

would not reasonably be expected by consumers.

Paragraph VIII of the proposed order requires that proposed respondents: (1) Not disseminate to any distributor any material containing any representations prohibited by the order; (2) not authorize any distributor to make any representations prohibited by the order; (3) send a required notice to each distributor with whom proposed respondents have done business since January 1, 1996, requesting that the distributor cease using any advertising or promotional materials containing unsubstantiated claims for CMO, requesting distributors not to make unsubstantiated oral representations, informing the distributor of this settlement, attaching a copy of this proposed complaint and order, and not including any other documents in the mailing; (4) for a period of three (3) years following service of the order, send the required notice to each distributor who has not previously received the notice; the notices shall be sent within one week of the first shipment of respondents' products to the distributor; (5) require distributors to submit to proposed respondents all advertising and promotional materials and claims for any products or programs covered by the order for review prior to their dissemination and publication, and not authorize distributors to disseminate materials and claims unless they comply with the order, or furnishing to distributors marketing materials that do not contain representations prohibited by the order and requiring the distributors to submit for review all advertising and promotional materials for a particular product covered by the order that contain representations that are not substantially similar to the materials most recently provided by proposed respondents; and (6) monitor distributors' advertising and promotional activities, immediately terminate the right of any distributor who disseminates advertisements or marketing material or makes oral representations prohibited by the order, and immediately provide information to the Federal Trade Commission about any such distributor and the materials used. "Distributor" is defined in the proposed order to mean any purchaser or transferee of a product covered by the order who acquires product from proposed respondents, with or without consideration, and who sells, or who has sold, such product to other sellers or to consumers, including individuals, retail stores, or catalogs. Paragraph IX of the proposed order requires proposed

respondents to retain for five (5) years after the last correspondence to which they pertain and to make available to the Federal Trade Commission on request, copies of all notification letters and other communications with distributors relating to the requirements of Paragraph VIII.

Paragraph X of the proposed order contains record keeping requirements for materials that substantiate, qualify, or contradict covered claims and requires proposed respondents to keep and maintain all advertisements and promotional materials containing any representation covered by the proposed order. In addition, Paragraph XI requires distribution of a copy of the consent decree to current and future officers and agents. Further, Paragraph XII requires the filing of a compliance report.

Finally, Paragraph XIII of the proposed order provides for the termination of the order after twenty years under certain circumstances.

The purpose of this analysis is to facilitate public comment on the proposed order, and it is not intended to constitute an official interpretation of the agreement and proposed order, or to modify in any way their terms.

By direction of the Commission.

**Benjamin I. Berman,**

*Acting Secretary.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration on Aging

#### Public Information Collection Requirement Submitted to the Office of Management and Budget (OMB) for Clearance

**AGENCY:** Administration on Aging, HHS.

The Administration on Aging (AoA), Department of Health and Human Services, is submitting to the Office of Management and Budget (OMB) the following proposal for the collection of information in compliance with the Paperwork Reduction Act of 1995 (Pub. L. 96-511):

**Title of Information Collection:** State Program Report (SPR): Reporting Requirements for Titles III and VII of the Older Americans Act.

**Type of Request:** Extension of currently approved collections.

**Use:** To extend the expiration date of the currently approved information collection format without any change in substance or the method of collection. This format conforms to the

requirements of the Older Americans Act, as amended.

**Frequency:** Annual.

**Respondents:** State and Territorial Units on Aging.

**Estimated Number of Respondents:** 50 States, the District of Columbia, the U.S. Virgin Islands, Puerto Rico, and the U.S. territories.

**Total Estimated Burden Hours:** 141,132.

**Additional Information or Comments:** The Administration on Aging is submitting to the Office of Management and Budget for approval an extension of the existing information collection format for state programs administered under the Older Americans Act. The AoA last announced reporting specifications for the current format in the **Federal Register** on February 11, 1999. There was one written response to that announcement. AoA responded to the concern raised in the comment about flexibility by continuing to be responsive to specific state requests for extensions and waivers.

The Office of Management and Budget approved use of the current collection instrument subject to the following conditions:

"For the FY 1996 SPR, AoA is responsive to state-specific problems in meeting the November 30, 1996 deadline (as discussed in the State of New York's public comments to OMB dated July 16, 1996 and August 16, 1996). Particularly for large complex states, this deadline may be challenging, and a month extension may make a considerable difference in the quality of data submitted by local units. In addition, the next submission for OMB review should include an analysis of state compliance with the November deadline. If a significant number of states persist in missing this deadline and request extensions, the AoA should consider alternatives to this deadline, e.g. a month extension or a statutory amendment extending its January deadline;

In response to numerous comments (e.g. the State of California, the State of Wisconsin, and the State of New Mexico), AoA allows states additional flexibility by providing limited state-specific extensions of the compliance deadline for the FY 1997 SPR, based upon criteria outlined in a future state policy transmittal. Criteria for granting such an extension should include submission of a state plan for meeting the SPR requirements in the future and evidence that the state has made reasonable progress in fulfilling the SPR objectives to date. In drafting this transmittal, the AoA must consult with state aging agency associations such as

NASUA [National Association of State Units on Aging] and the NAAAA [National Association of Area Agencies on Aging]. The transmittal must be approved by OMB prior to final issuance. If the AoA's authorizing legislation is amended or GPRA [Government Performance and Review Act] performance measures are formalized, AoA will meet with OMB immediately to discuss appropriate amendments to the SPR. As a result of these discussions, OMB may request that an amended SPR be resubmitted for OMB review pursuant to the Paperwork Reduction Act. In addition, in the next submission for OMB review, the AoA will continue to evaluate the appropriateness of performance measurement and accountability reporting for each of its services, as well as the statistical validity and reliability of these data; and, to enhance cross cutting research within HHS, AoA ensures that its uniform ADL/IADL [activities of daily living/instrumental activities of daily living] definitions for FY 1997 can be cross walked with the definitions in the Public Health Service's National Health Interview Survey."

The Administration on Aging has complied with the request that it be flexible in granting extensions of the deadline when requested and continues to do so. This submission includes an analysis of state compliance with the November 30, 1996 deadline but is actually based upon the FY 1997 requirements because that was the first fiscal year that compliance with the full set of items in the current collection instrument was requested by the AoA. The AoA's authorizing legislation has not been amended. The information collected through this effort is needed to meet the baseline performance measures identified in the AoA GPRA Performance Plan. Also, AoA is developing in conjunction with state and area agencies on aging a core set of outcome measures which may be voluntarily adopted by the network.

For copies of the reporting requirements and/or a copy of the analysis of states' compliance with the November 30, 1996 deadline call the Administration on Aging, Office of State and Community Programs at (202) 619-0011. Written comments and

recommendations for the proposed information collection requirements should be sent, within thirty days of the publication of this notice, to the following address: Office of Information and Regulatory Affairs, Attention: Allison Eydt, OMB Desk Officer, Office of Management and Budget, Washington, DC 20503.

Dated: June 23, 1999.

**Jeanette C. Takamura,**  
Assistant Secretary for Aging.

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control And Prevention

[INFO-99-23]

#### 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 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. National Hospital Discharge Survey—(0920-0212)—Extension—National Center for Health Statistics (NCHS)

The National Hospital Discharge Survey (NHDS), which has been conducted continuously by the National Center for Health Statistics, CDC, since 1965, is the principal source of data on inpatient utilization of short-stay, non-Federal hospitals and is the only annual source of nationally representative estimates on the characteristics of discharges, the lengths of stay, diagnoses, surgical and non-surgical procedures, and the patterns of use of care in hospitals in various regions of the country. It is the benchmark against which special programmatic data sources are compared. Data collected through the NHDS are essential for evaluating health status of the population, for the planning of programs and policy to elevate the health status of the Nation, for studying morbidity trends, and for research activities in the health field. NHDS data have been used extensively in the production of goals for the Year 2000 Health Objectives and the subsequent monitoring of these goals. In addition, NHDS data provide annual updates for numerous tables in the Congressionally-mandated NCHS report, Health, United States. Data for the NHDS are collected annually on approximately 300,000 discharges from a nationally representative sample of noninstitutional hospitals, exclusive of Federal, military and Veterans' Administration hospitals. The data items collected are the basic core of variables contained in the Uniform Hospital Discharge Data Set (UHDDS). Data for approximately fifty-five percent of the responding hospitals are abstracted from medical records while the remainder of the hospitals supply data through commercial abstract service organizations, state data systems, in-house tapes or printouts. There is no actual cost to respondents since hospital staff who actively participate in the data collection effort are compensated by the government for their time.

Respondents (hospitals)	Number of respondents	Number of responses/respondent	Avg. burden/response (in hrs)	Total burden (in hrs)
Medical Record Abstracts:				
Primary Procedure Hospitals .....	73	250	.08333	1,521
Alternate Procedure Hospitals .....	189	250	.01667	788
In-House Tape or Printout Hospitals .....	37	12	.18333	81