by calling the OS Reports Clearance Office on (202) 690–6207. Written comments and recommendations for the proposed information collection should be sent directly to the OMB desk officer designated above at the following address: Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, 725 17th Street, N.W., Washington, D.C. 20503.

Comments may also be sent to Cynthia Agens Bauer, OS Reports Clearance Officer, Room 503H, Humphrey Building, 200 Independence Avenue S.W., Washington, DC 20201. Written comments should be received within 30 days of this notice.

Dated: June 19, 1997.

Dennis P. Williams,

Deputy Assistant Secretary, Budget.

[FR Doc. 97–16884 Filed 6–26–97; 8:45 am]

BILLING CODE 4150–04–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Health Care Policy and Research; Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Health Care Policy and Research, HHS.

ACTION: Notice.

SUMMARY: This notice announces the Agency for Health Care Policy and Research's (AHCPR) intention to request the Office of Management and Budget (OMB) to allow a proposed information collection project of ''A Survey of Clinical Decision Support Systems (CDSS).'' In accordance with the Paperwork Reduction Act of 1995, Public Law 104–13 (44 U.S.C. 3506(c)(2)(A)), AHCPR invites the public to comment on this proposed information collection.

DATES: Comments on this notice must be received by August 26, 1997.

ADDRESSES: Written comments should be submitted to: Ruth A. Celtnieks, Reports Clearance Officer, AHCPR, 2101 East Jefferson Street, Suite 500, Rockville, MD 20852–4908.

All comments will become a matter of public record.

FOR FURTHER INFORMATION CONTACT: Ruth A. Celtnieks, AHCPR Reports Clearance Officer, (301) 594–1406, ext. 1497.

SUPPLEMENTARY INFORMATION:

Proposed Project

''A Survey of Clinical Decision Support Systems (CDSS).''

The AHCPR intends to conduct a survey to gather the opinions of front-line physicians, nurses, and medical information systems personnel regarding the use, appropriateness, and effectiveness of clinical decision support systems (CDSS); and to determine how well clinical practice guidelines are integrated into these systems.

This proposed study is part of a larger project to identify and describe CDSS currently available in the health market, and to assess the use of CDSS by health care providers in diagnosing and treating patients as well as identifying barriers to using CDSS. It will assess if, and how, clinical practice guidelines are being successfully integrated into CDSS and will identify any changes needed for guidelines to play a more significant role in future CDSS systems.

The information collected will indicate:

- If, and how, CDSS and clinical practice guidelines impact the treatment and outcome of patient care;
- What, if any, are the barriers to CDSS and guidelines being accepted by health care providers;
- What types of health care personnel are utilizing guidelines in the treatment of their patients and what types of health care personnel could benefit from such products; and
- Assess how successfully guidelines are being integrated into CDSS and their effectiveness when accessed as part of CDSS; and what needs to be modified/changed to facilitate the use of guidelines in CDSS.

The respondents' comments will provide AHCPR with information on (1) if or how CDSS may improve the quality and outcome of care and promote cost-containment, and (2) whether and how to better incorporate guidelines into the development and use of CDSS.

Method of Collection

The survey will be conducted using a computerized telephone interview system (CATI). Burden estimates follow:

Number of Respondents: 80.

Number of Surveys Per Respondent: 1.

Average Burden Per Respondent: 25–30 minutes.

Estimated Total Burden: 40 hours.

Request for Comments

Comments are invited on: (a) the necessity of the proposed collection; (b) the accuracy of the Agency's estimate of burden of the proposed collection of information; (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval of this information collection.

Copies of these proposed collection plans and instruments can be obtained from the AHCPR Reports Clearance Officer (see above).

Dated: June 20, 1997.

John M. Eisenberg, MD.

Administrator.

[FR Doc. 97–16865 Filed 6–26–97; 8:45 am]

BILLING CODE 4160–90–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Committee for Energy-Related Epidemiologic Research; Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following committee meeting.

Name: Advisory Committee for Energy-Related Epidemiologic Research.

Times And Dates: 9 a.m.–5 p.m., July 10, 1997; 9 a.m.–12 noon, July 11, 1997.

Place: The Atlantic Oakes, Route 3, Bar Harbor, Maine 04509, telephone 207/288–5801, FAX 207/288–8402.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 50 people.

Purpose: This committee is charged with providing advice and recommendations to the Secretary; the Assistant Secretary for Health; the Director, CDC; and the Administrator, Agency for Toxic Substances and Disease Registry (ATSDR), on establishment of a research agenda and the conduct of a research program pertaining to energy-related analytic epidemiologic studies. The Committee will take into consideration information and proposals provided by the Advisory Committee for Environment, Safety, and Health which was established by the Department of Energy (DOE) under the guidelines of a Memorandum of Understanding between HHS and DOE, and other agencies and organizations, regarding the direction HHS should take in establishing the research agenda and in the development of a research plan.

Matters To Be Discussed: Agenda items will include: Presentations from the National Center for Environmental Health (NCEH), the National Institute for Occupational Safety and Health, and ATSDR updates on the progress of current studies; a discussion of Work Group recommendations, and public involvement activities.

Agenda items are subject to change as priorities dictate.

Due to an unavoidable administrative delay, the notice could not be published within the 15 day requirement.

Contact Person For More Information: Nadine Dickerson, Program Analyst, Radiation Studies Branch, Division of Environmental Hazards and Health Effects, NCEH, CDC, 4770 Buford Highway, NE, (F–35), Atlanta, Georgia 30341–3724, telephone 770/488–7040, FAX 770/488–7044.

Dated: June 20, 1997.

Carolyn J. Russell,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 97–16919 Filed 6–26–97; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCFA–R–201 and HCFA 901,1–3]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing Administration, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summaries of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

1.*Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Managed Care Organization, Incentive Arrangement Disclosure Form and Supporting Regulations 42 CFR 417.479, 417.500, 434.44, 434.67, 434.70, 1003.100, 1003.101, 1003.103, 1003.106; *Form No.:* HCFA–R–201 (OMB # 0938–0700); *Use:* These forms were created in an extensive cooperative effort with the American Association of Health Plans, State Medicaid Agency representatives, and the Medicaid Managed Care Technical Advisory group to monitor compliance with federal statute and supporting regulations, governing physician incentives under Medicare and Medicaid managed care organizations. The currently approved forms and the revised forms being submitted to OMB for approval are available for inspection on the HCFA web site, on the Internet, at http://www.hcfa.gov; *Frequency:* Annually; *Affected Public:* Business or other for profit, not for profit institutions, state, local or tribal government, and federal government; *Number of Respondents:* 450; *Total Annual Responses:* 450; *Total Annual Hours:* 45,000.

2.*Type of Information Collection Request:* Reinstatement, without change, of a previously approved collection for which approval has expired; *Title of Information Collection:* Qualification Application for Competitive Medical Plan, Medicare Contract Application For Federally Qualified Health Maintenance Organization (HMO) and Supporting Regulations 42 CFR 417.143, and 417.408; *Form No.:* HCFA–901,1–3; *Use:* Prepaid health plans must meet certain regulatory requirements which are captured in these applications, before they are considered a Federally qualified HMO that is eligible for a Medicare § 1876 contract. Section 1876 of the Social Security Act authorizes compensation to eligible organizations either on a reasonable cost or a risk basis for services provided under the Medicare program. *Frequency:* one time; *Affected Public:* Business or other for-profit, Not-for-profit institutions, and State, Local or Tribal Government; *Number of Respondents:* 65; *Total Annual Responses:* 65; *Total Annual Hours:* 6,500.

To obtain copies of the supporting statement for the proposed paperwork collections referenced above, access HCFA's WEB SITE ADDRESS at http://www.hcfa.gov, or to obtain the supporting statement and any related forms, E-mail your request, including your address and phone number, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Financial and Human Resources, Management Analysis and Planning Staff, Attention: John Burke, Room C2–26–17, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: June 19, 1997.

Edwin J. Glatzel,

Director, Management Analysis and Planning Staff, Office of Financial and Human Resources, Health Care Financing Administration.

[FR Doc. 97–16807 Filed 6–26–97; 8:45 am]

BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of Closed Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following National Cancer Institute Special Emphasis Panel (SEP) meeting:

Name of SEP: Evaluation of Chempreventive Agents by In Vitro Techniques.

Date: July 28–29, 1997.

Time: 9:00 a.m. to 5:00 p.m.

Place: DoubleTree Hotel—Rockville, 1750 Rockville Pike, Rockville, MD 20852.

Contact Person: Latita Palekar, Ph.D., Scientific Review Administrator, National Cancer Institute, NIH, Executive Plaza North, Room 601D, 6130 Executive Boulevard, MSC 7410, Bethesda, MD 20892–7410, Telephone: 301/496–7575.

Purpose/Agenda To evaluate and review response to Request for Proposals.

The meeting will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5 U.S.C. Applications and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

(Catalog Of Federal Domestic Assistance Program Numbers: 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control)

Dated: June 20, 1997.

LaVerne Y. Stringfield,

Committee Management Officer, NIH.

[FR Doc. 97–16785 Filed 6–26–97; 8:45 am]

BILLING CODE 4140–01–M