members constitute approximately 70 percent of the available lodging in the South Lake Tahoe area. The Commission's complaint alleges that SLTLA and its members entered into an agreement to suspend the use of signs advertising prices for lodging. The evidence also shows that the primary purpose of the agreement was to increase the room rates charged for lodging in the South Lake Tahoe area of Northern California and Nevada and to end what members saw as a ''destructive'' price war on motel rooms in the South Lake Tahoe area by eliminating the posting of signs advertising the prices at which its individual members offer such lodging.

According to the proposed complaint, the effects of the agreement are that price competition among providers of lodging in the South Lake Tahoe area has been reduced, and consumers have been deprived of the benefits of readily available information about the price for lodging.

The Proposed Order

The proposed Order contains provisions designed to remedy the violations charged and to prevent the respondent from engaging in similar acts and practices in the future. Part II of the proposed order would prohibit SLTLA from carrying out, participating in, inducing, suggesting, urging, encouraging, or assisting any agreement, combination or conspiracy with its members, or agreement, combination or conspiracy with some of its members, to restrict the posting of signs advertising the prices at which its individual members offer lodging. Part II would not bar SLTLA from exercising rights protected under the First Amendment to the United States Constitution to petition any federal, state or local government executive agency or legislative body concerning legislation, rules, programs, or procedures, or to participate in any federal, state or local administrative or judicial proceeding.

The proposed order also requires the respondent to amend its corporate by-laws to incorporate by reference Paragraph II of this Order; to distribute a copy of the amended by-laws to each of its members; to provide a copy of the consent agreement and complaint to all of its current members and to any new members for a period of five (5) years; and to file one or more reports detailing compliance with the order.

The purpose of this analysis is to invite public comment on the proposed order. This analysis is not intended to constitute an official interpretation of the agreement and proposed order or to modify their terms in any way.

By direction of the Commission.

Donald S. Clark,

Secretary.

[FR Doc. 98–19678 Filed 7–22–98; 8:45 am]

BILLING CODE 6750–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Health Care Policy and Research

Special Emphasis Panel Meeting

In accordance with section 10(a) of the Federal Advisory Committee Act (5 U.S.C., Appendix 2) announcement is made of the following special emphasis panel scheduled to meet during the month of August 1998:

Name: Health Care Policy and Research Special Emphasis Panel.

Date and Time: August 3–4, 1998, 8:00 a.m.

Place: Doubletree Hotel, 1750 Rockville Pike, Room TBA, Rockville, Maryland 20852.

Open August 3, 1998, 8:00 a.m. to 8:15 a.m. Closed for remainder of meeting.

Purpose: This Panel is charged with conducting the initial review of grant applications requesting dissertation support for health care research undertaken as part of an academic program to qualify for a doctorate. Also individual post-doctoral fellowship applications will be reviewed.

Agenda: The open session of the meeting on August 3, from 8:00 a.m. to 8:15 a.m. will be devoted to a business meeting covering administrative matters. During the closed session, the panel will be reviewing and discussing grant applications. In accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., Appendix 2 and 5 U.S.C., 552b(c)(6), the Administrator, AHCPR, has made a formal determination that this latter session will be closed because the discussions are likely to reveal personal information concerning individuals associated with the grant applications. This information is exempt from mandatory disclosure.

Anyone wishing to obtain a roster of members or other relevant information should contact Jenny Griffith, Committee Management Officer, Agency for health Care Policy and Research, Suite 400, 2101 East Jefferson Street, Rockville, Maryland 20852, Telephone (301) 594–1455 x 1036.

Agenda items for this meeting are subject to change as priorities dictate.

Dated: July 16, 1998.

John M. Eisenberg,

Administrator.

[FR Doc. 98–19553 Filed 7–22–98; 8:45 am]

BILLING CODE 4160–90–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Health Care Policy and Research

Special Emphasis Panel Meeting

In accordance with section 10(a) of the Federal Advisory Committee Act (5 U.S.C., Appendix 2), announcement is made of the following special emphasis panel scheduled to meet during the month of August 1998:

Name: Health Care Policy and Research Special Emphasis Panel.

Date and Time: August 6, 1998, 2:00 p.m.

Place: Agency for Health Care Policy and Research, 2101 E. Jefferson Street, Suite 400, Rockville, MD 20852.

Open August 6, 1998, 2:00 p.m. to 2:15 p.m. Closed for remainder of meeting.

Purpose: To review and evaluate grant applications.

Agenda: The open session of the meeting on August 6, from 2:00 p.m. to 2:15 p.m., will be devoted to a business meeting covering administrative matters. During the closed session, the panel will be reviewing and discussing grant applications. In accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., Appendix 2 and 5 U.S.C., 552b(c)(6), the Administrator, AHCPR, has made a formal determination that this latter session will be closed because the discussions are likely to reveal personal information concerning individuals associated with the grant applications. This information is exempt from mandatory disclosure.

Any wishing to obtain a roster of members or other relevant information should contact Jenny Griffith, Committee Management Officer, Office of Research Review, Education, and Policy, Agency for Health Care Policy and Research, Suite 400, 2101 East Jefferson Street, Rockville, Maryland 20852, Telephone (301) 594–1455, x1036.

Agenda items for this meeting are subject to change as priorities dictate.

Dated: July 16, 1998.

John M. Eisenberg,

Administrator.

[FR Doc. 98–19554 Filed 7–22–98; 8:45 am]

BILLING CODE 4160–90–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 98101]

Expanded Use of Rapid HIV Testing, and Barriers to HIV Testing; Notice of Availability of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal Year (FY) 1998

funds for a cooperative agreement program on the Expanded Use of Rapid HIV Testing, and Barriers to HIV Testing. This program addresses the ''Healthy People 2000'' priority area of HIV Infection.

The purpose of these studies is to evaluate barriers to HIV testing among persons at high risk for HIV, and to evaluate the expanded use of rapid HIV testing in a variety of public and private settings.

Applications in BOTH or EITHER of the following research areas may be submitted:

1. Studies evaluating the barriers to HIV testing among persons at high risk for HIV.

The purpose of these studies is to learn more about the use of HIV testing in personal prevention plans by interviewing persons at high risk for HIV infection who have not been tested for HIV, or persons who have not been tested recently despite ongoing risk. Of special interest are persons who may not access the health care system. These should include persons of various racial/ethnic backgrounds found by outreach to high-risk settings, or persons on the streets in areas with known high prevalence of HIV infection. The sample should be representative of all persons who are not getting tested even though they are at high risk. The study should be designed to address the following research questions:

a. What are the determinants of and barriers to getting tested for the high risk population? How can this population be segmented? What can be done to increase their likelihood of getting tested?

b. What will the preferences for different testing options be when the high risk population is offered: clinic-based counseling and testing; home collection kits with counseling and testing; and home test kits? What are the profiles of the segments which prefer each alternative?

2. Studies evaluating the expanded use of rapid HIV testing, including investigational tests, in a variety of public or private settings.

The purpose of these studies is to learn more about how individuals might use rapid HIV testing to prevent HIV infection and how programs might use rapid HIV testing to identify infected persons and refer them for care. This study should demonstrate that rapid HIV testing is reaching high-risk persons who might not otherwise be reached by existing testing services and that it is increasing the number of persons who learn their HIV serostatus.*

*For more information on the availability of licensed or candidate investigational rapid HIV tests, contact CDC at (404) 639–2090.

B. Eligible Applicants

Applications may be submitted by public and private nonprofit organizations and by governments and their agencies; that is, universities, colleges, research institutions, hospitals, other public and private nonprofit organizations, State and local governments or their bona fide agents, and federally recognized Indian tribal governments, Indian tribes, or Indian tribal organizations.

Note: Organizations described in section 501(c)(4) of the Internal Revenue Code of 1986 that engage in lobbying are not eligible to receive Federal grant/cooperative agreement funds.

Applicants are encouraged to collaborate with other organizations, such as State health departments, colleges, universities, research institutions, hospitals, correctional facilities, community organizations, and other public and private organizations (e.g., managed care organizations), to carry out project activities.

C. Availability of Funds

Approximately $1.1 million is available in FY 98 to fund approximately 4–6 awards. It is expected that the average award will be $200,000, ranging from $100,000 to $300,000. It is expected that the awards will begin on or about September 30, 1998 and will be made for a 12-month budget period within a project period of up to two years. Funding estimates may change.

Continuation awards within an approved project period will be made on the basis of satisfactory progress as evidenced by required reports and the availability of funds.

Funding Preference

Preference will be given to areas with high HIV prevalence and incidence. Geographic and population risk group diversity will also be considered.

D. Program Requirements

In conducting activities to achieve the purposes of the cooperative agreement, the recipient shall be responsible for the activities listed under 1. (Recipient Activities), and CDC shall be responsible for conducting activities listed under 2. (CDC Activities).

1. Recipient Activities

a. Develop the research study protocol and data collection forms.

b. Plan and conduct project activities and where appropriate, with the participation of state and local professional associations and health care providers and institutions serving, diagnosing, or providing treatment and care for persons with HIV/AIDS.

c. Promote the use of rapid HIV testing for HIV prevention and for linkage to care for infected persons by: (1) providing data and ongoing assistance to community planning groups; (2) disseminating data through publications and presentations.

d. Participate in project planning and implementation meetings with CDC and other collaborators, when appropriate.

e. Establish procedures to maintain the rights and confidentiality of all study participants.

f. Identify, recruit, obtain informed consent from participants (when appropriate), and enroll an adequate number of study participants as determined by study protocol and the program requirements.

g. Perform laboratory tests (when appropriate) and data analysis as determined in the study protocol.

h. Share data and specimens (when appropriate) with other collaborators to answer specific research questions.

i. Participate in multi-site data analysis and presentation and publication of research findings with collaborators, when appropriate.

j. Provide HIV counseling, appropriate to the risk of the population being studied, including referrals to needed services.

2. CDC Activities

a. Provide technical assistance in the design and conduct of the research. Provide technical assistance in the development of study protocols, consent forms, and data collection forms.

b. Assist in designing a data management system.

c. Assist in performance of selected laboratory tests.

d. Coordinate research activities among the different sites, when appropriate.

e. Assist in the analysis of research information and the presentation and publication of research findings.

E. Application Content

Use the information in the Program Requirements, Other Requirements, and Evaluation Criteria sections to develop the application content. For those applying for more than one research area described in the ''Purpose'' section above, applicants should submit a separate application for each research area proposed. Each application will be evaluated based on the evaluation criteria listed below, so it is important to follow them in laying out your

program plan. The narrative should be no more than 10 double-spaced pages, printed on one side, and with one inch margins. Applicants should include an annualized, justified budget for the current (FY98) project period.

F. Submission and Deadline

Submit the original and five copies of PHS–398 (OMB Number 0925–0001) (adhere to the instructions on the Errata Instruction Sheet for PHS 398). Forms are in the application kit.

On or before August 23, 1998 submit the application to: Juanita Crowder, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Announcement Number 98101, Centers for Disease Control and Prevention (CDC), Room 300, 255 East Paces Ferry Road, NE., Mailstop E–15, Atlanta, Georgia 30305–2209.

If your application does not arrive in time for submission to the independent review group, it will not be considered in the current competition unless you can provide proof that you mailed it on or before the deadline (i.e., receipt from U.S. Postal Service or a commercial carrier; private metered postmarks are not acceptable).

G. Evaluation Criteria

Each application will be evaluated individually against the following criteria by an independent reviewer group appointed by CDC.

1. Scientific Significance (15 Points)

Demonstrated scientific significance of the proposed study in that it provides data not otherwise available, and if appropriate, provides unique opportunities for evaluating the use of rapid HIV testing in various settings. Application should include a detailed review of the scientific literature pertinent to the study being proposed and specific research questions that will guide the research, goals and objectives for the project, and how findings can be used to guide prevention and control efforts.

2. Research Design (10 Points)

Appropriateness of the research design for addressing the specified research questions.

3. Capacity to Access (25 Points)

The extent to which the applicant demonstrates the capacity to access the relevant study population; ability to enroll appropriate number of study participants who are at high risk for HIV infection; ability to enroll a study population outside of the health care systems; extent to which size and characteristics of the study population proposed for enrollment are appropriate; investigator's experience in enrolling such persons in a culturally and linguistically appropriate manner; and letters of support from cooperating organizations that detail the nature and extent of such cooperation.

4. Experience (15 Points)

Experience in similar HIV prevention research, availability of qualified and experienced personnel, percentage-time commitments, duties, responsibilities of project personnel, and evidence of adequate facilities, equipment and plans for administration of the project.

5. Ability to Operationalize Proposed Study Methodology (Maximum of 30 Points for a and b, Below)

a. Application should include appropriate outcome measures; appropriate sampling schemes, sample size calculations, and handling of sampling biases; and plan for data collection; specific quantitative and qualitative analytic techniques to be used to answer the research questions. Where applicable, application should demonstrate capacity to obtain specimens and conduct testing, using appropriate quality assurance mechanisms. (15 points)

b. Comprehensive schedule for accomplishing the activities of the research and an evaluation plan that identifies methods and instruments for evaluating progress in designing and implementing the research objectives. Application should include time-phased and measurable objectives. (15 points)

6. Inclusion of Women, Ethnic, and Racial Groups (5 Points)

The quality of the plans to develop and implement the study, including the degree to which the applicant has met the CDC Policy requirements regarding the inclusion of women, ethnic, and racial groups in the proposed research. This includes:

a. The proposed plan for inclusion of both sexes and racial and ethnic minority populations for appropriate representation.

b. The proposed justification when representation is limited or absent.

c. A statement as to whether the design of the study is adequate to measure differences when warranted.

d. A statement as to whether the plans for recruitment and outreach for study participants include the process of establishing partnerships with community(ies) and recognition of mutual benefits.

7. Human Subjects (not Scored)

Does the application adequately address the requirements of 45 CFR Part 46 for the protection of human subjects? (not scored)

____ YES ____ NO

Comments: _____

8. Budget (not Scored)

Budgets will be reviewed to determine the extent to which they are reasonable, clearly justified, consistent with the intended use of the funds, and allowable. All budget categories should be itemized.

H. Other Requirements

Technical Reporting Requirements Provide CDC with original plus two copies of

1. quarterly progress reports;

2. financial status report, no more than 90 days after the end of the budget period; and

3. final financial status report and performance report, no more than 90 days after the end of the project period.

Send all reports to: Juanita Crowder, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), Room 300, 255 East Paces Ferry Road, NE., Mailstop E–15, Atlanta, GA 30305–2209.

The following additional requirements are applicable to this program. A complete description of each is included in the application kit.

AR98–1 Human Subjects Requirements
AR98–2 Requirements for Inclusion of Women and Racial and Ethnic Minorities in Research
AR98–4 HIV/AIDS Confidentiality Provisions
AR98–5 HIV Program Review Panel Requirements
AR98–7 Executive Order 12372 Review
AR98–9 Paperwork Reduction Act Requirements
AR98–10 Smoke-Free Workplace Requirements
AR98–11 Healthy People 2000
AR98–12 Lobbying Restrictions

I. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under Sections 301(a) and 317(k)(2) of the Public Health Service Act [42 U.S.C. 241(a) and 247b(k)(2)],as amended. The Catalog of Federal Domestic Assistance Number is 93.941.

J. Where To Obtain Additional Information

To receive additional written information and to request an application kit, call 1–888–GRANTS4 (1–888–472–6874). You will be asked to leave your name and address and will be instructed to identify the Announcement Number 98101.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from Juanita Crowder, Grants Management Specialist, Grants Management Branch, Centers for Disease Control and Prevention (CDC), Procurement and Grants Office, 255 East Paces Ferry Road, NE., Room 300, Mailstop, E–15, Atlanta, GA 30305–2209, telephone (404), 842–6577, or E-mail address: jdd2@cdc.gov.

See also the CDC home page on the Internet: *http://www.cdc.gov*

For program technical assistance, contact Kay Lawton, Deputy Chief, Prevention Services Research Branch, National Center for HIV, STD, and TB Prevention, Centers for Disease Control and Prevention, 1600 Clifton Rd., Mailstop E–46, Atlanta, GA 30333, telephone (404) 639–2090, E-mail address: *kel1@cdc.gov*.

Dated: July 17, 1998.

John L. Williams,

Director, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 98–19618 Filed 7–22–98; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Voluntary Surveys of Program Partners to Implement Executive Order 12862 in the Administration for Children and Families.

OMB No.: 0980–0266.

Description: Under the provisions of the Federal Paperwork Reduction Act of 1995 (Pub. L. 104–13), the Administration for Children and Families (ACF) is requesting clearance for instruments to implement Executive Order 12862 within the ACF. The purpose of the data collection is to obtain customer satisfaction information from those entities who are funded to be our partners in the delivery of services to the American public. ACF partners are those entities that receive funding to deliver services or assistance from ACF programs. Examples of partners are States and local governments, territories, service providers, Indian Tribes and tribal organizations, grantees, researchers, or other intermediaries serving target populations identified by and funded directly or indirectly by ACF. The surveys will obtain information about how well ACF is meeting the needs of our partners in operating the ACF programs.

Respondents: State, Local, Tribal Govt. or Not-for-Profit.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
State Governments	51	5	.33	94
Head Start grantees & Delegates	200	1	.33	66
Other Discretionary Grant Programs	200	5	.33	330
Indian Tribes & tribal organizations	25	2	.33	16.5
Estimated Total Annual Burden Hours: 496.5				

Additional Information: Copies of the proposed collection may be obtained by writing to The Administration for Children and Families, Office of Information Services, Division of Information Resource Management Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register.** Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, 725 17th Street, NW, Washington, DC 20503, Attn: Ms. Wendy Taylor.

Dated: July 17, 1998.

Bob Sargis,

Acting Reports Clearance Officer.

[FR Doc. 98–19557 Filed 7–22–98; 8:45 am]

BILLING CODE 4184–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Temporary Assistance for Needy Families (TANF) Technical Assistance Demonstration Grants

AGENCY: Office of Family Assistance, ACF, DHHS.

ACTION: Notice.

SUMMARY: The Administration for Children and Families (ACF) announces the availability of Federal funding to promote intensive joint planning and development activities at the local level that would reinforce the concept of the temporary nature of welfare, and promote self-sufficiency and employment. Funding under this announcement is authorized by section 1110 of the Social Security Act governing Social Services Research or Demonstration Projects.

DATES: The closing date for submission of applications is August 24, 1998.

Application submission: Applications may be mailed to the Department of Health and Human Services, Administration for Children and Families, Division of Discretionary Grants, 370 L'Enfant Promenade, SW, 6th Floor, Mailstop 6C–462, Washington, DC 20447.

Hand delivered applications are accepted during the normal working hours of 8:00 a.m. to 4:30 p.m., Monday through Friday, on or prior to the established closing date at: Administration for Children and Families, Division of Discretionary Grants, 6th Floor, 901 D Street, SW, Washington, DC 20447.

An application will be considered to be received on time if sent on or before