

supply agreement pursuant to which Pennzoil purchases base oil from Excel Paralubes.

Paragraph III limits Respondents' use of their rights to purchase Group II base oil from ExxonMobil under the ExxonMobil/Pennzoil Base Oil Agreement. That agreement allows Pennzoil to obtain base oil from ExxonMobil in the proportionate types and amounts corresponding to production at designated ExxonMobil refineries. Pennzoil currently is taking approximately 1,500 barrels per day of Group II under this contract. Any significant increase in that amount could unduly increase concentration. Accordingly, Paragraph III prevents Respondents from increasing their share of the market for Group II Base Oil through additional supply under this agreement.

If Respondents have not accomplished the divestiture within the required time period, Paragraph IV provides that the Commission may appoint a trustee to divest the Pennzoil Excel Paralubes Interest, at no minimum price, to a buyer approved by the Commission. The trustees will have the exclusive power and authority to accomplish the divestiture within twelve months, subject to any necessary extensions by the Commission. Paragraph IV.C.5 requires that the trustee will have access to information related to Atlas and Excel Paralubes as necessary to fulfill his or her obligations. (Atlas is the wholly-owned subsidiary of Pennzoil that holds Pennzoil's interest in the Excel Paralubes partnership.) The trustee shall use his or her best efforts to negotiate the most favorable price and terms for the divestiture, subject to the Respondents' absolute and unconditional obligation to divest expeditiously at no minimum price. If the trustee receives more than one bona fide offer from entities approved by the Commission, the trustee will divest to the party selected by the Respondents.

Other provisions of Paragraph IV.C. generally provide that Respondents are responsible for management expenses incurred by the trustee, that the trustee has authority to employ other persons

necessary to carry out his or her duties and responsibilities, and that Respondents indemnify and hold the trustee harmless against any liabilities or expenses arising out of, or in connection with, performance of the trustee's duties. Respondents may require the trustee to sign a customary confidentiality agreement, provided that such agreement may not restrict the trustee from providing any information to the Commission.

Paragraphs V–VIII of the Proposed Order contain certain general provisions. Pursuant to Paragraph V, Respondents are required to provide the Commission with a report of compliance with the Proposed Order every thirty days until the divestiture is completed and annually for nine years after the first year the Order becomes final. Paragraph VI provides for notification to the Commission in the event of any corporate changes in the Respondents. Paragraph VII requires that Respondents provide the Commission with access to their facilities and employees for the purposes of determining or securing compliance with the Proposed Order. Finally, Paragraph VIII terminates the Order ten years from the date it becomes final.

V. Opportunity for Public Comment

The Proposed Order has been placed on the public record for thirty (30) days for receipt of comments by interested persons. The Commission, pursuant to a change in its Rules of Practice, has also issued its Complaint in this matter, as well as the Hold Separate Order. Comments received during this thirty day comment period will become part of the public record. After thirty (30) days, the Commission will again review the Proposed Order and the comments received and will decide whether it should withdraw from the Proposed Order or make final the agreement's Proposed Order.

By accepting the Proposed Order subject to final approval, the Commission anticipates that the competitive problems alleged in the Complaint will be resolved. The purpose of this analysis is to invite

public comment on the Proposed Order, including the proposed divestiture, and to aid the Commission in its determination of whether it should make final the Proposed Order contained in the agreement. This analysis is not intended to constitute an official interpretation of the Proposed Order, nor is it intended to modify the terms of the Proposed Order in any way.

By direction of the Commission.

Donald S. Clark,
Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Agency Information Collection Activities: Submission for OMB Review; Comment Request

The Department of Health and Human Services, Office of the Secretary publishes a list of information collections it has submitted to the Office of Management and Budget (OMB) for clearance in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35) and 5 CFR 1320.5. The following are those information collections recently submitted to OMB.

1. *Cash and Counseling Demonstration:* Additional Survey Instruments—0990–0232—Extension—The Office of the Assistant Secretary for Planning and Evaluation (ASPE) in partnership with the Robert Wood Johnson Foundation, is evaluating a demonstration project of the Cash and Counseling consumer directed care model. A controlled experimental design methodology is being used to test the effects of the experimental intervention; cash payments in lieu of arranged services for Medicaid covered beneficiaries. This portion of the evaluation consists of four non-client surveys.

Respondents: Individuals or households, For-profit, non-profit institutions.

BURDEN INFORMATION

Instrument	Number of respondents	Burden per response	Total burden hours
Informal Caregiver	741	.38	282
Paid Workers	391	.5	196
Consultant Survey (complete)	0	0	0
Ethnographic Study	25	1.0	25
Total	1,157	503

OMB Desk Officer: Allison Herron Eydt.

Copies of the information collection packages listed above can be obtained by calling the OS Reports Clearance Officer on (202) 690-6207. Written comments and recommendations for the proposed information collection should be sent directly to the OMB desk officer designated above at the following address: Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, 725 17th Street, NW., Washington, DC 20503.

Comments may also be sent to Cynthia Agens Bauer, OS Reports Clearance Officer, Room 503H, Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201. Written comments should be received within 30 days of this notice.

Dated: October 1, 2002.

Kerry Weems,

Deputy Assistant Secretary, Budget.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-01-03]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of

information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 498-1210. Send written comments to CDC, Desk Officer, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503. Written comments should be received within 30 days of this notice.

Proposed Project

National Hospital Discharge Survey—(OMB No. 0920-0212)—National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC) proposed to conduct a special study to evaluate expanding pharmaceutical data in the National Health Care Survey. This study is a preliminary investigation of methodological procedures to collect information on drugs for inpatients as part of the National Hospital Discharge Survey (NHDS). The National Health Care Survey currently collects data on drugs prescribed during patient visits to physicians' offices and to emergency and outpatient departments through the National Ambulatory Medical Care Survey and the National Hospital Ambulatory Medical Care Survey. The purpose of this special study is to conduct and evaluate a field test of preliminary data collection methods using medical records as the source for abstracting names of drugs administered to a sample of hospital inpatients. It is anticipated that the results of this

special study will provide essential information regarding: the amount of time and medical sophistication required for staff to find and abstract drug data in the medical record; the cost of collecting these data as part of the NHDS; potential problems to be anticipated in conducting a national survey which potentially requires the participation of a large number of hospitals; and, what the next steps should be to evaluate the possibility of adding drug data to the NHDS. The field test for this special study will include a sample of approximately 50 hospitals which are not currently participating in the NHDS. Data collection will include 20 discharges sampled from one month from each participating hospital. The data items to be abstracted are all of the NHDS items in addition to listing the narrative description of all drugs administered during the sampled inpatient stay. It is anticipated that only half of the hospitals which participate in the special study will conduct their own abstracting ("Primary procedure") and that contractor staff will perform the abstracting ("Alternate procedure") in the other 25 hospitals. The total annual burden for this data collection is 367 hours.

Form	Number of respondents	Number of responses/respondent	Average burden/response (in hours)
Medical Record Abstract—Primary Procedure Hospital	25	20	30/60
Medical Record Abstract—Alternate Procedure Hospital	25	20	1/60
Induction Form	50	1	2
Transmittal Form	50	1	10/60

Dated: October 2, 2002.

Nancy E. Cheal,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 02219]

Cooperative Agreement for the Development and Support of Core Public Health Functions Related to Injury Prevention and Control; Notice of Award of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the award

of fiscal year (FY) 2002 funds for a cooperative agreement program for the Development and Support of Core Public Health Functions Related to Injury Prevention and Control.

The purpose of the program is to assist the State and Territorial Injury Prevention Directors' Association (STIPDA) to determine and respond to the training, information, education, research, surveillance, program implementation, and evaluation needs required to build or expand injury prevention and control capacity at the State and territorial level. This program addresses the "Healthy People 2010"