

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.

(1) *Type of Information Collection Request:* Revision of a currently approved collection;

*Title of Information Collection:* End-Stage Renal Disease (ESRD) Network Business Proposal Forms and Supporting Regulations in 42 CFR 405.2110 and 405.2112;

*Form No.:* HCFA-684A-I (OMB# 0938-0658);

*Use:* The submission of business proposal information by current ESRD networks and other bidders, according to the business proposal instructions, meets HCFA's need for meaningful, consistent, and verifiable data when evaluating contract proposals.;

*Frequency:* Other: Every 3 years;

*Affected Public:* Not-for-profit institutions;

*Number of Respondents:* 18;

*Total Annual Responses:* 36;

*Total Annual Hours:* 1,080.

(2) *Type of Information Collection Request:* Extension of a currently approved collection;

*Title of Information Collection:* End-Stage Renal Disease (ESRD) Network Semi-Annual Cost Report Forms and Supporting Regulations in 42 CFR 405.2110 and 405.2112.;

*Form No.:* HCFA-685 (OMB# 0938-0657);

*Use:* Submission of semi-annual cost reports allow HCFA to review, compare, and project ESRD network costs. The reports are used as an early warning system to determine whether the networks are in danger of exceeding the total cost of the contract. Additionally, HCFA can analyze line item costs to identify any significant aberrations.

*Frequency:* Semi-annually;

*Affected Public:* Not-for-profit institutions;

*Number of Respondents:* 18;

*Total Annual Responses:* 36;

*Total Annual Hours:* 1,080.

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](mailto: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 Willingham, Room N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Date: July 11, 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. 00-18379 Filed 7-19-00; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Care Financing Administration

**[Document Identifiers: HCFA-R-296 (OMB # 0938-0781)]**

#### **Intent of Emergency Clearance: Public Information Collection Meeting To Discuss Requirements To Be Resubmitted to the Office of Management and Budget (OMB) Concerning the Home Health Agency Beneficiary Notices**

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, in the near future, the Health Care Financing Administration (HCFA), Department of Health and Human Services (DHHS), will be submitting to the Office of Management and Budget (OMB) a request for Emergency review of the revised Home Health Advance Beneficiary Notice (HHABN).

We will be requesting an emergency review because the collection of this information is needed prior to the expiration of the normal time limits under OMB's regulations at 5 CFR part 1320. Due to the requirement to implement the home health agency (HHA) prospective payment system (PPS), on or about October 1, 2000, the Agency cannot reasonably comply with the normal clearance procedures because public harm is likely to result because eligible individuals will not receive their health insurance protections required under Federal law.

In order to fairly evaluate whether an information collection should be approved by OMB, consistent with

section 3506(c)(2)(A) of the PRA, HCFA will hold a public meeting to permit interested parties an opportunity to give their views on how the content and distribution of the HHABNs may need to be revised in order to accommodate the changes associated with the implementation of the HHA prospective payment system. Representatives of the HHA industry, health care consumer advocacy groups, and provider groups, and other members of the public who wish to participate in the public meeting are asked to notify the Agency in advance of their interest in attending. At this meeting, the Health Care Financing Administration will solicit comments on the following issues:

- The need for the information collection and its usefulness in carrying out the proper functions of our agency.
- The accuracy of our estimate of the information collection burden.
- The quality, utility, and clarity of the information to be collected.
- Recommendations to minimize the information collection burden on the affected public, including automated collection techniques.
- Relevance of comments received on the HHABNs previously published in the **Federal Register**.

The public meeting will be held on Tuesday, July 25, 2000, from 1-5 p.m., in the Multipurpose Room (Capacity: 100 persons) of the Health Care Financing Administration, 7500 Security Boulevard, Baltimore, Maryland 21244. Interested parties should provide notification of their planned attendance to John Burke either via telephone (401) 786-1325, fax (410) 786-0262, or e-mail: [jburke1@hcfa.gov](mailto:jburke1@hcfa.gov). by no later than 3 p.m., Friday, July 21, 2000.

Dated: July 17, 2000.

**Edward A. King,**

*Deputy Director, Office of Information Services, Security and Standards Group, Health Care Financing Administration.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Care Financing Administration

**[Document Identifier: HCFA-482]**

#### **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:* Methodology for Estimating Waiver Costs of HCFA Demonstration Projects; *Form No.:* HCFA-482 (OMB# 0938-0408);

*Use:* The information collected is intended to provide guidance to individuals responsible for the preparation of waiver cost estimates for HCFA demonstrations. These estimates are used in analysis of potential costs and benefits associated with implementing a proposed policy;

*Frequency:* Other: On Occasion;

*Affected Public:* State, Local or Tribal Government, Individuals or Households, Business or other for-profit, and Not-for-profit institutions;

*Number of Respondents:* 25;

*Total Annual Responses:* 25;

*Total Annual Hours:* 2,000.

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 E-mail your request, including your address and phone number, to [Paperwork@hcfa.gov](mailto: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: June 12, 2000.

**John P. Burke III,**

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

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources And Services Administration

#### Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Pub. L. 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, call the HRSA Reports Clearance Officer on (301) 443-1129.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

#### Proposed Project: Children's Hospital Graduate Medical Education Program (OMB No. 0915-0247)

Public Law 106-129 amended the Public Health Service Act to provide for the support of graduate medical education (GME) in children's hospitals. The provision authorizes payments in Fiscal Years 2000 and 2001 for direct and indirect expenses associated with operating approved GME programs. Section 340E(c)(1) of the PHS Act, as amended, states that the amount determined under this subsection for payments for direct medical expenses for a fiscal year is equal to the product of (a) the updated per resident amount as determined, and (b) the average number of FTE residents in the hospital's approved graduate medical residency training programs as determined under section 1886(h)(4) of the Social Security Act during the fiscal year. Section 340E(d)(2) requires the Secretary to determine the appropriate amount of indirect medical education for expenses associated with the treatment of more severely ill patients and the additional costs relating to teaching residents in such programs to a children's hospital by considering variations in case mix among children's hospitals, and the hospitals' number of FTE residents in approved training programs.

Administration of the Children's Hospital Graduate Medical Education Program relies on the reporting of the number of full-time equivalent residents in applicant children's hospital training programs to determine the amount of direct and indirect expense payments to participating children's hospitals. Indirect expense payments will also be derived from a formula that requires the reporting of case mix index information from participating children's hospitals.

Hospitals will be requested to submit such information in an annual application. The statute also requires reconciliation of the estimated numbers of residents with the actual number determined at the end of the fiscal year. Participating children's hospitals would be required to complete an adjusted report to correct such information on an annual basis.

#### ESTIMATES OF ANNUALIZED HOUR BURDEN

Form name	Number of respondents	Responses per respondents	Total responses	Hrs. per response	Total hour burden	Wage rate (\$/hr)	Total hour cost (\$)
Form-2001E .....	54	1	54	24	1,296	\$45	\$58,320
Form-2001F .....	54	1	54	8	432	45	19,440
IME data .....	54	1	54	14	756	45	34,020
Required GPRA tables .....	54	1	54	28	1,512	45	68,040