

TABLE C.—IMPACT OF HOSPICE WAGE INDEX CHANGE

	Number of hospices	Number of routine home care days in thousands	Payments using FY '98 wage index in thousands	Estimated payments using FY '98 wage index w/ SOS* in thousands	Estimated payments using FY '99 wage index w/ SOS* in thousands	Percent change in hospice payments**
	(1)	(2)	(3)	(4)	(5)	(6)
All	2,133	19,944	2,211,336	2,195,009	2,200,107	0.2
Urban Hospices	1,385	16,148	11,868,369	1,849,873	1,855,939	0.3
Rural Hospices	748	3,795	342,967	345,136	344,168	-0.3
Region (Urban):						
New England	102	568	72,785	72,694	75,979	4.5
Middle Atlantic	176	1,849	226,264	225,095	228,443	1.5
South Atlantic	182	3,825	445,473	443,033	445,646	0.6
East North Central	224	2,599	300,801	297,570	296,812	-0.3
East South Central	89	770	83,503	81,985	81,082	-1.1
West North Central	99	937	96,630	94,617	94,224	-0.4
West South Central	197	2,373	249,586	243,893	240,371	-1.4
Mountain	88	887	114,857	113,848	113,010	-0.7
Pacific	199	2,145	263,250	261,968	266,963	1.9
Puerto Rico	29	194	15,221	15,169	13,410	-11.6
Region (Rural):						
New England	21	63	6,341	6,358	6,536	2.8
Middle Atlantic	34	261	25,759	25,838	25,384	-1.8
South Atlantic	115	549	49,985	50,658	50,932	0.5
East North Central	121	442	40,906	41,264	41,511	0.6
East South Central	76	1,452	124,526	124,784	125,167	0.3
West North Central	164	399	36,089	36,241	35,127	-3.1
West South Central	82	255	22,474	22,926	21,999	-4.0
Mountain	80	175	16,739	16,806	16,831	0.1
Pacific	52	185	19,122	19,229	19,773	2.8
Puerto Rico	3	13	1,028	1,034	907	-12.3
Size (Routine Home Care Days):						
0-1,752 Days	533	417	48,237	48,051	47,757	-0.6
1,753-4,225 Days	533	1,524	152,653	151,925	151,578	-0.2
4,226-9,422 Days	533	3,420	352,974	351,698	352,436	0.2
9,422+ Days	534	14,583	1,657,472	1,643,334	1,648,336	0.3
Type of Ownership:						
Voluntary	1,373	13,516	1,492,335	1,483,835	1,492,700	0.6
Proprietary	560	5,876	664,169	656,650	653,129	-0.5
Government	172	474	47,067	46,818	46,550	-0.6
Other	28	78	7,766	7,705	7,727	0.3
Hospice Base:						
Freestanding	793	11,495	1,272,781	1,263,013	1,263,114	0.0
Home Health Agency	788	5,235	581,863	577,857	581,728	0.7
Hospital	533	3,123	344,200	341,727	342,789	0.3
Skilled Nursing Facility	19	91	12,492	12,411	12,476	0.5

*The FY 1997 data used to construct the FY 1998 wage index was adjusted to account for the site of service provision that was included in the Balanced Budget Act of 1997.

**Percent change in hospice payments made from 1997, taking into account the site of service change.

Authority: Section 1814(I) of the Social Security Act (42 U.S.C. 1395f(I)(1)) (Catalog of Federal Domestic Assistance Program No. 93.773 Medicare—Hospital Insurance Program; and No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: July 7, 1998.

Nancy-Ann Min DeParle,
Administrator, Health Care Financing Administration.

Dated: August 4, 1998.

Donna E. Shalala,
Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request: National Institutes of Health Construction Grants

SUMMARY: Under the provisions of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH), Office of the Director (OD), Office of Extramural Research (OER), Office of Policy for Extramural Research Administration (OPERA) has submitted to the Office of Management and Budget (OMB) a

request to review and approve a revision of the information collection listed below. This information was previously published in the **Federal Register** on June 2, 1998 (63 FR 30005) and allowed 60 days for public comments. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comments. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Proposed Collection

Title: National Institutes of Health Construction Grants (42 CFR Part 52b).
Type of Information Collection Request: Extension of OMB No. 0925-0424, expiration date 09/30/98. *Need and Use of Information Collection:* This is a request for OMB approval for a revision of the information collection and recordkeeping requirements contained in the final rule 42 CFR Part 52b. The purpose of the regulations is to govern the awarding and administration of grants awarded by NIH and its components for construction of new buildings and the alteration, renovation, remodeling, improvement, expansion, and repair of existing buildings,

including the provision of equipment necessary to make the building (or applicable part of the building) suitable for the purpose for which it was constructed. In terms of reporting requirements:

Section 52b.9(b) of the proposed regulations requires the transferor of a facility which is sold or transferred, or the owner of a facility, the use of which has changed, to provide written notice of the sale, transfer or change within 30 days. Section 52b.10(f) requires a grantee to submit an approved copy of the construction schedule prior to the start of construction. Section 52b.10(g) requires a grantee to provide daily construction logs and monthly status reports upon request at the job site.

Section 52b.11(b) requires applicants for a project involving the acquisition of existing facilities to provide the estimated costs of the project, cost of the acquisition of existing facilities, and cost of remodeling, renovating, or altering facilities to serve the purposes for which they are acquired.

In terms of recordkeeping requirements: Section 52b.10(g) requires grantees to maintain daily construction logs and monthly status reports at the job site. *Frequency of Response:* On occasion. *Affected Public:* Non-profit organizations and Federal agencies. *Type of Respondents:* Grantees. The estimated respondent burden is as follows:

ESTIMATED ANNUAL REPORTING AND RECORDKEEPING BURDEN

	Annual number of respondents	Annual frequency	Average burden per response	Annual burden hours
Reporting:				
§ 52b.9(b)	1	1	.50	.50
§ 52b.10(f)	15	1	1	15
§ 52b.10(g)	30	12	1	360
§ 52b.11(b)	100	1	1	100
Recordkeeping:				
§ 52b.10(g)	30	260	1	7800
Total	176	8275.50

The annualized cost to the public, based on an average of 30 active grants in the construction phase, is estimated at: \$289,642.50.

Request for Comments

Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Evaluate whether the proposed collection of information and recordkeeping are necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information and recordkeeping, including the validity of the methodology and assumptions used; (3) Enhance the quality, utility, and clarity of the information to be collected and the recordkeeping information to be maintained; and (4) Minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection and recordkeeping techniques or other forms of information technology.

FOR FURTHER INFORMATION CONTACT: To request more information contact Jerry

Moore, NIH Regulations Officer, Office of Management Assessment, National Institutes of Health, 6011 Executive Boulevard, Room 601, MSC 7669, Rockville, MD 20852, call 301-496-4607 (this is not a toll-free number), or E-mail your request to <moorej@OD.NIH.gov>.

Comments Due Date

Comments regarding this information collection and recordkeeping are best assured of having their full effect if received on or before November 4, 1998.

Dated: September 30, 1998.

Jerry Moore,

Regulations Officer, National Institutes of Health.

[FR Doc. 98-26692 Filed 10-1-98; 9:14 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**Substance Abuse and Mental Health Services Administration****Current List of Laboratories Which Meet Minimum Standards To Engage in Urine Drug Testing for Federal Agencies, and Laboratories That Have Withdrawn From the Program**

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice.

SUMMARY: The Department of Health and Human Services notifies Federal agencies of the laboratories currently certified to meet standards of Subpart C of Mandatory Guidelines for Federal Workplace Drug Testing Programs (59 FR 29916, 29925). A similar notice listing all currently certified laboratories will be published during the first week of each month, and updated to include laboratories which subsequently apply for and complete the certification process. If any listed laboratory's certification is totally suspended or revoked, the laboratory will be omitted from updated lists until such time as it is restored to full certification under the Guidelines.