ACTION: Report of Altered Systems of Records.

SUMMARY: In accordance with the requirements of the Privacy Act of 1974, we are proposing to modify or alter designated HCFA systems of records specified in Appendix A. We are revising the language in global fraud and abuse routine uses number one and two to correspond with language used in other HCFA systems of records. We are also deleting global fraud and abuse routine use number three relating to ''any entity that makes payments for or oversees the administration of health care services. * * *'' Notice of these revised global routine uses was published in the **Federal Register**, Thursday, July 16, 1998 (63 FR 38414).

The primary purpose of revising the language in the two remaining global fraud and abuse routine uses is to shorten the language, make them easier to read, and provide clarity to HCFA intentions to disclose individual-specific information for the purposes of combating fraud and abuse to a HCFA contractor that assists in the administration of a HCFA-administered health benefits program, to a grantee of a HCFA-administered grant program, and to other federal agencies or to an instrumentality of any governmental jurisdiction, that administers, or that has the authority to investigate potential fraud or abuse in a health benefits program funded in whole or in part by federal funds.

The revised routine uses will be added to the systems listed in Appendix A at the earliest time that modification and republication of these systems can occur. The routine uses will be numbered in the next logical sequence for each system and will read as follows: (1) To a HCFA contractor (including, but not necessarily limited to fiscal intermediaries and carriers) that assists in the administration of a HCFA-administered health benefits program, or to a grantee of a HCFA-administered grant program, when disclosure is deemed reasonably necessary by HCFA to prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct, remedy, or otherwise combat fraud or abuse in such program; and, (2) to another federal agency or to an instrumentality of any governmental jurisdiction within or under the control of the United States (including any state or local governmental agency), that administers, or that has the authority to investigate potential fraud or abuse in, a health benefits program funded in whole or in part by federal funds, when disclosure is deemed reasonably necessary by HCFA to prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct, remedy, or otherwise combat fraud or abuse in such program, subjected to certain conditions. We have provided background information about the altered system in the **SUPPLEMENTARY INFORMATION** section below. Although the Privacy Act requires only that HCFA provide an opportunity for interested persons to comment on the proposed routine uses, HCFA invites comments on all portions of this notice. See **EFFECTIVE DATES** section for comment period.

EFFECTIVE DATES: HCFA filed a modified or altered system report with the Chair of the House Committee on Government Reform and Oversight, the Chair of the Senate Committee on Governmental Affairs, and the Administrator, Office of Information and Regulatory Affairs, Office of Management and Budget (OMB) on August 14, 2000. To ensure that all parties have adequate time in which to comment, the modified or altered system of records, including routine uses, will become effective 40 days from the publication of the notice, or from the date it was submitted to OMB and the Congress, whichever is later, unless HCFA receives comments that require alterations to this notice.

ADDRESSES: The public should address comments to: Director, Division of Data Liaison and Distribution (DDLD), HCFA, Room N2–04–27, 7500 Security Boulevard, Baltimore, Maryland 21244–1850. Comments received will be available for review at this location, by appointment, during regular business hours, Monday through Friday from 9 a.m.–3 p.m., eastern time zone.

FOR FURTHER INFORMATION CONTACT: Howard Cohen, Division of Methods and Strategies, Program Integrity Group, Office of Financial Management, HCFA, Mailstop C3–02–16, 7500 Security Boulevard, Baltimore, Maryland 21244–1850. The telephone number is 410–786–9537.

SUPPLEMENTARY INFORMATION: In 1998, HCFA informed the public of its intent to add three new routine uses to designated HCFA systems of records, under which HCFA may release information without the consent of the individual to whom such information pertains in order to prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct, remedy, or otherwise combat fraud and abuse in programs HCFA administers.

Dated: August 10, 2000.

Nancy Ann Min DeParle,

Administrator, Health Care Financing Administration.

Appendix A

09–70–0005 ''National Claims History (NCH),'' HHS/HCFA/OIS;
09–70–0040 ''Health Care Financing Administration Medicare Heart Transplant Data File,'' HHS/HCFA/OIS;
09–70–0501 ''Carrier Medicare Claims Records,'' HHS/HCFA;
09–70–0503 ''Intermediary Medicare Claims Records,'' HHS/HCFA;
09–70–0505 ''Supplemental Medical Insurance (SMI)Accounting Collection and Enrollment System (SPACE),'' HHS/HCFA;
09–70–0516 ''Medicare Physician Supplier Master File (MPSM),'' HHS/HCFA;
09–70–0518 ''Medicare Clinic Physician Supplier Master File (MCPS),'' HHS/HCFA;
09–70–0520 ''End Stage Renal Disease (ESRD) Program Management and Medical Information System (PMMIS),'' HHS/HCFA/OIS;
09–70–0524 ''Intern and Resident Information System (IRIS),'' HHS/HCFA/OFM;
09–70–0525 ''Medicare Physician Identification and Eligibility System (MPIES),'' HHS/HCFA/OFM;
09–70–0526 ''Common Working File (CWF),'' HHS/HCFA/OIS;
09–70–0527 ''HCFA Utilization Review Investigatory Files (HURI),'' HHS/HCFA;
09–70–0530 ''Medicare Supplier Identification File (MSIF),'' HHS/HCFA/OFM;
09–70–1511 ''Physical Therapists In Independent Practice (Individuals) (PTIP),'' HHS/HCFA/OCSQ;
09–70–2003 ''Completion of State Medicaid Quality Control (MQC) Reviews,'' HHS/HCFA/MB
09–70–2006 ''Income and Eligibility Verification for Medicaid Eligibility Quality Control (MEQC) Reviews,'' HHS/HCFA/MB
09–70–4001 ''Group Health Plan (GHP) System,'' HHS/HCFA;
09–70–4003 ''Medicare HMO/CMP Beneficiary Reconsideration System (MBRS),'' HHS/HCFA;
09–70–6001 ''Medicaid Statistical Information System (MSIS),'' HHS/HCFA/OIS.

[FR Doc. 00–21096 Filed 8–17–00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with the requirement for opportunity for public comment on

proposed data collection projects (section 3506(c) (2) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Public Law 104–13), the Health Resources and Services Administration (HRSA) will publish periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans, call the HRSA Reports Clearance Officer on (301) 443–1129.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques of other forms of information technology.

Proposed Project: The Nursing Education Loan Repayment Program Application (OMB No. 0915–0140)—Extension

This is a request for extension of the application form for the Nursing Education Loan Repayment Program (NELRP). The NELRP was originally authorized by 42 USC 297b(h) (section 836 (h) of the Public Health Service Act) as amended by Public Law 100–607, November 4, 1988. The NELRP is currently authorized by 42 USC 297(n) (section 846 of the Public Health Service Act) as amended by Public Law 102–408, October 13, 1992.

Under the NELRP, registered nurses are offered the opportunity to enter into a contractual agreement with the Secretary, under which the Public Health Service agrees to repay the nurses' indebtedness for nursing education. In exchange, the nurses agree to serve for a specified period of time in certain types of health facilities identified in the statute.

Nurse educational loan repayment contracts will be approved by the Secretary for eligible nurses who have incurred previous monetary indebtedness by accepting a loan for nursing education costs from a bank, credit union, savings and loan association, Government agency or program, school, or other lender that meets NELRP criteria.

Approval is requested for the application form. The application form requires information from two types of respondents:

a. Applicants must provide information on the proposed service site and on all nursing education loans for which reimbursement is requested, and

b. For those applicants accepted into the NELRP, lenders must provide information on loan status for all loans accepted for repayment.

Estimates of Annualized Hour Burden: The application form is not being changed, therefore it will not have significant impact on the time required to complete the form. Burden estimates are as follows:

Form/regulatory requirement	Number of respondents	Responses per respondents	Hours per response	Total burden hours
NELRP Application	1,000	1	1.5	1,500
Loan Verification Form	[1] 200	1	2.5	500
Total	1,200	.....	.....	2.000

[1] The remainder of the loans are verified through credit reports.

Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 14–33 Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857. Written comments should be received within 60 days of this notice.

Dated: August 11, 2000.

James J. Corrigan,

Associate Administrator for Management and Program Support.

[FR Doc. 00–21059 Filed 8–17–00; 8:45 am]

BILLING CODE 4160–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget, in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301)–443–1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: The Health Education Assistance Loan (HEAL) Program Information Collection Requirements—Forms—(OMB No. 0915–0043)

Extension—This clearance request is for extension of approval for three HEAL forms: the HEAL Repayment Schedule—Fixed Rate and the HEAL Repayment Schedule—Variable Rate (provides the borrower with the cost of a HEAL loan, the number and amount of the payments, and the Truth-in-Lending disclosures); the Lender's Report on HEAL Student Loans Outstanding, Call Report (provides information on the status of loans outstanding by the number of borrowers whose loan payments are in various stages of the loan cycle, such as student education and repayment, and the corresponding dollar amounts). These forms are needed to provide borrowers with information on the cost of their loan(s) and to determine which lenders may have excessive delinquencies and defaulted loans.

The estimate of burden for the forms are as follows: