

based organizations within their jurisdictions.

Community-based non-governmental applicants are required to submit the following information to their local or State health authority, or State Office of Emergency Medical Services as appropriate, no later than the Federal application receipt due date of June 18, 2003:

(a) A copy of the face page of the application (SF 424)

(b) An abstract of the project not to exceed one page, which provides:

(1) A description of the population to be served,

(2) The proposed number of AEDs to be purchased and how many people will be trained within the community partnership,

(3) A description of the coordination planned with the appropriate State agencies (ranging from required notification of AED placement to such agency agreeing to being the lead applicant and/or fiscal agent of a State-wide community partnership should they choose to).

Executive Order 12372

This grant program is subject to the provisions of Executive Order 12372 concerning intergovernmental review of Federal programs by appropriate State and local officials as implemented by 45 CFR part 100. Executive Order 12372 allows States the option of setting up a system for reviewing applications from within their States for assistance under certain Federal programs. Applicants (other than Federally-recognized Indian tribal governments) should contact their State Single Point of Contact (SPOC), a list of which will be included in the application kit, as early as possible to alert them to the prospective applications and receive any necessary instructions on the State process. All SPOC recommendations should be submitted to Darren Buckner, Office of Grants Management, HIV/AIDS Bureau, 5600 Fishers Lane, Room 11A-16, Rockville, Maryland 20857, (301) 443-1913. The due date for State process recommendations is 60 days after the application deadline of June 18, 2003, for competing applications for the RAED Grant Program. The granting agency does not guarantee to "accommodate or explain" State process recommendations it receives after that date. See part 148 of the PHS Grants Administration Manual, Intergovernmental Review of PHS Programs under Executive Order 12372,

and 45 CFR part 100 for a description of the review process and requirements.

Dated: February 4, 2003.

Elizabeth M. Duke,

Administrator.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Practitioner Data Bank: Change in User Fees

AGENCY: Health Resources and Services Administration, DHHS.

ACTION: Notice.

SUMMARY: The Health Resources and Services Administration (HRSA), Department of Health and Human Services (DHHS), is announcing a seventy-five cent decrease in the fee charged to entities authorized to request information from the National Practitioner Data Bank (NPDB) for all queries. The new fee will be \$4.25. There will be no change to the \$10.00 self-query fee.

DATES: The new fee is effective on July 1, 2003.

FOR FURTHER INFORMATION CONTACT: John Heyob, Director, Division of Practitioner Data Banks, Bureau of Health Professions, Health Resources and Services Administration, 7519 Standish Place, Suite 300, Rockville, Maryland 20857. Tel: (301) 443-2300. Email: policyanalysis@hrsa.gov.

SUPPLEMENTARY INFORMATION: The current fee structure (\$5.00 per name) was announced in the **Federal Register** on July 11, 2001 (66 FR 36289) and became effective October 1, 2001. All entity queries are submitted and query responses received through the NPDB's Integrated Query and Reporting Service (IQRS) and paid via an electronic funds transfer or credit card.

The NPDB is authorized by the Health Care Quality Improvement Act of 1986 (the Act), Title IV of Pub. L. 99-660, as amended (42 U.S.C. 11101 *et seq.*). Section 427(b)(4) of the Act authorizes the establishment of fees for the costs of processing requests for disclosure and of providing such information.

Final regulations at 45 CFR part 60 set forth the criteria and procedures for information to be reported to and

disclosed by the NPDB. Section 60.3 of these regulations defines the terms used in this announcement.

In determining any changes in the amount of the user fee, the Department uses the criteria set forth in § 60.12 (b) of the regulations, as well as allowable costs pursuant to Title II, Division G, Labor, Health and Human Services, Education, and Related Agencies Appropriation of the Consolidated Appropriations Resolution, 2003, Pub. L. 108-7, enacted on February 20, 2003. This Act requires that the Department recover the full costs of operating the Data Bank through user fees. Paragraph (b) of the regulations states:

"The amount of each fee will be determined based on the following criteria:

(1) Use of electronic data processing equipment to obtain information—the actual cost for the service, including computer search time, runs, printouts, and time of computer programmers and operators, or other employees, (2) Photocopying or other forms of reproduction, such as magnetic tapes—actual cost of the operator's time, plus the cost of the machine time and the materials used, (3) Postage—actual cost, and (4) Sending information by special methods requested by the applicant, such as express mail or electronic transfer—the actual cost of the special service."

Based on analysis of the comparative costs of the various methods for filing and paying for queries, the Department is reducing all the entity query fees by \$0.75 per name. The practitioner self-query fee remains at \$10. This price decrease is justified after an evaluation of the Data Bank's operational costs. The implementation of the Data Bank's all-electronic process for querying, reporting, and payment, the Web-based IQRS system, has resulted in a decrease in the Data Bank operating expenditures. In keeping with the Act, and pursuant to the requirements of § 60.2 of the regulations, there are sufficient funds to recover the full costs of operating the Data Bank with a decrease in the user fee.

When a query is for information on one or more physicians, dentists, or other health care practitioners, the appropriate fee will be \$4.25 multiplied by the number of individuals about whom information is being requested. For examples, see the table below.