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and

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20503, Fax Number: (202) 395-6974
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Dated: September 10, 1998.

John P. Burke III,

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

[FR Doc. 98-24934 Filed 9-16-98; 8:45 am]

BILLING CODE 4120-03-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Partners for the National Organ and Tissue Donation Initiative

AGENCY: Health Resources and Services
Administration, HHS.

ACTION: Notice of opportunity for
partnerships.

SUMMARY: The Health Resources and
Services Administration (HRSA),
Department of Health and Human
Services (DHHS), announces the
opportunity for public or private
nonprofit or for-profit organizations or
corporations to develop partnerships
with DHHS to carry out specific
components of the National Organ and
Tissue Donation Initiative.

DATES: To receive consideration,
requests to participate as a partner must
be received by D.W. Chen, M.D., M.P.H.,
Acting Director, Division of
Transplantation, Office of Special
Programs (OSP), HRSA. There are no
deadlines applicable to this partnership
opportunity.

FOR FURTHER INFORMATION CONTACT: Dr.
D.W. Chen, Acting Director, Division of
Transplantation, OSP, HRSA, Parklawn
Building, Room 7-29, 5600 Fishers
Lane, Rockville, Maryland, 20857, (301)
443-7577.

SUPPLEMENTARY INFORMATION:

Background

While medical advances now enable
more than 20,000 Americans per year to
receive organ transplants that save or
enhance their lives, not enough organs
are available to help everyone in need.
As a result, about 4,000 people die in
the U.S. each year—about 10 every
day—while waiting for a donated
kidney, liver, heart, lung, or other organ.
Today, more than 56,000 people are on
the national organ transplant waiting
list, yet fewer than 9,000 people became
organ donors in 1997. Two major
impediments to donation are that many
families of potential donors are not
asked about donation possibilities, and
many who are asked refuse.

As part of DHHS' efforts to increase
organ and tissue donation, DHHS has
developed the National Organ and
Tissue Donation Initiative (Initiative) to
implement strategies for surmounting
current barriers to donation. The goals
of the Initiative are to: (1) increase
consent to donation, (2) ensure that
families of potential donors are given
the option of donation, and (3) focus
research and increase knowledge about
what works to increase donation.

To address these goals, DHHS will
create a broad national partnership of
public, private, and volunteer
organizations to encourage Americans to
agree to organ and tissue donation. The
partnerships will emphasize the need to
make decisions about donation and to
share these decisions with one's family,
targeting the general public as well as
minority populations.

The Initiative also will address health
care providers, consumers, and
physicians so that all potential donors
are referred by hospitals to organ
procurement organizations (OPOs) and
families may have the option to donate
or not to donate.

Finally, the Initiative encourages
research and evaluation to identify
effective strategies for increasing
donation. This Initiative will build on
more than a decade of experience
gained from government, private, and
volunteer efforts.

Requirements for Partnership

The Initiative is seeking partnerships
with public or private nonprofit or for-
profit organizations or corporations to
develop and implement strategies
addressing the goals and incorporating
the messages of this Initiative with the
overall aim of increasing organ and
tissue donation and focusing on relevant
target groups, including minorities,
health care professionals, government
agencies, community organizations,
businesses, the general public and

others. DHHS will reserve the right to
determine the form, content, and
methods utilized in strategies proposed
by prospective partners. The Initiative
envisioned partnerships with a wide
variety of groups and corporations that
can reach the American public with the
Initiative's message and help to increase
the number of Americans willing to be
organ and tissue donors. These partners
would assist in the development and
implementation of programs and the
development and dissemination of
information materials. Evaluation of
partnership efforts is highly
recommended. Partners' duties will
include:

(1) Identification of strategies to
increase organ and tissue donation and,
where appropriate, evaluation protocols
for measuring the impact of these
strategies; and

(2) Implementation of identified
strategies with evaluation procedures,
where appropriate.

Specific partnerships may be
dependent on the availability of
resources to perform the partnership
activities. Partners may collaborate with
other partners as one way to leverage
and maximize resources.

Eligibility for Partnership

To be eligible, an interested party
must be: (1) a public or a private
nonprofit or for-profit organization or
corporation, and (2) an entity that, by
virtue of its nature and purpose, has a
legitimate interest in the Nation's
health.

Expressions of Interest

Each request for partnership should
be in writing and contain information
pertinent to the partnership
opportunity.

Evaluation Criteria

The partners will be selected by the
Division of Organ Transplantation,
HRSA, in consultation with the Office of
the Secretary, DHHS, based on the
following evaluation criteria:

(1) The interested party's
qualifications and capability to develop,
implement, and (where appropriate)
evaluate strategies to increase organ and
tissue donation that are congruent with
the goals and messages of this Initiative;

(2) The ability of the interested party
to provide or acquire resources for the
development, implementation, and
evaluation (as appropriate) of the
proposed strategy and the interested
party's capability of reaching the
specific population(s) targeted by the
strategy;

(3) A description of the interested
party's dealings with DHHS.

In addition, the Government will evaluate carefully whether to enter into a partnership with an entity that would be deemed a "prohibited source" under the Standards of Ethical Conduct for Employees of the Executive Branch, and may choose to deny a partnership with a "prohibited source." A prohibited source has been defined in 5 CFR 2635.203(d) as any person or entity that (1) is seeking official action by the agency planning the event, (2) does business or seeks to do business with that agency, (3) conducts activities regulated by that agency, (4) has interests that may be substantially affected by the performance or nonperformance of the official duties of an employee of that agency; or (5) is an organization the majority of whose members are described in (1)-(4) above. While partnerships with "prohibited sources" are not necessarily prohibited, the Government must weigh the importance of working with a given "prohibited source" against the appearance of a conflict of interest before that source may be accepted as a partner.

Neither this notice nor actions pursuant thereto create a property right or right of any kind in any natural or artificial person requesting partnership. DHHS has the unilateral right to refuse to enter into a partnership arrangement with any entity, and the exercise of this right is solely within the discretion of DHHS.

Other Information

Prior to the selection of the partners, DHHS staff involved in the Initiative will meet separately with those interested parties who best meet the evaluation criteria. In those situations where the Food and Drug Administration regulates the labeling of products manufactured by the partners, the inclusion of Initiative information on such products will be subject to FDA review and may require agency authorization, depending on how and the context in which the information is to be used. Further, as a general rule, restrictions will apply to the use of Initiative indicia so as to avoid suggestions that DHHS, or any other department or agency of the Federal Government, endorses any of the products involved in the Initiative. Once details of the program have been mutually agreed upon, partners will be required to enter into a partnership agreement with DHHS setting forth the rights and responsibilities of the partner and DHHS.

Dated: September 11, 1998.

Claude Earl Fox,
Administrator.

[FR Doc. 98-24911 Filed 9-16-98; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General

Program Exclusions: August 1998

AGENCY: Office of Inspector General, HHS.

ACTION: Notice of program exclusions.

During the month of August 1998, 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 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
PROGRAM-RELATED CONVICTIONS	
Aginsky, Roman	9/20/1998
Lido Beach, NY	
Alegre, Santiago	9/20/1998
Hialeah, FL	
Anderson, Patricia White	9/20/1998
Decatur, GA	
Ayzenshtat, Zoya	9/20/1998
Merrick, NY	
Bullard, Carol	9/20/1998
Decatur, GA	
Bullard, Lester	9/20/1998
Decatur, GA	
Crowley, Rebecca R	9/20/1998
Batesville, MS	
Crown Ostomy, Inc	9/20/1998
Sunrise, FL	
Cummings, Robert	9/20/1998
Rumford, RI	
Disante, Anthony F	9/20/1998
Coraopolis, PA	
Donlin, Dennis L	9/20/1998
Clairton, PA	
Donski, Valeri	9/20/1998
Brooklyn, NY	
Doval, Ana Maria	9/20/1998
Subject city, state	Effective date
Miami, FL	
Fernandez, Jorge	9/20/1998
Miami, FL	
Gomez, Zoraida	9/20/1998
Hialeah, FL	
Hayes, McCoy, Jr	9/20/1998
Goldsboro, NC	
Hernandez, Gabriel	9/20/1998
Miami, FL	
Jones, Randy	9/20/1998
El Reno, OK	
Keenan, Michelle	9/20/1998
East Ryegate, VT	
Kobashigawa, Ted Hajime	9/20/1998
Sacramento, CA	
Lawrence, Irving Jack	9/20/1998
Conyers, GA	
Lawrence, Renee D	9/20/1998
Conyers, GA	
Lombardo, Edward P	9/20/1998
Milan, MI	
Lynn, Bambi	9/20/1998
Goffstown, NH	
Maxwell, Harold Marion	9/20/1998
Missoula, MT	
McKeller, Annie Alston	9/20/1998
Nashville, NC	
Medi Sheild, Inc	12/17/1997
Tamarac, FL	
Melvin-Hodge, Fayanna L	9/20/1998
Baltimore, MD	
Miner, Ernest Carlton	9/20/1998
Seattle, WA	
Morrisset, Joan V	9/20/1998
Amherst, NY	
Morton, Sallie Jones	9/20/1998
Phenix, VA	
Peck, Kathryn Marie	9/20/1998
Fort Collins, CO	
Penate, Orlando	9/20/1998
Davie, FL	
Peterson, Sandra Marie	9/20/1998
Georgetown, CO	
Polonio, Oscar Jose	9/20/1998
Mesquite, TX	
Reyderman, Georgy	9/20/1998
Brooklyn, NY	
Robbins, Robert Paul	9/20/1998
Las Vegas, NV	
Sadigh, Ahmad	9/20/1998
Staten Island, NY	
Santiesteban, Wenceslao	9/20/1998
Hialeah, FL	
Slaughter, Juanita	9/20/1998
Portsmouth, VA	
Smith, Sharon Joy Harper	9/20/1998
LaGrange, NC	
Torres, Jaime Gotay	12/31/1997
Bayamo, PR	
Torres, Manuel Gotay	12/31/1997
Toa Baja, PR	
Tserlyuk, Yekaterina	9/20/1998
Staten Island, NY	
White, Deborah Williams	9/20/1998
Decatur, GA	
White, Horace Lee	9/20/1998
Decatur, GA	
Yanes, Mario	9/20/1998
Hialeah, FL	
Yanes, Zoraida	9/20/1998