

to the survey and certification of facilities are at 42 CFR part 488.

Generally, in order to enter into an agreement, an HHA must first be certified by the State survey agency as complying with the conditions or standards set forth in the statute and part 484 of our regulations. Then, the HHA is subject to regular surveys by a State survey agency to determine whether it continues to meet the requirements. There is an alternative, however, to surveys by State agencies.

Section 1865(b)(1) of the Act permits "accredited" HHAs to be exempt from routine surveys by State survey agencies to determine compliance with Medicare conditions of participation. Section 1865(b)(1) of the Act provides that if the Secretary finds that accreditation of a provider entity by a national accreditation body demonstrates that all applicable conditions are met or exceeded, the Secretary "deems" those requirements to be met by the HHA. Our regulations concerning reapproval of accrediting organizations are set forth at §§ 488.4 and 488.8(d)(3). Section 488.8(d)(3) requires reapplication at least every 6 years and permits the Secretary to determine the required materials from those enumerated in § 488.4, and the deadline to reapply for continued approval of deeming authority. The Community Health Accreditation Program, Incorporated (CHAP) is a currently recognized accreditation organization for HHAs.

II. Approval of Deeming Organizations

Section 1865(b)(2) of the Act further requires that the Secretary's findings concerning review of national accrediting organizations consider, among other factors, the accreditation organization's requirements for accreditation, its survey procedures, its ability to provide adequate resources for conducting required surveys and ability to supply information for use in enforcement activities, its monitoring procedures for provider entities found out of compliance with the conditions or requirements, and its ability to provide the Secretary with necessary data for validation.

Section 1865(b)(3)(A) of the Act requires that the Secretary publish, within 60 days of the receipt of an organization's complete application, a notice that identifies the national accreditation body making the request, describes the nature of the request, and provides at least a 30-day public comment period. Subsequently, the Secretary has 210 days from the receipt of the request to publish a finding of approval or denial of the application.

The purpose of this notice is to notify the public of CHAP's request for reapproval and continuation of its deeming authority on the basis that the Secretary find that its separate accreditation programs for HHAs meet or exceed the Medicare conditions. This notice also solicits public comment on the ability of CHAP's requirements to meet or exceed the Medicare conditions of participation for HHAs.

III. Evaluation of Deeming Request

On July 15, 1999, CHAP submitted all the necessary information concerning its request to be reapproved as a deeming organization for HHAs to permit us to make a determination. Under section 1865(b)(2) of the Act and our regulations at § 488.8 ("Federal review of accreditation organizations"), our review and evaluation of a national accreditation organization will be conducted in accordance with, but not necessarily limited to, the following factors:

- The equivalency of CHAP's requirements for an HHA to our comparable HHA conditions of participation.
- CHAP's survey processes, to determine the following:
 - The composition of the survey team, surveyor qualifications, and CHAP's ability to provide continuing surveyor training.
 - The comparability of its implemented processes to those of State agencies, including survey frequency, and its ability to investigate and respond appropriately to complaints against accredited facilities.
 - Its procedures for monitoring HHAs found by CHAP to be out of compliance with program requirements. (These procedures are used only when CHAP identifies noncompliance. If noncompliance is identified through validation reviews, the survey agency monitors corrections as specified at § 488.7(b)(2).)
 - Its ability to report deficiencies to the surveyed facilities and respond to the facility's plan of correction in a timely manner.
 - The ability of CHAP to provide us with electronic data in ASCII comparable code and any reports necessary for effective validation and assessment of its survey processes.
 - The adequacy of CHAP's staff and other resources, and its financial viability.
 - CHAP's ability to provide adequate funding for performing required surveys.

—CHAP's policies with respect to whether surveys are announced or unannounced.

—CHAP's agreement to provide us with a copy of the most current accreditation survey together with any other information related to the survey as we may require (including corrective action plans).

IV. Notice Upon Completion of Evaluation

Upon completion of our evaluation, including evaluation of comments received as a result of this notice, we will publish a notice in the **Federal Register** announcing the result of our evaluation.

Authority: Sec. 1865(b)(3)(A) of the Social Security Act (42 U.S.C. 1395bb(b)(3)(A)) (Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance)

Dated: September 1, 1999.

Michael M. Hash,

Deputy Administrator, Health Care Financing Administration.

[FR Doc. 99-23625 Filed 9-9-99; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCFA-2057-PN]

Medicare and Medicaid Programs; Reapplication of the American Osteopathic Association (AOA) for Continued Approval of Deeming Authority for Hospitals

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Proposed notice.

SUMMARY: This notice announces the receipt of a renewal application from the American Osteopathic Association (AOA) for continued recognition as a national accreditation program for hospitals that wish to participate in the Medicare or Medicaid programs. Section 1865(b)(3)(A) of the Social Security Act (the Act) requires the Secretary to publish a notice within 60 days of the receipt of an organization's complete application, identifying the national accreditation body making the request, describing the nature of the request, and providing a 30-day public comment period.

DATES: Written comments will be considered if we receive them at the appropriate address, as provided below, no later than 5 p.m. on October 12, 1999.

ADDRESSES: Mail written comments (one original and three copies) to the following address: Health Care Financing Administration, Department of Health and Human Services, Attention: HCFA-2057-PN, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

If you prefer, you may deliver your written comments (one original and three copies) to one of the following addresses:

Room 443-G, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201, or Room C5-16-03, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Because of staffing and resource limitations, we cannot accept audio, visual, or facsimile (FAX) copies of comments. In commenting, please refer to file code HCFA-2057-PN. 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 443-G of the Department's offices at 200 Independence Avenue, SW., Washington, DC, on Monday through Friday of each week from 8:30 a.m. to 5 p.m. (Phone: (202) 690-7890).

FOR FURTHER INFORMATION CONTACT: Janice Adams-King, (410) 786-8354.

SUPPLEMENTARY INFORMATION:

I. Background

Under the Medicare program, eligible beneficiaries may receive covered services in a hospital provided certain requirements are met. The regulations specifying the Medicare conditions of participation for hospital care are located in 42 CFR part 482. These conditions implement section 1861(e) of the Social Security Act (the Act), which specifies services covered as hospital care and the conditions that a hospital must meet in order to participate in the Medicare program. Other relevant sections of the Act are section 1811, which specifies eligibility requirements for the individual and the amount of benefits; and sections 1814(l), 1876(h)(2), and 1886(c)(6) of the Act, which contain conditions of payment for hospitals.

Regulations concerning provider agreements are at 42 CFR part 489 and those pertaining to the activities relating to the survey and certification of facilities are at 42 CFR part 488. Our regulations at 42 CFR part 482 specify the conditions that a hospital must meet in order to participate in the Medicare program, the scope of covered services, and the conditions for Medicare payment for hospital services.

Generally, in order to enter into an agreement, a hospital must first be certified by a State survey agency as complying with the conditions or standards set forth in part 482 of our regulations. Then, the hospital is subject to regular surveys by a State survey agency to determine whether it continues to meet these requirements. There is an alternative, however, to surveys by State agencies.

Section 1865(b)(1) of the Act permits "accredited" hospitals to be exempt from routine surveys by State survey agencies to determine compliance with Medicare conditions of participation. Section 1865(b)(1) of the Act provides that if a provider entity by a national accreditation body demonstrates that all applicable conditions are met or exceed the Medicare conditions, the Secretary can "deem" the hospital as having met the requirements.

Our regulations concerning reapproval of accrediting organizations are set forth at §§ 488.4 and 488.8(d)(3). The regulations at § 488.8(d)(3) require reapplication at least every 6 years and permit HCFA to determine the required materials from those enumerated in § 488.4, and the deadline to reapply for continued approval of deeming authority.

This organization is currently a recognized accreditation organization for hospitals.

II. Approval of Deeming Organizations

Section 1865(b)(2) of the Act further requires that the Secretary's findings concerning review and reapproval of national accrediting organizations consider, among other factors, the reapplying accreditation organization's requirements for accreditation, its survey procedures, its ability to provide adequate resources for conducting required surveys and ability to supply information for use in enforcement activities, its monitoring procedures for provider entities found out of compliance with the conditions or requirements, and its ability to provide the Secretary with necessary data for validation.

Section 1865(b)(3)(A) of the Act requires that the Secretary publish, within 60 days of the receipt of an organization's complete reapplication, a notice identifying the national accreditation body making the request, describing the nature of the request, and providing at least a 30-day public comment period. Subsequently, the Secretary has 210 days from the receipt of the request to publish a finding of approval or denial of the reapplication.

The purpose of this notice is to notify the public of the request of AOA for

reapproval and continuation of its deeming authority on the basis that the Secretary find that its separate accreditation programs for hospital care meet or exceed the Medicare conditions. This notice also solicits public comment on the ability of each body's requirements to meet or exceed the Medicare conditions of participation.

III. Evaluation of Deeming Request

On 9/1/1999, AOA submitted all the necessary information concerning its request for reapproval as a deeming organization for hospitals to permit us to make a determination. Under section 1865(b)(2) of the Act and our regulations at § 488.8 ("Federal review of accreditation organizations"), our review and evaluation of a national accreditation organization will be conducted in accordance with, but not necessarily limited to, the following criteria:

- The equivalency of AOA's requirements for a hospital to HCFA's comparable hospital requirements.
- AOA's survey process, to determine the following:
 - The composition of the survey team, surveyor qualifications, and AOA's ability to provide continuing surveyor training.
 - The comparability of AOA's implemented process to those of State agencies, including survey frequency, and its ability to investigate and respond appropriately to complaints against accredited facilities;
 - AOA's procedures for monitoring providers or suppliers found to be out of compliance with AOA program requirements. (These procedures are used only when AOA identifies noncompliance. If noncompliance is identified through validation reviews, the survey agency monitors corrections as specified at § 488.7(b)(3).)
 - AOA's ability to report deficiencies to the surveyed facilities and respond to the facility's plan of correction in a timely manner.
 - The ability of AOA to provide us with electronic data in ASCII comparable code and any reports necessary for effective validation and assessment of its survey processes.
 - The adequacy of AOA staff and other resources, and their financial viability.
 - AOA's ability to provide adequate funding for performing required surveys.
 - AOA's policies with respect to whether surveys are announced or unannounced.
 - AOA's agreement to provide us with a copy of its most current

accreditation survey with any other information related to the survey as we may require (including corrective action plans).

IV. Response to Comments and Notice Upon Completion of Evaluation

Because of the large number of items of correspondence we normally receive on **Federal Register** documents published for comment, we are not able to acknowledge or respond to them individually. We will consider all comments we receive by the date and time specified in the "DATES" section of this preamble.

Upon completion of our evaluation, including evaluation of comments received as a result of this notice, we will publish a notice in the **Federal Register** announcing the result of our evaluation.

Authority: Sec. 1865(b)(3)(A) of the Social Security Act (42 U.S.C. 1395bb(b)(3)(A)) (Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance)

Dated: September 1, 1999.

Michael M. Hash,

Deputy Administrator, Health Care Financing Administration.

[FR Doc. 99-23626 Filed 9-9-99; 8:45 am]

BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of 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 meeting of the National Cancer Advisory Board.

The meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and/or contract proposals and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications and/or contract proposals,

the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Cancer Advisory Board.

Dates: September 22-24, 1999.

Name of Committee: National Cancer Advisory Board, Subcommittee on Activities and Agenda.

Closed: September 22, 7:30 p.m.—Recess.

Agenda: To discuss activities related to methodologies for transmission and evaluation of confidential grant information, including demonstrations using live data.

Place: The Hyatt Regency Hotel, One Bethesda Metro Center, Bethesda, MD 20892.

Contact Person: Dr. Marvin R. Kalt, Executive Secretary, National Cancer Institute, NIH, Executive Blvd., MSC 7405, Bethesda, MD 20892-7405, (301) 496-5147.

Name of Committee: National Cancer Advisory Board.

Dates: September 23-24, 1999.

Open: September 23, 9:00 a.m. to 3:30 p.m.; September 24, 9:00 to 11:15 a.m.

Agenda: Program reports and presentations; business of the Board. For detailed agenda: See NCI Homepage/Advisory Board and Groups, <http://deainfor/nci.nih.gov/ADVISORY/boards.htm>; Tentative agenda available 10 working days prior to meetings; Final agenda available 5 working days prior to meetings.

Closed: September 23, 3:45 p.m. to Recess.

Agenda: To review and evaluate grant applications.

Place: Building 31C, Conference Room 10, National Institutes of Health, 3100 Center Drive, Bethesda, MD 20892.

Contact Person: Dr. Marvin R. Kalt, Executive Secretary, National Cancer Institute, National Institutes of Health, Executive Plaza North, Suite 600, 6130 Executive Boulevard, Rockville, MD 20892, (301) 496-5147.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated August 31, 1990.

LaVerne Y. Stringfield,

Committee Management Officer, NIH.

[FR Doc. 99-23562 Filed 9-9-99; 8:45 am]

BILLING CODE 4140-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of 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 meeting.

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

Name of Committee: National Cancer Institute Special Emphasis Panel, Mouse Models of Human Cancers Consortium.

Date: September 15-17, 1999.

Time: 7:00 pm to 6:00 pm.

Agenda: To review and evaluate grant applications.

Place: Gaithersburg Hilton, 620 Perry Parkway, Gaithersburg, MD 20877.

Contact Person: Ray Bramhall, PhD, Scientific Review Administrator, Special Review, Referral and Resources Branch, Division of Extramural Activities, National Cancer Institute, National Institutes of Health, 6130 Executive Blvd, Rockville, MD 20892, (301) 496-3428.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: August 31, 1999.

LaVerne J. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 99-23563 Filed 9-9-99; 8:45 am]

BILLING CODE 4140-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Eye Institute; Notice of 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 a meeting of the National Advisory Eye Council.

The meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other