

(HCFA), Department of Health and Human Services, has submitted to the Office of Management and Budget (OMB) the following proposal for the collection of information. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Request for Hearing—Part B Medicare Claim and Supporting Regulations in 42 CFR 405.821; *Form No.:* HCFA-1965 (0938-0034); *Use:* Section 1869 of the Social Security Act authorizes a hearing for any individual who is dissatisfied with any determination and amount of benefit paid. This form is used so that a party may request a hearing by a Hearing Officer because the review determination failed to satisfy the appellant. *Frequency:* Annually, Quarterly and Monthly; *Affected Public:* Individual or Households, and Not-for-profit institutions; *Number of Respondents:* 55,000; *Total Annual Responses:* 55,000; *Total Annual Hours:* 9,167.

2. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Request for Reconsideration of Part A Insurance Benefits and Supporting Regulations in 42 CFR 405.711; *Form No.:* HCFA-2649 (0938-0045); *Use:* Section 1869 of the Social Security Act authorizes a hearing for any individual who is dissatisfied with the intermediary's Part A determination or the benefit amount paid. This form is used by a party to request a reconsideration of the initial determination of benefits. *Frequency:* Annually, Quarterly and Monthly; *Affected Public:* Individuals or Households, and Not-for-profit institutions; *Number of Respondents:* 62,000; *Total Annual Responses:* 62,000; *Total Annual Hours:* 15,500.

3. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Request for Part A Medicare Hearing by an Administrative Law Judge and

Supporting Regulations in 42 CFR 498 Subpart D and E; *Form No.:* HCFA-5011A-U6 (0938-0486); *Use:* Section 1869 of the Social Security Act authorizes a hearing for any individual who is dissatisfied with the intermediary's Part A determination or the amount paid. This form is used by the beneficiary or other qualified appellant to request a hearing by an Administrative Law Judge if the reconsideration determination fails to satisfy the appellant. *Frequency:* Annually, Quarterly and Monthly; *Affected Public:* Individuals or Households, and Not-for-profit institutions; *Number of Respondents:* 10,000; *Total Annual Responses:* 10,000; *Total Annual Hours:* 2,500.

4. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Request for Part B Medicare Hearing by an Administrative Law Judge and Supporting Regulations in 42 CFR 498 Subpart D and E; *Form No.:* HCFA-5011B-U6 (0938-0567); *Use:* Section 1869 of the Social Security Act authorizes a hearing for any individual who is dissatisfied with the carrier's Part B determination or the amount paid. This form is used by the beneficiary or other qualified appellant to request a hearing by an Administrative Law Judge if the hearing officer's decision fails to satisfy the appellant. *Frequency:* Annually, Quarterly and Monthly; *Affected Public:* Individuals or Households, and Not-for-profit institutions; *Number of Respondents:* 10,000; *Total Annual Responses:* 10,000; *Total Annual Hours:* 2,500.

To obtain copies of the supporting statement for the proposed paperwork collections referenced above, access HCFA's Web Site Address at <http://www.hcfa.gov/regs/prdact95.htm>, or E-mail your request, including your address and phone number, to [Paperwork@hcfa.gov](mailto:Paperwork@hcfa.gov), or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB Desk Officer designated at the following address: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: August 3, 2000.

**John P. Burke III,**

*HCFA Reports Clearance Officer, HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.*

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**BILLING CODE 4120-03-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Indian Health Service

#### Research and Demonstration Projects for Indian Health

**AGENCY:** Indian Health Service, DHHS.

**ACTION:** Notice of Single Source Cooperative Agreement With the Center for Native American Health, College of Public Health, University of Arizona.

**SUMMARY:** The Indian Health Service (IHS) announces continuation of an award of a cooperative agreement to the Center for Native American Health (CNAH), College of Public Health, University of Arizona, for a demonstration project to build and expand on a unique collaborative partnership that currently exists among the CNAH, the IHS, and the Indian tribes located in the southwestern part of the country. This award is for a final 1-year continuation of a project previously funded for a 2-year period (September 1, 1998 through August 31, 2000). The continuation will be effective September 1, 2000, through August 31, 2001. Funding for the continuation period is \$229,288 plus an annual in-kind contribution by the University of \$94,696.

The award is issued under the authority of the Public Health Service Act, Section 301(a). A general program description is contained in the Catalog of Federal Domestic Assistance, number 93.933.

The specific objectives of the project are: to increase opportunities for subspecialty medical care at reservation health care facilities; to increase the availability of telemedicine at reservation health care facilities; to enhance community health planning and prevention activities; to facilitate counseling of high school level Indian students for entry into health careers; and to demonstrate the possibilities of replication of this collaborative project at other sites.

*Justification for Single Source:* This project has been awarded for an additional 1-year continuation on a non-competitive single source basis. The CNAH is a unique organization within the University that is guided by an

Advisory Council composed of leaders from 13 Indian tribes and tribal organizations located in the southwestern part of the country and health professionals from the Arizona Department of Health, the IHS, and the University. This final year of funding should allow this model demonstration project to become self-sustaining.

*Award of Cooperative Agreement:* An IHS employee who is serving as the Director of CNAH will provide substantial on-going IHS programmatic involvement in the development and direction of this demonstration project. Also, the IHS has health professionals providing project guidance as members of the Advisory Council.

*Contacts:* For program information, contact Ms. Jan Frederick, Acting Chief, Nutrition and Dietetics, Phoenix Area IHS, Two Renaissance Square, 40 North Central, Phoenix, Arizona 85004, telephone (602) 364-5197. For grants information, contact Ms. Martha Redhouse, Grants Management Specialist, Division of Acquisitions and Grants Management, Indian Health Service, Suite 100, 12300 Twinbrook Parkway, Rockville, Maryland 20852, telephone (301) 443-5204.

Dated: September 14, 2000.

**Michel E. Lincoln,**

*Acting Director.*

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**BILLING CODE 4160-16-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Office of Inspector General**

**Program Exclusions: August 2000**

**AGENCY:** Office of Inspector General, HHS.

**ACTION:** Notice of program exclusions.

During the month of August 2000, the HHS Office of Inspector General imposed exclusions in the cases set forth below. When an exclusion is imposed, no program payment is made to anyone for any items or services (other than an emergency item or service not provided in a hospital emergency room) furnished, ordered or prescribed by an excluded party under the Medicare, Medicaid, and all Federal Health Care programs. In addition, no program payment is made to any business or facility, e.g., a hospital, that submits bills for payment for items or services provided by an excluded party. Program beneficiaries remain free to decide for themselves whether they will continue to use the services of an excluded party even though no program

payments will be made for items and services provided by that excluded party. The exclusions have national effect and also apply to all Executive Branch procurement and non-procurement programs and activities.

Subject city, state	Effective date
<b>PROGRAM-RELATED CONVICTIONS</b>	
ALMARALES, BEATRIZ ..... MIAMI, FL	09/20/00
ARORA, VASU ..... LEXINGTON, KY	09/20/00
ARTEAGA, ISIDORO ..... MIAMI, FL	09/20/00
BAKER, VALERIE ..... MELVILLE, NY	09/20/00
BARTZ, NICHOLAS W ..... PHOENIX, AZ	09/20/00
BENNETT, DEREK KEVIN ..... DETROIT, MI	09/20/00
BRACKNEY, JOHN ALBERT ... PEORIA, IL	09/20/00
BROWNING, JOSEPHINE A ... SYLVANIA, OH	09/20/00
CARMONA, MARIA CLARA ..... HIALEAH, FL	09/20/00
CASSITY, SHARON A ..... TOLEDO, OH	09/20/00
CHONG, NANI ..... PHILADELPHIA, PA	09/20/00
CHONG, JOHN Y ..... PHILADELPHIA, PA	09/20/00
CRAUSMAN, JEFFREY ..... TAFT, CA	09/20/00
CUELLO, CARMEN ..... MIAMI, FL	09/20/00
CULLEN, ANDREW ..... OCEANSIDE, NY	09/20/00
DALTON, NANCY SUE ..... CLINTON, IA	09/20/00
DICKSON, DAVID ..... MECHANICSBURG, PA	09/20/00
DREYFUSS, DONALD S ..... BLOOMFIELD HILLS, MI	09/20/00
DUBOIS, MAXINE ELAINE ..... SWARTZ CREEK, MI	09/20/00
EALY, MELISSA DAVINA ..... GOSHEN, OH	09/20/00
EDELSTEIN, JOSEPH ..... ARNOLD, PA	09/20/00
FINA, JOSE ..... MIAMI, FL	09/20/00
FRENCH, PAUL COMLY JR .... BANGOR, MI	09/20/00
GANN, CHARLES THOMAS .... OKLAHOMA CITY, OK	09/20/00
GARCIA, HERIBERTO ..... MIAMI, FL	09/20/00
GARRETT, KATHERYN JANE ..... POTEAU, OK	09/20/00
GLENN, SANDRA SUE ..... FORT SMITH, AR	09/20/00
GOMAN, TRISH M ..... GRADY, AR	09/20/00
GONZALEZ MARTINEZ, LILIANA ..... MIAMI, FL	09/20/00
HADDOCK, CARROLL DEANE ..... YUMA, AZ	09/20/00
HANSON MEDICAL SUPPLY, INC ..... .....	09/20/00

Subject city, state	Effective date
HANSON, MA	
HYNES, GEORGE ADELBERT MINERSVILLE, PA	09/20/00
JEFFRIES-GLASGOW, DEBORAH ..... VIRGINIA BEACH, VA	09/20/00
KEY, LEE T ..... CHICAGO, IL	09/20/00
KLAGES, LISA ANN ..... MILO, IA	09/20/00
MINASYAN, NSHAN ..... LOS ANGELES, CA	09/20/00
MINASYAN, AKOP ..... MONTEBELLO, CA	09/20/00
OTERI, ROSEMARY ..... HANSON, MA	09/20/00
PAPOLCZY, THERESA ..... SANDOVAL, IL	09/20/00
PICCIOTTI, JOSEPH ..... VOORHEES, NJ	09/20/00
PROGRESSIVE CARE AMBULANCE SVC ..... JESSUP, MD	09/20/00
PUBLIC GUARDIAN OF WEST MICHIG ..... BANGOR, MI	09/20/00
RAWANA, SOROJUNI ..... GANADO, AZ	09/20/00
REINKE, HOLLY ..... TOLEDO, OH	09/20/00
RIVERA, SUSAN ..... CHANDLER, AZ	09/20/00
ROBINSON, BYRON C ..... MILTON, MA	09/20/00
ROSENBLATT, SIDNEY MARVIN ..... BRONX, NY	09/20/00
ROSSITER, GROVER CLEVELAND ..... LONGMONT, CO	09/20/00
RUSSELL, THOMAS W ..... WHITE OAK, PA	09/20/00
SANCHEZ-ARGUELLO, JOSE E ..... MIAMI, FL	09/20/00
SHEPPARD, MILLARD C JR ... JESSUP, MD	09/20/00
SIEGEL, HAROLD ..... EASTCHESTER, NY	09/20/00
SIVERHUS, JAMES DELAINE YOUNGTOWN, AZ	09/20/00
SPATZ, JEFFREY ..... PITTSBURGH, PA	09/20/00
UPSHAW, ROBINLENE ..... FRESNO, CA	09/20/00
VOLOSEVICH, EVELYN ..... BALDWIN, NY	09/20/00
VOLOSEVICH HOME CARE, INC ..... BALDWIN, NY	09/20/00
<b>FELONY CONV FOR HC FRAUD 1128(a)(3)</b>	
ALEXANDER, LEROY ..... BONITA, CA	09/20/00
ANAYA, JAVIER MEDA ..... TIJUANA, MEXICO	09/20/00
BAILEY, TONYA ..... PHILADELPHIA, PA	09/20/00
BLACKSHER, MARY MARGARET ..... BRYAN, TX	09/20/00
BROWER, CHRISTINA ..... .....	09/20/00