Provides leadership within HRSA for the coordination of and support for international health in coordinating policy development with other Departmental agencies; (2) provides technical and other support to HRSA components as they interface with Departmental international health activities; (3) develops working relationships with private sector providers and HRSA grantees to assure mutual areas of cooperation, maximization of expertise and coordination as it relates to international health (4) advises the HRSA Administrator on strategies to maximize the participation of the Agency and its Bureaus in international health programs and activities; (5) works with foundations, private agencies and other Federal, State, and local agencies for the effective development of policies and resources relating to health care for vulnerable populations world-wide; and (6) coordinates international travel and visitor programs within the jurisdiction of HRSA.

D. Change the name of the Center for Managed Care to the Center for Health Services Financing and Managed Care. The functions for this organization have not changed.

Delegations 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 redelegation.

Dated: January 17, 2001.

This reorganization is effective upon date of signature.

Claude Earl Fox,

Administrator.

[FR Doc. 01–2585 Filed 1–30–01; 8:45 am]

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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 65 FR 70358–9, dated November 22, 2000).

This notice reflects the functional changes in the Division of Interdisciplinary and Community Based Programs (RPE), and the Division of Public Health and Allied Health (RPB), Bureau of Health Professions (RP).

Make the following changes:

1. Delete the functional statement for the Division of Interdisciplinary and Community Based Programs in its entirety and replace with the following:

Division of Interdisciplinary and Community Based Programs (RPE)

Serves as the principal focal point for specialized DHHS interagency projects, HRSA initiatives and Bureau of Health Professions interdivisional activities. Specifically: (1) Promotes, designs, supports and administers activities relating to the planning and development of nationally integrated health professions education programs; (2) administers special projects of the Office of the Secretary, such as the primary Care Policy Fellowship Program and the Secretary's Award Program for Innovations in Health Promotion and Disease Prevention; (3) promotes, plans and develops collaborative, interdisciplinary activities in the speciality areas of behavioral/mental health, rural health, geriatrics and the associated health professions, including veterinary medicine, optometry, and pharmacy; allied health professions, including physical therapy, occupational therapy, medical technology, dental hygiene, respiratory therapy, radiography, radiation therapy, emergency medical technicians, and a long list of similar professionals; chiropractic health care; social workers, especially in medical settings; clinical psychology; mental health workers; and other new and developing health disciplines; (4) promotes quality improvement in health professions education through collaboration and partnerships with national and international institutes and centers for quality improvement; (5) promotes and supports academic-community partnerships whose goal is the development of interdisciplinary, community-based programs designed to improve access to health care through improving the quality of health professions education and training; (6) collaborates with relevant offices of the Bureau, HRSA and the Department; and (7) maintains liaison with related professional groups, foundations, and other private and government organizations as needed.

2. Abolish the Division of Public Health and Allied Health. These functions are being redistributed within the bureau.

Delegations 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: January 7, 2001.

Claude Earl Fox,

Administrator.

[FR Doc. 01–2587 Filed 1–30–01; 8:45 am]

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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 65 FR 70358–9, dated November 22, 2000).

This notice reflects the functional changes in the Division of Vaccine Injury Compensation (RP9), Bureau of Health Professions (RP).

Delete the functional statement for the Division of Vaccine Injury Compensation in its entirety and replace with the following:

The Division of Vaccine Injury Compensation (RP9) (DVIC), on behalf of the Secretary of Health and Human Services (HHS), administers all statutory authorities related to the operation of the National Vaccine Injury Compensation Program (VICP) by the (1) evaluation of petitions for compensation filed under the VICP through medical review and assessment of compensability for all complete claims; (2) processing of awards for compensation made under the VICP; (3) promulgation of regulations to revise the Vaccine Injury Table; (4) provision of professional and administrative support to the Advisory Commission on Childhood Vaccines (ACCV); (5) development and maintenance of all automated information systems necessary for program implementation; (6) provision and dissemination of program information; (7) promotion of safer childhood vaccines; and (8) maintains a working relationship with other Federal and private sector partners