''Direct Loan System Requirements,'' dated December 14, 1998. The draft is being issued to update a December 1993 document. The draft incorporates: (1) statutory and regulatory changes; (2) technological changes; and (3) JFMIP documentation changes. The document is designed to provide financial managers with Governmentwide mandatory requirements for financial systems in order to process and record financial events effectively and efficiently, and to provide complete, timely, reliable, and consistent information for decision makers and the public.

DATES: Comments are due by February 26, 1999.

ADDRESSES: Copies of the exposure draft have been mailed to Agency Senior Financial Officials and are available on the JFMIP website: http://www.financenet.gov/financenet/fed/jfmip/jfmipexp.htm.

Comments should be addressed to JFMIP, 441 G Street NW., Room 3111, Washington, DC 20548.

FOR FURTHER INFORMATION CONTACT: Dennis Mitchell, 202–512–5994 or via Internet: mitchelld.jfmip@gao.gov

SUPPLEMENTARY INFORMATION: The Federal Financial Management Improvement Act (FFMIA) of 1996 mandated that agencies implement and maintain systems that comply substantially with Federal financial management systems requirements, applicable Federal accounting standards, and the U.S. Government Standard General Ledger at the transaction level. The FFMIA statute codified the JFMIP financial systems requirements documents as a key benchmark that agency systems must meet in order to be substantially in compliance with systems requirements provisions under FFMIA. To support the requirements outlined in the FFMIA, we are updating requirements documents that are obsolete and publishing additional requirements documents.

Comments received will be reviewed and the exposure draft will be revised as necessary. Publication of the final requirements will be mailed to agency senior financial officials and will be available on the JFMIP website.

Karen Cleary Alderman,

Executive Director, Joint Financial Management Improvement Program.

[FR Doc. 99–158 Filed 1–5–99; 8:45 am]

BILLING CODE 1610–02–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Notice of a Cooperative Agreement With Meharry Medical College

The Office of Minority Health (OMH), Office of Public Health and Science, announces that it will enter into an umbrella cooperative agreement with Meharry Medical College. This cooperative agreement is an umbrella cooperative agreement and will establish the broad programmatic framework in which specific projects can be supported by various agencies during the project period.

The purpose of this cooperative agreement is to strengthen the nation's capacity to prepare health professionals from disadvantaged backgrounds to serve minority populations and to develop a national model for improving health care delivery to indigent and underserved citizens. The ultimate goal is to improve the health status of minorities and disadvantaged people.

Authorizing Legislation

This cooperative agreement is authorized under section 1807(e)(1) of the Public Health Service Act, as amended.

Background

Assistance will be provided only to Meharry Medical College to accomplish the objectives of this cooperative agreement because it has the following combination of factors:

1. Meharry Medical College is the largest private, historically black institution exclusively dedicated to educating health care professionals and biomedical scientists in the United States.

2. Meharry Medical College has historically trained a significant number of African American physicians and dentists in the United States. Currently, 15 percent of those practicing are Meharry graduates. Since 1970, Meharry has awarded more than 10 percent of the Ph.D's in biomedical sciences received by African Americans.

3. The Majority of Meharry's graduates practice in medically underserved rural and inner city areas.

4. Meharry, a private academic health center, has forged an agreement with a public hospital to establish a unique model for the efficient distribution of resources in delivering improved services for poor and indigent citizens.

This cooperative agreement will be awarded in FY 1999 for a 12-month budget period within a project period of five-years. Depending upon the types of projects and availability of funds, it is anticipated that this cooperative agreement will initially receive approximately $3,000,000. Continuation awards within the project period will be made on the basis of satisfactory progress and the availability of funds.

Under this cooperative agreement, OMH will:

1. Meet with Meharry Medical College representatives to discuss and approve work plans, including objectives, data integrity and confidentiality, evaluation techniques and budget items;

2. Provide guidance in critical areas, including but not limited to financing, accounting, and resources management.

3. Review and approve the development of managed care curricula and evaluation designs; and

4. Review and approve the implementation and dissemination of relevant project findings, final reports prior to dissemination to public and private parties.

Meharry will:

1. Devote its best effort to improving the administration and financing of Meharry Medical College;

2. Develop a plan to integrate residents of other area health professions institutions into the surgery, OB/GYN and pediatric services of Metropolitan Nashville General Hospital at the Meharry campus with the expressed intent of enhancing health service and education of undergraduate medical students;

3. Develop a plan to create a collaborative relationship between Meharry's family medicine program and other local higher education institutions to expand family practice activity throughout middle Tennessee;

4. Continue to develop an integrated services network between Meharry's faculty practice plan and other local area health delivery systems;

5. Carry out plans to improve the quality and quantity of its faculty; and

6. Work closely and cooperatively with the consultants and technical assistance supported or provided by HHS.

Where To Obtain Additional Information

If you are interested in obtaining additional information regarding this project, contact Ms. Mimi Chafin, Division of Program Operations, Office of Minority Health, 5515 Security Lane, Suite 1000, Rockville, Maryland 20852 or telephone (301) 594–0769.

The Catalogue of Federal Domestic Assistance number is 93.004.

Dated: December 10, 1998.

Clay E. Simpson, Jr.,

Deputy Assistant Secretary for Minority Health.

[FR Doc. 99–200 Filed 1–5–99; 8:45 am]

BILLING CODE 4160–17–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Emergency TANF Data Report (ACF–198).

OMB No.: 0970–0164.

Description: This information is being collected to meet the statutory requirements of section 411 of the Social Security Act. It consists of disaggregated and aggregated demographic and program information that will be used in determining participation rates, performance awards, and other statutorily required indicators for the Temporary Assistance for Needy families (FANF) program. OMB previously approved this data collection through December 31, 1998. We are now requesting an extension through March 31, 2000 in order to maintain continuity of data collection.

Respondents: State, Local or Tribal Government.

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ACF–198	54	4	451	97,416

Estimated Total Annual Burden Hours: 97,416.

Additional Information: Copies of the proposed collection may be obtained by writing to The Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, SW, Washington, DC 20447, Attn: ACF Reports Clearance Officer.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, 725 17th Street, NW, Washington, DC 20503, Attention: Desk Officer for the Administration for Children and Families.

Dated: December 31, 1998.

Bob Sargis,

Acting Reports Clearance Officer.

[FR Doc. 99–201 Filed 1–5–99; 8:45 am]

BILLING CODE 4184–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 98F–1199]

Zeneca Biocides; Filing of Food Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that Zeneca Biocides has filed a petition proposing that the food additive regulations be amended to provide for the safe use of 2-methyl-4,5-trimethylene-4-isothiazolin-3-one as a preservative for paper coatings intended for use in contact with aqueous food.

FOR FURTHER INFORMATION CONTACT: Mark A. Hepp, Center for Food Safety and Applied Nutrition (HFS–215), Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202–418–3098.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (sec. 409(b)(5) (21 U.S.C. 348(b)(5))), notice is given that a food additive petition (FAP 7B4525) has been filed by Zeneca Biocides, Foulkstone 1405, 2nd, 1800 Concord Pike, P.O. Box 15457, Wilmington, DE 19850–5457. The petition proposes to amend the food additive regulations in § 176.170 *Components of paper and paperboard in contact with aqueous and fatty foods* (21 CFR 176.170) to provide for the safe use of 2-methyl-4,5-trimethylene-4-isothiazolin-3-one as a preservative for paper coatings intended for use in contact with aqueous foods.

The agency has determined under 21 CFR 25.32(q) that this action is of a type that does not individually or cumulatively have a significant effect on the human environment. Therefore, neither an environmental assessment nor an environmental impact statement is required.

Dated: December 7, 1998.

Laura M. Tarantino,

Acting Director, Office of Premarket Approval, Center for Food Safety and Applied Nutrition.

[FR Doc. 99–198 Filed 1–5–99; 8:45 am]

BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 77N–0240; DESI 12836]

Dipyridamole; Drugs for Human Use; Drug Efficacy Study Implementation; Withdrawal of Approval of Abbreviated New Drug Applications

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is withdrawing conditional approval of abbreviated new drug applications (ANDA's) and pertinent parts of ANDA's for certain dipyridamole drug products. FDA is also declaring three unapproved dipyridamole drug products unlawful. FDA is withdrawing approval because there is a lack of substantial evidence that these drugs are effective for long-term therapy of chronic angina pectoris.

EFFECTIVE DATE: February 5, 1999.

ADDRESSES: Requests for opinion of the applicability of this notice to a specific product should be identified with Docket No. 77N–0240 and reference number DESI 12836 and directed to the Division of Prescription Drug Compliance and Surveillance (HFD–330), Center for Drug Evaluation and Research, Food and Drug Administration, 7500 Standish Pl., Rockville, MD 20855.

FOR FURTHER INFORMATION CONTACT: Mary E. Catchings, Center for Drug Evaluation and Research (HFD–7), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–594–2041.