

adaptive behavior, social participation, health, and quality of life.

This study proposes to continue with the one-time, in-person interview and includes a contemporaneous comparison group of persons who, at age 10 years, were in regular education

classes in the same schools as were the persons with developmental disabilities. The data generated from this study will continue to be used to estimate the burden of secondary health conditions, limited social participation, and economic disadvantage among young

adults with long-standing, developmental impairments. The total cost to recipients is \$0.00.

This request is for a one-year renewal of the currently-approved study.

Data Collection:

Respondents	No. of respondents	No. of responses/respondent	Avg. burden of response (in hrs.)	Total burden (in hrs.)
Contacting	1,056	1	10/60	176
Interview	898	1	60/60	898
Call Backs	90	1	10/60	15
Total				1,089

Dated: September 10, 1999.

Nancy Cheal,

Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 99-24143 Filed 9-15-99; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCFA-1039-CN2]

RIN 0938-A187

Medicare Program; Hospice Wage Index; Correction

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

ACTION: Notice; correction notice.

SUMMARY: This document corrects a typographical error that appeared in the notice published in the **Federal Register** on October 5, 1998, entitled "Medicare Program; Hospice Wage Index."

EFFECTIVE DATE: This correction is effective October 1, 1998.

FOR FURTHER INFORMATION CONTACT: Carol Blackford, (410) 786-5909.

SUPPLEMENTARY INFORMATION: On October 5, 1998, we published a notice in the **Federal Register** (63 FR 53446) announcing the annual update to the hospice wage index. The wage index is used to reflect local differences in wage levels. That update was effective October 1, 1998 and is the second year of a 3-year transition period. The provisions in this correction notice are effective as if they had been included in the document published in the **Federal Register** on October 5, 1998.

On November 1, 1998, we published a notice (63 FR 63326) correcting the October 5, 1998 notice. In that correction notice, we inadvertently failed to make one typographical

correction. Therefore, in FR Doc. 98-26501 of October 5, 1998, we are now making the following correction:

- On page 53448, in Table A, under the MSA code number 1303 for Burlington, VT, the wage index "1.1037" is corrected to read "1.0137".

Authority: Section 1814(i) of the Social Security Act (42 U.S.C. 1395f(i)(1)).

(Catalog of Federal Domestic Assistance Program No. 93.773 Medicare—Hospital Insurance Program; and No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: September 8, 1999.

Brian P. Burns,

Deputy Assistant, Secretary for Information, Resources Management.

[FR Doc. 99-24096 Filed 9-15-99; 8:45 am]

BILLING CODE 4120-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, Public Health Service, DHHS.

ACTION: Notice.

SUMMARY: The inventions listed below are owned by agencies of the U.S. Government and are available for licensing in the U.S. in accordance with 35 U.S.C. 207 to achieve expeditious commercialization of results of federally-funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

ADDRESSES: Licensing information and copies of the U.S. patent applications listed below may be obtained by contacting John Peter Kim, J.D., M.B.A., Technology Licensing Specialist, at the

Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852-3804; telephone: 301/496-7056 ext. 264; fax: 301/402-0220; e-mail: jk141n@nih.gov. A signed Confidential Disclosure Agreement will be required to receive copies of the patent applications.

Oligonucleotides Which Specifically Bind Retroviral Nucleocapsid Proteins

Alan Rein, Jose Casas-Finet, Robert Fisher, Matthew Fivash, Louis E. Henderson (NCI)

Serial No. 09/180,903 filed 12 Jul 1999; PCT/US97/08936 filed 19 May 1997; Serial No. 60/017,128 filed 20 May 1996

The human immunodeficiency virus (HIV) is the causative agent of acquired immunodeficiency syndrome (AIDS). A retroviral protein species, the gag polyprotein, is involved in the assembly of retrovirus particles and capable of specific interactions with nucleic acids. After the virion is released from the cell, the polyprotein is cleaved by the virus-encoded protease. One of the cleaved products, the nucleocapsid (NC) protein, then binds to genomic RNA, forming the ribonucleoprotein core of the mature particle. The interaction between gag and genomic RNA is known to involve the NC domain of the polyprotein. In addition, the NC protein plays crucial roles in both the reverse transcription and integration steps in the viral life cycle.

The present invention relates to retroviral nucleocapsid proteins, such as NC and the gag precursor, and their ability of bind to specific nucleic acid sequences with high affinity. The high affinity of this interaction has potential applications in the design of new antiviral approaches and in sensitive detection of HIV particles. Accordingly, the invention provides for oligonucleotides which bind to