If an investigation of an alleged violation is undertaken and the compliance officer believes the integrity of the investigation may be at stake because of the presence of employees under investigation, those subjects should be removed from their current work activity until the investigation is completed (unless an internal or Government-led undercover operation is in effect). In addition, the compliance officer should take appropriate steps to secure or prevent the destruction of documents or other evidence relevant to the investigation. If the hospital determines that disciplinary action is warranted, if should be prompt and imposed in accordance with the hospital's written standards of disciplinary action.

2. Reporting. If the compliance officer, compliance committee or management official discovers credible evidence of misconduct from any source and, after a reasonable inquiry, has reason to believe that the misconduct may violate criminal, civil or administrative law, then the hospital promptly should report the existence of misconduct to the appropriate governmental authority 56 within a reasonable period, but not more than sixty (60) days 57 after determining that there is credible evidence of a violation.58 Prompt reporting will demonstrate the hospital's good faith and willingness to work with governmental authorities to correct and remedy the problem. In addition, reporting such conduct will be considered a mitigating factor by the OIG in determining administrative sanctions (e.g., penalties, assessments, and exclusion), if the reporting provider becomes the target of an OIG investigation.59

When reporting misconduct to the Government, a hospital should provide all evidence relevant to the alleged violation of applicable Federal or State law(s) and potential cost impact. The compliance officer, under advice of counsel, and with guidance from the governmental authorities, could be requested to continue to investigate the reported violation. Once the investigation is completed, the compliance officer should be required to notify the appropriate governmental authority of the outcome of the investigation, including a description of the impact of the alleged violation on the operation of the applicable health care programs or their beneficiaries. If the investigation ultimately reveals that criminal or civil violations have occurred, the appropriate Federal and State officials 60 should be notified immediately.

As previously stated, the hospital should take appropriate corrective action, including prompt identification and restitution of any overpayment to the affected payor and the imposition of proper disciplinary action. Failure to repay overpayments within a reasonable period of time could be interpreted as an intentional attempt to conceal the overpayment from the Government, thereby establishing an independent basis for a criminal violation with respect to the hospital, as well as any individuals who may have been involved.61 For this reason, hospital compliance programs should emphasize that overpayment obtained from Medicare or other Federal health care programs should be promptly returned to the payor that made the erroneous payment.62

III. Conclusion

Through this document, the OIG has attempted to provide a foundation to the process necessary to develop an effective and cost-efficient hospital compliance program. As previously stated, however, each program must be tailored to fit the needs and resources of an individual hospital, depending upon its particular corporate structure, mission, and employee composition. The statutes, regulations and guidelines of the Federal and State health insurance programs, as well as the policies and procedures of the private health plans, should be integrated into every hospital's compliance program.

The OIG recognizes that the health care industry in this country, which reaches millions of beneficiaries and expends about a trillion dollars, is constantly evolving. However, the time is right for hospitals to implement a strong voluntary compliance program concept in health care. As stated throughout this guidance, compliance is a dynamic process that helps to ensure that hospitals and other health care providers are better able to fulfill their commitment to ethical behavior, as well as meet the changes and challenges being imposed upon them by Congress and private insurers. Ultimately, it is the OIG's hope that a voluntarily created compliance program will enable hospitals to meet their goals, improve the quality of patient care, and substantially reduce fraud, waste and abuse, as well as the cost of health care to Federal, State and private health

Dated: February 11, 1998.

June Gibbs Brown,

Inspector General.

[FR Doc. 98–4399 Filed 2–20–98; 8:45 am]

BILLING CODE 4150-04-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General

Program Exclusions: January 1998

AGENCY: Office of Inspector General, HHS.

ACTION: Notice of program exclusions.

During the month of January 1998, the HHS Office of Inspector General imposed exclusions in the cases set forth below. When an exclusion is imposed, no program payment is made to anyone for any items or services (other than an emergency item or service not provided in a hospital emergency room) furnished, ordered or prescribed by an excluded party under

⁵⁶ I.e., Federal and/or State law enforcement having jurisdiction over such matter. Such governmental authority would include DOJ and OIG with respect to Medicare and Medicaid violations giving rise to causes of actions under various criminal, civil and administrative false claims statutes.

⁵⁷To qualify for the "not less than double damages" provision of the False Claims Act, the report must be provided to the Government within thirty (30) days after the date when the hospital first obtained the information. 31 U.S.C. 3729(a).

⁵⁸ The OIG believes that some violations may be so serious that they warrant immediate notification to governmental authorities, prior to, or simultaneous with, commencing an internal investigation, e.g., if the conduct: (1) is a clear violation of criminal law; (2) has a significant adverse effect on the quality of care provided to program beneficiaries (in addition to any other legal obligations regarding quality of care); or (3) indicates evidence of a systemic failure to comply with applicable laws, an existing corporate integrity agreement, or other standards of conduct, regardless of the financial impact on Federal health care

⁵⁹The OIG has published criteria setting forth those factors that the OIG takes into consideration

in determining whether it is appropriate to exclude a health care provider from program participation pursuant to 42 U.S.C. 1320a–7(b)(7) for violations of various fraud and abuse laws. See 62 FR 67392, December 24. 1997.

⁶⁰ Appropriate Federal and State authorities include the Criminal and Civil Divisions of the Department of Justice, the U.S. Attorney in the hospital's district, and the investigative arms for the agencies administering the affected Federal or State health care programs, such as the State Medicaid Fraud Control Unit, the Defense Criminal Investigative Service, and the Offices of Inspector General of the Department of Health and Human Services, the Department of Veterans Affairs and the Office of Personnel Management (which administers the Federal Employee Health Benefits Program).

⁶¹ See 42 U.S.C. 1320a-7b(a)(3).

⁶² Normal repayment channels as described in HCFA's manuals and guidances are the appropriate vehicle for repaying identified overpayments. Hospitals should consult with its fiscal intermediary or HCFA for any further guidance regarding these repayment channels. Interest will be assessed, when appropriate. See 42 CFR 405.376.

Effective

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the Medicare, Medicaid, and all Federal
Health Care programs. In addition, no
program payment is made to any
business or facility, e.g., a hospital, that
submits bills for payment for items or
services provided by an excluded party.
Program beneficiaries remain free to
decide for themselves whether they will
continue to use the services of an
excluded party even though no program
payments will be made for items and
services provided by that excluded
party. The exclusions have national
effect and also apply to all Executive
Branch procurement and non-
procurement programs and activities.

	spital, that	SOUTH ORANGE, NJ				
submits bills for payment for	items or	PENINSULA BRACE & LIMB,	02/19/1998	DIADIADOS LICENSE PEVOCATION/SUSE		
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	gram beneficiaries remain free to		02/19/1998			
decide for themselves wheth		RATLIFF, GEAMES H CLINTON, VA		ARCHULETA, MARILYN		
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excluded party even though no program		NORA, VA	00/04/4007	LANCASTER, PA	00/40/4000	
payments will be made for items and		RAY, CAROL	08/04/1997	BARBARO, ANDREASOUTH RIDING, VA	02/19/1998	
services provided by that exc		LENEXA, KS RIVERO, SOLEDAD M	02/19/1998	BAYLESS, JAMES M	02/19/1998	
party. The exclusions have national		MIAMI, FL	02/19/1990	RIVERSIDE, CA	02/10/1000	
effect and also apply to all Executive		ROBBINS, JEFFREY	02/19/1998	BECKERT, MARGARET		
Branch procurement and non-		STROUDSBERG, PA		WEIER	02/19/1998	
procurement programs and a	ctivities.	ROBINSON, RALLAND V	02/19/1998	NAPA, CA		
	C#ootive	POWHATAN, VA		BRAND, ROBERT L	02/19/1998	
Subject, city, state	Effective date	ROSENZWEIG, ALLAN LAW- RENCE	02/19/1998	PETERSBURG, VA BRAVERMAN, RONALD A	02/19/1998	
		HOLLYWOOD, FL	02/19/1996	BRAINERD, MN	02/13/1330	
PROGRAM-RELATED CON	/ICTIONS	SIDDIQUI, SHAKIR	02/19/1998	BRODHEAD, CHARLES L	02/19/1998	
		KEARNY, NJ	02/10/1000	RIVERSIDE, CA		
ABREU, JUAN F	02/19/1998	SLOAN, MÉLANIE	02/19/1998	BROOKS, DAVID	02/19/1998	
MIAMI, FL	00/40/4000	COLLEGE PARK, GA		CHICAGO, IL	00/40/4000	
ADEYEYE, ADEREMI B WAUPUN, WI	02/19/1998	SWEAT, DEBBIE L	02/19/1998	BROWN, KEVIN P	02/19/1998	
ANDERSON, BERN	02/19/1998	BRADENTON, FL	00/40/4000	LYNDEN, WA BROWN, SANDORS	02/19/1998	
WHITE DEER, PA	02/10/1000	SWERDLIK, RICHARD	02/19/1998	LEESBURG, VA	02/19/1990	
BEACKOM, BERNARD J	02/19/1998	NEW YORK, NY TERRANA, CHARLES	02/19/1998	CARMON, KIM ALLEN	02/19/1998	
HICKSVILLE, NY		ELMA, NY	02/10/1000	RICHMOND, VA		
COMMODORE, PATRICIA		THOMAS, CHARLES ED-		CARTER, CAROL HOVER	02/19/1998	
WASHINGTON	02/19/1998	WARD	02/19/1998	TITUSVILLE, PA	00/40/4000	
BALTIMORE, MD COOPER, WANDA	02/19/1998	KENBRIDGE, VA		CURRY, CURTIS	02/19/1998	
DECATUR, GA	02/19/1996	VADEN, VIRGILIO	02/19/1998	CHICAGO, IL DARRIN, THOMAS B	02/19/1998	
DIXON, TERRY D	02/19/1998	ROCKY POINT, NY VILLAVECER, VIRGIL	02/19/1998	COUDERSPORT, PA	02/13/1330	
E STONE GAP, VA		WESTERVILLE, OH	02/19/1996	DAVIS, REED C	02/19/1998	
FERRELL, CORRIE MAT-		VILLAVECER,		SANTA ROSA, CA		
THEW	02/19/1998	HERMENEGILDO T	02/19/1998	DAY, THERESA A	02/19/1998	
SOUTH BOSTON, VA	00/40/4000	WESTERVILLE, OH		PORTLAND, ME	00/40/4000	
GOLDBERG, LOIS MILWAUKEE, WI	02/19/1998	WILKINS, DOROTHY	,,_,	DEJULIA, WAYNE CHUNTINGTON, CT	02/19/1998	
GONZALEZ, BARBARA ANN	02/19/1998	RAWSHAWN	02/19/1998	ELLIOTT, STACEY H	02/19/1998	
		SACRAMENTO, CA	02/19/1998	PAYNESVILLE, MN	02/10/1000	
BRYAN, TX GRACE, KATHY ELAINE	02/19/1998	YI, FELIPE	02/13/1330		02/19/1998	
BRYAN, TX GRACE, KATHY ELAINE TURNER, OR	02/19/1998		02/13/1330	FINN, MARY CMENANDS, NY		
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BRYAN, TX GRACE, KATHY ELAINE TURNER, OR GREEN, PATRICIA WOODVILLE, MS HARTLEY, CHERRI MONIC PHOENIX, AZ HERB, GREGORY WAYNE SAN JOSE, CA HOLMBERG, ANDERS BRONX, NY JACKSON, NATALIE JOYCE LITTLE ROCK, AR JOHNSON, ANTHONY L BALTIMORE, MD KEITH, LAURA S CLARKSTON, GA LODENQUAI, CHRISTOPHER TARPON SPRINGS, FL LOWRANCE, VICKY J COLORADO SPNGS, CO LUKESH, RICHARD J EXTON, PA MASON, DEBORAH MARIAH TUCSON, AZ MED-AMERICA PHYSICIAN, PC	02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998	YI, FELIPE MIAMI, FL PATIENT ABUSE/NEGLECT CO CALDWELL, CHARLES A CANON CITY, CO GIBSON, ROXANNE HARKER HGTS, TX GOMEZ, ANA MARIE FRESNO, CA GORDON, TYLICIA C NASHVILLE, TN GREEN, PATRICIA MOSS POINT, MS REDDELL, ALICE LYNN MINERAL WELLS, TX RUTKOWSKI, JOSEPH CANANDAIGUA, NY SMITH, DALE A LEXINGTON PARK, MD STONE, ROBERTA CINCINNATI, OH VELURI, RAVI K ALEXANDRIA, VA	02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998	FINN, MARY C	02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998	
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BRYAN, TX GRACE, KATHY ELAINE TURNER, OR GREEN, PATRICIA WOODVILLE, MS HARTLEY, CHERRI MONIC PHOENIX, AZ HERB, GREGORY WAYNE SAN JOSE, CA HOLMBERG, ANDERS BRONX, NY JACKSON, NATALIE JOYCE LITTLE ROCK, AR JOHNSON, ANTHONY L BALTIMORE, MD KEITH, LAURA S CLARKSTON, GA LODENQUAI, CHRISTOPHER TARPON SPRINGS, FL LOWRANCE, VICKY J COLORADO SPNGS, CO LUKESH, RICHARD J EXTON, PA MASON, DEBORAH MARIAH TUCSON, AZ MED-AMERICA PHYSICIAN, PC	02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998	YI, FELIPE	02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998	FINN, MARY C	02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998 02/19/1998	

Subject, city, state	Effective date	Subject, city, state	Effective date	Subject, city, state	Effective date
RESTON, VA IPPEDICO, JESSICA	02/19/1998	MORTON GROVE, IL TSENG, MAO-HSUNG	02/19/1998	CARSON CITY, NV COWLEY, ROBERT DANIEL	02/19/1998
SOMERVILLE, MA JOUBERT, EFFIECHICAGO, IL	02/19/1998	EDEN, NY WAGNER, ROBERT R NORFOLK, VA	02/19/1998	CHARLESTON, SC DAVIS, MICHAEL ESHAKER HEIGHTS, OH	12/22/1997
KAPLAN, MARK NORCO, CA	02/19/1998	WAGNER, ANDREA CHICAGO RIDGE, IL	02/19/1998	DENNEY, TERESA A HONOLULU, HI	02/19/1998
KASIEWSKI, REGINA GAFFNEY	02/19/1998	WAINIO, MAUREEN E		DEVANEY, JOHN F SEABROOK, NH	02/19/1998
BENSALEM, PA KELLEY, SHANNON T	02/19/1998	WALKER, JERONE S NORTHRIDGE, CA	02/19/1998	ECHOLS, HARVEY L CHICAGO, IL	02/19/1998
SYRACUSE, NY KHOURY, NICHOLAS F	02/19/1998	WHEATLAND, SUZANNE 02/19/1998 ELLIS, P.		ELLIS, PATRICIA A PHILADELPHIA, PA	02/19/1998
FRESNO, CA KRAEGER, CARI	02/19/1998	WOO, DONNA		GEE, WILL KCHICAGO, IL	02/19/1998
BLOOMINGTON, IL KRILE, SCOTT	02/19/1998	FEDERAL/STATE EXCLUSION/		GEORGESON, RONALD M KERMAN, CA	02/19/1998
PEKIN, IL LITTLE, BRUCE R	02/19/1998	SUSPENSION		GOMES, STEVEN PGLEN ELLEN, CA	02/19/1998
LITCHFIELD, CT LONG, DAWN	02/19/1998	BHAREL, VIVENDRA MANHASSET HILLS, NY	02/19/1998	HAYGOOD, REGINA J BROOKLYN, NY	12/22/1997
DECATUR, IL LOVE, BEVERLY MICHELE	02/19/1998	KESTEN, MARK M NEW YORK, NY	02/19/1998	HERBST, STEPHEN H	12/22/1997
OKLAHOMA CITY, OK MAKHDOOMI, GOWHAR CLARENCE, NY	02/19/1998	QUEENS SURGICAL PHAR-	02/19/1998	HETH, DAVID M LAYTON, UT HILL, STEPHEN J	02/19/1998
MORAN, JANICE M WEYMOUTH, MA	02/19/1998	FOREST HILLS, NY SOLAN, JAY R	02/19/1998	MONTGOMERYVILLE, PA JOHNSON, GARY M	02/19/1998
MOTLAGH, FRANK A SAN DIEGO, CA	02/19/1998	LARCHMONT, NY WALKER, SANDRA BROOKLYN, NY	02/19/1998	N HOLLYWOOD, CA KOFFEMAN, JOHN NICHOLAS	02/19/1998
NALLS, DOUGLAS EARL MIAMI, FL	02/19/1998	FRAUD/KICKBACK		JACKSON, MI KOSTENKO, MICHAEL MER-	
NEUMAN, JACOB FLUSHING, NY	02/19/1998	AUTOMATED BILLING SERV-		RITT BECKLEY, WV	02/19/1998
OH, HEI YOUNG DIXHILLS, NY	02/19/1998	ICESROCKVILLE, MD	02/19/1998	ROCKWALL, TX	12/22/1997
OKAJIMA, NILES M SOUTH GATE, CA	02/19/1998	JOHN J MERENDINO, SR, MD, PA	02/19/1998	SCOTTDALE, AZ	12/22/1997
ORCINOLO, SAMUEL LBROOKLYN, NY	02/19/1998	ROCKVILLE, MD QRSS	02/19/1998	LINDSEY, SCOTT B	12/22/1997
PITTS, FERRIS NEWCOMB PASADENA, CA	02/19/1998	ROCKVILLE, MD		MAREK, MICHAEL L HOUSTON, TX	12/22/1997
POWELL, PERRY SAN DIEGO, CA RABOW, PETER J	02/19/1998	OWNED/CONTROLLED BY CONVICTED EXCLUDED		MARTINSON, DAVID L FARGO, ND MASON (DOWNING), MAR-	02/19/1998
SPRINGFIELD, VT RAINEY, DIANA	02/19/1998	CHARLES OPTICAL	02/19/1998	LENE KGLENDALE, AZ	02/19/1998
CHARLOTTESVILLE, VA REESE, TIMOTHY HERMAN	02/19/1998	JORMER SPECIALTY COR- PORATION	02/19/1998	MCJILTON, STEPHEN J ROSSMOOR, CA	02/19/1998
MCKEESPORT, PA RICHARDS, JEFFREY M	02/19/1998	MIAMI, FL U S MEDICAL SYSTEMS, INC	02/19/1998	MITCHELL, ROBERT S KIRKLAND, WA	02/19/1998
EDINBORO, PA RUCKHABER, JERRY WAYNE	02/19/1998	BOCA RATON, FL	02/10/1000	MONTELEONE, ANTHONY L JR	02/19/1998
BINGHAMTON, NY SALDANHA, JOSEPH P	02/19/1998	DEFAULT ON HEAL LOAN		NATRONA HGHTS, PA MUNSON, KEVIN D	12/22/1997
MANHASSET, NY SEARS, CATHERINE	02/19/1998	ARAGON, JANETTE L UPLAND, CA	02/19/1998	DETROIT, MI MURPHY, MICHAEL P	02/19/1998
BEVERLY, MA SHOHAYEB, AHMED ABDUL		BAKER, SAMUEL STEVEN TUCSON, AZ	02/19/1998	QUINCY, MA PACEY, DAVID A	02/19/1998
RAHMALOS ANGELES, CA	02/19/1998	PINE BLUFF, AR	12/22/1997	SEATTLE, WA PICIULLO, LENNY R	02/19/1998
SMITH, DIANE DIXON, IL	02/19/1998	BRADY, SCOTT MNEW MILFORD, CT	02/19/1998	SPOKANE, WA POLLOCK, THOMAS G	02/19/1998
ST JEAN, POLUX ENRIQUE DILONE	02/19/1998	BUCKLEY, JOHN F MASSILON, OH	12/22/1997	SANTA BARBARA, CA RABIN, SANDER M	02/19/1998
CAGUAS, PR STEPHEN, CAROL ANN	02/19/1998	BURKS, TEMAN L COLUMBIA, MD CHERRY, ROBERT B	02/19/1998	POUGHKEEPSIE, NY RAMOS, CARLOS A	02/19/1998
NORFOLK, VA SUGAR, HARRY D	02/19/1998	SEATTLE, WA CLEMENTS, DAVID D	02/19/1998	SAN DIEGO, CA RAMOS-VELEZ, GISELLA	02/19/1998
CRANFORD, NJ TAYLOR, JAMES ALAN E STROUDSBURG, PA	02/19/1998	DALLAS, TX CONNELLY, CHRISTOPHER	02/13/1330	LOUISVILLE, KY RICHARDSON, GREGORY B MERIDIAN, ID	02/19/1998
TOBIN, DAVID	02/19/1998	FOUST	02/19/1998	RIVERO, EDUARDO C	02/19/1998

Subject, city, state	Effective date	Subject, city, state	Effective date
MIAMI, FL		HIALEAH, FL	
ROGNEY, ROSS K	02/19/1998	IGLESIAS, YAMIRAH ISABEL	02/19/1998
EXCELSIOR, MN	02/19/1990	TAMPA, FL	02/19/1996
SMITH, ART G	02/19/1998		11/04/1997
KERRVILLE, TX	02/19/1990	MENDEZ, FAUSTUS	11/04/1997
SMITH, ROBERT E	02/19/1998	HIALEAH, FL PENINSULA BRACE & LIMB,	
COSTA MESA, CA	02/19/1990		00/44/4007
SOLUM, JIM D	02/19/1998	INC	08/11/1997
LOS ANGELES, CA	02/19/1990	TAMPA, FL	
SUTHERLAND, SCOTT		PEER REVIEW ORGANIZATION	ON CASES
TRACY	02/19/1998	PEER REVIEW ORGANIZATIO	UN CASES
HONOLULU, HI	02/19/1990	BROOKS, JESSE M	12/10/1997
SWETT, ROBERT A	02/19/1998	ATLANTA, TX	12/10/1997
BELCHERTOWN, MA	02/19/1990	ATLANTA, TA	
VANRENSSELAER, JEFFREY		Data d. E.L., 0, 1000	
ALAN	02/19/1998	Dated: February 9, 1998.	
LAKE FOREST. CA	02/19/1990	Joanne Lanahan,	
, -	02/19/1998	Director, Health Care Administra	ative
VOLPATO, RONALD N	02/19/1996	Sanctions, Office of Inspector Ge	
WADE, ERIC V	12/22/1997	[FR Doc. 98–4423 Filed 2–20–98	
TYLER, TX	12/22/1997		, 0.45 ann
WALKER, JOSEPH C	12/22/1997	BILLING CODE 4150-04-P	
CLEVELAND HGTS, OH	12/22/1997		
COLLINS, RODNEY DANIEL	01/14/1998		
CULVER CITY, CA	01/14/1990	DEPARTMENT OF HEALTH	AND
ELOFSON, OLOF R	01/14/1998	HUMAN SERVICES	
ISSAQUAH, WA	01/14/1990		
GAMBLE, JEFFREY G SR	01/14/1998	National Institutes of Health	1
SAN DIEGO, CA	01/14/1330		
HESSER, ROBERT J	01/14/1998	Submission for OMB Review	v;
DENVER, CO	0171171000	Comment Request; Test-Ref	test Study
PARKER, SYLVESTER E JR	01/14/1998	of the Alcohol Use Disorder	
TYLERTOWN, MS	0171171000	Associated Disabilities Inter	
PAYNE, DENISE Y	01/14/1998	Schedule (AUDADIS-IV) in a	
LOUISVILLE, KY		Population Sample	Concrai
PERRY, KEITH O'NEIL	01/30/1998	ropulation Sample	
LOS ÁNGELES, CA		SUMMARY: Under the provision	ns of
SCHAEFFER, DARRELL RAY	01/14/1998	Section 3506 (c)(2)(A) of the	
PHOENIX, AZ		Reduction Act of 1995, the N	
SCHUCKMAN, GARY A	01/14/1998	Institute on Alcohol Abuse a	
WILMINGTON, NC			
SMITH, ROBERT L	01/14/1998	Alcoholism (NIAAA), Nation	
OJAÍ, CA		Institutes of Health (NIH) has	
WATFORD, DOUGLAS E	01/14/1998	to the Office of Management	
AHOSKIÉ, NC		(OMB) a request to review an	d approve
WILLIAMS, WILLIAM E	01/14/1998	the information collection lis	
OAKLAND, CA		This proposed information co	
		was previously in the Federa	
EXCLUSION BASED ON SET	TLEMENT	was previously in the reuer a	ii wegister

EXCLUSION BASED ON SETTLEMENT AGREEMENT

BEAR LOVE MEDICAL EQUIP-02/19/1998 MENT

public comments were received. The purpose of this notice is to allow an additional 30 days for public comment.

The NIH may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after June 30, 1999, unless it displays a currently valid OMB control number.

PROPOSED COLLECTION: Title: Test-Retest Study of the Alcohol Use Disorder and Associated Disabilities Interview Schedule (AUDADIS-IV) in a General Population Sample. Type of Information Collection request: New. Need and Use of Information Collection: The information proposed for collection in this study will be used by the NIAAA to develop and finalize psychometrically sound measures of alcohol and drug-related disabilities for use in major epidemiologic surveys conducted in the United States. Currently, there is a great need for more reliable measurement of alcohol and drug use disorders and their associated disabilities in all fields of substance use research.

Frequency of Response: On occasion. Affected Public: Individuals.

Type of Respondents: American adults.

Estimated Number of Respondents:

Estimated Number of Responses per Respondent: 2.

Average Burden Hours per Response: 1.00.

And Estimated Total Annual Burden Hours Requested: 1000.

There are no Capital Costs to report.

There are no Operating or Maintenance Costs to report.

The annual burden estimates are as follows:

Type and number of respondents	Responses per respond- ent	Total re- sponses	Hours	Total hours
(First (Test) Interviews): 500 (Second (Retest) Interviews): 500 Total Number of Respondents: 500 (per year) Total Number of Responses: 1000 (per year) Total Hours: 1000 (per year)	1	500 500	1.00	500 500

on November 17, 1997, and allowed 60

requests for additional information

about this data collection activity, no

days for public comment. There were no

REQUEST FOR COMMENTS: Comments are invited on: (a) Whether the proposed collection is necessary, including whether the information has practical use; (b) ways to enhance the clarity,

quality, and use of the information to be collected; (c) the accuracy of the agency estimate of burden of the proposed collection; and (d) ways to minimize the collection burden of the respondents.

Send written comments to Dr. Bridget Grant, Biometry Branch, Division of Biometry and Epidemiology (DBE), NIAAA, NIH, Willco Bldg., Suite 514,