and maintains liaison with general public, professional and citizen organizations and public interest groups on a nationwide basis; (3) facilities activities that impact upon the delivery of health care on a national basis; (4) speaks for the Administrator in public meetings and conferences; (5) provides communications assistance to the Agency; writes and prepares speeches for the Administrator, (6) serves as the Agency focal point for women's health (7) serves as the principal advisor for Agency-supported program activities that address women's health and for policy issues internal to and external to the Agency related to the health of women; (8) oversees the coordination and resolution of program and policy issues related to women's health; (9) collects and consolidates data and prepares Agency-level reports, planning and briefing documents on ongoing women's health activities and related accomplishments; (10) identifies and negotiates collaborative women's health efforts within the Agency, PHS, Department and external components; (11) represents the Agency in Departmental, regional, State and National women's health deliberations; chairs and provides support to the HRSA Coordinating Committee on Women's health; (12) services as Federal women's health liaison and resource and assures equity to women in their access to education and training resources and to health/science careers: and (13) coordinates the

implementation of Freedom of Information Act for the Agency.

B. Establish within the Office of External Affairs the Division of Communications and Public Affairs (HBA52)—(1) provides communication and public affairs expertise and staff advice and support to the Administrator in program and policy formulations and execution consistent with policy direction established by the Assistant Secretary (Public Affairs); (2) develops and implements policies related to external media relations and internal employee communications; (3) establishes and implements procedures for the development, review, processing, quality control, and dissemination of Administration communications materials; (4) serves as Communications and Public Affairs Officer for the Administrator including establishment and maintenance of productive relationships and with communications media; (5) provides central communications service to all Administration programs; and (6) serves as focal point for coordination of Administration communications activities with those of other health agencies within the Department of Health and Human Services and with field, State, local, voluntary and professional organizations.

C. In the statement for the "Office of Operations and Management (HBA4), delete item number (4) in its entirety and renumber the remaining items in sequential order.

Section HB-30 Delegations of Authority. All delegations and redelegations of authority to Offices affected by this reorganization which were in effect immediately prior to the effective date of this reorganization will continue in effect in them or their successors pending further redelegation.

This reorganization is effective upon date of signature.

Dated: May 6, 1996. Ciro V. Sumaya, *Administrator.*

[FR Doc. 96–12362 Filed 5–16–95; 8:45 am] BILLING CODE 4160–15–M

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Integrated Review Schedule. *OMB No.:* 0970–0035.

Description: State agencies are required to perform quality control reviews for the AFDC, Food Stamp, and Adult Assistance Programs. The Integrated Review Schedule is jointly designed and used by ACF and FCS. The schedule serves as the comprehensive data entry form for all active quality control reviews in these programs.

Respondents: State Governments.

ANNUAL BURDEN ESTIMATES

Instrument	No. of re- spondents	No. of re- sponses per respondent	Average bur- den hours per response	Total burden hours
ACF-4357	55,000	1	1	55,000

Estimated Total Annual Burden Hours: 55,000.

In compliance with the requirements of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Information Services, Division of Information Resources Management Services, 370 L'Enfant Promenade, SW., Washington, DC. 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by title.

In addition, requests for copies may be made and comments forwarded to the Resorts Clearance Officer over the Internet by sending message to rkatson@acf.dhhs.gov. Internet message must be submitted as an ASCII file without special characters or encryption.

The Department specifically requests comments on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the

burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: May 13, 1996.

Larry Guerrero,

Director, Office of Information Systems

Services.

[FR Doc. 96-12462 Filed 5-16-96; 8:45 am]

BILLING CODE 4184-01-M

Health Care Financing Administration

[BPD-868-NC]

Medicare and Medicaid Programs; Announcement of Applications From Hospitals Requesting Waivers for Organ Procurement Service Area

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Notice with comment period.

SUMMARY: This notice announces applications which HCFA has received since December 1, 1995, from hospitals requesting waivers from dealing with their designated area organ procurement organizations (OPOs) in accordance with section 1138(a)(2) of the Social Security Act. It supplements a notice published in the Federal Register on January 19, 1996, that announced hospital waiver requests received by HCFA as of December 1, 1995. Effective January 1, 1996, a hospital is required to have an agreement with the OPO designated for the area in which it is located unless HCFA grants it a waiver to have an agreement with an alternative, out-of-area OPO. This notice requests comments from OPOs and the general public for our consideration in determining whether such a waiver should be granted.

DATES: Written comments will be considered if we receive them at the appropriate address, as provided below, no later than 5:00 p.m. on July 16, 1996.

ADDRESSES: Mail written comments (one original and three copies) to the following address: Health Care Financing Administration, Department of Health and Human Services, Attention: BPD–868–NC, P.O. Box 7517, Baltimore, MD 21244–0517.

If you prefer, you may deliver your written comments (one original and three copies) to one of the following addresses:

Room 309–G, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201, or Room C5–09–26, 7500 Security Boulevard, Baltimore, MD 21244– 1850.

Because of staffing and resource limitations, we cannot accept comments by facsimile (FAX) transmission. In commenting, please refer to file code BPD–868–NC. Comments received timely will be available for public inspection as they are received, generally beginning approximately 3 weeks after publication of a document, in Room 309–G of the Department's offices at 200 Independence Avenue SW., Washington, DC, on Monday

through Friday of each week from 8:30 a.m. to 5 p.m. (phone: (202) 690–7890). FOR FURTHER INFORMATION CONTACT: Mark A. Horney (410) 786–4554.

SUPPLEMENTARY INFORMATION:

I. Background

Section 1138(a)(1)(A)(iii) of the Social Security Act (the Act) provides that a hospital or rural primary care hospital that participates in the Medicare or Medicaid programs must establish written protocols for the identification of potential organ donors. Section 155 of the Social Security Act Amendments of 1994 (SSA '94) (Public Law 103-432) amended section 1138 of the Act to require that effective January 1, 1996, a hospital must notify the organ procurement organization (OPO) designated for the service area in which it is located of potential organ donors (sections 1138 (a)(1)(A)(iii) and (a)(3)(B) of the Act). It must also have an agreement to do so only with that designated OPO (sections 1138 (a)(1)(C) and (a)(3)(A).

The statute also provides that the hospital may obtain a waiver of these requirements from the Secretary. A waiver would allow the hospital to have an agreement with an "out-of-area" OPO (section 1138(a)(2)) if it meets conditions specified in the statute (section 1138(a)(2)(A) (i) and (ii)).

The law further states that in granting a waiver, the Secretary must determine that such a waiver: (1) Would be expected to increase donation; and (2) will assure equitable treatment of patients referred for transplants within the service area served by the designated OPO and within the service area served by the out-of-area OPO (section 1138(a)(2)(A)). In making a waiver determination, the Secretary may consider, among other factors: (1) Cost effectiveness; (2) improvements in quality; (3) whether there has been any change in a hospital's designated OPO service area due to the definition of metropolitan statistical areas (MSAs); and (4) the length and continuity of a hospital's relationship with the out-ofarea OPO (section 1138(a)(2)(B)). Under section 1138(a)(2)(D) of the Act, the Secretary is required to publish a notice of any waiver applications within 30 days of receiving the application and offer interested parties an opportunity to comment in writing within 60 days of the published notice. Section 155(a)(2) of SSA '94 provides that any hospital that had an agreement with an out-ofarea OPO on the date of enactment of that legislation, October 31, 1994, may obtain a temporary or interim waiver of the requirements of sections 1138

(a)(1)(A)(iii) and (a)(1)(C). The statute requires that the hospital must have submitted a waiver request to the Secretary by January 1, 1996. The statute specifically provides that the hospital's existing agreement with the out-of-area OPO would remain in effect pending the Secretary's final determination under section 1138(a)(2) as to whether the hospital should be granted a permanent waiver.

For hospitals that do not meet these conditions, but that entered into agreements with out-of-area OPOs prior to January 1996, we have established a similar process. Under our section 1138(a)(2) authority to grant waivers if statutory conditions are met, we will make a preliminary determination as to whether the hospital's request meets the requirements of section 1138(a)(2)(A) (i) and (ii) based upon an initial review of its waiver request. If we determine that the hospital appears preliminarily to meet those standards, we will grant the hospital a temporary, interim waiver while we consider further the merits of the hospital's waiver request on a permanent basis. In the meantime, the hospital may continue its relationship with the OPO with which it has an agreement.

II. Hospital Requests for Waiver

In October 1995, we issued a Program Memorandum (Transmittal No. A–95–11) that has been supplied to each hospital. This Program Memorandum detailed the waiver process and discussed the information that may be provided by hospitals requesting a waiver. We indicated that upon receipt of the waiver requests, we would publish a Federal Register notice to solicit public comments, as required by law (section 1138(a)(2)(D)).

We will then review the requests and comments received. During the review process, we may consult on an asneeded basis with agencies outside HCFA, including the Public Health Service's Division of Transplantation, the United Network for Organ Sharing, and HCFA regional offices. If necessary, we may request additional clarifying information from the applying hospital or others. We then will make a final determination on the waiver requests and notify the affected hospitals and OPOs.

III. Hospitals That Requested Waivers

On January 19, 1996, we published in the Federal Register (61 FR 1389) a notice that announced the waiver applications that we had initially received from hospitals. The January 1996 notice listed eight hospitals that had agreements on October 31, 1994, whose waiver requests had been received by December 1, 1995.

This notice supplements the January 1996 notice. It announces an additional 148 hospital waiver requests that we have received. The hospitals whose waiver applications were received after

December 1, 1995 are listed below

under three distinct groups.

The Group I listing includes the hospitals that submitted waiver requests after December 1, 1995 and that had agreements with the requested out-ofarea OPO on or before October 31, 1994.

This listing includes 132 hospitals that requested waivers, by the name of the facility, the city and state location of the facility, the requested out-of-area OPO, and the currently designated area OPO.

GROUP I

Name of facility	City	State	Requested OPO ¹	Designated OPO ¹
White River Medical Center	Batesville	AR	AROR	MOMA
Corona Regional Medical Center	Corona	CA	CARO	CAOP
Sierra View District Hospital	Porterville	CA	CADN	CAOP
Mark Twain St. Joseph's Hospital	San Andreas	CA	CAGS	CADN
Cedars-Sinai Medical Center	Los Angeles	CA	CAOP	CARO
Kaweah Delta Health Care District	Visalia	CA	CADN	CAOP
Tulare District Hospital	Tulare	CA	CADN	CAOP
Lindsay District Hospital	Lindsay	CA	CADN	CAOP
Alta District Hospital	Dinuba	CA	CADN	CAOP
Sharp HealthCare Murrieta	Murrieta	CA	CASD	CAOP
Sierra Valley District Hospital	Loyalton	CA	CAGS	CADN
Colusa Community Hospital	Colusa	CA	CAGS	(2)
Sutter Solano Medical Center	Vallejo	CA	CAGS	CADN
Summit Medical Center	Oakland	CA	CAGS	CADN
Indian Valley Hospital District	Greenville	CA	CAGS	CADN
Barstow Community Hospital	Barstow	CA	CARO	CAOP
Bear Valley Community Hospital	Big Bear Lake	CA	CARO	CAOP
Chino Valley Medical Center	Chino	CA	CARO	CAOP
Community Hospital of San Bernadino	San Bernadino	CA	CARO	CAOP
Corona Regional Medial Center	Corona	CA	CARO	CAOP
Desert Hospital	Palm Springs	CA	CARO	CAOP
	Victorville	CA	CARO	CAOP
Desert Valley Hospital Eisenhower Memorial Hospital		_	CARO	CAOP
·	Rancho Mirage	CA	CARO	
Hi-Desert Medical Center	Joshua Tree	CA		CAOP
Kaiser Foundation Hospitals	Riverside	CA	CARO CARO	CAOP
Kaiser Foundation Hospitals	Fontana	CA		CAOP
Mountains Community Hospital	Lake Arrowhead	CA	CARO	CAOP
Parkview Community Hospital Medical Center	Riverside	CA	CARO	CAOP
Ridgecrest Community Hospital	Ridgecrest	CA	CARO	CAOP
Riverside Community Hospital	Riverside	CA	CARO	CAOP
San Antonio Community Hospital	Upland	CA	CARO	CAOP
St. Bernardine Medical Center	San Bernardino	CA	CARO	CAOP
St. Mary Regional Medical Center	Apple Valley	CA	CARO	CAOP
Valley Health System	Hemet	CA	CARO	CAOP
Victor Valley Community Hospital	Victorville	CA	CARO	CAOP
Antelope Valley Hospital	Lancaster	CA	CAOP	CARO
Bellwood General Hospital	Bellflower	CA	CAOP	CARO
Beverly Hospital	Montebello	CA	CAOP	CARO
Brotman Medical Center	Culver City	CA	CAOP	CARO
California Hospital Medical Center	Los Angeles	CA	CAOP	CARO
Century City Hospital	Los Angeles	CA	CAOP	CARO
Charter Community Hospital	Hawaiian Gardens	CA	CAOP	CARO
Childrens Hospital	Los Angeles	CA	CAOP	CARO
Daniel Freeman Marina Hospital	Marina del Rey	CA	CAOP	CARO
Daniel Freeman Memorial Hospital	Inglewood	CA	CAOP	CARO
Desert Palms Community Hospital	Palmdale	CA	CAOP	CARO
Doctors Hospital of West Covina	West Covina	CA	CAOP	CARO
Garfield Medical Center	Monterey Park	CA	CAOP	CARO
Henry Mayo Newhall Memorial Hospital	Valencia	CA	CAOP	CARO
High Desert Hospital	Lancaster	CA	CAOP	CARO
Huntington East Valley Hospital	Glendora	CA	CAOP	CARO
Lakewood Regional Medical Center	Lakewood	CA	CAOP	CARO
Lancaster Community Hospital	Lancaster	CA	CAOP	CARO
Lincoln Hospital	Los Angeles	CA	CAOP	CARO
Little Company of Mary Hospital	Torrance	CA	CAOP	CARO
Long Beach Memorial Medical Center/Miller Childrens Hospital	Long Beach	CA	CAOP	CARO
Monterey Park Hospital	Monterey Park	CA	CAOP	CARO
Orthopaedic Hospital	Los Angeles	CA	CAOP	CARO
Pacific Alliance Medical Center	Los Angeles	CA	CAOP	CARO
Pacific Hospital of Long Beach	Long Beach	CA	CAOP	CARO
Pioneer Hospital	Artesia	CA	CAOP	CARO
Presbyterian Intercommunity Hospital	Whittier	CA	CAOP	CARO
r roopy to harr into roominanty ricopital				

GROUP I—Continued

Name of facility	City	State	Requested OPO 1	Designated OPO ¹
Santa Marta Hospital	Los Angeles	CA	CAOP	CARO
St. Francis Medical Center		CA	CAOP	CARO
St. Joseph Medical Center	Burbank	CA	CAOP	CARO
St. Vincent Medical Center	Los Angeles	CA	CAOP	CARO
Temple Community Hospital	Los Angeles	CA	CAOP	CARO
USC University Hospital	1	CA	CAOP	CARO
White Memorial Medical Center		CA	CAOP	CARO
Woodruff Community Hospital		CA	CAOP	CARO
Day Kimball Hospital	_	CT	CTHH	MAOB
Windham Hospital		CT	CTHH	MAOB
Veterans Memorial Medical Center			CTHH	MAOB
		CT		_
Martin Memorial Medical Center, Inc.	1	FL	FLWC	FLMP
Hendry General Hospital		FL	FLSW	FLMP
Phoebe Putney Memorial Hospital		GA	GALL	GAMC
Palmyra Medical Centers	1	GA	GALL	GAMC
St. Francis Hospital		GA	GALL	ALOB
Meadows Regional Medical Center	Vidalia	GA	GALL	GAMC
Doctors Hospital	Columbus	GA	GALL	ALOB
Hughston Sports Medicine Hospital	Columbus	GA	GALL	ALOB
The Medical Center, Inc.	Columbus	GA	GALL	ALOB
Athens Regional Medical Center		GA	GALL	GAMC
Davenport Medical Center		IA	IAOP	ILIP
Genesis Medical Center		IA	IAOP	ILIP
Jennie Edmundson Memorial Hospital		IA	IAOP	NEOR
·	1	IL IL	WIUW	ILIP
Swedish American Hospital				
Saint Anthony Medical Center		IL.	WIUW	ILIP
Porter Memorial Hospital	1 - '	IN	INOP	ILIP
Franklin Medical Center		MA	CTHH	MAOB
Mary Lane Hospital		MA	CTHH	MAOB
Baystate Medical Center		MA	CTHH	MAOB
Calvert Memorial Hospital	Prince Frederick	MD	MDPC	DCTC
Union Hospital	Elkton	MD	MDPC	PADV
Frederick Memorial Hospital	Frederick	MD	MDPC	DCTC
Marguette General Hospital		MI	WIUW	MIOP
Lester E. Cox Medical Center	1	MO	MOMA	MWOB
St. John's Regional Health Center		MO	MOMA	MWOB
Skaggs Community Health Center		MO	MOMA	MWOB
Warren Hospital		NJ	NJTO	PADV
Our Lady of Lourdes Medical Center		NJ	NJTO	PADV
Cooper Hospital/University Medical Center		NJ	NJTO	PADV
Saint Mary's Regional Medical Center				NVLV
		NV	CADN	
Washoe Health System		NV	CADN	NVLV
Arnot Ogden Medical Center		NY	NYFL	PATF
Hempstead General Hospital Medical Center		NY	NYRT	NYSB
Long Beach Medical Center		NY	NYRT	NYSB
St. Francis Hospital	Roslyn	NY	NYRT	NYSB
North Shore University Hospital	Manhassett	NY	NYRT	NYSB
Hardin Memorial Hospital	Kenton	OH	OHLP	OHLC
Mercy Hospital	Willard	ОН	OHLP	OHLB
Mercy Medical Center		ОН	OHLP	OHLC
Hood General Hospital	, , ,	TX	TXGC	TXSB
St. Michael Health Care Center	,	TX	AROR	TXSB
Darnall Army Community Hospital		TX	TXSA	TXSB
Metroplex Hospital		TX	TXSA	TXSB
Parkview Regional Hospital		TX	TXGC	TXSB
Harris Methodist Erath County Hospital		TX	TXGC	TXSB
Hamilton General Hospital		TX	TXGC	TXSB
Palo Pinto General Hospital	Mineral Wells	TX	TXGC	TXSB
Glen Rose Medical Center	Glen Rose	TX	TXGC	TXSB
Decatur Community Hospital	Decatur	TX	TXGC	TXSB
Silsbee Doctors Hospital		TX	TXGC	TXSB
Nan Travis Memorial Hospital		TX	TXGC	TXSB
Memorial Medical Center	I	TX	TXGC	TXSB
		VA	TNET	VAOP
Clinch Valley Medical Center				
Luther/Midelfort Mayo Health System		WI	MNOP	WIUW
Door County Memorial Hospital	1	WI	WISE	WIUW
Appleton Medical Center		WI	WIUW	WISE
Potomac Valley Hospital	Keyser	WV	PATF	MDPC
Weirton Medical Center	Weirton	WV	PATF	OHLP

¹ See Section IV of this notice for keys to the OPO codes and the addresses of the OPOs.

² Area not designated.

The Group II listing includes the 11 hospitals that submitted waiver applications after December 1, 1995, and that did not have agreements with the requested out-of-area OPOs on October 31, 1994, but did enter into agreements with the requested OPOs prior to January 1, 1996. We are granting the 11 hospitals included in the Group II listing "interim waivers" pending receipt of public comments and our complete review of those comments.

Section 1138(a)(2)(A) of the Act requires that a waiver can be granted only if it is expected to increase donations and equitable treatment of patients referred for transplant within the service area served by the hospital's designated OPO and within the service area served by the OPO with which the hospital seeks to have an agreement under the waiver. These 11 hospitals requesting waiver have asserted that they meet these standards and have provided specific information to support their claims. We have determined on initial review that these hospitals satisfy the statutory criteria for waiver. We have also determined that to force these hospitals to change from their existing OPO arrangements to their designated OPO during our full consideration of the waiver request could disrupt services provided by hospitals and OPOs, impairing their working relationships, and ultimately possibly eroding the supply of organs for the growing list of people awaiting transplant. In accordance with section 1138(a)(2)(D) of the Act, we are publishing a listing of these providers' requests for waiver and are requesting comments on the requests for waiver before making a final determination.

GROUP II

Name of facility	City	State	Requested OPO 1	Designated OPO ¹
Community Hospital of Sonoma County Santa Rose Memorial Hospital New Milford Hospital Noble Hospital Citizens Memorial Hospital Springfield Community Hospital and Clinic Lima Memorial Hospital St. Rita's Medical Center War Memorial Hospital	Santa Rosa New Milford Westfield Bolivar Springfield Lima Lima	CA CA CT MA MO MO OH OH	CAGS CAGS CTHH CTHH MOMA MOMA OHLP OHLP VAOP	CADN CADN NYRT MAOB MWOB MWOB OHLC OHLC PATF
Carson-Tahoe Hospital		NV WV	CADN OHLP	NVLV PATF

¹ See Section IV of this notice for keys to the OPO codes and the addresses of the OPOs.

The Group III listing includes the five hospitals that submitted waiver applications after December 1, 1995, and that did not enter an agreement with the requested OPOs, but are desirous of changing OPOs. The five hospitals in the Group III listing did not have agreements on October 31, 1994, nor did they enter into an agreement by January 1, 1996. These hospitals have submitted requests for change on a prospective basis. Upon receipt of public comments and our review of the comments, HCFA will make a determination of each hospital's request. Any approval of these requests will be prospective. The hospitals have already been informed that their waivers approvals, if granted, will be on a prospective basis.

GROUP III

Name of facility	City	State	Requested OPO ¹	Designated OPO ¹
VacaValley Hospital NorthBay Medical Center St. Joseph Hospital Redwood Memorial Hospital Rockford Memorial Hospital	Fairfield	CA CA CA CA IL	CAGS CAGS CAGS CAGS WIUW	CADN CADN CADN CADN ILIP

¹ See Section IV of this notice for keys to the OPO codes, and the addresses of the OPOs.

IV. Keys to the OPO Codes

The keys to the acronyms used in the Group I, II and III listings to identify OPOs and the OPOs' addresses are as follows:

OPO code	OPO name and address		
ALOB	ALABAMA ORGAN 301 South 20th S 1001, Birmingham,	treet, Suite	
AROR	ARKANSAS ORGAN RECOVE CY, 1100 N. Unive 200, Little Rock, AF	RY AGEN- ersity, Suite	

OPO code	OPO name and address
AZOB	DONOR NETWORK OF ARI- ZONA, 3877 North Seventh
CADN	Street, Phoenix, AZ 85014. CALIFORNIA TRANSPLANT DONOR NETWORK, 55 Francisco Street, Suite 510, San Francisco, CA 94133–2115.
CAGS	GOLDEN STATE TRANSPLANT SERVICES, 1760 Creekside Oaks Drive, Suite 160, Sac- ramento, CA 95833.

OPO code	OPO name and address		
CAOP	SOUTHERN CALIFORNIA ORGAN PROCUREMENT CENTER, 2100 W. 3rd Street, Suite 350, Los Angeles, CA 90057.		
CARO	REGIONAL ORGAN PRO- CUREMENT AGENCY OF SOUTHERN CALIFORNIA, 10920 Wiltshire Blvd., Suite 910, Los Angeles, CA 90024– 6511.		

OPO code	OPO name and address	OPO code	OPO name and address	OPO code	OPO name and address
CASD	SITION CENTER OF SOUTH- ERN CALIFORNIA, 3500 Fifth	MIOP			Blvd., Suite 350, Cleveland, OH 44122.
CORS	Avenue, Suite 203, San Diego, CA 92103. COLORADO ORGAN RECOV-	MNOP	LIFESOLIRCE LIPPER MID-		LIFE CONNECTION OF OHIO, 1545 Holland Road, Suite C, Maumme, OH 43537.
	ERY SYSTEMS, INC., 3773 Cherry Creek North Drive, Suite 601, Denver, CO 80209.		MENT ORGANIZATION, INC.,	OHLP	LIFELINE OF OHIO, 770 Kinnear Road, Suite 200, Columbus, OH 43212.
CTHH	NORTHEAST OPO AND TIS- SUE BANK, Hartford Hospital, 80 Seymour Street, Hartford,	MOMA	55114–1904. MID-AMERICA TRANSPLANT ASSOCIATION, 1139 Olivette	OHOV	OHIO VALLEY LIFE CENTER,
DCTC	CT 06102–5037. WASHINGTON REGIONAL	MSOP	ASSOCIATION, 1139 Olivette Executive Parkway, St. Louis, MO 63132. MISSISSIPPI ORGAN RECOV-		NETWORK, INC., 5801 N.
	TIUM, 8110 Gatehouse Road, Suite 101 W, Falls Church, VA 22042.	WIOOT	ERY AGENCY, INC., 12 River Bend Place, Suite B, Jackson,	ORUO	Broadway, Suite 100, Okla- homa City, OK. PACIFIC NORTHWEST
	TRANSLIFE, 2501 North Orange Avenue, Suite 40, Orange Fl. 22804	MWOB	MIDWEST ORGAN BANK, 1900 W 47th Place, Suite 400,		SW Third, Suite 320, Portland, OR 97201–4952.
FLWC	lando, FL 32804. LIFELINK OF FLORIDA, 2111 West Swann Avenue, Tampa, FL 33606–2486. UNIVERSITY OF MIAMI OPO, University of Miami School of	NCBG	Westwood, KS 66205. CAROLINA LIFE CARE, North Carolina Baptist Hospitals, Inc., Medical Center Boule-	PADV	DELAWARE VALLEY TRANS- PLANT PROGRAM, 2000 Hamilton Street, Suite 201, Philadelphia PA 10130
FLMP	iviedicine, P.O. Box 016310,	NCCIVI	LIFE SHAKE OF THE CAROLI-	PATF	CENTER FOR ORGAN RE- COVERY AND EDUCATION, 204 Sigma Drive, RIDC Park,
FLSW	Miami, FL 33101. LIFELINK OF SOUTHWEST FLORIDA, 12573 New Brit-	NONO		PRLL	COVERY AND EDUCATION, 204 Sigma Drive, RIDC Park, Pittsburgh, PA 15238. LIFELINK OF PUERTO RICO, LIFELINK FOUNDATION,
FLUF	tany Blvd., Bldg. 23, Ft. Myers, FL 33907. THE OPO AT UNIVERSITY OF	NCNC	CUREMENT, 702 Johns Hop- kins Drive, Greenville, NC		LIFELINK FOUNDATION, INC., Texaco Plaza/Metro Of- fice Park, 2 Calle 1, Suite 411, Guaynabo, PR 00968.
GALL	FLORIDA, PO Box 100286, Gainesville, FL 32610–0286. LIFELINK OF GEORGIA, 3715 Northside Parkway, 100	NEOR	27834. NEBRASKA ORGAN RETRIEVAL SYSTEM, INC., 4060 Vinton Street, Suite 200, Omaha, ME 68105.	SCOP	SOUTH CAROLINA ORGAN PROCUREMENT AGENCY, 1064 Gardner Road, Suite 105, Charleston, SC 29407.
GAMC	Northcreek, Suite 300, At-	N.ITO	NEW JERSEY ORGAN & TIS-	11ND3	105, Charleston, SC 29407. TENNESSEE DONOR SERV-ICES, 1714 Hayes Street, Nashville, TN 37203.
	GEORGIA ORGAN AND TIS- SUE DONOR SERVICES, BA-S1600, 1120 15th Street, Augusta, GA 30912.	NMOP	field, NJ 07081. NEW MEXICO DONOR PRO-	TNET	Nashville, TN 37203. LIFE RESOURCES DONOR CENTER, 2812 McKinley Road, Johnson City, TN 37604.
HIOP	ORGAN DONOR CENTER OF HAWAII, 1000 Bishop Street,	NIVLV	que, NM 87107.	TNMS	37604. MID-SOUTH TRANSPLANT FOUNDATION, 956 Court Av-
IAOP	Honolulu, HI 96813. IOWA STATEWIDE ORGAN PROCUREMENT ORGANIZA-	NVLV	4580 Southeastern Avenue, Suite 33, Las Vegas, NV	TXGC	enue, Memphis, TN 38163.
ILIP	I .	NYAP	COLLEGE, 47 New Scotland	TVCA	Suite 900, Houston, TX 77005.
INOP	ILLINOIS, 800 South Wells, Suite 190, Chicago, IL 60607. INDIANA ORGAN PROCURE-	NYFL	Avenue, AP8, Albany, NY 12208. UNIVERSITY OF ROCHESTER	TXSA	8122 Datapoint Drive, Suite 1150, San Antonio, TX 78229.
	MENT ORGANIZATION, INC., 719 Indiana Avenue, Suite 100, Indianapolis, IN 46202.		ORGAN PROCUREMENT PROGRAM, 601 Elmwood Avenue, P.O. Box Surgery,	TXSB	SOUTHWEST ORGAN BANK, 3500 Maple Avenue, Suite 800, Dallas, TX 75219.
KYDA	KENTUCKY ORGAN DONOR	NYRT	Rochester, NY 14642. NEW YORK REGIONAL TRANSPLANT PROGRAM, 475 Riverside Drive—Suite	UTOP	INTERMOUTAIN ORGAN RE- COVERY SYSTEMS, 230 South 500 East, Suite 290, Salt Lake, UT 84102.
LAOP	LOUISIANA ORGAN PRO- CUREMENT AGENCY, 3501 N. Causeway Blvd., #940, Metaire, LA 70002–3626.	NYSB	1244, New York, NY 10115. LONG ISLAND TRANSPLANT PROGRAM UNIVERSITY HOSPITAL OPO, State Uni-	VAOP	VIRGINIA ORGAN PROCURE- MENT AGENCY, 1527 Hu- guenot Road, Midlothian, VA 23113.
MAOB	NEW ENGLAND ORGAN BANK, INC., One Gateway		versity of New York at Stony Brook, Stony Brook, NY	VATB	LIFE NET, 5809 Ward Court, Virginia Beach, VA 23455.
MDPC	Center, Newton, MA 02158. TRANSPLANT RESOURCE CENTER OF MARYLAND,	NYWN	11794. UPSTATE NEW YORK TRANS-PLANT SERVICES, INC., 165 Genesee Street Suite 102,	WANW	NORTHWEST ORGAN PRO- CUREMENT AGENCY, 700 Broadway, Seattle, WA

OPO code	OPO name and address
WASH	SACRED HEART ORGAN PRO- CUREMENT AGENCY, West 101 Eighth Avenue, TAF-C9, Spokane, WA 99220-4045.
WISE	WISCONSIN DONOR NET- WORK, Froedtert Memorial Lutheran Hospital, 9200 W. Wisconsin Avenue, Milwau- kee, WI 53226.
WIUW	UNIVERSITY OF WISCONSIN OPO, University of Wisconsin Hospital and Clinics, 600 Highland Avenue, Madison, WI 53792.

This notice does not contain any paperwork burden that is subject to approval by the Office of Management and Budget under the Paperwork Reduction Act of 1995. The form used by hospitals to request waivers of designated OPOs is currently approved by the Office of Management and Budget under 0938–0580, with an expiration date of March 31, 1998.

Authority: Section 1138 of the Social Security Act (42 U.S.C. 1320b–8). (Catalog of Federal Domestic Assistance Program No. 93.778, Medical Assistance Program; No. 93.773 Medicare—Hospital Insurance Program; and No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: April 22, 1996.
Thomas A. Ault,
Director, Bureau of Policy Development,
Health Care Financing Administration.

[FR Doc. 96–12463 Filed 5–16–96; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

Office for Policy Development and Research

[Docket No. FR-4056-N-02]

Proposed Information Collection for Public Comment

AGENCY: Office of the Assistant Secretary for Policy Development and Research, HUD.

ACTION: Notice.

May 24, 1996.

SUMMARY: The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for emergency review and approval, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

DATES: The due date for comments is:

ADDRESSES: Interested persons are invited to submit comments regarding

this proposal. Comments must be received within seven (7) days from the date of this Notice. Comments should refer to the proposal by name and should be sent to: Reports Liaison Officer, Office of Policy Development and Research, Department of Housing and Urban Development, 451 7th Street, SW, Room 8126, Washington, DC 20410.

FOR FURTHER INFORMATION CONTACT: Jane Karadbil, Office of University Partnerships—telephone (202) 708–1537. This is not a toll-free number. Copies of available documents submitted to OMB may be obtained from Ms. Karadbil.

SUPPLEMENTARY INFORMATION: This Notice informs the public that the Department of Housing and Urban Development (HUD) has submitted to OMB, for emergency processing, an information collection package with respect to a proposed Notice of Funding Availability for the Community Outreach Partnership Centers Program. HUD seeks to implement this initiative as soon as possible.

The Community Outreach Partnership Centers Program (COPC) is a demonstration program which provides grants to public and private institutions of higher education to assist in establishing or carrying out research and outreach activities addressing the problems of urban areas. In fiscal year 1996, approximately 14 New Grants will be awarded. In addition, up to 11 Institutionalization Grants will also be awarded to existing COPC grantees whose current grants are expiring.

Submission of the information required under this information collection is mandatory in order to compete for and receive the benefits of the program. All materials submitted are subject to the Freedom of Information Act and can be disclosed upon request. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid control number. The OMB control number, when assigned, will be announced by a separate notice in the Federal Register. OMB has been requested to approve this action on or before May 20, 1996.

The Department has submitted the proposal for the collection of information, as described below, to OMB for review, as required by the Paperwork Reduction Act (44 U.S.C. Chapter 35):

(1) Title of the information collection proposal:

Application Kit—Community Outreach Partnership Centers.

(2) Summary of the collection of information:

Each applicant for the COPC program would be required to submit current information, as listed below as:

- 1. Transmittal letter signed by the Chief Executive Officer of the institution.
- 2. OMB Standard Forms 424 (Application for Federal Assistance), Form 424B (Non-Construction Assurances) and Budget.
- 3. One- to two-page executive summary of the proposed COPC.
- 4. Narrative Project Management Work Plan.
- 5. Narrative statement addressing each of the rating factors.
 - 6. Drug-Free Workplace Certification.
- 7. Form SF–LLL, Disclosure of Lobbying Activities, if applicable.
- (7) Financial management and audit information.
- (3) Description of the need for the information and its proposed use:

To appropriately determine which Institutions of Higher Education should be awarded COPC grants, certain information is necessary about the applicant's plan, budget, past and future capabilities, and the institutional commitment to the program.

(4) Description of the likely respondents, including the estimated number of likely respondents, and proposed frequency of response to the collection of information:

Respondents will be public and private institutions of higher education. While community-based organizations and local governments are not direct respondents, because the program calls for the creation of partnerships, they will be involved in the preparation of the action plan that forms the basis of the application for a COPC grant. Grantees will also be expected to prepare and submit semi-annual monitoring reports.

The estimated number of respondents submitting applications is 120. The proposed frequency of the response to the collection of information is one-time. The application need only be submitted once. The estimated number of respondents to the monitoring requirements is 25.

(5) Estimate of the total reporting and recordkeeping burden that will result from the collection of information:

Reporting Burden

Number of respondents: 120 for applicants; 25 for monitoring requirements.

Total burden hours: 80 hours per respondent for applications); 80 hours a year per respondent for monitoring requirements.

Total estimated burden hours: 12,800.