Dated: January 22, 1996.

Roberta Katson,

Director, Division of Information Resource Management Services.

[FR Doc. 96–1339 Filed 1–25–96; 8:45 am]

BILLING CODE 4184–01–M

Centers for Disease Control and Prevention

Injury Research Grant Review Committee: Conference Call 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 conference call committee meeting.

Name: Injury Research Grant Review Committee (IRGRC).

Time and Date: 2 p.m.–5 p.m., February 12, 1996.

Place: National Center for Injury Prevention and Control (NCIPC), CDC, Koger Center, Vanderbilt Building, 1st Floor, Conference Room 1006, 2939 Flowers Road, South, Atlanta, Georgia 30341. (Exit Chamblee-Tucker Road off I–85.)

Status: Open: 2 p.m.–2:15 p.m., February 12, 1996. Closed: 2:15 p.m.–5 p.m., February 12, 1996.

Purpose: This committee is charged with advising the Secretary of Health and Human Services, the Assistant Secretary for Health, and the Director, CDC, regarding the scientific merit and technical feasibility of grant applications relating to the support of injury control research projects and injury prevention research centers.

Matters To Be Discussed: Agenda items for the meeting will include announcements, discussion of review procedures, future meeting dates, and review of grant applications.

Beginning at 2:15 p.m., through 5 p.m., February 12, the Committee will meet to conduct a review of grant applications. This portion of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c) (4) and (6), title 5 U.S.C., and the Determination of the Associate Director for Management and Operations, CDC, pursuant to Pub. L. 92–463.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Richard W. Sattin, M.D., Executive Secretary, IRGRC, National Center for Injury Prevention and Control, CDC, 4770 Buford Highway, NE, M/S K58, Atlanta, Georgia 30341–3724, telephone (770) 488–4580.

Dated: January 23, 1996.

Julia M. Fuller,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 96–1495 Filed 1–25–96; 8:45 am]

BILLING CODE 4163–18–M

Savannah River Site Environmental Dose Reconstruction Project: Public Workshops

The National Center for Environmental Health (NCEH) of the Centers for Disease Control and Prevention (CDC) announces the following meeting.

Name: Savannah River Site Environmental Dose Reconstruction Project: Public Workshops.

Date: Wednesday, February 14, 1996.

Time: 7 p.m.–9 p.m.

Place: Holiday Inn Express, 1350 Whiskey Road, Aiken, South Carolina 29803.

Date: Thursday, February 15, 1996.

Time: 7 p.m.–9 p.m.

Place: Hilton—The DeSoto, 15 East Liberty Street, Savannah, Georgia 31401.

Status: Open to the public for observation and comment, limited only by the space available. The meeting room will accommodate approximately 50 people.

Background: Under a Memorandum of Understanding (MOU) signed in December 1990 with the Department of Energy (DOE), 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 and other persons potentially exposed to radiation or to potential hazards from non-nuclear energy production and use. HHS delegated program responsibility to CDC.

In addition, an MOU was signed in October 1990 and renewed in November 1992 between ATSDR and DOE. The MOU delineates the responsibilities and procedures for ATSDR's public health activities at DOE site 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.

Purpose: The purpose of these meetings is to support research which evaluates past releases of radioactive materials and chemicals from the SRS to the surrounding environment. The Project has already undergone a first phase. Phase I involved searching the site to identify and retrieve important documents to be used for dose reconstruction. Phase II will use this information to calculate chemical and radiological source terms and identify possible intake pathways (eating, drinking, and inhalation) for people who have lived in the SRS area.

Agenda items are identical for each meeting, and subject to change as priorities dictate.

Contact Person for More Information: Paul G. Renard, Project Manager, Radiation Studies Branch, Division of Environmental Hazards and Health Effects, NCEH, CDC, 4770 Buford Highway, NE, (F–35), Atlanta, Georgia 30341–3724, telephone 770/488–7040, FAX 770/488–7044.

Dated: January 22, 1996.

Julia M. Fuller,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 96–1365 Filed 1–25–96; 8:45 am]

BILLING CODE 4163–18–M

Food and Drug Administration

[Docket No. 96N–0012]

Animal Drug Export; ANIPRYL® Tablets

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that Deprenyl Animal Health, Inc., has filed an application requesting approval for export of the animal drug ANIPRYL® (l-selegiline hydrochloride, l-deprenyl hydrochloride) tablets to Canada.

ADDRESSES: Relevant information on this application may be directed to the Dockets Management Branch (HFA–305), Food and Drug Administration, 12420 Parklawn Dr., rm. 1–23, Rockville, MD 20857, and to the contact person identified below. Any future inquiries concerning the export of nonfood animal drugs under the Drug Export Amendments of 1986 should also be directed to the contact person.

FOR FURTHER INFORMATION CONTACT: Gregory S. Gates, Center for Veterinary Medicine (HFV–114), Food and Drug Administration, 7500 Standish Pl., Rockville, MD 20855, 301–594–1617.

SUPPLEMENTARY INFORMATION: The drug export provisions in section 802 of the Federal Food, Drug, and Cosmetic Act (the act) (21 U.S.C. 382) provide that FDA may approve applications for the export of drugs that are not currently approved in the United States. Section 802(b)(3)(B) of the act sets forth the requirements that must be met in an application for approval. Section 802(b)(3)(C) of the act requires that the agency review the application within 30 days of its filing to determine whether the requirements of section 802(b)(3)(B) have been satisfied. Section 802(b)(3)(A) of the act requires that the agency publish a notice in the Federal Register within 10 days of the filing of an application for export to facilitate public participation in its review of the

application. To meet this requirement, the agency is providing notice that Deprenyl Animal Health, Inc., 10955 Lowell, suite 710, Overland Park, KS 66210, has filed application number 8008 requesting approval for export of the animal drug ANIPRYL® (l-selegiline hydrochloride, l-deprenyl hydrochloride) tablets to Canada. The drug is administered orally for the treatment of uncomplicated canine pituitary dependent hyperadrenocorticism. The tablets are not indicated for treatment of other forms of Cushing's syndrome. The application was received and filed in the Center for Veterinary Medicine on January 4, 1996, which shall be considered the filing date for purposes of the act.

Interested persons may submit relevant information on the application to the Dockets Management Branch (address above) in two copies (except that individuals may submit single copies) and identified with the docket number found in brackets in the heading of this document. These submissions may be seen in the Dockets Management Branch between 9 a.m. and 4 p.m., Monday through Friday.

The agency encourages any person who submits relevant information on the application to do so by February 5, 1996, and to provide an additional copy of the submission directly to the contact person identified above, to facilitate consideration of the information during the 30-day review period.

This notice is issued under the Federal Food, Drug, and Cosmetic Act (sec. 802 (21 U.S.C. 382)) and under authority delegated to the Commissioner of Food and Drugs (21 CFR 5.10) and redelegated to the Center for Veterinary Medicine (21 CFR 5.44).

Dated: January 18, 1996.

Robert C. Livingston,

Director, Office of New Animal Drug Evaluation, Center of Veterinary Medicine.

[FR Doc. 96–1321 Filed 1–25–96; 8:45 am]

BILLING CODE 4160–01–F

Health Care Financing Administration

[ORD–078–N]

Medicare Program; Announcement of Funding Availability for a Cooperative Agreement for an End-Stage Renal Disease (ESRD) Managed Care Demonstration

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Notice.

SUMMARY: This notice is to inform interested parties of an opportunity to apply for funds for a cooperative agreement from HCFA's Office of Research and Demonstrations for the ''End-Stage Renal Disease (ESRD) Managed Care Demonstration.''

FOR FURTHER INFORMATION, CONTACT: Bonnie Edington (410) 786–6617.

SUPPLEMENTARY INFORMATION:

I. Background

Section 2355 of the Deficit Reduction Act of 1984 (Pub. L. 98–369) required the Secretary to grant demonstration waivers for social health maintenance organization (SHMO) projects that provide for the integration of health and social services at a fixed annual prepaid capitation rate.

Section 4207(b)(4)(B) of the Omnibus Budget Reconciliation Act of 1990 (Pub. L. 101–508) amended section 2355 of Pub. L. 98–369 to include a requirement that the Secretary conduct up to four additional SHMO projects to demonstrate the effectiveness and feasibility of innovative approaches to refining current targeting and financing methodologies and benefit design for SHMOs.

Section 13567(b) of the Omnibus Budget Reconciliation Act (OBRA) of 1993 (Pub. L. 103–66) further amended section 2355 of Pub. L. 98–369, requiring the Secretary to include the integration of acute and chronic care management for patients with end-stage renal disease through expanded community care case management services in at least one of the four additional SHMO projects.

II. Provisions of this Notice

This notice is to inform interested parties of the opportunity to apply for funds for a cooperative agreement to operate an ''End-Stage Renal Disease (ESRD) Managed Care Demonstration,'' involving the treatment of Medicare-eligible ESRD patients in a managed care setting as required by OBRA 1993. Interested parties are required to submit an offical application for consideration for grant funding and commencement of site development activities. Subject to funds availability, a one-time award of approximately $175,000 is expected to be given to each selected awardee. HCFA expects to award one or more demonstrations through the application process.

Any organizational entity may apply. However, the applicant must be capable of assuring that the service delivery system under the demonstration will integrate acute and chronic care services, through expanded community care case management services, for ESRD patients. In addition, the applicant must meet all applicable State requirements for bearing financial risk.

Awardees are expected to have a 9 to 12-month development period subsequent to award and prior to service delivery. In the three-year service delivery phase of the demonstration, awardees will be paid on a capitation basis in which the capitation amount will be adjusted to reflect treatment status (that is, maintenance dialysis, transplant, or functioning graft.

Potential applicants who wish to request the full solicitation and application packet should call Ms. Edington at the above telephone number, send an E–mail message to BEDINGTON@HCFA.GOV, or write to the following address: Bonnie Edington, Health Care Financing Administration, Office of Research and Demonstrations, Mail Stop C3–24–07, 7500 Security Boulevard, Baltimore, MD 21244–1850. These packets will be mailed to all requestors within approximately 10 days from the date of this notice. Completed applications, including full proposals, will be due approximately 70 days following the date of this notice. The exact due date for applications will be specified in the application packet. Awards are expected to be made in 1996.

Authority: Section 402 of the Social Security Amendments of 1967, as amended (42 U.S.C. 1395b-1); section 222(a) of the Social Security Amendments of 1972, as amended (42 U.S.C. 1395–1(note)); section 2355 of the Deficit Reduction Act of 1984, as amended; section 4207(b)(4)(B) of the Omnibus Budget Reconciliation Act of 1990; section 13567(b) of the Omnibus Budget Reconciliation Act of 1993.

In accordance with the provisions of Executive Order 12866, this notice was reviewed by the Office of Management and Budget.

(Catalog of Federal Domestic Assistance Program No. 93.779 Health Financing Research, Demonstrations and Experiments)

Dated: October 3, 1995.

Bruce C. Vladeck,

Administrator, Health Care Financing Administration.

[FR Doc. 96–1261 Filed 1–25–96; 8:45 am]

BILLING CODE 4120–01–P

[BPO–134–NC]

Medicare Program; Revised Criteria and Standards for Evaluating Durable Medical Equipment, Prosthetics, Orthotics, and Supplies Regional Carriers' Performance Beginning February 1, 1996

AGENCY: Health Care Financing Administration (HCFA), HHS.