DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Agency Information Collection Activities: Proposed Collection; Comment Request]

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, 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: Community Mental Health Center Site Visit Assessment Tool and Supporting Regulations in 42 CFR 410.2; Form No.: HCFA-R-0273 (OMB No. 0938-0770); Use: This information collection tool is essential for the Health Care Financing Administration (HCFA) to ensure that existing Community Mental Health Centers (CMHC), as well as CMHC applicants to the Medicare program are in compliance with Medicare provider requirements, as well as all applicable Federal and State requirements. The collection tool will be completed and used by HCFA and/or its contractors to collect patient records, other CMHC operational information, and to verify CMHC compliance as determined by the HCFA regional office. CMHCs will be required to sign the completed form, provide medical records, and other operational information to be copied by the HCFA contractor representative on-site at the CMHC during the site visit; Frequency: Upon initial application or re-enrollment into the Medicare program; Affected Public: Business or other for profit, Not for profit institutions, and State, Local, or Tribal Government; Number of Respondents: 850; Total Annual Responses: 850; Total Annual Hours: 3,400.

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 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards, Attention: Louis Blank, Room N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.


John P. Burke III,
HCFA Reports Clearance Officer, HCFA Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

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

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a list of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (301) 443-7978.

2000 National Household Survey on Drug Abuse—(0930-0110, Revision)

The National Household Survey on Drug Abuse (NHSDA) is a survey of the civilian, noninstitutionalized population of the United States 12 years old and older. The data are used to determine the prevalence of use of tobacco products, alcohol, illicit substances, and illicit use of prescription drugs. The results are used by SAMHSA, ONDCP, Federal government agencies, and other organizations and researchers to establish policy, direct program activities, and better allocate resources. For the 2000 NHSDA, additional questions in the following substantive areas are planned: mental health; mental health service utilization; industry and occupation; youth access to tobacco products and the cost of the last cigarettes purchased for adults as well as youth; and, substance abuse and treatment need. The remaining modular components of the NHSDA questionnaire will remain essentially unchanged except for minor modifications to wording and selective elimination of sufficient questions to allow for the additional burden of the questions and modules listed above.

As in 1999, the sample size of the survey for 2000 will be sufficient to permit prevalence estimates for each of the fifty states and the District of Columbia. The total annual burden estimate is 81,626 hours as shown below:

<table>
<thead>
<tr>
<th>Household Screener</th>
<th>Number of Respondents</th>
<th>Responses per respondent</th>
<th>Average burden per respondent (hrs.)</th>
<th>Total burden hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>210,000</td>
<td>1</td>
<td>0.050</td>
<td>10,500</td>
</tr>
<tr>
<td>NHSDA Questionnaire and interview verification</td>
<td>70,000</td>
<td>1</td>
<td>1.016</td>
<td>71,126</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td><strong>81,626</strong></td>
</tr>
</tbody>
</table>