

Agenda—Open public hearing.

Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Those desiring to make formal presentations should notify the contact person before October 16, 1995, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their comments.

Open committee discussion. The committee will review and provide comments on the draft protocol and questionnaire for the Department of Veterans Affairs, Army Chemical Corps Vietnam Veterans Health Study, developed by the Environmental and Epidemiology Service, Department of Veterans Affairs, Veterans Administration.

A final agenda will be available October 18, 1995, from the contact person.

FDA public advisory committee meetings may have as many as four separable portions: (1) An open public hearing, (2) an open committee discussion, (3) a closed presentation of data, and (4) a closed committee deliberation. Every advisory committee meeting shall have an open public hearing portion. Whether or not it also includes any of the other three portions will depend upon the specific meeting involved. There are no closed portions for the meetings announced in this notice. The dates and times reserved for the open portions of each committee meeting are listed above.

The open public hearing portion of each meeting shall be at least 1 hour long unless public participation does not last that long. It is emphasized, however, that the 1 hour time limit for an open public hearing represents a minimum rather than a maximum time for public participation, and an open public hearing may last for whatever longer period the committee chairperson determines will facilitate the committee's work.

Public hearings are subject to FDA's guideline (subpart C of 21 CFR part 10) concerning the policy and procedures for electronic media coverage of FDA's public administrative proceedings, including hearings before public advisory committees under 21 CFR part 14. Under 21 CFR 10.205, representatives of the electronic media may be permitted, subject to certain limitations, to videotape, film, or otherwise record FDA's public administrative proceedings, including presentations by participants.

Meetings of advisory committees shall be conducted, insofar as is practical, in accordance with the agenda published in this Federal Register notice. Changes in the agenda will be announced at the beginning of the open portion of a meeting.

Any interested person who wishes to be assured of the right to make an oral presentation at the open public hearing portion of a meeting shall inform the contact person listed above, either orally or in writing, prior to the meeting. Any person attending the hearing who does not in advance of the meeting request an opportunity to speak will be allowed to make an oral presentation at the hearing's conclusion, if time permits, at the chairperson's discretion.

The agenda, the questions to be addressed by the committee, and a current list of committee members will be available at the meeting location on the day of the meeting.

Transcripts of the open portion of the meeting may be requested in writing from the Freedom of Information Office (HFI-35), Food and Drug Administration, rm. 12A-16, 5600 Fishers Lane, Rockville, MD 20857, approximately 15 working days after the meeting, at a cost of 10 cents per page. The transcript may be viewed at the Dockets Management Branch (HFA-305), Food and Drug Administration, rm. 1-23, 12420 Parklawn Dr., Rockville, MD 20857, approximately 15 working days after the meeting, between the hours of 9 a.m. and 4 p.m., Monday through Friday. Summary minutes of the open portion of the meeting may be requested in writing from the Freedom of Information Office (address above) beginning approximately 90 days after the meeting.

This notice is issued under section 10(a)(1) and (2) of the Federal Advisory Committee Act (5 U.S.C. app. 2), and FDA's regulations (21 CFR part 14) on advisory committees.

Dated: September 25, 1995.
David A. Kessler,
Commissioner of Food and Drugs.
[FR Doc. 95-24219 Filed 9-28-95; 8:45 am]
BILLING CODE 4160-01-F

Health Care Financing Administration**Public Information Collection Requirements Submitted for Public Comment and Recommendations**

AGENCY: Health Care Financing Administration.

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 (HHS), is publishing the following summaries of proposed collections for public comment.

Type of Information Collection
Request: Extension; *Title of Information Collection:* Sole Community Home Health Agencies (HHA) at 42 CFR 424.22(b)(2),(f) and (g); *Form No.:* HCFA R-85; *Use:* These regulations implement the rules for participation of HHAs in Medicare and the establishment and review of plans of care for home health services. These regulations make it easier for certain HHAs to meet certification and plan of care requirements. *Frequency:* Annually; *Affected Public:* Business or other for-profit and not-for-profit institutions; *Number of Respondents:* 20; *Total Annual Hours:* 40.

To request copies of the proposed paperwork collections referenced above, call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections should be sent within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Financial and Human Resources, Management Planning and Analysis Staff, Attention: Louis Blank, Room C2-26-17, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: September 21, 1995.
Carl Bordone,
Acting Director, Management Planning and Analysis Staff, Office of Financial and Human Resources.
[FR Doc. 95-24133 Filed 9-28-95; 8:45 am]
BILLING CODE 4120-03-P

Indian Health Service**Availability of Funds for Loan Repayment Program for Repayment of Health Professions Educational Loans**

AGENCY: Indian Health Service, HHS.
ACTION: Notice.

SUMMARY: The Administration's budget request for fiscal year (FY) 1996 includes \$11,000,000 for the Indian Health Service Loan Repayment Program for health professions educational loans (undergraduate and graduate) in return for full-time clinical service in Indian health programs. It is anticipated that \$11,000,000 will be available to support approximately 250 competing awards averaging \$50,000 per award.

This program announcement is subject to the appropriation of funds.

This notice is being published early to coincide with the recruitment activity of the IHS which competes with other Government and private health management organizations to employ qualified health professionals. Funds are required to be expended by September 30 of the fiscal year. This program is authorized by Section 108 of the Indian Health Care Improvement Act as amended, 25 U.S.C. 1601 *et seq.* The IHS invites potential applicants to request an application for participation in the Loan Repayment Program.

DATES: Applications for the FY 1996 Loan Repayment Program will be accepted and evaluated monthly beginning 30 days after publication of this notice and will continue each month thereafter until all funds are exhausted. Subsequent monthly deadline dates are scheduled for Friday of the second full week of each month. Notice of awards will be mailed on the last working day of each month.

Applicants selected for participation in the FY 1996 program cycle will be expected to begin their service period no later than September 30, 1996.

Applications shall be considered as meeting the deadline if they are either:

1. Received on or before the deadline date; or
2. Sent on or before the deadline date. (Applicants should request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or the U.S. Postal Service. Private metered postmarks shall *not* be acceptable as proof of timely mailing.)

Applications received after the monthly closing date will be held for consideration in the next monthly funding cycle. Applicants who do not receive funding by September 30, 1996, will be notified in writing.

FORM TO BE USED FOR APPLICATION:

Applications will be accepted only if they are submitted on the form entitled "Application for the Indian Health Service Loan Repayment Program," identified with the Office of Management and Budget approval number of OMB #0917-0014 (expires 2/28/96).

ADDRESSES: Application materials may be obtained by calling or writing to the address below. In addition, completed applications should be returned to: IHS Loan Repayment Program, 12300 Twinbrook Parkway—Suite 100, Rockville, Maryland 20852, PH: 301/443-3396 (between 8 a.m. and 5 p.m. (EST) Monday through Friday, except Federal holidays).

FOR FURTHER INFORMATION CONTACT:

Please address inquiries to Mr. Charles Yepa, LRP Section Chief, IHS Loan Repayment Program, Twinbrook Metro Plaza—Suite 100, 12300 Twinbrook Parkway, Rockville, Maryland 20852, PH: 301/443-3396 (between 8 a.m. and 5 p.m. (EST) Monday through Friday, except Federal holidays).

SUPPLEMENTARY INFORMATION: Section 108 of the Indian Health Care Improvement Act as amended by Public Law 100-713 and 102-573, authorizes the IHS Loan Repayment Program and provides in pertinent part as follows:

The Secretary, acting through the Service, shall establish a program to be known as the Indian Health Service Loan Repayment Program (hereinafter referred to as the "Loan Repayment Program") in order to assure an adequate supply of trained health professionals necessary to maintain accreditation of, and provide health care services to Indians through, Indian health programs

"Health Profession" means family medicine, internal medicine, pediatrics, geriatric medicine, obstetrics and gynecology, podiatric medicine, nursing, public health nursing, dentistry, psychiatry, osteopathy, optometry, pharmacy, psychology, public health, social work, marriage and family therapy, chiropractic medicine, environmental health and engineering and allied health professions.

Osteopathic physicians (D.O.) may be funded regardless of specialty, provided that the IHS has a need for that specialty. Allopathic physicians (M.D.) may be funded only if they are board certified/eligible in family medicine, internal medicine, pediatrics, geriatric medicine, obstetrics and gynecology and psychiatry.

For the purpose of this program, the term "Indian health program" is defined in Section 108(a)(2)(A), as follows:

* * * any health program or facility funded, in whole or in part, by the IHS for the benefit of American Indians and Alaska Natives and administered:

- a. Directly by the service; or
- b. By any Indian tribe or tribal or Indian organization pursuant to a contract under:
 - (1) The Indian Self-Determination Act; or
 - (2) Section 23 of the Act of April 30, 1908, (25 U.S.C. 47), popularly known as the Buy Indian Act; or
 - (3) By an urban Indian organization pursuant to Title V of this act.

Applicants may sign contractual agreements with the Secretary for 2 years. The IHS will repay all or a portion of the applicant's health professions educational loans (undergraduate and graduate) for tuition expenses and reasonable educational and living expenses in amounts up to \$30,000 per year for each year of contracted service to be made in annual

payments to the participant for the purpose of repaying his/her outstanding health professions educational loans. Repayment of health professions educational loans will be made to the participant within 120 days after the participant's entry on duty has been confirmed by the IHS. The Secretary must approve the contract before the disbursement of loan repayments can be made to the participant.

Participants will be required to fulfill their contract service agreements through full-time clinical practice at an Indian health program site determined by the Secretary. Loan repayment sites are characterized by physical, cultural, and professional isolation, and have histories of frequent staff turnover. All Indian health program sites are annually prioritized by discipline, based on need or vacancy by the Agency.

All health professionals will receive up to \$30,000 per year, regardless of their length of contract. Where payments under the Loan Repayment Program result in an increase in Federal income tax liability, the IHS will pay up to 31 percent of the participant's total loan repayments to the Internal Revenue Service on the participant's behalf for all or part of the increased tax liability of the participant.

Pursuant to Section 108(b), to be eligible to participate in the Loan Repayment Program an individual must:

- (1) A. be enrolled:
 - (i) In a course of study or program in an accredited institution, as determined by the Secretary, within any state and be scheduled to complete such course of study in the same year such individual applies to participate in the Loan Repayment Program. (The Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, the Virgin Islands, Guam, American Samoa, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau); or
 - (ii) In an approved graduate training program in a health profession; or
- B. have a degree in a health profession and a license to practice; AND
- (2) A. be eligible for, or hold an appointment as a Commissioned Officer in the Regular or Reserve Corps of the Public Health Service, or
 - B. be eligible for selection for civilian service in the Regular or Reserve Corps of the Public Health Service; or
 - C. meet the professional standards for civil service employment in the IHS; or
 - D. be employed in an Indian health program without service obligation; AND

(3) submit to the Secretary an application and contract to the Loan Repayment Program; AND

(4) sign and submit to the Secretary, a written contract agreeing to accept repayment of educational loans and to serve for the applicable period of obligated service in a priority site as determined by the Secretary; AND

(5) sign an affidavit attesting to the fact that they have been informed of the relative merits of the U.S. Public Health Service Commissioned Corps and the Civil Service as employment options.

Upon approval of the applicant for participation in the Loan Repayment Program, the applicant will receive confirmation of his/her loan repayment award and the duty site at which he/she will serve his/her loan repayment obligation.

The IHS has identified the positions in each Indian health program for which there is a need or vacancy and ranked those positions in order of priority by developing discipline specific prioritized lists of sites. Ranking criteria for these sites include the following:

- Historically critical shortages caused by frequent staff turnover;
- Current unmatched vacancies in a Health Profession Discipline;
- Projected Vacancies in a Health Profession Discipline;
- Ensuring that the staffing needs of Indian health programs administered by an Indian tribe or tribal or health organization received consideration on an equal basis with programs that are administered directly by the Service; and

- Giving priority to vacancies in Indian health programs that have a need for health professionals to provide health care services as a result of individuals having breached Loan Repayment Program contracts entered into under this section. Consistent with this priority ranking, in determining which applications to approve and which contracts to accept, the IHS will give priority to applications made by American Indians and Alaska Natives and to individuals recruited through the efforts of Indian tribes or tribal or Indian organizations.

- With respect to priorities among the various health professions, the statute requires that of the total amount appropriated for Fiscal Year 1996 for loan repayment contracts, not less than 25 percent be provided to applicants who are nurses, nurse practitioners, or nurse midwives and not less than 10 percent be provided to applicants who are mental health professionals (other than nurses, nurse practitioners, or nurse midwives). This requirement does not apply if the number of applications

from these two groups, respectively, is not sufficient to meet the requirement.

- Subject to the above statutory priority for nurses and mental health practitioners, the IHS will give priority in funding among health professionals to physicians in the following priority specialties: anesthesiology, emergency room medicine, general surgery, obstetrics/gynecology, ophthalmology, orthopedic surgery, otolaryngology/otorhinolaryngol, psychiatry and radiology.

The following factors are equal in weight when applied, and are applied when all other criteria are equal and a selection must be made between applicants. One or all of the following factors may be applicable to an applicant, and the applicant who has the most of these factors, all other criteria equal, would be selected.

- An applicant's length of current employment in the IHS, tribal or urban program.
- Availability for service earlier than other applicants (first come, first served); and
- Date the individual's application was received.

Any individual who enters this program and satisfactorily completes his or her obligated period of service may apply to extend the contract on a year-by-year basis as determined by the IHS, at the maximum amount of up to \$30,000 per year and an additional 31 percent for Federal Withholding. If funds available, the maximum amount will be funded in this manner and will not exceed the total of the individual's outstanding eligible health professions educational loans.

Any individual who owes an obligation for health professional service to the Federal Government or to a State or other entity under an agreement with such State or other entity is not eligible for the Loan Repayment Program unless such an obligation will be completely satisfied prior to the beginning of service under this program in the year that an application is made for this program.

This program is not subject to review under Executive Order 12372.

The Catalog of Federal Domestic Assistance number is 93.164.

Dated: September 20, 1995.

Michel E. Lincoln,

Acting Director.

[FR Doc. 95-24221 Filed 9-28-95; 8:45 am]

BILLING CODE 4160-16-M

National Institutes of Health

Notice of a Meeting of the Office of AIDS Research Advisory Council (OARAC)

Pursuant to Public Law 92-463, notice is hereby given of the meeting of the Office of AIDS Research Advisory Council (OARAC) on October 19, 1995, at the National Institutes of Health (NIH), Bethesda, Maryland. The meeting will take place on October 19 from 8:30 am to 5:00 pm, in Building 31, C Wing, Sixth Floor, Conference Room 10. The meeting will be open to the public.

The purpose of the first OARAC meeting will be to introduce and welcome new council members and further familiarize them with the NIH AIDS research program. The meeting will include a presentation on the Office of AIDS Research (OAR) structure and function, and an overview of the NIH AIDS research effort in the five areas of AIDS research: Natural History, Epidemiology, and Prevention Research; Etiology and Pathogenesis; Behavioral Research; Vaccine Research and Development; and Therapeutics. There will be discussions on the NIH AIDS Research Program Evaluation; a review of the OAR Emergency Discretionary Fund and discussions on a proposal for new ways for making the best use of these funds.

Jeannette R. De Lawter, Program Analyst, Office of AIDS Research, National Institutes of Health, Building 31, Room 4B54, 9000 Rockville Pike, Bethesda, MD 20892, Phone (301) 402-3357, Fax (301) 402-3360, will furnish the meeting agenda and roster of committee members upon request. Any individual who requires special assistance, such as sign language interpretation or other reasonable accommodations, should contact Mrs. De Lawter at the above location no later than October 13.

Dated: September 22, 1995.

Margery G. Grubb,

Senior Committee Management Specialist.

[FR Doc. 95-24323 Filed 9-28-95; 8:45 am]

BILLING CODE 4140-01-M

Notice of Meeting

Notice is hereby given of the meeting of the NIH AIDS Research Program Evaluation Working Group Area Review Panel on Natural History, Epidemiology, and Prevention Research on October 17, 1995 from 1 pm to 5 pm at the Holiday Inn Bethesda, 8120 Wisconsin Avenue, Bethesda, Maryland. The meeting will be open to the public from 2 pm to 5