

- If the furnisher does not find the information reported to the consumer reporting agency to be incomplete or inaccurate, what steps does the furnisher take?

- Describe any guidelines or procedures that may apply to the treatment of information that continues to be disputed by the consumer after the formal dispute process has been concluded. How often do the furnisher and consumer fail to reach an agreement after the conclusion of the formal dispute process, for example, where the consumer maintains that the disputed information is inaccurate and the furnisher maintains that it is accurate?

Recommendations

- What, if any, legislative or regulatory changes do you recommend besides changes made by the FACT Act and its implementing rules? How would

these recommendations improve the system? What benefits or burdens should be considered?

By order of the Board of Governors of the Federal Reserve System, August 5, 2004.

Jennifer J. Johnson,

Secretary of the Board.

[FR Doc. 04-18290 Filed 8-9-04; 8:45 am]

BILLING CODE 6210-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Announcement of Anticipated Availability of Funds for Family Planning Services Grants

AGENCY: Department of Health and Human Services, Office of the Secretary.

ACTION: Notice; correction.

SUMMARY: The Office of Population Affairs, Office of Public Health and Science, DHHS, published a notice in the **Federal Register** of Wednesday, July 7, 2004 announcing the anticipated availability of funds for family planning services grants. This notice contained an error. An eligible Population/area was not listed as available for competition in 2005. This document corrects the omission of the Seattle Population/area as competitive in 2005.

FOR FURTHER INFORMATION CONTACT: Susan B. Moskosky, 301-594-4008.

Correction

In the **Federal Register** of July 7, 2004, FR Doc. 03-15514, on page 41,114, in the second column under II. Award Information, correct the 7th line of the first paragraph to read "planning services grant awards in 17;" and on page 41,115, correct Table I to read:

TABLE I

States/populations/areas to be served	Approximate funding available	Application due date	Approx. grant funding date
Region I: Massachusetts	\$5,217,000	09/01/04	01/01/05
Region II: New York State	9,635,000	03/01/05	07/01/05
Puerto Rico	2,389,000	03/01/05	07/01/05
Region III: Washington, DC	1,053,000	09/01/04	01/01/05
Region IV: Kentucky	5,203,000	03/01/05	07/01/05
South Carolina	5,569,000	03/01/05	07/01/05
Tennessee	5,914,000	03/01/05	07/01/05
Region V: No areas competitive in FY 2005.			
Region VI: Arkansas	3,241,000	11/01/04	03/01/05
New Mexico	2,228,000	09/01/04	01/01/05
Region VII: Kansas	2,332,000	03/01/05	07/01/05
Region VIII: No areas competitive in FY 2005.			
Region IX: Gila River Indian Community	251,000	03/01/05	07/01/05
Government of Guam	452,000	03/01/05	07/01/05
Republic of Palau	99,000	03/01/05	07/01/05
Federated States of Micronesia	411,000	03/01/05	07/01/05
Region X: Idaho	1,318,000	03/01/05	07/01/05
Oregon, Multnomah County	330,000	03/01/05	07/01/05
Washington, Seattle	158,450	03/01/05	07/01/05

Alma L. Golden,

Deputy Assistant Secretary for Population Affairs.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Assistant Secretary for Planning and Evaluation; Medicare Program; Meeting of the Technical Advisory Panel on Medicare Trustee Reports

AGENCY: Assistant Secretary for Planning and Evaluation, HHS.

ACTION: Notice of meeting.

SUMMARY: This notice announces a public meeting of the Technical Advisory Panel on Medicare Trustee Reports (Panel). Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. App. 2, section 10(a)(1) and (a)(2)). The Panel will discuss the long-term rate of change in health spending and may make recommendations to the Medicare Trustees on how the Trustees might more accurately estimate health spending in the long run. The Panel's discussion is expected to be very technical in nature and will focus on the actuarial and economic methods by which Trustees might more accurately measure health spending. Although panelists are not limited in the topics they may discuss, the Panel is not expected to discuss or recommend changes in current or future Medicare provider payment rates or coverage policy. This notice also announces the appointment of seven individuals to serve as members of the Panel.

DATES: August 27, 2004, 9 a.m.–5 p.m. e.d.t.

ADDRESSES: The meeting will be held at HHS headquarters at 200 Independence Ave., SW., 20201, Room 425A.

Comments: The meeting will allocate time on the agenda to hear public comments. In lieu of oral comments, formal written comments may be submitted for the record to Andrew Cosgrove, OASPE, 200 Independence Ave., SW., 20201, Room 443F.8. Those submitting written comments should identify themselves and any relevant organizational affiliations.

FOR FURTHER INFORMATION CONTACT:

Andrew Cosgrove (202) 205-8681, andrew.cosgrove@hhs.gov. Note: Although the meeting is open to the public, procedures governing security procedures and the entrance to Federal buildings may change without notice. Those wishing to attend the meeting

should call or e-mail Mr. Cosgrove by August 20, 2004, so that their name may be put on a list of expected attendees and forwarded to the security officers at HHS Headquarters.

SUPPLEMENTARY INFORMATION: On April 22, 2004, we published a notice announcing the establishment and requesting nominations for individuals to serve on the Panel. This notice also announces the appointment of seven individuals to serve as members of the Panel. They are: Mark Pauly, Edwin Hustead, Alice Rosenblatt, Michael Chernew, David Meltzer, John Bertko, and William Scanlon.

Topics of the Meeting: The Panel is specifically charged with discussing and possibly making recommendations to the Medicare Trustees on how the Trustees might more accurately estimate the long term rate of health spending in the United States. The discussion is expected to focus on highly technical aspects of estimation involving economics and actuarial science. Panelists are not restricted, however, in the topics that they choose to discuss.

Procedure and Agenda: This meeting is open to the public. First, the appointees will be sworn in by a Federal official. Each Panel member will then be given an opportunity to make a self-introduction. The Panel will likely hear presentations from HHS staff introducing them to the topic. After any presentations, the Commission will deliberate openly on the topic. Interested persons may observe the deliberations, but the Panel will not hear public comments during this time. The Commission will also allow an open public session for any attendee to address issues specific to the topic.

Authority: 42 U.S.C. 217a; Section 222 of the Public Health Services Act, as amended. The panel is governed by provisions of Public Law 92-463, as amended (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

Dated: August 4, 2004.

Michael J. O'Grady,

Assistant Secretary for Planning and Evaluation.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Opportunity for Businesses To Partner With NIOSH To Incorporate Electronic Sensors Into Respirator Filter Cartridges

Authority: Public Law 91-596.

AGENCY: The National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

ACTION: Notice of opportunity for businesses to partner with NIOSH to incorporate Electronic Sensors into Respirator Filter Cartridges.

SUMMARY: The National Personal Protective Technology Laboratory (NPPTL), NIOSH, currently is conducting ongoing research in electronic chemical sensor development for respirator end of service life/residual service life. NPPTL is seeking to partner with businesses capable of incorporating these sensors into respirator filter cartridges. A working relationship will consist of installing sensors in cartridges during their manufacturing process. The cartridges will be used to investigate sensor performance during test loading of the cartridges with industrial solvent vapors.

DATES: Submit letters of interest within 30 days after the date of publication of this notice in the **Federal Register**.

ADDRESSES: Interested manufacturers should submit a letter of interest with information about their capabilities to: <http://www.esli@cdc.gov>.

SUPPLEMENTARY INFORMATION: NPPTL, NIOSH, is seeking to partner with businesses capable of incorporating electronic chemical sensors into respirator filter cartridges. Interested manufacturers who would like to be considered for participation need to have access to manufacturing capabilities to produce air purifying respirator cartridges.

The project currently is in the system development phase. A chemical sensor array has been defined and electronics to support it have been developed. Partners could participate in the current project as well as future projects involving sensors.

Candidate companies will be evaluated based on their capability to achieve the identified goals. Candidates selected could be requested to enter into a Cooperative Research and Development Agreement (CRADA). This