

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.
[FR Doc. 99-26997 Filed 10-14-99; 8:45 am]

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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

service July 1, 1998 through June 30, 1999) for CY 2000 payment.

- June 30, 2000: Deadline for submission of Year 2 data for purposes of final reconciliation of CY 2000 payments. Last date of service that will be accepted in abbreviated UB-92 format.

- September 8, 2000: Deadline for submission of Year 3 data (dates of service July 1, 1999 through June 30, 2000) for CY 2001 payment.

- October 1, 2000: Submission of physician data begins.

- December 31, 2000: Last date to submit abbreviated UB-92 (with dates of service not later than June 30, 2000).

- January 1, 2001: Submission of hospital outpatient data begins, with dates of services retroactive to October 1, 2000.

- January 30, 2001: Reconciliation of CY 2000 payments to include all Year 2 data submitted by June 30, 2000.

We have decided to implement a transition to comprehensive risk adjustment. The principal inpatient diagnostic cost group (PIP-DCG) model will be used in initial risk adjustment and a comprehensive risk adjustment model using diagnoses from physician, hospital outpatient, and physician encounters will be implemented in CY 2004. The transition schedule (as stated in the January 15, 1999 advance notice to M+COs) to the comprehensive model is as follows:

- CY 2000: 90 percent demographic model with 10 percent PIP-DCG method.

- CY 2001: 70 percent demographic model with 30 percent PIP-DCG method.

- CY 2002: 45 percent demographic model with 55 percent PIP-DCG method.

- CY 2003: 20 percent demographic model with 80 percent PIP-DCG method.

- CY 2004: 100 percent comprehensive risk adjustment (using full encounter data).

We are announcing a public meeting to provide an opportunity for M+COs, providers, practitioners, and other interested parties to ask questions and raise issues regarding encounter data collection for risk adjustment from M+COs. We intend to discuss our data collection efforts, systems processes, training approach, and customer services in order to provide information related to the implementation of the collection of additional encounter data.

We are announcing this public meeting to provide an opportunity for individuals and organizations familiar with issues related to physician and hospital outpatient data collection to

furnish information and raise issues pertaining to future encounter data collection for risk adjustment. The agenda will include short presentations by HCFA staff on related topics and will conclude with a question-and-answer session.

Registration

Registration for this one-day public meeting is required and will be on a first-come, first-serve basis, limited to two attendees per organization. A waiting list will be available for additional requests. Registration will be done via the Internet at www.hcfa.gov/ events or by paper forms available at the aforementioned Internet address. A confirmation notice will be sent to attendees upon finalization of registration.

Attendees will be provided with meeting materials at the time of the meeting. We will accept written questions or requests for meeting materials either before the meeting or up to 14 days after the meeting. Written submissions must be sent to: Health Care Financing Administration, ATTN: Yvette Cooper-Williams, Room C4-14-21, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

You may contact Yvette Cooper-Williams at: Telephone Number: (410) 786-5644, Fax Number (410) 786-1048, E-mail: ycooper@hcfa.gov.

Authority: Sections 1851 through 1859 of the Social Security Act (42 U.S.C. 1395w-21 through 1395w-28).

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

Dated: October 12, 1999.

Michael M. Hash,

Deputy Administrator, Health Care Financing Administration.

[FR Doc. 99-27027 Filed 10-14-99; 8:45 am]

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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 Board of Scientific Counselors, National Cancer Institute.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(6), and 552b(c)(9)(B), Title 5

U.S.C., as amended. The discussions could reveal information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy and the premature disclosure of discussions related to personnel and programmatic issues would be likely to significantly frustrate the subsequent implementation of recommendations.

Name of Committee: Board of Scientific Counselors, National Cancer Institute Subcommittee A—Clinical Sciences and Epidemiology.

Date: November 15, 1999.

Time: 8:30 am to 4:00 pm.

Agenda: To review and evaluate Site Visit Reports; Discussion of personnel and programmatic issues.

Place: National Cancer Institute, Building 31, C Wing, 6th Floor, Conference Room 6, 9000 Rockville Pike, Bethesda, MD 20892.

Contact Person: Maureen Johnson, PhD., Executive Secretary, Institute Review Office, Office of the Director, National Cancer Institute, National Institutes of Health, 6116 Executive Boulevard, Room 321, Bethesda, MD 20892, (301) 496-7628.

(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: October 7, 1999.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Policy.

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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 Board of Scientific Counselors, National Cancer Institute.

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