

improve communication strategies aimed at young people, and inform and guide ATSDR partners who may be planning similar educational interventions.

An educational intervention will be designed and implemented in a school-based setting to see if and how three communication variables influence young people's knowledge and behavior

of environmental hazards. The key variables in this study are the source of the message, the contaminant, and the individual's perception of risk. A study population of 360 male and female students will be randomly selected from 7th and 8th grade science classes in a large metropolitan school district. Each study participant will complete two

written surveys (e.g., a pre-test and post-test) administered prior to and immediately after listening to risk and hazard information. The results will be evaluated to determine the impact of different types and sources of information on the risk perceptions of participants. The total cost to the respondents is \$0.

Type of respondents	Number of respondents per year	Number of responses/respondent	Avg. burden per response (in hrs.)	Total annual burden (in hrs.)
Middle school students (male and female)—7th and 8th grade	360	2	12/60=0.2	144

Dated: October 25, 1999.

Nancy Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control And Prevention

[60Day-00-05]

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 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 within 60 days of this notice.

Proposed Projects

1. National Telephone Survey of Chronic Fatigue Syndrome—New—National Center for Infectious Disease (NCID). In 1997, OMB approved the information collection "Chronic Fatigue Syndrome Surveillance and Related Studies, Prevalence and Incidence of Fatiguing Illness in Sedgwick County, Kansas" under OMB Number 09200401. Data from this cross-sectional, random-

digit-dial survey of prolonged fatiguing illness in Sedgwick County (Wichita), Kansas concluded that prolonged fatigue affects over 6% of the population, the prevalence of chronic fatigue syndrome (CFS) was 0.24%, and that CFS prevalence was highest in white females (0.36%).

The proposed study replicates the Sedgwick County study using identical methodology and data collection instruments. Beginning with a random-digit-dial telephone survey to identify fatigued and non-fatigued individuals followed by a detailed telephone interview to obtain additional data on participants' health status. Study objectives are to refine estimates of the magnitude of fatiguing illness and CFS in the United States, with special consideration of under-served populations (children and racial/ethnic minorities), and to determine if the occurrence of fatiguing illness exhibits metropolitan, urban, and rural differences. Prevalence estimates from this proposed cross-sectional study of the U.S. population will be compared to those obtained for Sedgwick County to determine if the Sedgwick County findings can be generalized to the U.S. The total cost to the respondent is \$0.

Respondents	Number of respondents	Number of responses/respondent	Average burden/response (in hours)	Total burden hours
Screener interview	51,000	1	0.083	4,233
Telephone interview	12,500	1	0.25	3,125
Total	7,358

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Nancy Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-02-00]

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.

1. Proposed Project

Methodological Study of the Youth Risk Behavior Survey (YRBS)—New—The National Center for Chronic Disease and Health Promotion, Division of Adolescent and School Health. The purpose of this study (1) the test-retest reliability of the questions contained on the YRBS questionnaire and (2) the validity of selected YRBS items. The YRBS is a biennial survey administered to students attending public and private schools in grades 9-12 nationwide. The questionnaire measures priority health risk behaviors related to the major preventable causes of mortality, morbidity, and social problems among both youth and adults in the U.S. OMB

clearance to conduct the national YRBS will expire in January, 2000 (OMB No. 0920-0258, expiration 1/00). Data on the health risk of adolescents is the focus of at least 26 national health objectives in Healthy People 2000: Midcourse Review and 1995 Revisions. The YRBS is providing end-of-decade data to help measure these objectives as well as baseline data to measure many new national health objectives for 2010. A study of the test-retest reliability of the original YRBS questionnaire was conducted several years ago. In 1997-1998 an extensive review of the YRBS was undertaken and then a modified YRBS questionnaire was fielded nationally in 1999. This psychometric study will provide data on the test-retest reliability of the new modified questionnaire and provide data on the validity of selected questions (such as self-reported height and weight). The results will be used to improve the widely-used YRBS questionnaire. The total annual burden hours are 7,882.

Respondents	Number of respondents	Number of responses/respondent	Avg. burden per response (in hrs.)
Students—time 1 survey	5,280	1	0.75
Students—height and weight measurement	5,280	1	0.05
Students—time 2 survey	4,800	1	0.75
School administrators	116	1	0.50

Dated: October 25, 1999.

Nancy Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-R-0299]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing Administration, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this

collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: New; *Title of Information Collection:* A Project to Develop an Outcome-Based Continuous Quality Improvement System for PACE; *Form No.:* HCFA-R-0299 (OMB# 0938-NEW); *Use:* The purpose of this project is to develop an out-come based continuous quality improvement (OBCQI) approach for the PACE program by (a) developing and testing potential outcome measures, (b) testing risk adjustment methods so that each site's outcomes can be appropriately evaluated, and (c) designing an OBCQI approach to improve quality in a systematic, evolutionary manner; *Frequency:* On occasion; *Affected Public:* Not-for-profit institutions and Individuals or

households; *Number of Respondents:* 8,298; *Total Annual Responses:* 26,402; *Total Annual Hours:* 7,203.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access HCFA's Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or E-mail your request, including your address, phone number, OMB number, and HCFA document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards, Attention: Julie Brown, Room N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.