488-8600; facsimile: (770) 488-8615. Applications for a license filed in response to this notice will be treated as objections to the grant of the contemplated license. Only written comments and/or applications for a license which are received by CDC within sixty days of this notice will be considered. Comments and objections submitted in response to this notice will not be made available for public inspection, and, to the extent permitted by law, will not be released under the Freedom of Information Act, 5 U.S.C. 552. A signed Confidential Disclosure Agreement will be required to receive a copy of any pending patent application.

Dated: May 24, 2002.

### James D. Seligman,

Associate Director for Program Services, Centers for Disease Control and Prevention (CDC).

[FR Doc. 02–13782 Filed 5–31–02; 8:45 am]

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Medicare and Medicaid Services

[Docket Identifier: CMS-R-191]

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

**AGENCY:** Centers for Medicare and Medicaid Services.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration (HCFA)), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Granting and

Withdrawal of Deeming Authority to **National Accreditation Organizations** and Supporting Regulations at 42 CFR 488.4 to 488.9 and 400.201; Form No.: CMS-R-191 (OMB# 0938-0690); Use: The information required is necessary to determine whether a private accreditation organization is equal to or more stringent than those of the conditions of participation or coverage for a fee-for-service provider or supplier, excluding clinical laboratories; Frequency: Quarterly, on occasion; Affected Public: Not-for-profit institutions, businesses or other forprofit; Number of Respondents; 5; Total Annual Responses: 28; Total Annual Hours: 451.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web Site address at http://www.hcfa.gov/ regs/prdact95.htm, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the CMS Paperwork Clearance Officer designated at the following address: CMS, Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards, Attention: Julie Brown, CMS R 191, Room N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: May 15, 2002.

#### John P. Burke, III,

Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, CMS Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards. [FR Doc. 02–13762 Filed 5–31–02; 8:45 am] BILLING CODE 4120–03–M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Medicare and Medicaid Services

[Document Identifier: CMS-485]

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

**AGENCY:** Centers for Medicare and Medicaid Services.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as the

Health Care Financing Administration (HCFA)), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Home Health Services Under Hospital Insurance, Manual Instructions and Supporting Regulations in 42 CFR 409.40-.50, 410.36, 410.170, 411.4-.15, 421.100, 424.22, 484.18 and 489.21; Form No.: HCFA-485 (OMB# 0938-0357); Use: The "Home Health Services Under Hospital Insurance" is a certification and plan of care used by the Regional Home Health Intermediaries to ensure reimbursement is made to Home Health agencies only for services that are covered and medically necessary under Part A and Part B. The attending physician must sign the HCFA-485 (OMB 0938–0357) authorizing the home services for a period not to exceed 60 days; Frequency: Other: Every 60 days; Affected Public: Business or other forprofit; Number of Respondents: 6,892; Total Annual Responses: 4,750,000; Total Annual Hours: 1,583,333.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web Site address at http://www.hcfa.gov/ regs/prdact95.htm, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the CMS Paperwork Clearance Officer designated at the following address: CMS, Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards, Attention: Room N2-14-26, 7500 Security

Boulevard, Baltimore, Maryland 21244–1850.

Dated: May 15, 2002.

#### John P. Burke, III,

Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, CMS Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards. [FR Doc. 02–13763 Filed 5–31–02; 8:45 am]

BILLING CODE 4120-03-M

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Centers for Medicare and Medicaid Services

[Docket Identifier: CMS-10036]

### Agency Information Collection Activities: Submission for OMB Review; Comment Request

**AGENCY:** Centers for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection

Type of Information Collection Request: Revision of a currently approved collection; Title of Information Collection: Inpatient Rehabilitation Assessment Instrument and Data Set for PPS for Inpatient Rehabilitation Facilities and Supporting Regulations in 42 CFR, Parts 412 and 413; Form No.: CMS-10036 (OMB# 0938-0842); Use: This is a request to use the IRF-PAI and its supporting manual for the implementation phase of the inpatient rehabilitation PPS. There have been no revisions or modifications to the instrument; however, this submission includes the current manual/instructions which has been revised. Use of this instrument will

enable CMS to implement a classification system and payment system for the Legislatively mandated inpatient rehabilitation hospital and exempt units Prospective Payment System (PPS).; Frequency: On occasion; Affected Public: Business or other forprofit, and not-for-profit institutions; Number of Respondents; 359,000; Total Annual Responses: 359,000; Total Annual Hours: 269,250.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS Web Site address at http://www.hcfa.gov/regs/ prdact95.htm, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB desk officer: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: May 14, 2002.

#### John P. Burke, III,

Paperwork Reduction Act Team Leader, CMS Reports Clearance Officer, CMS Officer of Information Services, Security and Standards Group, Division of CMS Enterprise Standards. [FR Doc. 02–13761 Filed 5–31–02; 8:45 am]

BILLING CODE 4120-03-M

## DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4737-N-03]

Notice of Proposed Information Collection or Public Comment: Telephone Survey of Sponsor/ Managers of HUD-Assisted Properties Housing People With Disabilities Regarding Property Size and Type, Resident Characteristics, and Program Operations

**AGENCY:** Office of Policy Development and Research, HUD.

**ACTION:** Notice.

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

**DATES:** Comments Due Date: August 2, 2002.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB Control Number and should be sent to: Reports Liaison Officer, Office of Policy Development & Research, Department of Housing and Urban Development, 451 7th Street, SW, Room 8228, Washington, DC 20410.

#### FOR FURTHER INFORMATION CONTACT:

Cheryl A. Levine, Program Evaluation Division, Office of Policy Development and Research, Department of Department of Housing and Urban Development, 451 7th Street, SW, Room 8140, Washington, DC 20410; telephone (202) 708–3700, extension 3928; e-mail cheryl\_a\_Levine@hud.gov. This is not a toll free number. Copies the proposed forms and other available documents submitted to OMB may be obtained from Ms. Levine.

SUPPLEMENTARY INFORMATION: The Department of Housing and Urban Development will submit the proposed information collection package to OMB for review as required by the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35, as amended).

This Notice is soliciting comments from members of the public and affected agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) enhance the quality, utility, and clarity of the information to be collected; and (4) minimize the burden of the collection of information on those who are to respond; including the use of appropriate automated collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

This Notice also lists the following information:

Title of Proposal: Telephone survey of sponsor/managers of HUD-assisted properties housing people with disabilities regarding property size and type, resident characteristics, and program operations.

OMB Control Number:

Description of the need for the information and proposed use: The information to be collected is part of a larger study, mandated by Congress and conducted by Abt Associates Inc., of the social and economic benefits and problems of providing housing for people with disabilities in projects of