Dated: April 24, 1998.

Kathy Cahill,

Associate Director for Policy Planning and Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 98-11479 Filed 4-29-98; 8:45 am] BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and

[Program Announcement No. 98-CB-02-1]

Announcement of the Availability of Financial Assistance and Request for **Applications to Support a National** Resource Center for Programs Serving Abandoned Infants and Infants at Risk of Abandonment and Their Families: a National Resource Center for **Community-based Family Resource** and Support Programs; and Grants to Tribes, Tribal Organizations and Migrant Programs for Communitybased Family Resources and Support **Programs**

AGENCY: Administration on Children, Youth and Families (ACYF), ACF, DHHS.

ACTION: Notice of correction.

SUMMARY: This notice corrects the Program Announcement published in the Federal Register on April 1, 1998, (62 FR 15847) by extending the due date to June 22, 1998; by correcting the address to which completed applications are to be sent; and by amending the dollar amount available for the National Resource Center for Community-based Family Resource and Support Programs. The correct address for the submission of proposals is ACYF Operations Center, 1225 Jefferson David Highway, Suite 415, Arlington, Virginia 22201. The amount of funding available for the National Resource Center for Community-based Family Resource and Support Programs is \$675,000. FOR FURTHER INFORMATION CONTACT:

Administration on Children, Youth and Families (ACYF) Operations Center, 1225 Jefferson David Highway, Suite

415, Arlington, Virginia 22201. The telephone number is 1–800–351–2293.

SUPPLEMENTARY INFORMATION: On April 1, 1998, the Administration on Children, Youth and Families published Program Announcement Number: CB-

98–02 in the **Federal Register** soliciting proposals to conduct a National Resource Center for Programs Serving Abandoned Infants and Infants at Risk of Abandonment and Their Families; a National Resource Center for

Community-Based Family Resources and Support Programs; and Grants to Tribes, Tribal Organizations and Migrant Programs for Community-based Family Resource and Support Programs.

Due to delays in reprinting and in mailing out the application packages, potential applicants may not have sufficient time to prepare an application and this amendment extends the due date. All other requirements for mailed applications/overnight/express mail service and hand-delivered applications/applicant couriers remain the same as in the original announcement.

The address to which these proposals were to be sent was mistyped in the announcement and the dollar amount for the National Resource Center for Community-Based Family Resource and Support Programs was incorrectly given; and therefore, this amendment corrects those errors.

(Catalog of Federal Domestic Assistance Program Numbers 93.551, Abandoned Infants Assistance Program; 93.590, Child Abuse Prevention and Treatment Act)

Dated: April 21, 1998.

James A. Harrell,

Deputy Commissioner, Administration on Children, Youth and Families. [FR Doc. 98–11492 Filed 4–29–98; 8:45 am]

BILLING CODE 4184-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCFA-2008-PN]

RIN 0938-AI90

Medicare and Medicaid Programs; Recognition of the American Association for Accreditation of Ambulatory Surgery Facilities, Inc. for **Ambulatory Surgical Centers Program**

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Proposed notice.

SUMMARY: In this notice we announce the receipt of an application from the American Association for Accreditation of Ambulatory Surgery Facilities, Inc. (AAAASF) for recognition as a national accreditation program for ambulatory surgical centers that wish to participate in the Medicare or Medicaid programs. The Social Security Act requires that the Secretary publish a notice identifying the national accreditation body making the request, describing the nature of the request, and providing a 30 day public comment period.

DATES: Comments will be considered if we receive them at the appropriate address, as provided below, no later than 5:00 pm on June 1, 1998.

ADDRESSES: Mail written comments (1 original and 3 copies) to the following address: Health Care Financing Administration, Department of Health and Human Services, Attention: HCFA-2008-PN, P.O. Box 26688, Baltimore, MD 21207-5178.

If you prefer, you may deliver your written comments (1 original and 3 copies) to one of the following addresses:

Room 309-G, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201, or Room C5-09-26, 7500 Security Boulevard, Baltimore, MD 21244-

Because of staffing and resource limitations, we cannot accept comments by facsimile (FAX) transmission. In commenting, please refer to file code HCFA-1885-P. Comments received timely will be available for public inspection as they are received, generally beginning approximately 3 weeks after publication of a document, in Room 309–G of the Department's offices at 200 Independence Avenue, SW., Washington, DC, on Monday through Friday of each week from 8:30 a.m. to 5 p.m. (phone: (202) 690-7890). FOR FURTHER INFORMATION CONTACT: Joan

C. Berry (410) 786-7233.

SUPPLEMENTARY INFORMATION:

I. Background

Under the Medicare program, eligible beneficiaries may receive covered services in an ambulatory surgical center (ASC) provided certain requirements are met. Section 1832 (a)(2)(F) of the Social Security Act (the Act) includes the requirements that an ASC have an agreement in effect with the Secretary and meet health, safety, and other standards specified by the Secretary in regulations. Regulations concerning supplier agreements are at 42 CFR part 489 and those pertaining to activities relating to the survey and certification of facilities are at 42 CFR part 488. Our regulations at 42 CFR Part 416 specify the conditions that an ASC must meet in order to participate in the Medicare program, the scope of covered services, and the conditions for Medicare payment for facility services.

Generally, in order to enter into an agreement, an ASC must first be certified by a State survey agency as complying with the conditions or requirements set forth in part 416 of our regulations. Then, the ASC is subject to regular surveys by a State survey agency to determine whether it continues to meet these requirements. There is an alternative, however, to surveys by State agencies.

Section 1865(b) of the Act permits "accredited" ASCs to be exempt from routine surveys by State survey agencies to determine compliance with Medicare requirements. Section 1865(b)(1) of the Act provides that if the Secretary finds that accreditation of a provider entity by a national accreditation body demonstrates that all of the applicable conditions and requirements are met, the Secretary would deem those provider entities as meeting the applicable Medicare requirements. Hence, if the Secretary finds that the accreditation of an AŠC by a national accreditation body demonstrates that all the Medicare conditions and standards are met or exceeded, then the Secretary "deems" the requirements to be met by the ASC. Our regulations concerning approval of accrediting organizations are at §§ 488.4, 488.6, and 488.8. A national accrediting organization starts the process by requesting that the Secretary recognize its accreditation program. To date, two organizations have been recognized with deeming authority for their ASC programs: the Joint Commission on Accreditation of Healthcare Organizations and the Accreditation Association for Ambulatory Health Care.

II. Approval of Accreditation Organization

The purpose of this notice is to notify the public of the request of the American Association for Accreditation of Ambulatory Surgery Facilities, Inc. (AAAASF) for approval of its request that the Secretary find its accreditation program for ambulatory surgical centers meets or exceeds the Medicare conditions. This notice also solicits public comment on the ability of this body's requirements to meet or exceed the Medicare conditions for coverage.

Section 1865(b)(2) of the Act requires that the Secretary's findings consider the applying accreditation organization's requirements for accreditation, its survey procedures, its ability to provide adequate resources for conducting required surveys and ability to supply information for use in enforcement activities, its monitoring procedures for provider entities found out of compliance with the conditions or requirements, and its ability to provide the Secretary with necessary data for validation.

Section 1865(b)(3)(A) of the Act requires that the Secretary publish within 60 days of the receipt of a completed application, a notice

identifying the national accreditation body making the request, describing the nature of the request, and providing at least a 30 day public comment period. In addition, the Secretary has 210 days from the receipt of the request to publish a finding of approval or denial of the application.

This notice also solicits public comment on the ability of this body's requirements to meet or exceed the Medicare conditions of coverage.

III. Evaluation of Deeming Request

On November 18, 1997, the AAAASF submitted all the necessary information concerning their request for a finding by the Secretary that its accreditation program met or exceeded the Medicare conditions. Under section 1865(b)(2) of the Act and our regulations at § 488.8 ("Federal review of accreditation organizations") our review and evaluation of AAAASF is being conducted in accordance with, but not necessarily limited to, the following factors:

- The equivalency of AAAASF's requirements for an ASC to our comparable requirements for the ASC.
- AAAASF's survey process to determine the following:
- —The composition of the survey team, surveyor qualifications, and the ability of the organization to provide continuing surveyor training.
- —The comparability of its processes to that of State agencies, including survey frequency, and the ability to investigate and respond appropriately to complaints against accredited facilities.
- —The organization's procedures for monitoring providers or suppliers found by the organization to be out of compliance with program requirements. These monitoring procedures are used only when the organization identifies noncompliance. If noncompliance is identified through validation reviews, the survey agency monitors corrections as specified at § 488.7(b)(3).
- The ability of the organization to report deficiencies to the surveyed facilities and respond to the facility's plan of correction in a timely manner.
- The ability of AAAASF to provide us with electronic data in ASCII comparable code and reports necessary for effective validation and assessment of the organization's survey process.
 The adequacy of AAAASF's staff
- The adequacy of AAAASF's staff and other resources, and its financial viability.
- AÄAASF's ability to provide adequate funding for performing required surveys.

- AAAASF's policies with respect to whether surveys are announced or unannounced.
- AAAASF's agreement to provide us with a copy of the most current accreditation survey together with any other information related to the survey as we may require (including corrective action plans).

IV. Notice Upon Completion of Evaluation

Upon completion of our evaluation, including evaluation of comments received as a result of this notice, we will publish a notice in the **Federal Register** announcing the result of our evaluation.

V. Responses to Public Comments

Because of the large number of comments we normally receive on **Federal Register** documents published for comment, we are not able to acknowledge or respond to them individually. We will consider all comments we receive by the date and time specified in the **DATES** section of this preamble and will respond to them in a forthcoming rulemaking document.

(Authority: Section 1865 of the Social Security Act (42 U.S.C. 1395bb)

(Catalog of Federal Domestic Assistance Program No. 93.778, Medical Assistance Program; No. 93.773 Medicare—Hospital Insurance Program; and No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: April 6, 1998.

Nancy-Ann Min DeParle,

Administrator, Health Care Financing Administration.

[FR Doc. 98-11491 Filed 4-29-98; 8:45 am] BILLING CODE 4120-01-M

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4351-N-04]

Office of Policy Development and Research; Notice of Proposed Information Collection for Public Comment

AGENCY: Office of Policy Development and Research, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below will be submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

DATES: Comments due: June 29, 1998.