Section 17(o)(2) of the CEA provides that the Commission may authorize NFA, in performing Commission registration functions, to deny, condition, suspend, restrict or revoke any registration, subject to Commission review.<sup>10</sup> As stated above, NFA Registration Rule 204, which the Commission has today approved, provides that BD notice registration as an FCM or IB "shall be terminated immediately if the other conditions set for [such] registration are no longer satisfied." The Commission is not at this time, however, authorizing NFA to take any other adverse registration actions with respect to the BD notice registration applications that it processes pursuant to this Order. This is consistent with Section 252 of the CFMA

By prior orders, the Commission has authorized NFA to maintain various other Commission registration records and certified NFA as the official custodian of such records for this agency. The Commission has now determined, in accordance with its authority under section 8a(10) of the CEA, to authorize NFA to maintain and serve as official custodian of the Commission's registration records with respect to BDs notice-registered as an FCM or IB.

In maintaining the Commission's registration records pursuant to this Order, NFA shall be subject to all other requirements and obligations imposed upon it by the Commission in existing or future Orders or regulations. 13 In this regard, NFA shall also implement such additional procedures (or modify existing procedures) as are necessary to ensure the security and integrity of the BD notice-registered records in NFA's custody as acceptable to the Commission; to facilitate prompt access to those records by the Commission and its staff, particularly as described in other Commission Orders or rules; to facilitate disclosure of public or nonpublic information in those records when permitted by Commission Orders or rules and to keep logs as required by the Commission concerning disclosure of nonpublic information; and otherwise

Commission's position regarding testing requirements for floor traders. See 58 FR 19657 at 19658 (April 15, 1993). The Commission further notes, however, that the futures and securities industry self-regulatory organizations, including NFA, are developing enhancements to existing proficiency examinations, as well as training modules for existing registrants, so that industry professionals will be aware of their responsibilities to the public concerning security futures products.

to safeguard the confidentiality of the records.

#### II. Conclusion and Order

The Commission has determined, in accordance with the provisions of Section 8a(10) of the CEA, to authorize NFA, effective September 17, 2001, to perform the following registration functions:

- (1) To receive and maintain filings for notice registration under the Commodity Exchange Act as a futures commission merchant or introducing broker by those brokers and dealers registered with the Securities and Exchange Commission who meet the requirements of NFA Registration Rule 204;
- (2) To terminate the notice registration of a registered broker or dealer as a futures commission merchant or introducing broker where the broker or dealer no longer meets the requirements of NFA Registration Rule 204; and
- (3) To maintain records regarding brokers and dealers notice-registered as a futures commission merchant or introducing broker and to serve as the official custodian of those Commission records.

NFA shall perform these functions in accordance with the standards established by the CEA and the regulations promulgated thereunder.

These determinations are based upon the Congressional intent expressed in sections 8a(10) and 17(o) of the CEA and section 125 of the CFMA. This Order does not, however, authorize NFA to accept or act upon requests for exemption from registration, to render "no-action" or interpretative letters with respect to applicable registration requirements, to grant conditional registrations, or, except as stated in item (2) above, to deny or take any other adverse action with respect to such registrations.

Nothing in this Order or in sections 8a(10) or 17 of the CEA or in section 125 of the CFMA shall affect the Commission's authority to review the performance by NFA of Commission registration functions.<sup>14</sup>

Issued in Washington, DC on August 10, 2001.

#### Jean A. Webb,

Secretary of the Commission. [FR Doc. 01–20630 Filed 8–16–01; 8:45 am] BILLING CODE 6351–01–P

#### **DEPARTMENT OF DEFENSE**

# Office of the Secretary

# Proposed Collection; Comment Request

**AGENCY:** Office of the Assistant Secretary of Defense for Health Affairs, DoD.

**ACTION:** Notice.

In accordance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Assistant Secretary of Defense for Health Affairs announces the proposed extension of a public information collection and seeks public comment on the provisions thereof. Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the information collection; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of information collection on respondents, including through the use of automated collection techniques or other forms of information technology.

DATES: Consideration will be given to all comments received October 16, 2001.

ADDRESSES: Written comments and recommendations on the information collection should be sent to LTC Thomas V. Williams, Ph.D., M.S., U.S.A., Dir., Program Evaluation TRICARE Management Activity; HPA&E, 5111 Leesburg Pike, Suite 810, Falls Church, VA 22041.

# **FOR FURTHER INFORMATION CONTACT:** Please refer to the information cited above.

Title, Associated Form, and OMB Number: Military Health System (MHS) Provider Survey in Military Treatment Facilities (MTF).

Needs and Uses: The purpose of this project is to design and pilot test a survey of direct care providers within Region 1 followed by a full deployment of the survey in future years. The MHS Provider Survey is intended to provide Department of Defense (DoD) with data that contributes to the delivery of high quality healthcare. The perspective of prescriptive providers has not been collected systematically despite their important role in delivering care within the constraints of limited resources and complicated guidelines. The first goal of this work is to gain insight of direct care providers who provide care at MTFs regarding the challenges associated with

<sup>&</sup>lt;sup>10</sup> 7 U.S.C. 21(*o*)(2).

<sup>11</sup> See, e.g., 49 FR 39593 (October 9, 1984).

<sup>12 7</sup> U.S.C. 12a(10).

<sup>&</sup>lt;sup>13</sup> See, e.g., 49 FR 35953 at 39595– 97.

 $<sup>^{14}</sup>$  See also section 17(o)(3) of the CEA, 7 U.S.C. 21(o)(3).

treating patients under TRICARE. A survey instrument is needed that will capture information regarding provider opinions of how well TRICARE helps them provide patients with needed care. It will identify how administrative policies and practices of TRICARE health plan effect healthcare delivery. A second goal of this work is to collect information that indicates how the attitudes and opinions of physicians differ by specialty, region, and degree of participation with TRICARE. The survey data shall provide information needed to better plan, deliver, and evaluate health care services provided in the military health system (MHS).

Affected Public: Individuals— Healthcare Providers in Military Treatment Facilities.

Annual Burden Hours: 666. Number of Respondents: 2000.

 $Responses\ Per\ Respondent:$  1 per person.

Average Burden Per Response: 20 minutes per survey.

Frequency: One Time.

#### SUPPLEMENTARY INFORMATION:

# **Summary of Information Collection**

This request encompasses all activities required to develop, pilot test and implement an instrument to assess the attitudes and opinions of MHS prescriptive providers regarding their ability to provide high quality care. Of particular interest is how TRICARE and other organizational factors contribute to the effort to practice medicine in the MHS.

The survey will be designed to collect information from direct care TRICARE providers, focusing on providers who are licensed to practice independently. The provider groups surveyed will include physicians, nurse practitioners, physician assistants, and independent duty corpsmen all of whom are affiliated with Department of Defense (DoD) MTFs. Westat will conduct the information, analyze the results, and generate a report for the government. Activities include the collection and analyses of information obtained confidentially from providers (physicians, physician assistants, independent duty corpsmen, and nurse practitioners) within MTFs.

Dated: August 13, 2001.

# Patricia L. Toppings,

Alternate OSD Federal Register Liaison Officer, Department of Defense. [FR Doc. 01–20742 Filed 8–16–01; 8:45 am]

BILLING CODE 5001-08-M

# **DEPARTMENT OF DEFENSE**

# Office of the Secretary

# Submission for OMB Review; Comment Request

**ACTION:** Notice.

The Department of Defense has submitted to OMB for clearance, the following proposal for collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*Title, Form, and OMB Number:*Academic Certification for Marine Corps
Officer Candidate Program; NAVMC
Form 10469; OMB Number 0703–0011.

Type of Request: Reinstatement. Number of Respondents: 2,500. Responses Per Respondent: 1. Annual Responses: 2,500. Average Burden Per Response: 15 minutes.

Annual Burden Hours: 625. Needs and Uses: Used by Marine Corps officer procurement personnel, this form provides a standardized method for determining the academic eligibility of applicants for all reserve officer candidate programs. Use of this form is the only accurate and specific method to determine a reserve officer applicant's academic qualifications. The form is completed by the applicant and by school officials at the educational institution where the applicant is enrolled. The form requests that a certified copy of the student's transcript be returned with the NAVMC Form 10469.

Affected Public: Individuals or Households.

Frequency: On Occasion.

Respondent's Obligation: Required to Obtain or Retain Benefits.

*OMB Desk Officer:* Mr. Edward C. Springer.

Written comments and recommendations on the proposed information collection should be sent to Mr. Springer at the Office of Management and Budget, Desk Officer for DoD, Room 10236, New Executive Office Building, Washington, DC 20503.

DOD Clearance Officer: Mr. Robert Cushing.

Written requests for copies of the information collection proposal should be sent to Mr. Cushing, WHS/DIOR, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202–4302.

Dated: August 13, 2001.

# Patricia L. Toppings,

Alternate OSD Federal Register Liaison Officer, Department of Defense. [FR Doc. 01–20738 Filed 8–16–01; 8:45 am]

BILLING CODE 5001-08-M

# **DEPARTMENT OF DEFENSE**

# Office of the Secretary

# Submission for OMB Review; Comment Request

**ACTION:** Notice.

**SUMMARY:** The Department of Defense has submitted to OMB for clearance, the following proposal for collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*Title and OMB Number:* Health Evaluation Assessment Review (HEAR 2.X); OMB Number 0720–[To Be Determined].

Type of Request: New Collection. Number of Respondents: 2,106,071. Responses Per Respondent: 1. Annual Responses: 2,106,071. Average Burden Per Response: 20 minutes.

Annual Burden Hours: 703,248. Needs and Uses: The survey is a selfreported health assessment tool. The Health Evaluation Assessment Review (HEAR) is a unified approach to assess health and fitness for active duty and other DoD health care beneficiaries. The information is used by health care personnel to plan health care delivery needs and to: (1) Identify patients requiring clinical preventive care; (2) target individuals who could benefit from counseling services associated with high risk behaviors; (3) categorize patients into one of three primary care levels according to the complexity and intensity of care required; (4) predict which patients will be high users of health care resources; (5) empower individuals to take responsibility for their own health; and, (6) assess the health status of the population. The HEAR will provide information in support of Healthy People 2010 and other population health programs. These data will provide needed information to better plan, deliver, and evaluate health care provided in the Military Health System.

Affected Public: Individuals or Households.

Frequency: On Occasion; Annually. Respondent's Obligation: Voluntary. OMB Desk Officer: Mr. Stuart Shapiro.

Written comments and recommendations on the proposed information collection should be sent to Mr. Shapiro at the Office of Management and Budget, Desk Officer for DoD Health Affairs, Room 10235, New Executive Office Building, Washington, DC 20503.

DOD Clearance Officer: Mr. Robert Cushing.