FEDERAL MEDICAL ASSISTANCE PERCENTAGES AND ENHANCED FEDERAL MEDICAL ASSISTANCE PERCENTAGES, EFFECTIVE OCTOBER 1, 1999—SEPTEMBER 30, 2000—Continued

[Fiscal year 2000]

State		Enhanced Federal med- ical assistance percentages
Nebraska	60.88	72.62
Nevada	50.00	65.00
New Hampshire	50.00	65.00
New Jersey	50.00	65.00
New Mexico	73.32	81.32
New York	50.00	65.00
North Carolina	62.49	73.74
North Dakota	70.42	79.29
Northern Mariana Islands	50.00	*65.00
Ohio	58.67	71.07
Oklahoma	71.09	79.76
Oregon	59.96	71.97
Pennsylvania	53.82	67.67
Puerto Rico	50.00	*65.00
Rhode Island	53.77	67.64
South Carolina	69.95	78.97
South Dakota	68.72	78.10
Tennessee	63.10	74.17
Texas	61.36	72.95
Utah	71.55	80.09
Vermont	62.24	73.57
Virgin Islands	50.00	*65.00
Virginia	51.67	66.17
Washington	51.83	66.28
West Virginia	74.78	82.35
Wisconsin	58.78	71.15
Wyoming	64.04	74.83

^{*}For purposes of section 1118 of the Social Security Act, the percentage used under titles I, X, XIV, and XVI and Part A of title IV will be 75 per centum.

The Department regrets the error.

Dated: September 17, 1999.

Brian P. Burns,

Deputy Assistant Secretary for Information Resources Management.

[FR Doc. 99–24994 Filed 9–24–99; 8:45 am] BILLING CODE 4110–60–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[INFO-99-42]

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 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed 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 within 60 days of this notice.

Proposed Project

Families, Communities, and Diabetes Management Project—New—National

Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Division of Diabetes Translation. Diabetes Type 2 is a serious chronic metabolic disease with serious potential health consequences that include both psychological and physical health conditions. Diabetes care is important in the management of this disease. Previous studies examining factors that influence diabetes management have examined psychological, patient provider relationships, family and social support, health insurance availability and utilization, dietary consumption, and levels of physical activity. Most of what is known about managing diabetes has been generated using results based on findings with predominately white audiences. Therefore, NCCDPHP, Division of Diabetes Translation, intends to conduct a longitudinal study examining complex inter-and intrapersonal factors unique to African-American and Mexican-American adults living with diabetes. Also contributing to this study will be family members of these individuals. Examination of these factors will help to develop effective

^{**}For 1998, 1999, and 2000, the values in the table were set for state plans under Titles XIX and XXI and for capitation payments and DSH allotments under those titles. For other purposes, including programs remaining in Title IV of the Act, the percentage for Alaska is 54.13. For the District of Columbia, the percentage for other such purposes is 50.00.

intervention models for these populations.

The research design will involve separate samples of African-Americans and Mexican-Americans between the ages of 40 and 64 with Type 2 Diabetes. Significant family members of these individuals will also participate.

Participating families will be divided into two groups, an intervention group that will receive the intervention at the beginning of the study, and a comparison group that will receive a modified version at the end. Both self-report via questionnaires and more objective measures (e.g., hemoglobin

blood glucose levels) of self-care adherence and diabetes control will be measured. Information collected will include diabetes knowledge, community characteristics, forms of social support, patient-provider relationship, and health care coverage. The total cost is estimated at \$3,707.473.00

Respondents	No. of respondents	No. of responses/ respondent	Avg. burden of response (in hours)	Total burden (in hours)
Adult Diabetic and family member	800	6	6	28,800
Total				28,800

Dated: September 21, 1999.

Nancy Cheal,

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

[FR Doc. 99–25018 Filed 9–24–99; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administratiion for Children and Families

Proposed Information Collection Activity; Comment Request; Proposed Project

Title: Head Start Grant Application and Budget Instrument.

OMB No.: New.

Description: The Head Start program is promulgating a Head Start Grant Application and Budget Instrument to standardize the grant application information which is requested from all grantees applying for continuation

grants. The Bureau is also instituting a three year grant funding cycle so that applicants will only submit full applications in their first year of their three year funding cycle. In addition, the Grant Application and Budget Instrument will be available on a data disk and can be transmitted electronically to Regional Offices. The Administration on Children, Youth and Families believes that, in promulgating this application document, the process of applying for grants for the Head Start program will be more efficient for the applicants.

Respondents: State, Local or Tribal Govt.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of re- sponses per respondent	Average bur- den hours per response	Total burden hours
Head Start Grant Application and Budget Instrument	1,513	1	33	49,929

Estimated Total Annual Burden Hours: 49,929.

In compliance with the requirements of section 3506(c)(2)(A) the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC. 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection.

The Department specifically requests comments 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) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: September 21, 1999.

Bob Sargis,

Reports Clearance Officer. [FR Doc. 99–24992 Filed 9–24–99; 8:45 am] BILLING CODE 4184–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Agency Recordkeeping/Reporting Requirements Under Emergency Review by the Office of Management and Budget (OMB)

Title: Head Start Grant Application and Budget Instrument.

OMB No.: New.

Description: The Head Start program is promulgating a Head Start Grant Application and Budget Instrument to standardize the grant application information which is requested from all grantees applying for continuation grants. The Bureau is also instituting a three year grant finding cycle so that applicants will only submit full applications in their first year of their