97–143, 1997. 59 FR 26164. Department of Labor: Child Labor Regulations, Orders and Statements of Interpretation; Proposed Rules, May 13, 1994.

Dated: April 2, 1999.

#### Diane D. Porter,

Acting Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention (CDC).

[FR Doc. 99–8821 Filed 4–8–99; 8:45 am]

BILLING CODE 4163–19–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 99029]

Cooperative Agreement for Promoting Prevention in Managed Care Notice of Availability of Funds

## A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 1999 funds for a cooperative agreement program for Promoting Prevention in Managed Care. This announcement relates to all of the priority areas of "Healthy People 2000." Its purpose is to promote the attainment of the objectives outlined in "Healthy People 2000" through strengthening the infrastructure supporting the science and practice of prevention in managed care.

### **B. Eligible Applicants**

Applications may be submitted by private sector, nonprofit, managed care membership organizations who: (1) Provide an array of services and products (e.g., technical support, publications, training and continuing education, communication and information sharing, etc.) to member plans in at least 20 States; and (2) whose member plans and affiliated entities can demonstrate past and current experience conducting public domain, prevention research (i.e., research in the areas of health promotion, disease prevention, and chronic disease management) in the managed care environment.

**Note:** Pub. L. 104–65 states that an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, cooperative agreement, contract, loan, or any other form.

#### C. Availability of Funds

Approximately \$400,000 is available in FY 1999 for approximately 2-3 awards. It is expected that the average

award will range from approximately \$133,000 to \$200,000 per award. It is expected that awards will begin on or about September 1, 1999, for a 12 month budget period within a project period of up to 5 years. Funding estimates may change.

Continuation awards within an approved project period will be made on the basis of satisfactory progress as evidenced by the successful completion of required activities and reports, and by the availability of funds.

## **D. Program Requirements**

In conducting activities to achieve the purposes of this program, the recipient will be responsible for the activities under Recipient Activities, and CDC will be responsible for the activities under CDC Activities.

## **Recipient Activities**

- 1. Develop and strengthen mechanisms, programs, and initiatives which further the purpose, goals and objectives of this cooperative agreement.
- 2. Facilitate the timely, bi-directional flow of information between the public health and managed care communities.
- 3. Facilitate communication, information sharing, and collaboration among the public, private and academic research communities.
- 4. Develop conferences, meetings, seminars and symposia which explore and expand areas of commonality around prevention between the public health and managed care sectors.
- 5. Initiate and/or coordinate multiplan and network managed care, prevention research initiatives.

## **CDC** Activities

- 1. Provide technical assistance and monitor the progress of this cooperative agreement.
- 2. Foster the formation and growth of national and regional public-private partnerships which support prevention research and evidence-based prevention practice.
- 3. Assist with the development of conferences, meetings, seminars, and symposia which explore and expand areas of commonality around prevention between the public health and managed care sectors.

## E. Application Content

Use the information in the Program Requirements, Other Requirements, and Evaluation Criteria sections to develop the application content. Your application will be evaluated on the criteria listed, so it is important to follow them in laying out your program plan.

#### F. Submission and Deadline

Submit the original and five copies of PHS-398 (OMB Number 0925-0001) (adhere to the instructions on the Errata Instruction Sheet for PHS 398). Forms are in the application kit. On or before June 7, 1999, submit the application to: Sharron Orum, Grants Management Specialist, Procurement and Grants Office, Grants Management Branch, Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Room 3000, Atlanta, Georgia 30341, Announcement 99029.

Deadline: Applications shall be considered as meeting the deadline if they are either: (a) Received on or before the deadline date; or (b) Sent on or before the deadline date and received in time for objective review. (Applicants must request a legibly dated U.S. Postal Service postmark or a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of time and date of mailing.)

Late Applications: Applications which do not meet the criteria in (a) or (b) above are considered late applications, will not be considered, and will be returned to the applicant.

#### G. Evaluation Criteria

Each application will be evaluated individually against the following criteria by an independent review group appointed by CDC.

# 1. Organizational Description (15 percent)

The extent to which the applicant's existing organizational structure, mission, goals, objectives, activities, functions and membership are consistent with the purpose of this Program Announcement.

## 2. Goals and Objectives (35 percent)

The extent to which the applicant's proposed goals and objectives meet the required activities specified under the "Recipient Activities" section of this announcement, and are measurable, specific, time-phased and realistic.

## 3. Methods (35 percent)

The extent to which the applicant's plan for conducting the required activities is realistic and appropriate to the stated goals and objectives, acceptable to the communities it seeks to serve, and feasible within existing programmatic and fiscal restrictions.

## 4. Evauuation (15 percent)

The extent to which the applicant has developing mechanisms for evaluating and reevaluating progress toward stated goals which include end-user feedback.

The extent to which the applicant builds in the capacity for mid-course correction(s) based on those evaluations.

## 5. Budget (Not scored)

The extent to which the budget is reasonable in the amount(s) requested, justified by the application content, and consistent with the intentions of this announcement.

#### H. Other Requirements

Technical Reporting Requirements Provide CDC with original plus two copies of:

- 1. An annual progress report
- 2. A financial status report, no more than 90 days after the end of the budget period; and
- 3. A final financial status and performance report, no more than 90 days after the end of the project period.

Send all reports to: Sharron Orum, Grants Management Specialist, Procurement and Grants Office, Grants Management Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Room 3000, Atlanta, GA 30341.

The following additional requirements are applicable to this program. For a complete description of each, see Attachment I in the application package.

- AR-7 .... Executive Order 12372 Review.
- AR-8 .... Public Health System Reporting Requirements.
- AR-9 .... Paperwork Reduction Act Requirements.
- AR-10 .. Smoke-Free Workplace Requirements.
- AR-11 .. Healthy People 2000.
- AR-12 .. Lobbying Restrictions.
- AR-15 .. Proof of Non-Profit Status.
- AR-20 .. Conference Activities within Grants/Cooperative Agreement.

## I. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under the Public Health Service Act (42 U.S.C. 301 and 317(k)(2)), as amended. The Catalog of Federal Domestic Assistance number is 93.283.

# J. Where to Obtain Additional Information

Please refer to Program
Announcement Number 99029 when requesting information. To receive additional written information and to request an application kit, call 1–888–GRANTS4 (1–888–472–6874). You will be asked to leave your name and address and will be instructed to identify the Announcement number of interest. If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from: Sharron Orum, Grants

Management Specialist, Procurement and Grants Office, Grants Management Branch Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Room 3000, Atlanta, GA 30341, Telephone: (770) 488–2716, Email address: spo2@cdc.gov.

See also the CDC home page on the Internet: http://www.cdc.gov

For program technical assistance, contact: Deborah Rogers Mercy, Centers for Disease Control and Prevention (CDC), Office of Managed Care/OPPE, Room 2035, 1600 Clifton Road, M/S D33, Atlanta, GA 30333, Telephone: (404) 639–4943, Email address: dem2@cdc.gov.

Dated: April 5, 1999.

#### John L. Williams,

Director, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 99–8882 Filed 4–8–99; 8:45 am] BILLING CODE 4163–18–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[Program Announcement 99108]

Cooperative Agreement for Promoting Investigator-Initiated Prevention Research in Managed Care; Notice of Availability of Funds

#### A. Purpose

The Centers for Disease Control and Prevention (CDC) Epidemiology Program Office, Division of Prevention Research and Analytic Methods in cooperation with the Office of Prevention Research, announces the availability of fiscal year (FY) 1999 funds for a cooperative agreement program for investigator-initiated prevention research in managed care settings. Despite spending significantly more money per capita on health than any other country in the world, recommended and effective preventive services are not routinely delivered in the United States.

The primary purpose of this program is to fund research designed to increase the utilization of priority preventive services in the United States. Desirable secondary outcomes include: (1) Improvements in surveillance and information systems, (2) furthering the science of performance measurement, (3) novel public-private partnerships for health, and (4) interventions which reduce racial and ethnic disparities in the receipt of priority preventive services.

This program relates to the following priority areas of "Healthy People 2000": Immunization and infectious disease, sexually transmitted diseases, tobacco, heart disease and stroke, cancer, and clinical preventive services.

#### **B. Eligible Applicants**

Applications are invited from nonprofit and for-profit managed care plans and their affiliated research entities and membership organizations.

Applicant Requirements:

1. Å principal investigator (PI) who has conducted research in managed care settings, published findings in peerreviewed journals, and has specific authority and responsibility to carry out the proposed project.

2. Demonstrated experience (on the applicant's project team) in conducting, evaluating, and publishing prevention or health services research in peer

reviewed journals.

3. Effective and well-defined working relationships within the performing organization and with outside entities to ensure successful implementation of proposed activities.

4. A match between the applicant's proposed theme and research objectives and the program interests described in

this notice.

**Note:** Pub. L. 104–65 states that an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, cooperative agreement, contract, loan, or any other form.

## C. Availability of Funds

Approximately \$750,000 will be available in FY 1999 to award 3–5 projects. Funding will range from approximately \$150,000 to \$250,000 per award. Awards are expected to begin on or about September 1, 1999, for 12-month budget period within a project period of up to two years. Proposals for one year projects are encouraged. Funding estimates may change.

Continuation awards for projects with approved two year project periods will be made on the basis of satisfactory progress as evidenced by required reports and the availability of funds.

#### **D. Program Requirements**

In conducting activities to achieve the purposes of this program, the recipient will be responsible for the activities under Recipient Activities, and CDC will be responsible for the activities under CDC Activities.

#### **Recipient Activities**

1. Design and conduct a prevention research project addressing one or more of the following questions: