call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB desk officer: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: July 18, 2001.

John P. Burke III,

CMS Reports Clearance Officer, CMS Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards.

[FR Doc. 01–24742 Filed 10–2–01; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-4029-N]

Medicare Program: Request for Nominations for the Advisory Panel on Medicare Education

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice.

SUMMARY: This notice requests nominations for individuals to serve on the Advisory Panel on Medicare Education (the Panel). The Panel advises and makes recommendations to the Secretary of the Department of Health and Human Services (HHS) and the Administrator of the Centers for Medicare & Medicaid Services (CMS), on opportunities for CMS to optimize the effectiveness of the National Medicare Education Program and other CMS programs that help Medicare beneficiaries understand Medicare and the range of Medicare options available under the Medicare+Choice program. **EFFECTIVE DATE:** Nominations will be considered if we receive them at the

appropriate address, provided below, no later than 5:00 pm. on October 29, 2001. ADDRESSES: Mail or deliver nominations to the following address: Nancy M. Caliman, Center for Beneficiary Choices, Centers for Medicare & Medicaid Services, 7500 Security Boulevard, S2–23–05, Baltimore MD, 21244–1850.

FOR FURTHER INFORMATION CONTACT:

Nancy M. Caliman, Health Insurance Specialist, Division of Partnership Development, Center for Beneficiary Choices, Centers for Medicare & Medicaid Services, 7500 Security Boulevard, S2–23–05, Baltimore, MD, 21244–1850, (410) 786–5052. Please refer to the CMS Advisory Committees Information Line (1–877–449–5659 toll free)/(410–786–9379 local) or the Internet (http://www.hcfa.gov/events/apme/homepage.htm) for additional information and updates on committee activities, or contact Ms. Caliman via email at APME@cms.hhs.gov. Press inquiries are handled through the CMS Press Office at (202) 690–6145.

SUPPLEMENTARY INFORMATION: Section 222 of the Public Health Service Act, as amended, grants to the Secretary the authority to establish an advisory panel if the Secretary finds the panel necessary and in the public interest. The Secretary signed the charter establishing this Panel on January 21, 1999 and the charter renewing the Panel on January 18, 2001. The Advisory Panel on Medicare Education advises the Department of Health and Human Services and the Centers for Medicare & Medicaid Services on opportunities to enhance the effectiveness of consumer education materials serving the Medicare program.

The goals of the Panel are to provide advice on the following:

- Developing and implementing a national Medicare education program that describes the options for selecting a health plan under Medicare.
- Enhancing the Federal government's effectiveness in informing the Medicare consumer, including the appropriate use of public-private partnerships.
- Expanding outreach to vulnerable and underserved communities, including racial and ethnic minorities, in the context of a national Medicare education program.
- Assembling an information base of best practices for helping consumers evaluate health plan options and building a community infrastructure for information, counseling, and assistance.

The Panel shall consist of a maximum of 20 members. The Chair shall either be appointed from among the 20 members, or a Federal official will be designated to serve as the Chair. The charter requires that meetings shall be held approximately four times per year. Members will be expected to attend all meetings. The members and the Chair shall be selected from authorities knowledgeable in the fields of senior citizen advocacy; outreach to minority communities; health communications; disease-related health advocacy; disability policy and access; health economics research; health insurers and plans; providers and clinicians; and matters of labor and retirement; and

from representatives of the general public.

This notice is an invitation to interested organizations or individuals to submit their nominations for membership on the Panel. Current members whose terms expire in 2002 will be considered for reappointment, if renominated, subject to committee service guidelines. The Secretary, or his designee, will appoint new members to the Panel from among those candidates determined to have the expertise required to meet specific agency needs, and in a manner to ensure an appropriate balance of membership.

Each nomination must state that the nominee has expressed a willingness to serve as a Panel member and must be accompanied by a short resume or description of the nominee's experience. In order to permit an evaluation of possible sources of conflict of interest, potential candidates will be asked to provide detailed information concerning such matters as financial holdings, consultancies, and research grants or contracts. Self-nominations will also be accepted.

(Section 222 of the Public Health Service Act (42 USC 217(a)) and section 10(a) of Public Law 92–463 (5 U.S.C. App. 2, section 10(a) and 41 CFR 102–3)

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

Dated: September 30, 2001.

Thomas A. Scully,

Administrator, Centers for Medicare & Medicaid Services.

[FR Doc. 01–24913 Filed 10–2–01; 8:45 am] **BILLING CODE 4120–01–P**

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration [Docket No. 00D-1543]

Draft Guidance for Industry; Electronic Records; Electronic Signatures, Glossary of Terms; Availability; Correction

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice; correction.

SUMMARY: The Food and Drug Administration (FDA) is correcting a notice that appeared in the **Federal Register** of September 24, 2001 (66 FR 48886). The document announced the availability of a draft guidance entitled "Guidance for Industry, 21 CFR Part 11; Electronic Records; Electronic Signatures, Glossary of Terms." The document published with an inadvertent error. This document corrects that error.

DATES: October 3, 2001

FOR FURTHER INFORMATION CONTACT: Joyce Strong, Office of Policy, Planning, and Legislation (HF–27), Food and Drug Administration, 5600 Fishers Lane,

Rockville, MD 20857, 301-827-7010.

SUPPLEMENTARY INFORMATION: In FR Doc. 01–23805, appearing in the **Federal Register** of Monday, September 24, 2001, the following correction is made: On page 48886, in the third column, "[Docket No. 00N–1543]" is corrected to read, "[Docket No. 00D–1543]".

Dated: September 27, 2001.

Margaret M. Dotzel,

Associate Commissioner for Policy.
[FR Doc. 01–24768 Filed 10–2–01; 8:45 am]
BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Amendment to the Charter of the Advisory Committee on Organ Transplantation

AGENCY: Health Resources and Services Administration (HRSA), HHS. **ACTION:** Notice of amendment to the

Charter of the Advisory Committee on Organ Transplantation.

SUMMARY: The Acting Administrator, HRSA, announces an amendment to the Charter of the Advisory Committee on Organ Transplantation (ACOT) to expand the scope of its responsibilities and increase the size of its membership. In addition to its current responsibilities, the Committee has been charged with advising the Secretary on ways to improve Federal and other efforts to increase organ donation nationally. The number of allowable Committee members has been increased from 20 to 41. Further, it has been specified that the term of service of the Committee Chairperson shall be 1 year; new member terms have been restricted to 2, 3 and 4 years; management and support services have been transferred to the Office of SpecialPrograms, HRSA; and meeting frequency has been specified as approximately 3 times per year. Revised annual cost estimates have been provided.

ADDRESSES: Questions concerning this action may be addressed to Jack Kress, Executive Director, Advisory Committee on Organ Transplantation, Office of

Special Programs, Health Resources and Services Administration, 5600 Fishers Lane, Room 7–100, Rockville, MD 20857. A request for a copy of the Charter, as amended, for the Advisory Committee on Organ Transplantation should be submitted to Miguel Kamat, M.D., M.P.H., Division of Transplantation, Health Resources and Services Administration, 5600 Fishers Lane, Room 7C–22, Rockville, MD 20857, or may be viewed on the Division's Web site at www.hrsa.gov/osp/dot.

FOR FURTHER INFORMATION, CONTACT: Jack Kress, (301) 443–8653.

SUPPLEMENTARY INFORMATION:

On September 28, 2000, HRSA published a Federal Register Notice regarding establishment of the ACOT pursuant to 42 CFR 121.12 and Public Law 92-463, the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2) (65 FR 58279). The unamended Charter included sections on the purpose, authority, function, structure, meetings, compensation, annual cost estimates, reports and termination dates of the Committee. The expanded scope of responsibilities and increased membership of the ACOT will ensure that the Secretary will receive advice on all aspects of organ donation, procurement, allocation, and transplantation. The Amendment specifies that, as one of its principal functions, the Committee shall advise the Secretary on ways to maximize Federal efforts to increase living and cadaveric organ donation nationally. The additional members will provide expert input to the deliberations of the ACOT when it considers questions on organ donation, including issues on living donation. The Committee will advise the Secretary through the Administrator, HRSA, on all the above issues, as well as on other matters that the Secretary may seek recommendation.

The Charter, as amended, is reprinted below.

Advisory Committee on Organ Transplantation Charter, as Amended

Purpose

The Department of Health and Human Services (HHS) has a vital role in safeguarding and promoting public health by overseeing the development of an equitable and effective organ donation, procurement, allocation, and transplantation system in the United States. The recommendations of the Advisory Committee on Organ Transplantation will facilitate HHS efforts to oversee the Organ Procurement and Transplantation

Network (OPTN), as envisioned in the National Organ Transplant Act of 1984, as amended.

Authority

42 U.S.C. 217a; Sec. 222 of the PHS Act, as amended; 42 CFR 121.12 (64 FR 56661). The Committee is governed by the provisions of Public Law 92–463, as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

Function

The Committee shall advise the Secretary, acting through the Administrator, Health Resources and Services Administration (HRSA), on all aspects of organ donation, procurement, allocation, and transplantation, and on such other matters that the Secretary determines. One of its principal functions shall be to advise the Secretary on ways to maximize Federal efforts to increase living and cadaveric organ donation nationally.

The Committee shall, at the request of the Secretary, review significant proposed OPTN policies submitted for Secretarial approval to recommend whether they should be made enforceable. It shall provide expert input to the Secretary on the latest advances in the science of transplantation, the OPTN's system of collecting, disseminating and ensuring the validity, accuracy, timeliness and usefulness of data, and additional medical, public health, ethical, legal, financial coverage, and socioeconomic issues that are relevant to transplantation.

Structure

The Committee shall consist of up to 41 members, including the Chair. Members and Chair shall be selected by the Secretary from individuals knowledgeable in such fields as organ donation, health care public policy, transplantation medicine and surgery, critical care medicine and other medical specialties involved in the identification and referral of donors, non-physician transplant professions, nursing, epidemiology, immunology, law and bioethics, behavioral sciences, economics and statistics, as well as representatives of transplant candidates, transplant recipients, organ donors, and family members. To the extent practicable, Committee members should represent the minority, gender and geographic diversity of transplant candidates, transplant recipients, organ donors and family members served by the OPTN. The Secretary may appoint non-voting Ex-Officio members, or designees of such officials, as the