

insertion of an IOL. For an ASC that receives a large portion of its revenue from the Medicare program, the changes in this notice will likely have a greater influence on the ASC's operations and management decisions than they will have on an ASC that receives a large portion of revenue from other sources.

In general, we expect the rate changes in this notice to affect ASCs positively by increasing the rates upon which payments are based.

2. Impact on Hospitals and Small Rural Hospitals

Section 1833(i)(3)(A) of the Act mandates the method of determining payments to hospitals for ASC-approved procedures performed in an outpatient setting. The Congress believed some comparability should exist in the amount of payment to hospitals and ASCs for similar procedures. The Congress recognized, however, that hospitals have certain overhead costs that ASCs do not and allowed for those costs by establishing a blended payment methodology. For ASC procedures performed in an outpatient setting, hospitals are paid based on the lower of their aggregate costs, aggregate charges, or a blend of 58 percent of the applicable wage-adjusted ASC rate and 42 percent of the lower of the hospital's aggregate costs or charges. According to statistics from the Office of the Actuary within HCFA, 12.7 percent of Medicare payments to hospitals by intermediaries is attributable to services furnished in conjunction with ASC-covered procedures.

We believe that, due to a variety of factors, the ASC rate increase in this notice will result in only a 0.9 percent increase in intermediary payments to hospitals for ASC-covered procedures. We would not expect an ASC rate increase in every instance to keep pace with actual hospital cost increases, although we would fully recognize cost increases resulting from inflation alone to the extent that the blended payment methodology includes aggregate hospital costs. The weight of the ASC portion of the blended payment amount, which would reflect the ASC rate increase, is offset to a degree when hospital costs significantly exceed the ASC rate. Another element that would eliminate the effect of the ASC rate increase on hospital outpatient payments is the application of the lowest payment screen in determining payments. Applying the lowest of costs, charges, or a blend can result in some hospitals being paid entirely on the basis of a hospital's costs or charges. In those instances, the increase in the ASC rates will have no effect on hospital

payments. The number of Medicare beneficiaries a hospital serves and its case-mix variation would also influence the total impact of the new ASC rates on Medicare payments to hospitals. Based on these factors, we have determined, and we certify that this notice will not have a significant impact on a substantial number of small rural hospitals. Therefore, we have not prepared a small rural hospital impact analysis.

V. Waiver of 30-Day Delay in the Effective Date

We ordinarily publish notices, such as this, subject to a 30-day delay in the effective date. However, if adherence to this procedure would be impractical, unnecessary, or contrary to the public interest, we may waive the delay in the effective date. The provisions of this notice are effective for services furnished beginning on October 1, 1995, to coincide with the FY 1996 PPS updated wage index. These provisions will increase payment to ASCs by 3.2 percent (as modified by any change to the wage indices), in accordance with section 1833(i)(2) of the Act, which requires automatic application of an inflation adjustment. As a practical matter, if we allowed a 30-day delay in the effective date of this notice, ASCs would be unable to take timely advantage of the increase in payment rates contained in this notice. Moreover, we believe a delay is impractical and unnecessary because the statute, which, as explained earlier, provides that ASC payment rates be increased by the percentage increase in the CPI-U if the Secretary has not updated rates during a fiscal year beginning with FY 1996. Therefore, we find good cause to waive the delay in the effective date.

In accordance with the provisions of Executive Order 12866, this notice was not reviewed by the Office of Management and Budget.

(Sec. 1832(a)(2)(F) and 1833(i)(1) and (2) of the Social Security Act (42 U.S.C. 1395k(a)(2)(F) and 1395l(i)(1) and (2)); 42 CFR 416.120, 416.125, and 416.130)

(Catalog of Federal Domestic Assistance Programs No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: July 28, 1995.

Bruce C. Vladeck,

Administrator, Health Care Financing Administration.

[FR Doc. 95-23742 Filed 9-25-95; 8:45 am]

BILLING CODE 4120-01-P

National Institutes of Health

National Institute on Alcohol Abuse and Alcoholism; Notice of Meetings

Pursuant to Pub. L. 92-463, notice is hereby given of meetings of the National Institute on Alcohol Abuse and Alcoholism.

The meetings will be open to the public, as noted below, to discuss administrative details or other issues relating to committee activities as indicated in the notice. Attendance by the public will be limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should contact Ms. Ida Nestorio at (301) 443-4376.

The following meetings will be closed to the public as indicated below in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6) of Title 5, U.S.C. and sec. 10(d) of Public Law 92-463, for the review, discussion and evaluation of individual research grant applications. These applications and the discussions could reveal confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Summaries of the meetings and the rosters of committee members may be obtained from: Ms. Ida Nestorio, NIAAA Committee Management Officer, National Institute on Alcohol Abuse and Alcoholism, Willco Building, Suite 409, 6000 Executive Blvd., Rockville, MD 20892-7003, Telephone: (301) 443-4376. Other information pertaining to the meetings can be obtained from the contact person indicated.

Name of Committee: Neuroscience and Behavior Subcommittee of the Alcohol Biomedical Research Review Committee.

Dates of Meeting: October 11-12, 1995.

Place of Meeting: Hyatt Regency Bethesda, One Bethesda Metro Center, Bethesda, MD 20814.

Open: October 11, 9 a.m. to 10:00 a.m.

Agenda: Discussion of issues related to Alcohol, Mental Health, and Drug Abuse grant review integration to DRG.

Closed: October 11, 10:00 a.m. to adjournment.

Agenda: Review, discussion and evaluation of individual research grant applications.

Contact Person: Antonio Noronha, Ph.D., 6000 Executive Blvd, Suite 409, Bethesda, MD 20892-7003, 301-443-9419.

Name of Committee: Biochemistry, Physiology, and Medicine Subcommittee of the Alcohol Biomedical Research Review Committee.

Dates of Meeting: October 16–18, 1995.
Place of Meeting: Hyatt Regency Bethesda, One Bethesda Metro Center, Bethesda, MD 20814.

Open: October 16, 9 a.m. to 10:00 a.m.

Agenda: Discussion of issues related to Alcohol, Mental Health, and Drug Abuse grant review integration to DRG.

Closed: October 16, 10:00 a.m. to adjournment.

Agenda: Review, discussion and evaluation of individual research grant applications.

Contact Person: Ronald Suddenhorf, Ph.D., 6000 Executive Blvd, Suite 409, Bethesda, MD 20892–7003, 301–443–2932.

The following meetings are totally closed:

Name of Committee: Clinical and Treatment Subcommittee of the Alcohol Psychosocial Research Review Committee.

Dates of Meeting: October 19–20, 1995.

Place of Meeting: Double Tree Hotel, 1750 Rockville Pike, Rockville, MD 20852.

Time: October 19, 9:00 a.m. to adjournment.

Agenda: Review, discussion and evaluation of individual research grant applications.

Contact Person: Elsie D. Taylor, 6000 Executive Blvd, Suite 409, Bethesda, MD 20892–7003, 301–443–9787.

Name of Committee: Epidemiology and Prevention Subcommittee of the Alcohol Psychosocial Research Review Committee.

Dates of Meeting: October 26–27, 1995.

Place of Meeting: River Inn, 924 25th Street, N.W., Washington, D.C. 20037.

Time: October 26, 9:00 a.m. to adjournment.

Agenda: Review, discussion and evaluation of individual research grant applications.

Contact Person: Thomas D. Sevy, M.S.W., 6000 Executive Blvd, Suite 409, Bethesda, MD 20892–7003, 301–443–6106.

(Catalog of Federal Domestic Assistance Program No. 93.271, Alcohol Research Career Development Awards for Scientists and Clinicians; 93.272, Alcohol National Research Service Awards for Research Training; 93.273, Alcohol Research Programs; 93.281, Scientist Development Award, Research Scientist Development Award, Scientist Development Award for Clinicians, and Research Scientist Award; 93.891, Alcohol Research Center Grants; National Institutes of Health).

Dated: September 19, 1995.

Susan K. Feldman,

Committee Management Officer, NIH.

[FR Doc. 95–23757 Filed 9–25–95; 8:45 am]

BILLING CODE 4140–01–M

National Heart, Lung, and Blood Institute

Notice of Meeting of the National Heart, Lung, and Blood Advisory Council

Pursuant to Pub. L. 92–463, notice is hereby given of the meeting of the National Heart, Lung, and Blood Advisory Council, National Heart, Lung,

and Blood Institute, October 26–27, 1995, National Institutes of Health, 9000 Rockville Pike, Building 31, Conference Room 10, Bethesda, Maryland 20892.

The Council meeting will be open to the public on October 26 from 8:30 a.m. to approximately 3:30 p.m. for discussion of program policies and issues. Attendance by the public is limited to space available.

In accordance with the provisions set forth in secs. 552b(c)(4) and 522b(c)(6), Title 5, U.S.C., sec. 10(d) of Pub. L. 92–463, the Council meeting will be closed to the public from approximately 3:30 p.m. to recess on October 26 and from 8:30 a.m. to adjournment on October 27 for the review, discussion and evaluation of individual grant applications. These applications and the discussions could reveal confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Ms. Terry Long, Chief, Communications and Public Information Branch, National Heart, Lung, and Blood Institute, Building 31, Room 4A21, National Institutes of Health, Bethesda, Maryland 20892, (301) 496–4236, will provide a summary of the meetings and a roster of the Council members.

Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should contact the Executive Secretary in advance of the meeting.

Dr. Ronald G. Geller, Executive Secretary, National Heart, Lung, and Blood Advisory Council, Rockledge Building (RKL2), Room 7100, National Institutes of Health, Bethesda, Maryland 20892, (301) 435–0260, will furnish substantive program information.

(Catalog of Federal Domestic Assistance Program Nos. 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; and 93.839, Blood and Diseases and Resources Research, National Institutes of Health.)

Dated: September 19, 1995.

Susan K. Feldman,

Committee Management Officer, NIH.

[FR Doc. 95–23756 Filed 9–25–95; 8:45 am]

BILLING CODE 4140–01–M

National Heart, Lung, and Blood Institute; Notice of a Closed Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice

is hereby given of the following Heart, Lung, and Blood Special Emphasis Panel (SEP) meeting:

Name of SEP: Demonstration and Education Research Applications.

Date: October 17–18, 1995.

Time: 9:00 a.m.

Place: Stouffer Concourse Hotel, Arlington, Virginia.

Contact Person: Louise P. Corman, Ph.D.

Purpose/Agenda: Rockledge II, Rm. 7180, 6701 Rockledge Drive, Bethesda, Maryland 20892–7924, (301) 435–0270.

The meeting will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

(Catalog of Federal Domestic Assistance Programs Nos. 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; and 93.839, Blood Diseases and Resources Research, National Institutes of Health.)

Dated: September 19, 1995.

Susan K. Feldman,

Committee Management Officer, NIH.

[FR Doc. 95–23753 Filed 9–25–95; 8:45 am]

BILLING CODE 4140–01–M

National Institute on Aging; Notice of Closed Meetings

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meetings:

Name of Subcommittee: Biological and Clinical Aging Review Subcommittee A.

Date: November 8, 1995.

Time: 1:00 p.m. to adjournment.

Place: The Gateway Building, 7201 Wisconsin Avenue, 5th Floor Conference Room, Bethesda, Maryland 20852–9205.

Contact Person: Dr. Arthur Schaerdel, Scientific Review Administrator, Gateway Building, Room 2C212, National Institutes of Health, Bethesda, Maryland 20892–9205, (301) 496–9666.

Purpose/Agenda: For the review, discussion, and evaluation of individual research grant applications.

Name of Subcommittee: Biological and Clinical Aging Review Subcommittee B.

Date: October 23–25, 1995

Time: 7:00 p.m. on October 23 to adjournment on October 25.

Place: Double Tree Hotel, 1750 Rockville Pike, Rockville, Maryland 20852.

Contact Person: Dr. James Harwood, Scientific Review Administrator, Gateway