

(4) Minimize the burden of the collection of information on those who are to respond.

Comments relating to any additional aspects and features of the ACES Program are also welcomed, and will be carefully considered.

B. Annual Reporting Burden

Respondents: 1,000,000; annual responses: 1,000,000; average hours per response: .15; burden hours: 250,000.

Copy of Proposal

A copy of this proposal may be obtained by contacting Stanley Choffrey at the above address.

Dated: February 9, 1999.
Edward C. Loeb,
Acting Deputy Associate Administrator for Acquisition Policy.
 [FR Doc. 99-3571 Filed 2-12-99; 8:45 am]
BILLING CODE 6820-61-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice of a Meeting of the National Bioethics Advisory Commission (NBAC)

SUMMARY: Pursuant to Section 10(d) of the Federal Advisory Committee Act, as

amended (5 U.S.C. Appendix 2), notice is given of a meeting of the National Bioethics Advisory Commission. The Commission will address (1) research involving human embryonic stem cells and (2) the use of human biological materials in research. Some Commission members may participate by telephone conference. The meeting is open to the public and opportunities for statements by the public will be provided on March 2, 1999 from 11:30 am to 12 noon.

Dates/times	Location
March 2, 1999, 8:00 am-5:30 pm	Junior Ballroom, Sheraton Premiere at Tyson's Corner, Virginia, 8661 Leesburg Pike, Vienna, Virginia 22182.
March 3, 1999, 8:00 am-12 noon	Same Location as Above.

SUPPLEMENTARY INFORMATION: The President established the National Bioethics Advisory Commission (NBAC) on October 3, 1995 by Executive Order 12975 as amended. The mission of the NBAC is to advise and make recommendations to the National Science and Technology Council, its Chair, the President, and other entities on bioethical issues arising from the research on human biology and behavior, and from the applications of that research.

Public Participation

The meeting is open to the public with attendance limited by the availability of space on a first come, first serve basis. Members of the public who wish to present oral statements should contact Ms. Patricia Norris by telephone, fax machine, or mail as shown below and as soon as possible at least 4 days before the meeting. The Chair will reserve time for presentations by persons requesting to speak and asks that oral statements be limited to five minutes. The order of persons wanting to make a statement will be assigned in the order in which requests are received. Individuals unable to make oral presentations can mail or fax their written comments to the NBAC staff office at least five business days prior to the meeting for distribution to the Commission and inclusion in the public record. The Commission also accepts general comments at its website at bioethics.gov. Persons needing special assistance, such as sign language interpretation or other special accommodations, should contact NBAC staff at the address or telephone number listed below as soon as possible.

FOR FURTHER INFORMATION CONTACT: Ms. Patricia Norris, National Bioethics Advisory Commission, 6100 Executive Boulevard, Suite 5B01, Rockville, Maryland 20892-7508, telephone 301-402-4242, fax number 301-480-6900.

Dated: February 9, 1999.
Eric M. Meslin,
Executive Director, National Bioethics Advisory Commission.
 [FR Doc. 99-3606 Filed 2-12-99; 8:45 am]
BILLING CODE 4160-17-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Health Care Policy and Research Special Emphasis Panel Meeting

In accordance with section 10(a) of the Federal Advisory Committee Act (5 U.S.C., Appendix 2), announcement is made of the following special emphasis panel scheduled to meet during the month of March 1999:

Name: Health Care Policy and Research Special Emphasis Panel.
Date and Time: March 19, 1999, 2:00 p.m.
Place: Agency for Health Care Policy and Research, 2101 E. Jefferson Street, Suite 400, Rockville, MD 20852.
 Open March 19, 1999, 2:00 p.m. to 2:15 p.m.
 Closed for remainder of meeting.
Purpose: to review and evaluate grant applications.
Agenda: the open session of the meeting will be devoted to a business meeting covering administrative matters. During the closed session, the panel will be reviewing and discussing grant applications dealing with health services research issues. In accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C.,

Appendix 2 and 5 U.S.C., 552b(c)(6), the Administrator, Agency for Health Care Policy and Research (AHCPR), has made a formal determination that this latter session will be closed because the discussions are likely to reveal information concerning individuals associated with the grant applications. This information is exempt from mandatory disclosure.

Anyone wishing to obtain a roster of members or other relevant information should contact Jenny Griffith, Committee Management Officer, Office of Research Review, Education, and Policy, AHCPR, Suite 400, 2101 East Jefferson Street, Rockville, Maryland 20852, Telephone (301) 594-1847.

Agenda items for this meeting are subject to change as priorities dictate.

Dated: February 8, 1999.
John M. Eisenberg,
Administrator.
 [FR Doc. 99-3633 Filed 2-12-99; 8:45 am]
BILLING CODE 4160-90-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[INFO-99-09]

Proposed Data Collections Submitted for Public Comment and Recommendations

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 Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the

proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 639-7090.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques for other forms of information technology. Send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road,

MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project

1. An Evaluation Study of an HIV/STD Prevention Curriculum for Youth Attending Alternative Schools to be Conducted From 1999 to 2002—New

The National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Division of Adolescent and School Health—The purpose of this request is to obtain OMB clearance to conduct a randomized trial of a curriculum to reduce behaviors related to HIV/STD transmission among 14 to 18 year old students in 30 court and community schools in Northern California. Participants will respond to surveys of attitudes, knowledge, and

behavior related to HIV/STD transmission and prevention at baseline and at 6, 12, and 18 month post-tests. Reduction of behaviors among adolescents related to HIV and STD transmission, and reduction of the prevalence of STDs is the focus of at least seven objectives in *Healthy People 2000: Midcourse Review and 1995 Revisions*. There have been few studies assessing the effectiveness of curricula to reduce HIV/STD related risk behaviors in this high-risk adolescent population. Data gathered from this study will provide information about how HIV/STD risk behavior may be effectively reduced among alternative school students.

The total estimated cost to respondents is \$50,400 assuming a minimum wage for students of \$5.25 in the study period.

Respondents	No. of respondents	No. of responses/respondent	Average burden/response (in hrs.)	Total burden hours (in hrs.)
Alternative school students	2400	4	1.0	9600
Total				9600

2. Evaluative Research for the National Bone Health Education Campaign (NBHEC)—New

National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Nutrition and Physical Activity Communications Team, in cooperation with the Office on Women's Health, is developing a national osteoporosis prevention campaign targeting girls ages 9-18—the National Bone Health Campaign (NBHC). The 5-year campaign will begin by targeting girls ages 9-12 and their parents and then expand to girls 13-18 and their parents. Funding for the campaign has been approved for the first two years of the program, so the research presented here is only that to be conducted in the those two years.

The research will consist of:

- Message tests with representative samples of 200 girls ages 9-12, 200 girls ages 13-18 and 200 parents of girls ages 9-12;
 - Baseline telephone surveys of representative samples of 1000 girls 9-12 and 1000 girls 13-18;
 - Follow-up survey of representative sample of 1000 girls ages 9-12; and
 - Annual surveys of 400 girls 9-12 and annual surveys of 200 parents of girls 9-12 in five "sentinel" sites.
- Specifically, the purpose of the research is to
- Pre-test campaign messages to ensure that they are attention-getting, understandable, personally relevant, and credible for the target audiences;
 - Provide ongoing assessment of campaign events and their effects in five "sentinel" sites; and
 - Provide an overall measure of the campaign's effectiveness over time.

The results of the proposed research will be used to identify and develop effective campaign messages and strategies to promote bone healthy attitudes, knowledge and behaviors among the primary and secondary audiences, and to assist program planners in assessing and refining program tactics. The research will also provide a measure of the success of the program in increasing awareness of bone healthy activities and improving knowledge and attitudes related to those activities among the primary target audience (girls 9-18). The research will also be shared with NBHEC partners (various public and private agencies or organizations) for use in designing and implementing collaborative programs and messages at the national and local levels. The total cost to respondents is estimated at \$10,050.

Activity	No. of respondents	Responses per respondent	Hours per response	Total hours
Message test with girls ages 9-12	200	1	.3	60
Message test with parents of girls ages 9-12	200	1	.3	60
Message test with girls ages 13-18	200	1	.3	60
National baseline survey of 1000 girls ages 9-18	1000 (9-12)	1	.3	300
	1000 (13-18)	1	.3	300
Follow-up survey to baseline	1000 (9-12)	1	.3	300
Ten school surveys of 400 girls ages 9-12	4,000	1	*.5	2,000
Ten phone surveys with 200 parents of girls ages 9-12	2,000	1	.3	600

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).
 [FR Doc. 99-3612 Filed 2-12-99; 8:45 am]
 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 Burguires, Investigative Policy and