

**DEPARTMENT OF COMMERCE****National Oceanic and Atmospheric Administration**

[110700A]

**Submission for OMB Review; Comment Request**

**AGENCY:** National Oceanic and Atmospheric Administration (NOAA), Commerce.

**ACTION:** At-Sea Scale Certification Program.

**SUPPLEMENTARY INFORMATION:** The Department of Commerce has submitted to the Office of Management and Budget (OMB) for clearance the following proposal for collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*Form Number(s):* None.

*OMB Approval Number:* 0648-0330.

*Type of Request:* Regular submission.

*Burden Hours:* 3,508.

*Number of Respondents:* 49.

*Average Hours Per Response:* 45 minutes for a daily scale test, 6 minutes per day to retain printed scale output, 6 minutes to request a scale inspection, 6 minutes to attach a scale approval sticker, 6 minutes for an application for authority to inspect scales, 2 hours for a request for an observer station inspection, and 30-190 hours for scale type evaluations.

*Needs and Uses:* Fishermen on certain Federally-regulated fisheries off Alaska must weigh their catch at sea on approved scales. Vessels must request inspection of scales and observer stations, test their scales daily, and maintain output from the scales. Related information collection requirements are requests from scale manufacturers to have their scale approved, and requests from non-NOAA scale inspectors to have authority to conduct scale inspections.

*Affected Public:* Business and other for-profit organizations.

*Frequency:* Daily, annually, and on occasion.

*Respondent's Obligation:* Mandatory.

*OMB Desk Officer:* David Rostker, (202) 395-3897.

Copies of the above information collection proposal can be obtained by calling or writing Madeleine Clayton, DOC Forms Clearance Officer, (202) 482-3129, Department of Commerce, Room 6086, 14th and Constitution Avenue, NW, Washington, DC 20230 (or via the Internet at MClayton@doc.gov).

Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this

notice to David Rostker, OMB Desk Officer, Room 10202, New Executive Office Building, Washington, DC 20503.

Dated: November 3, 2000.

**Gwellnar Banks,**

*Management Analyst, Office of the Chief Information Officer.*

[FR Doc. 00-28952 Filed 11-9-00; 8:45 am]

**BILLING CODE:** 3510-22 -S

**DEPARTMENT OF DEFENSE****Office of the Secretary****Civilian Health and Medical Program of the Uniformed Services (CHAMPUS); Fiscal Year 2001 Diagnosis Related Group (DRG) Updates**

**AGENCY:** Office of the Secretary, DoD.

**ACTION:** Notice of DRG revised rates.

**SUMMARY:** This notice describes the changes made to the TRICARE/CHAMPUS DRG-based payment system in order to conform to changes made to the Medicare Prospective Payment System (PPS).

It also provides the updated fixed loss cost outlier threshold, cost-to-charge ratios and the Internet address for accessing the updated adjusted standardized amounts, DRG relative weights, and beneficiary cost-share per diem rates to be used for FY 2001 under the TRICARE/CHAMPUS DRG-based payment system.

**EFFECTIVE DATES:** The rates, weights and Medicare PPS changes which affect the TRICARE/CHAMPUS DRG-based payment system contained in this notice are effective for admissions occurring on or after October 1, 2000.

**ADDRESSES:** TRICARE Management Activity (TMA), Medical Benefits and Reimbursement Systems, 16401 East Centretech Parkway, Aurora, CO 80011-9043. For copies of the **Federal Register** containing this notice, contact the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402, (202) 783-3238. The charge for the **Federal Register** is \$1.50 for each issue payable by check or money order to the Superintendent of Documents.

**FOR FURTHER INFORMATION CONTACT:** Marty Maxey, Medical Benefits and Reimbursement Systems, TMA, telephone (303) 676-3627.

To obtain copies of this document, see the **ADDRESSES** section above. Questions regarding payment of specific claims under the TRICARE/CHAMPUS DRG-based payment system should be addressed to the appropriate contractor.

**SUPPLEMENTARY INFORMATION:** The final rule published on September 1, 1987 (52 FR 32992) set forth the basic procedures used under the CHAMPUS DRG-based payment system. This was subsequently amended by final rules published August 31, 1988 (53 FR 33461), October 21, 1988 (53 FR 41331), December 16, 1988 (53 FR 50515), May 30, 1990 (55 FR 21863), October 22, 1990 (55 FR 42560), and September 10, 1998 (63 FR 48439).

An explicit tenet of these final rules, and one based on the statute authorizing the use of DRGs by TRICARE/CHAMPUS, is that the TRICARE/CHAMPUS DRG-based payment system is modeled on the Medicare PPS, and that, whenever practicable, the TRICARE/CHAMPUS system will follow the same rules that apply to the Medicare PPS. HCFA publishes these changes annually in the **Federal Register** and discusses in detail the impact of the changes.

In addition, this notice updates the rates and weights in accordance with our previous final rules. The actual changes we are making, along with a description of their relationship to the Medicare PPS, are detailed below.

**I. Medicare PPS Changes Which Affect the TRICARE/CHAMPUS DRG-Based Payment System**

Following is a discussion of the changes the Health Care Financing Administration (HCFA) has made to the Medicare PPS that affect the TRICARE/CHAMPUS DRG-based payment system.

**A. DRG Classifications**

Under both the Medicare PPS and the TRICARE/CHAMPUS DRG-based payment system, cases are classified into the appropriate DRG by a Grouper program. The Grouper classifies each case into a DRG on the basis of the diagnosis and procedure codes and demographic information (that is, sex, age, and discharge status). The Grouper used for the TRICARE/CHAMPUS DRG-based payment system is the same as the current Medicare Grouper with two modifications. The TRICARE/CHAMPUS system has replaced Medicare DRG 435 with two age-based DRGs (900 and 901), and has implemented thirty-four (34) neonatal DRGs in place of Medicare DRGs 385 through 390. For admissions occurring on or after October 1, 1995, the CHAMPUS grouper hierarchy logic was changed so the age split (age <29 days) and assignments to MDC 15 occur before assignment of the PreMDC DRGs. This resulted in all neonate tracheostomies and organ transplants to be grouped to MDC 15 and not to DRGs

480-483 or 495. For admissions occurring on or after October 1, 1998, the CHAMPUS grouper hierarchy logic was changed to move DRG 103 to the PreMDC DRGs and to assign patients to PreMDC DRGs 480, 103 and 495 before assignment to MDC 15 DRGs and the neonatal DRGs.

For FY 2001, HCFA will implement classification changes, including surgical hierarchy changes. The CHAMPUS Grouper will incorporate all changes made to the Medicare Grouper.

*B. Wage Index and Medicare Geographic Classification Review Board Guidelines*

TRICARE/CHAMPUS will continue to use the same wage index amounts used for the Medicare PPS. In addition, TRICARE/CHAMPUS will duplicate all changes with regard to the wage index for specific hospitals that are redesignated by the Medicare Geographic Classification Review Board.

*C. Hospital Market Basket*

TRICARE/CHAMPUS will update the adjusted standardized amounts according to the final updated hospital market basket used for the Medicare PPS according to HCFA's August 1, 2000, final rule.

*D. Outlier Payments*

Since TRICARE/CHAMPUS does not include capital payments in our DRG-based payments, we will use the fixed loss cost outlier threshold calculated by HCFA for paying cost outliers in the absence of capital prospective payments. For FY 2001, the fixed loss cost outlier threshold is based on the sum of the applicable DRG-based payment rate plus any amounts payable for IDME plus a fixed dollar amount. Thus, for FY 2001, in order for a case to qualify for cost outlier payments, the costs must exceed the TRICARE/CHAMPUS DRG base payment rate (wage adjusted) for the DRG plus the IDME payment plus \$16,036 (wage adjusted). The marginal cost factor for cost outliers continues to be 80 percent.

*Blood Clotting Factor*

For FY 2001, TRICARE/CHAMPUS will use the following HCPCS codes and payment rates for blood clotting factors:

	Per unit
J7190 Factor VIII (antihemophilic factor—human) .....	\$0.85
J7191 Factor VIII (antihemophilic factor—porcine) .....	2.09
J7192 Factor VIII (antihemophilic factor—recombinant) .....	1.12
J7194 Factor IX (complex) .....	0.31
J7198 Anti-inhibitor .....	1.43

	Per unit
Q0160 Factor IX (antihemophilic factor, purified, Non-recombinant) .....	1.05
Q0161 Factor IX (antihemophilic factor, recombinant) .....	1.12

**Indirect Medical Education (IDME) Adjustment**

The Balanced Budget Refinement Act of 1999, modified the transition for the IDME adjustment that was established by the Balanced Budget Act of 1997.

The new multiplier for the IDME adjustment factor for TRICARE/CHAMPUS for FY 2001 is 1.16.

**II. Cost to Charge Ratio**

For FY 2001, the cost-to-charge ratio used for the TRICARE/CHAMPUS DRG-based payment system will be 0.5353, which is increased to 0.5408 to account for bad debts. This shall be used to calculate the adjusted standardized amounts and to calculate cost outlier payments, except for children's hospitals. For children's hospital cost outliers, the cost-to-charge ratio used is 0.5913.

**III. Updated Rates and Weights**

The updated rates and weights are accessible through the Internet at [www.tricare.osd.mil](http://www.tricare.osd.mil) under the heading TRICARE Provider Information. Table 1 provides the ASA rates and Table 2 provides the DRG weights to be used under the TRICARE/CHAMPUS DRG-based payment system during FY 2001 and which is a result of the changes described above. The implementing regulations for the TRICARE/CHAMPUS DRG-based payment system are in 32 CFR part 199.

Dated: November 6, 2000.

**L.M. Bynum,**

*Alternate OSD Federal Register, Liaison Officer, Department of Defense.*

[FR Doc. 00-28866 Filed 11-9-00; 8:45 am]

**BILLING CODE 5001-10-M**

**DEPARTMENT OF DEFENSE**

**Office of the Secretary**

**Renewal of the Planning and Steering Advisory Committee (Navy)**

**ACTION:** Notice.

**SUMMARY:** The Planning and Steering Advisory Committee (PSAC) has been renewed in consonance with the public interest, and in accordance with the provisions of Public Law 92-463, the "Federal Advisory Committee Act."

The PSAC provides an avenue of communications by which a distinguished group representing scientific, academic engineering, and intelligence communities advises the Chief of Naval Operations on questions related to SSBN Security. Their mission is to make in-depth technical assessments of U.S. and foreign threat ASW developments and related technologies, to critically review programs which potentially impact SSBN survivability, and to evaluate intelligence efforts to identify and define ASW and SSBN survivability threats.

The Committee will continue to be composed of selected Group members to conduct detailed examinations of matters related to SSBN security.

**FOR FURTHER INFORMATION CONTACT:** Please contact Laura Wurzer, telephone: 301-693-0934.

Dated: November 6, 2000.

**L.M. Bynum,**

*Alternate OSD Federal Register Liaison Officer, Department of Defense.*

[FR Doc. 00-28863 Filed 11-9-00; 8:45 am]

**BILLING CODE 5001-10-M**

**DEPARTMENT OF DEFENSE**

**Office of the Secretary**

**Renewal of the Telecommunications Service Priority System Oversight Committee (TSPOC)**

**ACTION:** Notice.

**SUMMARY:** The TSPOC has been renewed in consonance with the public interest, and in accordance with the provisions of Pub. L. 92-463, the "Federal Advisory Committee Act."

The TSPOC provides advice and recommendations to the Secretary of Defense regarding the priority treatment of national security and emergency preparedness telecommunications services. Functions include evaluating the currency of policies, procedures and system documentation requirements, and assessing the adequacy of the system in the light of technological advances.

The TSPOC will continue to be composed of 18 members, both federal, state and local government, and non-government individuals, who are experts in telecommunications services. Efforts will be made to ensure that there is a fairly balanced membership in terms of the functions to be performed and the interest groups represented.

**FOR FURTHER INFORMATION CONTACT:** Ms. Debbie Bea, National Communications