effective date. Therefore, the Commission has determined to extend the date by which it will require full compliance with § 310.4(b)(4)(iii) until October 1, 2003. The Commission also stays until October 1, 2003, the date by which it will require full compliance with the safe harbor record retention requirement, § 310.4(b)(4)(iv), to the extent it would require record keeping to document the use of a recorded message in instances of call abandonment. The additional six months should give industry ample time to make the changes in their operations necessary to comply with the recording requirement of the call abandonment safe harbor.

The requirement of full compliance with the prohibition on call abandonment (§ 310.4(b)(1)(iv)) is not stayed, and the requirement of full compliance with the other requirements of the call abandonment safe harbor provision (§§ 310.4(b)(4)(i), (ii) & (iv)) similarly is not stayed.[3] The Commission determined that these provisions are necessary to remedy the abusive practice of call abandonment and the related abusive practice of disconnecting the call after only one or two rings, before the consumer can reach the telephone to answer it.[4] Nothing the petitioners have submitted demonstrates that telemarketers would be unable to comply with these call abandonment provisions.

As the Statement of Basis and Purpose indicates, in the future the Commission will announce the date by which full compliance with the national ''do-not-call'' registry provisions of the amended Rule will be required. Full compliance with all other provisions of the amended Rule—with the exception of the Caller ID provision (§ 310.4(a)(7))—will be required by the date on which the amended Rule is effective, March 31, 2003. Full compliance with the Caller ID provisions will be required by January 29, 2004.

By direction of the Commission.

Donald S. Clark,

Secretary.

[FR Doc. 03–7249 Filed 3–25–03; 8:45 am]

BILLING CODE 6750–01–M

[3] The requirement of full compliance with Section 310.4(b)(4)(iv) is not stayed to the extent that it requires record keeping to document compliance with §§ 310.4(b)(4)(i) or (ii).

[4] See the Commission's discussion of these practices and the TSR provisions adopted to remedy them at 68 FR at 4641 (Jan. 29, 2003).

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier: OS–0990–0001]

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

AGENCY: Office of the Secretary, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary, 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: Waiver of the Two-Year Home-Country Physical Presence Requirement for Physician Exchange Visitors to Deliver Health Care Services in Underserved Areas and Supporting regulations 45 CFR part 50.1 through 50.8; Form No.: OMB# 0938–0001; Use: Section 50.4 of the interim final rule published in the **Federal Register** Vol. 67, No. 244, page 77692, on December 19, 2002 contains information collection requirements currently approved under OMB Control Number 0990–0001. Sections 50.5(e)(4) and (5) of the rule contain disclosure requirements. Section 50.5(e)(4) requires facilities or practices sponsoring an Exchange Visitor waiver request for the delivery of health care to post a notice of the charges for services. On an annual basis it is estimated that it will take 300 practices one hour each to prepare and post such notices. The total annual burden associated with this requirement is 300 hours. Section 50.5(e)(5) of the rules contains the requirements for the submission of evidence that the applicant made unsuccessful efforts to recruit a U.S. physician. The burden associated with these requirements is the time and effort necessary for an applicant to submit the documentation. On an annual basis it is estimated that it will take 300 applicants two hours each to prepare and submit this documentation. The total annual burden associated with this requirement is 600 hours. As a note we are requesting approval of the revised forms that are currently approved under OMB number 0990–0001, which are used by the public to comply with the information collection requirements contained in the interim final rule denoted above.

Frequency: On Occasion.

Affected Public: Individuals, Organizations.

Number of Respondents: 600 (300 facilities/300 applicants).

Total Annual Responses: 600.

Total Annual Hours: 900 (300 facilities/600 applicants).

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, or E-mail your request, including your address, phone number, OS document identifier, to *John.Burke@hhs.gov,* or call the Reports Clearance Office on (202) 690–8356. 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: Allison Eydt (OMB #0990–0001), New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: March 10, 2003.

John P. Burke, III,

Paperwork Reduction Act Reports Clearance Officer, Office of the Secretary, Department of Health and Human Services.

[FR Doc. 03–7110 Filed 3–25–03; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Committee on Vital and Health Statistics: Meeting

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services announces the following advisory committee meeting.

Name: National Committee on Vital and Health Statistics (NCVHS), Subcommittee on Standards and Security.

Time and Date: 9 a.m. to 5 p.m., March 25, 2003; 9 a.m. to 1 p.m., March 26, 2003.

Place: Hubert H. Humphrey Building, Room 505A on March 25, Room 705A on March 26, 200 Independence Avenue SW., Washington, DC.

Status: Open.

Purpose: The Subcommittee will continue the process of evaluating PMRI terminologies

in order to select and recommend these terminologies as HIPAA PMRI Terminology Standards. The information that will be reviewed was gathered from the NCVHS PMRI Terminology Questionnaire in January and February 2003. Dr. Walter Sujansky, consultant to the Subcommittee, will present an analysis of the results from the questionnaire. The Subcommittee will then consider the issues raised by this analysis and determine whether additional information is needed from PMRI terminology developers. It will also formulate the questions that will be addressed by the users of PMRI terminologies when they testify to the Subcommittee on May 21st.

For Further Information Contact: Substantive program information as well as summaries of meetings and a roster of Committee members may be obtained from Karen Trudel, Senior Technical Advisor, Security and Standards Group, Centers for Medicare and Medicaid Services, MS: C5–24–04, 7500 Security Boulevard, Baltimore, MD 21244–1850, telephone: 410–786–9937; or Marjorie S. Greenberg, Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, Room 1100, Presidential Building, 6525 Belcrest Road, Hyattsville, Maryland 20782, telephone: (301) 458–4245. Information also is available on the NCVHS home page of the HHS Web site: *http://www.ncvhs.hhs.gov/* where an agenda for the meeting will be posted when available.

Notice: In the interest of security, HHS has instituted stringent procedures for entrance to the Hubert H. Humphrey building by non-government employees. Persons without a government identification card may need to have the guard call for an escort to the meeting.

Dated: March 14, 2003.

James Scanlon,

Acting Director, Office of Science and Data Policy, Office of the Assistant Secretary for Planning and Evaluation.

[FR Doc. 03–7108 Filed 3–25–03; 8:45 am]

BILLING CODE 4151–05–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

Citizens Advisory Committee on Public Health Service (PHS) Activities and Research at Department of Energy (DOE) Sites: Oak Ridge Reservation Health Effects Subcommittee

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Agency for Toxic Substances and Disease Registry (ATSDR) and the Centers for Disease Control and Prevention (CDC) announce the following meeting.

Name: Citizens Advisory Committee on PHS Activities and Research at DOE Sites: Oak Ridge Reservation Health Effects Subcommittee (ORRHES).

Time and Date: 12 p.m.—8 p.m., April 22, 2003.

Place: YWCA of Oak Ridge, 1660 Oak Ridge Turnpike, Oak Ridge, Tennessee 37830. Telephone: (865) 482–9922.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 100 people.

Background: A Memorandum of Understanding (MOU) was signed in October 1990, and renewed in September 2000, between ATSDR and DOE. The MOU delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under sections 104, 105, 107, and 120 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or ''Superfund''). These activities include health consultations and public health assessments at DOE sites listed on, or proposed for, the Superfund National Priorities List, and at sites that are the subject of petitions from the public; and other health-related activities such as epidemiologic studies, health surveillance, exposure and disease registries, health education, substance-specific applied research, emergency response, and preparation of toxicological profiles. In addition, under an MOU signed in December 1990 with DOE, and replaced by an MOU signed in 2000, the Department of Health and Human Services (HHS) has been given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to radiation or to potential hazards from non-nuclear energy production and use. HHS has delegated program responsibility to CDC.

Purpose: This subcommittee is charged with providing advice and recommendations to the Director, CDC, and the Administrator, ATSDR, pertaining to CDC's and ATSDR's public health activities and research at this DOE site. Activities shall focus on providing the public with a vehicle to express concerns and provide advice and recommendations to CDC and ATSDR. The purpose of this meeting is to receive updates from ATSDR and CDC, and to address other issues and topics, as necessary.

Matters to Be Discussed: The agenda includes a discussion of the ATSDR Public Health Assessment on Y–12 Uranium Releases—U.S. Department of Energy (DOE) Oak Ridge Reservation; updates from the Public Health Assessment, Health Needs Assessment, Guidelines and Procedures, Agenda, and the Outreach and Communications Workgroups. Agenda items are subject to change as priorities dictate.

Contact Person for More Information: La Freta Dalton, Designated Federal Official, or Marilyn Palmer, Committee Management Specialist, Division of Health Assessment and Consultation, ATSDR, 1600 Clifton Road, NE., M/S E–32, Atlanta, Georgia 30333, telephone 1–888–42–ATSDR(28737), fax 404/498–1744.

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.

Alvin Hall,

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

[FR Doc. 03–7179 Filed 3–25–03; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Council for the Elimination of Tuberculosis: Notice of Charter Renewal

This gives notice under the Federal Advisory Committee Act (Pub. L. 92–463) of October 6, 1972, that the charter for the Advisory Council for the Elimination of Tuberculosis (ACET) of the Centers for Disease Control and Prevention, Department of Health and Human Services, has been renewed for a 2-year period, through March 15, 2005.

For further information, contact Ronald O. Valdiserri, M.D., Executive Secretary, Advisory Council for the Elimination of Tuberculosis, CDC, 1600 Clifton Road, NE, M/S E–07, Atlanta, Georgia 30333, telephone 404/639–8002 or fax 404–639–8600.

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