Caliman by 12 noon on Thursday, April 19, 2001, to be scheduled. The number of oral presentations may be limited by the time available. A written copy of the oral remarks should be submitted to Ms. Caliman no later than 12 noon on Thursday, April 19, 2001. Anyone who is not scheduled to speak may submit written comments to Ms. Caliman by 12 noon, Thursday, April 19, 2001. The meeting is open to the public, but attendance is limited to the space available. Individuals requiring sign language interpretation for the hearing impaired or other special accommodations should contact Ms. Caliman at least 15 days before the meeting.

(Sec. 222 of the Public Health Service Act (42 USC 217a) and sec. 10(a) of Pub. L. 92–463 (5 U.S.C. App. 2, sec. 10(a)(1) and (a)(2)); 41 CFR 101–6.1015)

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance Program; and Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: March 22, 2001.

#### Michael McMullan,

Acting Deputy Administrator, Health Care Financing Administration.

[FR Doc. 01–7904 Filed 3–29–01; 8:45 am]

BILLING CODE 4120-03-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

Request for Comments on Increasing Income Levels Used To Identify a "Low-Income" Family for the Purpose of Providing Training in the Various Health Professions and Nursing Programs Included in Titles VII and VIII of the Public Health Service Act

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

**ACTION:** Notice.

**SUMMARY:** This notice requests comments on increasing low-income levels for various programs included in Titles VII and VIII of the Public Health Service (PHS) Act, which use "lowincome" levels to determine eligibility for program participation. The Department periodically publishes in the Federal Register low-income levels used to determine eligibility for grants and cooperative agreements to institutions providing training for (1) disadvantaged individuals, (2) individuals from a disadvantaged background, or (3) individuals from "low-income" families.

**DATES:** Interested persons are invited to comment on the proposed low-income levels for the programs listed below. All comments received on or before April 30, 2001 will be considered when final low-income levels are determined for purposes of eligibility for participation in the programs listed below.

ADDRESSES: Written comments should be addressed to Ms. Sarah Richards, Evaluation Officer, Bureau of Health Professions (BHPr), Health Resources and Services Administration, Room 8– 67, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857.

**FOR FURTHER INFORMATION CONTACT:** Ms. Sarah Richards, Evaluation Officer, BHPr; telephone number (301) 443–5452.

**SUPPLEMENTARY INFORMATION:** This notice is to announce the proposed increase in income levels that is intended for use in determining eligibility for participation in the following programs:

Advanced Education Nursing (section 811)

Allied Health Special Projects (section 755)

Basic Nurse Education and Practice (section 831)

Dental Public Health (section 768)
Faculty Loan Repayment and Minority
Faculty Fellowship Program (section 738)

General and Pediatric Dentistry (section 747)

Health Administration Traineeships and Special Projects (section 769)

Health Careers Opportunity Program (section 739)

Loans to Disadvantaged Students (section 724)

Physician Assistant Training (section 747)

Primary Care Residency Training (section 747)

Public Health Traineeships (section 767) Quentin N. Burdick Program for Rural Interdisciplinary Training (section 754)

Residency Training in Preventive Medicine (section 768)

Scholarships for Disadvantaged Students (section 737)

Public Health Training Centers (section 766)

Nursing Workforce Diversity (section 821)

These programs generally award grants to accredited schools of medicine, osteopathic medicine, public health, dentistry, veterinary medicine, optometry, pharmacy, allied health, podiatric medicine, nursing, chiropractic, public or private nonprofit schools which offer graduate programs

in behavioral health and mental health practice, and other public or private nonprofit health or education entities to assist the disadvantaged to enter and graduate from health professions and nursing schools. Some programs provide for the repayment of health professions or nursing education loans for disadvantaged students.

### **Proposed Low-Income Levels**

The Secretary proposes that, for programs included in Titles VII and VIII of the PHS Act, a "low-income" family be defined as having an annual income that does not exceed 200 percent of the Department's poverty guidelines. The Department poverty guidelines are published annually for general use while the Department's HRSA lowincome levels are specific to the programs listed under the Supplementary Information section of this notice. This notice proposes an increase over the income level currently used, which is 130 percent of the Department's poverty guidelines. The Department's poverty guidelines are based on poverty thresholds published by the U.S. Census Bureau, adjusted annually for changes in the Consumer Price Index.

The Secretary would continue to adjust the low-income levels annually based on the Department's poverty guidelines and make them available to persons responsible for administering the applicable programs.

In developing the revised family income levels for determining eligibility for the applicable Titles VII and VIII programs, the Secretary chose 200 percent of the Department's poverty guidelines for the following reasons: First, 200 percent of the poverty guidelines is a statutory eligibility level used by the Department for the State Children's Health Insurance Program (SCHIP), which provides health care insurance to children who are from families with incomes too high to qualify for Medicaid but too low to afford private health insurance. Secondly, the proportion of the population below 200 percent of the Census Bureau poverty thresholds is one criterion used by the Department in the designation of population groups with shortages of health care providers. Thus, using 200 percent of the Department poverty guidelines to determine low-income status is consistent with other Department programs and activities directed toward uninsured and underserved individuals and population groups.

The Secretary has developed the proposed income levels as a means of assuring that the applicable Titles VII and VIII programs most effectively contribute to the attainment of the HRSA goals of increasing diversity and improving distribution in the health care workforce.

These programs are not subject to the provisions of Executive Order 12372, Intergovernmental Review of Federal Programs (as implemented through 45 CFR part 100).

These programs are not subject to the Public Health Systems Reporting Requirements.

Dated: March 16, 2001.

#### Claude Earl Fox,

Administrator.

[FR Doc. 01–7841 Filed 3–29–01; 8:45 am]

BILLING CODE 4160-15-U

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# **Substance Abuse and Mental Health Services Administration**

# Privacy Act of 1974: New System of Records

**AGENCY:** Substance Abuse and Mental Health Services Administration, DHHS. **ACTION:** Notification of a new system of records subject to the Privacy Act of 1974.

**SUMMARY:** In accordance with the requirements of the Privacy Act, the Substance Abuse and Mental Health Services Administration (SAMHSA) is publishing a notice of the establishment of a new system of records, SAMHSA Information Mailing System (SIMS). The new system will collect limited data from individuals accessing the SAMHSA website for the purpose of requesting current and future SAMHSA publications. Data will include personal information, such as name, phone number (home phone number may be provided), address (home address may be provided), title, level of education, topics/areas of interest related to SAMHSA programs, occupation, type of organization in which employed, and ethnic group.

**DATES:** SAMHSA invites interested persons to submit comments on the proposed new system on or before April 24, 2001.

SAMHSA will adopt this new system without further notice on April 24, 2001 unless comments are received that would result in a contrary determination.

ADDRESSES: Please address comments to the SAMHSA Privacy Act Officer, Office of Program Services, Room 13C–20, Parklawn Building, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Rockville, Maryland 20857. We will make comments available for public inspection at the above address during normal business hours, 8:30 a.m.–5 p.m.

# FOR FURTHER INFORMATION CONTACT:

Director, Office of Communications, Office of the Administrator/SAMHSA, Room 13C–05, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857 (301)–443–8956.

Dated: March 19, 2001.

### Richard Kopanda,

Director, Office of Program Services, Substance Abuse and Mental Health Services Administration.

### 09-30-0051

#### SYSTEM NAME:

SAMHSA Information Mailing System (SIMS).

#### SYSTEM CLASSIFICATION:

None.

#### SYSTEM LOCATION:

This system of records is maintained by the Office of Communications, 5600 Fishers Lane, Rockville, Maryland 20857. The system of records will also be maintained at the site of the contractor managing SAMHSA's National Clearinghouse on Alcohol and Drug Abuse. Additional information about that contractor site is available by writing to the System Manager at the address below.

# CATEGORIES OF INDIVIDUALS COVERED BY THE SYSTEM:

The individuals listed in the system are individuals who voluntarily request publications and other information from the SAMHSA Website.

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The individuals listed in the system are individuals who voluntarily request publications and other information from the SAMHSA Website.

## CATEGORIES OF RECORDS IN THE SYSTEM:

Request forms for SAMHSA publications include categories for personal information, such as name, phone number (home phone number may be provided), address (home address may be provided), title, level of education, topics/areas of interest related to SAMHSA programs, occupation, type of organization in which employed, and ethnic group.

### AUTHORITY FOR MAINTENANCE OF THE SYSTEM:

Pub. L. 102–321 ("ADAMHA Reorganization Act"), sec. 501 on July 10, 1992, as amended by Pub. L. 106– 310

#### PURPOSE(S):

To establish a mailing list of States, political subdivisions, educational agencies and institutions, treatment providers, organizations, and individuals to provide SAMHSA publications and other print materials identified as of interest to them. In addition, it is used to provide them information about new and upcoming publications.

# ROUTINE USES OF RECORDS MAINTAINED IN THE SYSTEM, INCLUDING CATEGORIES OF USERS AND THE PURPOSES OF SUCH USE:

- 1. Disclosure may be made to a member of Congress or to a congressional staff member in response to a request for assistance from the Member by the individual of record.
- 2. The Department of Health and Human Services (HHS) may disclose information from this system of records to the Department of Justice, or to a court or other tribunal, when (a) HHS, or any component thereof; or (b) any HHS employee in his or her official capacity; or (c) any HHS employee in his or her individual capacity where the Department of Justice (or HHS, where it is authorized to do so) has agreed to represent the employee; or (d) the United States or any agency thereof where HHS determines that the litigation is likely to affect HHS or any of its components, is a party to litigation, and HHS determines that the use of such records by the Department of Justice, court or other tribunal is relevant and necessary to the litigation and would help in the effective representation of the governmental party, provided, however, that in each case HHS determines that such disclosure is compatible with the purpose for which the records were collected.
- 3. SAMHSA intends to disclose information from this system to an expert, consultant, or contractor (including employees of the contractor) of SAMHSA only if necessary to further the implementation and operation of this program.

### POLICIES AND PRACTICES FOR STORING, RETRIEVING, ACCESSING, RETAINING, AND DISPOSING OF RECORDS IN THE SYSTEM:

# STORAGE:

Information may be collected on paper or electronically and may be stored as paper forms or on computers.

#### RETRIEVABILITY:

The records are retrieved by name; they may be sorted by topic of interest, State, organizational affiliation in order to direct information of relevance to them.