presentations from the public will be scheduled between approximately 8:45 a.m. and 9:15 a.m., and between 3:30 p.m. and 4 p.m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before January 22, 1999, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

*Closed Committee Deliberations*: On January 29, 1999, from 5:30 p.m. to 6:30 p.m., the meeting will be closed to permit discussion and review of trade secret and/or confidential information (5 U.S.C. 552b(c)(4)). This portion of the meeting will be closed to discuss issues relating to pending or proposed investigational new drug applications.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: January 7, 1999.

**Michael A. Friedman,**

*Deputy Commissioner for Operations.*

[FR Doc. 99–740 Filed 1–12–99; 8:45 am]

**BILLING CODE 4160–01–F**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of Inspector General

### Solicitation of Information and Recommendations for Developing OIG Compliance Program Guidance for the Hospice Industry

**AGENCY:** Office of Inspector General (OIG), HHS.

**ACTION:** Notice.

**SUMMARY:** This **Federal Register** notice seeks the input and recommendations of interested parties into the OIG's development of a compliance program guidance for the hospice industry and its providers, especially those serving Medicare and Medicaid beneficiaries. Many providers and provider organizations have expressed an interest in better protecting their operations from fraud and abuse. Previously, the OIG has developed guidances for hospitals, clinical laboratories, home health agencies and third-party medical billing companies. In order to provide a clear and meaningful guidance to those segments of the health care industry involved in hospice operations, the OIG is soliciting comments, recommendations and suggestions from concerned parties and organizations on how best to develop a compliance program guidance and reduce fraud and abuse within the hospice industry.

**DATES:** To assure consideration, comments must be delivered to the address provided below by no later than 5 p.m. on March 15, 1999.

**ADDRESSES:** Please mail or deliver your written comments, recommendations and suggestions to following address: Department of Health and Human Services, Office of Inspector General, Attention: OIG–6–CPG, Room 5246, Cohen Building, 330 Independence Avenue, SW, Washington, DC 20201.

We do not accept comments by facsimile (FAX) transmission. In commenting, please refer to the file code OIG–6–CPG. Comments received timely will be available for public inspection as they are received, generally beginning approximately 3 weeks after publication of a document, in Room 5541 of the Office of Inspector General at 330 Independence Avenue, SW, Washington, DC 20201 on Monday through Friday of each week from 8:00 a.m. to 4:30 p.m.

**FOR FURTHER INFORMATION CONTACT:** Michael Shaw, Office of Counsel to the Inspector General, (202) 619–2078.

**SUPPLEMENTARY INFORMATION:** The development of compliance program guidances has become a major initiative of the OIG in its effort to engage the private health care community in addressing and combating fraud and abuse. Recently, the OIG has developed and issued compliance program guidance directed at various segments of the health care industry.[1] New OIG guidance under consideration will be designed to provide clear direction and assistance to Medicare and Medicaid hospice providers that are interested in reducing and eliminating fraud and abuse within their organizations.

The guidances represent the culmination of the OIG's suggestions on how providers can most effectively establish internal controls and implement monitoring procedures to identify, correct and prevent fraudulent and wasteful activities. As stated in previous guidances, these guidelines are not mandatory for providers, nor do they represent an exclusive document of advisable elements of a compliance program.

In an effort to formalize the process by which the OIG receives public comments in connection with compliance program guidances, the OIG is seeking, through this **Federal Register** notice, formal input from interested parties as the OIG begins developing the compliance program guidance directed at the hospice industry and its providers. The OIG will give consideration to all comments, recommendations and suggestions submitted and received by the time frame indicated above.

We anticipate that the hospice guidance will contain seven elements that the OIG considers necessary for a comprehensive compliance program. These seven elements have been discussed in our previous guidances and include:

- The development of written policies and procedures.
- The designation of a compliance officer and other appropriate bodies.
- The development and implementation of effective training and education programs.
- The development and maintenance of effective lines of communication.
- The enforcement of standards through well-publicized disciplinary guidelines.
- The use of audits and other evaluation techniques to monitor compliance.
- The development of procedures to respond to detected offenses and to initiate corrective action.

The OIG would appreciate specific comments, recommendations and suggestions on (1) risk areas for the hospice industry, and (2) aspects of the seven elements contained in previous guidances that may need to be modified to reflect the unique characteristics of the hospice industry. Detailed justifications and empirical data supporting suggestions would be appreciated. We are also hopeful that any comments, recommendations and input be submitted in a format that addresses the above topics in a concise manner, rather than in the form of comprehensive draft guidance that mirrors previous guidances.

Dated: January 6, 1999.

**June Gibbs Brown,**

*Inspector General.*

[FR Doc. 99–689 Filed 1–12–99; 8:45 am]

**BILLING CODE 4150–04–P**

[1] See 62 FR 9435 (March 3, 1997) for clinical laboratories, as amended in 63 FR 45076 (August 24, 1998); 63 FR 8987 (February 23, 1998) for hospitals; 63 FR 42410 (August 7, 1998) for home health agencies, and 63 FR 70138 (December 18, 1998) for third party medical billing companies. The guidances can also be found on the OIG web site at http://www.dhhs.gov/progorg/oig.