

would be the same as those considered by the SPRS.

The Subcommittee's responsibility is to develop funding recommendations for the NCIPC Director based on the results of the primary review, the relevance and balance of proposed research relative to the NCIPC programs and priorities, and to assure that unwarranted duplication of federally funded research does not occur. The secondary review Subcommittee has the latitude to recommend to the NCIPC Director, to reach over better-ranked proposals in order to assure maximal impact and balance of proposed research. The factors to be considered will include:

- a. The results of the primary review including the application's priority score as the primary factor in the selection process.
- b. The relevance and balance of proposed research relative to the NCIPC programs and priorities.
- c. The significance of the proposed activities in relation to the priorities and objectives stated in "Healthy People 2010," the Institute of Medicine report, "Reducing the Burden of Injury," and the NCIPC "Injury Research Agenda."
- d. Budgetary considerations including the extent to which the budget is reasonable, clearly justified, and consistent with the intended use of funds.

I. Other Requirements

Technical Reporting Requirements

Provide CDC with original plus two copies of:

1. Interim progress reports, no less than 90 days before the end of the budget period. The progress report will serve as your non-competing continuation application, and must contain the following elements:
 - a. Current Budget Period Activities Objectives.
 - b. Current Budget Period Financial Progress.
 - c. New Budget Period Program Proposed Activity Objectives.
 - d. Detailed Line-Item Budget and Justification.
 - e. Additional Requested Information.
 2. Financial status reports, no more than 90 days after the end of the budget period.
 3. Final financial and performance reports, no more than 90 days after the end of the project period.
- Send all reports to the Grants Management Specialist identified in the "Where to Obtain Additional Information" section of this announcement.

Additional Requirements

The following additional requirements are applicable to this program. For a complete description of each, see Attachment I of the program announcement, as posted on the CDC Web site.

- AR-1 Human Subjects Requirements
- AR-2 Requirements for Inclusion of Women and Racial and Ethnic Minorities in Research
- AR-9 Paperwork Reduction Act Requirements
- AR-10 Smoke-Free Workplace Requirements
- AR-11 Healthy People 2010
- AR-12 Lobbying Restrictions
- AR-13 Prohibition on Use of CDC funds for Certain Gun Control Activities
- AR-14 Accounting System Requirements
- AR-15 Proof of Non-Profit Status
- AR-21 Small, Minority, and Women-Owned Business
- AR-22 Research Integrity

Executive order 12372 does not apply to this program.

J. Where To Obtain Additional Information

This and other CDC announcements, the necessary applications, and associated forms can be found on the CDC web site, Internet address: <http://www.cdc.gov>. Click on "Funding" then "Grants and Cooperative Agreements".

For general 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 business management and budget assistance, contact: Wanda Allison, Grants Management Specialist, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341-4146, Telephone: 770-488-2645, E-mail address: wallison@cdc.gov.

For business management and budget assistance in the territories, contact: Angelia Hill, Grants Management Specialist, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341-4146, Telephone: (770) 488-2785, E-mail address: aph8@cdc.gov.

For program technical assistance, contact: Stacy Harper, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, 4770 Buford Highway NE, MS F-41, Atlanta, GA 30341-3724, Telephone number (770) 488-4031, E-mail address: slharper@cdc.gov.

Dated: May 23, 2003.

Sandra R. Manning,

*Director, Procurement and Grants Office,
Centers for Disease Control and Prevention.*
[FR Doc. 03-13652 Filed 5-30-03; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 03057]

Cooperative Agreement for a National Poison Prevention and Control Program; Notice of Availability of Funds; Amendment

A notice announcing the availability of fiscal year (FY) 2003 funds for a cooperative agreement program for a national poison prevention and control program was published in the **Federal Register** on May 7, 2003, Volume 68, Number 88, on pages 24483-24485. The notice is amended as follows: On page 24483, in the second column, section E. Program Requirements, item 1(a) should read: Develop a plan to improve the current national toxics surveillance system, with a focus on improvement of data collection and coding. Enhance real time data collection and aberration detection capabilities of TESS.

Dated: May 23, 2003.

Sandra R. Manning,

*Director, Procurement and Grants Office,
Centers for Disease Control and Prevention.*
[FR Doc. 03-13656 Filed 5-30-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel: Active Surveillance for Pertussis—Surveillance for Vaccine Preventable Disease as a Foundation for Evaluating the Effectiveness and Impact of an Adolescent/Adult Pertussis Immunization Program and for Evaluating the Feasibility of a Pediatric Hospital-Based Sentinel Surveillance Network for Vaccine Preventable Diseases, Program Announcement #03101 and Solicitation 2003-N-0837

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease

Control and Prevention (CDC) announces the following meeting:

Name: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Active Surveillance for Pertussis-Surveillance for Vaccine Preventable Disease as a Foundation for Evaluating the Effectiveness and Impact of an Adolescent/Adult Pertussis Immunization Program and for Evaluating the Feasibility of a Pediatric Hospital-Based Sentinel Surveillance Network for Vaccine Preventable Diseases, Program Announcement #03101 and Solicitation 2003-N-0837.

Times and Dates: 6 p.m.–7 p.m., June 26, 2003. (Open) 7 p.m.–9 p.m., June 26, 2003. (Closed) 8 a.m.–4:30 p.m., June 27, 2003. (Closed)

Place: Doubletree Hotel, 3342 Peachtree Road, NE., Atlanta, GA 30326, Telephone 404.231.1234.

Status: Portions of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c) (4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92–463.

Matters To Be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to Program Announcement #03101 and Solicitation 2003-N-0837.

FOR FURTHER INFORMATION CONTACT: Kim Lane, Associate Director for Management and Operations, National Immunization Program, CDC, 1600 Clifton Road, NE., MS-E05, Atlanta, GA 30333, Telephone 404–639–8201.

The Director, Management Analysis and Services Office has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: May 27, 2003.

Alvin Hall,

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

[FR Doc. 03–13653 Filed 5–30–03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS–367, a, b, and c; CMS–R–38, CMS–566, CMS–10077, and CMS–10072]

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

AGENCY: Centers for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as 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.

1. Type of Information Collection Request: Extension of a currently approved collection; **Title of Information Collection:** Medicaid Drug Rebate Program—Manufacturers; **Form No.:** CMS–367a,b,c (OMB# 0938–0578); **Use:** Section 1927 requires drug manufacturers to enter into and have in effect a rebate agreement with the Federal Government for States to receive funding for drugs dispensed to Medicaid recipients; **Frequency:** Quarterly; **Affected Public:** Business or other for-profit; **Number of Respondents:** 570; **Total Annual Responses:** 2,280; **Total Annual Hours:** 54,780.

2. Type of Information Collection Request: Extension of a currently approved collection; **Title of Information Collection:** Conditions for Coverage for Rural Health Clinics—42 CFR 491.9 Subpart A; **Form No.:** CMS–R–38 (OMB #0938–0334); **Use:** This information is needed to determine if rural health clinics meet the requirements for approval for Medicare Participation.; **Frequency:** Initial

Application for Medicare approval; **Affected Public:** Business or other for-profit, State, Local, or Tribal Gov't., and not-for-profit institutions, Individuals or households, Farms, and Federal Government; **Number of Respondents:** 3,305; **Total Annual Responses:** 3,305; **Total Annual Hours:** 8,580.

3. Type of Information Collection Request: Extension of a currently approved collection; **Title of Information Collection:** Medicare Managed Care Disenrollment Form; **Form No.:** CMS–566 (0938–0507); **Use:** This form provides Medicare beneficiaries the option to disenroll from their Medicare managed care plan through a neutral third party. CMS and SSA have established an agreement via a formal Memorandum of Understanding for SSA to process beneficiary disenrollments from Medicare managed care plans. Prior to 1999, the Social Security Act provided Medicare beneficiaries enrolled in Medicare managed care plans with the option of disenrolling from the plan at a Social Security Field Office; however, Section 4001 of the Balanced Budget Act of 1997 amended the Social Security Act, removing this requirement from the statute; **Frequency:** On Occasion; **Affected Public:** Individuals or Households, Business or other for-profit, Not-for-profit institutions, and Federal Government; **Number of Respondents:** 85,000; **Total Annual Responses:** 85,000; **Total Annual Hours:** 2,805.

4. Type of Information Collection Request: New Collection; **Title of Information Collection:** “Medicare Decisions and Your Rights”; **Form No.:** CMS–10077 (OMB# 0938–NEW); **Use:** Pursuant to 42 CFR 422.568 (c), M+C practitioners must deliver notices to enrollees informing them of their right to obtain a detailed notice regarding services from their M+C organizations. This notice fulfills the regulatory requirement.; **Frequency:** Other (distribution); **Affected Public:** Individuals or Households, Business or other for-profit, Not-for-profit institutions, Federal Government; **Number of Respondents:** 155; **Total Annual Responses:** 5,000,000; **Total Annual Hours:** 83,333.

5. Type of Information Collection Request: New Collection; **Title of Information Collection:** MSInteractive Survey Tool for cms.hhs.gov; **Form No.:** CMS–10072 (OMB# 0938–NEW); **Use:** CMS has developed a survey tool using MSInteractive to obtain feedback from users accessing cms.hhs.gov website to guide future improvements; **Frequency:** on occasion; **Affected Public:** Individuals or Households, Business or