random sample will be selected from each health plan using a proportionate (uniform) sampling fraction.

Mission sampling frame elements are not expected to be a problem, and anyone excluded from the sampling frame because of missing diagnoses due to claims lags will be considered missing at random because physician and hospital claim lags should be totally independent of cost-related changes in medication-taking behavior.

The sample file will contain an investigator-assigned, study specific case identity code that will allow the survey results file to be linked back to

the administrative data. Checks for changes in address will be made and survey packets prepared. A cover letter from the investigators will invite Medicare beneficiaries enrolled in UnitedHealthcare Medicare+Choice health plans to participate in the study, and a written consent form approved by a duly constituted Institutional Review Board will be sent along with the survey questionnaire. Two mailings with a postcard reminder sent in the interim period and follow-up calls to nonresponders after the second survey mailing are planned to obtain a response rate similar to the Medicare Consumers

Assessment of Health Plans Survey response rate of 75% to 82%. Respondents will not receive any gifts or payments as incentives to respond.

Estimated Annual Respondent Burden

This is a one-time survey with 24 multiple choice questions, plus one question that asks respondents to name any medication(s) they did not use as prescribed because of cost, plus one question that asks respondents to name the medication(s), if any, that they used as alternative(s) to the medication(s) that cost too much. The survey will be conducted in 2002.

Survey year	Number of re- spondents	Estimated time per respondent in hours	Estiamted total burden hours	Estimated cost to the government
2002	1,125	.25	281	\$35,000

Request for Comments

In accordance with the above cited legislation, comments on the AHRQ information collection proposal are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of functions of the Agency, including whether the information will have practical utility; (b) the accuracy of the Agency's estimate of the burden (including hours and costs) of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: May 15, 2002.

Carolyn M. Clancy,

Acting Director.

[FR Doc. 02–14382 Filed 6–6–02; 8:45 am] BILLING CODE 4160–90–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel: Cooperative Agreements for Prevention Research Centers, Program Announcements 98047 and 01101

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following meeting.

Name: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Cooperative Agreements for Prevention Research Centers, Program Announcements 98047 and 01101, meeting.

Times and Dates: 8:30 a.m.—8:55 a.m., June 25, 2002 (Open); 9 a.m.—5 p.m., June 25, 2002 (Closed); 8 a.m.—5 p.m., June 26, 2001 (Closed).

Place: Sheraton Colony Hotel, 188 14th Street, N.E., Atlanta, GA 30361.

Status: Portions of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Deputy Director for Program Management, CDC, pursuant to Public Law 92–463.

Matters to Be Discussed: The meeting will include the review, discussion, and evaluation of award applications received in response to Program Announcements #98047 and 01101.

For Further Information Contact: Mike Waller, Deputy Branch Chief, Healthcare and Aging Studies Branch, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 4770 Buford Highway, m/s K45,

Atlanta, GA., 30341. Telephone 770.488.5269, e-mail *mnw1@cdc.gov*.

The Director, Management Analysis and Services office has been delegated the authority to sign Federal Register notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: June 3, 2002.

Joseph E. Salter,

Acting Director, Management Analysis and Services Office, CDC.

[FR Doc. 02–14323 Filed 6–6–02; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel: Community-Based Participatory Prevention Research, Program Announcement #02003

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following meeting:

Name: Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Community-Based Participatory Prevention Research, Program Announcement #02003.

Times and Dates: 5 p.m.-6 p.m., June 24, 2002 (Open); 6:15 p.m.-8 p.m., June 24, 2002 (Closed); 8 a.m.-5 p.m., June 25, 2002 (Closed); 8 a.m.-4 p.m., June 26, 2002 (Closed).

Place: Holiday Inn Select, 130 Clairmont Avenue, Decatur, Georgia.

Status: Portions of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c) (4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92–463.

Matters to Be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to PA# 02003.

For Further Information Contact: Theodore J. Meinhardt, Associate Director for Management and Operations, 4770 Buford Highway, MS–K38, Atlanta, Georgia 30341, 770–488–2505.

The Director, Management Analysis and Services Office has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: June 3, 2002.

Joe E. Salter,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 02–14324 Filed 6–6–02; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Update on the Findings of the Hanford Thyroid Disease Study Final Report

The National Center for Environmental Health (NCEH) of the Centers for Disease Control and Prevention (CDC) and Fred Hutchinson Cancer Research Center (FHCRC) announces the following public meeting.

Name: Update on the Findings of the Hanford Thyroid Disease Study Final Report. Time and Date: 6 p.m.–8:30 p.m., June 21, 2002.

Place: Red Lion Inn-The Hanford House, 802 Washington Way, Richland, Washington 99352, telephone 509–946–7611.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 200 people.

Background: In 1986, Freedom of Information Act requests led the Department of Energy to make public thousands of pages of documentation indicating that large quantities of radioactive materials were released into the atmosphere from the Hanford Nuclear Site. The radioactivity was a byproduct of nuclear weapons production from December 1944 through 1957. Most of the radioactivity was released in the form of Iodine-131, which concentrates in the thyroid glands of those who eat food contaminated by it. The amount of Iodine-131 released during this period was more than half a million curies, prompting concern

regarding thyroid health effects. The government convened a special Hanford Health Effects Review Panel to review the documents and recommend steps to evaluate possible health consequences among those who live near the Hanford Nuclear Site.

Two studies were undertaken as a result of these recommendations. The first was the Hanford Environmental Dose Reconstruction Project which estimated potential radiation doses to the thyroid among persons exposed to Hanford Iodine-131 releases. The second was the Hanford Thyroid Disease Study. This study was designed to determine whether the exposures from Hanford resulted in an increased risk of thyroid disease in a randomly selected study population. In late 1989, a contract to perform this study was awarded to the FHCRC.

Purpose: The purpose of the study was to determine if there was an increased risk for thyroid disease among a randomly selected study population exposed to atmospheric releases of radioactive Iodine-131 from the Hanford Nuclear Site in eastern Washington State during the 1940s and 1950s. The study, mandated by Congress, was conducted by a team of scientists at the FHCRC under contract from the CDC.

Matters to Be Discussed: Agenda items include a presentation from NCEH regarding the findings of the Hanford Thyroid Disease Study Final Report. There will be time for public input, questions, poster sessions, and comments.

All agenda items are subject to change as priorities dictate.

For Further Information Contact: General information may be obtained from Ms. Maire Holcombe, Health Communicator, Radiation Studies Branch (RSB), Division of Environmental Hazards and Health Effects (DEHHE), NCEH, CDC, 1600 Clifton Road (E–39), Atlanta, Georgia 30333, telephone 404–498–1809. Technical information may be obtained from Dr. Paul Garbe, Associate Director for Science, DEHHE, NCEH, CDC, 1600 Clifton Road (E–39), Atlanta, Georgia 30333 telephone 404–498–1305.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities for both CDC and ATSDR.

Dated: June 3, 2002.

Joseph Salter,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 02–14322 Filed 6–6–02; 8:45 am]
BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS-R-138]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare and Medicaid Services, HHS.

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

Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Medicare Geographic Classification Review Board (MGCRG) Procedures and Criteria and Supporting Regulations in 42 CFR, Section 412.256; Form No.: CMS-R-138 (OMB #0938-0573); Use: This collection sets up an application process for prospective payment system hospitals who choose to appeal their geographic status to the Medicare Geographic Classification Review board (MGCRB); Frequency: Annually; Affected Public: Business or other for-profit, and Not-forprofit institutions; Number of Respondents: 650; Total Annual Responses: 650; Total Annual Hours: 650.

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://www.hcfa.gov/regs/prdact95.htm, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@hhs.gov, or call the Reports