

TABLE OF REGULATORY SECTIONS AND RESPONDENT BURDEN—Continued

| Type of burden | Trans- actions per year | Estimated time per transaction | Annual re- sponse bur- den (hours) |
|---|--------------------------------|--------------------------------|---|
| 60.7(c)(2) Non-Student Signed Stmt.—Gov. Debt Collec- tion. | 0.00 | | 0.00 |
| Subpart D: Lender—22 Participating Lenders | | | |
| 60.31(c) Procedures for Servicing & Collecting Loans | 22 | 240 min. (4 hrs) | 88 |
| 60.33(e) Promissory Note | Burden included in 60.42(a)(2) | | |
| 60.34(b)(2) Terms of Repayment Schedules | 10,000 | 5 min | 833 |
| 60.35(a)(1) Attempts to Collect Delinquent Payment | 10,000 | 5 min | 833 |
| 60.35(a)(2) Documentation of Skip-tracing | 2,500 | 10 min | 417 |
| 60.37(a)(1) Documentation of Borrower's Inability to Pay | 2,500 | 15 min | 625 |
| 60.37(c) Renewals of Forbearance | 1,200 | 10 min | 200 |
| 60.37(c)(1) Basis for Belief of Borrower Intent to Default | 300 | 10 min. | 50 |
| 60.40(a) Documentation of Insurance Claims | 584 | 70 min. | 681 |
| 60.42(a)(1) Loan Records | Burden included in 60.42(a)(2) | | |
| 60.42(a)(2) Borrower's Payment History | 101,063 | 15 min. | 25,266 |
| Subtotal | 128,169 | | 28,993 |
| Subpart E: School—200 Participating Schools | | | |
| 60.51(f)(1) Documentation of Needs Analysis Adjustment | Burden included in 60.61(a)(5) | | |
| 60.51(f)(2) Documentation of Standard Student Budget Adjustments. | Burden included in 60.61(a)(5) | | |
| 60.56(a) Required Retention of HEAL Borrower Records 60.56(b) Five Year Retention of Student Records | Burden included in 60.61(a)(5) | | |
| 60.57 Retention of Reports to the Secretary | 200 | 45 min. | 150 |
| 60.61(a)(1) Entrance Interview. | | | |
| 60.61(a)(2) Exit Interview | 1,439 | 5 min. | 120 |
| 60.61(a)(4) HEAL Check Receipt | 0 | 300 min. | 0 |
| 60.61(a)(5) Complete Records of HEAL Borrowers | 50,000 | 15 min. | 12,500 |
| 60.61(a)(6) Criteria for Student Budgets | 50,000 | 2 min. | 1,667 |
| Subtotal | 101,639 | | 14,437 |
| Total Recordkeeping | 229,808 | | 43,430 |
| Total Annual Burden | 504,661 | | 95,290 |

Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 14-33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: July 25, 2000.

Jane Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 00-19305 Filed 8-3-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Advisory Council; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act(Public Law 92-463), announcement is made of the following National Advisory body scheduled to meet during the month of August 2000.

Name: Advisory Committee on Interdisciplinary, Community-Based Linkages.

Date and Time: August 13, 2000, 6 p.m.–8 p.m.; August 14, 2000, 8:30 a.m.–5 p.m.; August 15, 2000, 8:30 a.m.–12 p.m.

Place: The Doubletree Hotel, Rockville, Maryland, 1750 Rockville Pike, Rockville, Maryland 20852.

The meeting is open to the public.

The full Committee will meet beginning August 13 and adjourning August 15, during the hours cited above. Agenda items will include, but not be limited to: Welcome and introduction of Committee members; introduction of the Division of Interdisciplinary and Community-Based Programs (DICP), Bureau of Health Professions (BHP), Health Resources and Services Administration (HRSA), staff supporting Committee activities; an overview of HRSA, BHP, and the DICP infrastructure and missions; the election of a Committee Chair and Vice-Chair; general discussion among Committee members of its charge under Section 756 of the Public Health Service Act, to include discussion of Committee reports; and scheduling of the

next Committee meeting, which shall include but not be limited to: general discussion of topics to be addressed during the next Committee meeting.

Public comment will be permitted before lunch and at the end of the Committee meeting on August 14, 2000. Oral presentations will be limited to 5 minutes per public speaker. Persons interested in providing an oral presentation should submit a written request, with a copy of their presentation to: Mr. Leo Wermers, Principal Staff Liaison, Division of Interdisciplinary, Community-Based Programs, Bureau of Health Professions, Health Resources and Services Administration, Room 9-105, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 443-1648.

Requests should contain the name, address, telephone number, and any business or professional affiliation of the person desiring to make an oral presentation. Groups having similar interests are requested to combine their comments and present them through a single representative. The Division of Interdisciplinary, Community-Based Programs will notify each presenter by mail or telephone of their assigned presentation time.

Persons who do not file an advance request for a presentation, but wish to make an oral statement, may register to do so at the Doubletree Hotel, Rockville, Maryland, on August 14, 2000. These persons will be allocated time as the Committee meeting agenda permits.

Anyone requiring information regarding the Committee should contact Mr. Wermers, Division of Interdisciplinary, Community-Based Programs, Bureau of Health Professions, Health Resources and Services Administration, Room 9-105, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 443-1648.

Proposed agenda items are subject to change as priorities dictate.

Dated: July 25, 2000.

Jane M. Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 00-19304 Filed 8-1-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Statement of Organization, Functions, and Delegations of Authority

This notice amends Part R of the Statement of Organization, Functions and Delegations of Authority of the Department of Health and Human Services (DHHS), Health Resources and Services Administration (60 FR 56605 as amended November 6, 1995, as last amended at 65 FR 45994-5 dated July 26, 2000).

This notice reflects the revised functional statement in the Division of

Community and Migrant Health (RC4) in the Bureau of Primary Health Care.

Delete the functional statement for the Division of Community and Migrant Health in its entirety and replace with the following:

(1) Implements efforts to improve the organization and delivery of health services by serving as the point of accountability for Primary Health Care Services Delivery programs; (2) Provides leadership and direction for legislative activities in the program area; (3) Develops and establishes policies for such national programs and develops long and short-range program goals and objectives; (4) Is accountable for the administration of funds and other resources for grants, contracts, and clinical and programmatic consultation and assistance; (5) Ensures that assigned responsibilities are being carried out; (6) Coordinates the development and establishment of guidelines and standards for professional services and staff development; (7) Interprets policies, regulations, guidelines, standards, and priorities to higher echelons, to regionally located staff, grantee agencies, institutions and organizations; (8) Coordinates with other programs providing health services including voluntary, official, and other community agencies, and provides clinical and programmatic consultation and assistance, on request, to the States in such areas as program planning, establishment of goals and objectives, standards of care, and evaluation; (9) Establishes and provides liaison in program matters with other entities within BPHC and the Agency, within the Department and with other Federal agencies, consumer groups and national organizations concerned with health matters with State and local governments; (10) Participates in the development of forward plans, legislative proposals, and budgets; and (11) Coordinates the integration of primary care projects and services with other health care delivery systems.

Delegations of Authority

All delegations and redelegations of authority which were in effect immediately prior to the effective date hereof have been continued in effect in them or their successors pending further redelegation.

This reorganization is effective upon date of signature.

Dated: July 25, 2000.

Claude Earl Fox,

Administrator.

[FR Doc. 00-19778 Filed 8-3-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

[0917-ZA06]

Reimbursement Rates for Calendar Year 2000

Notice is given that the Director of Indian Health Service, under the authority of sections 321(a) and 322(b) of the Public Health Service Act (42 U.S.C. 248(a) and 249(b)) and section 601 of the Indian Health Care Improvement Act (25 U.S.C. 1601), has approved the following reimbursement rates for inpatient and outpatient medical care in facilities operated by the Indian Health Service for Calendar Year 2000 for Medicare and Medicaid Beneficiaries and Beneficiaries of other Federal Agencies. Indian Health Service facilities that are paid the inpatient rate set forth below may also bill for Medicaid physician services to the extent that those services meet applicable requirements under an approved State Medicaid plan.

Inpatient Hospital Per Diem Rate (Excludes Physician Services)

Calendar Year 2000

| | |
|-----------------------|---------|
| Lower 48 States | \$1,157 |
| Alaska | 1,428 |

Outpatient per Visit Rate (Excluding Medicare)

Calendar Year 2000

| | |
|-----------------------|-------|
| Lower 48 States | \$172 |
| Alaska | 304 |

Outpatient per Visit Rate (Medicare)

Calendar Year 2000

| | |
|-----------------------|-------|
| Lower 48 States | \$139 |
| Alaska | 308 |

Medicare Part B Inpatient Ancillary per Diem Rate

Calendar Year 2000

| | |
|-----------------------|-------|
| Lower 48 States | \$666 |
| Alaska | 913 |

Outpatient Surgery Rate (Medicare)

Established rates for freestanding Ambulatory Surgery Centers

Effective Date for Calendar Year 2000 Rates

Consistent with previous annual rate revisions, the Calendar Year 2000 rates will be effective for services provided on/or after January 1, 2000 to the extent consistent with payment authorities including the applicable Medicaid State plan.