

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN<sup>1</sup>

	No. of Respondents	Annual Frequency per Response	Total Annual Responses	Hours per Response	Total Hours
Receive initial recruiting telephone call	600	1	600	0.08	48
Read instructions and complete mail survey	600	1	600	0.59	354
Complete followup telephone interview	600	1	600	0.08	48
Total					450

<sup>1</sup> There are no capital costs or operating and maintenance costs associated with this collection of information.

The burden estimate is based on two rounds of focus groups conducted to test the survey instrument. The estimates for the length of the initial and followup interviews are based on similar studies that have been conducted.

Dated: January 31, 1999.

**William K. Hubbard,**

*Associate Commissioner for Policy Coordination.*

[FR Doc. 99-3015 Filed 2-8-99; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

#### Allergenic Products Advisory Committee; Notice of Meeting

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). At least one portion of the meeting will be closed to the public.

*Name of Committee:* Allergenic Products Advisory Committee.

*General Function of the Committee:* To provide advice and recommendations to the agency on FDA's regulatory issues.

*Date and Time:* The meeting will be held on February 22, 1999, 8 a.m. to 5 p.m.

*Location:* Holiday Inn, Versailles Ballrooms I and II, 8120 Wisconsin Ave., Bethesda, MD.

*Contact Person:* William Freas or Pearlina K. Muckelvene, Center for Biologics Evaluation and Research (HFM-21), Food and Drug Administration, 1401 Rockville Pike, Rockville, MD 20852, 301-827-0314, or FDA Advisory Committee Information Line, 1-800-741-8138 (301-443-0572 in the Washington, DC area), code 12388. Please call the Information Line for up-to-date information on this meeting.

*Agenda:* The committee will discuss: (1) The current organization and the

research programs of the Laboratory of Immunobiochemistry, Division of Allergenic Products and Parasitology, Office of Vaccines Research and Review; (2) regulatory proposals concerning the potency limits for standardized allergen vaccines and the requirements for protein content of these vaccines; (3) modifications of the competitive ELISA assay; (4) proposed package insert for allergen extracts; (5) issues regarding use of pure allergens versus U.S. standards; and (6) an update on the status of class IIIA allergen extracts.

*Procedure:* On February 22, 1999, from 8 a.m. to 3 p.m., the meeting is open to the public. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by February 16, 1999. Oral presentations from the public will be scheduled between approximately 1 p.m. and 2 p.m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before February 16, 1999, 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 presentation.

*Closed Committee Deliberations:* On February 22, 1999, from 3 p.m. to 5 p.m., the meeting will be closed to permit discussion and review of trade secret and/or confidential information (5 U.S.C. 552b(c)(4)) regarding applications under FDA review.

FDA regrets that it was unable to publish this notice 15 days prior to the February 22, 1999, Allergenic Products Advisory Committee meeting. Because the agency believes there is some urgency to bring these issues to public discussion and qualified members of the Allergenic Products Advisory Committee were available at this time, the Commissioner concluded that it was in the public interest to hold this meeting even if there was not sufficient time for the customary 15-day public notice.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: February 3, 1999.

**Michael A. Friedman,**

*Deputy Commissioner for Operations.*

[FR Doc. 99-3149 Filed 2-5-99; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

#### Anti-Infective Drugs Advisory Committee; Notice of Meeting

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). The meeting will be open to the public.

*Name of Committee:* Anti-Infective Drugs Advisory Committee.

*General Function of the Committee:* To provide advice and recommendations to the agency on FDA's regulatory issues.

*Date and Time:* The meeting will be held on March 4, 1999, 8:30 a.m. to 5 p.m.

*Location:* Holiday Inn, Kennedy Grand Ballroom, 8777 Georgia Ave., Silver Spring, MD.

*Contact Person:* Rhonda W. Stover, Center for Drug Evaluation and Research (HFD-21), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-827-7001, or FDA Advisory Committee Information Line, 1-800-741-8138 (301-443-0572 in the Washington, DC area), code 12530. Please call the Information Line for up-to-date information on this meeting.

*Agenda:* The committee will discuss new drug application 20-930, pexiganan acetate 1 percent topical cream (Magainin Pharmaceuticals) for treatment of infections in diabetic foot ulcers.

*Procedure:* Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by February 25, 1999. Oral presentations from the public will be scheduled between approximately 11:30 a.m. and 12:30 p.m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before February 25, 1999, 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 presentation.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: February 2, 1999.

**Michael A. Friedman,**

*Deputy Commissioner for Operations.*

[FR Doc. 99-3108 Filed 2-8-99; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Public Law 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, call the HRSA Reports Clearance Officer on (301) 443-1891.

Comments are invited 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.

#### Proposed Project: Application for Certification and Recertification as a Federally Qualified Health Center (FQHC) Look Alike, OMB No. 0915-0142—Revision

The Health Resources and Services Administration (HRSA) proposed to revise the application guide used by organizations applying for certification, or recertification as a Federally Qualified Health Center (FQHC) Look-Alike for purposes of cost-based reimbursement under the Medicaid and Medicare programs. The guide will be revised to reflect legislative, policy, and technical changes since May, 1997, the issuance date of the last guidance. Revisions will include reference to the Balanced Budget Act of 1997 which amended the statutory language pertaining to FQHC Look-Alikes to include the requirement that 'an entity may not be owned, controlled, or operated by another entity', and the interpretation and implementation policy documents issued by the HRSA.

Estimates of Burden are as follows:

Form	Number of respondents	Responses per respondent	Hours per respondent	Total hour burden
Application .....	26	1	100	2,600
Recertification .....	74	1	20	1,480
Total .....	100	.....	.....	4,080

Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 14-33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: February 3, 1999.

**Jane Harrison,**

*Director, Division of Policy Review and Coordination.*

[FR Doc. 99-3017 Filed 2-8-99; 8:45 am]

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## 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.

#### State Treatment and Needs Assessment Program Studies

(OMB No. 0930-0186—Revision)—SAMHSA's Center for Substance Abuse

Treatment (CSAT), as part of its State Treatment and Needs Assessment Program (STNAP), awards contracts to States to conduct studies for the purpose of determining the need and demand for substance abuse treatment within each State. In order to receive funds from the Substance Abuse Prevention and Treatment Block Grant, States must submit in their annual block grant applications an assessment of service needs Statewide, at the sub-state level, and for specified population groups (as required by section 1929 of the Public Health Service Act). Most States plan to conduct an adult telephone household survey to collect information on needed treatment for substance abuse/dependence. In addition, many States plan to conduct a variety of more focused studies which will collect data on treatment need in special populations, including