

Type of form	Number of respondents	Responses per respondent	Average burden per response
Borrower	42	1	0.08 hours.
Physician	42	1	2.75 hours.
Loan Holder.	35	1.2	0.17 hours.

Send comments to Patricia Royston, HRSA Reports Clearance Officer, Room 14-36, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: July 27, 1995.

**J. Henry Montes,**

*Associate Administrator for Policy Coordination.*

[FR Doc. 95-19054 Filed 8-2-95; 8:45 am]

BILLING CODE 4160-15-P

**Public Health Service**

[0905-ZA93]

**Notice of Redesignation of Contract Health Service Delivery Area**

**AGENCY:** Indian Health Service, HHS.

**ACTION:** Notice with request for comments.

**SUMMARY:** This notice advises the public that the Indian Health Service (IHS) proposes to redesignate the geographic boundaries of the Contract Health Service Delivery Area (CHSDA) for the Jamestown S'Klallam Tribe ("The Tribe"). The Jamestown S'Klallam CHSDA currently is comprised of Clallam County in the State of Washington. This county was designated as the Tribe's CHSDA when the IHS published its updated list of CHSDA's in the **Federal Register** of January 10, 1984 (49 FR 1291). It is proposed that the redesignated CHSDA be comprised of Clallam County and Jefferson County in the State of Washington. This notice is issued under authority of 43 FR 34654, August 4, 1978.

**DATES:** Comments must be received on or before September 5, 1995.

**ADDRESSES:** Comments may be mailed to Betty J. Penn, Regulations Officer, Indian Health Service, Room 450, 12300 Twinbrook Parkway, Rockville, Maryland 20852. Comments will be made available for public inspection at this address from 8:30 a.m. to 5:00 p.m., Monday-Friday, beginning approximately 2 weeks after publication of this notice.

**FOR FURTHER INFORMATION CONTACT:**

Leslie M. Morris, Deputy Director, Division of Legislation and Regulations, Office of Planning, Evaluation and Legislation, Indian Health Service, Room 450, 12300 Twinbrook Parkway, Rockville, MD 20852, telephone 301-443-1116. (This is not a toll-free number.)

**SUPPLEMENTARY INFORMATION:** The Secretary of the Interior acknowledged the Tribe as an Indian tribe, effective February 10, 1981 (45 FR 81890). The Tribe has entered into a self-governance compact with the IHS under Title III of the Indian Self-Determination Act (Pub. L. 93-638, as amended) to provide direct services at a clinic facility and also to provide, for eligible Indians, services purchased from private sector health care providers. Such purchased services are called "contract health services."

On August 4, 1978, the IHS published regulations establishing eligibility criteria for receipt of contract health services and for the designation of CHSDA's (43 FR 34654, codified at 42 CFR 36.22, last published in the 1986 version of the Code of Federal Regulations). On September 16, 1987, the IHS published new regulations governing eligibility for IHS services. Congress has repeatedly delayed implementation of the new regulations by imposing annual moratoriums. Section 719(a) of the Indian Health Care Amendments of 1988, Pub. L. 100-713, explicitly provides that during the period of the moratorium placed on implementation of the eligibility regulations, the IHS will provide services pursuant to the criteria in effect on September 15, 1987. Thus, the IHS contract health services program continues to be governed by the regulations contained in the 1986 edition of the Code of Federal Regulations in effect on September 15, 1987. See 42 CFR 36.21 *et seq.* (1986).

As applicable to the Tribe, these regulations provide that, unless otherwise designated, a CHSDA shall consist of a county which includes all or part of a reservation and any county or counties which have a common boundary with the reservation (42 CFR 36.22(a)(6) (1986)). The regulations also provide that after consultation with the tribal governing body or bodies of those reservations included in the CHSDA, the Secretary may, from time to time, redesignate areas within the United States for inclusion in or exclusion from a CHSDA. The regulations require that certain criteria must be considered before any redesignation is made. The criteria are as follows:

(1) The number of Indians residing in the area proposed to be so included or excluded;

(2) Whether the tribal governing body has determined that Indians residing in the area near the reservation are socially and economically affiliated with the tribe;

(3) The geographic proximity to the reservation of the area whose inclusion or exclusion is being considered; and

(4) The level of funding which would be available for the provision of contract health services.

Additionally, the regulations require that any redesignation of a CHSDA must be made in accordance with the procedures of the Administrative Procedure Act (5 U.S.C. 553). In compliance with this requirement, we are publishing this proposal and requesting public comment.

Since approximately 1984, the Tribe has been providing contract health services to 20 of its tribal members residing in Jefferson County, Washington. Under existing regulations, the CHSDA for the Tribe consists of only Clallam County. On December 21, 1992, the Tribe most recently requested the Secretary to redesignate its CHSDA as Clallam County and Jefferson County in the State of Washington. The Tribe based its request on the fact that S'Klallam tribal members are indigenous to Jefferson County, Washington, yet are still ineligible to receive contract health services because they do not reside within the Tribe's existing CHSDA. In addition, the Tribe has developed a land consolidation plan, which has been approved by the Department of the Interior, through the Bureau of Indian Affairs, and which includes tribal trust land in Jefferson County. However, the Jefferson County tribal trust land has not yet been added to the reservation by proclamation of the Secretary of the Interior.

In applying the aforementioned CHSDA redesignation criteria required by operative regulations (43 FR 35654), the following findings are made:

(1) There are 112 Indians residing in Jefferson County, of which 59 are members of the Tribe or have close socioeconomic ties to the Tribe. Of these 59, 20 are already receiving services due to a previous administrative decision. The remaining 53 individuals are not covered by this request as they do not have close social and economic ties to the Tribe and are therefore, not eligible for contract health services under existing law.

(2) The Tribe has determined that contract health services would be available to all of its members and to all federally recognized Indians in Jefferson