

However, the second day of the meeting (May 19) is subject to cancellation. The agenda will include a detailed discussion of a standard benefit package, a detailed discussion and possible decision on the government contribution, and any other issues outstanding.

A fourth meeting of the Maricopa County AAC will take place on June 7 and 8, 1999. However, the second day of the meeting (June 8) is subject to cancellation. This meeting will summarize the decisions made in earlier meetings, decide on the standard benefit package, and continue the discussions and make final decisions on any outstanding issues from the previous meetings.

Individuals or organizations that wish to make 5-minute oral presentations on the agenda issues mentioned in the three preceding paragraphs should contact the San Francisco Regional Administrator by 12 noon for each of the following days:

May 7, 1999, for the third meeting.
May 27, 1999, for the fourth meeting.

Anyone who is not scheduled to speak may submit written comments to the San Francisco Regional Administrator by:

May 11, 1999, for the third meeting.
May 28, 1999, for the fourth meeting.
These meetings are open to the public, but attendance is limited to space available.

Authority: Section 4012 of the Balanced Budget Act of 1997, Pub. L. 105-33 (42 U.S.C. 1395w-23 note) and section 10(a) of Pub. L. 92-463 (5 U.S.C. App.2, Section 10(a)).

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; and Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: April 28, 1999.

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

[FR Doc. 99-11062 Filed 4-30-99; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources And Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Public Law 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, call the HRSA Reports Clearance Officer on (301) 443-1891.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the

use of automated collection techniques or other forms of information technology.

Proposed Project: Uncompensated Services Reporting and Recordkeeping—42 CFR 124, Subpart F (OMB No. 0915-0077): Revision

Titles VI and XVI of the Public Health Service Act, commonly known as the Hill-Burton Act, provide for government grants and loans for construction or renovation of health care facilities. As a condition of receiving this construction assistance, facilities are required to provide a "reasonable volume" of services to persons unable to pay. Facilities are also required to provide assurances periodically that the required level of uncompensated care is being provided, and to follow certain notification and recordkeeping procedures. These requirements are referred to as the uncompensated services assurance.

The regulations contain provisions for reporting to the government the amount of free care provided, as well as provisions for following certain notification and recordkeeping procedures. All of these regulations are included in this clearance request. The Uncompensated Services Assurance Report (USAR) (HRSA form 710) is one of the methods of reporting the amount of free care provided. There are no changes to the USAR form. There will be a significant reduction in the burden from the previous request for OMB approval since many facilities have met their obligations over the last 3 years. In addition, now that most now facilities are having a substantial compliance review done annually, very few facilities need to submit the USAR form. Burden estimates are as follows:

Requirement	Number of respondents	Responses per respondent	Total responses	Burden per response	Total burden hours
Disclosure requirements (42 CFR):					
Published Notices (124.504 (a))	389	1	389	.75	292
Individual Notices (124.504 (c))	389	1	389	43.6	16,960
Determinations of Eligibility (124.507)	389	396	154,044	.75	115,533
Reporting Requirements Form 710:					
USAR (124.509 (a))	10	1	10	11	110
Complaint Information 124.511 (a):					
Individuals	10	1	10	.25	3
Facilities	10	1	10	.5	5
Application for Compliance Alternative for Public Facilities (124.513 (c))	4	1	4	6	24
Annual Certification for Public Facilities (124.509 (b))	195	1	195	.5	98
Application for Compliance Alternative for Small Obligation Facilities (124.514(c))	0	0	0	0	0
Annual Certification for Small Obligation Facilities (124.509(c))	1	1	1	.5	1
Application for Compliance Alternative for Charitable Facilities (124.516(c))	2	1	2	6	12

Requirement	Number of respondents	Responses per respondent	Total responses	Burden per response	Total burden hours
Annual Certification for Charitable Facilities (124.516(c))	26	1	26	.5	13
Subtotal: Reporting and Disclosure					133,051

Requirement	Number of recordkeepers	Hours	Recordkeeping burden
Nonalternative Facilities (124.510(a))	389	50	19,450
Small Obligation Facilities (124.510(b))	*0	0	0
Public Facilities (124.510(b))	*0	0	0
Charitable Facilities (124.510(b))	0	0	0
Subtotal: Recordkeeping			19,450

*Requires facilities under the public facilities compliance alternative, the charitable facilities compliance alternative, and the small obligation compliance alternative to maintain qualification documents. These are ordinarily retained by facilities, so there is no burden.

Total burden for this project is estimated to be 152,501 hours. Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 14-33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: April 27, 1999.

Jane Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 99-11050 Filed 4-30-99; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources And Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Public Law 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the

proposed project or to obtain a copy of the data collection plans and draft instruments, call the HRSA Reports Clearance Officer on (301) 443-1891.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: Progress Reports for Continuation Training Grants (OMB No. 0915-0061)—Extension

The HRSA Progress Reports for Continuation Training Grants are used for the preparation and submission of continuation applications for Title VII and VIII health professions and nursing education and training programs. The Uniform Progress Report measures grantee success in meeting (1) the objectives of the grant project and (2) the cross-cutting outcomes developed for the Bureau's education and training programs. The first part of the progress report is designed to collect information to determine whether sufficient progress

has been made on the approved project objectives, as grantees must demonstrate satisfactory progress to warrant continuation of funding. The second part of the progress report contains selected tables from the Comprehensive Performance Management System (CPMS) reflecting the seven indicators that have been identified. Progress will be measured based on the objectives of the grant project and outcome measures and indicators developed by the Bureau to meet requirements of the Government Performance and Results Act (GPRA).

To respond to the requirements of GPRA, the Bureau developed goals, outcomes and indicators that provide a framework for collection of outcome data for its Titles VII and VIII programs. An outcome based performance system is critical for measuring whether program support is meeting national health workforce objectives. At the core of the performance measurement system are found cross-cutting goals with respect to workforce quality, supply, diversity and distribution of the health professions workforce. A demonstration project to assess availability of the data needed to support the indicators was conducted, and data from this project are currently being analyzed.

The progress report will be completely automated in fiscal year 2000, allowing the grantees to obtain, complete, and submit the report electronically.

The burden estimate is as follows:

Form	Number of respondents	Response per respondent	Total responses	Hours per response	Total burden hours
Progress Report	800	1	800	20	16,000