Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: November 22, 1999.

### John Parmigiani,

Manager, HCFA Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 99–31992 Filed 12–9–99; 8:45 am]

BILLING CODE 4120-03-M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **Health Care Financing Administration**

[Document Identifier: HCFA-0377/0378/R-0054]

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

**AGENCY:** Health Care Financing Administration.

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: Request for Certification, HCFA-377 and the Ambulatory Surgical Center Survey Report Form, HCFA-378 and HCFA-R-0054 Supporting Regulations Contained in 42 CFR 416.1 thru 416.150; Form No.: HCFA-0377/0378/R-0054 (OMB# 0938-0266); Use: The ambulatory surgical center (ASC) request for certification form is utilized as an application for facilities wishing to participate in the Medicare program as an ASC. This form initiates the process of obtaining a decision as to whether the conditions of coverage are met. It also promotes data retrieval from the Online Data Input Edit (ODIE system, a subsystem of the

Online Survey Certification and Report (OSCAR) system by HCFA's Regional Offices (RO)). The ASC report form is an instrument used by the State survey agency to record data collection in order to determine supplier compliance with individual conditions of coverage and to report it to the Federal government. The form is primarily a coding worksheet designed to facilitate data reduction and retrieval into the ODIE/OSCAR system at the HCFA ROs. This form includes basic information on compliance (i.e., met, not met and explanatory statements) and does not require any descriptive information regarding the survey activity itself; Frequency: Annually and Other: One-time; *Affected* Public: Business or other for-profit; State, Local, or Tribal Government; Number of Respondents: 2,798; Total Annual Responses: 2,931; Total Annual Hours: 1,434.

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: November 10, 1999.

### John Parmigiani,

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

[FR Doc. 99–32035 Filed 12–9–99; 8:45 am] **BILLING CODE 4120–03–P** 

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Health Resources and Services Administration

# Statement of Organization, Functions, and Delegations of Authority

This notice amends Part R of the Statement of Organization, Functions and Delegations of Authority of the Department of Health and Human Services (DHHS), Health Resources and Services Administration (60 FR 56605 as amended November 6, 1995, as last amended at 64 FR 46694–6, dated August 26, 1999).

This notice is to reflect the Order of Succession for the Health Resources and Services Administration (HRSA).

Section R–30 Order of Succession.

During the absence or disability of the Administrator or in the event of a vacancy in that office, the first official listed below who is available shall act as Administrator, except that during a planned period of absence, the Administrator may specify a different order of succession. The order of succession will be:

- 1. Deputy Administrator;
- 2. Associate Administrator, Office of Management and Program Support;
- 3. Associate Administrator, Bureau of Primary Health Care;
- 4. Associate Administrator, Bureau of Health Professions;
- 5. Associate Administrator, HIV/AIDS
- 6. Associate Administrator, Maternal and Child Health Bureau; and
- 7. Associate Administrator, Office of Field Operations

Section R–40, Delegation of Authority.

All delegations and redelegations of authorities to officers and employees of the Health Resources and Services Administration which were in effect immediately prior to the effective date of this action will be continued in effect in them or their successors, pending further redelegation, provided they are consistent with this action.

This document is effective upon date of signature.

Dated: November 29, 1999.

# Claude Earl Fox,

Administrator.

[FR Doc. 99–32003 Filed 12–9–99; 8:45 am] BILLING CODE 4160–15–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# **Health Resources and Services Administration**

# Privacy Act of 1974; New System of Records

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

**ACTION:** Notification of New System of Records.

**SUMMARY:** In accordance with the requirements of the Privacy Act, the Health Resources and Services Administration (HRSA) is publishing notice of a proposal to add a new system of records. The Ricky Ray Hemophilia Relief Fund Act of 1998 ("the Act")

established the Ricky Ray Hemophilia Relief Program which is designed to compensate certain individuals with blood-clotting disorders, such as hemophilia, who were infected with HIV through the use of plasma derivatives administered between July 1, 1982 and December 31, 1987. The Act will also compensate certain individuals who acquired HIV through contact with the foregoing persons. This system of records is required to comply with the implementation directives of Public Law 105-369, the Ricky Ray Hemophilia Relief Fund Act of 1998. The records will be used for Program planning, implementation, evaluation, monitoring, and documentation storage purposes.

DATES: HRSA invites interested parties to submit comments on the proposed New System of Records on or before January 19, 2000. HRSA has sent a Report of New System of Records to Congress and to the Office of Management and Budget (OMB) on November 24, 1999. The New System of Records will be effective 40 days from the date submitted to OMB unless HRSA receives comments which would result in a contrary determination.

ADDRESSES: Please address comments to Health Resources and Services Administration (HRSA) Privacy Act Officer, 5600 Fishers Lane, Room 14A–20, Rockville; Maryland 20857; telephone (301) 443–3780. Comments received will be available for inspection at this same address from 9 a.m. to 3 p.m., Monday through Friday. This is not a toll-free number.

### FOR FURTHER INFORMATION CONTACT:

Program Manager, Ricky Ray Program Office, Bureau of Health Professions, Room 8–05, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857; telephone (301) 443–2330. This is not a toll-free number.

SUPPLEMENTARY INFORMATION: The Health Resources and Services Administration (HRSA) proposes to establish a new system of records: 09–15–0061: "Ricky Ray Hemophilia Relief Fund Act of 1998, HHS/HRSA/BHPr". The Ricky Ray Hemophilia Relief Fund Act of 1998 (the "Act") established the Ricky Ray Hemophilia Program (the "Program") which is designed to compensate any individual who has an HIV infection where the individual:

- (a) Has any form of a blood clotting disorder, such as hemophilia, and was treated with antihemophilic factor (a plasma derivative) between July 1, 1982, and December 31, 1987;
- (b) Is the lawful spouse of the individual described above;

(c) Is the former spouse of the individual described in paragraph (a) who was the lawful spouse of such individual between July 1, 1982, and December 31, 1987, and who can assert with reasonable medical certainty that there was a transmission of the HIV from the individual described in paragraph (a); or

(d) Acquired the HIV infection through perinatal transmission from a parent who is an individual described in paragraphs (a), (b), or (c).

Subject to the availability of appropriations, the Program will provide payments of \$100,000 to the estimated 7,200 people suffering from blood clotting disorders, such as hemophilia, or survivors of such individuals, who were infected with the HIV virus as a result of using plasma derivatives between July 1982 and December 1987. This compensation is intended to help offset the past and future expense of medical treatment for HIV. The Federal Register notice, published March 24, 1999 (64 FR 14251), announces procedures for filing Notices of Intent to File Petitions for payment under the law which was enacted on November 12, 1998. No funds have been appropriated either for the payment of awards to petitioners or for the administrative costs to HHS for operating this new program. Nevertheless, the Act states states that HHS shall establish procedures to implement the Act within 120 days of its enactment. This system of records is required to comply with the implementation directive. It will be used for program planning, implementation, evaluation, monitoring, and documentation storage purposes. The Notice of Intent shall include (1) the name of the petitioner, with current address and phone number, and (2) the name, address, and phone number of the petitioner's attorney of record or other representative for the petition, if any. The Notice will be sent to The Ricky Ray Program Office, HRSA/BHPr, and an acknowledgment will be returned to the petitioner reflecting a case number assignment.

HRSA will permit disclosure of the records to third parties pursuant to the following routine uses. The first routine use permits disclosure to a Congressional office to allow subject individuals to obtain assistance from their representatives in Congress, if they so desire. The second routine use allows disclosure to the Department of Justice or a court, in the event of litigation. The third routine use allows disclosure of records to contractors for the purposes of data analysis and record systems processing and refinement. The fourth routine use allows disclosure to

contractors, medical personnel and others needed to review, verify and validate petitions.

The following notice is written in the present tense, rather than the future tense, in order to avoid the unnecessary expenditure of public funds to republish the notice after the system becomes effective.

Dated: November 24, 1999.

#### Claude Earl Fox,

Administrator.

#### 09-15-0061

#### SYSTEM NAME:

Ricky Ray Hemophilia Relief Fund Act of 1998, HHS/HRSA/BHPr

### SECURITY CLASSIFICATION:

None.

#### SYSTEM LOCATION:

Ricky Ray Program Office, Bureau of Health Professions, Health Resources and Services Administration, Room 8– 05, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857.

# CATEGORIES OF INDIVIDUALS COVERED BY THE SYSTEM:

Petitioners and/or their representatives (if any) filing for compensation under the Ricky Ray Hemophilia Relief Fund Act of 1998.

# CATEGORIES OF RECORDS IN THE SYSTEM:

Records consist of documents which may include general or Congressional correspondence, Notice of Intent to File a Petition, case number assignment, HHS responses, medical and legal documentation, payment information, and other related case processing documents.

### **AUTHORITY FOR MAINTENANCE OF THE SYSTEM:**

The authority for management of the system is governed by Pub. L. 105–369, Ricky Ray Hemophilia Relief Fund Act of 1998, enacted November 12, 1998 (42 U.S.C. 300c–22) which provides for compassionate payments with regard to certain individuals with blood-clotting disorders, such as hemophilia, who contracted human immunodeficiency virus (HIV) due to contaminated antihemophilic factor within specified time periods.

# ROUTINE USES OF RECORDS MAINTAINED IN THE SYSTEM, INCLUDING CATEGORIES OF USERS AND THE PURPOSES OF SUCH USES:

- 1. Disclosure may be made to a Congressional office from the record of an individual petitioner, in response to an inquiry from the Congressional office made at the request of the petitioner.
- 2. In the event of litigation where the defendant is:

- (a) The Department, any component of the Department, or any employee of the Department in his or her official capacity;
- (b) The United States where the Department determines that the claim, if successful, is likely to directly affect the operations of the Department or any of its components; or
- (c) Any Department employee in his or her individual capacity where the Justice Department has agreed to represent such employee, for example in defending against a claim based upon an individual's mental or physical condition and alleged to have arisen because of activities of the Public Health Service in connection with such individual, the Department may disclose such records as it deems desirable or necessary to the Department of Justice to enable that Department to present an effective defense, provided that such disclosure is compatible with the purpose for which the records were collected.
- 3. HRSA may disclose records to Department contractors and subcontractors for the purposes of conducting data analysis for program evaluations, compiling managerial and statistical reports, and record systems processing and refinement.
- 4. HRSA may contract with expert consultants for the purpose of obtaining advice on petitioner's eligibility for compensation.

Relevant records may be disclosed to such consultants. The consultants shall be required to maintain Privacy Act safeguards with respect to such records and return all records to HRSA.

5. In the event that a system of records maintained by this agency to carry out its functions indicates a violation or potential violation of law, whether civil, criminal, or regulatory in nature, and whether arising by general statute or particular program statute, regulation, rule, or order issued pursuant thereto, the relevant records in the system of records may be referred to the appropriate agency, whether Federal, State or local, charged with the responsibility of investigating or prosecuting such violation, or charged with enforcing or implementing the statute, rule, regulation or order issued pursuant thereto, provided that such disclosure is compatible with the purpose for which records were collected.

POLICIES AND PRACTICES FOR STORING, RETRIEVING, ACCESSING, RETAINING AND DISPOSING OF RECORDS IN THE SYSTEM:

#### STORAGE

Records are maintained in file folders, on computer hard drives and/or disk packs.

#### RETRIEVABILITY:

Retrievability will be by case number and/or name of petitioner.

### SAFEGUARDS:

1. Assign Responsibility for Security: Assign responsibility for security to a management official knowledgeable in the nature of the information and process supported by the application and in the management, personnel, operational, and technical controls used to protect it.

2. Perform Risk Assessment: A risk assessment shall be conducted in conjunction with the development of and prior to the approval of the system design and shall ensure that vulnerabilities, risks, and other security concerns are identified and addressed in the system design and throughout the life cycle of the project. This shall be consistent with the HHS Automated Information Systems Security Program Handbook (in particular Chapters V and X).

- 3. Develop Application Security Plan: Plan for the adequate security of the application, taking into account the security of all systems in which the application will operate. Application security plans shall address application rules, training on use of the system, personnel security, contingency planning, technical controls, information sharing, and public access controls.
- 4. Review Application Controls: Perform an independent review or audit of the security control in the application at least every 3 years.
- 5. Authorize Processing: Ensure that a management official authorizes in writing confirming that its security plan as implemented adequately secures the application. The application must be authorized prior to operating and reauthorized at least every 3 years thereafter. Management authorization implies accepting the risk of each system used by the application.

6. Implementation Guidelines: DHHS Chapter 45–13 and supplementary Chapter PHS.hf: 45–13 of the General Administration Manual; the DHHS Automated Information Systems Security Program Handbook; and Appendix III to OMB Circular No. A–130; Appendix I, "Federal Agency Responsibilities for Maintaining Records About Individuals."

#### RETENTION AND DISPOSAL:

Records will be retained for 6 years after the program is closed, and then destroyed.

### SYSTEM MANAGER(S) AND ADDRESS:

Program Manager, Ricky Ray Program Office, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 8–05, 5600 Fishers Lane, Rockville, MD 20857.

#### NOTIFICATION PROCEDURE:

Requests must be made to the System Manager.

Requests in person: An individual who appears at the site where records are stored seeking access to or disclosure of records relating to him/her shall provide his/her name, current address, and at least one piece of identification such as driver's license, passport, voter registration card, or union card. Identification with a current photograph is preferred but not required. Additional identification may be requested when there is a request for access to records which contain an apparent discrepancy between information contained in the records and that provided by the individual requesting access to the records. No verification of identity shall be required where the record is one which is required to be disclosed under the Freedom of Information Act.

Requests by mail: Requests for information and/or access to records received by mail must contain information providing the identity of the writer and a reasonable description of the record desired. Written requests must contain the name and address of the requester, his/her date of birth and his/her signature for comparison

Requests by telephone: Since positive identification of the caller cannot be established, telephone requests are not honored.

# RECORD ACCESS PROCEDURES:

Same as notification procedures. Requesters should also reasonably specify the record contents being sought. Individuals may also request an accounting of disclosures that may have been made of their records, if any.

# CONTESTING RECORDS PROCEDURES:

Contact the System Manager at the address specified above and reasonably identify the record, specify the information being contested, and state the corrective action and the reason(s) for requesting the correction, along with supporting justification to show how the record is inaccurate, incomplete, untimely, or irrelevant.

#### RECORD SOURCE CATEGORIES:

Petitioners and/or their representatives under the Ricky Ray Hemophilia Relief Fund Act of 1998.

# SYSTEMS EXEMPTED FROM CERTAIN PROVISIONS OF THE ACT:

None.

[FR Doc. 99–31696 Filed 12–9–99; 8:45 am] BILLING CODE 4160–15–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **National Institutes of Health**

# National Institutes of Mental Health; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of what would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Mental Health and Special Emphasis Panel. Date: December 8, 1999.

Time: 2 p.m. to 4 p.m.

Agenda: To review and evaluate grant applications.

\*Place: Neuroscience Center, National Institutes of Health, 6001 Executive Blvd., Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: L.R. Stanford, PhD., Scientific Review Administrator, Division of Extramural Activities, National Institute of Mental Health, NIH, Neuroscience Center, 6001 Executive Blvd., Room 6138, MSC 9606, Bethesda, MD 20892–9606, 301–443–6470.

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

(Catalogue of Federal Domestic Assistance Program Nos. 93–242, Mental Health Research Grants; 93.281, Scientist Development Award, Scientist Development Award for Clinicians and Research Scientist Award; 93.282, Mental Health National Research Service Awards for Research Training, National Institutes of Health, HHS)

Dated: December 2, 1999.

# LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 99–32016 Filed 12–9–99; 8:45 am]

BILLING CODE 4140-01-M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **National Institutes of Health**

# National Institute of Child Health and Human Development; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Child Health and Human Development Special Emphasis Panel Methylationdependent Transcriptional Repression (K22) SEP

Date: December 16, 1999.

Time: 12 p.m. to 1:30 p.m.

*Agenda:* To review and evaluate grant applications.

Place: 6100 Executive Blvd., 5th Floor, Rockville, MD 20852 (Telephone Conference Call).

Contact Person: Gopal M. Bhatnagar, Phd, Scientific Review Administrator, Division of Scientific Review, National Institute of Child Health and Human Development, National Institutes of Health, PHS, DHHS, 9000 Rockville Pike, 6100 Bldg., Room 5E01, Bethesda, MD 20892, (303) 496–1485.

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

(Catalogue of Federal Domestic Assistance Program Nos. 93.209, Contraception and Infertility Loan Repayment Program; 93.864, Population Research; 93.865, Research for Mothers and Children; 93.929, Center for Medical Rehabilitation Research, National Institutes of Health, HHS)

Dated: December 2, 1999.

### LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 99–32018 Filed 12–9–99; 8:45 am]

BILLING CODE 4140-01-M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

# Center For Scientific Review; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* Center for Scientific Review Special Emphasis Panel.

*Date:* December 10, 1999.

Time: 9:15 a.m. to 11:15 a.m.

*Agenda:* To review and evaluate grant applications.

*Place:* NIH, Rockledge 2, Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: Priscilla B. Chen, PhD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4104, MSC 7814, Bethesda, MD 20892, (301) 435– 1787

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

Name of Committee: Center for Scientific Review Special Emphasis Panel.

Date: December 16, 1999.

Time: 9 a.m. to 11 a.m.

Agenda: To review and evaluate grant applications.

*Place:* NIH, Rockledge 2, Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: Priscilla B. Chen, PhD, Scientific Review Administrator, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4104, MSC 7814, Bethesda, MD 20892, (301) 435– 1787

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

Name of Committee: Center for Scientific Review Special Emphasis Panel, ZRG1 MBC– 102.

Date: December 16, 1999.

Time: 1:00 p.m. to 2:30 p.m.

Agenda: To review and evaluate grant applications.

Place: NIH, Rockledge 2, Bethesda, MD 20892, (Telephone Conference Call). Contact Person: Martin Slater, PhD,

Scientific Review Administrator, Center for