### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Notice of Meeting of the Advisory Committee on Blood Safety and Availability

**AGENCY:** Office of the Secretary, HHS.

**ACTION:** Notice of meeting.

The Advisory Committee on Blood Safety and Availability will meet on Friday August 24, 2001 from 9 a.m. to 5 p.m. The meeting will take place at the Hyatt Regency Hotel on Capitol Hill, 400 New Jersey Ave., NW., Washington, DC 20001. The meeting will be entirely open to the public.

The purpose of this meeting will be to present the Department's current and future plans to monitor supply and demand for blood and plasma products, and to solicit public comment on these

plans.

Public comment will be limited to five minutes per speaker. Those who wish to have printed material distributed to Advisory Committee members should submit thirty (30) copies to the Executive Secretary prior to close of business August 9, 2001. In addition, anyone planning to comment on either item is encouraged to contact the Executive Secretary at her/his earliest convenience.

#### FOR FURTHER INFORMATION CONTACT:

CAPT Lawrence C. McMurtry, Deputy Executive Secretary, Advisory Committee on Blood Safety and Availability, Department of Health and Human Services, Office of Public Health and Science, 200 Independence Ave., SW., Room 736–E, Washington, DC 20201. Phone (202) 690–5558, FAX (202) 690–7560, e-mail lmcmurtry@osophs.dhhs.gov.

#### Lawrence C. McMurtry,

Deputy Executive Secretary, Advisory Committee on Blood Safety and Availability. [FR Doc. 01–16752 Filed 7–3–01; 8:45 am]

BILLING CODE 4150-28-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Notice of Meeting of the Presidential Advisory Council on HIV/AIDS

Pursuant to Public Law 92–463, notice is hereby given of the meeting of the Presidential Advisory Council on HIV/AIDS (Council) scheduled for July 19, 2001, extending possibly into July 20th, 2001 at a downtown Washington, DC location to be determined. The meeting of the Presidential Advisory Council on HIV/AIDS will take place on Thursday, July 19th, 2001 (8:30 am to 6

pm). Once a draft agenda is prepared, if deemed necessary the meeting will continue on July 20th (8:30 am to 12 pm). The meetings will be open to the public, however space may be limited. Possible attendees are strongly encouraged to pre-register by calling Shellie Abramson at (202) 860–8863.

Greg Smiley, Designated Federal Official, Presidential Advisory Council on HIV and AIDS, 200 Independence Avenue, SW., Room 733-E, Washington, DC, (phone: (202) 205-1839, Fax: (202) 690–7560, E-mail: gsmilev@OSOPHS.dhhs.gov) will furnish the meeting agenda and roster of committee members upon request. Once a draft agenda has been finalized, it may also be accessed through the Council's website: www.pacha.gov. Any individual who requires special assistance, such as sign language interpretation or other reasonable accommodations, should contact Brand Rymph at (301) 986–4870 no later than July 12, 2001.

#### Greg Smiley,

Health Policy Analyst, Designated Federal Official, Presidential Advisory Council on HIV and AIDS.

[FR Doc. 01–16813 Filed 7–3–01; 8:45 am]
BILLING CODE 3195–01–M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of the Secretary

Centers for Medicare & Medicaid Services; Statement of Organization, Functions and Delegations of Authority; Reorganization Order

Under the authority of Section 6 of Reorganization Plan No. 1 of 1953 and pursuant to the authorities vested in me as Secretary of Health and Human Services, I hereby order organizational changes in the Department of Health and Human Services (HHS) as follows. Under Part F, (Health Care Financing Administration) Statement of Organization, Functions, and Delegations of Authority for the Department of Health and Human Services, Part F, as amended at 46 FR 13262-63, dated March 9, 1977, and most recently amended at 65 FR 43771, dated July 14, 2000, is being amended to retitle, Part F, Health Care Financing Administration, as the Centers for Medicare & Medicaid Services. The changes are as follows:

1. Under Part F, all references to the Health Care Financing Administration (HCFA), are hereby changed to the Centers for Medicare & Medicaid Services (CMS); and all references to HCFA are changed to CMS.

2. All references to the HCFA "Administrator" are changed to the "Administrator of CMS."

3. Delegations of Authority. All delegations of authority from the Secretary or other HHS officials to the Administrator, Health Care Financing Administration and redelegations from the Administrator to subordinate employees pertaining to the Health Care Financing Administration are vested in the Administrator, Centers for Medicare & Medicaid Services and such subordinate employees and remain in effect until revoked or modified.

Dated: June 29, 2001.

#### Tommy G. Thompson,

Secretary.

[FR Doc. 01–16800 Filed 6–29–01; 3:24 pm] BILLING CODE 4120–01–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

#### Administration on Aging

#### Public Information Collection Requirement Submitted to the Office of Management and Budget for Clearance

**AGENCY:** Administration on Aging, HHS. **SUMMARY:** The Administration on Aging (AoA), Department of Health and Human Services, in compliance with the Paperwork Reduction Act (Pub. L. 96–511), is submitting to the Office of Management and Budget for clearance and approval an information collection instrument, entitled Performance (Progress) Reports for Title IV Grantees.

*Type of Request:* Extension of currently approved collection.

Use: Consistent with 45 CFR part 74, subpart J, the AoA requires grantees funded under Title IV of the Older Americans Act to report on the performance of their projects. The report is used by the AoA to review and monitor the grantee's progress in achieving project objectives, to provide advice and assistance, and to take corrective action as necessary.

Frequency: Semiannual.
Respondent: Title IV grantees.
Estimated number of respondents:

Estimated burden hours: 20 hours for each semiannual report.

Additional Information: Each progress report, typically five pages in length, is expected to cover the following subjects: recent major activities and accomplishments, problems encountered, significant findings and events, dissemination activities, and activities planned for the next 6 months.

OMB Comment: A comment is best assured of having its full effect if OMB receives it as soon as possible after its publication. Written comments and recommendations for the proposed information collection should be sent to the following address within 30 days of the publication of this notice: Office of Information and Regulatory Affairs, Attention: Allison Herron Eydt, AoA Desk Officer, Office of Management and Budget, Washington, DC 20503.

Dated: June 28, 2001.

#### Norman L. Thompson,

Acting Principal Deputy Assistant Secretary for Aging.

[FR Doc. 01–16830 Filed 7–3–01; 8:45 am] BILLING CODE 4154–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[60Day-01-52]

#### Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of

the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 639–7090.

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. Send comments to Anne O'Connor, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

#### **Proposed Project**

Youth Risk Behavior Survey (YRBS) Methodological Study—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention, (CDC). The purpose of this request is to obtain OMB clearance to conduct a methodological study in the Spring of 2002 to assess the contributions of question wording, questionnaire context, and appeals for honesty on prevalence and, thereby, to provide methodological guidance for future surveys, especially surveys of adolescents. In 2000, the Office of the

Assistant Secretary for Planning and Evaluation (ASPE) commissioned five expert papers written on the topic "Examining Substance Abuse Data Collection Methodologies." The papers focused on the YRBS, the National Household Survey of Drug Abuse (NHSDA), and Monitoring the Future (MTF). A consensus among the authors was that disparate results across the studies are most likely a product of methodological differences across the surveys. This YRBS Methodological Study is designed to measure the effect of several critical aspects of the data collection protocol: (1) Question wording, (2) questionnaire context, (3) appeals for honesty, and (4) students' perception of their honesty and accuracy. Approximately 100 students in 40 high schools will be given one of four questionnaires. Elucidation of the impact of these factors on prevalence will assist in reducing response effects and improving the quality of the YRBS data.

The total estimated cost to student respondents is \$15,750, which is calculated in terms of their time spent in responding to the survey and is based on an assumed minimum wage of \$5.25/hour for the 2001–2002 school year. The total estimated cost to school administrators is \$1,400 which is calculated in terms of their time spent in recruitment and is based on an assumed average hourly rate of \$34. Thus, the total costs to respondents, based on the costs of their time, are \$17,150.

Respondents	Number of respondents	Number of responses per respondents	Burden per response (in hrs.)	Total burden hours
High school student	4,000 80	1 1	45/60 30/60	3,000 40

Dated: June 27, 2001.

### Nancy Cheal,

Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.

[FR Doc. 01–16735 Filed 7–3–01; 8:45 am] BILLING CODE 4163–18–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Administration for Children and Families

# Submission for OMB Review; Comment Request

*Title:* Refugee Resettlement Program Estimates: CMA.

OMB No.: 0970-0030.

Description: ORR reimburses, to the extent of available appropriations, certain non-Federal costs for the provision of cash and medical assistance to refugees, along with allowable expenses in the administration of the Refugee Resettlement Program. ORR needs sound State estimates of likely expenditures for refugee cash, medical, and administrative (CMA) expenditures so that it can anticipate Federal costs in upcoming quarters. If Federal costs are anticipated to exceed budget allocations, ORR must take steps to reduce Federal expenses, such as limiting the number of months of eligibility for Refugee Cash Assistance

(RCA) and Refugee Medical Assistance (RMA).

To meet the need for reliable State estimates of anticipated expenses, ORR has developed a single-page form in which States estimate the average number of recipients for each category of assistance, the average unit cost over the next 12 months, and the expense for the overall administration of the program. This form, the ORR–1 must be submitted prior to the beginning of each Federal fiscal year. Without this information, ORR would be out of compliance with the intent of its legislation and otherwise unable to estimate program costs adequately.

In addition, the ORR-1 serves as the State's application for reimbursement of