

FEDERAL RESERVE SYSTEM**Notice of Proposals To Engage in Permissible Nonbanking Activities or To Acquire Companies That are Engaged in Permissible Nonbanking Activities**

The companies listed in this notice have given notice under section 4 of the Bank Holding Company Act (12 U.S.C. 1843) (BHC Act) and Regulation Y, (12 CFR Part 225) to engage *de novo*, or to acquire or control voting securities or assets of a company that engages either directly or through a subsidiary or other company, in a nonbanking activity that is listed in § 225.28 of Regulation Y (12 CFR 225.28) or that the Board has determined by Order to be closely related to banking and permissible for bank holding companies. Unless otherwise noted, these activities will be conducted throughout the United States.

Each notice is available for inspection at the Federal Reserve Bank indicated. The notice also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act.

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than December 9, 1997.

A. Federal Reserve Bank of San Francisco (Pat Marshall, Manager of Analytical Support, Consumer Regulation Group) 101 Market Street, San Francisco, California 94105-1579:

1. *First Security Corporation*, Salt Lake City, Utah; to engage *de novo* through its subsidiary, First Security Capital Markets, Salt Lake City, Utah, in underwriting and dealing in certain bank-ineligible securities. See *Citicorp, et al.*, 73 Fed. Res. Bull. 473 (1987); *Chemical New York Corporation, et al.*, 73 Fed. Res. Bull. 731 (1987); *Bank South Corporation*, 81 Fed. Res. Bull. 1116; *BOK Financial Corporation*, 83 Fed. Res. Bull. 510 (1997). First Security Corporation also plans to engage in the following activities: (1) acting as agent in the private placement of all types of securities; (2) buying and selling all types of securities on the order of customers as riskless principal; (3) providing full-service securities brokerage and investment advisory services in combination; (4) acting as investment and financial adviser; (5) making, acquiring, and servicing loans; (6) leasing property, engaging as principal in investing and trading activities; and (7) engaging in futures,

forward, and option contracts for hedging purposes; pursuant to §§ 225.28(b)(1) - (3), (6), (7), and (8).

Board of Governors of the Federal Reserve System, November 19, 1997.

Jennifer J. Johnson,

Deputy Secretary of the Board.

[FR Doc. 97-30837 Filed 11-21-97; 8:45 am]

BILLING CODE 6210-01-F

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Office of the Secretary****Office of the Assistant Secretary for Planning and Evaluation; Delegation of Authority**

Notice is hereby given that I have delegated to the Assistant Secretary for Planning and Evaluation, with authority to redelegate, all the authorities under Sections 403(a)(5)(G), (H), and (I) of the Social Security Act, as amended, 42 U.S.C. Section 603(a)(5)(G), (H), and (I).

These delegations shall be exercised under the Department's existing delegation of authority and policy on regulations. In addition, I hereby affirm and ratify any actions taken by you or your subordinates that involved the exercise of the authorities delegated herein prior to the effective date of the delegation. This delegation is effective immediately.

Dated: November 12, 1997.

Donna E. Shalala,

Secretary.

[FR Doc. 97-30793 Filed 11-21-97; 8:45 am]

BILLING CODE 4150-04-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Office of the Secretary****Federal Financial Participation in State Assistance Expenditures; Federal Matching Shares for Temporary Assistance to Needy Families, Medicaid, Aid to Needy Aged, Blind, or Disabled Persons and for the New Children's Health Insurance Programs for October 1, 1998 Through September 30, 1999**

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: The Federal Medical Assistance Percentage and Enhanced Federal Medical Assistance Percentages for Fiscal Year 1999 have been calculated pursuant to the Social Security Act (the Act). These percentages will be effective from

October 1, 1998 through September 30, 1999. This notice announces the calculated "Federal Medical Assistance Percentages" and "Enhanced Federal Medical Assistance Percentages" that we will use in determining the amount of Federal matching in State medical and medical insurance expenditures and for the annual reconciliation of contingency funds under Title IV-A. The table gives figures for each of the 50 States, the District of Columbia, Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands. Programs under title XIX of the Act exist in each jurisdiction; programs under titles I, X, and XIV operate only in Guam and the Virgin Islands; while a program under title XVI (AABD) operates only in Puerto Rico. Programs under title XXI are new, beginning in 1998. The percentages in this notice apply to State expenditures for assistance payments, medical services and medical insurance services (except family planning which is subject to a higher matching rate). The statute provides separately for Federal matching of administrative costs.

Sections 1905(b) and 2105(b) of the Act, as revised by section 9528 of Pub. L. 99-272, require the Secretary of Health and Human Services to publish these percentages each year. The Secretary is to figure the percentages, by formulas in sections 1905(b) and 2105(b) of the Act, from the Department of Commerce's statistics of average income per person in each State and in the Nation as a whole. The percentages are within upper and lower limits given in those two sections of the Act. The statute specifies the percentages to be applied to Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands.

The "Federal percentages," for residual payments under the old Aid to Families with Dependent Children (AFDC) program, will no longer be published. Anyone who needs these values may call the contact person named below and receive them. If a sufficient number of persons call, we may publish them again beginning in 2000.

The "Federal medical assistance percentages" are for Medicaid. States may claim at the Federal medical assistance percentage without regard to any maximum on the dollar amounts per recipient which may be counted under paragraph (2) of sections 3(a), 1003(a), and 1403(a) of the Act. They will also be used for the annual reconciliation of any Contingency funds received under the Temporary Assistance for Needy Families program.

The "Enhanced Federal Medical Assistance Percentages" are for use in the new Children's Health Insurance Program under Title XXI, and for some or all of children's medical assistance under the new Medicaid sections 1905(u)(2) and 1905(u)(3).

DATES: The percentages listed will be effective for each of the 4 quarter-year

periods in the period beginning October 1, 1998 and ending September 30, 1999.
FOR FURTHER INFORMATION CONTACT: Mr. Gene Moyer, Office of Health Policy, Office of the Assistant Secretary for Planning and Evaluation, Room 442E Hubert H. Humphrey Building, 200 Independence Avenue SW., Washington, DC 20201, Telephone (202) 690-7861.

(Catalog of Federal Domestic Assistance Program Nos. 93.560—Assistance Payments—Maintenance Assistance (State Aid); 93.778—Medical Assistance Program; Children's Health Insurance Programs—not yet added)

Dated: November 17, 1997.

Donna E. Shalala,
Secretary of Health and Human Services.

FEDERAL MEDICAL ASSISTANCE PERCENTAGES AND ENHANCED FEDERAL MEDICAL ASSISTANCE PERCENTAGES,
 EFFECTIVE OCTOBER 1, 1998—SEPTEMBER 30, 1996
 [Fiscal year 1999]

State	Federal Medical Assistance percentages	Enhanced Federal Medical Assistance percentages
Alabama	69.27	78.49
Alaska	59.80	** 71.86
American Samoa	50.00	* 65.00
Arizona	65.50	75.85
Arkansas	72.96	81.07
California	51.55	66.09
Colorado	50.59	65.42
Connecticut	50.00	65.00
Delaware	50.00	65.00
District of Columbia	70.00	79.00
Florida	55.82	69.07
Georgia	60.47	72.33
Guam	50.00	* 65.00
Hawaii	50.00	65.00
Idaho	69.85	78.89
Illinois	50.00	65.00
Indiana	61.01	72.71
Iowa	63.32	74.32
Kansas	60.05	72.03
Kentucky	70.53	79.37
Louisiana	70.37	79.26
Maine	66.40	76.48
Maryland	50.00	65.00
Massachusetts	50.00	65.00
Michigan	52.72	66.91
Minnesota	51.50	66.05
Mississippi	76.78	83.75
Missouri	60.24	72.17
Montana	71.73	80.21
Nebraska	61.46	73.02
Nevada	50.00	65.00
New Hampshire	50.00	65.00
New Jersey	50.00	65.00
New Mexico	72.98	81.09
New York	50.00	65.00
North Carolina	63.07	74.15
North Dakota	69.94	78.96
Northern Mariana Islands	50.00	* 65.00
Ohio	58.26	70.78
Oklahoma	70.84	79.59
Oregon	60.55	72.38
Pennsylvania	53.77	67.64
Puerto Rico	50.00	* 65.00
Rhode Island	54.05	67.83
South Carolina	69.85	78.89
South Dakota	68.16	77.71
Tennessee	63.09	74.16
Texas	62.45	73.72
Utah	71.78	80.25
Vermont	61.97	73.38
Virgin Islands	50.00	* 65.00
Virginia	51.60	66.12
Washington	52.50	66.75
West Virginia	74.47	82.13
Wisconsin	58.85	71.20

FEDERAL MEDICAL ASSISTANCE PERCENTAGES AND ENHANCED FEDERAL MEDICAL ASSISTANCE PERCENTAGES,
EFFECTIVE OCTOBER 1, 1998–SEPTEMBER 30, 1996—Continued
[Fiscal year 1999]

State	Federal Medical Assistance percentages	Enhanced Federal Medical Assistance percentages
Wyoming	64.08	74.86

* For purposes of section 1118 of the Social Security Act, the percentage used under titles I, X, XIV, and XVI and Part A of title IV will be 75 per centum.
** For 1998, 1999, and 2000, the values in the table were set for state plans under Titles XIX and XXI and for capitation payments and DSH allotments under those titles. For other purposes, the percentage for Alaska is 52.26

[FR Doc. 97-30832 Filed 11-21-97; 8:45 am]
BILLING CODE 4110-60-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

The National Vaccine Program Office of the Centers for Disease Control and Prevention (CDC) Announces the Following Meeting

Name: Adult Immunization Workshop.
Times and Dates: 12:30 p.m.–5 p.m., December 1, 1997; 8:30 a.m.–4:30 p.m., December 2, 1997.

Place: The Grand Hyatt Washington, 1000 H Street NW, Washington, DC 20001, telephone 202/582-1234.

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

Purpose: The purpose of this meeting is to gather information on adult immunization practices at non-traditional sites and explore opportunities to increase immunization rates by offering immunizations to adults who are unlikely to be immunized at traditional sites.

Matters to be Discussed: Agenda items will include a presentation of the Adult Immunization Plan; presentations on current immunization activities at various non-traditional sites; discussions by representatives of community organizations on methods to increase immunization levels in various segments of the adult population; and a discussion on the possibility of expanding the types of non-traditional sites utilized.

Agenda items are subject to change as priorities dictate.

CONTACT PERSON FOR MORE INFORMATION: Alicia S. Postema, Program Analyst, National Vaccine Program Office, CDC, 1600 Clifton Road, NE, M/S A-11, Atlanta, Georgia 30333, telephone 404/639-4450.

Dated: November 18, 1997.

Carolyn J. Russell,
Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 97-30766 Filed 11-21-97; 8:45 am]
BILLING CODE 4163-18-P

HEALTH RESOURCES AND SERVICES ADMINISTRATION

Program Announcement for a Cooperative Agreement for the Development and Enhancement of Health Promotion and Disease Prevention Curriculum Components Within Health Professions Education

The Health Resources and Services Administration (HRSA) announces the awarding of a single source cooperative agreement to the Association of Teachers of Preventive Medicine (ATPM) to plan for the development and enhancement of Health Promotion and Disease Prevention (HP/DP) curriculum components within health professions education. This activity will be supported under the authority of Title III, Section 301, of the Public Health Service Act. Five years of support are proposed beginning in fiscal year 1997. An initial award of \$262,301 will be used for the development of vaccine benefit-risk curriculum for health care professionals.

The project will: (1) Enhance the integration of HP/DP within existing health professions primary care curriculum; (2) identify and develop standards, guidelines, competencies, and training models that address HP/DP curricula; (3) serve as a resource for professional organizations, specialty societies, and academic units in developing a program of education and training in preventive medicine; and (4) explore project ideas regarding the instruction, practice and research in preventive medicine which respond to the national objectives of *Healthy People 2000*. The ATPM was chosen because it is the only professional

organization solely committed to advancing the teaching of HP/DP in the clinical specialties. It has an established membership of professionals which include teachers, researchers, practitioners, and administrators of multiple disciplines and medical specialties located in schools of medicine, academic health centers, schools of public health, accredited graduate medical education programs, nursing schools and various practice settings. It is uniquely structured to access current HP/DP instruction for health professionals of multiple disciplines and to influence the development of essential information as required. The Association also has developed and provided access to preventive medicine teaching and curriculum materials for both pre-service health professions education and continuing education. Many of these materials are proprietary in nature.

Federal Involvement

The Cooperative Agreement mechanism is being used for this project to allow for substantial Federal programmatic involvement with the planning, development, administration, and evaluation of the proposed projects.

Requests for Additional Information

Requests for additional information regarding this sole source cooperative agreement should be directed to: D.W. Chen, M.D., MPH, Bureau of Health Professions, Room 8-101, Health Resources and Services Administration, 5600 Fishers Lane, Rockville, MD 20857, Telephone: (301) 443-6853, FAX: (301) 443-1164, Email: dwchen@hrsa.dhhs.gov.

Requests for additional information for the initial project concerning vaccine benefit-risk curriculum development should be directed to: Pamela A. Eason, M.P.A., Bureau of Health Professions, Room 8A-35, Health Resources and Services Administration, 5600 Fishers Lane, Rockville, MD 20857, Telephone: