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: Julie Brown, Room N2–15–27, 7500 Security Boulevard, Baltimore, Maryland 21244–1850

Dated: October 5, 1999.

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

[FR Doc. 99–26829 Filed 10–13–99; 8:45 am]
BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCF–1092–N]

Medicare Program; October 29, 1999,
Meeting of the Competitive Pricing Advisory Committee

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Notice of meeting.

SUMMARY: In accordance with section 10(a) of the Federal Advisory Committee Act, this notice announces a meeting of the Competitive Pricing Advisory Committee (the CPAC) on October 29, 1999. The Balanced Budget Act of 1997 (BBA) requires the Secretary of the Department of Health and Human Services (the Secretary) to establish a demonstration project under which payments to Medicare+Choice organizations in designated areas are determined in accordance with a competitive pricing methodology. Section 4012(a) of the BBA requires the Secretary to appoint a Competitive Pricing Advisory Committee (the CPAC) to meet periodically and make recommendations to the Secretary concerning the designation of areas for inclusion in the project and appropriate research design for implementing the project. The CPAC has previously met on May 7, 1998, June 24 and 25, 1998, September 23 and 24, 1998, October 28, 1998, January 6, 1999, May 13, 1999, July 22, 1999, and September 16, 1999.

The CPAC consists of 15 individuals who are independent actuaries, experts in competitive pricing and the administration of the Federal Employees Health Benefit Program, and representatives of health plans, insurers, employers, unions, and beneficiaries. The CPAC members are: James Cubbin, Executive Director, General Motors Health Care Initiative; Robert Berenson, M.D., Director, Center for Health Plans and Providers, HCFA; John Bertko, Actuary Principal, Reden & Anders Ltd.; David Durenberger, Vice President, Public Policy Partners; Gary Goldstein, M.D., Samuel Havens, Healthcare Consultant; Margaret Jordan, Healthcare Consultant; Chip Kahn, President, The Health Insurance Association of America; Cleve Killingsworth, President and CEO, Health Alliance Plan; Nancy Kichak, Director, Office of Actuaries, Office of Personnel Management; Len Nichols, Principal Research Associate, The Urban Institute; Robert Reichsauer, Senior Fellow, The Brookings Institute; John Rother, Director, Legislation and Public Policy, American Association of Retired Persons; Andrew Stern, President, Service Employees International Union, AFL–CIO; and Jay Wolfson, Director, The Florida Information Center, University of South Florida. The chairperson is James Cubbin and the co-chairperson is Robert Berenson, M.D. In accordance with section 4012(a)(5) of the BBA, the CPAC will terminate on December 31, 2004. The agenda for the October 29, 1999, meeting will include the following:
• A discussion on the status of the Kansas City and Phoenix Area Advisory Committee activities.
• Reports from the CPAC subcommittees.
• A review of the current implementation schedules.
• A discussion of the evaluation of the competitive pricing demonstration.

Individuals or organizations that wish to make 5-minute oral presentations on the agenda issues should contact the Executive Director, by 12 noon, October 26, 1999, to be scheduled. The number of oral presentations may be limited by the time available. A written copy of the oral remarks should be submitted to the Executive Director, no later than 12 noon, October 27, 1999. Anyone who is not scheduled to speak may submit written comments to the Executive Director, by 12 noon, October 27, 1999. This meeting is open to the public, but attendance is limited to the space available.

This meeting is open to the public, but attendance is limited to the space available.

The meeting will be held at the Marriott Wardman Park Hotel, 2660 Woodley Road, NW, Washington, DC 20008.

For further information contact:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCF–3023–N]

Medicare Program; Meeting of the Laboratory and Diagnostic Services Panel of the Medicare Coverage Advisory Committee—November 15 and 16, 1999

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Notice of meeting.

SUMMARY: This notice announces a meeting of the Laboratory and Diagnostic Services Panel (the Panel) of the Medicare Coverage Advisory Committee. The Panel will discuss presentations from interested persons regarding human tumor assay systems. This meeting is open to the public and complies with the Federal Advisory Committee Act (5 U.S.C. App. 2, section 10(a)(1) and (a)(2)).

DATES: The Meeting: November 15, 1999 from 8 a.m. to 4 p.m. and on November 16, 1999, from 8 a.m. to 12 noon, E.S.T.
Deadline for Presentation Submissions: November 1, 1999.

**ADDRESSES:** The Meeting: The meeting will be held at the Sheraton Inner Harbor at 300 South Charles Street, Baltimore, MD 21201.

Presentations and Comments: Submit written presentations and comments to Katherine Tillman, Executive Secretary; Office of Clinical Standards and Quality, Health Care Financing Administration, 7500 Security Boulevard, Mail Stop S3–02–01, Baltimore, MD 21244.

FOR FURTHER INFORMATION CONTACT: Katherine Tillman, Executive Secretary; (410) 786–9252.

**SUPPLEMENTARY INFORMATION:** We have established the Medicare Coverage Advisory Committee (MCAC) to provide advice and recommendations to us about clinical coverage issues. The MCAC is composed of an Executive Committee and six panels, each containing members with expertise in one or more of the following fields: clinical and administrative medicine, biologic and physical sciences, public health administration, health care data and information management and analysis, the economics of health care, medical ethics, and other related professions. Each panel is composed of a chairperson, voting members, a nonvoting consumer representative, and a nonvoting industry representative.

**Current Members of the Panel**


**Topic of the Meeting**

The Panel will discuss presentations from interested persons regarding human tumor assay systems.

**Procedure and Agenda**

On day 1 of the meeting, the Panel will hear oral presentations from the public for approximately 3 hours and 15 minutes. The Panel may limit the number and duration of oral presentations to the time available. If you wish to make a presentation during one of these sessions, you must submit the following to the Executive Secretary before the Deadline for Presentation Submissions date listed in the Dates section of this notice: a brief statement of the general nature of the evidence or arguments you wish to present, the names and addresses of proposed participants, and an estimate of the time required to make the presentation. We will request that you declare at the meeting whether or not you have any financial involvement with manufacturers of any items or services being discussed (or with their competitors).

After the public presentation on Day 1 of the meeting, we will make a presentation to the Panel. After our presentation, the Panel will deliberate openly on the topic. Interested persons may observe the deliberations, but the Panel will not hear further comments during this time except at the request of the chairperson. At the end of the Panel deliberations, the Panel will allow a 30-minute open public session for any attendee to address issues specific to the topic.

**Submission of Final Comments**

Interested persons not scheduled to make an oral presentation, unable to attend the meeting, or wishing to make further remarks, may submit written comments to the Executive Secretary by the Deadline for Submission of Final Comments in the Dates section of this notice.

**HCFA Home Page**

You may access detailed information regarding the agenda and schedule of presentations on our home page www.hcfa.gov/quality/8b.htm the day after the Deadline for Presentation Submissions in the Dates section of this notice.

**Authority:** 5 U.S.C. App. 2, section 10(a)(1) and (a)(2). (Catalog of Federal Domestic Assistance Program No. 93.774, Medicare—Supplementary Medical Insurance Program) Dated: October 6, 1999.

**Jeffrey L. Kang,**

Director, Office of Clinical Standards and Quality, Health Care Financing Administration.

[FR Doc. 99–26752 Filed 10–13–99; 8:45 am]
BILLING CODE 4120–01–P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Indian Health Service**

**Request for Public Comment: 30-Day; Proposed Collection: Indian Health Service Loan Repayment Program**

Summary: In compliance with Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed information collection projects, the Indian Health Service (IHS) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection project was published in the March 30, 1999, Federal Register (64 FR 15169) and allowed 60 days for public comment. No public comment was received in response to the notice. The purpose of this notice is to allow 30 days for public comment to be submitted to OMB.

**Proposed Collection**

Title: 09–17–0014, “Indian Health Service Loan Repayment Program.” Type of Information Collection Request: Extension of a currently approved collection that expires November 30, 1999. Form Number: No reporting forms required. Need and Use of Information Collection: The IHS Loan Repayment Program (LRP) identifies health professionals with pre-existing financial obligations for educational expenses that meet program criteria and who are qualified and willing to serve at IHS health care facilities that are often remote. Under the program, eligible health professionals sign a contract under which the IHS agrees to repay part or all of their indebtedness for professional training education. In exchange, the health professionals agree to serve for a specified period of time in IHS health care facilities. Eligible health professionals who wish to apply must submit an application to participate in the program. The application requests personal, demographic and educational training information, including information on the educational loans of the individual for whom repayment is being requested (i.e., date, amount, account number, purpose of each loan, interest rate, the current balance, etc.). The data collected is needed and used to evaluate applicant eligibility, to rank and prioritize applicants by specialty, to assign applicants to IHS health care facilities. To determine payment amounts and schedules for paying the lending institutes, and to provide data and statistics for program management review and analysis. Affected Public: Individual and households. Type of Respondents: Individuals. Table 1 below provides the following types of data collection instruments, estimated number of respondents, number of responses per respondent, annual number of responses, average burden hour per response, and total annual burden hour.

---

**Indian Health Service Loan Repayment Program**

**Proposed Collection**

Title: 09–17–0014, “Indian Health Service Loan Repayment Program.” Type of Information Collection Request: Extension of a currently approved collection that expires November 30, 1999. Form Number: No reporting forms required. Need and Use of Information Collection: The IHS Loan Repayment Program (LRP) identifies health professionals with pre-existing financial obligations for educational expenses that meet program criteria and who are qualified and willing to serve at IHS health care facilities that are often remote. Under the program, eligible health professionals sign a contract under which the IHS agrees to repay part or all of their indebtedness for professional training education. In exchange, the health professionals agree to serve for a specified period of time in IHS health care facilities. Eligible health professionals who wish to apply must submit an application to participate in the program. The application requests personal, demographic and educational training information, including information on the educational loans of the individual for whom repayment is being requested (i.e., date, amount, account number, purpose of each loan, interest rate, the current balance, etc.). The data collected is needed and used to evaluate applicant eligibility, to rank and prioritize applicants by specialty, to assign applicants to IHS health care facilities. To determine payment amounts and schedules for paying the lending institutes, and to provide data and statistics for program management review and analysis. Affected Public: Individual and households. Type of Respondents: Individuals. Table 1 below provides the following types of data collection instruments, estimated number of respondents, number of responses per respondent, annual number of responses, average burden hour per response, and total annual burden hour.

---