

Security Boulevard, Baltimore, MD 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, MA 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, MD 21244-1850.

Demonstration Title/State: Extending Medicaid Family Planning Benefits for Postpartum Women—Florida (described under B.1. "New Proposals" for the month of September 1997).

3. Approved, Disapproved, and Withdrawn Proposals

No proposals were approved, disapproved, and withdrawn during the months of July, August, September, October, and November 1997.

III. Requests for Copies for 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: December 30, 1997.

Sally K. Richardson,

Director, Center for Medicaid and State Operations.

[FR Doc. 98-2636 Filed 2-3-98; 8:45 am]

BILLING CODE 4120-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Practitioner Data Bank; Change in User Fee and Elimination of Diskette Queries

The Health Resources and Services Administration (HRSA), Department of Health and Human Services (DHHS), is announcing a one dollar increase in the fee charged to entities authorized to request information from the National Practitioner Data Bank (Data Bank) for all queries. Concurrently, HRSA is announcing that the Data Bank will no longer accept queries submitted via diskette.

The current fee structure was announced in the **Federal Register** on January 21, 1997 (62 FR 3048). The user fee is \$3.00 per name per query fee for queries submitted via telecommunications network and paid via an electronic funds transfer or credit card, with query response sent via the telecommunications network. A three dollar surcharge is applied when queries are submitted electronically on a diskette to pay for the extra handling and mailing costs for these queries. An additional \$4.00 is charged for all queries which are paid for by check or money order rather than by electronic funds transfer or credit card to cover the cost of debt management.

The Data Bank is authorized by the Health Care Quality Improvement Act of 1986 (the Act), title IV of Public Law 99-660, as amended (42 U.S.C. 11101 *et seq.*). Section 427(b)(4) of the Act authorizes the establishment of fees for the costs of processing requests for disclosure and of providing such information.

Final regulations at 45 CFR part 60 set forth the criteria and procedures for information to be reported to and disclosed by the Data Bank. Section 60.3 of these regulations defines the terms used in this announcement.

In determining any changes in the amount of the user fee, the Department uses the criteria set forth in § 60.12 (b) of the regulations, as well as allowable costs pursuant to the DHHS Appropriations Act of 1998, P.L. 105-78, enacted November 13, 1997. This Act requires that the Department recover the full costs of operating the Data Bank through user fees. Paragraph (b) of the regulations states:

The amount of each fee will be determined based on the following criteria:

(1) Use of electronic data processing equipment to obtain information—the actual

cost for the service, including computer search time, runs, printouts, and time of computer programmers and operators, or other employees,

(2) Photocopying or other forms of reproduction, such as magnetic tapes—actual cost of the operator's time, plus the cost of the machine time and the materials used,

(3) Postage—actual cost, and

(4) Sending information by special methods requested by the applicant, such as express mail or electronic transfer—the actual cost of the special service.

Based on analysis of the comparative costs of the various methods for filing and paying for queries, the Department is raising all query fees by \$1.00 per name. This price increase is necessitated by increased labor costs and escalating costs for the Data Bank's telecommunications network and data transmission services.

Despite the one dollar increase, electronic querying (telecommunications network) and electronic payment continue to be the most cost-effective methods for requesting information from the Data Bank. The new fee for electronic queries (telecommunications network) with electronic payment will be \$4.00. The fee for querying the Data Bank by telecommunications network and non-electronic payment will be \$8.00. This change is effective April 1, 1998.

When a query is for information on one or more physicians, dentists, or other health care practitioners, the appropriate total fee will be \$4.00 (plus a \$4.00 surcharge for submission and payment as described above) multiplied by the number of individuals about whom information is being requested. For examples, see the table below.

Additionally, due to the continuing decrease in the number of queries submitted via diskette and the wider availability of the telecommunications network, the Department is discontinuing its support for the diskette option. Fewer than 2% of queries are currently submitted via diskette. Therefore, the Department has determined that it is no longer cost-efficient for the Data Bank to accept for processing queries submitted via diskette. The Department recognizes that a few entities may have technical difficulties, the remedies for which may be beyond their control, that preclude successful transmission via the telecommunications network. The Data Bank will attempt to work out appropriate accommodations with these entities. Entities experiencing difficulties submitting queries via the telecommunications network should contact the Data Bank Helpline at 1-800-767-6732 for assistance.

The Department will continue to review the user fee periodically, and will revise it as necessary. Any changes

in the fee and their effective date will be announced in the **Federal Register**.

Query method	Fee per name in query, by method of payment	Examples
Electronic query (Telecommunications network) with electronic payment.	\$4.00 (if paid electronically via credit card or other electronic means and response received electronically).	10 names in query. 10×\$4=\$40.00.
Electronic query (Telecommunications network) with non-electronic payment.	\$8.00 (if not paid via credit card or other electronic means) (\$4.00 fee plus \$4.00 surcharge).	10 names in query. 10×\$8=\$80.00.

Dated: January 28, 1998.

Claude Earl Fox,

Acting Administrator.

[FR Doc. 98-2637 Filed 2-3-98; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Dental Research; Notice of Closed Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following National Institute of Dental Research Special Emphasis Panel (SEP) meetings:

Name of SEP: National Institute of Dental Research Special Emphasis Panel-Review of R03 (98-27).

Dates: February 5, 1998.

Time: 10:00 a.m.

Place: Natcher Building, Rm. 4AN-44F, National Institutes of Health, Bethesda, MD 20892 (teleconference).

Contact Person: Dr. Philip Washko, Scientist Review Administrator, 4500 Center Drive, Natcher Building, Room 4AN-44F, Bethesda, MD 20892, (301) 594-2372.

Purpose/Agenda: To evaluate and review grant applications and/or contract proposals.

This notice is being published less than fifteen days prior to this meeting due to the urgent need to meet timing limitations imposed by the review and funding cycle.

Name of SEP: National Institute of Dental Research Special Emphasis Panel-Review of R29 (98-22).

Dates: February 19, 1998.

Time: 1:00 p.m.

Place: Natcher Building, Rm. 4AN-44F, National Institutes of Health, Bethesda, MD 20892 (teleconference).

Contact Person: Dr. Philip Washko, Scientist Review Administrator, 4500 Center Drive, Natcher Building, Room 4AN-44F, Bethesda, MD 20892, (301) 594-2372.

Purpose/Agenda: To evaluate and review grant applications and/or contract proposals.

Name of SEP: National Institute of Dental Research Special Emphasis Panel-Review of R01 (98-24).

Dates: February 24, 1998.

Time: 10:00 a.m.

Place: Natcher Building, Rm. 4AN-44F, National Institutes of Health, Bethesda, MD 20892 (teleconference).

Contact Person: Dr. Philip Washko, Scientist Review Administrator, 4500 Center Drive, Natcher Building, Room 4AN-44F, Bethesda, MD 20892, (301) 594-2372.

Purpose/Agenda: To evaluate and review grant applications and/or contract proposals.

Name of SEP: National Institute of Dental Research Special Emphasis Panel-Review of R13 (98-28).

Dates: March 11, 1998.

Time: 3:30 p.m.

Place: Natcher Building, Rm. 4AN-44F, National Institutes of Health, Bethesda, MD 20892 (teleconference).

Contact Person: Dr. George Hausch, Chief, Extramural Review Division, 4500 Center Drive, Natcher Building, Room 4AN-44F, Bethesda, MD 20892, (301) 594-2372.

Purpose/Agenda: To evaluate and review grant applications and/or contract proposals.

These meetings will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

(Catalog of Federal Domestic Assistance Program No. 93.121, Oral Diseases and Disorders Research)

Dated: January 27, 1998.

LaVerne Y. Stringfield,

Committee Management Officer, NIH.

[FR Doc. 98-2638 Filed 2-3-98; 8:45 am]

BILLING CODE 4140-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Grant Award to the National Center on Addiction and Substance Abuse (CASA) at Columbia University

AGENCY: Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA), HHS.

ACTION: Availability of grant funds for the National Center on Addiction and Substance Abuse (CASA) at Columbia University.

SUMMARY: This notice is to inform the public that CSAT is making available approximately \$300,000 for an award in FY 1998 to CASA to support a program intended to identify an effective model for maximizing help to Temporary Assistance to Needy Families (TANF) eligible women suffering from alcohol and other drug problems, to eliminate or reduce their substance use, obtain and maintain employment and, consequently, reduce their dependence on welfare. Eligibility for this program is limited to CASA because CASA is the only organization that has established and will soon implement at several sites an experimental design research program for moving substance abusing TANF recipients into sustained employment. The application will be considered for funding on the basis of its overall technical merit as determined through the peer and CSAT National Advisory Council review processes.

An award to CASA will supplement a program that CASA has already initiated with support from the Robert Wood Johnson Foundation to test a comprehensive treatment/employment preparedness model in six sites. Funding from CSAT will allow for the establishment and evaluation of this model in a seventh less populated site. Without CSAT funding, such a site would not have participated in this program and the applicability of the model in a less populated location would not be known. A lead agency will be identified at each program site by CASA. This agency can be a community based substance abuse treatment, employment, or social services agency. The site will integrate gender-specific, culturally/ethnically appropriate, comprehensive treatment (including substance abuse treatment, employability training, medical services, life skills training, support services, and family services) in a nurturing setting, under the guidance of intensive case management. Each site will coordinate with other community resources, as necessary, to ensure that program participants are provided with the comprehensive array of services. A multi-site evaluation, using matched control groups, will be undertaken by an