C. Commitment to Participate in a National Evaluation

A statement by the program director or other responsible official indicating a commitment to participate with the program in a national study. We will consider, on a case-by-case basis, the reimbursement of extraordinary costs directly incident to a selectee's participation in the national study.

FOR FURTHER INFORMATION CONTACT:

Administration for Children and Families, Office of Community Services, Division of State Assistance, 370 L'Enfant Promenade, S.W., Washington, D.C. 20447. Telephone William Riley, (202) 401-5529 or Trudy Hairston (202) 401-5319.

Dated: June 12, 1996.

Donald Sykes,

Director, Office of Community Services.

[FR Doc. 96-15322 Filed 6-14-96; 8:45 am]

BILLING CODE 4184-01-P

Health Resources and Services Administration

Notification of Expiring Project Periods for Health Care for the Homeless and Health Care Services for Homeless Children Programs

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice.

SUMMARY: The Health Resources and Services Administration (HRSA) announces that a total of 16 Health Care for the Homeless (HCH) grantees and 1 Health Care for Homeless Children

grantee will reach the end of their project periods during fiscal year (FY) 1997. Assuming the availability of sufficient appropriated funds in FY 1997, it is the intent of HRSA to continue to support health services to the homeless populations in these areas/locations given the continued need for cost-effective, community-based primary care services for these medically underserved populations within these geographic areas.

This notice provides interested parties the opportunity to gather information and decide whether to pursue Federal funding as a HCH program grantee. During this process, communication with Regional Office staff is essential (see Appendix I). A subsequent notice will be published in the Federal Register to announce the availability of funds for FY 1997 and provide application and detailed information on the grant review criteria.

DUE DATES: Current grant expiration dates vary by grantee throughout FY 1997. Applications for competing continuation grants are normally due 120 days prior to the expiration of the current grant award. However, to allow potential applicants sufficient time to prepare application materials for those areas in which grants are expiring on October 31, 1996, applications for grants beginning November 1, 1996 will be due 90 days prior to the expiration of the current grant award or no later than August 1, 1996.

SUPPLEMENTARY INFORMATION: The HCH program is carried out currently under the authority of section 340 of the Public Health Service Act. The HCH program is designed to increase the homeless population's access to cost-effective, case managed, and integrated primary care and substance abuse services provided by existing community-based programs/providers. In addition, the Health Care Services for Homeless Children's program provides comprehensive primary health services to homeless children and to children at imminent risk of homelessness.

The list of areas in which a current homeless project period expires in FY 1997 is set forth in Appendix II. The areas listed include the city. Further information including the census tract, if applicable, can be obtained by contacting the appropriate PHS regional office (see Appendix I).

A project period is the total amount of time for which a grant has been programmatically approved. For purposes of this notice, grant awards will be made for a one year budget period and up to a five year project period.

Dated: June 11, 1996.

Ciro V. Sumaya,
Administrator.

Appendix I—Regional Office Staff

Region I:

Robin Lawrence, D.D.S., Acting Director, Division of Health Services Delivery, DHHS—Region I, John F. Kennedy Federal Building #1401, Boston, MA 02203, (617) 565-1463

Region II:

Ronald Moss, Director, Division of Health Services Delivery, DHHS—Region II, 26 Federal Plaza, New York, NY 10278, (212) 264-2664

Region III:

Bruce Riegel, Director, Division of Health Services Delivery, DHHS—Region III, 3535 Market Street, Philadelphia, PA 19104, (215) 596-1885

Region IV:

Robert Jackson, Director, Division of Community Health Service, DHHS—Region IV, 101 Marietta Tower, Atlanta, GA 30323, (404) 331-0250

Region V:

Deborah Willis, M.D., Acting Director, Division of Health Services Delivery, DHHS—Region V, 105 West Adams Street, 17th Floor, Chicago, IL 60603, (312) 353-1711

Region VI:

Frank Cantu, Acting Director, Division of Health Services Delivery, DHHS—Region VI, 1200 Main Tower, Dallas, TX 75202, (214) 767-6547

Region VII:

Ray Maddox, Director, Division of Health Services Delivery, DHHS—Region VII, 601 East 12th Street, Kansas City, MO 64106, (816) 426-5226

Region VIII:

Barbara Bailey, Director, Division of Health Services Delivery, DHHS—Region VIII, 1961 Stout Street, Denver, CO 80294, (303) 844-3203

Region IX:

Gordon Soares, Director, Division of Health Services Delivery, DHHS—Region IX, 50 United Nations Plaza, San Francisco, CA 94102, (415) 437-8568

Region X:

Douglas Woods, Director, Division of Health Services Delivery, DHHS—Region X, 2201 Sixth Avenue, Seattle, WA 98121, (206) 615-2491

Appendix II—Listing of HCH Grantees Sorted by Region, State, and City

State and City	Project period ending date
AZ: PHOENIX	10/31/96
Total Number of Grantees in the State of: AZ	1
CT: HARTFORD	12/31/96

State and City	Project period ending date
Total Number of Grantees in the State of: CT	1
FL: MIAMI	10/31/96
TAMPA	03/31/97
Total Number of Grantees in the State of: FL	2
IN: INDIANAPOLIS	05/31/97
Total Number of Grantees in the State of: IN	1
MI: BATTLE CREEK	10/31/96
DETROIT	10/31/96
GRAND RAPIDS	10/31/96
Total Number of Grantees in the State of: MI	3
MN: ST. PAUL	01/31/97
ST. PAUL	01/31/97
Total number of Grantees in the State of: MN	2
NE: OMAHA	01/31/97
Total Number of Grantees in the State of: NE	1
NY: NEW YORK	10/31/96
Total Number of Grantees in the State of: NY	1
OH: COLUMBUS	10/31/96
TOLEDO	11/30/96
Total Number of Grantees in the State of: OH	2
SD: RAPID CITY	01/31/97
Total Number of Grantees in the State of: SD	1
TX: LUBBOCK	06/30/97
Total Number of Grantees in the State of: TX	1
WA: SPOKANE	10/31/96
Total Number of Grantees in the State of: WA	1
Total Number of Grantees	17

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BILLING CODE 4160-15-U

Office of Inspector General**Publication of OIG Special Fraud Alert: Fraud and Abuse in the Provision of Services in Nursing Facilities****AGENCY:** Office of Inspector General (OIG), HHS.**ACTION:** Notice.

SUMMARY: This Federal Register notice sets forth a recently issued OIG Special Fraud Alert concerning fraud and abuse practices in the provision of medical and other health services to residents of nursing facilities. For the most part, OIG Special Fraud Alerts address national trends in health care fraud, including potential violations of the Medicare anti-kickback statute. This Special Fraud Alert, issued directly to the health care provider community and now being reprinted in this issue of the Federal Register, specifically identifies and highlights some of the illegal practices that the OIG has uncovered in the provision of nursing facility services.

FOR FURTHER INFORMATION CONTACT: Joel J. Schaer, Office of Management and Policy, (202) 619-0089.

SUPPLEMENTARY INFORMATION:**I. Background**

The Office of Inspector General (OIG) issues Special Fraud Alerts based on information it obtains concerning particular fraudulent and abusive practices within the health care industry. These Special Fraud Alerts provide the OIG with a means of notifying the industry that we have become aware of certain abusive practices which we plan to pursue and prosecute, or bring civil and administrative action, as appropriate. The Alerts also serve as a powerful tool to encourage industry compliance by giving providers an opportunity to examine their own practices.

The Special Fraud Alerts are intended for extensive distribution directly to the health care provider community, as well as those charged with administering the Medicare and Medicaid programs. On December 19, 1994, the OIG published in the Federal Register the texts of 5 previously-issued Special Fraud Alerts (59 FR 65372), and indicated our intention of publishing all future Special Fraud Alerts in this same manner as a regular part of our dissemination of this information. Two additional OIG Special Fraud Alerts

addressing home health fraud and fraud and abuse provisions of medical supplies in nursing facilities was published in the Federal Register on August 10, 1995 (60 FR 40847).

With regard to the provision of health care services reimbursed by Medicare and Medicaid to nursing facilities, this newly-issued Special Fraud Alert highlights such fraudulent practices as (1) making claims for services not rendered or not provided as claimed, and (2) the submission of claims falsified to circumvent coverage limitations on medical specialties. A reprint of this Special Fraud Alert follows.

II. Special Fraud Alert: Fraud and Abuse in the Provision of Services in Nursing Facilities (May 1996)

The Office of Inspector General (OIG) was established at the Department of Health and Human Services by Congress in 1976 to identify and eliminate fraud, waste and abuse in Health and Human Services programs and to promote efficiency and economy in departmental operations. The OIG carries out this mission through a nationwide program of audits, investigations and inspections.