

administer and assist the proposed animal-based studies.

Acting in concert with these three organizations (OVI, OVT and BRM), and their scientific staffs and consultants, the Institute will develop platform technologies that could significantly impact the response to a bioterrorism attack.

Justification: This grant is awarded sole source by virtue of Congressional earmark evidenced in the following records of Congress: Senate-House Conference Committee, Calendar No. 193, 107th Congress Report-Senate; assessable in pages 88–89 of 229 of pdf document: http://frwebgate.access.gpo.gov/cgi-bin/grtdoc.cgi?dbname=107_cong_reports&docid=f:hr342.107.pdf

Note: Title 2 United States Code section 1611 states that an organization described in section 501(c)(4) of the Internal Revenue Code that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant or loan.

C. Funds

Approximately \$1.2 million is being awarded in FY 2002. It is expected that the award will begin on or before September 15, 2002, and will be made for a 12 month budget period within a project period of one year. The funding estimate may change.

D. Where To Obtain Additional Information

This and other CDC announcements can be found on the CDC home page Internet address—<http://www.cdc.gov>. Click on “Funding” then “Grants and Cooperative Agreements.”

For business management assistance contact: Peaches Brown, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341–4146, Telephone: 770–488–2738, e-mail address: prb0@cdc.gov.

For program technical assistance, contact: Dr. Bruce Weniger, Vaccine Safety and Development Activity, National Immunization Program, Centers for Disease Control and Prevention, 1600 Clifton Road mailstop E–61, Atlanta, GA 30333, Telephone: 404–639–8779, e-mail address: bgw2@cdc.gov.

For program administrative assistance, contact: Sharon Holmes, Program Analyst, Vaccine Safety and Development Activity, National Immunization Program, Centers for Disease Control and Prevention, 1600 Clifton Road mailstop E–61, Atlanta, GA

30333, Telephone: 404–639–8582, e-mail address: sholmes@cdc.gov.

Dated: October 4, 2002.

Sandra R. Manning,

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

[FR Doc. 02–25953 Filed 10–10–02; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[CMS–3109–N]

Medicare Program; Town Hall Meeting on the Hospital “1-hour” Rule Related to the Use of Restraint and Seclusion

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Notice of meeting.

SUMMARY: This notice announces a town hall meeting to obtain and discuss general comments from the public concerning the impact of the hospital “1-hour” rule related to the use of restraint and seclusion. Specifically, the meeting will attempt to solicit individual comments and experiences from providers, advocates, consumers, and other interested parties concerning the application of the “1-hour” rule requiring a physician or a licensed independent practitioner to make a face-to-face assessment within 1 hour of any patient being placed in restraint or seclusion for behavioral reasons. We are particularly interested in data that show how this requirement may be imposing burdens on patient care, including, but not limited to, financial burdens on hospitals and physicians. We would be happy to address/discuss other concerns related to the provision of hospital services to this population of patients.

Hospitals, provider representatives, advocacy groups, physicians, and other interested parties are invited to this meeting to present their views on this issue. The opinions and alternatives provided during this meeting will assist us as we evaluate our policy on the “1-hour” rule. The meeting is open to the public, but attendance is limited to space available.

DATES: *Meeting Date:* The town hall meeting announced in this notice will be held on Tuesday, October 29, 2002, from 10 a.m. to 1 p.m. (eastern standard time).

ADDRESSES: The town hall meeting will be held in the auditorium at the Centers for Medicare & Medicaid Services, 7500

Security Boulevard, Baltimore, MD 21244.

FOR FURTHER INFORMATION CONTACT:

Nancy Archer (410) 786–0596. You may also send inquiries about this meeting via e-mail to narcher@cms.hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Background

On July 2, 1999, we published an interim final rule with comment introducing a new Patients’ Rights Condition of Participation (CoP) that hospitals must meet to be approved for, or to continue participation in, the Medicare and Medicaid programs (64 FR 36070). One of the requirements mandates that, for restraint or seclusion applied for behavioral reasons, a physician, or licensed independent practitioner (LIP), must make a face-to-face assessment of that patient within 1 hour of implementation of the intervention (64 FR 26088).

The “1-hour” requirement was subsequently challenged in the United States District Court for the District of Columbia. Although the Court ruled in the Secretary’s favor with respect to this provision, hospitals and their provider groups have continued to inform us that requiring a physician or LIP to perform the 1-hour face-to-face assessment causes undue burden on hospitals, without specific evidence that the quality of care has improved.

II. Meeting Format

The meeting will begin with an overview of the goals of the meeting and an introduction of the meeting moderator, followed by remarks from Thomas A. Scully, Administrator, Centers for Medicare & Medicaid Services, and Charles G. Curie, Administrator, Substance Abuse and Mental Health Services Administration. The Acting Director, Office of Clinical Standards and Quality, will present the context for the discussion. Participants that have requested to speak will then be given time to present their information. The moderator will solicit comments and recommendations from the audience about issues concerning the implementation of the 1-hour rule, as time permits.

The information about the town hall meeting will be posted at the following website address: <http://www.cms.hhs.gov/opendoor/hospitals.asp>. At this address, interested parties will find an agenda for the meeting and instructions on how to call into the meeting if unable to attend in person.

We will limit the time for participants to make formal statements according to

the number of participants who have registered in advance to speak at the meeting. Individuals who wish to make formal statements must contact Nancy Archer at (410) 786-0596 or via e-mail, narcher@cms.hhs.gov as soon as possible. Those individuals must subsequently submit their formal statements in writing no later than 5 p.m., Thursday, October 24, 2002. Send written submissions to: Nancy Archer, Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Mail Stop S3-02-01, Baltimore, Maryland 21244 or narcher@cms.hhs.gov. Comments from individuals not registered to speak will be heard following individuals with scheduled statements, as time permits.

III. Registration Instructions

The Clinical Standards Group is coordinating registration for the meeting. While there is no registration fee, all individuals must register to attend. Because this meeting will be located on Federal property, for security reasons, any persons wishing to attend this meeting must call or e-mail Nancy

Archer at (410) 786-0596 (narcher@cms.hhs.gov) to register at least 72 hours in advance. Attendees must show photographic identification to the Federal Protective Service or Guard Service personnel before they will be permitted to enter CMS grounds. Individuals who have not registered in advance will not be allowed to enter the building to attend the meeting. Seating capacity is limited to the first 250 registrants. Individuals requiring sign language interpretation for the hearing impaired or other special accommodations should contact Aileen Bullock at (410) 786-5637 (abullock@cms.hhs.gov) at least 10 days before the meeting. There will be a TTY system access number available.

Authority: 42 U.S.C 1395x(e) and (f).

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance)

Dated: October 7, 2002.

Thomas A. Scully,
Administrator, Centers for Medicare and Medicaid Services.

[FR Doc. 02-25948 Filed 10-10-02; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: ACF-196.

OMB No.: 0970-0199.

Description: The form provides specific data regarding claims and provides a mechanism for States to request grant awards and certify the availability of state matching funds. Failure to collect this data would seriously compromise ACF's ability to monitor expenditures. This information is also used to estimate Outlays and may be used to prepare ACF budget submissions to Congress. The following citations should be noted in regard to this collection: 405(c)(1); 409(a)(7); and 409(a)(1).

Respondents: State TANF Agencies.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ACF-196	54	4	8	1,728
Estimated Total Annual Burden Hours				1,728

Additional Information: Copies of the proposed collection may be obtained 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.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, 725 17th Street, NW., Washington, DC 20508, Attn: Desk Officer for ACF.

Dated: October 7, 2002.

Robert Sargis,
Reports Clearance Officer.

[FR Doc. 02-25975 Filed 10-10-02; 8:45 am]

BILLING CODE 4184-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General

Program Exclusions: September 2002

AGENCY: Office of Inspector General, HHS.

ACTION: Notice of program exclusions.

During the month of September 2002, 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, city, state	Effective date
PROGRAM-RELATED CONVICTIONS	
ADEKOLA, ADEMOLA J	10/20/2002
CHICAGO, IL	
ALEMAN, ALBERTO	10/20/2002
MIAMI, FL	
AMABILE, JOHN C	10/20/2002
WRIGHTSTOWN, NJ	
ANTONOV, ROMAN	10/20/2002