DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Citizens Advisory Committee on Public Health Service Activities and Research at Department of Energy (DOE) Sites: Savannah River Site Health Effects Subcommittee

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Agency for Toxic Substances and Disease Registry (ATSDR) and the Centers for Disease Control and Prevention (CDC), announce the following meeting.

Name: Citizens Advisory Committee on Public Health Service Activities and Research at DOE Sites: Savannah River Site Health Effects Subcommittee (SRS).

Times And Dates: 8 a.m.–5 p.m., August 14, 1997; 8:30 a.m.–12 noon, August 15, 1997.

Place: Sheraton Charleston Hotel, 170 Lockwood Drive, Charleston, South Carolina 29403, telephone 803/723–3000.

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

Background: Under a Memorandum of Understanding (MOU) signed in December 1990 with DOE and replaced by an MOU signed in 1996, the Department of Health and Human Services (HHS) was given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to radiation or to potential hazards from non-nuclear energy production use. HHS has delegated program responsibility to CDC.

In addition, an MOU was signed in October 1990 and renewed in November 1992 between ATSDR and DOE. The MOU delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under sections 104, 105, 107, and 120 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or 'Superfund''). These activities include health consultations and public health assessments at DOE sites listed on, or proposed for, the Superfund National Priorities List and at sites that are the subject of petitions from the public; and other health-related activities such as epidemiologic studies, health surveillance, exposure and disease registries, health education, substance-specific applied research, emergency response, and preparation of toxicological profiles.

Purpose: This subcommittee is charged with providing advice and recommendations to the Director, CDC, and the Administrator, ATSDR, regarding community, American Indian Tribes, and labor concerns pertaining to CDC's and ATSDR's public health activities and research at this DOE site. Activities shall focus on providing a forum for community, American Indian Tribal, and

labor interaction and serve as a vehicle for community concern to be expressed as advice and recommendations to CDC and ATSDR

Matters To Be Discussed: Agenda items include: presentations from the National Center for Environmental Health (NCEH) regarding current activities and the National Institute for Occupational Safety and Health and ATSDR will provide updates on the progress of current studies.

Agenda items are subject to change as priorities dictate.

Contact Persons For More Information: Paul G. Renard or Nadine Dickerson, 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: July 18, 1997.

John C. Burckhardt,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration [Document Identifier: HCFA-485 and HCFA-1513]

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

1. Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Home Health Services Under Hospital Insurance and

Supporting Regulations in 42 CFR 409.40-.50, 410.36, 410.170, 411.4-.15, 421.100, 424.22, 484.18 and 489.21; Form No.: HCFA-485 (OMB# 0938-0357); Use: The "Home Health Services Under Hospital Insurance" is a certification and plan of care used by the Regional Home Health Intermediaries (RHHIs) to ensure reimbursement is made to Home Health agencies only for services that are covered and medically necessary under Part A and Part B. The attending physician must sign the HCFA-485 (OMB 0938-0357) authorizing the home services for a period not to exceed 62 days; Frequency: Other (initial claim and every second claim thereafter); Affected Public: Business or other forprofit; Number of Respondents: 9,044; Total Annual Responses: 10,080,000; Total Annual Hours: 2,520,000.

2. Type of Information Collection Request: Reinstatement, without change, of a previously approved collection for which approval has expired; Title of Information Collection: Medicare/ Medicaid Disclosure of Ownership and Control Interest Statement and Supporting Regulations in 42 CFR 420.200-.206, 455.100-.106 and 45 CFR 228.72-.73; Form No.: HCFA-1513 (OMB# 0938–0086); *Use:* The Medicare/ Medicaid Disclosure of Ownership and Control Interest Statement must be used by State agencies and HCFA regional offices to determine whether providers meet the eligibility requirements for Titles 18 and 19 (Medicare and Medicaid) and for grants under Titles V and XX. Review of ownership and control is particularly necessary to prohibit ownership and control for individuals excluded under Federal fraud statutes; Frequency: Other (every 1 to 3 years); Affected Public: Business or other for-profit, and Not-for-profit institutions; Number of Respondents: 92,000; Total Annual Responses: 92,000; Total Annual Hours: 46,000.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, 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 Information Services, Information Technology Investment Management Group, Division of HCFA Enterprise Standards, Attention: Louis Blank, Room C2-26-17, 7500 Security

Boulevard, Baltimore, Maryland 21244-

Dated: July 18, 1997.

John P. Burke III,

HCFA Reports Clearance Officer Division of HCFA Enterprise Standards. Health Care Financing Administration. [FR Doc. 97-19516 Filed 7-23-97; 8:45 am] BILLING CODE 4120-03-P

DEPARTMENT OF HEALTH AND **HUMAN SERVICES**

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Pub. L. 104–13), the Health Resources and Services Administration (HRSA) will publish periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans, call the HRSA Reports Clearance Officer on (301) 443-1129.

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 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 on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project

Deferment Request Form for NHSC and NHH Scholarship Programs (OMB NO. 0915–0179) Extension, No Change

We are requesting an extension of the OMB clearance for the Deferment Request Form and associated reporting requirements for the National Health Service Corps (NHSC) Scholarship Program and the Native Hawaiian Health (NHH) Scholarship Program. The NHSC/NHH Scholarship Programs are authorized by Sections 338A and Sections 338K of the Public Health Service (PHS) Act. The requirements for obligated service, found in Section 338C of the PHS Act, include provisions for deferment of the service obligation under certain circumstances (42 USC 254m(b)(5)).

Under these programs, allopathic physicians, osteopathic physicians, dentists, nurse practitioners, nurse midwives, physician assistants, and, if needed by the NHSC or NHH program, students of other health professions (including mental health professionals) are offered the opportunity to enter into a contractual agreement with the Secretary under which the Public

Health Service agrees to pay the total school tuition, required fees and a stipend for living expenses. In exchange, the scholarship recipient agrees to provide full-time clinical services at a site in a federally designated Health Professions Shortage Areas (HPSA) of the United States. NHH scholarship recipients must be native Hawaiians and are assigned to sites in Hawaii. The minimum service obligation is 2 years.

Once scholarship recipients have completed their academic requirements, the law requires that selected types of recipients be allowed to defer their service obligation in order to complete an approved internship, residency, or other advanced clinical training.

The Deferment Request Form provides the information necessary for considering the period and type of training for which deferment of the service obligation will be approved for physicians and dentists.

In addition, these programs have two other reporting requirements for which no forms have been developed, including: (1) Individuals who are in a deferment status are required to submit requests in writing for modifications to the deferment (e.g., extension of deferment or change of residency programs); and (2) Dentists, who can either begin their service obligation immediately after graduation or can be deferred for up to three years, are required and to notify the program in writing of their intent to request deferment.

The estimated burden on respondents is as follows:

Type of report	Number of re- spondents	Hours per re- sponse	Total burden hours
Deferment Form	600 100	.5 .5	300 50
Total	700		350

Send comments to Patricia Royston, HRSA Reports Clearance Officer, Room 14-36, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this Notice.

Dated: July 18, 1997.

Jane Harrison,

Acting Director, Division of Policy Review and Coordination.

[FR Doc. 97-19481 Filed 7-23-97; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Notice of Listing of Members of the **Health Resources and Services** Administration's Senior Executive Service Performance Review Board (PRB)

The Health Resources and Services Administration (HRSA) announces the persons who will serve on the Health Resources and Services Administration's Performance Review

Board. This action is being taken in accordance with Title 5, U.S.C., Section 4313 (c) (4), which requires that members of the performance review boards be appointed in a manner to ensure consistency, stability, and objectivity in performance appraisals, and requires that notice of the appointment of an individual to serve as a member be published in the **Federal** Register.

The following persons will serve on the HRSA PRB, which oversees the evaluation of performance appraisals of HRSA's Senior Executive Service (SES) members: Thomas G. Morford, Chairperson, William A. Robinson, Neil