

Sandra L. Kusumoto,
Director, Bureau of Consumer Complaints
and Licensing.
 [FR Doc. 02-14084 Filed 6-4-02; 8:45 am]
 BILLING CODE 6730-01-P

FEDERAL MARITIME COMMISSION

Ocean Transportation Intermediary License Applicant

Notice is hereby given that the following applicant has filed with the Federal Maritime Commission an application for license as a Non-Vessel Operating Common Carrier—Ocean Transportation Intermediary pursuant to section 19 of the Shipping Act of 1984 as amended (46 U.S.C. app. 1718 and 46 CFR part 515).

Persons knowing of any reason why the following applicant should not receive a license are requested to contact the Office of Transportation Intermediaries, Federal Maritime Commission, Washington, DC 20573.

Non-Vessel Operating Common Carrier Ocean Transportation Intermediary Applicant:

GSA Shipping, Inc., 500 W. 140th Street, Gardena, CA 90248. Officers: Marq Shim, President (Qualifying Individual), John Kim, General Manager.

Dated: May 31, 2002.

Bryant L. VanBrakle,
Secretary.
 [FR Doc. 02-14086 Filed 6-4-02; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

National Healthcare Disparities Report Measures and Candidate Data Sets—Request for Nominations

AGENCY: The Agency for Healthcare Research and Quality (AHRQ), HHS.

ACTION: Request for Nominations.

SUMMARY: AHRQ invites nominations of measures and candidate data sets for inclusion in the National Healthcare Disparities Report, (NHDR).

DATES: Nominations should be submitted by August 5, 2002 in order to be considered for the NHDR. AHRQ will not reply to individual nominations, but will consider all nominations during the report development process.

ADDRESSES: The nominations should be submitted to Sari Siegel, Center for Primary Care Research, AHRQ, 6010

Executive Boulevard, Suite 201, Rockville, MD 20852.

FOR FURTHER INFORMATION CONTACT: Sari Siegel, Center for Primary Care Research, AHRQ, 6010 Executive Boulevard, Suite 200, Rockville, MD 20852. Phone: (301) 5946373; FAX: (301) 5943721. E-mail: ssiegel@ahrq.gov.
Arrangement for Public Inspection:

All nominations will be available for public inspection at the Center for Primary Care Research, telephone (301) 594-6373, weekdays between 8:30 a.m. and 5 p.m. (Eastern time).

SUPPLEMENTARY INFORMATION:

1. Background

In FY 2003, AHRQ is required to submit to the Congress the first annual report on prevailing disparities in health care. AHRQ's authorizing legislation requires that the Director prepare and annually submit to the Congress a report regarding prevailing disparities in health care delivery as it relates to racial factors and socioeconomic factors in priority populations. The legislation further specifies that priority populations include: Low income groups; minority groups; women; children; the elderly; and individuals with special health care needs, including individuals with disabilities and individuals who need chronic care or end-of-life care. The first NHDR will focus on health care disparities for these groups compared to other Americans with respect to access to and quality of care.

This effort will be implemented in partnership with other Agency and Department projects to ensure synergy with existing efforts, including, Healthy People 2010, HHS survey integration priorities and the AHRQ National Healthcare Quality Report. The report will provide answers on a national basis to critical questions about disparities in health care and will permit the development of a more complete picture of health care in America, including who has access to care and how good is the care received. The NHDR provides an important opportunity for the Department of Health and Human Services to further its long-term commitment to identifying and reducing avoidable disparities in health care.

2. Purpose

The purpose of this **Federal Register** notice is to encourage submission of measures and candidate data sets for inclusion in the NHDR. The AHRQ will review nominations and supporting information and determine which measures and data sets will be included in the NHDR, seeking additional information as appropriate.

Dated: May 29, 2002.

Carolyn M. Clancy,
Acting Director.
 [FR Doc. 02-14002 Filed 6-4-02; 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, Pub. L. 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) 443-1129.

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: Data System for Organ Procurement and Transplantation Network and Associated Forms (OMB No. 0915-0157): Revision

Section 372 of the Public Health Service (PHS) Act requires that the Secretary, by contract, provide for the establishment and operation of an Organ Procurement and Transplantation Network (OPTN). The OPTN, among other responsibilities, operates and maintains a national waiting list of individuals requiring organ transplants, maintains a computerized system for matching donor organs with transplant candidates on the waiting list, and operates a 24-hour telephone service to

facilitate matching organs with individuals included in the list.

Data for the OPTN data system are collected from transplant hospitals, organ procurement organizations, and tissue-typing laboratories. The information is used to match donor organs with recipients, to monitor compliance of member organizations with OPTN rules and requirements, and to report periodically on the clinical and scientific status of organ donation and

transplantation in this country. Data are used in the development and revision of OPTN rules and requirements, operating procedures, and standards of quality for organ acquisition and preservation, some of which have provided the foundation for development of Federal regulations. The practical utility of the data collection is further enhanced by requirements that the OPTN data must be made available without restriction for use by OPTN members, the Scientific

Registry of Transplant Recipients, the Department of Health and Human Services, and others for evaluation, research, patient information, and other important purposes.

Revisions in the 28 data collection forms are intended to clarify existing questions, to provide additional detail and categories to avoid confusion and be more inclusive, to remove obsolete data, and to comply with requests for more complete and precise data.

ESTIMATES OF ANNUALIZED HOUR BURDEN

Form	Number of respondents	Responses per respondents	Total responses	Hours per response	Total burden hours
Cadaver Donor Registration	59	170	10,030	0.3	3,009.00
Death referral data	59	12	708	10	7,080.00
Living Donor Registration	668	11	7,348	0.2	1,469.60
Living Donor Follow-up	668	16	10,688	0.1	1,068.80
Donor Histocompatibility	156	86	13,416	0.1	1,341.60
Recipient Histocompatibility	156	161	25,116	0.1	2,511.60
Heart Candidate Registration	140	26	3,640	0.3	1,092.00
Lung Candidate Registration	75	29	2,175	0.3	652.50
Heart/Lung Candidate Registration	81	2	162	0.3	48.60
Thoracic Registration	140	29	4,060	0.3	1,218.00
Thoracic Follow-up	140	168	23,520	0.2	4,704.00
Kidney Candidate Registration	242	108	26,136	0.2	5,227.20
Kidney Registration	242	62	15,004	0.3	4,501.20
Kidney Follow-up*	242	444	107,448	0.2	21,489.60
Liver Candidate Registration	120	97	11,640	0.2	2,328.00
Liver Registration	120	44	5,280	0.4	2,112.00
Liver Follow-up	120	276	33,120	0.3	9,936.00
Kidney/Pancreas Candidate Registration	138	14	1,932	0.2	386.40
Kidney/Pancreas Registration (new form)	138	7	966	0.4	386.40
Kidney/Pancreas Follow-up (new form)	138	51	7,038	0.3	2,111.40
Pancreas Candidate Registration	138	7	966	0.2	193.20
Pancreas Registration	138	4	552	0.3	165.60
Pancreas Follow-up	138	12	1,656	0.2	331.20
Intestine Candidate Registration	38	6	228	0.2	45.60
Intestine Registration	38	3	114	0.2	22.80
Intestine Follow-up	38	9	342	0.2	68.40
Immunosuppression Treatment	668	39	26,052	0.025	651.30
Immunosuppression Treatment Follow-up	668	259	173,012	0.025	4,325.30
Post Transplant Malignancy	668	8	5,344	0.05	267.20
Total	883	517,693	78,744.50

* Includes an estimated 10,000 kidney transplant patients transplanted prior to the initiation of the data system.

Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 11-05, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: May 30, 2002.

Jane M. Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 02-14020 Filed 6-4-02; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

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

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget, in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for

review, call the HRSA Reports Clearance Office on (301) 443-1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: Health Education Assistance Loan (HEAL) Program: Lender's Application for Insurance Claim Form and Request for Collection Assistance Form (OMB No. 0915-0036)—Extension

The HEAL program ensures the availability of funds for loans to eligible students who desire to borrow money to pay for their educational costs. The HEAL lenders use the Lenders Application for Insurance Claim to request payment from the Federal