payment methods for Telemedicine services. The major objective is to evaluate the use of interactive video Telemedicine consultation. Recommendations will be based on analysis of the use of Telemedicine for such medical consultation.

Frequency: Other: periodically. Affected Public: Individuals or households, Business or other for-profit, and Not-for-profit institutions.

Number of Respondents: 1,450. Total Annual Responses: 84,235. Total Annual Hours: 360.

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: February 24, 2000.

#### John P. Burke III,

HCFA Reports Clearance Officer, HCFA Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 00–5106 Filed 3–2–00; 8:45 am] BILLING CODE 4120–03–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## **Health Care Financing Administration**

[Document Identifier: HCFA-R-0280]

## 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 Request: Extension of a currently approved collection.

Title of Information Collection: Medigap Compare.

*HCFA Form Number:* HCFA–R–0280 (OMB approval #:0938–0767).

Use: HCFA collects plan-specific Medigap data, including but not limited to premiums charged and additional benefits offered, from each insurer offering Medigap plans. The data collection occurs electronically. The data are provided on www.medicare.gov to assist beneficiaries in obtaining accurate information on all their health care coverage options.

Frequency: Annually, and semiannually if needed.

Affected Public: Business or other forprofit, Federal Government, State, Local, or Tribal Government, not-for-profit institutions.

Number of Respondents: 300. Total Annual Responses: 450. Total Annual Burden Hours: 75.

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: Julie Brown, Room N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: February 17, 2000.

### John P. Burke III,

Reports Clearance Officer, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 00–5108 Filed 3–2–00; 8:45 am] BILLING CODE 4120–03–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## **Health Care Financing Administration**

[Document Identifier: HCFA-43]

### 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:
Application for Health Insurance
Benefits Under Medicare For
Individuals With Chronic Renal Disease
and Supporting Regulations in 42 CFR
406.13.

Form No.: HCFA-0043 (OMB #0938-0080).

Use: This form is used as a standard method of eliciting information necessary to determine entitlement to Medicare under the end stage renal disease provision of the law. This form was developed to satisfy the requirements of law and regulations and provide a form for eligible individuals to apply for Medicare entitlement.

Frequency: Other; one time only.
Affected Public: Individuals or
households, Federal Government, and
State, Local or Tribal Government.
Number of Respondents: 60,000.

Total Annual Responses: 60,000. Total Annual Hours: 26,000.

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, DC 20503.

Dated: January 24, 2000.

### John P. Burke III,

HCFA Reports Clearance Officer, HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 00–5107 Filed 3–2–00; 8:45 am] BILLING CODE 4120–03–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## **Health Care Financing Administration**

[Document Identifier: HCFA-2744]

### 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: End Stage Renal Disease Medical Information System ESRD Facility Survey.

Form No.: HCFA-2744 (0938-0447); Use: The ESRD Facility Survey form is completed annually by Medicare approved providers of dialysis and transplant services. The HCFA-2744 is designed to collect information concerning treatment trends, utilization of services and patterns of practice in treating ESRD patients.

Frequency: Annually.

Affected Public: Business or other forprofit and Not-for-profit institutions. Number of Respondents: 3,761. Total Annual Responses: 3,761. Total Annual Hours Requested: 30,088.

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, DC 20503.

Dated: January 24, 2000.

### John P. Burke III,

HCFA Reports Clearance Officer, HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 00–5197 Filed 3–2–00; 8:45 am]

BILLING CODE 4120-03-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Office of Inspector General

Healthcare Integrity and Protection Data Bank: Announcement of Opening Date for Querying and User Fees

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

ACTION: Notice.

**SUMMARY:** In accordance with final regulations implementing the Healthcare Integrity and Protection Data Bank (HIPDB) published in the **Federal Register** on October 26, 1999 (64 FR 57740), the Office of Inspector General (OIG) is announcing that the data bank

will become operational for purposes of requesting information (querying) on health care practitioners, providers or suppliers, on March 6, 2000. The HIPDB had become operational for purposes of reporting information and accepting self-queries, as set forth in a Federal **Register** notice published on November 22, 1999 (64 FR 58851). In addition, the Department now is exercising its authority to impose a \$4 fee for queries submitted by authorized entities to query the HIPDB, and a \$10 fee for use of the Interactive Search Capability of the data bank that is available to authorized law enforcement agencies. In accordance with § 61.13 of the HIPDB final regulations, the HIPDB will assess a fee on all requests for information, except requests from Federal agencies.

#### SUPPLEMENTARY INFORMATION:

### 1. Opening Date for Querying

The HIPDB will accept queries from authorized entities, including authorized law enforcement agencies, beginning March 6, 2000. To submit queries, registered entities must use the HIPDB website at www.npdb-hipdb.com. Specific guidelines for querying also can be found on this website.

### 2. User fee amount

Section 1128E(d)(2) of the Social Security Act (the Act), as added by section 221(a) of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, specifically authorizes the establishment of fees for the costs of processing requests for disclosure and for providing such information, and the final regulations at 45 CFR part 61 set forth the criteria and procedures for information to be reported to and disclosed by the HIPDB. The Act requires that the Department recover the full costs of operating the HIPDB through user fees. In determining any changes in the amount of the user fee, the Department is employing the criteria set forth in § 61.13(b) of the HIPDB regulations.

Specifically, § 61.13(b) states that the amount of each fee will be determined based on the following criteria:

- Direct and indirect personnel costs;
- Physical overhead, consulting, and other indirect costs including rent and depreciation on land, buildings and equipment;
- Agency management and supervisory costs;
- Costs of enforcement, research and establishment of regulations and guidance;
- Use of electronic data processing equipment to collect and maintain information, *i.e.*, the actual cost of the