Name of committee	Date of expiration
National Mammography Quality Assurance Advisory Committee	July 6, 1997
Nonprescription Drugs Advisory Committee	August 27, 1997
Advisory Committee on Special Studies Re- lating to the Possible Long-Term Health Ef- fects of Phenoxy Her- bicides and Contami- nants	December 2, 1997
Food Advisory Commit- tee	December 18, 1997
Vaccines and Related Biological Products Advisory Committee	December 31, 1997
Advisory Committee for Pharmaceutical Science (Formerly Generic Drugs Advi- sory Committee)	January 22, 1998

FOR FURTHER INFORMATION CONTACT: Donna M. Combs, Committee Management Office (HFA–306), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–443– 2765.

Dated: February 9, 1996. Michael A. Friedman, *Deputy Commissioner for Operations.* [FR Doc. 96–3734 Filed 2–20–96; 8:45 am] BILLING CODE 4160–01–F

Health Care Financing Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing Administration, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summaries of proposed collections for public comment. Interested persons are invited to send comments regarding the 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: New collection; Title of Information Collection: Federally Qualified Health Center (FQHC) Survey; Form No.: HCFA–R–188; Use: This survey is needed and will be used by HCFA to evaluate the FQHC Medicare benefit. Respondents will be all Medicare certified FQHC's. Frequency: On occasion; Affected Public: Not-forprofit institutions, and business or other for-profit; Number of Respondents: 1,489; Total Annual Responses: 1,489; Total Annual Hours Requested: 496.

To request copies of the proposed paperwork collections referenced above, call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections should be sent within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Financial and Human Resources, Management Planning and Analysis Staff, Attention: Louis Blank, Room C2–26–17, 7500 Security Boulevard, Baltimore, Maryland 21244– 1850.

Dated: February 12, 1996.

Kathleen B. Larson,

Director, Management Planning and Analysis Staff, Office of Financial and Human Resources. [FR Doc. 96–3745 Filed 2–20–96; 8:45 am]

BILLING CODE 4120-03-P

Information Collection Requirements Submitted for Public Comment: Submission for Office of Management and Budget (OMB) Review

AGENCY: Health Care Financing Administration, HHS.

In compliance with the Paperwork Reduction Act (44 U.S.C. 3501 et seq.), this notice announces that the Information Collection Requirement abstracted below has been submitted to the Office of Management and Budget (OMB) for review and comment. Interested persons are invited to send comments regarding the 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 budget.

1. Type of Information Collection Request: New; Title of Information Collection: Medicare Carrier Provider/ Supplier Enrollment Application; Form No.: HCFA-R-186; Use: This information is needed to enroll providers/suppliers by identifying them, verifying their qualifications and eligibility to participate in Medicare, and to price and pay their claims correctly. Frequency: Initial Application; Affected Public: Business or other for profit, Federal Government; Number of Respondents: 160,000; Total Annual Hours Requested: 240,000.

To request copies of the proposed paperwork collection referenced above, E-mail your request, including your address, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collection should be sent within 30 days of this notice directly to the OMB Desk Officer designated at the following address: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: February 14, 1996.

Kathleen B. Larson,

Director, Management Planning and Analysis Staff.

[FR Doc. 96–3862 Filed 2–20–96; 8:45 am] BILLING CODE 4120–03–P

Privacy Act of 1974; Systems of Records

AGENCY: Department of Health and Human Services (HHS), the Health Care Financing Administration (HCFA). **ACTION:** Notice of proposed new routine use for existing and future systems of records.

SUMMARY: HCFA proposes revising the systems notices for all of its existing and future systems of records to include a routine use to allow for the disclosure of information, without the individual's consent, to the Social Security Administration (SSA) in order to enable SSA to assist HCFA in the implementation and maintenance of the Medicare and Medicaid programs.

This new routine use is necessary due to the establishment of SSA as a separate agency which is not a part of HHS. Prior to March 31, 1995, SSA and HCFA were components within HHS and, as such, enjoyed the benefits of the special relationship afforded members of the same Department. One of these benefits was the ability to disclose and exchange data under Section (b)(1) of the Privacy Act as amended.

With the enactment of Pub. L. 103– 296 on March 31, 1995, SSA became an independent agency. This has caused SSA and HCFA to examine their relationship under the law. This law allowed the two agencies to continue to disclose information under Section (b)(1) of the Privacy Act as amended for 1 year after enactment.

As a result of the change in SSA's status, HCFA is proposing the addition of a global routine use to all of its current and future Privacy Act systems of records listed in Attachment 1. This routine use will permit the disclosure of information to SSA under Section (b)(3) of the Privacy Act as amended.

EFFECTIVE DATES: HCFA filed an altered system report with the Chairman of the Committee on Government Reform and Oversight of the House of Representatives, the Chairman of the Committee on Governmental Affairs of the Senate, and the Administrator, Office of Information and Regulatory Affairs, Office of Management and Budget (OMB), on February 14, 1996. To

ensure that all parties have adequate time in which to comment, the new system of records, including routine uses, will become effective 40 days from the publication of this notice or from the date the report was submitted to OMB and the Congress, whichever is later, unless HCFA receives comments which require alterations to this notice. ADDRESSES: The public should address comments to Mr. Richard DeMeo, HCFA Privacy Act Officer, Associate Administrator for External Affairs, C2-01-20, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. Comments received will be available at this location.

FOR FURTHER INFORMATION CONTACT: Mr. Nelson Berry, Director, Information Liaison Branch, Office of Health Care Information Systems, Bureau of Data Management and Strategy, HCFA, N3– 13–15, 7500 Security Boulevard, Baltimore, Maryland 21244–1850, Telephone (410) 786–0182.

SUPPLEMENTARY INFORMATION: We are publishing this notice to inform the public of our intent to continue sharing data with SSA but to do so under

Section (b)(3) of the Privacy Act which allows for disclosure of information for a routine use. This new routine use is required by SSA's change in status to an independent agency. This routine use will read as follows:

To the Social Security Administration for their assistance in the implementation of HCFA's administration of the Medicare and Medicaid programs.

This proposed new routine use is consistent with the relevant provisions of the Privacy Act, namely, 5 U.S.C. 552a(a)(7), 552a(b)(3), and 522a(e)(4)(D). Legal authority to release these data under this routine use and others previously published is the Privacy Act (5 U.S.C. Section 552a), section 1106(a) of the Social Security Act (42 U.S.C. 1306(a)), and 42 CFR part 401, subpart B. Because this proposed change will significantly alter the system, we are preparing a report of altered system of records under 5 U.S.C. 552a(r).

Dated: February 9, 1996.

Bruce C. Vladeck,

Administrator, Health Care Financing Administration.

ATTACHMENT 1

Number	Title
09–70–0005 09–70–0019	National Claims History (NCH), HHS/HCFA/BDMS. Actuarial Sample Hospital Stay Record Study, HHS/
00 70 0000	HCFA/BDMS.
09–70–0020	Acturial Sample of Supplementary Medical Insurance Payments, HHS/HCFA/OACT.
09-70-0022	Municipal Health Services Program, HHS/HCFA/ORD.
09–70–0029	Evaluation of Medicare Competition Demonstrations, HHS/HCFA/ORD.
09–70–0030	National Long-Term Care Survey Followup, HHS/ HCFA/ORD.
09–70–0033	Person Level Medicaid Data System (aka tape-to-tape), HHS/HCFA/ORD.
09–70–0034	Evaluation of Social/Health Maintenance Organization (HMO) Demonstrations, HHS/HCFA/ORD.
09-70-0035	Aftercare Evaluation System (AES), HHS/HCFA/ORD.
09–70–0036	Evaluation of Competitive Bidding for Durable Medical Equipment Demonstration, HHS/HCFA/ORD.
09–70–0038	Evaluation of the Tax Equity and Fiscal Responsibility Act of 1982 (TEFRA) Health Maintenance Organiza- tion (HMO) and Competitive Medical Plan (CMP) Program, HHS/HCFA/ORD.
09–70–0039	Evaluation of Medicare Alzheimer's Disease Dem- onstration, HHS/HCFA/ORD.
09–70–0040	Health Care Financing Administration Organ Transplant Data File, HHS/HCFA/BDMS.
09–70–0041	Evaluation of the OBRA 87 Medicare Payment of Influ- enza Vaccination Demonstration, HHS/HCFA/ORD.
09–70–0042	Medicare Cancer Registry Record System (SEER), HHS/HCFA/ORD.
09–70–0044	Demonstration and Evaluation of the Medicare Insured Group (MIG) Model, HHS/HCFA/ORD.
09–70–0045	Evaluation of the Arizona Health Care Cost Contain- ment And Long Term Care Systems Demonstration, HHS/HCFA/ORD.
09–70–0046	Home Health Quality Indicator System (HHQUIS), HHS/HCFA/ORD.
09–70–0047	HCFA Medicare Mortality Predictor Data File, HHS/

-70–0047 HCFA Medicare Mortality Predictor Data File, HHS/ HCFA/ORD.

	ATTACHMENT 1—Continued
Number	Title
09–70–0048 09–70–0049	Monitoring of Home Health Agency Prospective Pay ment Demonstration, HHS/HCFA/ORD. Evaluation of the Home Health Agency (HHA), Pro-
09–70–0050	spective Payment Demonstration, HHS/HCFA/ORD. The Medicare/Medicaid Multi-State Case-Mix And Qua ity Data Base for Nursing Home Residents, HHS HCFA/ORD.
09–70–0051	Monitoring of the Home Health Agency Prospectiv Payment Demonstration, HHS/HCFA/ORD.
09–70–0052	Post-Hospitalization Outcomes Studies, HHS/HCF/ ORD.
09–70–0053	The Medicare Beneficiary Health Status Registry Pilo HHS/HCFA/ORD.
09–70–0054	Evaluation of the United Mine Workers of Americ Health and Retirement Funds Medicare Part B Cap tation Demonstration, HHS/HCFA/ORD.
09–70–0055	Implementation and Evaluation of the Staff-Assiste Home Dialysis Demonstration, HHS/HCFA/ORD.
09–70–0056	Evaluation of the Medicaid Expansion Demonstration: HHS/HCFA/ORD.
09–70–0057	Evaluation of the Medicaid Extension of Eligibility T Certain Low Income Families Not Otherwise Qual fied to Receive Medicaid Benefits Demonstration HHS/HCFA/ORD.
09–70–0058	Evaluation of the Medicare SELECT Program, HHS HCFA/ORD.
09–70–0059	The Medicaid Necessity, Appropriateness, and Ou comes of Care Study, HHS/HCFA/ORD.
09–70–0061	Evaluation of the Medicare Case management Den onstration, HHS/HCFA/ORD.
09–70–0062	Medicare Cataract Surgery Alternate Payment Den onstration Data Base, HHS/HCFA/ORD.
09–70–0063	Evaluation of the Medicaid Demonstration for Improvin Access to Care for Substance Abusing Pregnal Women, HHS/HCFA/ORD.
09–70–0064	Individuals Authorized Access to the Health Care F nancing Administration (HCFA) Data Center, HHS HCFA/BDMS.
09–70–0066	Evaluation of, and External Quality Assurance for, Th Community Nursing Organization (CNO) Demonstra- tion, HHS/HCFA/ORD.
09–70–0501 09–70–0502	Carrier Medicare Claims Records, HHS/HCFA/BPO. Health Insurance Master Record (Revision Pending HHS/HCFA/BPO.
09–70–0503	Intermediary Medicare Claims Records, HHS/HCF/ BPO.
09–70–0504	Beneficiary Part A and B Uncollectible Overpaymer File, HHS/HCFA/BPO.
09–70–0505	Supplemental Medical Insurance (SMI) Accounting Co lection and Enrollment System (SPACE), HHS HCFA/BPO.
09–70–0507 09–70–0508	Health Insurance Utilization Microfilm, HHS/HCFA/BPC Reconsideration and Hearing Case Files (Part A) Hos pital Insurance Program HHS/HCFA/BPO.
09–70–0509	Medicare Beneficiary Correspondence Files, HHS HCFA/BPO.
09–70–0512	Review and Fair Hearing Case Files—Supplemental Medical Insurance Program, HHS/HCFA/BPO.
09–70–0513	Explanation of Medicare Benefit Records, HHS/HCF/ BPO.
09–70–0515 (Incorrectly published 09–07– 0515)	Resident Assessment System and Data Base for Nursing Home Residents, HHS/HCFA/HSQB.
09–70–0516	Medicare Physician Supplier Master File, HHS/HCF/ BPO.
09–70–0517	Physician/Supplier 1099 File (Statement for Recipien of Medical and Health Care Payments), HHS/HCF/ BPO.
09–70–0518	Medicare Clinic Physician Supplier Master File, HHS HCFA/BPO.

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Number	Title
09–70–0520	End State Renal Disease (ESRD) Program Manage ment and Medical Information System (PMMIS) HHS/HCFA/BDMS.
09–70–0522	Billing and Collection Master Record System, HHS HCFA/BPO.
09–70–0524	Intern and Resident Information System, HHS/HCFA BPO.
09–70–0525	Medicare Physician Identification and Eligibility System (MPIES), HHS/HCFA/BPO.
09–70–0526 09–70–0527	Commong Working File (CWF), HHS/HCFA/BPO. HCFA Utilization Review Investigatory Files, HHS HCFA/BPO.
09–70–0529	Medicare Supplier Identification File, HHS/HCFA/BPO.
09–70–1511	Physical Therapists in Independent Practice (Individ uals), HHS/HCFA/HSQB.
09–70–1512	Peer Review Organization (PRO) Data Management In formation System (PDMIS), HHS/HCFA/HSQB.
09–70–1514	HCFA Medicare Severity of Illness Data File, HHS HCFA/HSQB.
09–70–1515	Resident Assessment System and Data Base for Nurs ing Home Residents, HHS/HCFA/HSQB.
09–70–2003	Completion of State Medicaid Quality Control (MQC Reviews, HHS/HCFA/MB.
09–70–2006	Income and Eligibility Verification for Medicaid Eligibility Quality Control (MEQC) Reviews, HHS/HCFA/MB.
09–70–3001	Record of Individuals Authorized Entry to HCFA Build ings via A Card Key Access System, HHS/HCFA OFHR.
09–70–3002	Health Care financing Administration (HCFA) Employee Building Pass Files, HHS/HCFA/OFHR.
09–70–3003	Health Care Financing Administration (HCFA) Cor respondence Handling and Processing System, HHS HCFA/OFHR.
09–70–4001	Group Health Plan (GHP) System, HHS/HCFA/OPHC.
09–70–4002	Beneficiary Inquiry Tracking System, HHS/HCFA OPHC.
09–70–4003	Medicare HMO/CMP Beneficiary Reconsideration System (MBRS), HHS/HCFA/OPHC.
09–70–5001	Medicare Hearings and Appeals System (MHAS), HHS HCFA/AAO.
09–70–6001	Medicaid Statistical Information System (MSIS), HHS HCFA/BDMS.
09–70–6002	Current Beneficiary Survey (CBS), HHS/HCFA/OACT.
09–70–9001	Health Care Financing Administration (HCFA) Correspondence and Assignment Tracking and Contro System (CATCS), HHS/HCFA/OEO.

ATTACHMENT 1—Continued

[FR Doc. 96–3827 Filed 2–20–96; 8:45 am] BILLING CODE 4120–03–M

National Institutes of Health

Notice of a Closed Meeting of the Office of AIDS Research Advisory Council

Pursuant to sec. 10(d) of the Federal Advisory Committee Act (FACA), as amended (Title 5 U.S.C. Appendix 2), notice is hereby given of the meeting of the Office of AIDS Research Advisory Council (OARAC) of March 13, 1996, at the Doubletree Hotel, 1750 Rockville Pike, Rockville, Maryland. In accordance with the provisions set forth in sec. 552b(c)(9), Title U.S.C. and sec. 10(d) of FACA, this meeting of the OARAC will be closed to the public.

The NIH Revitalization Act of 1993 authorized the OARAC to provide expert advice to the Director of the Office of AIDS Research. The meeting will be closed because information of an administrative confidential nature involving budget and program priorities from the NIH AIDS Research Evaluation Working Group will be discussed with the OARAC. Issues related to peer review and the process used to select projects for funding will also be discussed. Premature disclosure of this information is likely to significantly frustrate implementation of the NIH AIDS Research Program.

Further information concerning the OARAC meeting may be obtained from Jeannette R. De Lawter, Program Analyst, Office of AIDS Research, National Institutes of Health, Building 31, Room 4B54, 9000 Rockville Pike, Bethesda, MD 20892, Phone (301) 402– 3357, Fax (301) 402–3360.

Date: February 15, 1996. Susan K. Feldman,

Committee Management Officer, NIH.

[FR Doc. 96-3881 Filed 2-20-96; 8:45 am] BILLING CODE 4140-01-M

National Cancer Institute; Notice of Meeting

Notice is hereby given of the meeting of the National Cancer Institute Board of Scientific Advisors Cancer Centers Program Working Group, February 21, 1996 at the Hyatt Regency Bethesda,