

facilities in rural and health professional shortage areas and determining the effects of personnel on access to the services of such facilities in such areas; (8) determining whether there will exist a sufficient number of medical physicists after October 1, 1999; and (9) determining the costs and benefits of compliance with these requirements.

#### Qualifications

##### *Panels of the Medical Devices Advisory Committee*

Persons nominated for membership on the panels shall have adequately diversified experience appropriate to the work of the panel in such fields as clinical and administrative medicine, engineering, biological and physical sciences, statistics, and other related professions. The nature of specialized training and experience necessary to qualify the nominee as an expert suitable for appointment may include experience in medical practice, teaching, and/or research relevant to the field of activity of the panel. The particular needs at this time for each panel are shown above. The term of office is up to 4 years, depending on the appointment date.

##### *National Mammography Quality Assurance Advisory Committee*

Persons nominated for membership should be physicians, practitioners, and other health professionals, whose clinical practice, research specialization, or professional expertise include a significant focus on mammography and individuals identified with consumer interests. Prior experience on Federal public advisory committees in the same or similar subject areas will also be considered relevant professional expertise. The particular needs are shown above. The term of office is up to 4 years, depending on the appointment date.

#### Nomination Procedures

Any interested person may nominate one or more qualified persons for membership on one or more of the advisory panels or advisory committees. Self-nominations are also accepted. Nominations shall include a complete curriculum vitae of each nominee, current business address and telephone number, and shall state that the nominee is aware of the nomination, is willing to serve as a member, and appears to have no conflict of interest that would preclude membership. FDA will ask the potential candidates to provide detailed information concerning such matters as financial holdings,

employment, and research grants and/or contracts to permit evaluation of possible sources of conflict of interest.

#### *Consumer Representatives*

Any interested person may nominate one or more qualified persons as a member of a particular advisory committee to represent consumer interests as identified in this notice. To be eligible for selection, the applicant's experience and/or education will be evaluated against Federal civil service criteria for the position to which the person will be appointed.

Selection of members representing consumer interests is conducted through procedures that include use of a consortium of consumer organizations that has the responsibility for recommending candidates for the agency's selection. Candidates should possess appropriate qualifications to understand and contribute to the committee's work.

Nominations shall include a complete curriculum vita of each nominee and shall state that the nominee is aware of the nomination, is willing to serve as a member, and appears to have no conflict of interest that would preclude membership. FDA will ask the potential candidates to provide detailed information concerning such matters as financial holdings, employment, and research grants and/or contracts to permit evaluation of possible sources of conflict of interest. The nomination should state whether the nominee is interested only in a particular advisory committee or in any advisory committee. The term of office is up to 4 years, depending on the appointment date.

This notice is issued under the Federal Advisory Committee Act (5 U.S.C. app. 2) and 21 CFR part 14 relating to advisory committees.

Dated: September 1, 2000.

**Linda A. Suydam,**

*Senior Associate Commissioner.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Care Financing Administration

[Document Identifiers: HCFA-R-267 (OMB #0938-0753)]

### Intent of Clearance: Public Information Collection Meeting To Discuss Requirements To Be Submitted to the Office of Management and Budget (OMB)

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, in the near future, the Health Care Financing Administration (HCFA), Department of Health and Human Services (DHHS), will be submitting to the Office of Management and Budget (OMB) a request for review of the proposed Appeals Data Collections System for Managed Care Organizations (M+COs)

In order to seek public input at this early juncture and before we seek approval for this information collection from OMB, HCFA will be holding a town hall meeting to discuss the goals of the proposed Appeals Data Collection System for M+COs, issues that may surround it, and the required data elements associated with it.

Interested persons are invited to participate in a public discussion about various aspects 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 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.

*Dates:* The meeting is scheduled for September 25, 2000 from 10 a.m. until 4 p.m., E.D.T.

### Persons Interested in Attending or Requesting More Information Should Contact

Brandon Bush, (410) 786-0028 ([Bbush@HCFA.GOV](mailto:Bbush@HCFA.GOV)) Project Coordinator; John Burke, (410) 786-1325 ([JBurke1@HCFA.GOV](mailto:JBurke1@HCFA.GOV)) PRA Reports Clearance Officer.

### SUPPLEMENTARY INFORMATION:

#### Background

At present, we capture data on "plan level" appeal activities at the Medicare + Choice Organizations (M+COs), namely those managed care appeals not resolved at the M+CO level and which

have automatically proceeded to a higher level of review by HCFA's independent contractor. We do not yet capture data on plans' internal appeal activity. Therefore, since our current data collection efforts represent only a portion of a M<sup>+</sup>CO's total appeal activity, it is insufficient to (1) assess plans' performance and provide feedback for improvement of their appeals process; and (2) review "enrollee-specific" appeal trends. (3) allow beneficiaries to make plan to plan comparisons based on the depth of sufficient data.

Through Operational Policy Letters (O.P.Ls) and **Federal Register** notices as well as industry association and beneficiary group meetings, we have made clear our intent to implement a data collection system to which M<sup>+</sup>COs will be required to periodically submit their appeal activity. Prior to finalizing the design of the data collection system, we are interested in validating our requirements of M<sup>+</sup>COs through a public process involving those who will use the information (for example, beneficiaries, M<sup>+</sup>COs, researchers, other purchasers, the public, and us). This public venue will afford us the opportunity to educate the users about our efforts to assist beneficiaries in making informed decisions when choosing plans. It will also serve to educate participants about the breadth of data that can be collected, and to receive input on data to be collected.

### Agenda

The meeting will begin at 10 a.m. with an introduction to the system. We will give an overview to the participants of the proposed data elements to be considered. Informational booklets and writing materials will be provided at the meeting.

After the introduction and initial discussion, participants will be able to break up into four groups, which will be led by facilitators and employees of our staff to review the elements and discuss concerns. The information gathered in these sessions will then be shared and discussed with the group as a whole. Afterwards, the participants will again break up into four separate groups for one last session, which will be shared and discussed with the entire group.

At the conclusion of the meeting we will provide a summary of the meeting, discussions and recommendations for data elements.

Dated: September 8, 2000.

**John P. Burke III,**

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

[FR Doc. 00-23495 Filed 9-8-00; 12:16 pm]

**BILLING CODE 4120-03-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Proposed Collection; Comment Request; National Survey of Nonhuman Primate Research Use

**SUMMARY:** In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Center for Research Resources (NCRR), the National Institutes of Health (NIH) will publish periodic summaries of proposed project to be submitted to the Office of Management and Budget (OMB) for review and approval.

#### Proposed Collection

*Title:* The National Survey of Nonhuman Primate Research Use. *Type of Information Collection Request:* NEW. *Need and Use of Information Collection:* The National Center for Research Resources (NCRR) seeks to evaluate the support that it provides investigators for scientific research involving nonhuman primates. NCRR wants to ensure that the NIH support structure for nonhuman primate research permits all investigators with meritorious research proposals to have access to scarce animal and specimen resources. NCRR will collect information using an Internet survey. The online survey will be implemented using SSL (Secure Socket Layer) encryption technology and password access. NCRR will use first-class mail and e-mail messages to advise investigators that they have been selected to participate in the survey. *Frequency of Response:* One time survey. *Affected Public:* Not-for-profit institutions. *Type of Respondents:* NIH-supported investigators. The annual reporting burden is as follows: *Estimated Number of Respondents:* 878; *Estimated Number of Responses per Respondent:* 1; *Estimated Burden Hours Per Response:* 30; *Estimated Total Annual Burden Hours:* 439. The annualized cost to respondents is estimated at \$178,588. There are no

Capital Cost, Operating Cost and/or Maintenance Costs to report.

#### Requests for Comments

Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) 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; (2) The accuracy of the agency's estimate of the burden (including hours and cost) of the proposed information collection; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) 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.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Patricia Newman, Program Analyst, NCRR Office of Science Policy, 6705 Rockledge Drive, Suite 5046, Bethesda, MD 20892-7965, or call non-toll-free number (301) 435-0866 or E-mail your request, including your address to: [PattyV@ncrr.nih.gov](mailto:PattyV@ncrr.nih.gov)

*Comments Due Date:* Comments regarding this information collection are best assured of having their full effect if received within 60-days of the date of this publication.

Dated: August 31, 2000.

**Louise E. Ramm,**

*Deputy Director, NCRR.*

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**BILLING CODE 4140-01-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Center for Complementary & Alternative Medicine; Notice of 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 Cancer Advisory Panel for Complementary and Alternative Medicine (CAPCAM).

The meeting is open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the