

engineered systems in all states is a top priority of NCHS. Accomplishing this goal will: (1) Significantly increase the ability of the NVSS to be responsive to emerging public health needs and user demands; (2) result in more timely and higher quality data that better describe the population by enabling a faster and more efficient transfer of data as well as enhanced data integration among federal, state, and local entities; and (3) permit the various vital registration jurisdictions to implement the recently-approved U.S. Standard Certificates of Birth and Death, and Report of Fetal Death, thus providing the means to collect the most meaningful and uniform health information related to births and deaths. NCHS' ability to produce a national vital statistics dataset is dependent on all states fully reengineering their data collection systems and implementing the revised certificates and report. Because vital statistics is a decentralized, state-based system, we believe that the best and only effective strategy for convincing all states is by working through their own association, which is NAPHSIS.

NAPHSIS has a history of working collaboratively with NCHS and the other CIOs within CDC on vital statistics related initiatives. Some of these initiatives include:

- The NVSS contract and policy negotiations on deliverables/schedules/quality from state-owned vital statistics systems with CDC/NCHS
- The National Death Index Program with CDC/NCHS
- The "Improve State and Local Health Information Systems" cooperative agreement with CDC/EPO
- The Newborn Hearing Screening Project with CDC Center for Birth Defects and Developmental Disabilities
- The National Electronic Disease Surveillance Project with CDC-NEDSS Program

This project has a relationship with two prior or ongoing CDC-funded activities. First, this project focuses on the development of detailed systems (or non-functional) requirements for a model vital statistics system, which is Phase II of the Re-engineering Project. In Phase I, NAPHSIS was an active partner in the development of the functional requirements for the model system. Second, this project is related to the PHIN Project (previously NEDSS) currently underway in CDC. This project will be exploring the use of the PHIN messaging system with re-engineered vital statistics system, and will be developing guidelines on PHIN-compatible re-engineered vital statistics systems.

C. Funding

Approximately \$171,500 is available in FY 2004 to fund this award. It is expected that the award will begin on or before June 2004, and will be made for a 12-month budget period within a project period of up to three years. Funding estimates may change.

D. Where To Obtain Additional Information

For general comments or questions about this announcement, contact:

Technical Information Management, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341-4146, Telephone: 770-488-2700.

For technical questions about this program, contact: Charles Rothwell, Project Officer, National Center for Health Statistics, Division of Vital Statistics, Room 7311, 3311 Toledo Road, Hyattsville, Maryland 20782, Telephone: 301-458-4468, E-mail: cjr4@cdc.gov.

Dated: May 11, 2004.

William P. Nichols,

Acting Director, Procurement and Grants Office, Centers for Disease Control, and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Cancer Institute Special Emphasis Panel, Mentored Clinical Scientist Development Award Application K08.

Date: May 24, 2004.

Time: 11 a.m. to 12 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6116 Executive Boulevard, Rockville, MD 20852. (Telephone conference call.)

Contact Person: Robert Bird, PhD, Scientific Review Administrator, Resources and Training Review Branch, National Cancer Institute, National Institutes of Health, 6116 Executive Blvd., MSC 8328, Room 8113, Bethesda, MD 20892-8328. 301-496-7978, birdr@mail.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: May 10, 2004.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 04-11065 Filed 5-14-04; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health; Notice of Closed Meeting

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Name of Committee: National Cancer Institute Special Emphasis Panel, Early Detection Research Network Biomarkers Developmental Laboratories.

Date: July 7-8, 2004.

Time: 8 a.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

Place: Bethesda Marriott, 5151 Pooks Hill Road, Bethesda, MD 20814.

Contact Person: Timothy C. Meeker, MD, Scientific Review Administrator, Special Referral and Resources Branch, Division of Extramural Activities, National Cancer Institute, 6116 Executive Boulevard, Room 8088, Rockville, MD 20852, (301) 594-1279.