EPA's IESWTR establishing treatment technique requirements for *Cryptosporidium* in ground water under the influence of surface water does not apply to ground water used for the production of bottled water.

In addition, according to industry information (Ref. 2), the remaining 25 percent of bottled water sold in the United States is derived from public water systems. Public water systems serving at least 10,000 people or more, using surface water or ground water under the direct influence of surface water, must comply with EPA's IESWTR. In the **Federal Register** of April 10, 2000 (65 FR 19046), EPA published a proposed rule (Long Term 1 Enhanced Surface Water Treatment and Filter Backwash Rule (LT1FBR)) to establish NPDWRs consisting of treatment technique requirements for reduction of Cryptosporidium in surface water and in ground water under the direct influence of surface water that public water systems serving less than 10,000 people use as their source water. Therefore, public water systems serving less than 10,000 people using surface water or ground water under the direct influence of surface water, will be subject to any EPA final rule on LT1FBR. Thus, under the EPA's IESWTR and LT1FBR if finalized as proposed, all water obtained from public water systems used for bottled water would be treated previously by public water systems to reduce the contaminant *Cryptosporidium*.

FDA concludes that because surface water and ground water under the direct influence of surface water would be subject to EPA's treatment technique requirements to reduce Cryptosporidium, a standard of quality regulation for bottled water derived from public water systems is not necessary to protect the public health. The contaminant may be contained in public water systems, which would be treated to reduce Cryptosporidium before such water would be used for bottled water. Further, because bottled water sources other than public drinking water are from ground water, which by definition (§ 165.110(a)(2)(ii)) must not be ground water under the direct influence of surface water, Cryptosporidium would not be expected to be present. Thus, FDA also concludes that a standard of quality regulation for bottled water derived from ground water is not necessary to protect the public health because Cryptosporidium would not be in ground water used for bottled water.

IV. References

The following references are on display in the Dockets Management Branch (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852, and may be seen by interested persons between 9 a.m. and 4 p.m., Monday through Friday.

1. MacKenzie, W. R., N. J. Hoxie, M. E. Proctor, M. S. Gradus, K. A. Blair, D. E. Peterson, J. J. Kazmierczak, D. G. Addiss, K. R. Fox, J. B. Rose, and J. P. Davis, "A Massive Outbreak in Milwaukee of Cryptosporidium Infection Transmitted Through the Public Water Supply," New England Journal of Medicine 331:161–167 (1994).

2. Yablonski, C., International Bottled Water Association, letter to Henry Kim, March 23, 2001.

Dated: June 27, 2001.

Margaret M. Dotzel,

Associate Commissioner for Policy. [FR Doc. 01–16910 Filed 7–2–01; 4:22 pm] BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-724]

Agency Information Collection Activities: Submission for OMB Review; 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: Extension of a currently approved collection; Title of Information Collection: Medicare/ Medicaid Psychiatric Hospital Survey Data and Supporting Regulations Contained in 42 CFR 482.60, 482.61 and 482.62; Form No.: HCFA-724 (OMB# 0938-0378); Use: The information collected on this form will assist HCFA in maintaining an accurate data base on providers participating in the Medicare psychiatric hospital program; Frequency: Annually; Affected Public: Federal government, Business or other for-profit, Not-for-profit institutions, and State, local or tribal government; Number of Respondents: 250; Total Annual Responses: 250; Total Annual Hours: 125.

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 30 days of this notice directly to the OMB desk officer:OMB Human Resources and Housing Branch, Attention: Wendy Taylor, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: May 22, 2001.

John P. Burke III,

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

[FR Doc. 01–16819 Filed 7–3–01; 8:45 am] BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-417]

Agency Information Collection Activities: Submission for OMB Review; 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