

encouraged to submit completed survey forms electronically. There are no costs to respondents.

Respondents	Number of responses	Respondents/ respondent	Avg burden/ response (in hours)	Total burden (in hours)
Labs most likely to possess	175	1	1	175
Labs least likely to possess	175	1	30/60	88
Labs that may possess	175	1	45/60	131
Total				394

Dated: October 4, 2001.
Nancy E. Cheal,
Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-02-01]

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 or other forms of information technology. Send comments to Anne O'Connor, 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: Survey of Consumer Reaction to Canadian-style Warning Labels of Tobacco Products—NEW—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control (CDC). The Office on Smoking and Health (OSH), National Center for

Chronic Disease Prevention and Health Promotion, CDC proposes to conduct a national survey of young persons to assess their attitudes towards larger and more graphic cigarette warning labels, such as those currently used in Canada. Although the purpose of cigarette warning labels is to alert consumers about the health hazards of smoking, research suggests that current U.S. warnings fail to get the attention of smokers, an important first step if warnings are to have any deterrent effect. Cigarette warning labels have not changed since 1984 in the United States.

The proposed study will be conducted through implementation of a web-based survey. We propose to administer a 10 minute survey to 2000 persons 18 to 24 years of age. The survey will include images of Canadian cigarette packs with their current warning labels and questions about reactions to these warnings, including acceptability, and perceived usefulness (perceived impact on starting to smoke or deciding to quit). The results of this study will be shared with policy makers and public health officials. There is no cost to respondents other than their time.

Respondents	Number of responses	Responses respondent	Avg. burden per respondent (in hrs)	Total burden (in hrs)
Persons 18-24 years old	2000	1	10/60	333
Total				333

Dated: October 2, 2001.
Nancy E. Cheal,
Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.
 [FR Doc. 01-25564 Filed 10-10-01; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Center for Medicare and Medicaid Services

[HCFA-906]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the

Center for Medicare and Medicaid Services (CMS), 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.

Type of Information Collection Request: Revision of a Currently Approved Collection; *Title of Information Collection:* The National Data Reporting Requirements (NDRR). We are requesting the name of the collection be changed to the Fiscal Soundness Reporting Requirements (FSRR) and Supporting Regulations in 42 CFR 417., .126.478., 162; *Form No.:* HCFA-906 (OMB# 0938-0469); *Use:* HCFA needs this information to establish an on-going fiscal soundness of the Managed Care Organizations in the Medicare + Choice Program; *Frequency:* Quarterly; *Affected Public:* Business or other for-profit; *Number of Respondents:* 300; *Total Annual Responses:* 300; *Total Annual Hours:* 301.

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, 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, DC 20503.

Dated: September 27, 2001.

John P. Burke III,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

Privacy Act of 1974; Report of New System of Records

AGENCY: Department of Health and Human Services (HHS), Centers for Medicare and Medicaid Services (CMS)

(formerly the Health Care Financing Administration).

ACTION: Notice of New System of Records (SOR).

SUMMARY: In accordance with the requirements of the Privacy Act of 1974, we are proposing to establish a new SOR titled, "Provider Enrollment, Chain, and Ownership System (PECOS)," HHS/CMS/OFM, System No. 09-70-0532. PECOS will be used to collect and maintain provider/supplier enrollment information from the Medicare Provider/Supplier Enrollment Application and related forms (Form(s) HCFA-855A, 855B, 855I, 855R, and, 855S). PECOS will collect information provided by the applicant related to identity, qualifications, practice locations, ownership, billing arrangements, reassignment of benefits, surety and bond data, clearinghouses submitting electronic claims, and related organizations. PECOS will also maintain information on business owners, chain home offices and provider/chain associations, managing/directing employees, partners, authorized and delegated representatives, supervising physicians of the supplier, staffing companies, ambulance crew members, and/or interpreting physicians and related technicians. Managing/directing employees include general managers, business managers, administrators, directors, and other individuals who exercise operational or management control over the provider/supplier.

The primary purpose of the SOR is to: (1) Collect information for an applying provider/supplier and record the associations between the applicant and those who have an ownership or control interest in the entity; (2) permit informed enrollment decisions to be made based on past and present business history, any reported exclusions, sanctions and felonious behavior at their location or in multiple contractor jurisdictions; and, (3) ensure that correct payments are made under the Medicare program. Information retrieved from this SOR will also be disclosed to: (1) Support regulatory, reimbursement, and policy functions performed within the Agency or by a contractor or consultant; (2) another Federal or state agency, agency of a state government, an agency established by state law, or its fiscal agent; (3) support constituent requests made to a congressional representative; (4) support litigation involving the Agency; and (5) combat fraud and abuse in certain health benefits programs. We have provided background information about the modified system in the

"Supplementary Information" section below. Although the Privacy Act requires only that CMS provide an opportunity for interested persons to comment on the proposed routine uses, CMS invites comments on all portions of this notice. See **EFFECTIVE DATES** section for comment period.

EFFECTIVE DATES: CMS filed a new system report with the Chair of the House Committee on Government Reform and Oversight, the Chair of the Senate Committee on Governmental Affairs, and the Administrator, Office of Information and Regulatory Affairs, Office of Management and Budget (OMB) on September 26, 2001. To ensure that all parties have adequate time in which to comment, the new SOR, including routine uses, will become effective 40 days from the publication of the notice, or from the date it was submitted to OMB and the Congress, whichever is later, unless CMS receives comments that require alterations to this notice.

ADDRESSES: The public should address comments to: Director, Division of Data Liaison and Distribution, CMS, Mailstop N2-04-27, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. Comments received will be available for review at this location, by appointment, during regular business hours, Monday through Friday from 9 a.m.-3 p.m., Eastern daylight time.

FOR FURTHER INFORMATION CONTACT: Michael Collett, Health Insurance Specialist, Division of Provider/Supplier Enrollment, Program Integrity Group, Office of Financial Management, CMS, N3-10-07, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. The telephone number is 410-786-6121.

SUPPLEMENTARY INFORMATION:

I. Description of the Proposed SOR

A. Background

Prior to PECOS, a national tracking mechanism has not been available to connect those who bill Medicare and those who receive Medicare monies, thus allowing potential fraud and abuse within the Medicare system. With information maintained in PECOS, it will now be possible to link providers/suppliers to the people and organizations with which they have a business relationship and to identify those involved in illegal Medicare activities. Additionally, PECOS will enumerate chain home offices and maintain provider/chain associations. Previously, Medicare contractors collected enrollment information on their own unique application forms. In