

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN <sup>1</sup>

21 CFR Section	No. of respondent per response	Annual frequency per response	Total annual responses	Hours per response	Total hours
Patent Information. 314.50(h). 314.53. 314.70(e) .....	85	3.8	325	2	650
Patent Certification Information. 314.50(i). 314.94(a)(12) .....	97	3.4	331	2	662
Notice of Certification of Invalidity or Noninfringement of a Patent. 314.52. 314.95 .....	37	2	75	16	1,200
Marketing Exclusivity Information 314.50(j). 314.54(a)(1)(vii). 314.70(f) .....	92	2.7	250	2	500
Notification of Date of Commercial Marketing; Entry of the Order or Judgement; Filing of Legal Action. 314.107(c)(4), (e)(2)(iv), (f)(2), and (f)(3) .....	34	2	71	1	71

<sup>1</sup> There are no capital costs or operating and maintenance costs associated with this collection of information.

Dated: March 29, 2001.

**William K. Hubbard,**

*Senior Associate Commissioner for Policy, Planning, and Legislation.*

[FR Doc. 01-8307 Filed 4-4-01; 8:45 am]

**BILLING CODE 4160-01-S**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Care Financing Administration

[Document Identifier: HCFA-10021]

#### Notice; Correction

**ACTION:** Notice; correction.

**SUMMARY:** In the **Federal Register** issue of Monday, March 26, 2001, make the following correction:

*Correction:* In the **Federal Register** issue of Monday, March 26, 2001, Volume 66: FR Doc. 01-7327, on page 16480, "Responses: 12,600" in the 16th line of the first full paragraph in column 2 should read "Responses: 12,600,000."

Dated: March 28, 2001.

**Julie Boughn,**

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

[FR Doc. 01-8404 Filed 4-4-01; 8:45 am]

**BILLING CODE 4120-03-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Care Financing Administration

[Document Identifier: HCFA-R-297]

#### Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Health Care Financing Administration, DHHS. 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:** Existing collection in use without an OMB control number.

**Title of Information Collection:** Request for Employment Information.

**Form No.:** HCFA-R-297 (OMB# 0938-0787).

**Use:** This form is needed to determine whether a beneficiary can enroll in Part B Medicare and/or qualify for premium

reduction. This form is used by the Social Security Administration to obtain information from employers regarding whether a Medicare beneficiary's coverage under a group health plan is based on current employment.

**Frequency:** On occasion.

**Affected Public:** Business or other for-profit.

**Number of Respondents:** 5,000.

**Total Annual Responses:** 5,000.

**Total Annual Hours:** 750.

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 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards Attention: Melissa Musotto Room N2-14-26 7500 Security Boulevard Baltimore, Maryland 21244-1850.

**Julie Boughn,**

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

[FR Doc. 01-8405 Filed 4-4-01; 8:45 am]

**BILLING CODE 4120-03-P**