# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration [ORD-102-N]

New and Pending Demonstration Project Proposals Submitted Pursuant to Section 1115(a) of the Social Security Act: June 1997

**AGENCY:** Health Care Financing Administration (HCFA).

**ACTION:** Notice.

**SUMMARY:** One new proposal for Medicaid demonstration projects was submitted to the Department of Health and Human Services during the month of June 1997 under the authority of section 1115 of the Social Security Act. No proposals were approved, disapproved, or withdrawn during that time period. (This notice can be accessed on the Internet at http:// www.hcfa.gov/ord/sect1115.htm.) **COMMENTS:** We will accept written comments on this proposal. We will, if feasible, acknowledge receipt of all comments, but we will not provide written responses to comments. We will, however, neither approve nor disapprove any new proposal for at least 30 days after the date of this notice to allow time to receive and consider comments. Direct comments as indicated below.

ADDRESSES: Mail correspondence to: Susan Anderson, Office of Research and Demonstrations, Health Care Financing Administration, Mail Stop C3–11–07, 7500 Security Boulevard, Baltimore, MD 21244–1850.

FOR FURTHER INFORMATION CONTACT: Susan Anderson, (410) 786–3996.

### SUPPLEMENTARY INFORMATION:

### I. Background

Under section 1115 of the Social Security Act (the Act), the Department of Health and Human Services (HHS) may consider and approve research and demonstration proposals with a broad range of policy objectives. These demonstrations can lead to improvements in achieving the purposes of the Act.

In exercising her discretionary authority, the Secretary has developed a number of policies and procedures for reviewing proposals. On September 27, 1994, we published a notice in the **Federal Register** (59 FR 49249) that specified: (1) The principles that we ordinarily will consider when approving or disapproving demonstration projects under the authority in section 1115(a) of the Act;

(2) the procedures we expect States to use in involving the public in the development of proposed demonstration projects under section 1115; and (3) the procedures we ordinarily will follow in reviewing demonstration proposals. We are committed to a thorough and expeditious review of State requests to conduct such demonstrations.

As part of our procedures, we publish a notice in the **Federal Register** with a monthly listing of all new submissions, pending proposals, approvals, disapprovals, and withdrawn proposals. Proposals submitted in response to a grant solicitation or other competitive process are reported as received during the month that grant or bid is awarded, so as to prevent interference with the awards process.

## II. Listing of New, Pending, Approved, Disapproved, and Withdrawn Proposals for the Month of June 1997

A. Comprehensive Health Reform Programs

### 1. New Proposals

No new proposals were received during the month of June.

## 2. Pending Proposal

Pending proposals for the month of May 1997 referenced in the **Federal Register** of July 17, 1997 (62 FR 38314) remain unchanged, except for the addition of the following proposal.

Demonstration Title/State: ARKids First Program—Arkansas Description: The State is proposing to expand Medicaid eligibility and access to health care services for children age 18 and under with gross family income at or below 200 percent of the Federal poverty level. The intent of the waiver is to cover all children not otherwise Medicaid eligible at this income level statewide and to expand access to preventative health care.

Date Received: May 16, 1997. State Contact: Binnie Alberius, Arkansas Department of Human Services, Division of Medical Services, Donaghey Plaza South, P.O. Box 1437, Little Rock, AK 72203–1437, (501) 682–8361.

Federal Project Officer: Joan Peterson, Ph.D., Health Care Financing Administration, Office of Research and Demonstrations, Office of State Health Reform Demonstrations, Mail Stop C3–18–26, 7500 Security Boulevard, Baltimore, MD 21244–1850.

# 3. Approved Conceptual Proposals (Award of Waivers Pending)

No conceptual proposals were approved during the month of June.

4. Approved, Disapproved, and Withdrawn Proposals

No proposals were approved, disapproved, or withdrawn during the month of June.

B. Other Section 1115 Demonstration Proposals

### 1. New Proposal

The following proposal was received during the month of June.

Demonstration Title/State: Maine-Net—Integrated Managed Health Care Plans—Maine.

Description: The Maine-Net project is a two-site demonstration designed to test the efficiency and effectiveness of financing and delivery systems which integrate primary, acute, and long-term care services under a combination of Medicaid capitation payments, Medicare fee-for-service, and/or primary care case management. Participants will be both Medicaid only and dually eligible Medicare/Medicaid beneficiaries who are 65 or older or physically disabled. Enrollment will be mandatory.

Date Received: June 2, 1997. State Contact: Christine Gianopoulos, Bureau of Elder and Adult Services, Maine Department of Human Services, 35 Anthony Avenue, State House Station 11, Augusta, Maine 04333–0011, (207) 624–5335.

Federal Project Officer: Kay Lewandowski, Health Care Financing Administration, Office of Strategic Planning, Mail Stop C3–23–04, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Demonstration Title/State: Mass Health Senior Care Options— Massachusetts.

Description: The Massachusetts
Division of Medical Assistance
submitted a demonstration waiver
application for both Medicare (Section
222) and Medicaid (Section 1115)
programs. The application would
establish integrated care to persons 65
years of age and older who are eligible
for both Medicare and Medicaid through
voluntary enrollment in Senior Care
Organizations (SCO). SCOs are expected
to be available statewide. In addition to
Federal demonstration waivers,
enabling legislation in Massachusetts is
also necessary.

Date Received: June 12, 1997. State Contact: Kate Willrich, Managed Care Program Development, Division of Medical Assistance, 600 Washington Street, Boston, Massachusetts 02111, (617) 210–5466.

Federal Project Officer: William D. Clark, Health Care Financing Administration, Office of Strategic

Planning, Mail Stop C3–21–06, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

2. Pending, Approved, Disapproved, and Withdrawn Proposals

No proposals approved, disapproved, or withdrawn during the month of June. Pending proposals for the month of May 1997 referenced in the **Federal Register** of July 17, 1997 (62 FR 38314) remain unchanged.

### III. Requests for Copies of a Proposal

Requests for copies of a specific Medicaid proposal should be made to the State contact listed for the specific proposal. If further help or information is needed, inquiries should be directed to HCFA at the address above.

(Catalog of Federal Domestic Assistance Program, No. 93.779; Health Financing Research, Demonstrations, and Experiments) Dated: August 6, 1997.

#### Barbara Cooper,

Acting Director, Office of Research and Demonstrations.

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# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on

proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Pub. L. 104–13), the Health Resources and Services Administration (HRSA) will publish periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans, call the HRSA Reports Clearance Officer on (301) 443–1129.

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.

### Proposed Project: The Health Education Assistance Loan (HEAL) Program: Application Form—0915-0038— Extension, No Change

The Health Education Assistance Loan (HEAL) program provides federally-insured loans to students in schools of allopathic medicine, osteopathic medicine, dentistry, veterinary medicine, optometry, podiatric medicine, pharmacy, public health, allied health, or chiropractic, and graduate students in health administration or clinical psychology. Eligible lenders, such as banks, savings and loan associations, credit unions, pension funds, State agencies, HEAL schools, and insurance companies, make HEAL loans which are insured by the Federal Government against loss due to borrowers' death, disability, bankruptcy, and default. The basic purpose of the program is to assure the availability of funds for loans to eligible students who need to borrow money to pay for their educational costs.

The HEAL program is being phased out and no new loans will be made after September 30, 1998 unless reauthorization is enacted. We are, however, requesting a 3-year extension of the OMB approval of the HEAL Application Form HRSA-700 because lenders will continue to use this form for consolidation loans through FY 2000. Students use the application to apply for HEAL loans (through FY 98) and consolidation of loans, schools use the application to determine a student's eligibility and maximum approval amount of each loan (through FY 98 only), and lenders use the application to determine student eligibility and the amount of the installment or disbursement to be given to the borrower, and to process consolidation loans.

The estimate of burden for the application form for FY 98 is as follows:

Type of respondent	Number of respondents	Responses per re- spondent	Total num- ber of re- sponses	Burden per response (minutes)	Total bur- den (hours)
Applicants	8,230 190 11	1 41 748	8,230 7,730 8,230	25 32 35	3,429 4,123 4,801
Total	8,431		24,190		12,353

The estimate of burden for the application form for FY 1999 and 2000 (for consolidation loans only) is as follows:

Type of respondent	Nunber of respondents	Responses per re- spondent	Total num- ber of re- sponses	Burden per hour re- sponse (minutes)	Total bur- den (hours)
Applicants Lenders	500 11	1 45	500 500	25 35	208 292
Total	511		1,000		500

Send comments to Patricia Royston, HRSA Reports Clearance Officer, Room 14–36, Parklawn Building, 5600 Fishers Lane, Rockville, MD, 20857. Written comments should be received within 60 days of this Notice.