

Rotert, (202) 564-5280, e-mail: rotert.kenneth@epa.gov. For registration and general information about this meeting, please contact Ms. Stephanie Danner at The Cadmus Group, Inc.; 1901 North Fort Myer Dr., Suite 900, Arlington, VA 22209, by phone: (703) 247-6129; by fax: (703) 247-6001, or by e-mail at SDanner@cadmusgroup.com.

SUPPLEMENTARY INFORMATION: The meeting will provide stakeholders information on nine white papers which present available data, information, and research on the potential public health impacts of drinking water distribution systems.

Those registered by November 8 will receive background materials prior to the meeting. Additional information on these and other EPA activities under SDWA is available at the Safe Drinking Water Hotline at (800) 426-4791.

Meeting materials, including the previously mentioned white papers, are available at <http://www.epa.gov/safewater/tcr/tcr.html>. Proceedings of the meeting will also be posted on this website.

Any person needing special accommodations at this meeting, including wheelchair access, should contact the same previously-noted point of contact at The Cadmus Group, Inc., at least five business days before the meeting so that the Agency can make appropriate arrangements.

Same day registration for this meeting will be from 8:45 a.m. to 9 a.m. Pacific Time.

Dated: October 16, 2002.

Cynthia C. Dougherty,

Director, Office of Ground Water and Drinking Water.

[FR Doc. 02-26713 Filed 10-18-02; 8:45 am]

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ENVIRONMENTAL PROTECTION AGENCY

[FRL-7396-5]

Public Water Supervision Program Revision for the State of Tennessee

AGENCY: Environmental Protection Agency (EPA).

ACTION: Notice of tentative approval.

SUMMARY: Notice is hereby given that the State of Tennessee is revising its approved Public Water System Supervision Program. Tennessee has adopted drinking water regulations which incorporate the requirements of the Public Notification Rule. EPA has determined that these revisions are no less stringent than the corresponding federal regulations. Therefore, EPA

intends to approve this State program revision.

All interested parties may request a public hearing. A request for a public hearing must be submitted by November 20, 2002, to the Regional Administrator at the address shown below. Frivolous or insubstantial requests for a hearing may be denied by the Regional Administrator. However, if a substantial request for a public hearing is made by November 20, 2002, a public hearing will be held. If no timely and appropriate request for a hearing is received, and the Regional Administrator does not elect to hold a hearing on his own motion, this determination shall become final and effective on November 20, 2002. Any request for a public hearing shall include the following information: (1) The name, address, and telephone number of the individual organization, or other entity requesting a hearing; (2) A brief statement of the requesting person's interest in the Regional Administrator's determination and a brief statement of the information that the requesting person intends to submit at such hearing; (3) The signature of the individual making the request, or, if the request is made on the behalf of an organization or other entity, the signature of a responsible official of the organization or other entity.

ADDRESSES: All documents relating to this determination are available for inspection between the hours of 8 a.m. and 4:30 p.m., Monday through Friday, at the following offices: Tennessee Department of Environment and Conservation, Division of Water Supply, 401 Church Street, L&C Tower, Sixth Floor, Nashville, Tennessee, 37243-1549, or at the Environmental Protection Agency, Region 4, Drinking Water Section, 61 Forsyth Street Southwest, Atlanta, Georgia 30303.

FOR FURTHER INFORMATION CONTACT: Vivian Doyle, EPA Region 4, Drinking Water Section at the Atlanta address given above, or by telephone at (404) 562-9942.

Authority: Sections 1401 and 1413 of the Safe Drinking Water Act, as amended (1996), and 40 CFR parts 141 and 142.

Dated: September 24, 2002.

A. Stanley Meiburg,

Acting Regional Administrator, Region 4.

[FR Doc. 02-26711 Filed 10-18-02; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifiers: CMS-10074, CMS-R-0290, CMS-R-0285, & CMS-2744]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as 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.

(1) *Type of Information Collection Request:* New collection; *Title of Information Collection:* Program for the All-Inclusive Elderly Health Survey (PHS); *Form No.:* CMS-10074 (OMB# 0938-NEW); *Use:* The Centers for Medicare & Medicaid Services has developed a survey, the PHS, that is similar to the Health Outcomes Survey (HOS). The main purpose of the PHS is to collect health status information that may be used to adjust Medicare payments to PACE organizations. It has been successfully pilot-tested to assess response rates and accuracy of responses under different distribution approaches. The pilot test enabled CMS to select an approach whereby PACE enrollees will be sent surveys to fill out and can request assistance from family or professionals.; *Frequency:* Annually; *Affected Public:* Individuals or Households, Not-for-profit institutions; *Number of Respondents:* 15,800; *Total Annual Responses:* 5,814; *Total Annual Hours:* 1082.

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

Information Collection: Procedures for Making National Coverage Decisions; **Form No.:** CMS-R-0290 (OMB# 0938-0776); **Use:** These information collection requirements provide the process CMS will use to make a national coverage decision for a specific item or service under sections 1862 and 1871 of the Social Security Act. This will streamline our decision making process and will increase the opportunities for public participation in making national coverage decisions; **Frequency:** Other (as needed); **Affected Public:** Business or other for-profit, Not-for-profit institutions; **Number of Respondents:** 200; **Total Annual Responses:** 200; **Total Annual Hours:** 8,000.

(3) **Type of Information Collection Request:** Extension of a currently approved collection; **Title of Information Collection:** Request for Retirement Benefit Information; **Form No.:** CMS-R-0285 (OMB# 0938-0769); **Use:** This information is needed to determine whether a beneficiary meets the requirements for reduction of the Part A premium to zero.; **Frequency:** On occasion.; **Affected Public:** State, Local or Tribal Government; **Number of Respondents:** 1,500; **Total Annual Responses:** 1,500; **Total Annual Hours:** 208.

(4) **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.:** CMS-2744 (OMB# 0938-0447); **Use:** The ESRD Facility Survey form is completed annually by Medicare approved providers of dialysis and transplant services. The CMS-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 for-profit, Not-for-profit institutions; **Number of Respondents:** 4,225; **Total Annual Responses:** 4,225; **Total Annual Hours:** 33,800.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS'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 CMS 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 CMS Paperwork Clearance Officer designated at the following address:

CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances, Attention: Dawn Willingham, Room N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: October 10, 2002.

John P. Burke, III,

Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, Office of Strategic Operations and Strategic Affairs, Division of Regulations Development and Issuances.

[FR Doc. 02-26652 Filed 10-18-02; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS-R-21]

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

AGENCY: Centers for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as 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:** Withholding Medicare Payments to Recover Medicaid Overpayments and Supporting Regulations in 42 CFR 447.31; **Form No.:** CMS-R-21 (OMB# 0938-0287); **Use:** Overpayments may occur in either the Medicare and Medicaid program, at times resulting in a situation where an institution or

person that provides services owes a repayment to one program while still receiving reimbursement from the other. Certain Medicaid providers that are subject to offsets for the collection of Medicaid overpayments may terminate or substantially reduce their participation in Medicaid, leaving the State Medicaid Agency unable to recover the amounts due. These information collection requirements give CMS the authority to recover Medicaid overpayments by offsetting payments due to a provider under the program; **Frequency:** On occasion; **Affected Public:** State, Local, or Tribal Government; **Number of Respondents:** 54; **Total Annual Responses:** 27; **Total Annual Hours:** 81.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS Web site address at <http://www.hcfa.gov/regs/prdact95.htm>, or e-mail your request, including your address, phone number, OMB number, and CMS 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 30 days of this notice directly to the OMB desk officer: OMB Human Resources and Housing Branch, Attention: Brenda Aguilar, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: October 10, 2002.

John P. Burke, III,

Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances.

[FR Doc. 02-26653 Filed 10-18-02; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-8013-N]

RIN 0938-AL56

Medicare Program; Inpatient Hospital Deductible and Hospital and Extended Care Services Coinsurance Amounts for 2003

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice.

SUMMARY: This notice announces the inpatient hospital deductible and the hospital and extended care services