

recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the OMB Desk Officer at the address below: OMB Desk Officer: John Kraemer, OMB Human Resources and Housing Branch, Attention: (OMB #0990-0128), New Executive Office Building, Room 10235, Washington, DC 20201.

Dated: July 20, 2004.

Robert E. Polson,

Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.

[FR Doc. 04-17229 Filed 7-28-04; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Committee on Vital and Health Statistics: Meeting

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting.

Name: National Committee on Vital and Health Statistics (NCVHS) Executive Subcommittee.

Time and Date: August 6, 2004 8 a.m.–4:30 p.m.

Place: Robert Wood Johnson Foundation, The Board Room, Route 1 and College Road East, Princeton, NJ 08643.

Status: Open.

Purpose: The NCVHS Executive Subcommittee will hold an all-day meeting to review the past year's accomplishments and conduct strategic planning for the coming year.

Contact Person for More Information: Substantive program information as well as summaries of meetings and a roster of committee members may be obtained from Marjorie S. Greenberg, Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Room 2402, Hyattsville, Maryland 20782, telephone (301) 458-4245. Information also is available on the NCVHS home page of the HHS Web site: <http://www.ncvhs.hhs.gov/>, where further information including an agenda will be posted when available.

Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on (301) 458-4EEO (4336) as soon as possible.

Dated: July 16, 2004.

James Scanlon,

Acting Deputy Assistant Secretary for Science and Data Policy, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 04-17328 Filed 7-28-04; 8:45 am]

BILLING CODE 4151-05-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Committee on Vital and Health Statistics: Meeting

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meetings.

Name: National Committee on Vital and Health Statistics (NCVHS), Subcommittee on Standards and Security (SSS)

Times and Dates:

Meeting One: July 28, 2004 9 a.m.–6 p.m.; July 29, 2004 8:30 a.m.–6 p.m.; July 30, 2004 8:30 a.m.–12:30 p.m.

Meeting Two: August 17, 2004, 9 a.m.–5 p.m.; August 18, 2004 8:30 a.m.–5 p.m.; August 19, 2004 8:30 a.m.–12:30 p.m.

Place: Hubert H. Humphrey Building, 200 Independence Avenue, SW., Room 705A, Washington, DC 20201.

Status: Open.

Purpose: At the July 28–30 meeting, the Subcommittee will hold hearings related to NCVHS' requirements under the Medicare Modernization Act of 2004 to develop recommendations on standards for e-prescribing for the HHS Secretary. The hearings on the first two days will conclude testimonies from stakeholders including pharmacy benefit management organizations, pharmaceutical manufacturers, payers, and hospitals. On the third day the Subcommittee will begin working on identifying potential initial standards, gaps, and related issues.

At the August 17–19 meeting, the Subcommittee will present its findings from the July hearings to standards development organizations, terminology developers, and others, for reaction and then draft a preliminary recommendation letter for possible presentation to the Full NCVHS in September.

Contact Person for More Information: Substantive program information as well as summaries of meetings and a roster of Committee members may be obtained from Maria Friedman, Health Insurance Specialist, Security and Standards Group, Centers for Medicare and Medicaid Services, MS: C5-24-04, 7500 Security Boulevard, Baltimore, MD 21244-1850, telephone: 410-786-6333 or Marjorie S. Greenberg, Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, Room 1100, Presidential Building, 3311 Toledo Road, Hyattsville, Maryland 20782, telephone: (301) 458-4245. Information also is available on the NCVHS home page of the HHS Web site: <http://www.ncvhs.hhs.gov/> where an agenda for the meeting will be posted when available.

Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on (301) 458-4EEO (4336) as soon as possible.

Dated: July 21, 2004.

James Scanlon,

Acting Deputy Assistant Secretary for Science and Data Policy, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 04-17329 Filed 7-28-04; 8:45 am]

BILLING CODE 4151-05-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 04253]

Strengthening the Capacity of the Government of Rwanda's Treatment and Research for AIDS Center (TRAC) for HIV Surveillance and the Planning, Implementation, Monitoring and Evaluation of HIV/AIDS Clinical Prevention, Treatment and Care Programs; Notice of Intent to Fund Single Eligibility Award

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the intent to fund fiscal year (FY) 2004 funds for a cooperative agreement program with the Government of Rwanda's Treatment and Research AIDS Center (TRAC) to improve national surveillance capacity and the planning, implementation and evaluation of HIV/AIDS prevention, care and treatment programs, including antiretroviral therapy (ART) to eligible persons living with HIV/AIDS (PLWHA). The Catalog of Federal Domestic Assistance number for this program is 93.941.

B. Eligible Applicant

Assistance will be provided only to the Rwandan government entity Treatment and Research AIDS Center (TRAC).

TRAC is the only appropriate and qualified organization to fulfill the requirements set forth in this announcement because of its unique mandate and demonstrated capacity to successfully coordinate national HIV/AIDS programs. The Minister of State for AIDS and other major epidemics works with TRAC to coordinate the Ministry of Health (MOH) response to HIV/AIDS. Rwanda's TRAC was established in 2001 with a mandate to coordinate all national HIV/AIDS clinical prevention, care and treatment programs; priority was placed on improving the care and treatment of PLWHA, expanding VCT services, PMTCT of HIV, care and treatment for STDs, and epidemiologic surveillance of HIV/AIDS. TRAC is the only Rwandan

government institution with this mandate.

TRAC also has the ability to financially and technically oversee the project. TRAC's current structure consists of a PMTCT/VCT unit, a surveillance unit, a STI/HIV care and treatment unit, and an informatics unit. The performance of these units directly impacts national-level decisions for the coordination of services related to HIV/AIDS and other major epidemics.

CDC has successfully worked in partnership with TRAC in the past. In fiscal year 2003, CDC/GAP's substantial financial, technical and logistical support resulted in the development of surveillance capacity at TRAC, culminating in the national dissemination of the first HIV sentinel surveillance results since 1998.

TRAC's unique mandate within the Government of Rwanda, its ability to technically and financially oversee this program, and its history of working successfully with CDC are the basis for TRAC being the only entity eligible for this program announcement.

C. Funding

Approximately \$500,000 is available in FY 2004 to fund this award. It is expected that the award will begin on or before September 1, 2004, and will be made for a 12-month budget period within a project period of up to 1 year. Funding estimates may change.

D. Where To Obtain Additional Information

For general comments or questions about this announcement, contact: Technical Information Management, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341-4146, Telephone: 770-488-2700.

For technical questions about this program, contact: Valerie Koscelnik, Project Officer, U.S. Embassy, 377 Boulevard de la Revolution, B.P. 28, Kigali, Rwanda, Telephone: 250-57-54-73, E-mail: KoscelnikVX@state.gov.

Dated: July 22, 2004.

William P. Nichols,

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

[FR Doc. 04-17215 Filed 7-28-04; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

HIV/AIDS Surveillance in VCT/PMTCT Centers in Haiti Including Support of Annual Sero-Survey of Pregnant Women

Announcement Type: New.

Funding Opportunity Number: 04274.

Catalog of Federal Domestic

Assistance Number: 93.941.

Key Dates:

Application Deadline: August 30, 2004.

I. Funding Opportunity Description

Authority: This program is authorized under Sections 307 and 317(k)(2) of the Public Health Service Act, [42 U.S.C. Sections 242l and 247b(k)(2)], as amended.

Purpose: The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 2004 funds for a cooperative agreement to: (1) Reinforce the capacity of Ministry of Health (MOH) staff to participate in and conduct population-based surveys; and (2) to establish a definitive United States Government (USG) program health information system (HIS) to monitor existing Voluntary Counseling and Testing/Prevention of Mother to Child Transmission (VCT/PMTCT) programs and clinical care, and continue generating monthly facility-based reports.

The purpose of this cooperative agreement is to provide a funding mechanism to provide support to a public or private non-profit organization, based in Haiti, that has proven capacity to provide the technical assistance needed to lead these two surveillance-based initiatives.

The USG seeks to reduce the impact of HIV/AIDS in specific countries in sub-Saharan Africa and the Caribbean through a 15 billion dollar U.S. presidential initiative known as the President's Emergency Plan for AIDS Relief (PEPFAR). The Global AIDS Program (GAP) of the U.S., CDC, Department of Health and Human Services (HHS), is a lead partner in this initiative.

The PEPFAR encompasses HIV/AIDS activities in more than 75 countries and focuses on 14 countries in Africa and the Caribbean to develop comprehensive and integrated prevention, care and treatment programs. Within five years, the 14 countries will: Treat more than two million HIV-infected persons with

effective combination anti-retroviral therapy; will care for ten million HIV-infected persons and those orphaned by HIV/AIDS; and prevent seven million new infections.

Targeted countries are among those with the most severe epidemics and the highest number of new infections. They also represent countries where the potential for impact is greatest and where USG agencies are already active. Haiti is one of these targeted countries.

Measurable outcomes of this program will be in alignment with the following performance goal for the PEPFAR to prevent seven million new HIV infections. The initiative will support critical prevention efforts by supporting VCT and PMTCT sites, enabling them to continue to perform.

This initiative is a coordinated effort led by the Office of the Global AIDS Coordinator at the Department of State, and involves various U.S. Federal Government agencies, including, the Department of State, HHS, the Department of Defense, and the U.S. Agency for International Development (USAID).

Activities: Awardee activities for this program are as follows:

1. Reinforce capacity of MOH staff to participate in and conduct population-based surveys.

a. Train 50 MOH personnel in the technical aspects of conducting an Antenatal Clinic (ANC) sero-survey through planning and execution of the fifth annual sero-survey, to include, but not limited to: identification of sites; training of data collection teams and site managers; provision of commodities and equipment; elaboration of Standard Operating Procedures (SOPs) for sample collection; subcontracting for sample processing; transportation of samples to a central lab; setting up data entry screens; and analysis of survey data.

b. Provide operational support to the ANC sero-survey sites that are not a part of the official VCT/PMTCT site network to enable them to continue to perform.

c. Initiate procurement actions for the fifth ANC sero-survey (projected start date: May 2005).

2. Establish a definitive USG program HIS to monitor existing VCT/PMTCT programs and clinical care, and continue generating monthly facility-based reports.

a. Integrate PEPFAR indicators into existing surveillance; and modify procedures manuals, data collection tools and reports.

b. Provide additional computer equipment for 15 institutions (excluding Centers of Excellence covered by University of Technical Assistant Project [UTAP]).