DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-01-15]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 639–7090.

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 for other forms of information technology. Send comments to Anne O'Connor, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project

Alaska Air Carrier Operator and Pilot Survey—NEW—National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC). The mission of the National Institute for Occupational Safety and Health is to promote safety and health at work for all people through research and prevention.

There is evidence that a disproportionate number of all U.S. aircraft crashes occur in Alaska. Between 1990–1998 there were 823 commuter and air taxi crashes in the U.S., of which 229 (28 percent) were fatal, resulting in 653 deaths. Alaska accounted for 304 (37 percent) of the total crashes, 49 of which were fatal (21 percent of the U.S. fatal crashes), resulting in 131 deaths (20 percent of all U.S. deaths) (NTSB Aviation Accident Database, 1999). Aviation crashes are now the leading cause of occupational fatalities in Alaska.

To address this compelling occupational issue in Alaska, Congress supported implementation of a federal initiative to reduce aviation-related injuries and fatalities. The initiative is a three-year commitment led by a partnership of four federal agencies who share an interest in promoting aviation safety and preventing aircraft crashes the Federal Aviation Administration (FAA), the National Transportation Safety Board (NTSB), National Weather Service (NWS), and the National Institute for Occupational Safety and Health (NIOSH). The purpose of this joint initiative is to reduce the number of aircraft crashes and deaths, and promote aviation safety within the air transportation industry in Alaska.

This initiative complements another federal/industry initiative to reduce aviation fatalities—the Capstone Program. The Capstone Program, currently implemented in the Bethel, Alaska area includes installation of improved avionics in aircraft used in FAR Part 135 operations, an improved ground infrastructure for weather information, data link communications and Flight Information Services, and the development of new GIS-based non-precision instrument approaches at remote airports.

As part of these initiatives, air carrier operators and pilots will be surveyed to obtain information on what they perceive are the risks and hazards contributing to aircraft accidents in Alaska, their opinions about current safety programs, and what they think

could be done to improve aviation safety. This information will be analyzed to identify common risk factors, compare them to risk factors identified from analysis of accident reports and published literature, and assess the effectiveness of current and new potential safety interventions. These findings will be useful to Alaska's air transportation industry for trend information to evaluate interventions.

To reduce the total respondent burden and increase efficiency in data collection, we are coordinating and combining the information gathering process for both the joint initiative and a safety study of the Capstone initiative into one effort. The joint initiative will conduct two statewide surveys: approximately 400 participants in the air carrier operator survey and 500 participants in the pilot survey. The Capstone safety study will add questions to both surveys for respondents in the implementation area, and in addition will continue to survey pilots using Capstone equipment for the duration of that program (through fall 2002). Follow up surveys to assess the effectiveness of the implementation measures would re-survey approximately half of the original statewide sample: about 200 air carrier operators and 250 pilots.

We will use the results of the initial statewide surveys to (1) recommend ways to improve air transportation safety; (2) identify measures to put the recommendations into effect; and (3) guide the ongoing research. Follow up surveys will assess the effectiveness of the program and identify potential improvements. We will use the results of the Capstone study surveys to assess the effectiveness of that program and to recommend improvements. The information can be obtained only from the respondents, as it requests information on skills, knowledge, attitudes, and business practices for which no other source is available.

Based on an average wage of \$20.00 per hour for all respondents, the total annual cost is \$15,400.

Survey	No. of respondents	No. of responses/ respondent	Avg. burden per response (in hrs.)	Total burden (in hrs.)
J1a. Statewide Operators	400	1	30/60	200
J2a. Statewide Pilots	500	1	30/60	250
C1. Additional questions: Capstone area opera-				
tors	30	1	15/60	7.5
C2. Additional questions: Capstone area Pilots	50	1	15/60	12.5
C3. Capstone pilots not included in statewide sur-				
vey	150	1	30/60	75
J1b. Post Implementation: Operators	200	1	30/60	100
	(sample from J1a)			

Survey	No. of respondents	No. of responses/ respondent	Avg. burden per response (in hrs.)	Total burden (in hrs.)
J2b. Post Implementation: Pilots	250 (sample from J1b)	1	30/60	125
Total				770

Dated: January 3, 2001.

Nancy Cheal,

Acting Associate Director for Policy, Planning and Evaluation Centers for Disease Control and Prevention (CDC).

[FR Doc. 01–915 Filed 1–10–01; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Prevention Education and Access to Care Services for Persons Infected and Affected by HIV

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following meeting.

announces the following meeting.
Name: Disease, Disability, and Injury
Prevention and Control Special
Emphasis Panel (SEP): Prevention
Education and Access to Care Services
for Persons Infected and Affected by
HIV, Program Announcement 101012,
meeting.

Times and Dates: 9 a.m.—9:30 a.m., February 5, 2001 (Open). 9:30 a.m.—4:30 p.m., February 5, 2001 (Closed).

Place: National Center for HIV, STD, and TB Prevention, CDC, 8 Corporate Square Blvd., Conference Room 1A, B, and C, Atlanta, Georgia 30329.

Status: Portions of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Associate Director for Management and Operations, CDC, pursuant to Public Law 92–463.

Matters To Be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to Program Announcement #01012.

FOR FURTHER INFORMATION CONTACT:

Elizabeth A. Wolfe, Prevention Support Office, National Center for HIV, STD, and TB Prevention, CDC, Corporate Square Office Park, 8 Corporate Square Boulevard, M/S E07, Atlanta, Georgia 30329, telephone 404/639–8025. The Director, Management Analysis and Services office has been delegated the authority to sign Federal Register notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: January 5, 2001.

Carolyn J. Russell,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention CDC.

[FR Doc. 01–914 Filed 1–10–01; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration [HCFA-2112-N]

Medicaid Program; Infrastructure Grant Program To Support the Competitive Employment of People With Disabilities

AGENCY: Health Care Financing Administration (HCFA), HHS. **ACTION:** Notice.

SUMMARY: This notice announces the availability of our funding, through grants, for eligible States under the Ticket to Work and Work Incentives Improvement Act of 1999. The grant program is designed to assist States in developing infrastructures to support the competitive employment of people with disabilities by extending necessary Medicaid coverage to these individuals. This notice also contains pertinent information where States may apply for the grant program.

DATES: States should submit a notice of intent to apply for a grant no later than March 15, 2001.

Deadline for Grant Submission: Grant applications must be submitted by May 21, 2001 to be considered under the Fiscal Year 2002 annual funding cycle.

ADDRESSES: Standard application forms and related instructions are available from and must be formally submitted to: Marilyn Lewis-Taylor, Health Care Financing Administration, Office of Internal Customer Support, AGG, Grants

Management Staff, Mail Stop C2–15–21, 7500 Security Boulevard, Baltimore, Maryland 21244–1850, (410) 786–5701, Internet: Mlewistaylor@hcfa.gov.

Please note: While State agencies are only required to submit an original and two copies, submission of an original and 14 copies will greatly expedite the application process.

Website: You may access up-to-date information about the Medicaid Infrastructure Grants and obtain a complete Grant Solicitation at: http://www.hcfa.gov/medicaid/twwiia/twwiiahp.htm.

FOR FURTHER INFORMATION CONTACT:

Questions about the grants may be directed to: Joe Razes, TWWIIA Program Manager, Disabled and Elderly Health Programs Group, Center for Medicaid and State Operations, Health Care Financing Administration, Room S2–14–26, 7500 Security Boulevard, Baltimore, MD 21244–1850, (410) 786–6126, Internet: JRazes@hcfa.gov.

SUPPLEMENTARY INFORMATION: On May 31, 2000, we published a notice in the Federal Register (65 FR 34715) to announce our availability of funding, through grants, for eligible States under the Ticket to Work and Work Incentives Improvement Act of 1999. In that notice, we solicited eligible States to apply for those grants to provide financial assistance for the Competitive Employment of People with Disabilities under the Medicaid program. States that wish to apply for these grants and desire further detailed information, such as application requirements, review procedures, an explanation of a timely submission, and other relevant information, should refer to the abovementioned Federal Register notice and Website listed.

Authority: Section 203 of the Ticket to Work and Work Incentive Improvement Act of 1999, Public Law 106–170. (Catalog of Federal Domestic Assistance Program No. 93.779, Health Care Financing Research, Demonstration, and Evaluations)

Dated: January 5, 2001.

Robert A. Berenson,

Acting Deputy Administrator, Health Care Financing Administration.

[FR Doc. 01–814 Filed 1–10–01; 8:45 am] BILLING CODE 4120–01–P