

Dated: September 2, 1999.

**Margaret M. Dotzel,**

*Acting Associate Commissioner for Policy.*

[FR Doc. 99-23633 Filed 9-7-99; 4:16 pm]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Care Financing Administration

[Document Identifier: HCFA-R-13]

#### Agency Information Collection Activities; Submission For OMB Review; Comment Request

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, has submitted to the Office of Management and Budget (OMB) the following proposal for the collection of information. Interested persons are invited to send comments regarding the 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:* Conditions of Coverage for Organ Procurement Organizations (OPOs) and Supporting Regulations in 42 CFR, Section 486.301-325;

*Form No.:* HCFA-R-13;

*Use:* An Organ Procurement Organization (OPO) is an entity that performs or coordinates the performance of retrieving, preserving and transporting organs and maintains a system of locating prospective recipients for available organs. OPOs are required to submit accurate data to HCFA concerning population and information on donors and organs on an annual basis in order to assure maximum effectiveness in the procurement and distribution of organs. This information collection lays out the conditions for coverage for OPOs;

*Frequency:* Annually;

*Affected Public:* Not-for-profit institutions;

*Number of Respondents:* 62;

*Total Annual Responses:* 62;

*Total Annual Hours Requested:* 1.

To obtain copies of the supporting statement 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 and phone number, to [Paperwork@hcfa.gov](mailto: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 30 days of this notice directly to the OMB Desk Officer designated at the following address: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: August 19, 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. 99-23603 Filed 9-9-99; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Care Financing Administration

[Document Identifier: HCFA-R-281]

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

**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 other forms of information technology to minimize the information collection burden.

We are, however, requesting an emergency review of the Information collections 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 prior to the expiration of the normal time limits under OMB's regulations at 5 CFR, Part 1320. The HCFA-R-281 will be used to evaluate the effects of the "Medicare and You Handbook: 2000" to determine that beneficiaries not only received it and are aware of the information, but whether they understand the information and are able to use it in making informed choices about their Medicare plan. Without this information, HCFA would not be able to obtain the information necessary to determine whether these goals have been met. The Agency cannot reasonably comply with the normal clearance procedures because public harm is likely to result due to the possibility of beneficiaries not being properly informed/educated as to the importance of their Medicare plan choices.

HCFA is requesting OMB review and approval of this collection by 9/10/99, with a 180-day approval period. Written comments and recommendations will be accepted from the public if received by the individuals designated below, by 9/9/99. 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:* Revision of a currently approved collection;

*Title of Information Collection:* Survey of Medicare Beneficiaries for the National "Medicare and You Handbook: 2000" Evaluation;

*Form No.:* HCFA-R-281 (OMB #0938-0771);

*Use:* As part of the National Medicare Education Program (NMEP), HCFA plans a national mailing of the Medicare & You 2000 handbook to the entire Medicare population in September 1999. To evaluate the effects of the handbook, HCFA needs to know not only that beneficiaries received it and are aware of the information, but whether they understand the information and are able to use it in

making informed choices about their Medicare plan.

To quantify whether these goals have been met, measures of what beneficiaries currently know and understand about the Medicare program must be established. It is also necessary to compare attitudes and behavior of beneficiaries who receive the information to those who do not to determine if the print campaign of the NMEP (Medicare & You handbook) has been effective.

This survey will be used to determine the effectiveness of the "Medicare and You Handbook: 2000";

*Frequency:* Other: one time;

*Affected Public:* Business or other for-profit, and Individuals or Households;

*Number of Respondents:* 4,250;

*Total Annual Responses:* 4,250;

*Total Annual Hours:* 3,019.

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, to [Paperwork@hcfa.gov](mailto:Paperwork@hcfa.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 9/9/99:

Health Care Financing Administration,  
Office of Information Services,  
Security and Standards Group,  
Division of HCFA Enterprise  
Standards, Attention: Dawn  
Willingham, Room N2-14-26, 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: Allison Herron Eydtt,  
HCFA Desk Officer.

Dated: August 31, 1999.

**John Parmigiani,**

*Manager, HCFA Office of Information  
Services, Security and Standards Group,  
Division of HCFA Enterprise Standards.*  
[FR Doc. 99-23606 Filed 9-9-99; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Care Financing Administration

[HCFA-2058-PN]

RIN 0938-AJ68

#### Medicare and Medicaid Programs; Application of the Joint Commission for Accreditation of Healthcare Organizations (JCAHO) for Continued Approval of Deeming Authority for Home Health Agencies

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

**ACTION:** Proposed notice.

**SUMMARY:** This notice announces the receipt of an application from the Joint Commission for Accreditation of Healthcare Organizations (JCAHO) for recognition as a national accreditation program for home health agencies (HHAs) that wish to participate in the Medicare or Medicaid programs. The Social Security Act requires that the Secretary publish a notice identifying the national accreditation body making the request for approval, describing the nature of the request, and providing a 30-day public comment period.

**DATES:** Written comments will be considered if we receive them at the appropriate address, as provided in **ADDRESSES** section, no later than 5 p.m. on October 12, 1999.

**ADDRESSES:** Mail written comments (one original and three copies) to the following address: Health Care Financing Administration, Department of Health and Human Services, Attention: HCFA-2058-PN, P.O. Box 9010, Baltimore, Maryland 21244-9010.

If you prefer, you may deliver your written comments (one original and three copies) to one of the following addresses: Room 445-G, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201, or Room C5-16-03, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

**FOR FURTHER INFORMATION CONTACT:** Joan C. Berry, (410) 786-7233.

#### SUPPLEMENTARY INFORMATION:

##### Comments

Because of staffing and resource limitations, we cannot accept comments by facsimile (FAX) transmission. In commenting, please refer to file code HCFA-2058-PN. Comments received timely will be available for public inspection as they are received, generally beginning approximately 3 weeks after publication of a document, in Room 445-G of the Department's

offices at 200 Independence Avenue, SW., Washington, DC, on Monday through Friday of each week from 8:30 a.m. to 5 p.m. (phone: (202) 690-7890).

#### I. Background

Under the Medicare program, eligible beneficiaries may receive covered services from a home health agency (HHA) provided certain requirements are met. Sections 1861(o) and 1891 of the Social Security Act (the Act) and part 484 of the Medicare regulations specify the conditions that an HHA must meet in order to participate in the Medicare program.

Regulations concerning provider agreements are at 42 CFR part 489 and those pertaining to the activities relating to the survey and certification of facilities are at 42 CFR part 488.

Generally, in order to enter into an agreement, an HHA must first be certified by the State survey agency as complying with the conditions or standards set forth in the statute and part 484 of our regulations. Then, the HHA is subject to regular surveys by a State survey agency to determine whether it continues to meet the requirements. There is an alternative, however, to surveys by State agencies.

Section 1865(b)(1) of the Act permits "accredited" HHAs to be exempt from routine surveys by State survey agencies to determine compliance with Medicare conditions of participation. Section 1865(b)(1) of the Act provides that if the Secretary finds that accreditation of a provider entity by a national accreditation body demonstrates that all applicable conditions are met or exceeded, the Secretary "deems" those requirements to be met by the HHA. Our regulations concerning reapproval of accrediting organizations are set forth at §§ 488.4 and 488.8(d)(3). Section 488.8(d)(3) requires reapplication at least every 6 years and permits the Secretary to determine the required materials from those enumerated in § 488.4, and the deadline to reapply for continued approval of deeming authority. The Joint Commission for Accreditation of Healthcare Organizations (JCAHO) is a currently recognized accreditation organization for HHAs.

#### II. Approval of Deeming Organizations

Section 1865(b)(2) of the Act further requires that the Secretary's findings concerning review of national accrediting organizations consider, among other factors, the accreditation organization's requirements for accreditation, its survey procedures, its ability to provide adequate resources for conducting required surveys and ability