

This criteria is not scored; however, an application can be disapproved if the research risks are sufficiently serious and protection against risks is so inadequate as to make the entire application unacceptable.

9. Budget (Not Scored)

Is the budget request clearly explained, adequately justified, reasonable, sufficient and consistent with the stated objectives and planned activities? It should include funds for at least two trips to CDC for program related meetings and training. Attachment II provides guidance for developing budgets.

Review and Selection Process: A Special Emphasis Panel (SEP) will evaluate your application according to the criteria listed above.

In addition, the following factors may affect the funding decision: At least two applicants will be funded whose violent deaths total 2500 or more per year statewide.

VI. Award Administration Information

Award Notices: Successful applicants will receive a Notice of Grant Award (NGA) from the CDC Procurement and Grants Office. The NGA shall be the only binding, authorizing document between the recipient and CDC. The NGA will be signed by an authorized Grants Management Officer, and mailed to the recipient fiscal officer identified in the application.

Administrative and National Policy Requirements: 45 CFR part 74 or 92

For more information on the Code of Federal Regulations, see the National Archives and Records Administration at the following Internet address: <http://www.access.gpo.gov/nara/cfr/cfr-table-search.html>.

The following additional requirements apply to this project:

- AR-1 Human Subjects Requirements
- AR-2 Requirements for Inclusion of Women and Racial and Ethnic Minorities in Research
- AR-9 Paperwork Reduction Act Requirements
- AR-10 Smoke-Free Workplace Requirements
- AR-11 Healthy People 2010
- AR-12 Lobbying Restrictions
- AR-13 Prohibition on Use of CDC Funds for Certain Gun Control Activities
- AR-21 Small, Minority, and Women-Owned Business
- AR-22 Research Integrity

Additional information on these requirements can be found on the CDC Web site at the following Internet

address: <http://www.cdc.gov/od/pgo/funding/ARs.htm>.

Reporting Requirements

You must provide CDC with an original, plus two copies of the following reports:

1. Interim progress report, no less than 90 days before the end of the budget period. The progress report will serve as your non-competing continuation application, and must contain the following elements:

- a. Current Budget Period Activities Objectives.
 - b. Current Budget Period Financial Progress.
 - c. New Budget Period Program Proposed Activity Objectives.
 - d. Detailed Line-Item Budget and Justification.
 - e. Additional Requested Information.
2. Financial status report, no more than 90 days after the end of the budget period.
3. Final financial and performance reports, no more than 90 days after the end of the project period.

VII. Agency Contacts

For general questions about this announcement, contact: Technical Information Management Section, PA# 04061, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341.

Telephone: 770-488-2700.

For program technical assistance, contact: Leroy Frazier, Jr., Project Officer, Division of Violence Prevention, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, 4770 Buford Hwy, NE, MS K60, Atlanta, GA 30341.

Telephone: 770-488-1507.

E-mail: Lfrazier1@cdc.gov.

For budget assistance, contact: Nancy Ware, Contract Specialist, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341.

Telephone: 770-488-2878.

E-mail: ngw5@cdc.gov.

Dated: January 16, 2004.

Sandra R. Manning,

Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Institute for Occupational Safety and Health, Advisory Board on Radiation and Worker Health

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 board meeting:

Name: National Institute for Occupational Safety and Health (NIOSH), Advisory Board on Radiation and Worker Health (ABRWH).

Times and Dates: 8 a.m.–4 p.m., February 5, 2004; 8:30 a.m.–4:30 p.m., February 6, 2004.

Place: Radisson Riverfront Hotel Augusta, Two Tenth Street, Augusta, Georgia 30901, telephone (706) 823-6505, fax (706) 724-0044.

Status: Open 8 a.m.–4 p.m., February 5, 2004. Open 8 a.m.–12 p.m., February 6, 2004. Closed 1:30 p.m.–4:30 p.m., February 6, 2004.

Background: The Advisory Board on Radiation and Worker Health ("the Board") was established under the Energy Employees Occupational Illness Compensation Program Act (EEOICPA) of 2000 to advise the President, through the Secretary of Health and Human Services (HHS), on a variety of policy and technical functions required to implement and effectively manage the new compensation program. Key functions of the Board include providing advice on the development of probability of causation guidelines which have been promulgated by HHS as a final rule, advice on methods of dose reconstruction which have also been promulgated by HHS as a final rule, evaluation of the scientific validity and quality of dose reconstructions conducted by the NIOSH for qualified cancer claimants, and advice on petitions to add classes of workers to the Special Exposure Cohort.

In December 2000 the President delegated responsibility for funding, staffing, and operating the Board to HHS, which subsequently delegated this authority to the CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, and renewed on August 3, 2003.

Purpose: This board is charged with a) providing advice to the Secretary, HHS on the development of guidelines under Executive Order 13179; b) providing advice to the Secretary, HHS on the scientific validity and quality of dose reconstruction efforts performed for this

Program; and c) upon request by the Secretary, HHS, advise the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class.

Matters to be Discussed: Agenda for this meeting will focus on Program Status Reports from NIOSH and Department of Labor; Site Profile Status; Research Issues; a Board Working Session with Sanford Cohen and Associates, and a closed session to discuss Task Order Proposals and Independent Government Cost Estimate.

The closed portion of the meeting on the afternoon of February 6th will involve discussion of the Task Order proposals and Independent Government Cost Estimate (IGCE), which could lead to a revision of the IGCE. These contracts will serve to provide technical support consultation to assist the ABRWH in fulfilling its statutory duty to advise the Secretary of Health and Human Services on the scientific validity and quality of dose estimation and reconstruction efforts under the Energy Employees Occupational Illness Compensation Program Act.

This portion of the meeting will be closed to the public in accordance with provisions set forth regarding subject matter considered confidential under the terms of 5 U.S.C. 552b(c)(9)(B), 48 CFR 5.401(b)(1) and (4), and 48 CFR 7.304(d), and the Determination of the Director of the Director of the Management Analysis and Services Office, Centers for Disease Control and Prevention, pursuant to Pub. L. 92-1.A summary of this meeting will be prepared and submitted within 14 days of the close of the meeting.

The agenda is subject to change as priorities dictate.

Due to programmatic issues that had to be resolved, the **Federal Register** notice is being published less than fifteen days before the date of the meeting.

FOR FURTHER INFORMATION CONTACT: Larry Elliott, Executive Secretary, ABRWH, NIOSH, CDC, 4676 Columbia Parkway, Cincinnati, Ohio 45226, telephone (513) 533-6825, fax (513) 533-6826.

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 16, 2004.

Alvin Hall,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-1375-N]

Medicare Program; Request for Nominations to the Advisory Panel on Ambulatory Payment Classifications Groups

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

ACTION: Notice.

SUMMARY: This notice invites nominations of members to the Advisory Panel on Ambulatory Payment Classification (APC) Groups (the Panel). There will be four vacancies on the Panel as of March 31, 2004. The purpose of the Panel is to review the APC groups and their associated weights and to advise the Secretary of Health and Human Services (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) concerning the clinical integrity of these groups and weights, which are major elements of the hospital outpatient prospective payment system. The Panel is chartered through November 21, 2004.

Nominations

Nominations will be considered if received at the appropriate address, which is provided below, no later than 5 p.m. e.s.t. February 13, 2004. Mail or deliver nominations to the following address: CMS, Center for Medicare Management, Hospital & Ambulatory Policy Group, Division of Outpatient Care, Attention: Shirl Ackerman Ross, Designated Federal Official (FACA), Advisory Panel on APC Groups, 7500 Security Boulevard, Mail Stop C4-05-17, Baltimore, MD 21244-1850.

FOR FURTHER INFORMATION CONTACT:

Persons wishing to nominate individuals to serve on the Panel or to obtain further information can also contact the Panel coordinator, Shirl Ackerman-Ross by e-mail at SAckermanross@cms.hhs.gov or by telephone at (410) 786-4474.

For additional information and updates on the Panel's activities, please refer to the Internet at <http://www.cms.gov/faca>.

You may also refer to the CMS Advisory Committee Information Hotlines at 1-877-449-5659 (toll-free) or 410-786-9379 (local) for additional information.

News media representatives should contact the CMS Press Office, (202) 690-6145.

SUPPLEMENTARY INFORMATION:

I. Background

The Secretary of the Department of Health and Human Services (the Secretary) is required by section 1833(t)(9)(A) of the Social Security Act (the Act) to consult with an advisory panel on Ambulatory Payment Classification (APC) Groups (the Panel). The Panel will meet up to three times annually to review the APC groups and to provide technical advice to the Secretary and to the Administrator of the Centers for Medicare & Medicaid Services (CMS) concerning the clinical integrity of the groups and their associated weights. The groups and their weights are major elements of the hospital Outpatient Prospective Payment System (OPPS). We will consider the technical advice provided by the Panel as we prepare the annual Notice of Proposed Rulemaking that will propose changes to the OPPS for the next calendar year.

The current members of the Panel are: Marilyn Bedell, M.S., R.N., O.C.N.; Geneva Craig, R.N., M.A.; Lora DeWald, M.Ed.; Albert Brooks Einstein, Jr., M.D.; Robert E. Henkin, M.D.; Lee H. Hilborne, M.D., M.P.H.; Stephen T. House, M.D.; Kathleen Kinslow, C.R.N.A., Ed.D.; Mike Metro, R.N., B.S.; Gerald V. Naccarelli, M.D.; Frank G. Opelka, M.D., F.A.C.S.; Beverly K. Philip, M.D.; Lynn R. Tomascik, R.N., M.S.N.; Timothy Gene Tyler, Pharm.D.; and William Van Decker, M.D. The Panel Chair position, which must be a CMS Federal official, is vacant.

The Charter allows for up to 15 members plus a Chair, and we will have four openings as of March 31, 2004. Therefore, we are requesting nominations for members to serve on the Panel. Panel members serve without compensation, pursuant to advance written agreement; however, travel, meals, lodging, and related expenses will be reimbursed in accordance with standard Government travel regulations. We have a special interest for ensuring that women, minorities, and the physically challenged are adequately represented on the Panel, and we