Dated: August 5, 2004.

Alvin Hall,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 04–18437 Filed 8–11–04; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 05005]

Use of Electronic Data To Improve Antimicrobial Use; Notice of Intent To Fund Single Eligibility Award

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the intent to fund fiscal year (FY) 2005 funds for a cooperative agreement program to evaluate the use of electronically-initiated interventions associated to educational interventions to improve antimicrobial use in hospitals. The Catalog of Federal Domestic Assistance number for this program is 93.283.

B. Eligible Applicant

Assistance will be provided only to the Cook County Bureau of Health Services, Hekoteon Institute. For the past five years (12/98 thru 11/2004), the Cook County Bureau of Health Services has been awarded funds under Program Announcement 98039 entitled ''Programs to Prevent the Emergence and Spread of Antimicrobial Resistance: Chicago Antimicrobial Resistance Project (CARP).'' The CARP project has an existing computer-based surveillance system with the ability to merge patient-level pharmacy and lab (micro, renal function, etc.) data; an algorithm developed and tested to detect patient receiving potentially redundant antimicrobial therapy; the ability to electronically assess antibiotic use and antibiotic starts from date warehouse and data on redundant antimicrobial use. CARP also has data on about 1189 inpatients: 192 received potentially redundant antibiotics; in 71 percent, the use of redundant antibiotics was inappropriate. Following identification of inappropriate use, 98 percent of episodes were corrected by a clinical pharmacist. Further evaluation is critical to assess educational interventions that could be generalized to several healthcare facilities where a pharmacist is not available.

C. Funding

Approximately $250,000 is available in FY 2005 to fund this award. It is expected that the award will begin on or before December, 2004, and will be made for an 18-month budget period within a project period of up to 18-months. Funding estimates may change.

D. Where To Obtain Additional Information

For general comments or questions about this announcement, contact: Technical Information Management, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341–4146, telephone: 770–488–2700.

For technical questions about this program, contact: Denise Cardo, M.D., Project Officer, Centers for Disease Control and Prevention,National Center for Infectious Diseases,1600 Clifton Road, NE.,Mailstop A–07,Atlanta, GA 30333, telephone: 404–498–1160, e-mail: *DCardo@cdc.gov.*

Dated: August 6, 2004.

William P. Nichols,

Acting Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

[FR Doc. 04–18436 Filed 8–11–04; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 2003D–0229]

Agency Information Collection Activities; Announcement of Office of Management and Budget Approval; Guidance for Industry on Continuous Marketing Applications; Pilot 2—Scientific Feedback and Interactions During Development of Fast Track Products Under the Prescription Drug User Fee Act

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that a collection of information entitled ''Guidance for Industry: Continuous Marketing Applications; Pilot 2—Scientific Feedback and Interactions During Development of Fast Track Products Under PDUFA'' has been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995.

FOR FURTHER INFORMATION CONTACT: Karen L. Nelson, Office of Management Programs (HFA–250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–1482.

SUPPLEMENTARY INFORMATION: In the **Federal Register** of February 26, 2004 (69 FR 8978), the agency announced that the proposed information collection had been submitted to OMB for review and clearance under 44 U.S.C. 3507. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. OMB has now approved the information collection and has assigned OMB control number 0910–0518. The approval expires on June 30, 2007. A copy of the supporting statement for this information collection is available on the Internet at *http://www.fda.gov/ohrms/dockets.*

Dated: August 5, 2004.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. 04–18408 Filed 8–11–04; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Recruitment of Sites for Assignment of Corps Personnel

AGENCY: Health Resources and Services Administration (HRSA), HHS.

ACTION: General notice.

SUMMARY: The Health Resources and Services Administration (HRSA) announces that the listing of entities, and their Health Professional Shortage Area (HPSA) scores, that will receive priority for the assignment of National Health Service Corps (NHSC) personnel (Corps Personnel) for the period July 1, 2004 through June 30, 2005 is posted on the NHSC Web site at *http://nhsc.bhpr.hrsa.gov/resources/fedreg-hpol/*. This list specifies which entities are eligible to receive assignment of Corps members who are participating in the NHSC Scholarship Program; the NHSC Loan Repayment Program; and Corps members who have become Corps members other than pursuant to contractual obligations under the Scholarship or Loan Repayment Programs. Please note that not all vacancies associated with sites on this list will be for Corps members, but could be for individuals serving an obligation to the NHSC through the Private Practice Option.

Eligible HPSAs and Entities

To be eligible to receive assignment of Corps personnel, entities must: (1) Have a current HPSA designation by the Shortage Designation Branch in the National Center for Health Workforce Analysis, Bureau of Health Professions, Health Resources and Services Administration; (2) enter into an agreement with the State agency that administers Medicaid, accept payment under Medicare and the State Children's Health Insurance Program, see all patients regardless of their ability to pay, and use and post a discounted fee plan; and (3) be determined by the Secretary to have (a) a need and demand for health manpower in the area; (b) appropriately and efficiently used Corps members assigned to the entity; (c) general community support for the assignment of Corps members; (d) made unsuccessful efforts to recruit; and (e) a reasonable prospect for sound fiscal management by the entity with respect to Corps members assigned there. Priority in approving applications for assignment of Corps members goes to sites that (1) provide primary, mental, or oral health services to a HPSA of greatest shortage; (2) are part of a system of care that provides a continuum of services, including comprehensive primary health care and appropriate referrals or arrangements for secondary and tertiary care; (3) have a documented record of sound fiscal management; and (4) will experience a negative impact on its capacity to provide primary health services if a Corps member is not assigned to the entity.

Entities that receive assignment of Corps personnel must assure that (1) the position will permit the full scope of practice and that the clinician meets the credentialing requirements of the State and site; and (2) the Corps member assigned to the entity is engaged in full-time clinical practice for a minimum of 40 hours per week with at least 32 hours per week in the ambulatory care setting. Obstetricians/gynecologists, certified nurse midwives (CNMs), and family practitioners who practice obstetrics on a regular basis, are required to engage in a minimum of 21 hours per week of outpatient clinical practice. The remaining hours, making up the 40-hour per week total, include delivery and other clinical hospital-based duties. Time spent on-call does not count toward the 40 hours per week. In addition, sites receiving assignment of Corps personnel are expected to (1) report to the NHSC all absences in excess of the authorized number of days (up to 35 work days or 280 hours); (2) report to the NHSC any change in the status of an NHSC clinician at the site; (3) provide the time and leave records, schedules, and any related personnel documents for NHSC assignees (including documentation, if applicable, of the reason(s) for the termination of an NHSC clinician's employment at the site prior to his or her obligated service end date); and (4) submit a Uniform Data System (UDS) report. This system allows the site to assess the age, sex, race/ethnicity of, and provider encounter records for, its user population. The UDS reports are site specific. Providers fulfilling NHSC commitments are assigned to a specific site or, in some cases, more than one site. The scope of activity to be reported in UDS includes all activity at the site(s) to which the Corps member is assigned.

Evaluation and Selection Process

In approving applications for the assignment of Corps members, the Secretary shall give priority to any such application that is made regarding the provision of primary health services to a HPSA with the greatest such shortage. For the program year July 1, 2004–June 30, 2005, HPSAs of greatest shortage for determination of priority for assignment of Corps personnel will be defined as follows: (1) Primary care HPSAs with scores of 14 and above are authorized for the assignment of Corps members who are primary care physicians participating in the Scholarship Program; (2) primary care HPSAs with scores of 13 and above are authorized for the assignment of Corps members who are family nurse practitioners (NPs) and physician assistants (PAs) participating in the Scholarship Program; (3) primary care HPSAs with scores of 8 and above are authorized for the assignment of Corps members who are CNMs participating in the Scholarship Program; (4) mental health HPSAs with scores of 20 and above are authorized for the assignment of Corps members who are physician psychiatrists participating in the Scholarship Program; (5) dental HPSAs with scores of 20 and above are authorized for the assignment of Corps members who are dentists participating in the Scholarship Program; and (6) HPSAs (appropriate to each discipline) with scores of 14 and above are authorized for the assignment of Corps members who are participating in the Loan Repayment Program. HPSAs with scores below 14 will be eligible to receive assignment of Corps personnel participating in the Loan Repayment Program only after assignments are made of those Corps members matching to those HPSAs receiving priority for placement of Corps members through the Loan Repayment Program (*i.e.*, HPSAs scoring 14 or above). Placements made through the Loan Repayment Program in HPSAs with scores 13 or below will be made by decreasing HPSA score, and only to the extent that funding remains available. All sites on the list are eligible sites for individuals wishing to serve in an underserved area but who are not contractually obligated under the Scholarship or Loan Repayment Program. A listing of HPSAs and their scores is posted at *http://belize.hrsa.gov/newhpsa/newhpsa.cfm*.

Sites qualifying for an automatic primary care HPSA designation have been scored and may be authorized to receive assignment of Corps members if they meet the criteria outlined above and their automatic primary care HPSAs assigned scores are above the stated cutoffs. Sites qualifying for an automatic mental health or dental HPSA designation are currently unscored. A methodology to score these automatic HPSAs is currently being developed. Sites on the list with an unscored HPSA designation are authorized for the assignment of Corps personnel participating in the Loan Repayment Program only, after assignments are made of those Corps members matching to scored HPSAs and only to the extent that funding remains available. When automatic HPSAs receive scores, these sites will then be authorized to receive assignment of Corps members if they meet the criteria outlined above and their newly assigned scores are above the stated cutoffs.

The number of new NHSC placements through the Scholarship and Loan Repayment programs allowed at any one site are limited to the following:

(1) Primary Health Care.

(a) Loan Repayment Program—no more than 2 physicians (MD or DO); and no more than a combined total of 2 NPs, PAs, or CNMs.

(b) Scholarship Program—no more than 2 physicians (MD or DO); and no more than a combined total of 2 NPs, PAs, or CNMs.

(2) Dental.

(a) Loan Repayment Program—no more than 2 dentists and 2 dental hygienists.

(b) Scholarship Program—no more than 1 dentist.

(3) Mental Health.

(a) Loan Repayment Program—no more than 2 psychiatrists (MD or DO); and no more than a combined total of 2 clinical or counseling psychologists; licensed clinical social workers, licensed professional counselors, marriage and family therapists, or psychiatric nurse specialists.

(b) Scholarship Program—no more than 1 psychiatrist.

Application Requests, Dates and Address

The list of HPSAs and entities that are eligible to receive priority for the placement of Corps personnel may be updated periodically. Entities that no longer meet eligibility criteria, including HPSA score, will be removed from the priority listing. Entities interested in being added to the high priority list must submit an NHSC Recruitment and Retention Assistance Application to: National Health Service Corps, 5600 Fishers Lane, Room 8A–55, Rockville, MD 20857, fax (301) 594–2721. These applications must be submitted on or before the deadline date of March 25, 2005. Applications submitted after this deadline date will be considered for placement on the priority placement list in the following program year. Any changes to this deadline will be posted on the NHSC Web site at *http://nhsc.bhpr.hrsa.gov*.

Entities interested in receiving application materials may do so by calling the NHSC call center at 1–800–221–9393. They may also get information and download application materials from: *http://nhsc.bhpr.hrsa.gov/applications/rraa.cfm*.

Additional Information

Entities wishing to provide additional data and information in support of their inclusion on the proposed list of HPSAs and entities that would receive priority in assignment of Corps members, must do so in writing no later than September 13, 2004. This information should be submitted to the National Health Service Corps, 5600 Fishers Lane, Room 8A–55, Rockville, MD 20857. This information will be considered in preparing the final list of HPSAs and entities that are receiving priority for the assignment of Corps personnel.

Paperwork Reduction Act

The Recruitment & Retention Assistance Application has been approved by the Office of Management and Budget under the Paperwork Reduction Act. The OMB clearance number is 0915–0230.

The program is not subject to the provision of Executive Order 12372, Intergovernmental Review of Federal Programs (as implemented through 45 CFR part 100).

Dated: August 4, 2004.

Elizabeth M. Duke,

Administrator.

[FR Doc. 04–18409 Filed 8–11–04; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General

Program Exclusions: July 2004

AGENCY: Office of Inspector General, HHS.

ACTION: Notice of program exclusions.

During the month of July 2004, the HHS Office of Inspector General imposed exclusions in the cases set forth below. When an exclusion is imposed, no program payment is made to anyone for any items or services(other than an emergency item or service not provided in a hospital emergency room) furnished, ordered or prescribed by an excluded party under the Medicare, Medicaid, and all Federal Health Care programs. In addition, no program payment is made to any business or facility, *e.g.*, a hospital, that submits bills for payment for items or services provided by an excluded party. Program beneficiaries remain free to decide for themselves whether they will continue to use the services of an excluded party even though no program payments will be made for items and services provided by that excluded party. The exclusions have national effect and also apply to all Executive Branch procurement and non-procurement programs and activities.

Subject name	Address	Effective date
Program-Related Convictions		
Agyemang, Kwadwo	Union, NJ	8/19/2004
Albanese, Gabriella	Albion, NY	8/19/2004
Artsrounian, Haik	Taft, CA	8/19/2004
Bardo, Manuel	Miami, FL	8/19/2004
Bejanzadeh, Emil	North Las Vegas, NV	8/19/2004
Bielaus, Michael	Kenner, LA	8/19/2004
Breslow, Julian	Boca Raton, FL	2/10/2004
Butcher, Holly	The Colony, TX	8/20/2002
Callejas, Juana	Adelanto, CA	8/19/2004
Canon, Robert	Shelbyville, TN	8/19/2004
Carroll, Lynda	Ellensburg, WA	8/19/2004
Castaneto, Orlando	Carson, CA	8/19/2004
Ciraolo, Costanza	Rancho Palose Verdes, CA	8/19/2004
Ciraolo, Juan	Taft, CA	8/19/2004
Cloyd, Tonya	Milwaukee, WI	8/19/2004
Cogdell, Myra	Wyandanch, NY	8/19/2004
Collado-Marcial, Jose	Toa Baja, PR	8/19/2004
Courtney, Rachel	Coshocton, OH	8/19/2004
Darr, Adele	Taylor, AZ	5/22/2004
Darr, James	Phoenix, AZ	5/22/2004
Foster, Travis	Atlanta, GA	8/19/2004
Gallego, Robert	Marina, CA	8/19/2004
Gonzalez, Luisa	Adelanto, CA	8/19/2004
Helterbran, Cheryl	Columbus, OH	8/19/2004
Hudkins, James	Shelton, WA	8/19/2004
Hyman, Parnell	Yankton, SD	8/19/2004
Johnson, Nathan	Texarkana, TX	8/19/2004
Jones, Teresa	Milwaukee, WI	8/19/2004
Joyce, James	Goldsboro, NC	8/19/2004
Khachatrian, Sarkis	Lompoc, CA	8/19/2004
Lawrence, Gwendolyn	Cleveland, OH	8/19/2004