

populations, including racial and ethnic minorities, and particular communities, such as rural markets; (5) available scientific data to support systematic review and analysis of the topic; (6) plans of the nominating organization to incorporate the report into its managerial or policy decision-making; and (7) plans by the nominating organization to measure the impact of the report on practice.

Dated: February 8, 2002.

John M. Eisenberg,

Director.

[FR Doc. 02-3566 Filed 2-13-02; 8:45 am]

BILLING CODE 4160-90-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality Notice of Meeting

In accordance with section 10(d) of the Federal Advisory Committee Act (5 U.S.C., Appendix 2), announcement is made of a Health Care Policy and Research Special Emphasis Panel (SEP) meeting.

The Health Care Policy and Research Special Emphasis Panel is a list of experts in fields related to health care research who are invited by the Agency for Healthcare Research and Quality (AHRQ) and agree to be available, to conduct, on an as needed basis, scientific reviews of applications for AHRQ support. Individual members of the Panel do not meet regularly and do not serve for fixed or long terms. Rather, they are asked to serve for particular review meetings which require their type of expertise.

Substantial segments of the upcoming SEP meeting listed below will be closed to the public in accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., Appendix 2 and 5 U.S.C. 552b(c)(6). Grant applications for Cooperative Agreement Awards are to be reviewed and discussed at this meeting. These discussions are likely to include personnel information concerning individuals associated with these applications. This information is exempt from mandatory disclosure under the above-cited statutes.

1. *SEP Meeting on:* Consumer Assessments of Health Plans Study, Phase II (CAHPS).

Date: March 11, 2002 (Open on March 11, from 8:00 a.m. to 8:15 a.m. and closed for remainder of the meeting).

Place: Hyatt Regency, Susquehanna Room, One Bethesda Metro Center, Bethesda, MD 20814.

Contact Person: Anyone wishing to obtain a roster of members or minutes of this meeting should contact Mrs. Bonnie Campbell, Committee Management Officer, Office of Research Review, Education and Policy, AHRQ, 2101 East Jefferson Street, Suite 400, Rockville, Maryland 20852, Telephone (301) 594-1846.

Agenda items for this meeting are subject to change as priorities dictate.

Dated: February 11, 2002.

John M. Eisenberg,

Director.

[FR Doc. 02-3678 Filed 2-13-02; 8:45 am]

BILLING CODE 4160-90-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 02025]

Cooperative Agreement for Epidemiologic Studies of Birth Defects and Developmental Disabilities, and the Promotion of Optimal Birth Outcomes in China; Notice of Availability of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 2002 funds for a cooperative agreement program for epidemiologic studies of birth defects and other reproductive and developmental outcomes in China.

B. Eligible Applicant

Assistance will be provided only to the National Center for Maternal and Infant Health, Peking University Health Science Center, Beijing, People's Republic of China. No other applications are solicited.

The People's Republic of China (PRC) is the most appropriate country, and the Peking University Health Science Center (PUHSC) (formerly Beijing Medical University [BMU]) is the most appropriate institution to conduct the work under this cooperative agreement.

The National Center for Maternal and Infant Health (NCMIH) at PUHSC.

Scientists at PUHSC have successfully collaborated with CDC on a large community intervention program of folic acid supplementation to prevent neural tube defects, including almost 250,000 women; and currently maintain surveillance of four large cohorts. These scientists have experience in all areas of birth defects research including clinical pediatrics and dysmorphology, epidemiology, public health, statistics,

and laboratory science. Extensive data sets on perinatal health, birth outcome, and birth defects surveillance are maintained at PUHSC.

NCMIH functions as the national research center on health care, clinical epidemiology, and public health; and the national laboratory for reproductive health research. In addition, it is a national training center for professional technical personnel in medical epidemiological research and public health; an information management center for birth outcomes and reproductive health, and a consulting and advising center for the promotion of international academic exchange and cooperation.

Population Characteristics and Childbearing Practices in China.

China has a large, stable, and relatively homogeneous population, registration for marriage is required, and virtually all pregnancies are planned. Women who may be eligible to participate in clinical trials or other birth defects prevention programs can therefore be identified early, at the time of registration for marriage.

Approximately 80 percent of women in China become pregnant within one year of marriage. In accordance with family planning practices, most women, particularly in urban areas, have only one child. Thus, the PRC is well-suited for evaluating interventions directed toward the prevention of birth defects and adverse pregnancy outcomes, or for studying varying doses and schedules of nutritional supplements without interfering with national recommendations for women who are newly married or planning a pregnancy.

China Public Health Priorities.

Ensuring an optimal birth outcome is a national health priority in the PRC. In June 2001, the implementation procedure for the Maternal and Child Health Law (enacted July 1, 1995) was signed by Premier Zhu Rongji. Under the provisions of this law, all women are entitled to receive reproductive health services to ensure a healthy pregnancy and a healthy baby. As a result of the capabilities of the PUHSC, the Ministry of Health is expected to identify the NCMIH as the main technical unit for implementation of the law.

One of the major components of the implementation plan is the prevention of birth defects and reduction of infant mortality.

In addition, the Ministry of Science and Technology has taken responsibility for a number of projects to prevent birth defects and disabilities. Among these are (1) determining risk factors for congenital cardiac defects in China, (2)