SUMMARY: The General Services Administration (GSA) and the Office of Federal Procurement Policy (OFPP) will hold a public meeting to familiarize Electronic Commerce vendors with the Electronic Posting System (EPS) and to solicit input from vendors on enhancements to EPS. The original notice of this meeting was published in the **Federal Register** on June 30, 1999, at 64 FR 35169.

DATES: The meeting will be held August 11, 1999, from 9 a.m.–1 p.m.

ADDRESSES: The meeting will be in the GSA Auditorium, at the GSA Headquarters Building, 1800 F St., NW., Washington, DC.

FOR FURTHER INFORMATION CONTACT: Paul Fontaine, ARNet Program Manager, GSA, Paul.Fontaine@gsa.gov, (202) 501–6941, or Julie Basille, OFPP, Julie__Basile@OMB.EOP.GOV, (202) 395–4821.

SUPPLEMENTARY INFORMATION: The Electronic Posting System (EPS) is being considered for adoption as the ''single point of entry'' for notice of Federal business opportunities. This is based upon a highly successful pilot project wherein EPS was used and later adopted by the General Services Administration (GSA), National Aeronautics and Space Administration (NASA), Department of the Treasury, Department of Transportation and Department of the Air Force. The EPS project team at GSA, and the Office of Federal Procurement policy (OFPP), are conducting a public forum on EPS for Electronic Commerce vendors entitled ''Building the Single Point of Entry''. The intended audience is both the technical and marketing staffs of companies, which market Electronic Commerce products, and services for the Federal Government. The two purposes of the meeting are to first, introduce vendors to EPS and second, to solicit input from vendors on what EPS can do to enhance their market within the Federal EC arena.

Dated: July 8, 1999.

Ida M. Ustad,

Deputy Assistant Administrator for Acquisition Policy.

[FR Doc. 99–17982 Filed 7–14–99; 8:45 am]

BILLING CODE 6820–61–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of National AIDS Policy; Notice of Meeting of the Presidential Advisory Council on HIV/AIDS and Its Subcommittees

July 1, 1999.

Pursuant to Pub. L. 92–463, notice is hereby given of the meeting of the Presidential Advisory Council on HIV/AIDS on October 4–5, 1999, at the Radisson-Barcelo, Washington, DC. The meeting of the Presidential Advisory Council on HIV/AIDS will take place on Monday, October 4 and Tuesday, October 5 from 8:30 a.m. to 6:00 p.m. at the Radisson-Barcelo, 2121 P Street, NW, Washington, DC 20037. The meetings will be open to the public.

The purpose of the subcommittee meetings will be to finalize any recommendations and assess the status of previous recommendations made to the Administration. The agenda of the Presidential Advisory Council on HIV/AIDS may include presentations from the Council's subcommittees, Appropriations, Discrimination, International, Prevention, Prison, Racial Ethnic Populations, Research, and Services Issues.

Daniel C. Montoya, Executive Director, Presidential Advisory Council on HIV and AIDS, Office of National AIDS Policy, 736 Jackson Place, NW, Washington, DC 20503, Phone (202) 456–2437, Fax (202) 456–2438, will furnish the meeting agenda and roster of committee members upon request. Any individual who requires special assistance, such as sign language interpretation or other reasonable accommodations, should contact Andrea Hall at (301) 986–4870 no later than September 17, 1999.

Daniel C. Montoya,

Executive Director, Presidential Advisory Council on HIV and AIDS.

[FR Doc. 99–17979 Filed 7–14–99; 8:45 am]

BILLING CODE 3195–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 98D–0077]

Draft Guidance for Industry: Clinical Development Programs for Drugs, Devices, and Biological Products Intended for the Treatment of Osteoarthritis (OA); Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice; request for comments.

SUMMARY: The Food and Drug Administration (FDA) is announcing the availability of a draft guidance for industry entitled ''Clinical Development Programs for Drugs, Devices, and Biological Products Intended for the Treatment of Osteoarthritis (OA).'' The draft guidance is intended to stimulate discussion about designing clinical programs for the development of drugs, devices, and biological products intended for the treatment of osteoarthritis (OA). This draft guidance reflects comments received in response to a previous draft version of the guidance available in February 1998.

DATES: Written comments on the draft guidance document may be submitted by September 13, 1999. General comments on agency guidance documents are welcome at any time.

ADDRESSES: Copies of the draft guidance and appended questions are available on the Internet at ''http://www.fda.gov/cder/guidance/index.htm'' or ''http://www.fda.gov/cber/guidelines.htm''. Submit written requests for single copies of the draft guidance and appended questions to the Drug Information Branch (HFD–210), Center for Drug Evaluation and Research, Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, or to the Office of Communication, Training and Manufacturers Assistance (HFM–40), Center for Biologics Evaluation and Research, Food and Drug Administration, 1401 Rockville Pike, Rockville, MD 20852–1448; FAX: 1–888–CBERFAX or 301–827–3844, mail: the Voice Information System at 800–835–4709 or 301–827–1800. Send one self-addressed adhesive label to assist that office in processing your requests. Submit written comments on the draft guidance to the Dockets Management Branch (HFD–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852.

FOR FURTHER INFORMATION CONTACT: Sandra N. Cook, Center for Drug Evaluation and Research (HFD–550), 9201 Corporate Blvd., Rockville, MD 20850, 301–827–2090.

SUPPLEMENTARY INFORMATION: Currently, treatment for OA is fundamentally symptomatic, with no data available on long-term outcomes. Clinical trial experience with OA has been limited to short-term studies in patients with knee or hip OA and generalized OA normally has not been appropriate for assessing OA agents. A number of novel approaches are under study for the treatment of OA, as companies, clinicians, and patients search for more

effective treatments. The design of clinical programs for developing drugs, devices, or biological products intended for the treatment of OA was the subject of a previous draft guidance issued in February 1998 (63 FR 8208, February 18, 1998). The February 1998 draft guidance generated several comments and was the subject of discussion at the Arthritis Advisory Committee meeting held on February 20, 1998.

The agency found the comments and the discussion at the advisory committee meeting very helpful in developing the recommendations to industry, contained in the guidance, on the design of clinical programs for developing drugs, devices, or biological products intended for the treatment of OA. However, the agency believes that more public input would be beneficial in preparing a final version of the guidance. Accordingly, the agency has decided to issue this revised version of the guidance as a draft.

This level 1 draft guidance is being issued consistent with FDA's good guidance practices (62 FR 8961, February 27, 1997). The draft guidance represents the agency's current thinking on developing drugs, devices, or biological products intended for the treatment of OA. It does not create or confer any rights for or on any person and does not operate to bind FDA or the public. An alternative approach may be used if such approach satisfies the requirements of the applicable statute, regulations, or both.

Interested persons may, on or before September 13, 1999, submit to the Dockets Management Branch (address above) written comments on the draft document. Two copies of any comments are to be submitted, except that individuals may submit one copy. Comments are to be identified with the docket number found in brackets in the heading of this document. The draft document, appended questions, and received comments may be seen in the office above between 9 a.m. and 4 p.m., Monday through Friday.

Dated: July 8, 1999.

Margaret M. Dotzel,

Acting Associate Commissioner for Policy Coordination.

[FR Doc. 99–18031 Filed 7–14–99; 8:45 am]

BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA–9042]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing Administration.

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: Extension of a currently approved collection;

Title of Information Collection: Request for Accelerated Payments and Supporting Regulations in 42 CFR 412.116 and 413.64;

Form No.: HCFA–9042;

Use: Medicare reimbursements are usually arranged through a fiscal intermediary who serves as the Secretary's agent for reviewing claims and making payments equal to the provider's reasonable costs. When a delay in Medicare payment by a fiscal intermediary, for covered services, causes financial difficulties for a provider, the provider may request an accelerated payment. An accelerated payment may also be made in highly exceptional situations where a provider has incurred a temporary delay in its bill processing beyond the provider's normal billing cycle. An accelerated payment can be requested by a provider that is not receiving periodic interim payments. These forms are used by fiscal intermediaries to access a provider's eligibility for accelerated payments.

Frequency: On occasion;

Affected Public: Business or other for-profit, and Not for-profit institutions;

Number of Respondents: 890;

Total Annual Responses: 890;

Total Annual Hours Requested: 445.

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: Dawn Willinghan, Room N2–14–26, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: June 16, 1999.

John P. Burke III,

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

[FR Doc. 99–18007 Filed 7–14–99; 8:45 am]

BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCFA–0209 and HCFA–1557]

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