

under the terms of the Government in the Sunshine Act (5 U.S.C. 552b(c)(9)(B)).

Due to programmatic issues that had to be resolved, the **Federal Register** notice amendment is being published less than fifteen days before the date of the meeting.

**FOR FURTHER INFORMATION CONTACT:** Martha F. Katz, Executive Secretary, Advisory Committee to the Director, CDC, 1600 Clifton Road, NE., Mailstop D-23, Atlanta, Georgia 30333, telephone 404/639-3243.

Dated: January 17, 1995.

**William H. Gimson,**

*Acting Associate Director for Policy Coordination, Centers for Disease Control and Prevention (CDC).*

[FR Doc. 95-1590 Filed 1-20-95; 8:45 am]

BILLING CODE 4163-18-M

**National Committee on Vital and Health Statistics (NCVHS), Subcommittee on Mental Health Statistics, and NCVHS Subcommittee on Disability and Long-Term Care Statistics; Meetings**

Pursuant to Pub. L. 92-463, the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC), announces the following subcommittee meetings.

*Name:* NCVHS Subcommittee on Mental Health Statistics.

*Time and Date:* 9 a.m.-12 noon, February 7, 1995.

*Place:* Room 303A-305A, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201.

*Status:* Open.

*Purpose:* The Subcommittee on Mental Health Statistics will review developments in managed care and assess their implications for enrollment and encounter data sets.

*Name:* NCVHS Subcommittee on Mental Health Statistics and NCVHS Subcommittee on Disability and Long-Term Care Statistics.

*Time and Date:* 1 p.m.-5 p.m., February 7, 1995.

*Place:* Room 303A-305A, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201.

*Status:* Open.

*Purpose:* The Subcommittee on Mental Health Statistics and the Subcommittee on Disability and Long-Term Care Statistics will meet jointly to consider disability and health care utilization items for enrollment and encounter data sets.

*Name:* NCVHS Subcommittee on Disability and Long-Term Care Statistics.

*Time and Date:* 9:30 a.m.-12:30 p.m., February 8, 1995.

*Place:* Room 303A-305A, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201.

*Status:* Open.

*Purpose:* The Subcommittee on Disability and Long-Term Care Statistics will receive

presentations from staff of the Agency for Health Care Policy and Research on long-term care data in the National Medical Expenditure Survey.

**FOR FURTHER INFORMATION CONTACT:** Substantive program information as well as summaries of the meeting and a roster of committee members may be obtained from Gail F. Fisher, Ph.D., Executive Secretary, NCVHS, NCHS, CDC, room 1100, Presidential Building, 6265 Belcrest Road, Hyattsville, Maryland 20782, telephone 301/436-7050.

Dated: January 17, 1995.

**William H. Gimson,**

*Acting Associate Director for Policy Coordination, Centers for Disease Control and Prevention (CDC).*

[FR Doc. 95-1589 Filed 1-20-95; 8:45 am]

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**Board of Scientific Counselors, National Institute for Occupational Safety and Health; Meeting**

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 committee meeting.

*Name:* Board of Scientific Counselors, National Institute for Occupational Safety and Health (BSC, NIOSH).

*Times and Dates:* 10 a.m.-4:30 p.m., February 7, 1995. 9 a.m.-3 p.m., February 8, 1995.

*Place:* The Washington Court Hotel, Ash Room, 525 New Jersey Avenue NW., Washington, DC 20001.

*Status:* Open to the public, limited only by space available.

*Purpose:* The board reviews research activities to provide guidance on the quality, timeliness, and efficacy of the Institute's programs.

*Matters To Be Discussed:* The agenda will include the NIOSH Director's report, along with a report from the Deputy Director; a legislative review; a review of recently funded extramural research programs; agricultural program review; construction program review; final disposition of research review and training review; toxicology review; and future activities of the Board of Scientific Counselors. Agenda items are subject to change as priorities dictate. This session will be opened to the public, being limited only by space available.

**FOR FURTHER INFORMATION CONTACT:** Richard A. Lemen, Ph.D., Executive Secretary, BSC, NIOSH, and Deputy Director, NIOSH, CDC, 1600 Clifton Road, NE., Mailstop D-35, Atlanta, Georgia 30333, telephone 404/639-3773.

Dated: January 17, 1995.

**William H. Gimson,**

*Acting Associate Director for Policy Coordination, Centers for Disease Control and Prevention (CDC).*

[FR Doc. 95-1697 Filed 1-20-95; 8:45 am]

BILLING CODE 4163-19-M

**Public Health Service**

**Food and Drug Administration Statement of Organization, Functions, and Delegations of Authority**

Part H, Chapter HF (Food and Drug Administration) of the Statement of Organization, Functions, and Delegations of Authority for the Department of Health and Human Services (35 FR 3685, February 25, 1970, and 56 FR 29484, June 27, 1991, as amended most recently in pertinent part 52 FR 34851, September 15, 1987) is amended to reflect an organizational change in the Food and Drug Administration (FDA).

The positions assigned to perform the centralized investigative activities located in the Division of Ethics and Program Integrity, Office of Management, Office of Management and Systems, FDA, will be transferred to the new Office of Internal Affairs within the Office of the Commissioner. The functions and staff associated with the activities will report directly to FDA's Deputy Commissioner/Senior Advisor in the Immediate Office of the Commissioner. Since these activities could involve investigations of alleged employee misconduct anywhere in the Agency and because of the importance of providing the FDA Commissioner with an early warning of any potential misconduct, the Deputy Commissioner/Senior Advisor to the Commissioner is the appropriate person to direct these activities. Functional statements of the newly established Office of Internal Affairs are identified below.

Under section HF-B, Organization:

1. Insert a new paragraph (a-5), *Office of Internal Affairs (HFA-G)* under the Office of the Commissioner (HFA) reading as follows:

Provides a centralized Agencywide investigative resource for the Commissioner, the Deputy Commissioners, and top Agency management.

Provides a centralized investigative liaison between FDA and the Office of the Inspector General (OIG).

Serves as an FDA investigative resource to conduct internal FDA investigations and to support OIG investigations.

Conducts special assignments relative to the functions of this Office as requested.

2. Delete subparagraph (h-7), *Division of Ethics and Program Integrity (HFA72)* in its entirety and insert a new subparagraph under the Office of Management and Systems (HFA6), Office of Management (HFA7) reading as follows:

(h-7) *Division of Ethics and Program Integrity (HFA72)*. Directs and coordinates a multidiscipline team of administrative and/or program specialists who conduct scheduled reviews of FDA Headquarters and field components to determine adherence to existing managerial policy and practices; assures that recommendations resulting from the review findings are implemented.

Directs FDA's personnel security program and provides professional leadership and authoritative guidance in these areas. Formulates policy and procedures necessary to maintain the integrity of privileged information submitted by industry.

Implements Internal Control Reviews in accordance with OMB guidelines.

Directs the formulation of FDA policies and procedures concerning conflicts of interest and employee associations with regulated industries, reviews financial interests including outside activities of FDA employees, decides conflict of interest issues, and counsels and trains employees on the avoidance of conflicts of interest.

Acts on FDA liaison with the Office of the Inspector General (OIG) regarding audits. Coordinates preparation of FDA responses to OIG audit findings, monitors implementation of FDA responses.

#### *Prior Delegations of Authority.*

Pending further delegations, directives, or orders by the Commissioner of Food and Drugs, all delegations of authority to positions of the affected organizations in effect prior to this date shall continue in effect in them or their successors.

Dated: January 5, 1995.

**Donna E. Shalala,**

*Secretary.*

[FR Doc. 95-1551 Filed 1-20-95; 8:45 am]

BILLING CODE 4160-01-M

## **Health Care Financing Administration** [ORD-070-N]

### **New and Pending Demonstration Project Proposals Submitted Pursuant to Section 1115(a) of the Social Security Act: November and December 1994**

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

**ACTION:** Notice.

**SUMMARY:** This notice lists new proposals for demonstration projects submitted to the Department of Health and Human Services during the months of November and December 1994 under the authority of section 1115 of the Social Security Act. This notice also lists proposals that have been submitted, approved, or disapproved since January 1993.

*Comments:* We will accept written comments on these proposals. We will, if feasible, acknowledge receipt of all comments, but we will not provide written responses to comments. We will, however, neither approve nor disapprove a proposal received after the publication of the Department of Health and Human Services' public notice guidelines in the **Federal Register** on September 27, 1994, for at least 30 days after publication of the notice of that proposal in the **Federal Register**, in order to allow time to receive and consider comments. Direct comments as indicated below.

**ADDRESSES:** Mail correspondence to: Susan Anderson, Office of Research and Demonstrations, Health Care Financing Administration, 2230 Oak Meadows, 6325 Security Boulevard, Baltimore, MD 21207.

**FOR FURTHER INFORMATION CONTACT:** Susan Anderson, (410) 966-5181.

#### **SUPPLEMENTARY INFORMATION:**

#### **I. Background**

Under Section 1115 of the Social Security Act (the Act), the Department of Health and Human Services (HHS) may consider and approve research and demonstration proposals with a broad range of policy objectives. These demonstrations can lead to improvements in achieving the purposes of the Act.

In exercising her discretionary authority, the Secretary has developed a number of policies and procedures for reviewing proposals. On September 27, 1994, we published a notice in the **Federal Register** (59 FR 49249) that specified (1) the principles that we ordinarily will consider when approving or disapproving

demonstration projects under the authority in section 1115(a) of the Act; (2) the procedures we expect States to use in involving the public in the development of proposed demonstration projects under section 1115; and (3) the procedures we ordinarily will follow in reviewing demonstration proposals. We are committed to a thorough and expeditious review of State requests to conduct such demonstrations.

#### **II. Listing of New and Pending Proposals for the Months of November and December 1994**

As part of our procedures, we are publishing a monthly notice in the **Federal Register** of all new and pending proposals. This notice contains proposals for the months of November and December 1994. This initial publication of information on section 1115 demonstration proposals lists all proposals submitted, approved or disapproved since January 1, 1993. Future notices will only list actions occurring in a single month, including new submissions, pending proposals, approvals, and disapprovals. Proposals submitted in response to a grant solicitation or other competitive process will be reported as received during the month that such grant or bid is awarded, so as to prevent interference with the awards process.

#### *A. Comprehensive Health Reform Programs*

##### 1. New Proposals

No new proposals were submitted during the months of November and December 1994.

##### 2. Pending Proposals

Demonstration Title/State: The Diamond State Health Plan—Delaware.

Description: Delaware proposes to expand eligibility for Medicaid to persons with incomes up to 100 percent of the Federal poverty level and require that the Medicaid population enroll in managed care delivery systems. The State's current section 1115 demonstration project, the Delaware Health Care Partnership for Children, would be incorporated into the statewide program as an optional provider for eligible children.

Date Received: July 29, 1994.

State Contact: Kay Holmes, DSHP Coordinator, DHSS Medicaid Unit, Biggs Building, P.O. Box 906, New Castle, Delaware 19720, (302) 577-4900.

Federal Project Officer: Rosana Hernandez, Health Care Financing Administration, Office of Research and Demonstrations, 2302 Oak Meadows, 6325 Security Boulevard, Baltimore, Maryland 21207.