Washington, DC 20405, telephone 202–501–1538.

[FR Doc. 96–18221 Filed 7–17–96; 8:45 am]

BILLING CODE 6820–24–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Health Care Policy and Research

Notice of Health Care Policy and Research; Special Emphasis Panel Meeting

In accordance with section 10(a) of the Federal Advisory Committee Act (5 U.S.C., Appendix 2) announcement is made of the following special emphasis panel scheduled to meet during the month of August 1996:

Name: Health Care Policy and Research Special Emphasis Panel.

Date and Time: August 15, 1996, 8:30 a.m..

Place: DoubleTree Hotel, 1750 Rockville Pike, Conference Room TBA, Rockville, Maryland 20852. Open August 15, 8:30 a.m. to 8:45 a.m. Closed for remainder of meeting.

Purpose: This Panel is charged with conducting the initial review of grant applications proposing to develop and test quality of care measures. The projects undertaken as a result of this RFA will: 1) expand the conceptual and methodological basis for developing quality measures, and 2) produce relevant, feasible, reliable, valid, and rigorously tested sets of new quality measures for comparison across different sites.

Agenda: The open session of the meeting on August 15, from 8:30 a.m. to 8:45 a.m., will be devoted to a business meeting covering administrative matters. During the closed session, the committee will be reviewing and discussing grant applications dealing with health services research issues. In accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., Appendix 2 and 5 U.S.C., 552b(c)(6), the Administrator, AHCPR, has made a formal determination that this latter session will be closed because the discussions are likely to reveal personal information concerning individuals associated with the grant applications. This information is exempt from mandatory disclosure.

Anyone wishing to obtain a roster of members or other relevant information should contact Linda Blankenbaker, Agency for Health Care Policy and Research, Suite 400, 2101 East Jefferson Street, Rockville, Maryland 20852, Telephone (301) 594–1437 x1603.

Agenda items for this meeting are subject to change as priorities dictate.

Dated: July 12, 1996.

Clifton R. Gaus,

Administrator.

[FR Doc. 96–18231 Filed 7–17–96; 8:45 am]

BILLING CODE 4160–90–M

Contract Review Meeting

In accordance with Section 10(a) of the Federal Advisory Committee Act (5 U.S.C. Appendix 2), announcement is made of the following advisory subcommittee scheduled to meet during the month of July 1996:

Name: Subcommittee on Quality Measurement Network (QMNet).

Date and Time: July 30–31, 1996, 9:00 a.m.–5:00 p.m..

Place: Agency for Health Care Policy and Research, Executive Office Center, 6th Floor Conference Room, 2101 East Jefferson Street, Rockville, Maryland 20852.

This meeting will be closed to the public.

Purpose: The Subcommittee's charge is to provide, on behalf of the Health Care Policy and Research Contracts Review Committee, advice and recommendations to the Secretary and to the Administrator, Agency for Health Care Policy and Research (AHCPR), regarding the scientific and technical merit of contract proposals submitted in response to a specific Request for Proposals regarding ''QMNet'' published in the Commerce Business Daily on May 14, 1996. The purpose of this contract is to build a more comprehensive, publicly accessible quality measurement resource that emphasizes a public-private partnership approach.

Agenda: The session of the Subcommittee will be devoted entirely to the technical review and evaluation of contract proposals submitted in response to a specific Request for Proposals. The Administrator, AHCPR, has made a formal determination that this meeting will not be open to the public. This is necessary to protect the free exchange of views and avoid undue interference with Committee and Department operations, and safeguard confidential proprietary information and personal information concerning individuals associated with the proposals that may be revealed during the sessions. This is in accordance with section 10(d) of the Federal Advisory Committee Act, 5 U.S.C. Appendix 2, Department regulations, 45 CFR 11.5(a)(6), and procurement regulations, 48 CFR 315.604(d).

Anyone wishing to obtain information regarding this meeting should contact Al Deal, Office of Management, Contracts Management Staff, Agency for Health Care Policy and Research, Executive Office Center, 2101 East Jefferson Street, Suite 601, Rockville, Maryland, 20852, (301) 594–1445.

Dated: July 12, 1996.

Clifton R. Gaus,

Administrator.

[FR Doc. 96–18232 Filed 7–17–96; 8:45 am]

BILLING CODE 4160–90–M

Centers for Disease Control and Prevention

[30 DAY–16]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request more information on these projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer at (404) 639–7090. Send written comments to Wilma Johnson, CDC Reports Clearance Officer, 1600 Clifton Road, MS–D24, Atlanta, GA 30333. Written comments should be received within 30 days of this notice.

The following requests have been submitted for review since the last publication date on July 3, 1996.

Proposed Projects

1. Cost and Impact of Illnesses and Injuries Associated with Child Care Attendance—New—This is a longitudinal follow-up telephone survey of parents of children attending large (15 children/center) day care centers and family day care homes (7 children) in order to (1) determine the extent to which the size of day care centers are associated with the rates of illnesses and injuries for children attending day care; (2) to estimate the costs of illnesses and injuries for children attending small and large day care centers; (3) to compare the health of the family members of children attending small verses large day care centers; and (4) to estimate the costs of illnesses for the family members of children attending small versus large day care centers. The analyses of the proposed survey data will allow CDC to evaluate the relative costs and benefits of attending small as opposed to large day care centers. The information will provide timely and valuable data to policy makers, medical professionals and scientists.

Respondents	No. of respondents	No. of responses/respondents	Avg. burden/response (in hours)
Parents (Monthly)	272	1	0.583
Parents (Annual)	272	11	0.167

Respondents	No. of respondents	No. of responses/respondents	Avg. burden/response (in hours)
Child care provider	70	1	0.5

The total annual burden is 693. Send comments to the CDC, Desk Officer; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503.

2. National Survey of Ambulatory Surgery—(0920–0334)—Extension—The National Survey of Ambulatory Surgery (NSAS) has been conducted annually since 1994 by the National Center for Health Statistics, CDC. It is the only source of clinical information nationally on utilization of ambulatory surgery. It complements surgery data obtained in another NCHS survey, the National Hospital Discharge Survey (NHDS), which provides annual data concerning the nation's use of inpatient medical and surgical care provided in short-stay, non-Federal hospitals. These NHDS data have been used for more than two decades to analyze the types of surgical treatment provided to hospital inpatients. However, due to advances in medical technology, many surgical treatments and diagnostic procedures are now provided in ambulatory settings which are outside the scope of the NHDS. The NSAS, a national probability sample of hospital-based and freestanding ambulatory surgery centers in the U.S., has been designed to provide valid data about medical and surgical care received in ambulatory surgery locations. Data for the NSAS are collected annually on approximately 120,000 ambulatory surgery cases. The data items which are abstracted from medical records are the basic core of variables from the Uniform Hospital Discharge Data Set (UHDDS) as well as surgery times, total charges and information on anesthesia. These NSAS data will be used for a variety of planning, administrative, and evaluation activities by government, professional, scientific, academic, and commercial institutions. Data collected through the NSAS are essential for evaluating health status of the population, for the planning of programs and policy to elevate the health status of the Nation, for studying morbidity trends, and for research activities in the health field. For example, selected government agencies are interested in specific NSAS data to track the incidence of selected ambulatory procedures, e.g., estimates of tubal sterilization, estimates of endoscopies and related digestive tract procedures, and estimates of endoscopic removal of pre-cancerous polyps. In addition, NSAS data will provide annual updates for numerous tables in the Congressionally-mandated NCHS report, Health, United States.

Respondents	No. of responses	No. of responses/respondent	Avg. burden/response (in hrs.)
Induction	40	1	1.5
Out-of-scope Verification	140	1	0.066
Sample Listing Sheet:			
ASC Personnel	224	12	0.5
Census Personnel	267	12	0
Medical Abstract:			
ASC Personnel	324	250	0.2
Census Personnel	167	250	0.03333
Annual Update	491	1	0.083
Quality Control	245	20	0.0333

The total annual burden is 19,209. Send comments to the CDC, Desk Officer; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503.

Dated: July 12, 1996.

Wilma G. Johnson,

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

[FR Doc. 96–18237 Filed 7–17–96; 8:45 am]

BILLING CODE 4163–18–P

Food and Drug Administration

[Docket No. 96F–0242]

Ciba-Geigy Corp.; Filing of Food Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that Ciba-Geigy Corp. has filed a petition proposing that the food additive regulations be amended to provide for the safe use of perfluoroalkyl substituted phosphate ester acids, ammonium salts, formed by the reaction of 2,2-bis[(γ,ω-perfluoroC_{4-20}alkylthio)methyl]-1,3-propanediol, polyphosphoric acid and ammonium hydroxide as an oil and water repellant for paper and paperboard intended for use in contact with food.

DATES: Written comments on petitioner's environmental assessment by August 19, 1996.

ADDRESSES: Submit written comments to the Dockets Management Branch (HFA–305), Food and Drug Administration, 12420 Parklawn Dr., rm. 1–23, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: Vir D. Anand, Center for Food Safety and Applied Nutrition (HFS–216), Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202–418–3081.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (sec. 409(b)(5) (21 U.S.C. 348(b)(5))), notice is given that a food additive petition (FAP 6B4513) has been filed by Ciba-Geigy Corp., P.O. Box 18300, Greensboro, NC 27419–8300. The petition proposes to amend the food additive regulations in § 176.170 *Components of paper and paperboard in contact with aqueous and fatty foods* (21 CFR 176.170) to provide for the safe use of perfluoroalkyl substituted phosphate ester acids, ammonium salts, formed by the reaction of 2,2-bis[(γ,ω-