

efforts relating to post acute care. Presentations are planned regarding current data collection and analysis efforts by selected post acute care settings, including nursing home, rehabilitation and home health settings. Future plans for data collection, analysis and integration also will be discussed.

**CONTACT PERSON FOR MORE INFORMATION:** Substantive program information as well as a roster of committee members may be obtained from Carolyn Rimes, Lead Subcommittee Staff, Health Care Financing Administration, DHHS, 7500 Security Boulevard, C-3-21-06, Baltimore, Maryland 21244-1850, telephone (410) 786-6620, or Marjorie S. Greenberg, Executive Secretary, NCVHS, NCHS, CDC, Room 1100, Presidential Building, 6525 Belcrest Road, Hyattsville, Maryland 20782, telephone (301) 436-7050. Additional information about the full Committee is available on the NCVHS website, where the tentative agenda for the Subcommittee meeting will also be posted when available: <http://aspe.os.dhhs.gov/ncvhs>

Dated: February 9, 1998.

**James Scanlon,**

*Director, Division of Data Policy.*

[FR Doc. 98-3699 Filed 2-12-98; 8:45 am]

BILLING CODE 4151-04-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration on Aging

[Program Announcement No. AoA-98-2]

### Fiscal Year 1998 Program Announcement; Availability of Funds and Notice Regarding Applications

**AGENCY:** Administration on Aging, HHS.

**ACTION:** Announcement of availability of funds and request for applications to carry out the functions of a National Center on Elder Abuse.

**SUMMARY:** The Administration on Aging announces that it will hold a cooperative agreement/grant award competition under this program announcement for a National Center on Elder Abuse. The deadline date for the submission of applications is April 20, 1998. Public and/or nonprofit agencies, organizations, and institutions are eligible to apply under this program

announcement. To be considered for funding, however, Center applicants must demonstrate a proven track record of expert knowledge concerning the operation and organization of elder abuse programs at national, state, and local levels, as well as the requisite organizational capacity to carry out the activities of the Center on a national scale.

Application kits are available by writing to the Department of Health and Human Services, Administration on Aging, Office of Elder Rights Protection, 330 Independence Avenue, S.W., Room 4254, Washington, DC 20201, or by calling 202/619-2044.

**Jeanette C. Takamura,**

*Assistant Secretary for Aging.*

[FR Doc. 98-3693 Filed 2-12-98; 8:45 am]

BILLING CODE 4150-40-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No.97N-0438]

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

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing that the proposed collection of information listed below has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995 (the PRA).

**DATES:** Submit written comments on the information collection by March 16, 1998.

**ADDRESSES:** Submit written comments on the collection of information to the Office of Information and Regulatory Affairs, OMB, New Executive Office Bldg., 725 17th St. NW., rm. 10235, Washington, DC, 20503, Attn: Desk Officer for FDA.

**FOR FURTHER INFORMATION CONTACT:** JonnaLynn P. Capezzuto, Office of

Information Resources Management (HFA-250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-827-4659.

**SUPPLEMENTARY INFORMATION:** In compliance with section 3507 of the Paperwork Reduction Act of 1995 (44 U.S.C. 3507), FDA has submitted the following proposed collections of information to OMB for review and clearance.

### User Fee Cover Sheet; Form FDA 3397—(OMB Control Number 0910-090297)—Reinstatement

Under section 735 and 736 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 379g and 379h), FDA has the authority to assess and collect user fees for certain drug and biologic product applications and supplements. Under this authority, pharmaceutical companies pay a fee for each new drug application, biologic product license application, biologic license application, or supplement submitted for review. Because the submission of user fees concurrently with applications and supplements is required, review of an application cannot begin until the fee is submitted. Form FDA 3397 is the user fee cover sheet, which is designed to provide the minimum necessary information to determine whether a fee is required for review of an application, to determine the amount of the fee required, and to account for and track user fees. The form provides a cross-reference of the fee submitted for an application with the actual application by utilizing a unique number tracking system. The information collected is used by FDA, Center for Drug Evaluation and Research (CDER), and Center for Biologics Evaluation and Research (CBER) to initiate the administrative screening of new drug applications, new biologic product license applications, and supplemental applications.

Respondents to this collection of information are drug and biologic product applicants.

FDA estimates the burden of this collection of information as follows:

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN

Form	No. of Respondents	Annual Frequency per Response	Total Annual Responses	Hours per Response	Total Hours
FDA 3397	200	9.44	1,888	.15	283

There are no capital costs or operating and maintenance costs associated with this collection.

Based on the agency's experience of 4 years, FDA estimates there are approximately 200 manufacturers of products subject to the Prescription Drug User Fee Act. Of the 200 manufacturers, CDER estimates 141 are drug manufacturers, and CBER estimates 59 are biologics manufacturers. CDER estimates there are 1,721 annual responses that include the following: 125 new drug applications, 1,098 chemistry supplements, 400 labeling supplements, and 98 efficacy supplements. CBER estimates there are 167 annual responses that include the following: 157 annual product supplements, and 10 original license applications.

Dated: February 9, 1998.

**William K. Hubbard,**

*Associate Commissioner for Policy Coordination.*

[FR Doc. 98-3707 Filed 2-12-98; 8:45 am]

BILLING CODE 4160-01-F

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Care Financing Administration

[HCFA-R-170]

#### 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:** Criteria for Medicare Coverage of Lung Transplants; **Form No.:** HCFA-R-170 (OMB# 0938-

0670); **Use:** Medicare participating hospitals must file an application to be approved for coverage and payment of lung transplants performed on Medicare beneficiaries; **Frequency:** Annually; **Affected Public:** Business or other for-profit; **Number of Respondents:** 16; **Total Annual Responses:** 16; **Total Annual Hours:** 1,910.

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](mailto: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: February 3, 1998.

**John P. Burke III,**

*HCFA Reports Clearance Officer, HCFA Office of Information Services, Information Technology Investment Management Group, Division of HCFA Enterprise Standards.*

[FR Doc. 98-3689 Filed 2-12-98; 8:45 am]

BILLING CODE 4120-03-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Healthy Start Initiative—Phase II: Limited Competition Within the City of Milwaukee

**AGENCY:** Health Resources and Services Administration (HRSA), HHS.

**ACTION:** Notice of availability of funds for a limited competition within the City of Milwaukee.

**SUMMARY:** The HRSA announces the availability funds in fiscal year 1998 for a single cooperative agreement for the replication of the Healthy Start Initiative (HSI) Phase II within the City of Milwaukee. The Healthy Start Initiative is a program of projects which, since FY 1991, has developed and implemented community-based strategies to reduce infant mortality in areas with a high incidence of infant mortality. The purpose of Healthy Start-Phase II is to operationalize successful infant mortality reduction strategies developed

during the demonstration phase and to launch Healthy Start projects in new rural and urban communities (i.e., communities currently without a Healthy Start Initiative-funded project). Within the HRSA, the Healthy Start Initiative is administered by the Maternal and Child Health Bureau (MCHB). This cooperative agreement for Healthy Start-Phase II in the city of Milwaukee will be made under the program authority of Section 301 of the Public Health Service Act. Funds for this award were appropriated under Public Law 104-208.

To continue Healthy Start efforts to meet critical maternal and child health needs within the City of Milwaukee, public and nonprofit private organizations within the City of Milwaukee are encouraged to apply.

**DATES:** The application deadline date is Friday, February 20, 1998.

**ADDRESS:** Interested parties may contact the HRSA Grants Application Center for an application package. Requests should specify the Healthy Start Initiative—Phase II limited competition within the City of Milwaukee (CFDA #93.926b). The Center may be contacted by: **telephone:** 1-888-300-HRSA, **FAX:** 301-309-0579, or **e-mail:** [HRSA.GAC@x.netcom.com](mailto:HRSA.GAC@x.netcom.com). **Completed applications should be returned to:** Grants Management Officer (CFDA #93.926b), HRSA Grants Application Center, 40 West Gude Drive, Suite 100, Rockville, Maryland 20850.

Dated: February 9, 1998.

**Claude Earl Fox,**

*Acting Administrator.*

[FR Doc. 98-3705 Filed 2-12-98; 8:45 am]

BILLING CODE 4160-15-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### National Practitioner Data Bank; Change in User Fee and Elimination of Diskette Queries

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Withdrawal.

**SUMMARY:** National Practitioner Data Bank; Change in User Fee and Elimination of Diskette Queries notice, document 98-2637, pages 5811-5812, Volume 63, Number 23, in the issue of Wednesday, February 4, 1998, was published in error and is withdrawn from publication.

The correct version of the notice was published on Thursday, January 29,