DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget, in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301)-443–1129.

The following request has been submitted to the Office of Management

and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: National Health Service Corps—A Uniform Data System; New

This is a request for approval to authorize the National Health Service Corps (NCHS), Bureau of Primary Health Care (BPHC), Health Resources and Services Administration (HRSA) to implement a modified version of the existing BPHC Universal Data System (OMB No. 0915–0093) to collect data from BPHC non-grant supported sites (NHSC Free Standing Sites) in response to Federal mandates for reports and in suppport of efficient and effective program management.

The National Health Service Corps (authorized by Public Health Service Act, Section 331) needs to collect data on its programs to ensure compliance with legislative mandates and to report to Congress and policy makers on program accomplishments. To meet these objectives, the NHSC requires a core set of information collected annually that is appropriate for monitoring and evaluating performance and reporting on annual trends. The NHSC will provide data on services, staffing, and financing. Each site will be asked to provide information on the following: services offered and delivery method; users by various characteristics; staffing and utilization; charges and collections; receivables, income and expenses; and, managed care.

Estimates of annualized reporting burden are as follows:

Type of report	Number of respondents	Responses per respond- ent	Hours per re- sponse	Total burden hours
Report	620	1	27	16,740

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Wendy A. Taylor, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: September 16, 1998.

Jane Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 98-25274 Filed 9-21-98; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General

Solicitation of Information and Recommendations for Developing OIG Compliance Program Guidance for Certain Medicare+Choice Organizations

AGENCY: Office of Inspector General

(OIG), HHS.

ACTION: Notice.

SUMMARY: This **Federal Register** notice seeks the input and recommendations of interested parties into the OIG's development of a compliance program guidance for Medicare+Choice organizations that offer coordinated care plans (M+CO/CCPs). The OIG has

previously developed compliance program guidances for hospitals, clinical laboratories and home health agencies in order to provide clear and meaningful guidance to those segments of the health care industry. In an effort to provide similar guidance to certain M+C organizations, we are soliciting comments, recommendations and other suggestions from concerned parties and organizations on how best to develop compliance program guidance and reduce fraud and abuse within M+CO/CCPs.

DATES: To assure consideration, comments must be delivered to the address provided below by no later than 5 p.m. on November 23, 1989.

ADDRESSES: Please mail or deliver your written comments, recommendations and suggestions to the following address: Office of Inspector General, Department of Health and Human Services, Attention: OIG-4-CPG, Room 5246, Cohen Building, 330 Independence Avenue, S.W., Washington, D.C. 20201.

We do not accept comments by facsimile (FAX) transmission. In commenting, please refer to file code OIG-4-CPG. 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 5527 of the Office of Inspector General at 330 Independence Avenue, S.W., Washington, D.C., on Monday through

Friday of each week from 8:00 a.m. to 4:30 p.m.

FOR FURTHER INFORMATION CONTACT: Susan Lemanski, Office of Counsel to the Inspector General, (202) 619–2078, or Joel Schaer, Office of Counsel to the Inspector General, (202) 619–0089. SUPPLEMENTARY INFORMATION:

Background

The creation of compliance program guidance has become a major initiative of the OIG in its effort to engage the private health care community in addressing and fighting fraud and abuse. Recently, the OIG has developed and issued compliance program guidance directed at various segments of the health care industry. The guidance is designed to provide clear direction and assistance to specific sections of the health care industry that are interested in reducing and eliminating fraud and abuse within their organizations.

Compliance Program Guidance for Medicare+Choice Organizations

Representatives of the managed care industry have expressed an interest in better protecting their operations from fraud and abuse. It is likely that the establishment of the new Medicare+Choice program will

¹ 63 FR 8987 (February 23, 1998) for hospitals; 63 FR 42410 (August 7, 1998) for home health agencies; and 63 FR 45076 (August 24, 1998) for clinical laboratories. The guidances can also be found on the OIG web site at http://www.dhhs.gov/ progorg/oig.

significantly expand the health care options available to Medicare beneficiaries and result in a greater number of beneficiaries enrolling in socalled "managed care" plans than ever before. Therefore, we believe that it is crucial that the organizations offering these plans have effective compliance programs in place. In fact, one of the conditions necessary to contract with the Health Care Financing Administration (HCFA) as an M+C organization is that the organization must "have administrative and management arrangements satisfactory to HCFA," including a compliance program that consists of specified elements (42 CFR 422.501(b)(3)(vi)). These elements are similar to the elements the OIG has identified in its previous compliance program guidances.

The OIG has determined that it would be appropriate to issue compliance program guidance for a subset of M+C organizations, i.e., those that offer coordinated care plans. As defined by the HCFA in 42 CFR 422.4(a)(1), a CCP is "a plan that includes a network of providers that are under contract or arrangement with the organization to deliver the benefit package approved by HCFA," and includes "health maintenance organizations (HMOs), provider-sponsored organizations (PSOs), preferred provider organizations (PPOs), religious and fraternal benefit and other network plans (except network MSA plans)." Id.

Voluntary in Nature

Compliance program guidance represents the OIG's suggestions on how entities can best establish internal controls and monitoring to correct and prevent fraudulent activities. The contents of the guidance should not be viewed as mandatory or as an exclusive discussion of the advisable elements of a compliance program. While the elements that the OIG considers necessary for a comprehensive compliance program are similar to the elements HCFA has included in its conditions to contract as an M+C organization, the planned guidance is intended to present voluntary guidance to the industry, and not represent binding standards for M+CO/CCPs.

Areas for Comment and Input in Developing This Guidance

We are seeking, through this **Federal Register** notice, formal input from all interested parties as the OIG begins developing compliance program guidance directed at M+CO/CCPs. The OIG will give consideration to all comments, recommendations and

suggestions submitted and received by the time frame indicated above.

We anticipate that the M+CO/CCP guidance will contain the seven elements that we consider necessary for a comprehensive compliance program. These seven elements have been discussed in our previous guidances and include:

- The development of written policies and procedures;
- The designation of a compliance officer and other appropriate bodies;
- The development and implementation of effective training and education;
- The development and maintenance of effective lines of communication;
- The enforcement of standards through well-publicized disciplinary guidelines;
- The use of audits and other evaluation techniques to monitor compliance; and
- The development of procedures to respond to detected offenses and to initiate corrective action (including reporting to appropriate governmental authorities)

We would appreciate specific comments, recommendations and suggestions on (1) risk areas for the M+CO/CCPs, and (2) aspects of the seven elements contained in previous guidances that may need to be modified to reflect the unique characteristics of M+CO/CCPs. Detailed justifications and empirical data supporting suggestions would be appreciated. We are also hopeful that any comments, recommendations and input be submitted in a format that addresses the above topics in a concise manner, rather than in the form of comprehensive draft guidance that mirrors previous guidance.

Dated: September 11, 1998.

June Gibbs Brown,

Inspector General.

[FR Doc. 98–25224 Filed 9–21–98; 8:45 am] BILLING CODE 4150–04–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Center for Substance Abuse Prevention; Notice of Meeting

Pursuant to Public Law 92–463, notice is hereby given of the meeting of the Center for Substance Abuse Prevention (CSAP) National Advisory Council in September 1998.

The meeting will include the review, discussion and evaluation of individual

grant applications and contract proposals. Therefore the meeting will be closed to the public as determined by the Administrator, SAMHSA, in accordance with Title 5 U.S.C. 552b(c) (3), (4) and (6) and 5 U.S.C. App. 2, Section 10(d).

Substantive program information may be obtained from the contact listed below.

Committee Name: Center for Substance Abuse Prevention National Advisory Council.

Meeting Date: September 18, 1998. Place: The Center for Substance Abuse Prevention, 5515 Security Lane, Rockwall II Building, 9th Floor, Room 901, Rockville, Maryland 20852.

Closed: September 18, 1998, 1:00 p.m. to 3:00 p.m.

Contact: Yuth Nimit, Ph.D., 5515 Security Lane, Rockwall II Building, Suite 901, Rockville, Maryland 20852, Telephone: (301) 443–8455.

This notice is being published less than 15 days prior to the meeting due to the urgent need to meet timing limitations imposed by the review and funding cycle.

Dated: September 16, 1998.

Jeri Lipov,

Committee Management Officer, Substance Abuse and Mental Health Services Administration.

[FR Doc. 98–25276 Filed 9–21–98; 8:45 am] BILLING CODE 4162–20–M

DEPARTMENT OF THE INTERIOR

Fish and Wildlife Service

Information Collection To Be Submitted to the Office of Management and Budget (OMB) for Approval Under the Paperwork Reduction Act

AGENCY: Fish and Wildlife Service, Interior.

ACTION: Information collection; request for comments.

SUMMARY: The collection of information described below has been submitted to OMB for reinstatement under the provisions of the Paperwork Reduction Act of 1995. Copies of specific information collection requirements and explanatory material may be obtained by contacting the Fish and Wildlife Service's (Service) Information Collection Clearance Officer at the address or phone number listed below. DATES: Consideration will be given to all comments received on or before October 22, 1998.

ADDRESSES: Comments and suggestions on specific requirements should be sent to the Service's Information Collection Clearance Officer, U.S. Fish and Wildlife Service, MS 222 ARLSQ, 1849