associated forms can be found on the CDC Web site, Internet address: http://www.cdc.gov.

Click on "Funding" then "Grants and

Cooperative Agreements".

For general questions about this announcement, contact: Technical Information Management Section, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341–4146, Telephone: (770) 488–2700.

For business management and budget assistance in the states, contact: Sheryl Heard, Grants Management Specialist, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Atlanta, GA 30341–4146, Telephone: (770) 488–2777, E-mail address: slh3@cdc.

For business management and budget assistance in the Territories, contact: Vincent Falzone, Grants Management Specialist, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341–4146, Telephone: (770) 488–2763, E-mail address: vcf6@cdc.gov.

For program technical assistance, contact: Jorge Rosenthal, Epidemiologist, Telephone: (770) 488–3525, E-mail address: jyr4@cdc.gov.

or

Louise Floyd, Supervisory Behavioral Scientist, Telephone: (770) 488–7372, Email address: rlf3@cdc.gov.

Connie Granoff, Public Health Analyst, Telephone: (770) 488–7513, Email address: *clg4@cdc.gov*.

Division of Birth Defects and Developmental Disabilities, National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention, 4770 Buford Highway, (F–49), Atlanta, GA 30341–3724.

Dated: April 23, 2003.

Edward Schultz,

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

[FR Doc. 03–10502 Filed 4–28–03; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury
Prevention and Control Special
Emphasis Panel: HIV Community
Based Prevention Projects for the
Commonwealth of Puerto Rico and the
United States Virgin Islands, Program
Announcement #03003

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following meeting:

Name: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): HIV Community Based Prevention Projects for the Commonwealth of Puerto Rico and the Unites States Virgin Islands, Program Announcement #03003.

Times and Dates: 9 a.m.-9:30 a.m., May 5, 2003—open. 9:30 a.m.-5 p.m., May 5, 2003—closed. 9 a.m.-5 p.m., May 6, 2003—closed.

Place: Atlanta Marriott Century Center, 2000 Century Boulevard, NE., Atlanta, GA 30345 (404) 325–0000.

Status: Portions of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c) (4) and (6), title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92–463.

Matters To Be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to PA# 03003.

Note: Due to program oversight, this Federal Register notice is being published less than 15 days before the date of the meeting.

Contact Person for More Information: Beth Wolfe, Prevention Support Office, National Center for HIV, STD, and TB Prevention, CDC, Corporate Square Office Park, 8 Corporate Square Blvd., MS E-07, Atlanta, GA 30329, telephone (404) 639-8531.

The Director, Management Analysis and Services Office has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: April 23, 2003.

Alvin Hall,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 03–10503 Filed 4–28–03; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS-10089]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

AGENCY: Centers for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as 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.

We are, however, requesting an emergency review of the information collection referenced below. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, we have submitted to the Office of Management and Budget (OMB) the following requirements for emergency review. We are requesting an emergency review because the collection of this information is needed before the expiration of the normal time limits under OMB's regulations at 5 CFR Part 1320. This is necessary to ensure compliance with the Balanced Budget Act of 1997. We cannot reasonably comply with the normal clearance procedures due to unforeseen circumstances. These circumstances include the following:

1. The Health Outcomes Survey (HOS) was the original research approach to be used to collect health status indicators on Social Maintenance Health Organization (SHMO) and MSHO/MnDHO beneficiaries. This survey proved inadequate for a frail population as the HOS is lengthy and it

was determined that response rates were too low when tested on the PACE population. Further, 43% of the MSHO community enrollees and approximately 89% of the MnDHO community enrollees are frail and Nursing Home Certifiable (NHC).

2. The State of Minnesota became very concerned about using the HOS due to the above findings by CMS, and preferred using the PHS for their beneficiaries who are more similar to beneficiaries in PACE.

3. MSHO/MnDHO health plans must comply with the same PACE PHS survey timelines to assure that the new risk adjustment payment approach will be implemented January 2004.

CMS is requesting OMB review and approval of this collection by June 16, 2003, with a 180-day approval period. Written comments and recommendations will be accepted from the public if received by the individuals designated below by June 9, 2003. During this 180-day period, we will publish a separate Federal Register notice announcing the initiation of an extensive 60-day agency review and public comment period on these requirements. We will submit the requirements for OMB review and an extension of this emergency approval. Type of Information Collection Request: New collection; *Title of Information* Collection: Data Collection for Administering the PACE Health Survey to Beneficiaries Enrolled in the Dual Eligible Demonstrations, Minnesota Senior Health Options and Minnesota Disability Health Options; Form No.: CMS-10089 (OMB# 0938-XXXX); Use: The Centers for Medicare & Medicaid Services has developed a survey, the PHS, that is similar to the Health Outcomes Survey (HOS). This survey was approved for PACE and the Wisconsin Partnership Program (WPP) on March 14, 2003. This emergency is a request to include administering the OMB approved survey to beneficiaries enrolled in Minnesota Senior Health Options and Minnesota Disability Health Options (MSHO/MnDHO). The main purpose of the PHS is to collect health status information that may be used to adjust Medicare payment to MSHO/MnDHO health plan organizations. It has been successfully pilot-tested to assess response rates and accuracy of responses under different

distribution approaches. The pilot test enabled CMS to select an approach whereby MSHO/MnDHO enrollees will be sent surveys to fill out and can request assistance from family or professionals; Frequency: Annually; Affected Public: Not-for-profit institutions; Number of Respondents: 2,600; Total Annual Responses: 1,768; Total Annual Hours: 295.

We have submitted a copy of this notice to OMB for its review of these information collections. A notice will be published in the **Federal Register** when approval is obtained.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS'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 CMS document identifier, to Paperwork@cms.hhs.gov, or call the Reports Clearance Office on (410) 786–1326.

Interested persons are invited to send comments regarding the burden or any other aspect of these collections of information requirements. However, as noted above, comments on these information collection and recordkeeping requirements must be mailed and/or faxed to the designees referenced below, by June 9, 2003: Centers for Medicare and Medicaid Services, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances, Room C5-14-03, 7500 Security Boulevard, Baltimore, MD 21244-1850. Fax Number: (410) 786-3064, Attn: Dawn Willinghan, CMS-10089; and,

Office of Information and Regulatory Affairs, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503, Fax Number: (202) 395–6974 or (202) 395–5167 Attn: Brenda Agular, CMS Desk Officer.

Dated: April 22, 2003.

Dawn Willinghan,

Acting, CMS Reports Clearance Officer, CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances.

[FR Doc. 03–10479 Filed 4–28–03; 8:45 am] BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: OCSE–396A: Financial Report; and OCSE–34A: Quarterly Report of Collections.

OMB No.: 0970-0181.

Description: Each State agency administering the Child support Enforcement Program under Title IV-D of the Social Security Act is required to provide information to the Office of Child Support Enforcement concerning its administrative expenditures and its receipt and disposition of child support payments from non-custodial parents. These quarterly reporting forms enable each State to provide that information, which is used to compute both the quarterly grants awarded to each State and the annual incentive payments earned by each State. This information is also included in a published annual statistical and financial report, available to the general public.

Comments sent to the Office of Child Support Enforcement, both directly and in response to the **Federal Register** Notice published June 10, 2002 (67 FR 39727), *et seq.*), provided many useful recommendations to update and correct these financial reporting forms.

Based on these comments, these forms have been revised to conform with recent changes in Federal law and to enable State agencies to more accurately report financial data. In particular, State agencies will now be able to report amounts expended on computer systems in greater detail, and will be able to better differentiate the distribution of child support payments received on behalf of children in foster care facilities or who are current or former recipients of Medicaid payments. State agencies will now be able to identify those child support collections which, although undistributed, will be disbursed shortly to families and those collections that require further review before disbursement.

Respondents: State agencies administering the Child Support Enforcement Program.