

Submit written comments concerning the information collection requirements to the Dockets Management Branch by August 28, 2000. A copy of the document and received comments are available for public examination in the Dockets Management Branch between 9 a.m. and 4 p.m., Monday through Friday.

Dated: June 16, 2000.

Margaret M. Dotzel,

Associate Commissioner for Policy.

[FR Doc. 00-16395 Filed 6-26-00; 10:07 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration, HHS.

[Document Identifier: HCFA-10012]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

AGENCY: Health Care Financing Administration, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

We are, however, requesting an emergency review of the Information collections referenced below. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, we have submitted to the Office of Management and Budget (OMB) the following requirements for emergency review. We are requesting an emergency review because the collection of this information is needed prior to the expiration of the normal time limits under OMB's regulations at 5 CFR part

1320. This collection of information will be used to test the effectiveness of three possible Medicare smoking cessation benefits and to make inferences that are generalizable to the Medicare program. Using a comparison trial with restricted randomization of study locales, this study will compare three variations in a potential Medicare smoking cessation benefit on smoking cessation and abstinence rates. Smoking cessation for seniors is currently receiving attention from Congress and the White House. Senator Graham (D-FL) has proposed a smoking cessation Medicare benefit, while the White House provides for a smoking cessation demonstration in the *President's Plan to Modernize and Strengthen Medicare for the 21st Century*. In response to this White House initiative, HCFA is launching this demonstration to test smoking cessation as a possible covered benefit under the Medicare program. If this information is not collected, public harm is likely to occur. Considerable evidence indicates that much greater improvement in health status could be accomplished if currently existing, effective and commonly available preventative practices and services were implemented more widely; therefore, this demonstration could help improve the health of the Medicare population.

HCFA is requesting OMB review and approval of this collection by July 5, 2000, with a 180-day approval period. Written comments and recommendations will be accepted from the public if received by the individuals designated below by July 3, 2000. During this 180-day period, we will publish a separate **Federal Register** notice announcing the initiation of an extensive 60-day agency review and public comment period on these requirements. We will submit the requirements for OMB review and an extension of this emergency approval.

Type of Information Collection

Request: New Collection;

Title of Information Collection: Healthy Aging Smoking Cessation Demonstration;

Form No.: HCFA-10012 (OMB no. 0938-NEW);

Use: The goals of the Healthy Aging Project are to test the effectiveness of three possible Medicare smoking cessation benefits and to make inferences that are generalizable to the Medicare program. Using a comparison trial with restricted randomization of study locales, this study will compare three variations in a potential Medicare smoking cessation benefit on smoking cessation and abstinence rates.;

Frequency: Semi-annually;

Affected Public: Individuals or Households;

Number of Respondents: 43,500;

Total Annual Responses: 130,500;

Total Annual Hours: 58,000.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access HCFA's Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or E-mail your request, including your address, phone number, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326.

Interested persons are invited to send comments regarding the burden or any other aspect of these collections of Information requirements. However, as noted above, comments on these Information collection and recordkeeping requirements must be mailed and/or faxed to the designees referenced below, by July 3, 2000:

Health Care Financing Administration, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards Attention: Dawn Willingham, Room N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850; and

Office of Information and Regulatory Affairs, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503, Fax Number: (202) 395-6974 or (202) 395-5167, Attn: Allison Herron Eydt, HCFA Desk Officer.

Dated: June 1, 2000.

John P. Burke III,

HCFA Reports Clearance Officer, HCFA Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 00-16455 Filed 6-28-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-901-1]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing Administration, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send

comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection

Request: Revision of a currently approved collection;

Title of Information Collection:

Qualification Application and Supporting Regulations in 42 CFR 417.408 and 417.143;

Form No.: HCFA-901-1 (OMB# 0938-0470);

Use: Prepaid health plans must meet certain regulatory requirements to be federally qualified health maintenance organizations. This application is the collection form used to obtain the information from health plans that allow HCFA staff to determine compliance with the regulations.;

Frequency: Other: One-time;

Affected Public: Business or other for-profit, Not-for-profit institutions, and State, Local, or Tribal Government;

Number of Respondents: 35;

Total Annual Responses: 35;

Total Annual Hours: 3,500.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access HCFA's Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or E-mail your request, including your address, phone number, OMB number, and HCFA 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 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards, Attention: Dawn Willingham, Room N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: June 16, 2000.

John P. Burke III,

HCFA Reports Clearance Officer, HCFA Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 00-16456 Filed 6-28-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration [HCFA-1030-N]

Medicare Program; Medicare+Choice Deeming Authority

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Notice.

SUMMARY: This notice announces that 30 days after the publication of the Medicare+Choice (M+C) final rule, we will begin to accept applications from private accrediting organizations who seek M+C deeming authority.

EFFECTIVE DATE: This notice is effective on July 31, 2000.

FOR FURTHER INFORMATION CONTACT: Patricia Kurtz, (410) 786-4670.

SUPPLEMENTARY INFORMATION:

Background

Section 4001 of the Balanced Budget Act of 1997 (BBA) (Pub. L. 105-33), enacted on August 5, 1987, added section 1852(e)(4) to the Social Security Act (the Act), which gives us the authority to determine that a Medicare+Choice Organization (M+CO) is "deemed" to be in compliance with certain Medicare requirements if the M+CO has been accredited (and is periodically reaccredited) by an accrediting organization that we have determined applies and enforces requirements at least as stringent as those the M+CO would be deemed to meet. Section 518 of the Balance Budget Refinement Act of 1999 (BBRA) (Pub. L. 106-113), enacted on November 29, 1999, amended section 1852(e)(4) of the Act to expand the scope of deeming from two to six areas. Accrediting organizations may seek authority for any of the categories. The BBRA specified that we cannot require an accrediting entity to be able to certify plans for all the deeming categories. It also required us to determine, within 210 days from the day the application is determined to be complete, the eligibility of the accrediting organizations to be granted deeming authority. Conditions and procedures for granting deeming authority to accrediting organizations are outlined in § 422.157 and § 422.158 of title 42 of the Code of Federal Regulations.

Applications

This notice announces that 30 days after the publication of the M+C final rule, we will begin to accept applications from national private accrediting organizations who seek M+C

deeming authority. To receive an application packet, please contact Patricia Kurtz at (410) 786-4670 or via e-mail at pkurtz@hcfa.gov or mail your inquiries to: Patricia Kurtz, Health Care Financing Administration, Health Plan Administration Group, Room C4-24-04, 7500 Security Blvd., Baltimore, MD. 21244.

Authority: Section 1852(e)(4) of the Social Security Act (42 U.S.C. 1395w-22(e)(4)) (Catalog of Federal Domestic Assistance Program No. 93.773 Medicare—Hospital Insurance Program; and No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: June 19, 2000.

Nancy-Ann Min DeParle,

Administrator, Health Care Financing Administration.

[FR Doc. 00-16058 Filed 6-28-00; 8:45 am]

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DEPARTMENT OF THE INTERIOR

Bureau of Indian Affairs

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Request to Office of Management and Budget for Reinstatement of Agency Information Collection for Indian Self-Determination and Education Assistance Contracts

AGENCIES: Bureau of Indian Affairs, DOI and Indian Health Service, DHHS.

ACTION: 30-Day Notice of Submission to OMB.

SUMMARY: The Department of the Interior and the Department of Health and Human Services announce submission to the Office of Management and Budget (OMB) of a request for reinstatement of information collection, OMB #1076-0136, "Indian Self-Determination and Education Assistance Act Programs." The information collection will be used to process contracts, grants or cooperative agreements for award by the Bureau of Indian Affairs and the Indian Health Service as authorized by the Indian Self-Determination and Education Assistance Act as amended and set forth