

(9) provides technical advice and consultation to academic, international, federal, and state entities regarding nutritional and health examination statistics data.

*Informatics Branch (CS83).* (1) Conducts applied computer and informatics research on the development of new and novel approaches in integrated survey information systems, database technology, imaging and telemedicine, data transmission, geographical information systems, and metadata registries; (2) conducts research on the design, development, and administration of computer systems for more timely and accurate health and nutrition examination statistics data; (3) develops, implements, and supports technologies, data architectures, networks, security infrastructure, and database management for the Division's data collection and analytic programs consistent with state of the art trends in computer and informatics research; (4) implements appropriate technologies to prevent unauthorized access to internal and field data resources including authentication, data encryption, data security, system scanning/probing, and implementation and development of systems security and policies consistent with Presidential Decision Directives and other Government wide initiatives; (5) performs systems analysis, computer programming, and quality assurance/quality control of health and nutrition examination data; (6) develops and implements standards for the Division's data collection programs and provides support for telecommunications, data access, and high-speed network technologies (e.g., data dissemination, telemedicine applications); (7) performs special projects related to data on health and nutrition and produces a wide variety of reports and tabulations in multiple formats; and (8) provides advice, policy guidance, and expert technical consultation NCHS-wide and to academic, federal, state, local and international governments, and researchers regarding health and nutrition examination survey information technologies and informatics research.

*Operations Branch (CS84).* (1) Develops and administers contracts for data collection, engineering, acquisition and maintenance of mobile examination centers (MEC) and medical and computer equipment and receipt and control systems; (2) develops and implements systems for reporting of medical findings, professional readings, and laboratory processing for health and nutrition examination and special studies; (3) develops and conducts

engineering and logistical support for survey data collection; (4) designs and conducts research studies on response rates, quality control and quality assurance of health and nutrition examination statistics data; (5) designs and develops comprehensive outreach programs and survey participant recruitment materials; and (6) prepares and publishes reports and analyses of field operations and performs special projects related to health and nutrition examination statistics survey implementation.

*Planning Branch (CS85).* (1) Establishes the research agenda for health and nutrition statistics data in response to public health priorities; (2) converts identified data needs into research, development, and evaluation activities and related public health information; (93) directs the planning phase of contractual activities, including pilot testing and workshop development, in support of the Division's data collection programs; (4) plans and develops a statistical program to obtain, evaluate, analyze and disseminate health and a nutrition examination statistics to meet these needs; (5) prepares and publishes descriptive analyses as well as sophisticated multivariate analyses that integrate data across multiple surveys or data sets; (6) performs theoretical and experimental research to improve the content of the health and nutrition examination statistics data collection effort and improve the timeliness, availability, and quality of the nutritional and health examination statistics data; (7) participates in the design and development of integrated, automated data collection systems and data file release programs as well as conducts statistical methods research; (8) provides technical oversight of all laboratory aspects of health and nutrition examination studies; and (9) provides consultation and technical assistance to a wide range of researchers and institutions at the state, national, and international levels addressing the definitions, needs, and uses of nutrition and health nutrition examination statistics.

Dated: February 2, 2003.

**William H. Gimson,**

*Acting Director.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare and Medicaid Services

[Document Identifier: CMS-10084]

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

**AGENCY:** Centers for Medicare and Medicaid Services.

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. We cannot reasonably comply with the normal clearance procedures because public harm is likely to result if the normal clearance process followed. Waiting for the normal clearance process to be completed might mean that vulnerable, elderly or disabled Medicare beneficiaries in affected areas would have limited or no access to physician services for prolonged periods.

CMS is requesting OMB review and approval of this collection by March 1, 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 February 19, 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:* Targeted Beneficiary Survey on Access to Physician Services Among Medicare Beneficiaries; *Form No.:* CMS-10084 (OMB# 0938-NEW); *Use:* Recent anecdotal reports have suggested that Medicare beneficiaries in certain parts of the country are having difficulty finding physicians who will accept new Medicare patients. In response to these anecdotes, CMS implemented a multi-faceted monitoring system that incorporated multiple data sources to address beneficiaries' reported access problems. As part of this monitoring strategy, CMS has designed a Targeted Survey on Access to Physician Services Among Medicare Beneficiaries. The survey is designed to interview 300 Medicare beneficiaries in each of 11 geographic areas where there is some evidence to suggest a potential physician access problem. The geographic areas include the state of Alaska; the Phoenix, Arizona area; the San Diego, California and San Francisco, California areas; the Denver, Colorado area; the Tampa, Florida area; the Springfield, Missouri area; the Las Vegas, Nevada area; the Brooklyn, New York area; the Fort Worth, Texas area; and the Seattle, Washington area. Survey respondents will be Medicare beneficiaries in the traditional Medicare program who are covered by part B where Medicare is the primary payer. The survey will over sample beneficiaries who are most likely to be seeking new physicians. The goal of the survey is to confirm or refute anecdotal reports that the Medicare payment restrictions are contributing to physician access problems. The survey will inform CMS about the characteristics of Medicare beneficiaries most likely to be experiencing physician access problems. It will enhance CMS's ability to consider the potential effects of payment changes on beneficiary access. *Frequency:* One-time; *Affected Public:* Individuals or households; *Number of Respondents:* 4,000; *Total Annual Responses:* 4,000; *Total Annual Hours:* 958.

We have submitted a copy of this notice to OMB for its review of these information collections.

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://cms.hhs.gov/regulations/pr/default.asp>, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to [Paperwork@cms.hhs.gov](mailto: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 February 19, 2003:

Centers for Medicare and Medicaid Services, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances, Attention: Dawn Willingham, CMS-10084, Room C5-14-03, 7500 Security Boulevard, Baltimore, Maryland 21244-1850 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: February 4, 2003.

**Anthony Mazzarella,**

*Acting, Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, Office of Strategic Operations and Strategic Affairs, Division of Regulations Development and Issuances.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. 03N-0017]

#### **Agency Information Collection Activities; Proposed Collection; Comment Request; Impact of Risk Management Programs on the Practice of Pharmacy**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing an

opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on FDA's burden estimates to conduct a descriptive survey of pharmacists to evaluate pharmacists' knowledge of risk management programs, identify barriers to compliance, and assess the impact of these programs on the practice of pharmacy.

**DATES:** Submit written or electronic comments on the collection of information by April 14, 2003.

**ADDRESSES:** Submit electronic comments on the collection of information to <http://www.accessdata.fda.gov/scripts/oc/dockets/edockethome.cfm>. Submit written comments on the collection of information to the Dockets Management Branch (HFA-305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number found in brackets in the heading of this document.

**FOR FURTHER INFORMATION CONTACT:** Karen Nelson, Office of Information Resources Management (HFA-250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-827-1482.

**SUPPLEMENTARY INFORMATION:** Under the PRA (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. "Collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information before submitting the collection to OMB for approval. To comply with this requirement, FDA is publishing notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, FDA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of FDA's functions, including whether the information will have practical utility;