approved collection; Title of Information Collection: Medicare and Medicaid Programs; Use and Reporting OASIS Data as Part of the CoPs for HHAs and Supporting Regulations in 42 CFR 484.11 and 484.20; Form No.: CMS-R-209 (OMB# 0938-0761); Use: HHAs are required to report data from the OASIS as a condition of participation. Specifically, the above named regulations sections provide guidelines for HHAs for the electronic transmission of the OASIS data as well as responsibilities of the State agency or OASIS contractor in collecting and transmitting this information to HCFA. These requirements are necessary to achieve broad-based, measurable improvement in the quality of care furnished through Federal programs, and to establish a prospective payment system for HHAs.; Frequency: Monthly; Affected Public: Business or other forprofit, Not-for-profit institutions, Federal Government, State, Local, or Tribal Government; Number of Respondents: 6,900; Total Annual Responses: 85,200; Total Annual Hours: 838,408.

5. Type of Information Collection
Request: Revision of a currently
approved collection; Title of
Information Collection: Business
Proposal Formats for Quality
Improvement Organizations (QIOs)—
previously known as Peer Review
Organizations and Supporting
Regulations in 42 CFR, Section
475.101—475.107; Form No.: CMS-718721 (OMB# 0938-0579); Use: The
submission of proposal information by
current QIOs and other bidders, on the
appropriate forms, will satisfy CMS's
need for meaningful, consistent, and

verifiable data with which to evaluate contract proposals; Frequency: triannually; Affected Public: Business or other for-profit, Not-for-profit institutions; Number of Respondents: 20; Total Annual Responses: 20; Total Annual Hours: 455.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS Web site address at http://cms.hhs.gov/ regulations/pra/default.asp, or E-mail your request, including your address, phone number, OMB number, and CMS 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: Brenda Aguilar, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: February 6, 2003.

John P. Burke, III,

Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances. [FR Doc. 03–3786 Filed 2–14–03; 8:45 am]

BILLING CODE 4120-03-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: (1) TANF Data Report, ACF–199; (2) SSP–MOE Data Report, ACF–209.

OMB No.: 0970-0199.

Description: States, the District of Columbia and certain U.S. territories are required by 42 U.S.C. 611 and 45 CFR part 265 to collect on a monthly basis and report to HHS on a quarterly basis a wide variety of disaggregated case record information for their programs funded under TANF. If a respondent wants to qualify for a high performance bonus or receive a caseload reduction credit, the respondent must submit similar data for its separate state programs. A respondent may comply with these requirements by collecting and submitting case record information for its entire caseload or for a portion of the caseload that is obtained through the use of scientifically acceptable sampling methods. HHS collects the information electronically through the use of the TANF Data Report (ACF-199) and the SSP-MOE Data Report (ACF-209) and their associated TANF Sampling and Statistical Methods Manual. HHS is proposing to extend this information collection for another three years.

Respondents: The 50 States of the United States, the District of Columbia, Guam, Puerto Rico, and the United States Virgin Islands.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of re- sponses per respondent	Average bur- den hours per response	Total burden hours
TANF Data Report, ACF–199	54 17	4 4	2,193.74 1,662	473,848 113,016
Estimated Total Annual Burden Hours				

In compliance with the requirements of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration,

Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection.

The Department specifically requests comments 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) 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. Consideration will be given to

comments and suggestions submitted within 60 days of this publication.

Dated: February 10, 2003.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 03-3856 Filed 2-14-03; 8:45 am]

BILLING CODE 4184-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: 45 CFR part 95, section F. *OMB No.:* 0992–0005.

Description: The advance planning document (APD) process, established in the rules at 45 CFR part 95, subpart F, is the procedure by which States request and obtain approval for Federal financial participation in their cost of acquiring automatic data processing

equipment and services. The APD submitted by the State Agency provides the Department of Health and Human Services (HHS) with the following information necessary to determine the State's need to acquire the requested ADP equipment and/or services:

- 1. A statement of need;
- 2. A requirements analysis and feasibility study;
 - 3. A cost benefit analysis;
 - 4. A proposed activity schedule; and,
 - 5. A proposed budget.

DHHS' determination of a State agency's need to acquire requested ADP equipment of services is authorized at sections 402(a)(5), 452(a)(1), 1902(a)(4) and 1102 of the Social Security Act.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average bur- den hours per response	Total burden hours
Advance Planning Document RFP and Contract Emergency Funding Request Service Agreements	50 50 27 14	1.84 1.54 1	60 1.5 1 1	5,520 115.5 27 14
Biennial Reports	50	1	1.5	75 5,751.5

Respondents

In compliance with the requirements of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection.

The Department specifically requests comments 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) 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.

Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: February 10, 2003.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 03-3857 Filed 2-14-03; 8:45 am]

BILLING CODE 484-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Building Strong Families Demonstration and Evaluation. OMB No.: New collection.

1. Description: The Building Strong Families (BSF) project is an important opportunity to learn whether well-designed interventions can help couples fulfill their aspirations for a healthy marriage and a strong family. The project will assess the net impact of interventions with low-income, unwed couples beginning around the time of a child's birth. The programs will be designed to help such couples strengthen their relationship, achieve a

healthy marriage if that is the path they choose, and thus enhance child and family well-being. The programs will be designed around two main components. First, the programs will provide instruction and support to improve marriage and relationship skills and enhance couples' understanding of marriage. This focus is the distinctive component of the BSF project. In addition, BSF programs will provide a variety of other services that could help low-income couples sustain a healthy relationship (e.g., employment assistance). The early project period will be used to gather information from multiple sources in order to develop program models to be tested and evaluated. One important source of information will be low-income unwed parents and newly married couples.

2. Respondents: The respondents for the Focus Group Protocols and information sheets are low-income, unmarried, expectant or recent parents and newly married couples with children who volunteer to participate in focus groups. The attendance goal for each group is eight to 12 people in a total of 26 focus groups for a total of 208 to 312 respondents. Eight types of focus groups are planned: mothers alone, fathers alone, unwed couples, and recently married couples in each of two settings. The planned settings are: (1)