

investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases and other impairments; (2) assist states and their political subdivisions in the prevention of infectious diseases and other preventable conditions and in the promotion of health and well being; and (3) train state and local personnel in health work.

Matters to be Discussed: The agenda items for the meeting will include, but are not limited to, an update and discussions on Healthy People 2010 and presentations from NCEH regarding current activities. Agenda items are tentative and subject to change.

For Further Information Contact: Individuals interested in attending the meeting should contact Kent Taylor, designated federal official, CDC, 4770 Buford Highway NE., MS F-29, Atlanta, Georgia 30341-3724; telephone 770-488-7020, fax 770-488-7024; e-mail: ktaylor@cdc.gov. The deadline for notification of attendance is May 1, 2003.

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 CDC and the Agency for Toxic Substances and Disease Registry.

Dated: April 8, 2003.

Alvin Hall,

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

[FR Doc. 03-9133 Filed 4-14-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Board on Radiation and Worker Health: Meeting

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 committee meeting.

Name: Advisory Board on Radiation and Worker Health (ABRWH).

Time and Date: 3 p.m.-5 p.m., May 1, 2003.

Place: Teleconference call will originate at the Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health (NIOSH), Atlanta, Georgia. Please see "Supplementary Information" for details on accessing the teleconference.

Status: Open to the public, teleconference access limited only by ports available.

Background: The Advisory Board on Radiation and Worker

Health ("the Board") was established under the Energy Employees Occupational Illness Compensation Program Act of 2000 to

advise the President, through the Secretary of Health and Human Services (HHS), on a variety of policy and technical functions required to implement and effectively manage the new compensation program. Key functions of the Board include providing advice on the development of probability of causation guidelines which have been promulgated by HHS as a Final Rule, providing advice on methods of dose reconstruction which have also been promulgated as a Final Rule, evaluating the scientific validity and quality of dose reconstructions conducted by NIOSH for qualified cancer claimants, and providing advice on the addition of classes of workers to the Special Exposure Cohort.

In December 2000, the President delegated responsibility for funding, staffing, and operating the Board to HHS, which subsequently delegated this authority to CDC. NIOSH implements this responsibility for CDC. The charter was signed on August 3, 2001, and in November 2001, the President completed the appointment of members to the Board to ensure a balanced representation on the Board. The initial tasks of the Board have been to review and provide advice on the proposed, interim, and final rules of HHS.

Purpose: This board is charged with a) providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; b) providing advice to the Secretary, HHS, on the scientific validity and quality of dose reconstruction efforts performed for this Program; and c) upon request by the Secretary, HHS, advise the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class.

Matters to be Discussed: Agenda for this meeting will focus on the continuation of discussion regarding the Special Exposure Cohort Notice of Proposed Rule Making finalization of recommendations.

Agenda items are subject to change as priorities dictate.

Supplementary Information: This conference call is scheduled for 3 p.m. Eastern Time. To access the teleconference you must dial 1-800-713-1971. To be automatically connected to the call, you will need to provide the operator with the participant code 373956 and you will be connected to the call.

Contact Person For More Information: Larry Elliott, Executive Secretary, ABRWH, NIOSH, CDC, 4676 Columbia Parkway, Cincinnati, Ohio 45226, telephone 513/841-4498, fax 513/458-7125.

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 CDC and the Agency for Toxic Substances and Disease Registry.

Dated: April 8, 2003.

Alvin Hall,

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

[FR Doc. 03-9135 Filed 4-14-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Institute for Occupational Safety and Health: Meeting

The National Institute for Occupational Safety and Health: (NIOSH) of the Centers for Disease Control and Prevention (CDC) announces the following meeting:

Name: Priorities, strategies and methods for long-term health monitoring of World Trade Center exposed rescue, recovery and restoration workers and volunteers.

Time and Date: 9:30 a.m.-4:30 p.m., May 2, 2003.

Place: New York Academy of Medicine, 1216 Fifth Avenue (corner of 103rd St.), NY, NY 10029, (212) 822-7200. Directions are available at <http://www.nyam.org/directions.shtml>.

Status: Open to the public, limited only by space available. Seating will be limited to approximately 75 people. Due to limited conference space, notification of intent to attend the meeting must be made with Ms. Lou Bagley at (513) 841-4336 or e-mail lbagley@cdc.gov. Requests to attend will be accommodated on a first come basis.

Purpose: To request public assistance in identifying the needs, issues, and priorities for providing long-term medical monitoring to emergency response personnel who responded to the September 11, 2001, terrorist attacks at the World Trade Center, and personnel who participated in the recovery and restoration efforts at the World Trade Center site or at the Staten Island Landfill.

Public Law 108-7 directs the Federal Emergency Management Agency (FEMA), now part of Emergency Preparedness and Response Directorate, Department of Homeland Security, to make available \$90 million from funds appropriated to FEMA in Public Law 107-117 to administer baseline and follow-up screening, clinical examinations, long-term health monitoring and analysis for emergency services, rescue and recovery personnel who responded to the terrorist attacks in New York City. For such services, Public Law 108-7 further directs FEMA to make available not less than \$25 million from this amount for current and retired New York City firefighters. FEMA will be providing the \$90 million in appropriated funds to NIOSH to oversee the development and funding of this long-term medical monitoring program. NIOSH now is requesting input from the public in determining priorities for use of these funds.

Contact Persons for Additional Information: Sherry Baron, MD, MPH, NIOSH, CDC, 4676 Columbia Parkway, M/S R10, Cincinnati, OH 45226-1998, telephone (513) 458-7159, fax (513) 458-7105, e-mail SBaron@cdc.gov.

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 CDC and the Agency for Toxic Substances and Disease Registry.

Dated: April 8, 2003.

Alvin Hall,

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

[FR Doc. 03-9134 Filed 4-14-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS-10087, CMS-2384, CMS-10006]

Agency Information Collection Activities: Proposed Collection; 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: New collection; *Title of Information Collection:* Evaluation of the Illinois and Wisconsin State Pharmacy Assistance Waivers; *Form No.:* CMS-10087 (OMB# 0938-NEW); *Use:* CMS has implemented the Pharmacy Plus Initiative to grant

waivers to states to provide pharmacy benefits to low-income elders with incomes too high to qualify for Medicaid. This study will evaluate the Pharmacy Plus programs initiated in the states of Illinois and Wisconsin using a variety of methods including a descriptive program evaluation, survey of participants, analyses of drug utilization and costs as well as the cost impact to the Medicare and Medicaid programs; *Frequency:* Other: one-time only; *Affected Public:* Individuals or Households; *Number of Respondents:* 2,200; *Total Annual Responses:* 2,200; *Total Annual Hours:* 550.

2. Type of Information Collection
Request: Extension of a currently approved collection; *Title of Information Collection:* Third Party Premium Billing Request; *Form No.:* CMS-2384; *Use:* The Third Party Premium Billing Request is used as an authorization to designate that a family member or other interested party receive the Medicare Premium Bill and pay it on behalf of a Medicare beneficiary. *Frequency:* On occasion; *Affected Public:* Individuals or households; *Number of Respondents:* 15,000; *Total Annual Hours:* 6,250.

3. Type of Information Collection
Request: Extension of a currently approved collection; *Title of Information Collection:* TWWIIA Demonstration to Maintain Independence; *Form No.:* CMS-10006 (OMB# 0938-0799); *Use:* Section 204 of the Ticket to Work and Work Incentives Act provides for the establishment of grants for states that develop and implement demonstration programs designed to support working people with physical or mental impairments that without medical assistance will result in disability. State agencies will be applying for these grants; *Frequency:* Annually; *Affected Public:* State, Local, or Tribal government; *Number of Respondents:* 56; *Total Annual Responses:* 56; *Total Annual Hours:* 5,600.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web site address at <http://cms.hhs.gov/regulations/prd/default.asp>, or E-mail your request, including your address, phone number, OMB number, and CMS 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 CMS Paperwork Clearance Officer designated at the following address:

CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances, Attention: Dawn Willingham, Room: C5-14-03, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: April 3, 2003.

Dawn Willingham,

Acting Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, Office of Strategic Operations and Strategic Affairs, Division of Regulations Development and Issuances.

[FR Doc. 03-9115 Filed 4-14-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS-R-289]

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.

Type of Information Collection
Request: Revision of a currently approved collection; *Title of Information Collection:* Medicare Lifestyle Modification Program Demonstration and Addendum; *Form No.:* CMS-R-0289 (OMB# 0938-0777); *Use:* This demonstration will focus on Medicare sponsored, lifestyle modification programs designed to reverse, reduce, or ameliorate the progression of cardiovascular disease