

Activity	No. of respondents	Responses per respondent	Hours per response	Total hours
TOTAL			3,680

* Although these questionnaires will be of roughly the same length as the others, we have included time for getting children organized in the classrooms.

Dated: February 9, 1999.
Nancy Cheal,
Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention (CDC).
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 BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review: Comment Request

Title: ACF-696T Child Care Development Fund Financial Reporting Form.

OMB No.: New.

Description: The form provides specific data regarding claims and provides a mechanism. Failure to collect this data would seriously compromise ACF's ability to monitor expenditures. This information is also used to estimate outlays and may be used to prepare ACF budget submissions to Congress.

Respondents: State, Local and Tribal Governments.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ACF-696T	236	1	8	1,888

Estimated Total Annual Burden Hours: 1,888.

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

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 to 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, N.W., Washington, DC 20503, Attn: Lori Schack.

Dated: February 9, 1999.

Bob Sargis,
Acting Reports Clearance Officer.
 [FR Doc. 99-3567 Filed 2-12-99; 8:45 am]
 BILLING CODE 4184-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General

Privacy Act; Notification of New System of Records in Conjunction With the Healthcare Integrity and Protection Data Bank

AGENCY: Office of Inspector General (OIG), HHS.

ACTION: Notice of a new system of records.

SUMMARY: In accordance with the requirements of the Privacy Act, the Office of the Inspector General (OIG) is setting forth a notice of a proposed new system of records in order to implement the requirements of the Healthcare Integrity and Protection Data Bank (HIPDB). The new HIPDB is being established in accordance with section 1128E of the Social Security Act (the Act), as added by section 221(a) of the Health Insurance Portability and Accountability Act of 1996. Section 1128E of the Act specifically directs the Secretary, acting through the OIG, to create a national health care fraud and abuse data collection program for the reporting and disclosure of certain final adverse actions (excluding settlements in which no findings of liability have been made) taken against health care providers, suppliers, or practitioners, and maintain a data base of final adverse actions taken against health care providers, suppliers, or practitioners.

Groups that have access to this new data bank system include Federal and State government agencies; health plans; and self queries from health care suppliers, providers and practitioners. Reporting is limited to the same groups that have access to the information. We invite comments from interested parties on the proposed internal and routine use of information in this system of records.

DATES: The OIG has sent a Report of a New System of Records to the Congress and to the Office of Management and Budget (OMB) on February 16, 1999. This new system of records will be effective 40 days from the date submitted to OMB unless the OIG receives public comments that would result in a contrary determination. To assure consideration, public comments must be delivered to the address provided below by no later than 4 p.m. on March 18, 1999.

ADDRESSEES: Please mail or deliver your written comments on the new system of records to: Office of Inspector General, Department of Health and Human Services, Attention: OIG-61-N, Room 5246, Cohen Building, 330 Independence Avenue, SW., Washington, DC 20201.

Because of staffing and resource limitations, we cannot accept comments by facsimile (FAX) transmission. In commenting, please refer to file code OIG-61-N.

FOR FURTHER INFORMATION CONTACT: Rick Burguières, Investigative Policy and