

only placement" objective for children who are unable to remain with their parent(s).

Oregon proposes to waive those provisions of title IV-E: that require a State to make foster care maintenance payments; that require that foster care maintenance payments be made only on behalf of a child who resides in a foster family home or a child care institution; and that concern the conditions for federal reimbursement for voluntary placements.

CONTACT PERSON: Richard Schoonover, State Office of Services for Children and Families, Oregon Department of Human Resources, 500 Summer Street, NE, Salem, OR 98310-1017, (503) 945-6882, (503) 328-3800 (FAX).

STATE: WEST VIRGINIA.

DESCRIPTION: West Virginia will create a comprehensive, decentralized, specialized system to determine a child's potential eligibility for all funding resources for child welfare programs.

The proposed system would maximize the State's child welfare funds by identifying and accessing additional financial resources available to children in care. The new system would emphasize parental obligation and encourage parental participation.

A resource development unit will be created to identify, pursue and produce accurate claims for all sources of funds to which a child in care may be entitled, e.g., child support, SSI, Black Lung, Railroad Retirement, third party medical, SSA, Veterans's Benefits and titles IV-A, IV-B and IV-E.

West Virginia is requesting a waiver of the title IV-E limit of fifty percent for Federal Financial Participation in a State's administrative costs.

CONTACT PERSON: Mary Jarrett, West Virginia Department of Health and Human Resources, Office of Social Services, Bldg. 6, Room B-850, State Capitol Complex, Charleston, WV 25305, (304) 558-7980, (304) 558-8800 (FAX).

III. Requests for Copies of a Proposal

Requests for copies of a Child Welfare Waiver Demonstration Project proposal should be directed to the appropriate State at the telephone number given above. Questions concerning the content of a proposal should be directed to the State contact listed for the proposal.

(Catalog of Federal Domestic Assistance Program, No. 93.645, Child Services—State Grants; 93.658, Foster Care Maintenance; 93.659, Adoption Assistance)

Dated: August 31, 1995.

Joseph A. Mottola,

Acting Commissioner, Administration on Children, Youth and Families.

[FR Doc. 95-22230 Filed 9-6-95; 8:45 am]

BILLING CODE 4184-01-P

Agency for Health Care Policy and Research

Meeting of the National Advisory Council for Health Care Policy, Research, and Evaluation

AGENCY: Agency for Health Care Policy and Research.

ACTION: Notice of public meeting.

SUMMARY: In accordance with section 10(a) of the Federal Advisory Committee Act, this notice announces a meeting of the National Advisory Council for Health Care Policy, Research, and Evaluation.

DATES: The meeting will be on Thursday, September 28, from 8:30 a.m. to 5:30 p.m.

ADDRESSES: The meeting will be held at the DoubleTree Hotel, 300 Army-Navy Drive, Arlington, VA 22202.

FOR FURTHER INFORMATION CONTACT: Deborah L. Queenan, Executive Secretary of the Advisory Council at the Agency for Health Care Policy and Research, 2101 East Jefferson Street, suite 603, Rockville, Maryland 20852, (301) 594-1459.

In addition, if sign language interpretation or other reasonable accommodation for a disability is needed, please contact Linda Reeves, the Assistant Administrator for Equal Opportunity, AHCP, on (301) 594-6665 no later than September 20.

SUPPLEMENTARY INFORMATION:

I. Purpose

Section 921 of the Public Health Service Act (42 U.S.C. 299c) establishes the National Advisory Council for Health Care Policy, Research, and Evaluation. The Council provides advice to the Secretary and the Administrator, Agency for Health Care Policy and Research (AHCP), on matters related to AHCP activities to enhance the quality, appropriateness, and effectiveness of health care services and access to such services through scientific research and the promotion of improvements in clinical practice and in the organization, financing, and delivery of health care services.

The Council is composed of public members appointed by the Secretary. These members are: Robert A. Berenson, M.D.; F. Marian Bishop, Ph.D.; Linda

Burnes Bolton, Dr.P.H.; John W. Danaher, M.D.; Helen Darling, M.A.; Nancy J. Kaufman, M.S.; William S. Kiser, M.D.; Robert M. Krughoff; Risa J. Lavizzo-Mourey, M.D.; W. David Leak, M.D.; Harold S. Luft, Ph.D.; Barbara J. McNeil, M.D.; Walter J. McNerney, M.H.A.; Edward B. Perrin, Ph.D.; Louis F. Rossiter, Ph.D.; Albert L. Siu, M.D.; and Ellen B. White, M.B.A.

There also are Federal ex officio members. These members are: Administrator, Substance Abuse and Mental Health Services Administration; Director, National Institutes of Health; Director, Centers for Disease Control and Prevention; Administrator, Health Care Financing Administration; Commissioner, Food and Drug Administration; Assistant Secretary of Defense (Health Affairs); and Chief Medical Director, Department of Veterans Affairs.

II. Agenda

On Thursday, September 28, 1995, the meeting will begin at 8:30 a.m. with the call to order by the Council Chairman. The Administrator, AHCP, will update the status of current Agency issues and program initiatives followed by Council discussion. The meeting will adjourn at 5:30 p.m.

Agenda items are subject to change as priorities dictate.

Dated: August 30, 1995.

Clifton R. Gaus, D. Sc.,

Administrator.

[FR Doc. 95-22220 Filed 9-6-95; 8:45 am]

BILLING CODE 4160-90-M

National Institutes of Health

Technology Assessment Conference on Integration of Behavioral and Relaxation Approaches Into the Treatment of Chronic Pain and Insomnia

Notice is hereby given of the NIH Technology Assessment Conference on "Integration of Behavioral and Relaxation Approaches Into the Treatment of Chronic Pain and Insomnia," which will be held October 16-18, 1995, in the Natcher Conference Center of the National Institutes of Health, 9000 Rockville Pike, Bethesda, Maryland 20892. The conference begins at 8:30 a.m. on October 16, at 8 a.m. on October 17, and at 9 a.m. on October 18.

Millions of Americans are afflicted with persistent medical disorders that involve behavioral and psychological components. Chronic pain and insomnia are two of the more common disorders with such involvement. Despite the acknowledged importance