local funding agency or organization. The total cost to respondents is estimated at $463,500.

Respondents	Number of respondents	Number of responses/respondents	Average burden/response in hrs.)	Total burden (in hrs.)
Noninstitutionalized household population in 50 States and D.C	102,000	1	0.30	30,600
Pretest modules	900	1	0.30	300
Total				30,900

2. The National Health and Nutrition Examination Survey (NHANES)—(0920–0237)—Revision—The National Center for Health Statistics (NCHS). The National Health and Nutrition Examination Survey (NHANES) has been conducted periodically since 1970 by NCHS. NHANES will begin again in February 1999 and will be conducted on a continuous, rather than periodic, basis from that point on. The plan is to sample about 5,000 persons annually. They will receive an interview and a physical examination. A dress rehearsal of 555 sample persons is needed to test computer-assisted personal interviews (including translations into Spanish), examination protocols, automated computer systems and quality control procedures. Participation in the dress rehearsal and main survey will be completely voluntary and confidential.

NHANES programs produce descriptive statistics which measure the health and nutrition status of the general population. Through the use of questionnaires, physical examinations, and laboratory tests, NHANES studies the relationship between diet, nutrition and health in a representative sample of the United States. NHANES monitors the prevalence of chronic conditions and risk factors related to health such as coronary heart disease, arthritis, osteoporosis, pulmonary and infectious diseases, diabetes, high blood pressure, high cholesterol, obesity, smoking, drug and alcohol use, environmental exposures, and diet. NHANES data are used to establish the norms for the general population against which health care providers can compare such patient characteristics as height, weight, and nutrient levels in the blood. Data from NHANES can be compared to those from previous surveys to monitor changes in the health of the U.S. population. NHANES will also establish a national probability sample of genetic material for future genetic research for susceptibility to disease.

Users of NHANES data include Congress; the World Health Organization; Federal agencies such as NIH, EPA, and USDA; private groups such as the American Heart Association; schools of public health; private businesses; individual practitioners; and administrators. NHANES data are used to establish, monitor, and evaluate recommended dietary allowances, food fortification policies, programs to limit environmental exposures, immunization guidelines and health education and disease prevention programs. Approval was received on 5/29/98 for only a pilot test of the revised survey—without the genetic research component. This submission requests three year approval for the dress rehearsal and the full survey, including all components.

The survey description, contents, and uses are the same as those in the **Federal Register** notice for the pilot test. The total cost to respondents for the period covered by this notice is estimated at $1,889,440.

Burden category	Number of respondents	Number of responses/respondent	Average burden/response (in hrs.)	Total burden (hours)
1. Screening interview only	40,401	1	0.167	6,747
2. Screener and household interviews only	2,130	1	0.434	924
2. Screener, household, and SP interviews only	3,198	1	1.100	3,518
3. Screener, household, and SP interviews and primary MEC exam only	15,771	1	6.613	104,294
4. Screener, household, and SP interviews, primary MEC exam and full MEC replicate exam	789	1	11.613	9,163
5. Screener, household, and SP interviews, MEC exam and dietary replicate interview only (5% + optional 15%)	3,156	1	8.363	26,394
6. Home exam	213	1	2.700	575
7. Telephone follow-up of elderly -option	3,501	1	0.750	2,626
Total				154,240

Dated: October 15, 1998.

Charles W. Gollmar,

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

[FR Doc. 98–28304 Filed 10–21–98; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA–P0015S]

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

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, has submitted to the Office of Management and Budget (OMB) the following proposal for the collection of information. Interested persons are invited to send comments regarding the 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 burden.

Type of Information Collection Request: Revision of a currently approved collection; *Title of Information Collection:* Medicare Current Beneficiary Survey: National Baseline Medicare Beneficiary Knowledge Supplement; *Form No.:* HCFA–P–0015S; *Use:* This survey will establish baseline measures of Medicare beneficiary knowledge / understanding of the Medicare program, their new choices legislated under the Balanced Budget Act (BBA) which will allow HCFA to quantify current knowledge and attribute future changes in their understanding and knowledge to HCFA information and education initiatives. *Frequency:* Biennially; *Affected Public:* Business or other for-profit; *Number of Respondents:* 16,000; *Total Annual Responses:* 16,000; *Total Annual Hours:* 2,667.

To obtain copies of the supporting statement 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 30 days of this notice directly to the OMB Desk Officer designated at the following address: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: September 28, 1998.

John P. Burke III,

HCFA Reports Clearance Officer, HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 98–28290 Filed 10–21–98; 8:45 am]

BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA–R–0153]

Agency Information Collection Activities: Submission for OMB Review; 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 summary 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 burden.

Type of Information Collection Request: Extension of a currently approved collection; *Title of Information Collection:* Drug Utilization Review and Supporting Regulations in 42 CFR 456.700, 456.705, 456.709, 456.711, and 456.712; *Form No.:* HCFA–R–153, HCFA–R–153a (OMB# 0938–0659); *Use:* These information collection requirements are necessary to establish patient profiles in pharmacies, identify problems in prescribing and/or dispensing, determine each program's ability to meet minimum standards required for Federal financial participation, and ensure quality pharmaceutical care for Medicaid patients. State Medicaid agencies that have prescription drug programs are required to perform prospective and retrospective drug use review in order to identify aberrations in prescribing, dispensing and/or patient behavior; *Frequency:* Annually; *Affected Public:* State, Local or Tribal Government, Business or other for-profit, and Not for profit institutions; *Number of Respondents:* 50; *Total Annual Responses:* 50; *Total Annual Hours:* 655,067.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access HCFA's Web Site address at http://www.hcfa.gov/regs/prdact95.htm, or E-mail your request, including your address, phone number, OMB number, and HCFA document identifier, 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 30 days of this notice directly to the OMB desk officer: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503

Dated: October 15, 1998.

John P. Burke III,

HCFA Reports Clearance Officer, HCFA Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 98–28344 Filed 10–21–98; 8:45 am]

BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice Regarding HRSA Grant Requirement—Participation in the 340B Drug Pricing Program

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: Section 602 of Public Law 102–585, the ''Veterans Health Care Act of 1992,'' enacted section 340B of the Public Health Service (PHS) Act, ''Limitation on Prices of Drugs Purchased by Covered Entities.'' Section 340B provides that a manufacturer who sells covered outpatient drugs to eligible entities must sign a pharmaceutical pricing agreement with the Secretary of HHS in which the manufacturer agrees to charge a price for covered outpatient drugs that will not exceed that amount determined under a statutory formula.

The purpose of this notice is to request comments on a proposed grant award requirement in which all entities, except those entities which fall within excepted categories, that receive HRSA grants listed in section 340B(a)(4) and that purchase or reimburse for covered outpatient drugs must participate in the 340B Drug Pricing Program, or demonstrate good cause for nonparticipation.

When the Prime Vendor program is operational, HRSA intends to publish a second **Federal Register** notice proposing an expansion of the grant award requirement to include participation in the Prime Vendor Program.

DATES: The public is invited to submit comments on the proposed grant requirement by December 21, 1998. After consideration of comments submitted, HRSA will determine whether to issue a final notice imposing the grant requirement.

ADDRESSES: Comments should be submitted to: Director, Division of Grants and Procurement Management,