

Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards; Attention: Dawn Willingham, Room N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: October 6, 1999.

John Parmigiani,

Manager, HCFA Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-R-5]

Agency Information Collection

Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing Administration, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: Extension of a currently approved collection;

Title of Information Collection: Physician Certifications/Recertifications in Skilled Nursing Facilities (SNFs) Manual Instructions and Supporting Regulations in 42 CFR 424.20;

Form No.: HCFA-R-5 (OMB #0938-0454);

Use: The Medicare program requires as a condition for Medicare Part A payment for post-hospital skilled nursing facility (SNF) services, that a physician must certify and periodically recertify that a beneficiary requires a SNF level of care. The physician certification and recertification is intended to ensure that the beneficiary's need for services has been established and then reviewed and updated at appropriate intervals. The documentation is a condition for Medicare Part A payment for post-hospital SNF care.;

Frequency: On occasion;

Affected Public: State, Local or Tribal Government, individuals or households, business or other for-profit, and not-for-profit institutions;

Number of Respondents: 2,038,248;

Total Annual Responses: 947,816;

Total Annual Hours: 417,239.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access HCFA's Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or E-mail your request, including your address, phone number, OMB number, and HCFA document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards; Attention: Dawn Willingham, Room N2-14-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: October 5, 1999.

John Parmigiani,
Manager, HCFA Office of Information Services, Security and Standards Group, Division of HCFA Enterprise Standards.
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCFA-1091-N]

Medicare Program; Open Public Meeting on November 1, 1999 To Discuss Activities Related to the Collection of Encounter Data From Medicare+Choice Organizations for Risk Adjustment

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

ACTION: Notice of meeting.

SUMMARY: This notice announces a public meeting to provide Medicare+Choice Organizations (M+COs), providers, practitioners, and other interested parties an opportunity to ask questions and raise issues regarding encounter data collection for risk adjustment. The meeting will address the following topics:

- Collection of physician encounter data.
- Collection of hospital outpatient encounter data.
- Training and customer support services.

DATES: The meeting is scheduled for November 1, 1999 from 9 a.m. until 4 p.m., e.s.t.

ADDRESSES: The meeting will be held in the HCFA Auditorium, 7500 Security Boulevard, Baltimore, Maryland, 21244-1850.

FOR FURTHER INFORMATION CONTACT: Yvette Cooper-Williams, (410) 786-5644, ycooper@hcfa.gov.

SUPPLEMENTARY INFORMATION:

Background

The Balanced Budget Act of 1997 (BBA) (Public Law 105-33) established the Medicare+Choice program that significantly expanded the health care options available to Medicare beneficiaries. Under the BBA, the Secretary of the Department of Health and Human Services (the Secretary) must implement a risk adjustment methodology that accounts for variations in per capita costs based on health status and other demographic factors for payment to Medicare+Choice organizations (M+COs). Risk adjustment implementation must start no later than January 1, 2000. The BBA also gives the Secretary the authority to collect inpatient hospital data for discharges on or after July 1, 1997, and additional data for services occurring on or after July 1, 1998. The schedule for encounter data submission through June 30, 2001 is as follows:

- September 10, 1999: Deadline for submission of Year 2 data (dates of