

in which the community organization is located and will provide primary health care services for:

- a. A number of years equal to the number of years for which the scholarship is provided, or for a period of 2 years, whichever period is greater; or
- b. Such greater period of time as the individual and the community organization may agree.
2. The individual agrees, while enrolled in a health professions school as a full-time student, to maintain an acceptable level of academic standing at the school (as determined by the school in accordance with regulations issued by the Secretary pursuant to section 338A (f)(1)(B) (iii) of the PHS Act);
3. The individual and the community organization agree that the scholarship:
 - a. Will be expended only for tuition expenses, other reasonable educational expenses, reasonable living expenses incurred while in attendance at the school, and payment to the individual of a monthly stipend of not more than the amount authorized for NHSC scholarship recipients under section 338A(g)(1)(B) of the PHS Act; and
 - b. Will not, for any year of such attendance for which the scholarship is provided, be in an amount exceeding the total amount required for the year for the purposes indicated in paragraph (a) above.
4. The individual agrees to meet the educational and certification or licensure requirements necessary to become a primary care physician, certified nurse practitioner, certified nurse midwife, or physician assistant in the State in which the individual is to practice under the contract; and,
5. The individual agrees that, in providing primary health care pursuant to the scholarship, he/she:
 - a. Will not, in the case of an individual seeking care, discriminate on the basis of the ability of the individual to pay for such care or on the basis that payment for such care will be made pursuant to the programs established in Titles XVIII (Medicare) or XIX (Medicaid) of the Social Security Act; and,
 - b. Will accept assignment under section 1842(b)(3)(B)(ii) of the Social Security Act for all services for which payment may be made under Part B of Title XVIII, and will enter into an appropriate agreement with the State agency that administers the State plan for medical assistance under Title XIX to provide service to individuals entitled to medical assistance under the plan.

Evaluation Criteria

For new and competing continuation grants the following criteria will be used to evaluate applications: (a) The appropriateness of the description and documentation of the State's need for the grant; (b) The adequacy of the State's methodology for selecting community organizations to participate in the grant and the overall impact that the community organizations' participation will have on addressing the State's primary health care health professional needs; (c) The extent to which the State's and community's recruitment plans are consistent with the State's plans for meeting the needs of the community's primary care system; (d) The appropriateness and documentation of community commitment with the grant; (e) The extent to which the CSP will coordinate with other State programs designed to alleviate need in HPSAs; (f) The appropriateness of the State's plan to administer and manage the grant, including the credentials of the employees to be involved and their relevant program experience; (g) The adequacy of the State's proposed procedure for monitoring the scholar's fulfillment or breach of the CSP contract; (h) The appropriateness of the State's plans for providing waivers and suspensions; (i) The soundness of the budget and the budget justification for assuring effective utilization of grant funds; (j) The adequacy of a State's assurance that sufficient contributions are available; (k) The reasonableness of the scholarship levels proposed given the cost of health professions programs and the anticipated State and community resources for scholarship funding; (l) The adequacy of the description of the State's proposed ratio and costs of scholarships for both urban and rural federally designated HPSAs; and (m) The validity, reliability, and methodological soundness of the State applicant's internal monitoring and evaluation plan for grants.

Other Grant Information

The CSP is subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100, which allows States the option of setting up a system for reviewing applications from within their States for assistance under certain Federal programs. The application package for this program will include a list of States with review systems and the single point of contact (SPOC) in each State for the review. Applicants (other than federally-recognized Indian tribal governments) should contact their State SPOCs as early as possible to alert them to the

prospective applications and receive any necessary instructions on the State process. The due date for State process recommendations is 60 days after the application deadline. The BPHC does not guarantee that it will accommodate or explain its response to State process recommendations received after that date. Grants will be administered in accordance with HHS regulations in 45 CFR part 92. The OMB Catalog of Federal Domestic Assistance number for this program is 93.931.

Dated: March 24, 1997.

Claude Earl Fox,

Acting Administrator.

[FR Doc. 97-7844 Filed 3-27-97; 8:45 am]

BILLING CODE 4160-15-P

Availability of Funds To Provide Technical and Non-Financial Assistance to Federally Funded Migrant Health Centers on Environmental and Occupational Health Services for Migrant and Seasonal Farmworkers

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice of availability of funds, CFDA #: 93.129.

SUMMARY: The Health Resources and Services Administration (HRSA) anticipates that approximately \$305,000 will be available in FY 1997 to support two cooperative agreements for the purpose of providing technical and non-financial assistance to Migrant Health Centers (MHCs) receiving funding under Section 330(g) of the Public Health Service (PHS) Act. These cooperative agreements will provide environmental and occupational health services to migrant and seasonal farmworkers (MSFWs) and their families. These cooperative agreements will be awarded under section 330(k) of the PHS Act (42 U.S.C. 254b(k)) with a budget period of one year and a project period of up to three years.

The Public Health Service (PHS) is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS-led national activity for setting health priorities. These cooperative agreements are related to the objectives cited for special populations, particularly socio-economically depressed minorities and other underserved populations, which constitute a significant portion of the migrant and seasonal farmworker (MSFW) population. Potential applicants may obtain a copy of *Healthy People 2000* (Full Report; Stock No. 017-001-00474-0) or *Healthy People*

2000 (Summary Report; Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325 (telephone 202/783-3238). Applicants should also request copies of the Recommendations of the National Advisory Council on Migrant Health through the Migrant Health Program (MHP), Bureau of Primary Health Care, 4350 East/West Hwy., Bethesda, MD 20814.

The PHS strongly encourages all cooperative agreement recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. In addition, Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of a facility) in which regular or routine education, library, day care, health care or early childhood development services are provided to children.

DATES: Applications are due April 28, 1997. Applications will be considered to have met the deadline if they are: (1) Received on/or before the deadline date; or (2) postmarked on/or before the deadline date and received in time for submission to the review committee. Applicants should request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or the U.S. Postal Service. Private metered postmarks are not acceptable as proof of timely mailing. Faxed copies of applications will not be accepted. Applications not received in time to be considered for review will not be considered for funding.

ADDRESSES: Application kits (PHS form 5161-1 with revised face sheets DHHS Form 424, as approved by the Office of Management and Budget (OMB) under control number 0937-0189), may be obtained from: HRSA Grants Application Center, Suite 100, 40 W. Gude Drive, Rockville, MD 20850. The telephone number is toll-free 1-888-300-HRSA (4772). The e-mail address is HRSA.GAC@IX.NETCOM.COM. Completed applications for awards for the provision of technical and other non-financial assistance to MHCs must be sent to: HRSA Grants Application Center at the above address. For information on grants management issues, please contact the Grants Management Specialist, Nancy Benson, at 301/594-4232.

FOR FURTHER INFORMATION CONTACT: For general program information and information about these technical assistance funds, contact Jack Egan, Deputy Director, MHP, 4350 East-West

Highway, Room 7-4A2, Bethesda, MD 20814, (301) 594-4303 (JEGAN@HRSA.DHHS.GOV) or Susan Hagler at the same address and phone number (SHAGLER@HRSA.DHHS.GOV).

SUPPLEMENTARY INFORMATION: One cooperative agreement of up to \$260,000 will be for a national resource center on environmental and occupational health issues concerning farmworkers. This resource center will respond to MHC requests for information and support in the following areas: (1) The promotion, development, and implementation of environmental and occupational health services for migrant and seasonal farmworkers, such as the detection and alleviation of unhealthful conditions, accident prevention, including pesticide exposures, and infection and parasitic disease screening and control; and (2) the development of migrant health center specific patient and provider educational and guidance materials and technical publications for farmworkers and growers, which are culturally and linguistically appropriate.

The recipient will provide technical assistance and contracts to BPHC funded Migrant Health Centers and Programs in order to alleviate and correct conditions among migrant and seasonal farmworkers and their families. This assistance should be provided in the following areas: (1) Field sanitation; (2) safe drinking water; (3) housing; (4) rodent and parasitic infestation; (5) solid waste disposal; (6) sewage treatment; and (7) other environmental areas related to health.

Examples of the technical assistance to be provided in addressing these problems include: (a) Well water testing, (b) outreach to educate growers and farmworkers on the importance of safe drinking water and handwashing facilities and proper usage procedures to prevent environmentally induced illness, (c) assistance to migrant health centers by providing expert advice on local, State, and federal laws and regulations, and (d) referral to sources of private and public funding which may be available to improve housing and environmental health conditions for migrant farmworkers.

The other cooperative agreement of up to \$45,000 will be used for a national resource center that will focus its technical assistance and training on changes to the Worker Protection Standards designed to protect agricultural workers from pesticide risks. In addition, the grantee will provide environmental and occupational health and safety information for farmworkers. Technical

assistance and training will be provided for MHC employees at national migrant health conferences and forums, enabling the staff to stay up to date on environmental/occupational health issues in the following areas: (1) Workers' Compensation Coverage for farmworkers in the 50 states and Puerto Rico; (2) the Environmental Protection Agency's Worker Protection Standards; (3) changes in legislation that will affect farmworkers' access to health care; and (4) environmental/occupational health issues that impact farmworkers.

Eligible Applicants

Eligible applicants for the technical assistance cooperative agreement are public and private nonprofit entities.

Criteria for Evaluating Applications

Applications will be evaluated and rated on the applicant's ability to meet the following criteria:

- (1) The extent to which the applicant demonstrates an adequate understanding of the environmental/occupational health needs of MSFWs;
- (2) The extent to which the applicant demonstrates a capability to serve as a resource to federally funded Migrant Health Centers/Projects to maximize collaboration, and identify and integrate resources in assisting farmworkers in addressing their environmental and occupational health needs;
- (3) Experience of the proposed project personnel in working with migrant farmworker environmental/occupational health issues;
- (4) The adequacy and appropriateness of the proposed work plan with project approaches that will support the initiation or completion of specific environmental health activities in local, State, and regional areas served by migrant health centers;
- (5) The adequacy and appropriateness of the proposed work plan in addressing specific Migrant Health Program priorities and focusing on the outcomes as well as the methodology to be employed;
- (6) Appropriateness and reasonableness of proposed budget and staffing;
- (7) Adequacy of the proposal to evaluate the outcomes of the activities proposed;
- (8) The number of entities to be served by the applicant; and
- (9) The extent to which the applicant demonstrates the capability to insure that the personnel, training, programs, materials and curricula are culturally and linguistically appropriate.

Federal Responsibilities Under Cooperative Agreements

Federal responsibilities under the cooperative agreement, in addition to the usual monitoring and technical assistance, will include: (1) Participation in the development and approval of an initial workplan, in accord with changing events in government policies and in the environmental/occupational health care environment, and modification thereof, as appropriate; (2) consultation and cooperation with the recipient regarding the recipient's preparation and dissemination of materials; (3) approval of specific studies and projects; and (4) participation in the design, planning, setting target task completion dates and final approval of work plans for activities under the cooperative agreement, including the selection of migrant health centers which will receive technical and non-financial assistance.

Other Award Information

These awards are not subject to the provision of Executive Order 12372 or the Public Health System Reporting Requirement.

Dated: March 24, 1997.

Claude Earl Fox,
Acting Administrator.

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BILLING CODE 4160-15-P

Availability of Funds for the National Health Service Corps Loan Repayment Program

AGENCY: Health Resources and Services Administration, PHS, HHS.

ACTION: Notice.

SUMMARY: The Health Resources and Services Administration (HRSA) announces that applications will be accepted for fiscal year (FY) 1997 for awards for educational loan repayment under the National Health Service Corps (NHSC) Loan Repayment Program (LRP) (Section 338B of the Public Health Service (PHS) Act).

The HRSA, through this notice, invites health professionals to apply for participation in the NHSC LRP. The HRSA estimates that approximately 664 NHSC Loan Repayment awards (465 new awards and 199 extension awards) totaling \$37 million will be made to health professionals providing primary health services.

The PHS is committed to achieving the health promotion and disease prevention objectives of *Healthy People 2000*, a PHS-led national activity for

setting health priority areas. These programs will contribute to the *Healthy People 2000* objectives by improving access to primary health care services through coordinated systems of care for medically underserved populations in both rural and urban areas. Potential applicants may obtain a copy of *Healthy People 2000* (Full Report, Stock No. 017-001-00474-01) or *Healthy People 2000* (Summary Report; Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325 (telephone 202-783-3238).

PHS strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. In addition, Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of a facility) in which regular or routine education, library, day care, health care or early childhood development services are provided to children.

ADDRESSES: Application materials may be obtained by calling or writing to: National Health Service Corps Loan Repayment Program, 2070 Chain Bridge Road, Suite 450, Vienna, Virginia 22182-2536, 1-800-221-9393 or (703) 821-8955. Completed applications must be returned to: Loan Repayment Programs Branch, Division of Scholarships and Loan Repayments, Bureau of Primary Health Care, HRSA, 4350 East-West Highway, 10th Floor, Bethesda, Maryland 20814, (301) 594-4400. The 24-hour toll-free phone number is 1-800-435-6464, and the FAX number is 301-594-4981. Applicants for the NHSC LRP will use HRSA Form 873 approved under Office of Management and Budget (OMB) Number 0915-0127.

DATES: The deadline for applications is June 30, 1997, or until all appropriated funds have been obligated, whichever occurs first. Due to limited funding, it is anticipated that all appropriated funds will be obligated prior to June 30, 1997. The volume of applications is historically three times greater than the number of contracts that can be awarded. Therefore, to receive consideration for funding, health professionals must submit an application and proof of a job offer at an approved NHSC LRP Service Site.

Applications will be considered to be on time if they are either: (1) Received on or before the deadline date; or (2) postmarked on or before the established deadline date and received in time for orderly processing. Applicants should request a legibly dated U.S. Postal

Service postmark or obtain a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks are not acceptable as proof of timely mailing. Applications received after the announced closing date will not be considered for funding.

FOR FURTHER INFORMATION CONTACT: For further program information and technical assistance, please contact Sharley L. Chen, Chief, Loan Repayment Programs Branch, HRSA/BPHC/DSLRL, at the above address, phone or FAX number.

SUPPLEMENTARY INFORMATION: Section 338B of the PHS Act (42 U.S.C. 2541-1) authorizes the Secretary to establish the NHSC LRP to help in assuring, with respect to the provision of primary health services, an adequate supply of trained primary care health professionals for the NHSC. The NHSC is used by the Secretary to provide primary health services in federally designated health professional shortage areas (HPSAs). Primary health services are services regarding family medicine, general internal medicine, general pediatrics, obstetrics and gynecology, dentistry, or mental health, that are provided by physicians or other health professionals.

Under the NHSC LRP, the Secretary will repay qualifying graduate and undergraduate educational loans incurred by primary care health professionals. For the first 2 years of full-time clinical practice at an approved site in a federally designated HPSA, the Secretary will repay up to \$25,000 per year of the educational loans of such individual. (There is a minimum 2-year service obligation.) For subsequent years of full-time clinical practice, if the NHSC LRP contract is extended, the Secretary will repay up to \$35,000 per year. Participants must use the loan repayment funds for payment of their qualifying educational loans. The Secretary shall, in addition to such payments, make payments to the individual in an amount equal to 39 percent of the total amount of loan repayments made for the taxable year involved. The 39% payment is authorized to reimburse participants for all or a part of the tax liability incurred as a result of their LRP funding. In addition to these amounts, NHSC LRP participants will receive a salary from the private or public entity which employs them while they are serving.

In an effort to assist loan repayment participants to reduce their educational debt with as little interest expense as is possible, the LRP will disburse payments to participants on an advanced basis. Three methods of