applicability offer interested parties an opportunity to comment in writing during the 60-day period beginning on the date the notice is published in the **Federal Register**.

The criteria that the Secretary uses to evaluate the waiver in these cases are the same as those described above under sections 1138(a)(2)(A) and (B) of the Act and have been incorporated into the regulations at § 486.308(e) and (f).

**II. Waiver Request Procedures**

In October 1995, we issued a Program Memorandum (Transmittal No. A–95–11) detailing the waiver process and discussing the information that hospitals must provide in requesting a waiver. We indicated that upon receipt of a waiver request, we would publish a **Federal Register** notice to solicit public comments, as required by section 1138(a)(2)(D) of the Act.

According to these requirements, we will review the request and comments received. During the review process, we may consult on an as-needed basis with the Public Health Service's Division of Transplantation, the United Network for Organ Sharing, and our regional offices. If necessary, we may request additional clarifying information from the applying hospital or others. We will then make a final determination on the waiver request and notify the hospital and the designated and requested OPOs.

**III. Hospital Waiver Request**

As permitted by § 486.308(e), McCullough-Hyde Memorial Hospital of Oxford, Ohio has requested a waiver in order to enter into an agreement with a designated OPO other than the OPO designated for the DSA in which the hospital is located. McCullough-Hyde Memorial Hospital is requesting a waiver to work with: LifeConnection of Ohio, 40 Wyoming Street, Dayton, OH 45409.

McCullough-Hyde Memorial Hospital's Designated OPO is: LifeCenter Organ Donor Network, 2925 Vernon Place, Suite 300, Cincinnati, OH 45219.

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; Program No. 93.774, Medicare—Supplementary Medical Insurance, and Program No. 93.778, Medical Assistance Program)

Dated: June 9, 2008.

**Kerry Weems,**

*Acting Administrator, Centers for Medicare & Medicaid Services.*

[FR Doc. E8–13821 Filed 6–19–08; 8:45 am]

**BILLING CODE 4120–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

### Notice of Public Comment on Tribal Consultation Sessions To Be Held on July 21, July 23, and July 31, 2008

**AGENCY:** Office of Head Start (OHS), Administration for Children and Families, HHS.

**ACTION:** Notice of Public Comment on Tribal Consultation Sessions to be held on July 21, July 23, and July 31, 2008.

**SUMMARY:** Pursuant to the Improving Head Start for School Readiness Act of 2007, Public Law 110–134, notice is hereby given of three one-day Tribal Consultation Sessions to be held between the Department of Health and Human Services, Administration for Children and Families, Office of Head Start leadership and the leadership of Tribal governments operating Head Start (including Early Head Start) programs. The purpose of these Consultation Sessions is to discuss ways to better meet the needs of Indian, including Alaska Native, children and their families, taking into consideration funding allocations, distribution formulas, and other issues affecting the delivery of Head Start services in their geographic locations [42.U.S.C. 9835, Section 640(l)(4)].

*Dates & Locations:*

July 21, 2008—Kansas City, Missouri.
July 23, 2008—Denver, Colorado.
July 31, 2008—Seattle, Washington.

**FOR FURTHER INFORMATION CONTACT:** Renée Perthuis, Acting Regional Program Manager, American Indian/Alaska Native Program Branch, Office of Head Start, e-mail *reneeaian@acf.hhs.gov* or (202) 260–1721. Register to attend one of these sessions online at *http://www.hsnrc.org.*

**SUPPLEMENTARY INFORMATION:** The Department of Health and Human Services would like to invite leaders of Tribal governments operating Head Start (including Early Head Start) programs to participate in a formal Consultation Session with OHS leadership. The Consultation Sessions will take place as follows:

July 21, 2008—Kansas City, Missouri.
July 23, 2008—Denver, Colorado.
July 31, 2008—Seattle, Washington.

Limited resources (fiscal, staff, and time constraints) preclude holding a Consultation Session in each ACF Region. These three Regions (VII, VIII, and X) have been selected in an attempt to accommodate the majority of Tribes operating Head Start and Early Head Start programs.

The purpose of the Consultation Sessions is to solicit input on ways to better meet the needs of Indian, including Alaska Native, children and their families, taking into consideration funding allocations, distribution formulas, and other issues affecting the delivery of Head Start services in their geographic locations. Specific topics will include policy, research, Head Start/Early Head Start conversion, program quality, and monitoring.

Tribal leaders and designated representatives interested in submitting written testimony or topics for the Consultation Session agenda should contact Renée Perthuis at *reneeaian@acf.hhs.gov.* Tribal leaders submitting testimony or topics should provide a brief description of the subject matter along with contact information for the proposed presenter.

The Consultation Sessions will be conducted with elected or appointed leaders of Tribal governments and their designated representatives [42.U.S.C. 9835, Section 640(l)(4)(A)]. Representatives from Tribal organizations and Native non-profit organizations are welcome to attend as observers. Those wishing to participate in the discussions must have a copy of a written resolution, voted on and approved by the Tribal government, which authorizes them to serve as a representative of the Tribe. This should be submitted not less than three days in advance of the Consultation Session to Renée Perthuis at 202–260–9336 (fax).

A detailed report of each Consultation Session will be prepared and made available within 90 days of each consultation to all Tribal governments receiving funds for Head Start (including Early Head Start) programs.

Dated: June 16, 2008.

**Patricia Brown,**

*Acting Director, Office of Head Start.*

[FR Doc. E8–14015 Filed 6–19–08; 8:45 am]

**BILLING CODE 4184–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

**[Docket No. FDA–1986–F–0277] (formerly Docket No. 1986F–0364)**

### Danisco USA, Inc.; Withdrawal of Food Additive Petition

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing the withdrawal, without prejudice to a

future filing, of a food additive petition (FAP 6A3958) proposing that the food additive regulations be amended to provide for the safe use of alitame as a sweetening agent or flavoring in food.

**FOR FURTHER INFORMATION CONTACT:** Blondell Anderson, Center for Food Safety and Applied Nutrition (HFS–265), Food and Drug Administration, 5100 Paint Branch Pkwy., College Park, MD 20740–3835, 301–436–1304.

**SUPPLEMENTARY INFORMATION:** In a notice published in the **Federal Register** of September 29, 1986 (51 FR 34503), FDA announced that a food additive petition (FAP 6A3958) had been filed by Pfizer Central Research, Pfizer, Inc., 565 Taxter Rd., suite 590, Elmsford, NY 10523. The petition proposed to amend the food additive regulations in part 172 *Food Additives Permitted for Direct Addition to Food for Human Consumption* (21 CFR part 172) to provide for the safe use of alitame (L-α-aspartyl-*N*-2,2,4,4-tetramethyl-3-thietanyl)-D-alaninamide (CAS Reg. No. 80863–62–3) as a sweetening agent or flavoring in food. The rights to the petition currently belong to Danisco USA, Inc., 440 Saw Mill River Rd., Ardsley, NY 10502–2605. Danisco USA, Inc., has now withdrawn the petition without prejudice to a future filing (21 CFR 171.7).

Dated: June 12, 2008.

**Laura M. Tarantino,**

*Director, Office of Food Additive Safety, Center for Food Safety and Applied Nutrition.*

[FR Doc. E8–13998 Filed 6–19–08; 8:45 am]

**BILLING CODE 4160–01–S**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Service Administration

### Advisory Committee on Interdisciplinary, Community-Based Linkages; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), notice is hereby given of the following meeting:

*Name:* Advisory Committee on Interdisciplinary, Community-Based Linkages (ACICBL).

*Dates and Times:* July 16, 2008, 11 a.m.–4 p.m., EST. July 17, 2008, 11 a.m.–4 p.m., EST.

*Place:* (Audio Conference Call).

*Status:* The meeting will be open to the public; audio conference access limited only by availability of telephone ports.

*Purpose:* The Committee will be focusing on rural issues and how the Title VII Interdisciplinary, Community-Based Training Grant Programs identified under sections 751–756, Part D of the Public Health Service Act can respond to the current rural healthcare workforce needs. The Committee has invited speakers to highlight various topics related to rural healthcare workforce issues including, but not limited to, discipline specific shortages; recruitment and retention; health professions training; faculty development; telemedicine; and other specific rural health care issues. The meeting will afford committee members with the opportunity to identify and discuss the current status of the healthcare workforce in rural America and formulate appropriate recommendations to the Secretary and to the Congress regarding a variety of training strategies to address the health workforce shortage issues.

*Agenda:* The ACICBL agenda includes an overview of the Committee's general business activities, presentations by experts on rural healthcare workforce related issues, and discussion sessions specific for the development of recommendations to be addressed in the Eighth Annual ACICBL Report.

Agenda items are subject to change as dictated by the priorities of the Committee.

*Supplementary Information:* The ACICBL will meet on Wednesday, July 16 and Thursday, July 17, 2008 from 11 a.m. to 4 p.m. (EST) via audio conference. To participate in this audio conference call, please dial 1–888–697–8510 and provide the following information:

*Leader's Name:* Mr. Lou Coccodrilli.

*Passcode:* 2214090.

*For Further Information Contact:* Anyone requesting information regarding the Committee should contact Louis D. Coccodrilli, Designated Federal Official for the ACICBL, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Rm 9–36, 5600 Fishers Lane, Rockville, Maryland 20857; (301) 443–6950 or *lcoccodrilli@hrsa.gov.* Adriana Guerra, Public Health Fellow, can also be contacted for inquiries at (301) 443–6194 or *aguerra@hrsa.gov.*

Dated: June 17, 2008.

**Alexandra Huttinger,**

*Director, Division of Policy Review and Coordination.*

[FR Doc. E8–14039 Filed 6–19–08; 8:45 am]

**BILLING CODE 4165–15–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

### Reimbursement of Travel and Subsistence Expenses Toward Living Organ Donation Eligibility Guidelines

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Publication of Change to Program Eligibility Guidelines.

**SUMMARY:** This notice finalizes an amendment to the eligibility guidelines proposed on March 5, 2008, in the **Federal Register** (73 FR 11930). The purpose of this notice was to solicit comments on the amendment to the Program Eligibility Guidelines proposed by HRSA concerning the Reimbursement of Travel and Subsistence Expenses Program.

**FOR FURTHER INFORMATION CONTACT:** James F. Burdick, M.D., Director, Division of Transplantation, Healthcare Systems Bureau, Health Resources and Services Administration (HRSA), Parklawn Building, Room 12C–06, 5600 Fishers Lane, Rockville, Maryland 20857; telephone (301) 443–7577; fax (301) 594–6095; or e-mail: *jburdick@hrsa.gov.*

**SUPPLEMENTARY INFORMATION:** In its final program eligibility guidelines, HRSA explained that ''[t]he Program will pay for a total of up to five trips; three for the donor and two for accompanying persons. The accompanying persons need not be the same each trip.'' HRSA proposes amending this paragraph to read: ''[t]he Program will pay for a total of up to five trips; three for the donor and two for accompanying persons. However, in cases in which the transplant center requests the donor to return to the transplant center for additional visits as a result of donor complications or other health related issues, the National Living Donor Assistance Center (NLDAC) may provide reimbursement for the additional visit(s) for the donor and an accompanying person. The accompanying persons need not be the same in each trip.'' The purpose of this proposed change is to accommodate individuals who experience donor complications or other health related issues relating to donation.

HRSA received one public comment on this request. The respondent endorses HRSA's proposed amendment because ''it will accommodate individuals who experience donor complications or other health related issues relating to donation''. HRSA wishes to thank everyone who reviewed this request even if a formal response was not sent to HRSA.

HRSA approved the amendment to the Reimbursement of Travel and Subsistence Expenses Program Eligibility Guidelines as published in the **Federal Register**. The amended eligibility criteria are included in this document. The amended eligibility criteria guidelines document is also available at *http://www.livingdonorassistancecenter.gov.*