

marketing or licensing approval requirements; and a list of certain drugs or biological products containing a particular ingredient. FDA may also request, but not require, the submission of a qualitative listing of the inactive ingredients for all listed drugs or biological products, and a quantitative listing of the active ingredients for all listed drugs or biological products subject to an approved application or license.

Under § 207.30, establishments must update their product listing information by using Form FDA 2657 and/or Form FDA 2658 every June and December or, at the discretion of the establishment, when any change occurs. These updates must include the following information: (1) A listing of all drug or biological products introduced for commercial distribution that have not been included in any previously submitted list, (2) all drug or biological products formerly

listed for which commercial distribution has been discontinued, (3) all drug or biological products for which a notice of discontinuance was submitted and for which commercial distribution has been resumed, and (4) any material change in any information previously submitted. No update is required if no changes have occurred since the previously submitted list.

FDA estimates the burden of this collection of information as follows:

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN¹

Form	21 CFR Section	No. of Respondents	No. of Responses per Respondent	Total Annual Responses	Hours per Response	Total Hours
Form FDA 2656—Registration of Drug Establishment	207.21 207.22 207.25 207.26 207.40	15,802	.34	5,438	0.5	2,719
Form FDA 2656e—Annual Update of Drug Establishment	207.21 207.22 207.25 207.26 207.40	7,226	1	7,226	0.5	3,613
Form FDA 2657—Drug Product Listing	207.21 207.22 207.25 207.30 207.31 207.40	14,381	2.80	40,270	0.5	20,135
Form FDA 2658—Registered Establishments' Report of Private Label Distributors	207.21 207.22 207.25 207.30 207.31	6,221	2.14	13,289	0.5	6,645
Total						33,112

¹There are no capital costs or operating and maintenance costs associated with this collection of information.

Dated: October 25, 2000.

Margaret M. Dotzel,

Associate Commissioner for Policy.

[FR Doc. 00–28135 Filed 11–01–00; 8:45 am]

BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 98F–1192]

Troy Corp.; Withdrawal of Food Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing the withdrawal, without prejudice to a future filing, of a food additive petition (FAP 7B4546) proposing that the food additive regulations be amended to provide for the safe use of 3-iodo-2-propynyl butyl carbamate as a fungicidal additive for resinous and polymeric coatings intended to contact food.

FOR FURTHER INFORMATION CONTACT:

Mark A. Hepp, Center for Food Safety and Applied Nutrition (HFS–215), Food

Dated: October 11, 2000.

Alan M. Rulis,

*Director, Office of Premarket Approval,
Center for Food Safety and Applied Nutrition.*

[FR Doc. 00-28055 Filed 11-1-00; 8:45 am]

BILLING CODE 4160-01-F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-10017]

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:* Follow-Up of Medicare+Choice Disenrollees Receiving Fee-for-Service Inpatient Hospital Care; *Form No.:* HCFA-10017 (OMB# 0938-NEW); *Use:* This study will survey Medicare beneficiaries who had a fee-for-service hospital stay after choosing to leave a Medicare+Choice health plan. The purpose is to gather information about their reasons for disenrolling and to explore the link between the decision to disenroll and their subsequent fee-for-service care; *Frequency:* On occasion; *Affected Public:* Individuals or households; *Number of Respondents:* 600; *Total Annual Responses:* 600; *Total Annual Hours:* 650.

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/regspdract95.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.

Date: October 24, 2000.

John P. Burke, III,

Reports Clearance Officer, Security and Standards Group, Division of HCFA Enterprise Standards.

[FR Doc. 00-28170 Filed 11-1-00; 8:45 am]

BILLING CODE 4120-03-U

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-R-0209 and HCFA-R-0245]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing
Administration, HHS.

In compliance with the requirement of section