DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-R-289]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing Administration, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) The accuracy of the estimated burden; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) The use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: Extension of a currently approved collection;

Title of Information Collection: Medicare Lifestyle Modification Program Demonstration;

Form No.: HCFA-R-289 (0938-0777); Use: The Health Care Financing Administration (HCFA) through its Office of Clinical Standards and Quality (OCSQ) is planning to conduct a new demonstration to test the feasibility and cost effectiveness of cardiovascular lifestyle modification. This demonstration will focus on Medicare provider sponsored, lifestyle modification programs designed to reverse, reduce, or ameliorate the indications of cardiovascular disease (CAD) of Medicare beneficiaries at risk for invasive treatment procedures. This demonstration will test the feasibility and cost effectiveness of providing payment for cardiovascular lifestyle modification program services to Medicare beneficiaries. In addition, the demonstration will test the use of contractual agreements for administration, claims processing and payment, and routine monitoring of quality of care.

Frequency: On occasion, weekly, monthly, and quarterly;

Affected Public: Individuals or households, and not-for-profit institutions;

Number of Respondents: 22; Total Annual Responses: 9,000; Total Annual Hours: 1.500.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access HCFA's Web Site address at http://www.hcfa.gov/ regs/prdact95.htm, or E-mail your request, including your address, phone number, OMB number, and HCFA document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address:

HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards, Attention: Dawn Willinghan, Room N2–14–26, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: November 23, 1999.

John Parmigiani,

Manager, HCFA Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards. [FR Doc. 99–31326 Filed 12–2–99; 8:45 am]

BILLING CODE 4120-03-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-1964]

Agency Information Collection Activities: Submission For OMB Review; Comment Request

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, has submitted to the Office of Management and Budget (OMB) the following proposal for the collection of information. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) The accuracy of the estimated burden; (3) Ways to enhance the quality, utility, and clarity

of the information to be collected; and (4) The use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: Extension of a currently approved collection;

Title of Information Collection: Request for Review of Part B Medicare Claim and Supporting Regulations in 42 CFR, 405.807;

Form No.: HCFA-1964 (OMB# 0938-0033);

Use: The HCFA–1964 is a form which is used nationally to request review of an initial determination made on a Part B health insurance claim. A Medicare beneficiary (or his/her physician/supplier who accepts assignment) files for Part B benefits using forms HCFA–1490S (Patient's Request for Medicare Payment), HCFA–1491 (Request for Medicare Payment—Ambulance), or HCFA–1500 (Health Insurance Claim Form). If any benefits are denied, the claimant has the right to request a review of the initial determination by submitting this HCFA–1964, form.;

Frequency: On occasion;

Affected Public: Individuals or households, and not-for-profit institutions;

Number of Respondents: 5,600,000; Total Annual Responses: 5,600,000;

Total Annual Hours: 1,400,000.

To obtain copies of the supporting statement for the proposed paperwork collections referenced above, access HCFA's WEB SITE ADDRESS at http://www.hcfa.gov/regs/prdact95.htm, or Email your request, including your address and phone number, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB Desk Officer designated at the following address:

OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: November 16, 1999.

John Parmigiani,

Manager, HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards. [FR Doc. 99–31324 Filed 12–2–99; 8:45 am]

BILLING CODE 4120-03-P