Based on the agency's experience of 4 years, FDA estimates there are approximately 200 manufacturers of products subject to the Prescription Drug User Fee Act. Of the 200 manufacturers, CDER estimates 141 are drug manufacturers, and CBER estimates 59 are biologics manufacturers. CDER estimates there are 1,721 annual responses that include the following: 125 new drug applications, 1,098 chemistry supplements, 400 labeling supplements, and 98 efficacy supplements. CBER estimates there are 167 annual responses that include the following: 157 annual product supplements, and 10 original license applications.

Dated: February 9, 1998.

William K. Hubbard,

Associate Commissioner for Policy Coordination.

[FR Doc. 98–3707 Filed 2–12–98; 8:45 am]

BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCFA–R–170]

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

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.

Type of Information Collection Request: Extension of a currently approved collection; *Title of Information Collection:* Criteria for Medicare Coverage of Lung Transplants; *Form No.:* HCFA–R–170 (OMB# 0938–0670); *Use:* Medicare participating hospitals must file an application to be approved for coverage and payment of lung transplants performed on Medicare beneficiaries; *Frequency:* Annually; *Affected Public:* Business or other for-profit; *Number of Respondents:* 16; *Total Annual Responses:* 16; *Total Annual Hours:* 1,910.

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, OMB number, and HCFA document identifier, to 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: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: February 3, 1998.

John P. Burke III,

HCFA Reports Clearance Officer, HCFA Office of Information Services, Information Technology Investment Management Group, Division of HCFA Enterprise Standards.

[FR Doc. 98–3689 Filed 2–12–98; 8:45 am]

BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Healthy Start Initiative—Phase II: Limited Competition Within the City of Milwaukee

AGENCY: Health Resources and Services Administration (HRSA), HHS.

ACTION: Notice of availability of funds for a limited competition within the City of Milwaukee.

SUMMARY: The HRSA announces the availability funds in fiscal year 1998 for a single cooperative agreement for the replication of the Healthy Start Initiative (HSI) Phase II within the City of Milwaukee. The Healthy Start Initiative is a program of projects which, since FY 1991, has developed and implemented community-based strategies to reduce infant mortality in areas with a high incidence of infant mortality. The purpose of Healthy Start-Phase II is to operationalize successful infant mortality reduction strategies developed during the demonstration phase and to launch Healthy Start projects in new rural and urban communities (i.e., communities currently without a Healthy Start Initiative-funded project). Within the HRSA, the Healthy Start Initiative is administered by the Maternal and Child Health Bureau (MCHB). This cooperative agreement for Healthy Start-Phase II in the city of Milwaukee will be made under the program authority of Section 301 of the Public Health Service Act. Funds for this award were appropriated under Public Law 104–208.

To continue Healthy Start efforts to meet critical maternal and child health needs within the City of Milwaukee, public and nonprofit private organizations within the City of Milwaukee are encouraged to apply.

DATES: The application deadline date is Friday, February 20, 1998.

ADDRESS: Interested parties may contact the HRSA Grants Application Center for an application package. Requests should specify the Healthy Start Initiative—Phase II limited competition within the City of Milwaukee (CFDA #93.926b). The Center may be contacted by: *telephone:* 1–888–300–HRSA, *FAX:* 301–309–0579, or *e-mail:* HRSA.GAC@x.netcom.com. *Completed applications should be returned to:* Grants Management Officer (CFDA ı93.926b), HRSA Grants Application Center, 40 West Gude Drive, Suite 100, Rockville, Maryland 20850.

Dated: February 9, 1998.

Claude Earl Fox,

Acting Administrator.

[FR Doc. 98–3705 Filed 2–12–98; 8:45 am]

BILLING CODE 4160–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Practitioner Data Bank; Change in User Fee and Elimination of Diskette Queries

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Withdrawal.

SUMMARY: National Practitioner Data Bank; Change in User Fee and Elimination of Diskette Queries notice, document 98–2637, pages 5811–5812, Volume 63, Number 23, in the issue of Wednesday, February 4, 1998, was published in error and is withdrawn from publication.

The correct version of the notice was published on Thursday, January 29,

1998, Document No. 98–2116, Volume 63, Number 19, page 4460.

Dated: February 9, 1998.

James J. Corrigan,

Acting Associate Administrator for Management and Program Support.

[FR Doc. 98–3704 Filed 2–12–98; 8:45 am]

BILLING CODE 4160–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Statement of Organization, Functions, and Delegations of Authority

This notice amends Part R of the Statement of Organization, Functions and Delegations of Authority of the Department of Health and Human Services (DHHS), Health Resources and Services Administration (60 FR 56605 as amended November 6, 1995; as last amended at 62 FR 43173–77 dated August 12, 1997). This notice reflects the title change of the Office of Information Resources Management (RS6) under the Office of Management and Program Support (RS).

I. Under RS6, make the following changes: A. Change the title of the organization to Office of Information Technology.

B. Amend the functional statement to read: Provides leadership in the development, review and implementation of policies and procedures to promote improved information resources management capabilities and practices throughout HRSA; (2) develops and coordinates HRSA-wide plans and budgets for the management of information technology and services, including centralized data processing, office automation and telecommunications; (3) develops and recommends policies and procedures relating to information resources management and support services; (4) identifies and coordinates HRSA-wide information needs and develops or coordinates with others the development of creative answers to these needs; (5) plans, manages, administers and coordinates the HRSA-wide microcomputer network including all required linkages to other networks inside and outside HRSA including mainframe systems; (6) provides information support to the Office of the Administrator and other HRSA organizational components; (7) designs, develops, catalogues and manages data bases, information resources, including those data bases developed within the HRSA Bureaus and offices, and the acquisition and use of external bases and information resources that support HRSA needs; (8) manages and coordinates state-of-the-art expertise for information science and technology; (9) assesses hardware and software systems to test their applicability and cost; provides consultation, technical advice and assistance and coordinates training in the use of ADP resources; (10) develops and manages an ongoing strategic planning program; (11) monitors and reviews legislative and regulatory activities and initiatives related to information technology; (12) develops and coordinates the implementation of information security programs; (13) maintains liaison and coordinates information resources management with the HRSA Bureaus and offices; (14) maintains liaison with HHS, other Federal agencies, States and professional organizations and associations concerning health information interests allied to the HRSA mission; and (15) reviews all HRSA requests for ADP resources, providing ADP clearance for all appropriately justified requests.

II. Delegation of Authority: All delegations and redelegations of authority which were in effect immediately prior to the effective date hereof have been continued in effect in them or their successors pending further redelegations.

This reorganization is effective upon date of signature.

Dated: February 6, 1998.

Claude Earl Fox,

Acting Administrator.

[FR Doc. 98–3706 Filed 2–12–98; 8:45 am]

BILLING CODE 4160–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Refugee Resettlement Program: Proposed Allocations to States of FY 1998 Funds for Refugee Social Services

AGENCY: Office of Refugee Resettlement (ORR), ACF, HHS.

ACTION: Notice of proposed allocations to States of FY 1998 funds for refugee [1] social services.

SUMMARY: This notice establishes the proposed allocations to States of FY 1998 funds for social services under the Refugee Resettlement Program (RRP). In the final notice, allocation amounts could be adjusted slightly based on final adjustments in FY 1997 arrivals in some States. This notice reflects the decision by Congress to provide $14,000,000 under social services to address the needs of refugees and communities impacted by recent changes in Federal assistance programs relating to welfare reform. This notice also announces ORR's intention to eliminate the floor formula for States with small refugee populations, beginning in FY 1999.

EFFECTIVE DATE: Comments on the proposed allocations contained in this notice must be received by March 16, 1998.

ADDRESSES: Address written comments, in duplicate, to: Toyo Biddle, Office of Refugee Resettlement, Administration for Children and Families, 370 L'Enfant Promenade, S.W., Washington, D.C. 20447.

FOR FURTHER INFORMATION CONTACT: Toyo Biddle, Director, Division of Refugee Self-Sufficiency, (202) 401–9250.

SUPPLEMENTARY INFORMATION:

I. Amounts For Allocation

The Office of Refugee Resettlement (ORR) has available $129,990,000 in FY 1998 refugee social service funds as part of the FY 1998 appropriation for the Department of Health and Human Services (Pub. L. No. 105–78).

The FY 1998 House Appropriations Committee Report (H.R. Rept. No. 105–205) reads as follows with respect to social services funds:

> The bill provides $129,990,000 for social services, an increase of $19,108,000 over the comparable fiscal year 1997 appropriation and the budget request. Funds are distributed by formula as well as through the

[1] In addition to persons who meet all requirements of 45 CFR 400.43, ''Requirements for documentation of refugee status,'' eligibility for refugee social services also includes: (1) Cuban and Haitian entrants, under section 501 of the Refugee Education Assistance Act of 1980 (Pub. L. No. 96–422); (2) certain Amerasians from Vietnam who are admitted to the U.S. as immigrants under section 584 of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 1988, as included in the FY 1988 Continuing Resolution (Pub. L. No. 100–202); and (3) certain Amerasians from Vietnam, including U.S. citizens, under title II of the Foreign Operations, Export Financing, and Related Programs Appropriations Acts, 1989 (Pub. L. No. 100–461), 1990 (Pub. L. No. 101–167), and 1991 (Pub. L. No. 101–513). For convenience, the term ''refugee'' is used in this notice to encompass all such eligible persons unless the specific context indicates otherwise.

Refugees admitted to the U.S. under admissions numbers set aside for private-sector-initiative admissions are not eligible to be served under the social service program (or under other programs supported by Federal refugee funds) during their period of coverage under their sponsoring agency's agreement with the Department of State—usually two years from their date of arrival or until they obtain permanent resident alien status, whichever comes first.