

the provisions of the Federal Advisory Committee Act (5 U.S.C. App. 2).

Section 1868(a) of the Act requires that the Council consist of 15 physicians, each of whom must have submitted at least 250 claims for physicians' services under Medicare in the previous year. At least 11 Council members must be physicians as defined in section 1861(r)(1) of the Act, that is, State-licensed physicians of medicine or osteopathy. The other four Council members may include dentists, podiatrists, optometrists, and chiropractors.

The Council must include both participating and nonparticipating physicians, as well as physicians practicing in rural and underserved urban areas. In addition, section 1868(a) of the Act provides that nominations to the Secretary for Council membership must be made by medical organizations representing physicians.

This notice is an invitation to all organizations representing physicians to submit nominees for membership on the Council. Current members whose terms expire in 2001 will be considered for reappointment, if renominated, subject to the Federal Advisory Committee Management Handbook. The Secretary will appoint new members to the Council from among those candidates determined to have the expertise required to meet specific agency needs and in a manner to ensure appropriate balance of membership.

Each nomination must state that the nominee has expressed a willingness to serve as a Council member and must be accompanied by a short resume or description of the nominee's experience. To permit an evaluation of possible sources of conflict of interest, potential candidates will be asked to provide detailed information concerning financial holdings, consultant positions, research grants, and contracts.

Section 1868(b) of the Act provides that the Council meet once each calendar quarter, as requested by the Secretary, to discuss proposed changes in regulations and manual issuances that relate to physicians' services. Council members are expected to participate in all meetings. Section 1868(c) of the Act provides for payment of expenses and a per diem allowance for Council members at a rate equal to payment provided members of other advisory committees. In addition to making these payments, the Department of Health and Human Services provides management and support services to the Council.

Authority: Section 1868 of the Social Security Act (42 U.S.C. 1395ee); 5 U.S.C. App. 2; and 45 CFR part 11.

(Catalog of Federal Domestic Assistance Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: November 28, 2000.

Michael M. Hash,

Acting Administrator, Health Care Financing Administration.

[FR Doc. 00-30717 Filed 12-1-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Availability of Funds Announced in the HRSA Preview; Correction

AGENCY: Health Resources and Services Administration.

ACTION: Notice; correction.

SUMMARY: In the **Federal Register** issue of Friday, July 7, 2000, make the following corrections:

Correction

In the **Federal Register** notice of Friday, July 7, 2000, in Part III "Availability of Funds Announced in the HRSA Preview" of FR Doc. 00-16874:

(1) on page 42223, the grant category beginning in the third column under the heading "Healthy Start Initiative Eliminating Disparities in Perinatal Health (CFDA #93.926E)," is amended to: (a) further restrict eligibility to applicants who will establish community-based consortia of individuals and organizations (including State Title V agencies, consumers of project services, public health departments, hospitals, community health centers, and other significant sources of health care services) that are appropriate for participation. Eligibility remains open to any public or private entity, including an Indian tribe or tribal organization (as defined at 25 U.S.C. 450b); (b) restrict project areas to those which target a geographic area with high annual rates of infant mortality within a particular State, *i.e.*, no statewide programs will be funded and (c) require that grantees coordinate their services and activities with State Title V agencies. Funding priorities and/or preferences will be given only to applicants who were recipients of Healthy Start community-based grants awarded prior to July 2000 (details will be provided in the application guidance). There will be no special considerations. The estimated amount of this competition will be up to

\$66,840,000. It is anticipated that 67 awards will be made.

(2) on page 42224, the grant category beginning in the first column under the heading "Interconceptional Care for High-Risk Women and Their Infants (CFDA #93.926K)," is amended to: (a) further restrict eligibility to applicants who will establish community-based consortia of individuals and organizations (including State Title V agencies, consumers of project services, public health departments, hospitals, community health centers, and other significant sources of health care services) that are appropriate for participation. Eligibility remains open to any public or private entity, including an Indian tribe or tribal organization (as defined at 25 U.S.C. 450b); (b) restrict project areas to those which target a geographic area with high annual rates of infant mortality within a particular State, *i.e.*, no statewide programs will be funded and (c) require that grantees coordinate their services and activities with State Title V agencies. Funding priorities and/or preferences will be given only to applicants who were recipients of Healthy Start community-based grants awarded prior to July 2000 (details will be provided in the application guidance). There will be no special considerations.

(3) on page 42224, the grant category beginning in the second column under the heading "Improving Women's Health Through Screening and Intervention for Depression During and Around the Time of Pregnancy (CFDA #93.926L)" is amended to: (a) further restrict eligibility to applicants who will establish community-based consortia of individuals and organizations (including State Title V agencies, consumers of project services, public health departments, hospitals, community health centers, and other significant sources of health care services) that are appropriate for participation. Eligibility remains open to any public or private entity, including an Indian tribe or tribal organization (as defined at 25 U.S.C. 450b); (b) restrict project areas to those which target a geographic area with high annual rates of infant mortality within a particular State, *i.e.*, no statewide programs will be funded and (c) require that grantees coordinate their services and activities with State Title V agencies. Funding priorities and/or preferences will be given only to applicants who were recipients of Healthy Start community-based grants awarded prior to July 2000 (details will be provided in the application

guidance). There will be no special considerations.

(4) on page 42225, the grant category beginning in the second column under the heading "Healthy Start Initiative Eliminating Disparities in Perinatal Health Border Health (CFDA #93.926N)", is amended to: (a) further restrict eligibility to applicants who will establish community-based consortia of individuals and organizations (including State Title V agencies, consumers of project services, public health departments, hospitals, community health centers, and other significant sources of health care services) that are appropriate for participation. Eligibility remains open to any public or private entity, including an Indian tribe or tribal organization (as defined at 25 U.S.C. 450b)); (b) restrict project areas to those which target a geographic area with high annual rates of infant mortality within 62 miles from the Mexican border in a particular State, i.e., no statewide programs will be funded; and (c) require that grantees coordinate their services and activities with State Title V agencies. Funding priorities and/or preferences will be given only to applicants who were recipients of Healthy Start community-based grants awarded prior to July 2000 (details will be provided in the application guidance). There will be no special considerations. The estimated amount of this competition will be up to \$1,500,000. It is anticipated that two awards will be made.

The amendments above conform to changes made in the Healthy Start program by Title XV of Public Law 106-310. Prospective applicants who have submitted letters of intent or requested application materials have been notified directly of this withdrawal. It is anticipated that applications for all four of these competitions will be available December 21, 2000. The deadline for Letters of Intent will be January 15, 2001. The application deadline is March 1, 2001. The anticipated project award date is June 1, 2001.

Two pre-application conferences are scheduled for these competitions. The first conference will be held on the afternoon of Wednesday, December 13, 2000, from 1:30-4:00 p.m., at the Hyatt Regency Washington on Capitol Hill, 400 New Jersey Avenue, NW, Washington, DC, 20001, (202)737-1234. The second conference will be held on Friday, December 15, 2000, at the Hyatt Regency Dallas at Reunion, 300 Reunion Blvd., Dallas, TX, 75207-4498, (214)651-1234, Fax: (214)742-8126, Website: www.hyatt.com. If you plan to attend either one of these pre-

application conferences, please call Shirletia Meredith at (301)443-0543.

FOR FURTHER INFORMATION CONTACT:

Angela Hayes Toliver or Beverly Wright at 301-443-0543 (for CFDA #93.926E); Madelyn Renteria or Alexandra Cossi, at 301-443-0543 (for CFDA #93.926K); Janice Berger or John McGovern at, 301-443-8427 (for CFDA #93.926L); or David de la Cruz, at 301-443-8427 (for CFDA #93.926N), Division of Perinatal Systems and Women's Health, Maternal and Child Health Bureau, Health Resources and Services Administration, Room 11A-05, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857; telephone 1-301-443-8427.

Dated: November 29, 2000.

Claude Earl Fox,

Administrator.

[FR Doc. 00-30824 Filed 12-1-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Availability of Funds Announced in the HRSA Preview; Withdrawal

AGENCY: Health Resources and Services Administration.

ACTION: Notice; withdrawal.

SUMMARY: In the **Federal Register** issue of Friday, July 7, 2000, in Part III "Availability of Funds Announced in the HRSA Preview" of FR Doc. 00-16874, on page 42219, the grant category beginning in the second column under the heading "Continuing Education and Development Cooperative Agreement to Advance Education and Program/Policy Development in Maternal and Child Health (CFDA #93.110TP)," is withdrawn from competition while the Agency is considering its options regarding the activities proposed for support. After a decision is made, another announcement will be published in the **Federal Register**.

Prospective applicants who have submitted letters of intent or requested application materials from the HRSA Grants Application Center have been notified directly of this withdrawal.

FOR FURTHER INFORMATION CONTACT:

Carol Galaty or Sharon Adamo, Office of Program Development, Maternal and Child Health Bureau, Health Resources and Services Administration, Room 11A-22, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857; telephone 1-301-443-2778.

Dated: November 29, 2000.

Claude Earl Fox,

Administrator.

[FR Doc. 00-30825 Filed 12-1-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Availability of Funds Announced in the HRSA Preview; Withdrawal

AGENCY: Health Resources and Services Administration.

ACTION: Notice; withdrawal.

SUMMARY: In the **Federal Register** notice of Friday, July 7, 2000, in Part III "Availability of Funds Announced in the HRSA Preview" of FR Doc. 00-16874, on page 42223, the grant category beginning in the second column under the heading "The Perinatal Systems and Women's Health National Resource Center (CFDA #93.926D)," is withdrawn from competition while the Agency is considering its options regarding the activities proposed for support. After a decision is made, another announcement will be published in the **Federal Register**.

Prospective applicants who have submitted letters of intent or requested application materials from the HRSA Grants Application Center have been notified directly of this withdrawal.

FOR FURTHER INFORMATION CONTACT:

Beverly Wright, Division of Perinatal Systems and Women's Health, Maternal and Child Health Bureau, Health Resources and Services Administration, Room 11A-05, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857; telephone 1-301-443-8427.

Dated: November 29, 2000.

Claude Earl Fox,

Administrator.

[FR Doc. 00-30826 Filed 12-1-00; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request, The Cardiovascular Health Study (CHS)

AGENCY: In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Heart, Lung, and Blood