

- Patient care coordination, including individual patient care plans for all patients, and referrals, as indicated
 - Antismoking advice
 - Other symptomatic treatments, including pulmonary rehabilitation
 - The applicant must provide services in consultation with a physician with special training or experience in the diagnosis and treatment of respiratory diseases. In addition, the applicant must meet all criteria for approval and designation by the Department of Labor under 20 CFR part 725 to perform disability examination and provide treatment under the Federal Mine Safety and Health Act of 1977, as amended. All services must be provided regardless of a person's ability to pay. Grants funds under this program must supplement and not supplant existing services of the grantee.

Matching or Cost Sharing

Requirement: Matching is not required, however, cost participation is encouraged.

Application Review and Funding

Criteria: Each application submitted by the deadline will be reviewed initially for eligibility. Those applications that are determined to be ineligible, incomplete or non-responsive will be returned to the applicant without further consideration. Those applications that are determined to be eligible will be reviewed by a panel of reviewers comprised of non-Federal experts using the following objective review criteria:

- Need and Readiness—the extent to which the applicant can demonstrate a need for these services in their area and their readiness to provide them.
- Administration—the extent to which the applicant demonstrates that it has the administrative experience and capacity to successfully implement this program.
- Health Care Services—the extent to which the applicant has the capacity to provide or arrange for the required services (quality and breadth).
- Collaborative Arrangements—the extent to which the applicant has developed and documented collaborative arrangements with other local providers to conduct outreach, receive referrals and provide services, number of miners to be served and their needs.
- Appropriateness of Budget—the extent to which the applicant's budget is appropriate for the scope of the proposed activities.

Funding Preferences and Priorities:

The Bureau of Primary Health Care (BPHC) intends to fund one award. The goal of the BPHC is to award funds to

organizations that can best provide comprehensive services to the largest number of eligible individuals in a cost-effective manner.

Funding Preferences

A funding preference is defined as the funding of a specific category or group of approved applications ahead of other categories or groups of applications. The BPHC will give preference to applicants that are State entities which meet the legislative requirements of the Federal Mine and Safety Health Act of 1977 as amended by the Black Lung Benefits Reform Act of 1977. States are given preference per the relevant regulations, specifically 42 CFR 55a.103. The requirements are detailed in regulations.

Funding Priorities

A funding priority is defined as the favorable adjustment of aggregate review scores of individually approved applications when applications meet specific criteria. The following funding priority is applicable to the Black Lung Clinics Program.

- Applicants that are currently operating a Black Lung for patients in compliance with Program Expectations will receive 3 additional points.

Estimated Amount of Available Funds: Up to \$250,000 will be available in fiscal year 2003 for this program.

Estimated Project Period: 3 years.

Estimated Number of Awards: It is estimated that one award will be made.

FOR FURTHER INFORMATION CONTACT: Ms. Shirl Taylor-Wilson, Black Lung Clinics Program, Bureau of Primary Health Care, Health Resources Services Administration, 4350 East-West Highway, 9th Floor, Bethesda, Maryland 20818. Phone: 301-594-4420. Fax: 301-594-2470. E-mail: staylor-wilson@hrsa.gov.

Public Health System Reporting

Requirements: Under these requirements (approved by the Office of Management and Budget 0937-0195), a community-based non-governmental applicant must prepare and submit a Public Health System Impact Statement to the head of the appropriate State and local health agencies in the area(s) to be impacted no later than the Federal application receipt due date. This statement must include:

- (a) A copy of the face page of the application (SF 424)
- (b) A summary of the project, not to exceed one page, which provides:
 - A description of the population to be served,
 - A summary of the services to be provided, and

- A description of the coordination planned with the appropriate State and local health agencies.

Executive Order 12372

This program has been determined to be a program which is subject to the provisions of Executive Order 12372 concerning intergovernmental review of Federal programs by appropriate health planning agencies, as implemented by 45 CFR part 100. Executive Order 12372 allows States the option of setting up a system for reviewing applications from within their States for assistance under certain Federal programs. The application packages to be made available under this notice will contain a listing of States that have chosen to set up such a review system and will provide a single point of contact (SPOC) in the States for review. Applicants (other than Federally-recognized Indian tribal government) should contact their State SPOC as early as possible to alert them to the prospective applications and receive any necessary instructions on the State process. For proposed projects serving more than one State, the applicant is advised to contact the SPOC of each affected State. The due date for State process recommendations is 60 days after the application deadline for new and competing awards. The granting agency does not guarantee to "accommodate or explain" for State process recommendations it receives after that date. (See part 148, Intergovernmental Review of Public Health Service Programs under Executive Order 12372 and 45 CFR part 100 for a description of the review process and requirements.)

Dated: April 16, 2003.

Elizabeth M. Duke,

Administrator.

[FR Doc. 03-11652 Filed 5-8-03; 8:45 am]

BILLING CODE 4165-15-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Recruitment of Clinicians To Become Commissioned Officers; Recruitment of Sites for Assignment of Commissioned Officers

AGENCY: Health Resources and Services Administration (HRSA), HHS.

ACTION: General notice.

SUMMARY: The Health Resources and Services Administration (HRSA) announces that applications will be accepted to recruit clinicians who will

be hired as commissioned officers in the U.S. Public Health Service. This notice also solicits applications from sites that are seeking the assistance of these commissioned officers. These commissioned officers will be family practice physicians and dentists. They will be assigned by the National Health Service Corps (NHSC) to the neediest Health Professional Shortage Areas throughout the Nation. The NHSC will pay the salaries, moving expenses and benefits for these commissioned officers.

These officers will be part of a mobile cadre of health care professionals, who, in addition to the services they will provide to patients at their assigned sites, may be called upon to respond to regional and/or national emergencies. The NHSC will assist the officers in acquiring, maintaining and enhancing emergency response skills. Their initial assignments will be no longer than three years in duration, after which, should these clinicians choose to stay in the U.S. Public Health Service, they will progress to new assignments.

Eligible Applicants

Clinicians—Applicants must file a U.S. Public Health Service Commissioned Corps application, meet the requirements for such commissioning, have completed a Family Practice residency or dental school (prior to the start of the assignment), have successfully passed the Family Practice board certification or a regional dental licensing exam (prior to the start of the assignment) and have a current, unrestricted license to practice medicine or dentistry in at least one U.S. State or Territory.

Sites—Applicants must be located in a Health Professional Shortage Area (HPSA) and submit a Proposal for Use of a Commissioned Officer 2003 (and, if not yet approved as an NHSC site, a Recruitment and Retention Assistance Application). All sites to which NHSC clinicians are assigned must accept assignment under Medicare, have appropriate agreements with the applicable State entity to participate in Medicaid and the State Children's Health Insurance Program, see all patients regardless of their ability to pay, and use and post a discounted fee plan. Sites must also understand and accept that these officers will periodically be away from their assigned locations as they train for, or respond to, a regional and/or national health emergency.

Application Requests, Dates and Addresses

Application materials are available for downloading via the Web at: <http://nhsc.bhpr.hrsa.gov>.

Clinicians—Completed applications must be postmarked or delivered to the HRSA Commissioned Corps Operations Office by no later than September 30, 2003. Clinicians are encouraged to submit an application early, as applications will be considered as soon as they are received. Completed applications should be mailed or delivered to: HRSA Commissioned Corps Operations Office, Parklawn Building, Room 13A-22, 5600 Fishers Lane, Rockville, MD 20857. Applications received or postmarked after the deadline date or sent to a different address will be returned to the applicant and not considered.

Sites—Completed applications must be postmarked or delivered to the NHSC by no later than September 30, 2003. Site applications will be evaluated as soon as they are received at NHSC headquarters. Sites will be deemed qualified based on the quality of the application submitted and the score of the HPSA in which they are located, with preference being given to sites in HPSAs with higher scores. Officers will then be assigned to qualified sites on an ongoing basis. Sites are encouraged to apply early so as to have a better chance of acquiring one of the commissioned officers. The number of qualified sites is expected to exceed the limited supply of commissioned officers. Completed site applications should be mailed or delivered to: National Health Service Corps, Parklawn Building, Room 8A-55, 5600 Fishers Lane, Rockville, MD 20857. Applications received or postmarked after the deadline date or sent to a different address will be returned to the applicant and not considered.

Additional Information

Eligible clinicians and sites interested in receiving application material may do so by calling the National Health Service Corps call center at 1-800-221-9393.

Dated: May 2, 2003.

Dennis P. Williams,

Deputy Administrator.

[FR Doc. 03-11499 Filed 5-8-03; 8:45 am]

BILLING CODE 4165-15-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Fiscal Year (FY) 2003 Funding Opportunity

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice of funding availability for Community Action Grant for Service Systems Change.

SUMMARY: The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services announces the availability of FY 2003 funds for the grant program described below. A synopsis of this funding opportunity, as well as many other Federal Government funding opportunities, is also available at the Internet site: www.fedgrants.gov.

This notice is not a complete description of the program; potential applicants must obtain a copy of the Request for Applications (RFA), including Part I, Community Action Grant SM 03-007, Part II, General Policies and Procedures Applicable to all SAMHSA Applications for Discretionary Grants and Cooperative Agreements, and the PHS 5161-1 (Rev. 7/00) application form before preparing and submitting an application.

Funding Opportunity Title: Community Action Grant for Service Systems Change—Short Title: Community Action Grant.

Funding Opportunity Number: SM 03-007.

Catalog of Federal Domestic Assistance (CFDA) Number: 93.243.

Authority: Public Health Service Act, as amended, Title V, Part B, Section 520A, 42 U.S.C. [290bb-32] Priority Mental Health Needs of Regional and National Significance.

Funding Instrument: G.

Funding Opportunity Description: The Substance Abuse and Mental Health Services Administration, Center for Mental Health Services (CMHS) announces the availability of \$1,000,000 in funding for Phase II Community Action Grants. Successful Phase I grantees may apply for one-year Phase II grants of up to \$150,000 (direct and indirect).

The purpose of the Community Action Grant Program (CAG) is to promote the adoption of exemplary mental health practices in communities around the country. Community Action Grants support consensus building, infrastructure development, and training activities for the organization and delivery of services to children with