

GENERAL SERVICES ADMINISTRATION

President's Commission on the Celebration of Women in American History

AGENCY: General Services
Administration.

ACTION: Meeting notice cancellation.

SUMMARY: Notice of meeting cancellation is hereby given to the President's Commission on the Celebration of Women in American History regarding open meeting that was rescheduled from 12 p.m. to 5 p.m. on May 27 or 28, 1999, at the Kennedy Space Center (KSC), Florida, Visitor Complex, Center for Space Education, Pad-A. The notice of the meeting was published in the **Federal Register** on May 20, 1999 at 64 FR 27558.

The meeting will be rescheduled in June. Members will be notified of the date and time.

FOR FURTHER INFORMATION CONTACT: Martha Davis (202) 501-0705. Assistant to the Associate Administrator for Communications, General Services Administration, you may also send inquiries to martha.davis@gsa.gov.

Dated: May 20, 1999.

Beth W. Newburger,
*Associate Administration for
Communications.*

[FR Doc. 99-13334 Filed 5-25-99; 8:45 am]

BILLING CODE 6820-34-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Agency Information Collection Activities: Proposed Collections; Comment Request

The Department of Health and Human Services, Office of the Secretary will periodically publish summaries of proposed information collections projects and solicit public comments in compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995. To request more information on the project or to obtain a copy of the information collection plans and instruments, call the OS Reports clearance Officer on (202) 690-6207.

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.

1. HHS Acquisition Regulations—HHSAR Part 342—Contract Administration—Extension no change—0990-0131—HHSAR 342.7103 requires reporting information when a cost overrun is anticipated. The information is used to determine if a proposed overrun is reasonable—Respondents—State or local governments, Business or other for-profit, non-profit institutions, small businesses. Annual number of Responses: 45; Average burden per response: 20 hours; Total burden: 900 hours.

2. HHS Acquisition Regulation—HHSAR Part 333—Disputes and Appeals—Extension no change—0990-0133—The Litigation and Claims clause is needed to inform the government of actions filed against government contracts—Respondents: State or local governments, Business or other for-profit, non-profit institutions, small businesses. Annual number of Responses: 100; Average burden per response: 30 minutes; Total burden: 50 hours.

3. HHS Acquisition Regulation—HHSAR Part 332—Contract Financing—Extension no change—0990-0134—The requirements of HHSAR Part 332 are needed to ascertain costs associated with certain contracts so as to timely pay contractor. Respondents: State or local governments, small businesses—Burden Information for Cost Sharing Clause—Number of Respondents: 24; Annual Number of Responses per Respondent: 10; Average Burden per Response: one hour; Annual Burden: 240 hours—Burden Information for Letter of Credit Clause—Number of Respondents: 268; Annual Number of Responses: 4; Burden per Response: 1 hour; Estimated Annual Burden: 1072 hours—Total Burden: 1,312 hours.

4. HHS Acquisition Regulation—HHSAR Part 324—Protection of Privacy and Freedom of Information—Extension no change—0990-0136—The confidentiality of Information requirements are needed to prevent improper disclosure of confidential data. Respondents: State or local governments, Business of other for-profit, non-profit institutions, small businesses; Annual Number of Responses: 449; Average Burden per Response: 8 hours; Estimated Burden: 3,592 hours.

5. HHS Acquisition Regulation—HHSAR Part 316—Types of Contracts—Extension no change—0990-0138—The Negotiated Overhead Rate—Fixed clause is needed since fixed rates are authorized by OMB Circular and a clause is not provided in the Federal Acquisition Regulation (FAR). Respondents: non-profit institutions; Annual Number of Responses: 376; Average Burden per Response: 10 hours; Estimated Burden: 3,760 hours.

Send comments to Cynthia Agens Bauer, OS Reports Clearance Officer, Room 503H, Humphrey Building, 200 Independence Avenue S.W., Washington DC, 20201. Written comments should be received within 60 days of this notice.

Dated: May 17, 1999.

Dennis P. Williams,
Deputy Assistant Secretary, Budget.
[FR Doc. 99-13346 Filed 5-25-99; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control And Prevention

[INFO-99-19]

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, the Centers for Disease Control and Prevention (CDC) is providing opportunity for public comment on proposed data collection 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 for other forms of information technology. Send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written

comments should be received with 60 days of this notice.

Proposed Project

1. Evaluation of Provider Adherence to CDC STD Treatment Guidelines in Two Managed Care Plans—New

The National Center for HIV, STD, and TB Prevention (NCHSTP) is proposing a pilot survey of 1,000 practitioners in two managed care plans to evaluate how CDC's most recent edition (1998) of the Sexually Transmitted Disease (STD) Treatment Guidelines influence practice. The pilot

survey will be conducted in two large, mixed model managed care plans which are located in two different geographic regions of the U.S. The survey is expected to last from 3–6 months. The CDC periodically publishes national guidelines on the diagnosis and treatment of sexually transmitted diseases; however, little is known about the impact of the guidelines on clinical practice and treatment choices, the practical use of the guidelines, or utility to providers. Data gathered from this study will provide preliminary information about the extent to which

providers are aware of the guidelines, their access to the guidelines, their use of the guidelines, and factors that enable or preclude use of the guidelines. The information will assist CDC in determining ways to improve practitioners' understanding and promote utilization of the guidelines; determine ways to make them more available for medical practitioners; and increase the use of the guidelines in appropriate medical practices. The total annual cost to respondents is estimated to be \$21,146, assuming an average salary of \$ 63.31 per hour.

Respondents	Number of respondents	Number of responses/respondent	Avg. burden/response (in hrs.)
Family core (adult family member)	42,000	1	.35
Adult Core (sample adult)	42,000	1	.35
Child Core (adult family member)	18,000	1	.25
Cancer Module (sample adult)	42,000	1	.333

Dated: May 20, 1999.

Charles Gollmar,

Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 99–13329 Filed 5–25–99; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY–12–99]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–7090. Send written comments to CDC, Desk Officer; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503. Written comments should be received within 30 days of this notice.

Proposed Project

1. 2000 National Health Interview Survey, Basic Module (0920–0214)—Revision—The National Center for Health Statistics (NCHS). The annual National Health Interview Survey (NHIS) is a basic source of general statistics on the health of the U.S. population. Due to the integration of health surveys in the Department of Health and Human Services, the NHIS also has become the sampling frame and first stage of data collection for other major surveys, including the Medical Expenditure Panel Survey, the National Survey of Family Growth, and the National Health and Nutrition Examination Survey. By linking to the NHIS, the analysis potential of these surveys increases. The NHIS has long been used by government, university, and private researchers to evaluate both general health and specific issues, such as cancer, AIDS, and childhood immunizations. Journalists use its data to inform the general public. It will continue to be a leading source of data for the Congressionally-mandated "Health US" and related publications, as well as the single most important source of statistics to track progress toward the National Health Promotion

and Disease Prevention Objectives, "Healthy People 2000."

Because of survey integration and changes in the health and health care of the U.S. population, demands on the NHIS have changed and increased, leading to a major redesign of the annual core questionnaire, or Basic Module, and a redesign of the data collection system from paper questionnaires to computer assisted personal interviews (CAPI). Those redesigned elements were implemented in 1997 and are expected to be in the field until 2006. Ad hoc Topical Modules on various health issues are provided for in the redesigned NHIS. This clearance is for the fourth full year of data collection, planned for January–December 2000. The Basic Module on CAPI will result in publication of new national estimates of health statistics, release of public use micro data files, and a sampling frame for other integrated surveys. It will also include a "Topical Module" (or supplement) on Cancer. The cancer module will repeat similar surveys conducted in 1987 and 1992, and will help track many of the Healthy People 2000 Objectives for cancer. The total annual burden hours are 47,900.

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Family Core (adult family member)	42,000	1	.35
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Child Core (adult family member)	18,000	1	.25
Cancer Module (sample adult)	42,000	1	.333